**Research Report:**

**How the Red Cross and Red Crescent Movement prepared for and responded to the 2015-2017 drought in East Africa**

**Supported by the British Red Cross Society**

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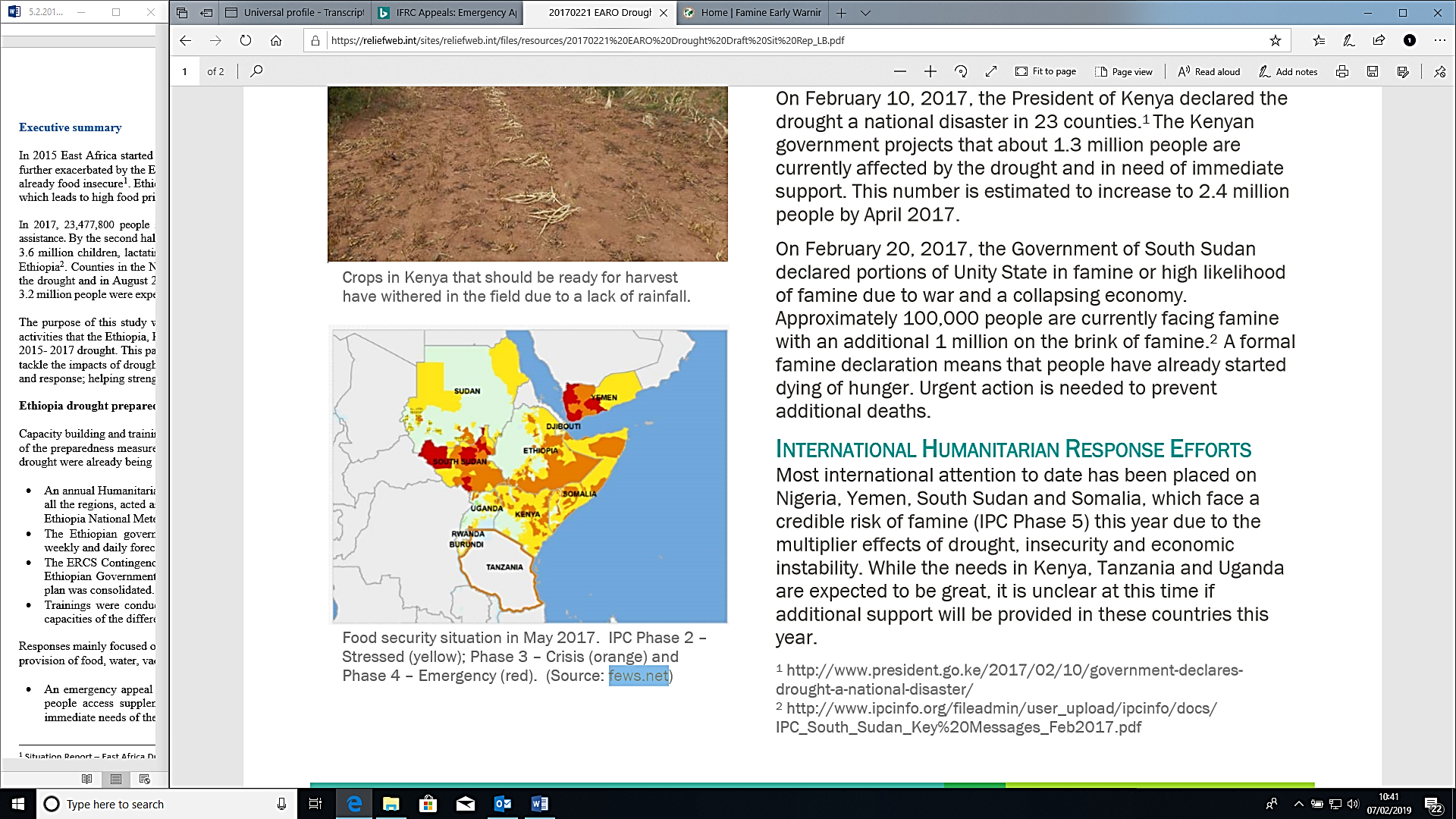
# List of Acronyms

|  |  |
| --- | --- |
| ARC | American Red Cross Society |
| AWD | Acute Watery Diarrhea |
| BRC | British Red Cross Society |
| CBO | Community Based Organisations |
| CBHFA | Community Based Health and First Aid |
| CFA | Cash for Assets |
| CRS | Canadian Red Cross |
| CSG | County Steering Group |
| CTP | Cash Transfer Programming |
| DRC | Danish Red Cross |
| DREF | Disaster Emergency Relief Fund |
| DFID | Department for International Development |
| DRM | Disaster Risk Management |
| DM | Disaster Management |
| ECHO | European Civil Protection and Humanitarian Aid Operations |
| ERCS | Ethiopia Red Cross Society |
| FACT | Food and Agriculture Organization of the United Nations |
| FFA | Food for Assets |
| GRC | German Red Cross Society |
| GoE | Government of Ethiopia |
| GoK | Government of Kenya |
| HeOPs | Head of Operations |
| HH | Household |
| HRD | Human Requirement Document |
| ICRC | International Committee of the Red Cross |
| IEC | Information, Education and Communication materials |
| IFRC | International Federation of the Red Cross and Red Crescent Societies |
| KRCS | Kenya Red Cross Society |
| MNCH | Maternal, Newborn and Child Health |
| NDMA | National Disaster Management Authority |
| NFIs | Non-Food Items |
| PHAST | Participatory Hygiene and Sanitary Transformation |
| PNS | Partner National Society |
| RCAT | Red Cross Action Team |
| RCRC | Red Cross Red Crescent Movement |
| SAM | Severe Acute Malnutrition |
| SRCS | Somalia Red Crescent Society |
| UNICEF | United Nations International Children’s Emergency Fund |
| UNOCHA | United Nations Office for the Coordination of Humanitarian Affairs |
| WASH | Water, Sanitation and Hygiene |
| WFP | World Food Program |
| WHO | World Health Organisation |

# Executivesummary

In 2015 East Africa started experiencing food shortages due to delayed and erratic rains. It was further exacerbated by the El Nino phenomenon, which increased the number of people who were already food insecure[[1]](#footnote-1). Ethiopia, Somalia and Kenya experience drought around every five years, which leads to high food prices, resource conflict, disease outbreak and displacement.

In 2017, 23,477,800 people in Kenya, Ethiopia, Somalia and South Sudan needed emergency food assistance (Fig. 1). By the second half of 2017, 8.5 million people required emergency food assistance and 3.6 million children, lactating mothers and pregnant women required supplementary feeding in Ethiopia[[2]](#footnote-2). Counties in the North and Southeast region of Kenya were experiencing the effects of the drought and in August 2016[[3]](#footnote-3), 2.6 million people needed humanitarian assistance. In Somalia, 3.2 million people were experiencing food insecurity with a global acute malnutrition of 15 – 30%[[4]](#footnote-4).



**Figure 1.** Food security situation, May 2017. IPC Phase 2 – Stressed (yellow); Phase 3 – Crisis (orange) and Phase 4 – Emergency (red)

The purpose of this study was to gain a better understanding of the preparedness and response activities that the Ethiopia, Kenya Red Cross and the Somalia Red Crescent undertook during the 2015- 2017 drought. This paper looks at the success and failures of the initiatives in East Africa to tackle the impacts of drought and how key insights could be used to improve future preparedness and response; helping strengthen long term programming in these three countries.

**Ethiopia drought preparedness and response:**

Capacity building and training from other Red Cross societies and contingency plans formed most of the preparedness measures in Ethiopia, however these were implemented when impacts of the drought were already being felt.

* An annual Humanitarian Requirements Document (HRD)[[5]](#footnote-5), compiling humanitarian needs in all the regions, acted as a contingency plan and was mainly based on the forecast shared by Ethiopia National Meteorological Agency.
* The Ethiopian government and humanitarian organizations used *downscaled* seasonal, weekly and daily forecast to undertake situation analysis
* The ERCS Contingency Plan was updated using the findings from assessment done by the Ethiopian Government and Ethiopia Humanitarian Team and a national drought response plan was consolidated.
* Trainings were conducted by the International Committee the Red Cross (ICRC), Finnish and Swiss Red Cross to strengthen the capacities of the different Ethiopian response teams.

Responses mainly focused on short-term actions, which were usually lifesaving assistance such as provision of food, water, vaccinations, provision of essential shelter and non-food items.

* An emergency appeal was launched in December 2015 - January 2018 to support 35,371 people access supplementary food, basic healthcare and livelihoods assistance to meet immediate needs of the targeted population in Afar; Bidu Woreda[[6]](#footnote-6).
* The ERCS National Drought Response plan was consolidated in February 2016. In June 2016, the appeal was revised increasing the budget to CHF 2,773,566 to support supplementary feeding for additional 30,000 children under-five years and pregnant/lactating women, feeding livestock, reseeding pasture and Water, Sanitation and Hygiene (WASH) and CBHFA. The appeal was revised in March 2017 to assist 318,325 people.
* A bilateral drought response was led by the Canadian Red Cross in 2017, with ERCS and BRC (CHF 491,490 budget). The response targeted 28,846 people and included water trucking, basic hygiene promotion and supplementary feeding in Kindo Koysha *Woreda.*

**Kenya drought preparedness and response:**

* After forecasting possible failed rains in 2015, a contingency plan was developed by the KRCS[[7]](#footnote-7); monitoring alerts from NDMA and KMD; boosting sanitation and water wells in all Arid and Semi-Arid Land (ASAL) counties; logistics preparations for cash transfers and mobilization of KRCS staff and volunteers to be part of Red Cross Action Team (RCAT).
* Following failed rains in October-December 2015, Kenya Food Security Steering Group (KFSSG) studied the food security situation and identified vulnerable counties and recommended a provision of CHF 143.5 million to improve food security
* KRCS branches in ASALs, developed county contingency plans in partnership with county governments in preparation for the forecasted drought. Maternal, Newborn and Child Health (MNCH) and Monitoring and Evaluation groups to monitor the situation on the ground.
* Disaster Management Strengthening project funded by BRC, three counties (Tana River, Isiolo and Turkana) prone to drought, RCAT responsible for responding to disaster were trained in Cash Transfer Programming (CTP) and livestock management.

In 2011, KRCS main response was food relief, but by 2015-2017, there was a notable and effective shift towards resilience programming, WASH interventions and Cash Transfers.

* In 2015, KRCS implemented Protracted Relief Recovery and Operation (PRRO) in six counties reached 325, 200 beneficiaries. Activities were food distributions, food for assets, cash for assets and supplementary feeding programs. In addition, capacity development in CTP was undertaken through staff training and vulnerability assessments.
* The first contingency plan on flood, drought, conflict and epidemic preparedness and response was developed in 2015 and interventions were rolled out on health and nutrition, cash transfer and school feeding that assisted 649,175 people in Baringo, Turkana
* In 2016, 1.3 million people were food insecure and KRCS drought appeal targeted 5 counties. KRCS undertook direct CTP, livestock destocking programme, conditional food vouchers, nutrition outreaches and rehabilitation of communal watering points.
* In 2017, KRCS launched CHF 9,651,500 appeal to support at least 340,786 people out of the 2.7 million drought-affected Kenyans, but it was already reaching 402,612 people with its resilience intervention projects (CHF 6,274,586 DRM budget). WASH activities reached 721,067 people in 2017 and the whole program reached 1,002,048 people
* KRCS ran a project with the FAO, (CHF 694,908 budget) to support livestock off take, vaccinations and animal feed distribution. KRCS and WFP reached over 1.2 million people with food donations and cash transfers.
* ICRC mobilized additional resources of approximately CHF 1,000,000 towards the drought response. Through its EcoSec project in Lamu and Tana Delta, ICRC assisted 55,303 people with in food rations and unconditional cash grants.

**Somalia drought preparedness and response:**

* September 2013-2015; the PNS funded Disaster Risk Reduction activities to build the capacity of the SRCS at national, regional and local level
* March 2016; The Federal Government of Somalia and partners developed an El Nino contingency plan for preparedness and immediate response. The humanitarian community, led by OCHA, also developed a comprehensive El Niño Contingency Plan
* ICRC had emergency stocks in field sites throughout the country, a network of transporters and financial service providers in place to respond and helped mobilize SRCS teams
* In 2015 the ICRC, German and Swedish Red Cross, and Qatari, Iranian and Emirates Red Crescent, worked with SRCS on rehabilitation of health centers, provision of health support, food and therapeutic feeding, CASH and building resilience through farming.
* In 2016, the IFRC supported SRCS to implement health programmes, including and static clinics and 30 mobile clinics with community outreach teams.
* The ICRC supported the SRCS with Restoring Family Links and tracing activities for families who were displaced due to the drought and resource-based conflicts
* In February 2016 the GRC supported the SRCS to implement an ECHO funded program that reached 28,810 HH, providing safe and clean water for consumption and cash transfers.
* The SRCS, through the Emergency Appeal in March 2016, assisted 78,990 people; improving health, nutrition, food security and access to safe water through mobile CTP, deployment of mobile clinics, rehabilitation of boreholes and *berkeds*, and ceramic water filters and training of community health volunteers.
* The appeal was revised in March 2017 and extended by 10 months for CHF 3,308,035 to assist 150,000 people. Focusing on: health; WASH; livelihoods, nutrition, food security and shelter (including household non-food items).
* In 2017 ICRC reached 761,772 people during the drought emergency response, with WASH, CASH, food rations, borehole construction and medical care

**Main findings**

* Compared to the drought in 2010/11, there was improved coordination between national governments and the humanitarian community
* In Ethiopia, theconsortium approach was successfully implemented, as external partners coordinated, helped with assessments, pooled resources and shared information; leading to minimal duplication.
* Improved early warning systems and information dissemination including forecasts, food and forage situation helped very much in the preparedness and response plans.
* Kenya’s strengthened forecasting and proactive resilience building proved…
* Cash transfer programming was successful… especially in Kenya and Somalia.
* In Somalia the cluster coordination worked well at the ‘meetings level’, but not at the operational level. This is mainly due to many clusters’ supporting local partners, which were often lacking the necessary capacities and accountability, including the funding delays.
* while consortiums and cluster coordination proved to have worked very well in Ethiopia and Somalia.
* The SCRS Emergency Appeal in Somalia was effective, as the number of people and children treated for drought related diseases was low compared to 2010/2011 drought.
* Appeals made through IFRC helped strengthening responses and created an environment that encouraged bilateral linkages which have proven to be effective especially in resource mobilization and capacity building.

**Key lessons identified**

* Governments were slow at declaring emergencies and NS struggled to galvanize support in the absence of an official emergence warning. The KRCS started responding to the drought 4 months before the government declared a national disaster, however the Ethiopian government lacked the capacity to respond to the drought and subsequently caused delays in humanitarian appeals and fund-raising initiatives
* The RCRC movement did consider the lessons from the 2010/2010 drought, though it did not generally translate into early action especially responding based on the forecast.
* Lack of information sharing within the humanitarian sector, especially in Kenya led to duplication of interventions,

**Recommendations**

* National Societies (NS) should ensure through continuous **lobbying and engagement**, the government is at the center of drought management as well as the resilience agenda and provide centrifugal force to all other actors in this sector.
* National Societies need to invest more in **Forecast-based Action** and **Forecast-based Financing** in addressing drought in this region, since weather and climate forecasts have become more reliable, skillful and widely available at global, regional and national level.
* NS need to strengthen preparedness and response to drought through **cash transfers**. NS can help scale up cash transfers to reduce or manage human and economic losses because of drought through the delivering of cash before disaster as a **social protection measure**.
* The NS can also adopt technologies that will enhance their response such as the use of **Blockchain technology** in Cash Transfers.
* Better preparedness and response to drought can be scaled-up using **technology and innovation** for enhanced socio-economic well-being of vulnerable populations. NS (NS) can leverage on their young volunteer network and local community presence in identifying innovative solutions to impacts of drought.
* RCRC may need to adopt **insurance schemes** as an intervention in drought preparedness and response.
* Since drought is a recurring disaster is this region, NS should invest in establishing an **emergency funds and stocks** in the drought prone areas to ensure timely response in times of need.

# 1. Introduction

## 1.1 The 2015-2017 Drought

In Eastern Africa, droughts have increased in frequency and impact for over four decades. Since 1971, droughts have affected over 151 million people in Eastern Africa and more that 91 million people (58%) of those affected, were from 2000-2015[[8]](#footnote-8). In 2015, Eastern Africa experienced one of the strongest El-Nino events on record, resulting in severe drought through 2016. In most parts of the region, this was followed by the failed rains of October to December 2016 season.

It is important to note that the failed rains of October-December 2016 were followed by a below normal rainfall in March – May 2017. The shortened and erratic rainfalls experienced mainly due to the dual phenomena of El Nino in 2015 and ensuing La Nina, resulted in most of the East Africa countries experiencing IPC Phase 3 (Crisis) conditions by May 2017[[9]](#footnote-9).

In Ethiopia, the effects of the 2015/16 El-Nino-induced drought were devastating. About 50-90% of crop production was lost, farmers’ incomes dwindled, and food insecurity soared[[10]](#footnote-10). This was followed by below average 2016 autumn rains in the south and southeast, leading to new drought in lowland pastoralist and impoverished areas. The 2017 Ethiopian food and nutrition crisis (Figure 2[[11]](#footnote-11),[[12]](#footnote-12),[[13]](#footnote-13)) was linked to the collapse of pastoral livelihoods and a failure to invest sufficiently in local food production from the onset of the crisis.

In Kenya, the 2016 October-December rains failed, resulting in northwest and southeast counties experiencing severe drought[[14]](#footnote-14); impacting water resources, causing widespread crop failures and declining trade for pastoralists[[15]](#footnote-15). The Government of Kenya’s declared a national disaster on 10th February 2017 and followed with the release of the short rains assessment (SRA), conducted in the affected counties by the Kenya Food Security and Steering Group (KFSSG).

Drought significantly impacted the two main rainy seasons in 2016 (March-May and Oct-Dec) and brought severely low rainfall levels. Subsequently, there was widespread crop failure, acute water shortages, declining trade for pastoralists and declining animal productivity, which had a devastating impact on food security and nutrition conditions and exhausted people’s capacity to cope with another shock. There were also increasing reports of disease outbreaks and conflict because of displacement and water shortages. The SRA confirmed the number of people in need of humanitarian assistance (Fig. 3[[16]](#footnote-16)) and of the 2.7 million affected in April 2017, 2.2 million were facing food security crisis (IPC Phase 3). Impact of the drought lasted into early 2018.

In Somalia, the 2015-2016 El Nino severely impacted vulnerable people and worsened an already widespread drought in Puntland and Somaliland. It had a devastating effect on communities and their livelihoods; increasing food insecurity, cash shortages and resulting in out-migration and death of livestock. This was further experienced in Jubaland in the south. Somaliland and Puntland had experienced below average rains for four seasons, over two years; affecting 1.4 million people[[17]](#footnote-17). By June 2017, 3.2 million people were severely food insecure with a Global Acute Malnutrition of 15%-30%.[[18]](#footnote-18) Food insecurity nearly doubled due to three consecutive poor seasons throughout May 2018. However, sustained humanitarian assistance prevented more extreme outcomes in many areas. Despite this, persistent on-going drought threatens recovery.[[19]](#footnote-19)

# 2. Purpose and scope of the research

The Red Cross and Red Crescent Societies (RCRC) have played a significant role in responding to drought emergencies in East Africa, reaching millions of people with humanitarian assistance. However, this has taken place primarily in a fragmented way, with country-level operations being planned and delivered in isolation. Thus, there is not currently a widely shared understanding of what is working effectively on drought preparedness and response.

British Red Cross Society (BRC) commissioned this research with the purpose of gaining a better understanding on how the RCRC Movement prepares for and responds to drought in Kenya, Somali and Ethiopia, their successes and failures, and to use the findings to improve future preparedness and response. Focus was also given on the extent to which the drought operations have taken onboard learning from the last major crisis in 2010/2011. The research sought to investigate long-term programming and resilience building initiatives that have a positive impact on drought-affected communities and how they can be duplicated in other African regions.

The research findings will be used to enhance understanding within the RCRC Movement; develop strategies and guidelines for future drought response programming and use the evidence generated to influence policies with the region.

## 3.Methodology

## 3.1 Research Approach

Drought preparedness and response data were collected and analyzed, and qualitative research techniques were used (Key Informant Interviews; KIIs) to examine drought interventions in Ethiopia, Kenya and Somalia. Emphasis was given to drought response by RCRC Movement within these countries, with learnings from other key actors in the region where applicable. A comparison study across the interventions was carried out to identify the main variations between the different response operations. Purposive sampling of the 2015-2017 drought interventions by key humanitarian actors was undertaken[[20]](#footnote-20). This approach was used to reach target sample quickly and efficiently, and from those selected for interviews, generalizations could be drawn about the wider response in the RCRC Movement.

## 3.2 Data collection and implementation strategy

A team of a Research Lead and two Research Assistants collected data, analysis and report writing. The Research Team was supported by a Research Steering group from BRC, IFRC, ICRC and Spanish Red Cross. For consistency, all KIIs were conducted by the Research Team.

## 3.3 Data collection methods and tools

The following participatory data collection techniques were used:

1. **Literature review:** Secondary data on drought preparedness and response by RCRC Movement in Ethiopia, Kenya and Somalia in addition to the ones from key externals partners such as UNDP, UNOCHA and World Bank were collected and reviewed. Situation reports, post distribution monitoring reports (PDM), assessment reports, evaluation reports, plans of action and contingency plans and research reports were sourced. 325 documents were reviewed and were narrowed down to 210 used to inform the literature review[[21]](#footnote-21) and the content of KIIs.
2. **Key informant interviews:** KIIs provided qualitative data based on experience and personal reflections on the drought preparedness and response in the three countries. These informants were key persons in the disaster preparedness, response and management team of Ethiopian Red Cross Society (ERCS), Kenya Red Cross Society (KRCS) and Somalia Red Crescent Society (SRCS); IFRC food security and disaster management focal persons in the regions; ICRC food security and disaster management focal persons in the region; BRC food security and disaster management focal persons. 10 KII’s were conducted[[22]](#footnote-22).

## 3.4 Data processing and analysis

The recorded data was transcribed and analyzed using NVivo (qualitative analysis software). A deductive approach was used to develop major themes and sub-themes from the research questions (section 2.2). Classification of responses into meaningful categories helped to bring out their essential pattern which closely followed the main scope of this research. The qualitative data was organized, summarized and presented in quotes and selected comments.

## 3.5 Technical quality assurance mechanisms

Quality assurance in this research was mainstreamed through adequate and relevant research tools and data collection procedures; design and use of appropriate methods of data management; and consistent supportive oversight (by the steering committee) at all stages of the research.

## 3.6 Limitations

For the KIIs, the ERCS team were not available for a one on one through Skype due to work constraints. Other non RCRC organisations in the region were contacted and did not respond to the KII questionnaires. Subsequently, there was a selection bias and small sample size of KIIs, that may not have accurately represented the wider opinion of key actors in drought preparedness and response.

Additionally, since the time of 2015-2017 drought crisis, there may have been changes to response mechanisms in the RCRC Movement and therefore the current situation is not directly comparable to that in 2015-217.

# 4. Findings and Discussion

## 4.1. Ethiopia preparedness and response

**Table 1.** Timelines of the 2015 – 2018 drought interventions in Ethiopia

|  |  |  |  |
| --- | --- | --- | --- |
| Key event/action | Preparedness | Response | Time period |
| Emergency Appeal launched (CHF 2.2 mill) | ERCS requested IFRC FACT |  | November- December 2015 |
| Appeal revised June 2016 (CHF 2.8 mill) and again March 2017 (CHF 13.7 mill)  Assessment conducted November 2016-January 2017 | * HeOps deployed by IFRC in Mid-February **2016** * Training of 316 volunteers on CBHFA * Creation of emergency plan * Second FACT deployed to help revise the appeal (March 2016) | * Supplementary feeding for 6 months * Supplementary feeding for livestock supporting 9514 * Pasture seeds were provided as a pilot * WASH activities using the CBHFA model * Bilateral response (ERCS, BRC, CRC) * Supplementary feeding for 9 months * WASH interventions for 3 months * Provision of NFIs * Provision of animal feeds * Water trucking * Basic hygiene promotion | December 2015 – March 2017 |

## 4.1.1 Preparedness

As a preparedness mechanism, the Ethiopian government approve a Humanitarian Requirements Document (HRD)[[23]](#footnote-23); compiling humanitarian needs in all the regions and equivalent to a contingency plan. This document is developed in collaboration with Ethiopia Humanitarian Country Team (EHCT) and is launched annually, with mid-term reviews. The plans aim to help people recover quickly from shocks and prevent further deterioration. The NRD is mainly based on forecasts (seasonal, 10-day, weekly and 3-day) by the Ethiopia National Meteorological Agency (NMA). Once a consensus of the forecasts is reached by the Greater Horn of Africa Climate Outlook Forum (GHACOF), the NMA develops a downscaled forecast and this is disseminated via its website, emails and media outlets.

The Government of Ethiopia and humanitarian actors use the downscaled forecasts from Ethiopia’s NMA to undertake situational analysis. For example, in August 2015, the government and EHCT released a revised HRD warning on the potential impact of El Niño on a failed *Kiremt* season and the increased number of people in need of food relief (from 2.9 million to 3.5 million) due to the failed *Belg* (GoE 2015).

The Government and Ethiopia Humanitarian Team (10 UN agencies, 43 INGOs, ICRC, IFRC, the ERCS and IOM) prepared the HRD based on the June-July-August 2015 and projections for 2016. Preparation ensured appropriate inter-sector coordination, in line with three strategic objectives, which formed the basis for the related sector-specific operational plans. The strategic objectives of the 2016 humanitarian plan: (i) save lives and reduce morbidity related to drought; (ii) protect and restore livelihoods and (iii) prepare for and respond to other humanitarian shocks including natural disasters, conflict and displacement.

The nature of the drought crisis meant that food availability in local markets was variable and limited in some areas. Cash as a modality of response was considered by WFP in areas where markets were functioning well. Availability of food in the pipeline, was used as a basis for determining whether to prioritize food or cash transfers. A cross-sector cash coordination group was established as part of the preparation and planning phase.

4.1.1.1 Ethiopia Red Cross Society

The ERCS Contingency Plan was updated using the findings from an assessment done by the Ethiopian Government and Ethiopia Humanitarian Team in which ERCS is also a member. In addition, a four-member Field Assessment Coordination Team (FACT) supported ERCS in assessing the needs and designing appropriate response measures. A Head of Emergency Operations was also deployed to help consolidate the NS national drought response plan.

ERCS and ICRC developed the NDRT/BDRT based on ERCS guidelines. Trainings were conducted in 2015 and 2017, with a refresher in 2018. In t2017, The Finnish Red Cross (FRC) offered financial support and training under the Community Based Health and First Aid (CBHFA) approach. The programme trained 151 volunteers in Afar, Addis Ababa and East Showa. Swiss Red Cross still under CBHFA trained 165 volunteers. These activities helped strengthen the capacity, technical expertise and standards of operations of the ERCS. Despite these activities forming part of the preparation for response, these were done when the impacts of drought were already being felt and not when drought was predicted.

To strengthen its preparedness capacity with respect to meteorological drought, ERCS works closely with the meteorological department as clearly indicated in the KIIs:

*“MET info is more shared, ERCS has a climate change officer who is working closely with the MET office and RC climate center, and this ensures that more data is present in the NS”. KII NLRC*

Despite improved regional coordination, the Ethiopian IFRC office was closed; reducing ERCS the capacity, and leaving a gap in system, roles and support services which lead to poor planning for some areas. It also further complicated the timing for response because poor coordination leads to poor fundraising and capacity building, which affects the success of responses and the impacts.

4.1.1.2 Other agencies (government and humanitarian actors)

Through the Central Emergency Response Fund (CERF), the United Nations Food and Agriculture Organization (FAO) raised CHF 966000, as a preparedness measure to support the livelihoods of pastoralist, agro-pastoralists and smallholders affected by the drought in Afar and elsewhere[[24]](#footnote-24). They alsosupported the Agricultural Task Force in developing the Ethiopia El Niño Response Plan (ENRP 2015/16), which identifies priority areas and activities for intervention and concrete timelines. In September 2016, FAO acted promptly by releasing USD 400 000 under its new Early Action Fund under the Special Fund for Emergency and Rehabilitation Activities, SFERA. This was following the early warning signs of impending drought[[25]](#footnote-25).

**Table 2.** Reviewing preparedness measures: Ethiopia

|  |  |
| --- | --- |
| Ethiopia Red Cross Society | |
| Criteria | **Status** |
| Relevance | * Monitoring warning signs and MET information encouraged organizations to meet and strategize on how to mitigate drought and to initiate resource mobilization. * ERCS’ contingency plan road mapped interventions that needed to be implemented, money needed, & informed emergency appeals. |
| Effectiveness | * IFRC’s provision of a technical officer to support consolidation of response plan. Creation of national and branch disaster response teams improved the efficiency of interventions. |
| Efficiency | * The creation of DRT at branch and community level, reduced the time information would get to headquarter, the deployment and response time |
| Potential impact | * Despite no evidence to confirm impact and sustainability of preparedness measures, it is possible that creation of policies and guidelines for disaster response, establishment of national and branch disaster response teams and training of CBHFA could have potential impact strengthening the preparedness ERCS’ drought capacity |
| Potential sustainability | * The trainings conducted provided opportunity for community ownership. * Creation of organisations disaster management policies and guidelines, streamlines operations and creates an enabling environment. |

## 4.1.2 Response

In early 2016, the Ethiopian Government announced that 10.2 million people needed emergency food assistance because of drought. In December, they launched the 2016 Humanitarian Requirements Documents (HRD), making an appeal for CHF1.4 billion, of which CHF1.1 billion was required for emergency food assistance.

#### 4.1.2.1 Ethiopia Red Cross Society

In response to drought, in November 2015 the ERCS requested support through an IFRC Field Assessment and Coordination Team (FACT), which was deployed to define exact needs and to develop an appropriate plan and budget for response.

An Emergency Appeal was launched on 28th December 2015, (CHF2,211,085) to support 35,371 people access supplementary food, basic health care and livelihoods assistance to meet immediate needs of the targeted population in Afar; Bidu Woreda. The appeal lasted till October 2017 and was extended by 3 months. The ERCS National Drought Response plan was consolidated in mid-February 2016.

In June 2016, the appeal was revised; increasing the budget to CHF2,773,566 to support supplementary feeding for additional 30,000 children under-five years and pregnant/lactating women, WASH and community-based health and first aid (CBHFA) in target areas. A revised plan in 2017 January (budget CHF2,595,467), was informed by the assessment done between November 2016 and January 2017 by the Government, ERCS and other counterparts. The appeal was later revised in March 2017 for CHF13,686,550, to assist 318,325 people.

In 2016, ECRC had the following response interventions to 2015-2017 drought:

* Provision of supplementary food for 6 months, including 6.25kg corn soya blend (CSB) and 1 litre of oil per person. In Bidu Woreda, interventions targeted 100% of screened and registered children under five and pregnant and lactating women, over 6 months with 2-month rations per distribution.
* Provision of supplementary food for livestock; supporting 9,514 animals or 5 animals per household for 6 months in target *kebeles*.
* Emergency appeal targeted 20% of the most vulnerable households for treatment, supporting mass livestock vaccinations in Afar, by GoE, Regional and Woreda authorities.
* Pasture seeds were provided as a pilot, aiming to rejuvenate degraded/exhausted pasture through community fodder production.
* WASH: Use of CBHFA model to promote health and wellbeing. Volunteers trained on models to conduct household visits to screen/identify malnourished children, provide real time monitoring of malnutrition status of communities, and make referrals to health centers for support as needed. This ensured that children were treated early before they experienced severe acute malnutrition.

Objectives of the ECRC emergency response plan included; improvement of critical nutritional status among 93,975 malnourished children under five, lactating and pregnant mothers in 9 regions of Ethiopia through provision of supplementary food for 9 months. However, the ECRC only reached 53,859 people in this population. The ERCR also planned to reduce water borne diseases among 180,000 emergency water requiring people, through distributing safe drinking water and tracking WASH interventions (water treatment chemicals 25,000 and soap 56,000 beneficiaries) in three regions (Oromia, Somali and SNNP) for three months. The ERCR reached 44,727 HH.

Additionally, the ERCR protected 31,000 households/155,000 people from cold and maintain their dignity through essential shelter and non-food items provision. They also planned to provide animal feed for 5,000 HH and veterinary drugs to 5,000 livestock; managing to reach 31,306 HH.

In 2017 there was a bilateral drought response, led by the Canadian Red Cross (CRC), in collaboration with ERCS and BRC (total budget CHF 491,490). Responses included water trucking, basic hygiene promotion and supplementary feeding in Kindo Koysha *Woreda.* The target was 28,846 people and the activities were planned under the guidance of the IFRC revised Emergency Appeal; published in May 2017. CRC had also been building the capacity for ERCS through trainings on Disaster Response Capacity assessment tool, since 2014.

By October 2017 ERCS delivered the following:

* Food distribution for over 700 pregnant/lactating women and 2,300 children under five
* Hygiene promotion and nutrition messages for nearly 900 households.
* Community-based health care, first aid training and tool kits provided for 75 volunteers.
* Household awareness sessions on WASH, acute watery diarrhea, identification and monitoring of severe acute malnutrition cases and linking with the health facility.
* Supplementary feeding for over 56,500 children under five, and pregnant and lactating women; 840,000 CHF from ERCS’ own national and regional fundraising efforts.
* Post-distribution visits to 4,500 households.

The responses were focused on short term responses; usually lifesaving assistance such as provision of food, water, vaccinations, provision of essential shelter and non-food items.

#### 4.3.1.2 Other agencies (government and humanitarian actors)

The government was the biggest actor responding to drought in Ethiopia; through bilateral support for key humanitarian agencies and direct interventions. Early response by the Ethiopian Government included water trucking in parts of the highlands and Afar Region in March 2015, as the *Belg* and *Sugum* rains were failing. Local early warning systems at regional levels, prompted responses such as increases in food relief from July 2015. In Amhara, food aid increased from 639,876 to 2.29 million recipients in July 2015. In Tigray, it increased from 290,000 to 800,000 recipients. In 2015, UNICEF supported the government to increase the number of health facilities capable of treating severe acute malnutrition.

Following early warning and reports on progression of El Niño, USAID announced an additional CHF 97 million in humanitarian assistance for Ethiopia on January 31, 2016. The total U.S. humanitarian assistance was more than CHF 532 million since the start of 2015. The funding provided 176,000 metric tons of relief food assistance, building on earlier contributions for food, nutrition, water, sanitation and hygiene support. Between October 2015 and end of 2016, USAID provided 447,000 metric tons of food to more than 4 million people and provided fodder vouchers to 15,200 households to help them retain livestock. By mid-March 2016, the level of donor commitments had reached approximately 53% of total appeal amount; CHF 1.4 billion.

Save the Children’s multi-sector response approach reached 60 Woredas in 7 regional states. It conducted immediate treatment of child malnutrition, set up and trained community groups to manage child welfare issues, provided food, water, medicine and crucial income support to families. It reached a total of 790, 219 people with food aid and resilience building support[[26]](#footnote-26).

In 2016, FAO played a key role in mobilizing the largest recorded emergency seed distribution to farmers affected by the El Nino-induced drought. In 2017, FAO provided crucial support to livestock-dependent communities struggling from ongoing drought, through mobilizing its own resources[[27]](#footnote-27). FAO’s emergency interventions seek to simultaneously tackle the root causes of the crisis, whilst enhancing preparedness and strengthening livelihoods; so communities can better cope with future shocks. FAO reached 200,000 households with seed interventions and 9,600 households with survival and supplementary livestock feeding. The destocking of livestock also provided much needed income and improved the nutritional intake of 4 300 HH[[28]](#footnote-28).

By 2017, OXFAM’s drought response interventions included water tracking, installation of water storage tanks in key locations and rehabilitation of boreholes, Cash Transfers, WASH promotion, AWD kits, construction of latrines and animal health support.

**Table 3.** Reviewing response measures: Ethiopia

|  |  |
| --- | --- |
| Ethiopia Red Cross Society | |
| Criteria | **Status** |
| Relevance | * Provision of supplementary food for malnourished children, pregnant women and lactating mothers was imperative. The timeline was used to ensure children were no longer malnourished after 6-months and the health of vulnerable groups significantly improved. * Distribution of NFIs was to ensure that migrating families were not suffering in the cold and would cope better. Emergency health services were necessary to ensure those too weak to reach health facilities were able to receive medical attention. * WASH activities may have caused a reduction in water borne diseases, provided safe drinking water for communities and better health practices. Agro assistance ensured targeted pastoralist families would regain their livestock after the drought. Food distribution was appropriate especially in areas that were far and hard to reach. |
| Effectiveness | * Trainings of staff and volunteers on CBHFA, EPR improved the quality of response, the field assessments were able to lead to context specific responses. Due to trainings on improving mechanisms, and reach, the NS was the only operating NGO in some areas. * WASH activities were effective in most areas, but ineffective in some areas due to delayed implementation and duplication due to inefficient coordination. Hygiene promotion activities were ineffective because of a lack of supporting infrastructure, such as jerry cans and soap, especially at household level * Food distribution was not effective due to duplication in some areas and type of food being distributed. Some beneficiaries sold or traded rations for better tasting food, distributed by other organizations. |
| Efficiency | * Delays reduced the immediate impact of activities, especially in the beginning of responses, due to procurement processes. |
| Potential impact | * 53,859 people were reached with supplementary feeding[[29]](#footnote-29) * 44,727 HH were reached with WASH interventions. * 31,306 HH were given animal feeds and veterinary drugs. * 166 volunteers had been trained on CBFHA.[[30]](#footnote-30) |
| Potential sustainability | * Volunteers training may have lasting effect, especially at Woreda level. It will impact general health of beneficiaries, as volunteers are able to identify malnourished children, monitor health of the community and make referrals. * Organizational development training will have a long-term impact on the NS, if learnings are properly implemented. |

## 4.2 Kenya preparedness and response

**Table 4.** Timelines of the 2015 – 2017 drought interventions in Kenya

|  |  |  |  |
| --- | --- | --- | --- |
| Key event/action | Preparedness | Response | Time period |
| Creation of contingency plan | Branches in ASALs preparedness measures:   * Participation in county stakeholders’ meetings. * Recruitment of volunteers and members. | Implemented PRRO in 6 countries | 2015 |
|  | KRCS preparedness measures:   * Capacity building * Development of response tools * Formalization and strengthening of partnerships | * Cash Transfer Programming * Livestock destocking * Conditional food vouchers * Rehabilitation of communal watering points | 2016 |
| Appeal (CHF 9.7 million) |  | * Food donations * Cash transfer programming * Livestock offtake * Vaccinations of animals * Animal feeds distribution | 2017 |

## 4.2.1 Preparedness

The Kenya Food Security Steering Group (KFSSG), provides key information on the food security situation. KRCS and other humanitarian agencies use this information to prepare for drought and food insecurity. Following the failed rains of October – December 2015, KFSSG conducted a study to determine the food security situation and identify the vulnerable counties. The study recommended provision of CHF 143.5 million to improve food security in the following areas: agriculture (crop and livestock); nutrition and health; food assistance; food security and peace and security[[31]](#footnote-31). The Famine Early Warning Systems Network of Kenya (FEWSNET) is a key stakeholder in drought preparedness and response and provides early warning and analysis on acute food security in the country. FEWSNET builds 6-month scenarios, making it a key source of information to food security projects across the various livelihood zones. This provides specific IPC (food security phase classification) status; guiding on actions to be taken.

#### 4.2.1.1 Kenya Red Cross Society

Kenya Red Cross Society (KRCS) has a contingency plan for its preparedness to drought, reviewed biannually. It is based mainly on downscaled seasonal meteorological forecasts, food security information from the Kenya Food Security Steering Group (KFSSG) and early warning and analysis on acute food insecurity from FEWSNET and National Disaster Management Authority (NDMA).

*“KRCS uses information from different sources, we use Kenya Meteorological Department* *(KMD), FEWSNET and NDMA. Note by the time the government was declaring the drought and national disaster in February 2017, we had been responding from October 2016”. KII KRCS*

In **2015**, after the forecast of possibility of failed rains, the contingency plan had 4 steps for preparedness to drought:

1. Monitoring alerts from NDMA, Kenya Meteorological Department (KMD).
2. Boosting sanitation and water wells in all ASAL counties.
3. Putting in place logistics for cash transfers.
4. Mobilization of KRCS staff and volunteers to be part of RCAT- 30 per county.

Additionally, the IFRC’s 2015 Appeal and plan of operation advocated for activities and resources required during an emergency, to be planned pre-disaster. The IFRC plan of Action, (which is based on the scalable IFRC appeal), informed KRCS 2016/2017 response strategy and this reflected a successful co-ordination between the national society and IFRC.

KRCS branches in Arid and Semi-Arid Lands (ASALs), developed county contingency plans with county governments, in preparation for the forecasted drought. Maternal, Newborn and Child Health (MNCH) and Monitoring and Evaluation groups were established to monitor the situation on the ground.

Through the on-going BRC funded project; Disaster Management Strengthening, the Red Cross Action Team (RCAT) responsible for responding to disasters in three counties prone to drought (Tana River, Isiolo and Turkana), were trained in Cash Transfer Programming (CTP) and livestock management. This proved useful during the response phase.

In early **2016**, KRCS prepared for drought through capacity building of the RCAT and National Disaster Response Team (NDRT). Training was on; conducting rapid assessments using the Kenya Inter-Agency Rapid Assessment (KIRA) tool, monitoring of drought situations and putting in place contingency plans. The KRCS developed the response tools; Document Management Framework (the hierarchy of documents); Standard Operating Procedures (SoPs) for drought and RCAT guidelines. These were critical during response, making response organized and well-coordinated. The Emergency Fund guidelines developed in early 2016 also helped in guiding the way funds were allocated during the drought response.

#### 4.2.1.2 Other agencies (government and humanitarian actors)

As a preparedness measure, National Drought Management Authority (NDMA) and Food and Agriculture Organization (FAO), set up an Early Warning, Early Action (EWEA) system. The FAO EWEA project provides early livestock fodder months before drought strikes and propose possible mitigation actions. The International Livestock Research Institute (ILRI) implements the Kenya Livestock Insurance Program as a preparedness measure. The programme covered 2 counties and by 2017 14 drought-prone counties were covered. The United Nations Development Programme (UNDP) in partnership with NDMA engaged in capacity building of contingency plans in 2016 and 2017[[32]](#footnote-32).

**Table 5.** Reviewing preparedness measures; Kenya

|  |  |
| --- | --- |
| Kenya Red Cross Society | |
| Relevance | * Biannual updating of contingency plans is informed by seasonal forecasts, which advices appeals, resource mobilization and actions taken during response. * The BRC DM strengthening project improved the technical skills of staff and volunteers; causing faster response time, wider reach, decentralization of interventions, better data collection and reporting. * The capacity assessment on cash preparedness, helped improve CTP because systems were put in place to ensure the effectiveness and efficiency of the modality |
| Effectiveness | * The contingency plan informed the appeal and response activities, leading to early response. * DM strengthening increased the NS’ capacity; improving delivery and reach of interventions. * IFRC relationships helped inform the response strategy and spearhead appeals |
| Efficiency | * Collaborating and fostering existing relationships, and establishing County Steering Groups (CSG), made the response better coordinated. * Bilateral relationships helped resource mobilization, trainings, planning and response. * Training of staff and volunteers to be part of RCAT in all 47 counties proved too expensive, but a necessary component of drought preparedness. |
| Potential impact | * Capacity development of staff and volunteers, development of County contingency plans for ASALs counties, establishment of MNCH, M&E groups, health clubs, development of DM policy, RCAT guidelines and Emergency fund guidelines have potential to ensure long-term impact for KRCS drought preparedness. |
| Potential sustainability | * Health clubs will continue nutrition surveillance and referrals * County RCAT teams will respond to other humanitarian crises, * County contingency plans will inform interventions needed to reduce disasters impact. |

## 4.2.2 Response

#### 4.2.2.1 Kenya Red Cross Society

In 2011, KRCS main response was food relief, but by 2015-2017, there was a notable shift towards resilience programming, WASH interventions and Cash Transfers. In 2015, KRCS implemented Protracted Relief Recovery and Operation (PRRO) in six counties reaching 325, 200 beneficiaries in Garissa, Marsabit, Tana River, Malindi, Makueni, and Kwale. These activities were general food distributions (GFD), food for assets (FFA), cash for assets (CFA) and supplementary feeding (SFP) programs. In addition, capacity development in Cash Transfer Programming (CTP) was undertaken through training the staff and vulnerability assessments on CTP. The budget was CHF 2,306,768, the donors were WFP and GoK.

Furthermore, a DM strengthening project was initiated in 2015, supported by BRC and DFID; leading to the preparation of the first contingency plan that focused on flood, drought, conflict and epidemic preparedness and response. In 2015, a collaboration between the American Red Cross (ARC), BRC, Danish Red Cross (DRC) and Danish government, French Red Cross (FRC), Red Crescent Islamic Republic of Iran, Red Cross of Monaco and WHO Voluntary Emergency Relief, rolled out interventions on health and nutrition, cash transfer and school feeding, that assisted 649,175 people in Baringo, Turkana and Marsabit.

In 2016, 1.3 million people were food insecure and KRCS drought appeal targeted 5 counties; Kilifi, Kwale, Garissa, Tana River and Makueni. KRCS undertook the following actions: direct Cash Transfer Programme, livestock destocking programme, conditional food vouchers, nutrition outreaches and rehabilitation of communal watering points.

In 2017, KRCS launched CHF 9,651,500 appeal to support at least 340,786 people of the 2.7 million drought affected Kenyans, but it was already reaching 402,612 people with its resilience intervention projects and the DRM budget was CHF 6,274,586. WASH activities reached 721,067 community members in 2017; and the whole program reached 1,002,048 Community Members.

Food distribution is not the focus of the 2017 report[[33]](#footnote-33), showing a significant shift in the Kenya Red Cross response strategy. Additionally, they started a project with FAO, (CHF 694,908 budget) to support livestock off take, vaccinations and animal feed distribution. KRCS and WFP reached over 1.2 million people with food donations and cash transfers.

ICRC mobilized additional resources of approximately CHF 1,000,000 towards the drought response. Through its EcoSec project in Lamu and Tana Delta, ICRC assisted 55,303 people with food rations and unconditional cash grants.

#### 4.2.2.2 Other agencies (Government and humanitarian actors)

The government through NDMA, interventions included livestock offtake; early vaccination of animals; WASH projects centered on borehole drilling and fixing; and facilitating county -based preparedness drills. They also disbursed a total of CHF 1,640,755 from the European Union funded Drought Contingency Fund (DCF) for drought response in 12 ASAL counties. In the beginning of 2017, the EU provided CHF 26,171,288 in response to the ongoing drought. The funds are currently being managed by NDMA.

USAID addressed the 2016/2017 drought through long-term Resilience programs that include WASH interventions, livestock markets, extension services and capacity building of pastoralists[[34]](#footnote-34). World Visionmanaged to reach an estimated 391,345 people including 106,331 children. The interventions were building of boreholes, rehabilitation of shallow wells, water tracking, pipeline extension, nutrition screening, nutrition training for health workers and community health workers, cash transfers and food distribution[[35]](#footnote-35).

**Table 6**. Reviewing response measures: Kenya

|  |  |
| --- | --- |
| Kenya Red Cross Society | |
| Relevance | * Majority of the interventions were food distribution, WASH interventions and Cash Transfer programming. Food distribution has always been a major drought intervention. Although it is short term and used in emergencies, it helps communities cope better, especially where there is no access to food. * WASH activities ensure communities have safe water for drinking and cooking, these activities cannot be implemented if there is no water, hence the importance of drilling and rehabilitating water points. * CTP technology can guarantee better aid delivery. The modes of program delivery were favored by beneficiaries, compared to other interventions. However, in some areas the emergency response experience, proved problematic due to unstable markets, conflict and lack of mobile network coverage. |
| Effectiveness | * CTP proved effective, especially in counties with relative stable markets. However, it did not work well in Baringo, due to ongoing conflict. * Food distribution reached intended beneficiaries during 2015-2016. However, 2017 shifted to CTP and conditional food vouchers. CTP worked in most areas due to wide mobile network coverage. However, it was ineffective in pockets, especially in remote places, due to lack of mobile network and no agents. * Staff and volunteers trained on vulnerability assessment on CTP and DM strengthening, which was geared towards improving response mechanisms. * Livestock destocking and off taking was useful, especially for pastoralists communities. Money received helped them cope better with losses and buy household essentials. * Animal feed distribution and vaccinations helped the healthier animals survive drought. * WASH activities improved the health of communities because they had access to clean water, and a better understanding of hygiene. Drilling of boreholes and rehabilitation of water points rejuvenated communities. |
| Efficiency | * KRCS is considered one of the best service delivery organizations. Due to contingency plans and DM strengthening, they started emergency response months before the national government declared the drought a national disaster. * CTP was timely, and beneficiaries were satisfied with delivery. Livestock destocking was expensive and could not be done on a large scale. * WASH activities ensured that communities had access to clean and safe water and didn’t have to travel long distances. |
| Potential impact | * Borehole drilling and rehabilitation have potential of long-term impact, as water will be available for domestic and livelihood initiatives. WASH activities reached 343,887 * CTP reached 252,252 beneficiaries, where some of them started livelihood initiatives for subsistence and income generation[[36]](#footnote-36) * 1.2 Million people in total reached with various activities[[37]](#footnote-37) |
| Potential sustainability | * DM strengthening is an important component of KRCS response. Increasing staff and volunteers’ technical capacities and creation RCATs in different branches, increased the reach and efficiency of interventions. * Cash for assets also helped communities build their capacities beyond emergencies and increase their resilience capacity to shocks. * Drilling and repairing boreholes and water points, coupled with climate smart farming, built community resilience |

## 4.3 Somalia preparedness and response

**Table 7.** Timelines of the 2015 – 2017 drought interventions in Somalia

|  |  |  |  |
| --- | --- | --- | --- |
| Key event/action | Preparedness | Response | Time period |
| Rehabilitation of health clinics | * DRR activities for capacity building * Formation of CBOs * Resilience building | * Provision of health support * Food and therapeutic feeding * Cash transfers | 2015 |
| Appeal launched (CHF 1.3 million) | * Deployment of surge capacity by IFRC to help with assessments | * Implementation of health programs * Restoring family links and tracing * Provision of clean and safe water * Immunization * Nutrition screening * Food assistance | March 2016 |
| Appeal revised (CHF 3.3 million) |  | * WASH activities * Livelihood * Shelter * Improved water and sanitation * Food security * Nutrition * Health care services * Promoted compliance with IHL | March 2017 |

## 4.3.1 Preparedness

The Somali Government coordinates all interventions by humanitarian agencies through its National Environmental and Research and Disaster Authority (NERAD), with support from UNOCHA. The SRCS and Health teams in Somaliland and Puntland participate in coordination meetings including Government-led assessments. The Somalian government relies on international donors, RCRC, NGOs and UN agencies for disaster preparedness and response support, primarily the World Food Programme (WFP) and ICRC[[38]](#footnote-38).

#### 4.3.1.1 Somalia Red Crescent Society

From September 2013 to December 2015, the German Red Cross (GRC) in collaboration with SRCS, Canadian Red Cross (CRS) and Norwegian Red Cross (NorCross), funded Disaster Risk Reduction (DRR) activities that were focused on building the NS’ capacity. This included Disaster Risk Management (DRM) activities, such as training volunteers at branch level, training of communities and local authorities focusing on disaster prevention and formation of community-based organizations (CBO). The capacity development initiative was effective during the 2015-2018 drought in Somalia.

In March 2016, the IFRC developed an Emergency Plan of Action in partnership with SRCS. Despite being considered a preparation measure, the Plan of Action was developed when the effects of drought were already being experienced. The plan was for 6 months, targeting 4.7 million people (appeal budget CHF 1,290, 936). The strategy focused on improving Health, Nutrition, Livelihoods and access to safe water for the drought affected population in 4 regions of Somaliland *(*Hargeisa, Sahel, Sool and Sanaag), and 2 regions of Puntland (Bari, and Nugal). The immediate food needs of the target population would be met through provision of food assistance for 3 months using Cash Transfers. Access to health services would be provided through mobile clinics and safe, clean water provided through rehabilitation of wells and *berkeds*. These measures were informed by information from FEWS/FSNAU.

*‘SRCS regularly receives situation updates on food security and nutrition FEWS/FSNAU, it also participates in food security and nutrition assessments”. KII SRCS*

The following was crucial to launching the large-scale and efficient response; ICRC’s budget, emergency stocks strategically placed in field structures across Somalia, the well-established network of transporters and financial service providers and the ability to mobilize the SRCS field teams throughout the country. These aspects differentiated the ICRC and SRCS from the other humanitarian actors, especially within initial phase of the response.

#### 4.3.1.2 Other agencies (Government and humanitarian actors)

In March 2016, Somalian government and partners worked on an El Nino contingency plan for preparedness and immediate response. Humanitarian actors, led by OCHA, developed a comprehensive El Niño Contingency Plan, for an integrated and timely response to El Niño. Preparation of the UN’s 2017 Humanitarian Response Plan started in September 2016. However, results of an assessment conducted in December 2016 showed that the plan was outdated before 2017 had begun, as needs were more severe than expected. Therefore, during the launch of the 2017 plan, in Mogadishu, FSNAU and FEWS NET issued a joint alert, warning the possibility of famine in Somalia in 2017[[39]](#footnote-39).

**Table 8.** Reviewing preparedness measures: Somalia

|  |  |
| --- | --- |
| Somalia Red Crescent Society | |
| Relevance | * Community Based Organisation (CBOs) and their Community Actions Plans were context specific and relevant; informing context-specific coordination, assessments and actions. * Emergency Plan of Action was used for resource mobilization and planning. |
| Effectiveness | * Action Plans developed by CBOs streamlined coordination and response. * Capacity building increased the technical skills of staff and volunteers which strengthened the capacity of the organization and improved planning. |
| Efficiency | * Trainings increased knowledge and skills in DRR, the rehabilitation and equipping of static and mobile clinics ensured emergency treatment was available; evident during cholera outbreak. |
| Potential impact | * Increase in mobile clinics, deployment of surge capacity to support SRCS’ needs assessment, PHAST volunteer training, DRM training for communities and local authorities, formation of CBOs and development of DRM training modules, have potential impact on preparedness capacity; bringing service close to the most vulnerable and understanding local needs. |
| Potential sustainability | * Increased mobile clinics will increase health interventions especially in nomadic communities. * Creation of CBOs and Community Plan of Action will help in strengthening future community risk management and mitigation. * PHAST training for volunteers has increased technical capacity and improved health interventions. * DRM training modules will help facilitate training; increasing manpower and organizational capacity, resulting in effective planning and response. 20 of the clinics are functioning; 12 in Somaliland and 8 in Somalia. |

## 4.3.2 Response

In Somalia, the response is guided by the Humanitarian response plan and an annual contingency plan. By November 2016, FEWS NET warned vegetation conditions in many areas were worst on record, and Somalia’s federal government and many state authorities issued drought alerts.

#### 4.3.2.1 Somalia Red Crescent Society

In 2015 the ICRC, German Red Cross (GRC), Swedish Red Cross (SRC), Qatari Red Crescent (QRC), Iranian Red Crescent and Emirates Red Crescent (ERC), were working with SRCS in short and long-term programing. Most of the interventions were on rehabilitation of health centers, provision of health support, food and therapeutic feeding, CTP and farming resilience.

In 2016, the IFRC supported the SRCS to implement health programmes, including mobile and static clinics. The ICRC supporting the SRCS with Restoring Family Links (RFL) and tracing activities for families who were displaced due to the drought and resource-based conflicts, health, economic security and WASH activities. More than 30 mobile clinics were established with community outreach teams. ICRC also supported the SRCS’ Keysani Hospital in Mogadishu as well as SRCS branches’ WASH teams by WatHab. In February 2016 SRCS with support of GRC implemented an ECHO funded program that reached 28,810 HH. Interventions of the program included providing safe and clean water and food security through CTP.

In 2016, SRCS implemented several projects, including a Community Resilience programme with three main components; WASH, Livelihoods, Drought Resilience and Climate Change Adaptation. This was with the support of PNS bilaterally or multilaterally through IFRC.IFRC deployed Surge Capacity to support the SRCS on needs assessments. In March 2016, IFRC launched an appeal for 1,291,576 CHF to assist 78,990 people and 129,394 CHF allocated from the IFRC`s Disaster Emergency Relief Fund (DREF), for assessments and supported the start of assistance. Through the Emergency Appeal, the SRCS aimed to improve health, nutrition, food security and access to safe water for the drought-affected population in the regions of Somaliland (Hargeisa, Sahel, Sool Sanaag) and Puntland (Bari and Nugal). These were achieved through:

* Food assistance through mobile money transfers to 900 households (5,400 people) for 3 months. Health service provision to 78,990 people through deployment of mobile clinics
* Nutrition screening 15,798 children (<5 years), treatment and referrals of complex cases.
* Provision of clean and safe water for consumption through rehabilitation of 12 boreholes and 12 *berked*s (Somaliland and Puntland)
* Provision of fuel subsidy for 10 boreholes and 6000 ceramic water filters.
* Health and hygiene promotion through training 120 volunteers (Somaliland and Puntland).

The 2016 a cholera outbreak in Baidoa region left 220 people admitted. Despite the large number of patients, due to continuous rehabilitation of medical facilities by ICRC, the hospital was able to treat them. In April 2016, SRCS and ICRC provided food to 60,000 people affected by the drought in the northern parts of the country. They also provided seeds and trained families on how to grow tomatoes, beans and carrots to diversify their diet.

The SRCS in 2016/17 provided Health and Care services with Mobile and Static Clinics through the Integrated Health Care Programme (IHCP). The mobile and static clinics provided immunization, treatment of common illnesses, nutrition screening, (Out Patient Therapeutic Feeding Programme [OTP], Therapeutic Supplementary Feeding Programme [TFSP], Maternal Child Health Nutrition [MCHN]) reproductive health (ante-natal, post-natal, delivery services) and health education. The NS was operating 12 static clinics and 4 mobiles in Somaliland and 20 static clinics and 6 mobile clinics in Puntland, through multilateral support from Partner National Societies (PNS) and in collaboration with the sector ministry, UNICEF, WHO and WFP.

The appeal was revised in March 2017 and extended by 10 months (3,308,035 CHF) to assist 150,000 people. The expanded operation focused on: health; WASH; livelihood, nutrition, food security; shelter (including household non-food items).

In 2017, ICRC reached 761,772 people during the drought emergency response:

* 379,178 people had access to safe and clean water through household WASH
* 167,040 people received financial support in the form of cash;
* 160,032 people received food rations
* 90,000 people had access to water through construction and rehabilitation of 10 boreholes
* 83,288 people received medical care at 25 SRCS clinics and 6 mobiles health clinics
* 45,264 people received essential household items
* 12,710 malnourished children treated in stabilization centers and SRCS clinics
* 3,836 people admitted in cholera treatment centers in Kismayo and Baidoa

#### 4.3.2.2 Other agencies (government and humanitarian actors)

The biggest intervention in Somalia was through the nutrition cluster. By end of October 2016, the nutrition cluster had reached 921,065 out of 1,155,000 people; 87% of the annual target. The nutrition cluster partners reached 446,391 beneficiaries with nutrition preventive services, including the Blanket Supplementary Feeding Programme, Maternal and Child Health Nutrition and Infant and Young Child Feeding (OCHA 2017b). DFID funding was provided to UNICEF and to an NGO nutrition consortium.

November 2016, the Humanitarian Response Plan for 2017 was published, warning that 5 million people were in need, and called for $864 million to meet requirements for the year. Food security support was scaled to reach 3 million through cash and vouchers and livestock asset protection including water trucking, treatment of livestock and feed/fodder distribution.

In 2016, FAOrepaired river breakages and reinforced embankments, reduced risk of animal disease outbreaks, helped farmers protect grains, and increased water storage in the north. Almost 230 000 people facing crisis levels of food insecurity in the first half of 2017 were able to secure a good harvest despite ongoing drought. FAO provided quality local seeds, land preparation or irrigation support, training, safe storage equipment and cash to families in Somalia’s southern breadbasket, and in Somaliland. Cash+ packages enabled families to buy food and grow food over the longer term. Families received monthly unconditional cash transfers for three months; the time it takes to plant and harvest a staple crop.

In 2017, UK government provided CHF218 million emergency relief funding to Somalia drought response, using its Internal Risk Facility (IRF). DFID and international humanitarian response contributed CHF11.7 billion. Working through a consortium of INGOs, UN agencies and the ICRC, DFID support provided; access to safe drinking water for 1,117,918 people; emergency food assistance for 1,575,516 people; nutrition for 458,035 malnourished children and mothers; emergency health care for 704,035 people; and vaccinations for 4,000,000 animals.

In 2017, UNICEF and partners provided 1.79 million people with temporary access to safe water. Activities included chlorination, operation and maintenance, water trucking, vouchers and household water treatment. UNICEF also supported the rehabilitation of sustainable water sources, reaching 630,213 people and provided hygiene kits, benefiting 1,274,076 people. In response to drought-related displacements, UNICEF provided WASH services in multiple towns hosting new displacement, servicing 150,000 IDPs in Doolow, Luuq, Baidoa, Marka, Bossaso, Garowe, Burco, Gaalkacyo and Buuhoodle. Over 76,000 people were supported with sustained access to safe water through newly built and/or rehabilitated water points during the reporting period. CARE and the government supported WASH efforts to prevent acute watery diarrhea and reached over 250,000 people. CARE also rehabilitated five water points, providing 10,000 individuals access to water.

**Table 9.** Reviewing response measures: Somalia

|  |  |
| --- | --- |
| Somalia Red Crescent Society | |
| Relevance | * Ongoing conflict make conducting humanitarian work extremely difficult. SRCS’ auxiliary role to government and accepted among communities, has helped implementing responses. In some areas, the SRCS was the only organization operating. * Health activities were important to communities, because screenings and emergency health care was provided. Provision of emergency food supply helped thousands of families * CTP helped families assist themselves; majority used money to buy food and medication. * Access to safe and clean drinking water was crucial; reducing number of waterborne diseases cases and providing water to communities. Some organizations have reservations about berkeds because they are not sustainable, but from community assessments, beneficiaries insist on importance of building and restoring them. * Community resilience building activities enable communities need to absorb drought shocks, through adaptation of new farming techniques and positive coping mechanisms. |
| Effectiveness | * Therapeutic feeding, CTP, provision of health support, WASH, resilience building through farming and distribution of NFIs interventions responded to needs of the most vulnerable * Community capacity building improved community mitigation measures and strengthen DRM at organizational level through training of volunteers and staff and prepositioning of DRM tools and kits. * Mobile clinics provided treatment and nutrition screening which helped in improving the overall health of the communities * Resilience projects helped communities cope better with the effects of the drought and it improved access to water. |
| Efficiency | * Initially, SRCS felt overwhelmed they lacked clear guidelines of how to respond. However, through capacity building they were able to implement most activities. * Poor procurement structures and long logistical processes made it difficult to get NFIs since they were being bought from abroad and neighboring countries. * Formation of CBOs was effective, and resulted in community action plans, which focused on disaster prevention. * Training on improved fodder production helped in improving the health of livestock and increased fodder production. |
| Potential impact | * Over 2.5 million have been assisted.[[40]](#footnote-40) * 12 static and 6 mobile clinics were operating in Somaliland. * 20 static and 4 mobile clinics were operating in Puntland. * 7800 people were given date palm seedlings.[[41]](#footnote-41) * 700,000 people have received clean water. * 480,000 people received medical assistance. |
| Potential sustainability | * GRC is currently supporting SRCS in resilience strengthening capacity, to develop a Resilience Strategy to inform resilience programming. * Rehabilitation of clinics and the increase of mobile clinics will ensure adequate health screening and emergency treatments. * Organizational capacity building is crucial, because skilled staff and volunteers can implement activities efficiently without compromising or creating negative impacts. |

## 4.4 Effectiveness of RCRC’s drought preparedness

Compared to the 2010/11 drought, coordination was improved between national governments and the humanitarian community. Effective multi-sectorial and multi-agencies coordination resulted in better quality and timeliness of preparedness measures, especially in Kenya and Ethiopia. Additionally, improved early warning systems and information dissemination, led to improved planning processes. The Movement kept monitoring the situation and developed plans using up-to-date information. Improvements were also seen in capacity building of staff, development of preparedness plans and allocation of resources prior to disaster. Innovation and technology improved the quality of preparedness and the impact of interventions at community level.

*“If you ask me in terms of preparedness to drought, the one that ended in 2017 was the one that was adequately prepared for. This was because we had the DM strengthening which we undertook institutional contingency planning”. KII KRCS*

Drought mitigation capacity building increased staff’s knowledge, which resulted in more community members trained on DRR. Capacity building and availability of funds lead to NS having more preparedness plans. These were consistently revised; improving scalability of interventions and implementation tools.

*“There was good use of meteorological information and in all operations, there were good evidence-based assessments”. KII BRC*

For RCRC, working through the NS was very productive since they are close to the community.

*“The national societies are very important as they are the ones who are in direct contact with communities, they are the staff and facilities, if there is any achievement is thanks to these NS, so working with them should be a top priority”. KII ICRC*

However, as the drought progressed, funds were not enough to meet raising needs and proposed measures were not always implemented due to limited resources. For example, in 2015, more early action, preparedness and contingency planning was needed, given the growing risk of a serious large-scale crisis. More early action would have been possible if partners had budgeted more flexibly within their multi-year funding and made a stronger case to DFID for further IRF funding.

Generally, a small portion of humanitarian budget was allocated towards preparedness; around 1% of total budget. Full political will and commitment only happens when the drought becomes a national disaster, therefore effective preparedness to reduce or prevent impacts of droughts is not realistic.

## 4.5 Effectiveness of RCRC’s drought response

The multi-stakeholder coordination and multi-sectoral approach was successful in strengthening the response measures in Ethiopia and Somalia. However, response in Kenya was not well coordinated because the government were taking the lead and elections occupied most of the government’s attention. In some instances, coordination was a hindrance. For example, in Ethiopia the IFRC office was closed which reduced the ERCS’ capacity and left a gap in system, roles and support services, which lead to poor planning in some areas. Furthermore, poor coordination leads to poor fundraising and capacity building, which affects the success of responses and the impacts.

Consortium approach was best implemented in Ethiopia, as external partners were able to coordinate. With the help of assessments and HDR, they pooled their resources and shared information, which led to minimal duplication in the same areas of intervention. In Somalia the cluster coordination worked well at ‘meetings level’, but not at the operational level. This is mainly due to many clusters’ supporting local partners which often lacking the necessary capacities and accountability, including the funding delays.

Most interventions were short-term, with a few long-term programmes in the three countries. CTP proved to work well especially in Kenya and Somalia. With the SRCS, the ICRC distributed cash based on which the communities could organize themselves and purchase water, thus reducing the risks of the misuse of the funds. Provision of water and treatment of water were also effective interventions especially in Somalia and Ethiopia, but unsustainable.

Rehabilitation of water points and health facilities, drilling of boreholes, sanitation programs, provision of mobile clinics and training community volunteers on WASH, proved to be very effective especially in Somalia. The number of people and children who were treated due to drought related diseases were low as compared to 2010/2011 drought, more children were screened for SAM and health centers were better equipped.

*“We went back and tried to figure out what would have been done before and we realized that the in-house capacity is important. Having developed that capacity helps the response teams to be efficient; because CTP was a relatively new thing we invested in the capacity of teams and deployed these teams in different areas”. KII KRCS*

Governments control the declaration of emergencies and delays in drought emergency announcements led to support being provided after effects were being felt by communities. For example, in Kenya, KRCS started responding to drought 4 months before the government declared the drought a national disaster. The Ethiopian government tried to respond to the drought but did not have the capacity, thus delaying humanitarian appeals and fund-raising initiatives.

Additionally, funds received for drought response by different humanitarian organizations were insufficient. Despite most organizations monitoring drought information, majority did not take early action until they received evidence on the effects of the drought on communities. In Somalia, constant presence of ICRC and major donors such as ECHO, along with good cluster coordination, meant they were able to respond to the drought efficiently because of emergency reserve funds.

Procurement of essential equipment and items was challenging especially in Ethiopia and Somalia, due to lack of proper procurement mechanisms, proper logistical information and established linkages with suppliers. Population movement and insecurity made it difficult to have effective responses such as provision of food, NFIs, vaccination and health services, especially in Somalia and some parts of Ethiopia.

It is important to note that protracted crises such as conflict and political instability hampers the process of a more structured and systematic preparedness approach. This was one of the challenges that was experienced in Somalia which is in the process of re-building and restructuring.

Although there was no documented evidence on the role the livelihoods and resilience projects implemented by RCRC Movement after the 2010/2011 in drought preparedness, close observation of areas badly hit by the 2015/2017 drought indicated that these projects had a positive effect. For example, in Kenya, places where preparedness activities involved building and repairing infrastructures such as boreholes and clinics, showed higher absorption rates in terms of dealing with the shocks, than areas that did not have resilience projects. A practical example is in Somalia, where clinics that had been upgraded and equipped after the 2010/2011 drought were able to handle more AWD outbreak patients and treatment was done in a timely manner which saved more lives than previous times.

## 4.5.1 Main variations between responses

The different activities are implemented by and/or through NS at Branch levels. Before initiating a response project, they always carry out a needs assessment and then launch an appeal, which is revised based on need.

**Table 10.** Similarities and differences in response across Ethiopia, Kenya and Somalia

|  |  |  |  |
| --- | --- | --- | --- |
| Intervention activities | Ethiopia | Somalia | Kenya |
| WASH activities | Water trucking, provision of NFIs, treatment of AWD, training on good hygiene practices, rehabilitation of water points. | Treatment of AWD, promotion of hygiene activities, provision of shelter items, rehabilitation of water points. | Hygiene promotion |
| Nutrition | Treatment of SAM, provision of food | Treatment of SAM, provision of food |  |
| Livelihood | Supplementary feed for livestock and vaccination. |  | Destocking, training farmers of climate smart farming techniques, provision of seeds. |
| Financial assistance |  | Unconditional Cash assistance | Unconditional Cash assistance |

## 4.6 Key drought preparedness and response lessons (2015-2018)

1. Importance of collaboration and information sharing

Collaboration is essential for humanitarian organizations to have an impact at grassroots level. Lack of information sharing made coordination challenging in Kenya, which led to duplication especially in CTP.

*“Sometimes we are not sharing a lot of information, and that was highlighted as being a big issue in drought response, we are not able to have a seamless flow of information maybe because of confidentiality or competition, so some information was not freely available. It was difficult to Know if a beneficiary was being supported by another organization or not”. KII KRCS*

Organizations should work as a collective to accomplish the main objective; improving the quality of life for communities in need. Consortiums and cluster groups are important for coordination, cooperation and encourage joint fundraising. The RCRC movement should deliberately and actively be involved in these groups in the various areas of operations.

*“One of the issues we have, is disconnect between Geneva and the regions; even if they are doing a fantastic job but for some reason it’s not filtrating to the clusters and countries. Learning are made for the sake of learning in a kind of self-serving manner. The actions and decisions taken after are done at a very high level. We need to involve national societies more in decision making”. KII CRC*

*“However, despite the fact that we are a movement, we lack the means to come together achieve purposeful scale and impact. Whereas other agencies can more quickly form coalitions and consortium and go for funding opportunities. For example, in Somalia there is an NGO cash consortium of approximately 7-8 agencies led by Concern Worldwide funded by ECHO. They quickly formed, reached agreement, identified their added value, and implemented”. KII GRC*

1. Cash Transfer Programming and flexible funding

More widespread use of various flexible funding mechanisms within long-term development and resilience budgets and programs, to support drought response. Also, CTP was revolutionary as a response modality to drought, especially where markets were functioning, and mobile technology was accessible.

## 4.6.1 Opportunities and barriers for RCRC drought preparedness and response

The greatest opportunities for NS is their auxiliary role of the government and their recognition and acceptance at community level. The wide coverage they have in various countries and the man-power available through volunteers has helped in delivery of aid. These opportunities should be strengthened and relationships between local authorities and communities should be fostered through participatory capacity building and collaborative work. International organizations such as the IFRC and ICRC should continuously invest in NS in all contexts and levels. It is important to note that during the 3rd Africa Drought Management Advisory Group (ADMAG) meeting, members unanimously agreed that more efforts need to be put towards strengthening movement coordination and cooperation, and building NS capacities through trainings, shadowing, peer to peer learning and work exchange. Bilateral relationships between NS and PNS have shown to work effectively and more relationships should be fostered to help build the capacities of the RCRC movement and increase the financial sustainability of responses.

The biggest challenge that faces NS is the lack of funds, and strong fund-raising tools at local level. Though NS are constantly trying to find new ways of fundraising, such as the use of media and the Kenyan for Kenyans initiative by KRCS, and diversification of income generating activities, there is still a gap in technical capacities and fundraising tools that are further hindered by RCRC Movement bureaucracies.

Coordination is also an issue, because poor coordination hinders capacity building, fundraising, aid delivery and sustainability. There have been cases within the region where funds are directed towards a NS, but it does not have the capacity to absorb the amounts given, and they then collapse at the end of major crises. Lastly, lack of using lesson learnt to influence next crisis preparedness and responses, strengthen systems, policies and general organizational development has been noted within the RCRC movement.

Common barriers across Ethiopia, Kenya, Somalia included: Minimal funding, poor coordination, shortage of technical skills, RCRC bureaucracy and minimal utilization of lesson learnt.

**Table 11.** Major context specific barriers to preparedness and response

|  |  |  |
| --- | --- | --- |
| Country | Preparedness | Response |
| Ethiopia | * Institutional challenges * Poor planning and logistics * Slow uptake of technology and innovation | * Duplication * Lack of technical expertise * A lot of people living in rural areas |
| Somalia | * Inadequate planning * Lack of contingency planning * Minimal SOPs | * Instability and insecurity * Lack of technical expertise |
| Kenya | * Limited funds | * Technical support * Duplication |

# 5. Recommendations and Conclusions

## 5.1 Recommendations

* **Multi-stakeholder and sectoral coordination;** resulted in better preparedness and response to the 2015-2017/18 drought.
  + Leveraging on their auxiliary role to the government, NS should **lobby and engage** the government to central to drought management, resilience agendas and provide centrifugal force to other sector actors. This will ensure actors work collaboratively for effective service delivery and encourage political goodwill; critical in timely intervention and resilience building.
  + When the IFRC lacks capacity to undertake necessary preparedness or response measures, pre-decided and coordinated consortium PNSs should fill the gaps
* **Early warning–Early Action approach.** Disaster preparedness has increased regionally to enhance effective disaster response and management. For example, at the global level through the EWEA Ethiopia, Kenya and Somalia, critical situations are flagged quarterly, and this information is used to provide recommendations on early action in agriculture and food security.
  + NS need to adopt some of the early warning systems developed by other actors as tools and information for preparedness and response to drought. For example, the **Predictive Livestock Early Warning System** provides a closer picture of the impact of drought on key grazing areas and reflects the trends in forage recovery.
  + The RCRC Movement should **invest in preparedness** and decreasing or preventing the impact of drought
* **Linkages short-term emergency responses and long-term development goals;** such as the Productive safety Nets Programme (PSNP) and the Hunger Safety Net Programme (HSNP) in Kenya through various crises modifiers approaches (Crisis modifiers allow for contingency funding within long term programmes that can be quickly utilized for emergency response without going through a long approval process) Evidence shows that long term programming have more positive impact on communities and national societies. There is need by the movement to explore ways in which short term responses can be designed to merge into bigger development goals, once the emergency phase has ended. Donors should also be encouraged to fund long term programs in disaster prone areas so as mitigate the risks.
* **Cash transfers;** National Societies need to strengthen preparedness and response to drought through. It is evident from the findings that response to drought using cash worked well in most parts (Kenya and Somalia), thus this can be enhanced by using cash as a preparedness modality before drought strikes. Leveraging on the existing social protection programmes such as the Hunger Safety Net in Kenya which operates in drought prone areas and has experience in scaling up additional recipients in drought emergencies, National Societies can help scale up cash transfers to reduce or manage human and economic losses as a result of drought through the delivering of cash before disaster as a **social protection measure** while using these programmes as scalable platforms that can support people affected by drought more effectively.
* Better preparedness and response to drought can be scaled-up using **technology and innovation** for enhanced socio-economic well-being of vulnerable populations. The challenges of risks and hazards can be addressed through technology and innovation which is at the disposal of the young population and local community. National Societies (NS) can leverage on their young volunteer network and local community presence in identifying innovative solutions to impacts of drought.
* The NS can also adopt technologies that will enhance their response such as the use of **Blockchain technology** in Cash Transfers. In 2018, KRCS piloted blockchain technology during drought response in Isiolo County. A first of its kind in the humanitarian sector, since to date the use of blockchain technology for cash transfers by humanitarian organizations has mostly used the closed-loop payment mechanisms such as e-vouchers, where payments are linked to merchants’ specifics outlets. Here, blockchain was being explored to make CTP more effective, by promoting timely delivery of aid while strengthening transparency and accountability to beneficiaries and donors. In the usual KRCS CTP a lot of time is spent during the verification and validation process which sometimes can take up 3 weeks depending on the geographical location where the response is being implemented. For the pilot project, this was not the case, 2090 beneficiaries received money in three days after consent, which proved that disbursement can be done efficiently without it being time-consuming and affecting its quality of delivery. **RedRose** **data management platform** was used in managing all aspects of the project cycle in just ten days, consent, disbursement and post-distribution monitoring was done proving that CTP delivery can be timely and up scaled.
* RCRC may need to adopt **insurance schemes** as an intervention in drought preparedness and response. For example, the Index-based insurance represents an exciting innovation that could allow vulnerable rural smallholder farmers and livestock keepers to benefit from insurance and, thus, reduce climate-related risk. The Satellite Index Insurance for Pastoralists in Ethiopia (SIIPE) and R4 Rural Resilience Initiative in Ethiopia’s highlands use an asset replacement approach, providing insurance pay-outs to vulnerable pastoralists at the *onset* of severe droughts and loss of pasture, enabling them to purchase supplementary livestock feed and veterinary inputs in order to keep their core breeding animals alive[[42]](#footnote-42). The core component here is the risk transfer element through a weather-based index insurance against drought. Another example of index-based insurance can be found in the Index-Based Livestock Insurance (IBLI), piloted in 2010 in Kenya and Ethiopia, ensured individuals bought policies that paid off automatically if the normalized difference vegetation index (NDVI) fell below a threshold that indicated drought which had affected the rangelands significantly. Since this system pays out against average losses, many pastoralists were not compensated for the full value of animals they lost. In 2016, the IBLI was expanded to the Kenya Livestock Insurance Programme (KLIP), a public-private partnership between the Government of Kenya and seven private insurance companies. Here, compensation can be paid directly to mobile phones. The first months of KLIP nearly 25,000 households were signed up and the program hopes to cover 100,000 HHs by 2020. In response to the 2016-2017 drought over $ 2 million was paid out in compensation to 12,000 HHs. A good example of research-oriented pilot going to scale.
* National Societies need to invest more in **Forecast-based Action** and **Forecast-based Financing** in addressing drought in this region, since weather and climate forecasts have become more reliable, skillful and widely available at global, regional and national level. This will support action in the window of opportunity between a forecast and potential hazards considering drought is a slow onset disaster.
* Since drought is a recurring disaster is this region, National Societies should invest in establishing an **emergency funds and stocks** in the drought prone areas to ensure timely response in times of need. Such stocks came in handy is Somalia, where ICRC emergency stock in the field was part of the first line response.
* NS should join consortiums to have more collaboration with external partners and to improve coordination and strengthen complementarity within the humanitarian world.

## 5.2 Conclusions

Drought preparedness in these three countries included contingency planning, use of early warning systems, cluster coordination, capacity building and use of RCRC movement emergency preparedness tools. Most responses were centered on water provision, supplementary food, WASH activities, health, livestock health management and cash transfer programming. Most of the interventions were short term, but there were programs such as rehabilitation of water points, provision of mobile clinics, training agro pastoralists on climate smart agriculture that were geared towards resilience building.

From the findings, most ‘*preparedness measures’* were undertaken when the effects of the drought had been felt. A few including development of contingency plans were done based on the forecast. A good example is KRCS’ contingency plan that is reviewed biannually based on the seasonal forecast that enable KRCS to start its response before drought was declared a major disaster in Kenya. Great multi-sectorial and multi-agencies coordination resulted in better preparedness measures in terms of quality and timeliness of interventions. In addition to this, improved early warning systems and information dissemination including forecasts, food and forage situation helped very much in the planning processes. The movement kept on monitoring the situation and planning using the information that they were receiving. Capacity building of key staffs, volunteers and communities in key sectors, development of preparedness plans and allocation of resources prior to the disaster were also some of the key improvements. The uptake of innovation and technology especially mobile cash transfers improved the quality of response and the impact at which these interventions had at community level.

The RCRC movement did consider the lessons from the 2010/2010 drought, though it did not generally translate into early action especially responding based on the forecast. Donors still resorted to respond once the effects of drought have been felt and most governments were slow in declaring the drought a national disaster, which in turn delayed fundraising and response. Appeals made through IFRC helped strengthening responses and created an environment that encouraged bilateral linkages which have proven to be effective especially in resource mobilization and capacity building. Lack of information sharing within the humanitarian sector, especially in Kenya led to duplication of interventions, while consortiums and cluster coordination proved to have worked very well in Ethiopia and Somalia.

In conclusion the RCRC movement needs to look within itself and take deliberate actions to improve drought preparedness and response. A clear definition of what preparedness to drought means for RCRC needs to be established. Does preparedness mean putting plans into action before the onset of the drought? If yes? What indicators/criteria/guidelines will be used?

# 6.0 Annexes

## Annex I: Preparedness measures by Government and other non RCRC agencies

1. **Ethiopia**

In 2015 according to the Ethiopian Humanitarian Country team (EHCT), the failed Belg rains increased the number of people who needed aid after which the arrival of El Nino weather affected the Kiremt rains which lead to a slow onset emergency in Ethiopia due to increased food insecurity, loss of livelihoods and malnutrition.

Measures taken to prepare for the 2015-2017 drought in Ethiopia included:

1. Over 80% of Ethiopia agricultural yield depends on the two main rainy seasons and employs 85% of the workforce. After the two consecutive unsuccessful rainy season in October and November a government led multi agency assessment was conducted to examine the state of agricultural yields and livestock. Close to 200 Government, UN, NGO and donor representatives visited affected communities across Ethiopia’s nine region and concluded the expected harvest was far below expectations with some regions experiencing between 50 – 90% crop losses. This assessment was brought forward by the National Prevention and Preparedness Committee to enable the government together with partners accelerate planning and assistance provision for 2016. As a result, the government allocated CHF 34.6 million for food and non-food items and asked donors for support. The Ethiopia HCT then prepared a disaster appeal in September 2015, identifying USD 237 million to pre-position supplies for the first quarter of 2016.
2. At the same time a government led pre-harvest assessment was done to determine the number of people requiring food assistance early October 2015.

An analysis of the soil moisture was done in August which is usually the peak of the summer rains and this indicated that the most affected areas are experiencing the least moisture in over 30 years i.e. negative soil moisture.

1. **Kenya**

Kenya Food Security Steering Group (KFSSG), provides key information on the food security situation which KRCS and other humanitarian agencies use in preparing for drought and food insecurity. Following the failed rains of October – December 2015 especially in ASALs where this season is very important in agriculture, KFSSG conducted a study to determine the food security situation and identify the vulnerable counties and made a recommendation of a provision of CHF 143.5 million to improve food security in the following areas:

1. Agriculture: Provision of subsidized farm inputs, promotion of drought tolerant crops, water harvesting through construction of pans and irrigation systems, promotion of post-harvest management and marketing, conservation agriculture and good agricultural practices.
2. Livestock: Breeding improvement schemes; continuous vaccination and disease surveillance; up scaling of livestock insurance; marketing and infrastructure; pasture and fodder establishment and conservation; sensitization of farmers and traders on better livestock marketing strategy.
3. Nutrition and Health: Increase staffing; Scaling up High Impact Nutrition Interventions (HINI) and roll out of surge model; conduct nutrition surveillance activities; enhanced integrated disease surveillance; provision of water treatment chemicals; strengthen community health strategy.
4. Food Assistance: Construction of dams and water pans, fuel subsidy for community boreholes, provision of water tanks and storage facilities, water infrastructure development for emergency supply, repair of strategic boreholes in grazing areas, roof water harvesting, water pans repair and purchase generators and fencing of water points.
5. Food Security: Cash and Food for Asset programmes to vulnerable populations. Food commodities and cash including associated costs for food insecure populations in need of assistance for the next six months (March 2016 - August 2016).
6. Peace and Security: Establishment of peace and conflict resolution mechanisms among pastoral communities and formation of peace committees. Monitoring of conflict hot-spots and facilitation of early response.

The Famine Early Warning Systems Network of Kenya (FEWSNET) a key stakeholder in drought preparedness and response, provides early warning and analysis on acute food security in the country. FEWSNET builds a 6 months’ scenarios making it a Key Informant to food security projects across the various livelihood zones. This provides specific IPC (food security phase classification) status which then guides on which actions to be taken.

The United Nations Development Programme (UNDP) in partnership with NDMA engaged in capacity building of contingency plans in 2016 and 2017. In 2016 the following preparation activities were implemented:

* Five counties updated and activated their contingency plans in response to drought
* Four counties developed County La Nina/Drought Preparedness and Response Plans; and the national government develop the National Preparedness Plan
* Trained media on climate change reporting: led to increased coverage of climate related issues in the mainstream media, contributing to better preparedness for droughts

In 2017, it engaged in the same preparedness activities:

* Through NDMA, helped 100% of the ASAL counties establish functional drought early warning system.
* Nine counties were capacity built to improve their disaster coordination and response modalities.
* Assisted 13 counties gain skills to respond to and mitigate, impact of drought
* Supported community resilience interventions

1. **Somalia**

Somalia hosts two well-developed monitoring partnerships with the Food Security and Nutrition Analysis Unit (FSNAU) and Somalia Water and Land Information Management System (SWALIM). NGO partners working in Somalia, therefore, largely depend on the combination of international forecasts and the more detailed, localized information provided by FSNAU and SWALIM. FSNAU is a monitoring effort funded by Swedish International Development Cooperation Agency (SIDA), the United States Agency for International Development/Office for Foreign Disaster Assistance (OFDA/USAID), United Kingdom Department for International Development (DFID), the European Union(EU), and Common Humanitarian Fund (CHF).

SWALIM partnered with key government ministries for a five-day training workshop on Disaster Risk Reduction (DRR) in Mogadishu during the month of October, 2015. The training held as part of the El Nino preparedness plan by FAO covered basic knowledge and skills on DRR, drought resilience techniques and drought risk management. Participants also learned to apply their knowledge to enhance resilience to drought and to prepare and respond effectively to drought risks. These efforts were made possible thanks to flexible and early donor funds, notably from the: DFID, USAID/OFDA and Food for Peace (FFP), and the United Nations Central Emergency Response Fund (CERF).

There was Humanitarian Response Plan (HRP) developed by OCHA on behalf of the HCT in 2015 which focused on response on the protection and humanitarian needs of people in crisis and emergency situations. At the same time strengthening the resilience of vulnerable households and communities through livelihood support, as well as programmes for critical gaps in basic social services that complement disaster risk reduction, recovery and development interventions.

In March 2016, The Federal Government of Somalia, along with other partners worked on an El Nino contingency plan for preparedness and immediate response. The humanitarian community as well, led by OCHA, developed a comprehensive El Niño Contingency Plan for an integrated and timely response to El Niño.

Preparation of the UN’s 2017 Humanitarian Response Plan started in September 2016. However, the results of an assessment conducted in December 2016 showed that the plan was out of date before 2017 had even begun, with needs more severe than expected. This being the case, FSNAU and FEWS NET used the occasion of the launch of the 2017 plan, 17 January in Mogadishu, to issue a joint alert, warning of the possibility of famine in Somalia in 2017.

**FAO** developed a Rapid Results Drought Response Plan for 2016/17. The plan was a time sensitive call for funds amounting to CHF 255,166. Its objective was to respond to the most pressing food security and livelihood needs of drought affected people across Somalia. The Plan focused on four short-term achievable results that needed to be delivered for families to preserve their sources of food and livelihoods:

* Immediate cash relief
* Livestock preservation
* A better harvest in 2017
* Livelihood diversification

## Annex II: External organisations activities

1. **Ethiopia**

To respond to the drought in 2016, **Save the Children** had a multi-sector response in 60 Woredas in 7 regional states, combating the immediate treatment of malnutrition and resulting medical complications amongst children and interventions that address the causes of malnutrition in a sustainable and integrated manner. 30, 000 children were treated for SAM. This was through provision of Food Security and Livelihoods (FSL) with Water and Sanitation and hygiene (WASH) interventions whenever there were Health or Nutrition programmes, and supporting Child protection in Emergencies (CPiE) and Education in Emergencies (EiE) in specified target geographic areas. They provided food, water, medicine and crucial income support to families. They also helped maintain thousands of children in school through provision of food and water at over two hundred schools. To further support children, they set up and trained community groups to look out for and manage issues relating to child welfare such as psychosocial stress, early marriages or child labour. 5415 families and 135,375 livestock were supported in managing livestock health, and 8282 families were given concentrated livestock feed, by the end of the year 790,219 people had been reached with food aid and resilience building support.

In 2016, FAO played a key role in mobilizing the largest recorded emergency seed distribution to farmers affected by the El Nino-induced drought. In 2017, FAO provided crucial support to livestock-dependent communities reeling from the ongoing drought, through mobilizing its own resources[[43]](#footnote-43). FAO’s emergency interventions are embedded in broader resilience-building efforts that seek to simultaneously tackle the root causes of the crisis, while enhancing preparedness and strengthening livelihoods so that families and communities can better cope with future shocks.

**FAO** implemented several intervention programs in response to the drought in 2016. The response programs were geared towards reduction of food gap and enhancement of nutrition, safe guarding of livestock-based livelihoods and enhancement of household resilience. FAO conducted; quality drought- resilient seed production at community level, backyard vegetable production initiatives, rapid response for irrigated food production at household level, cash to destocking weak animals, survival feed provision, voucher-based livestock supplementary feed support, fodder production at community level, support for animal health interventions and vector as well as restoring livelihoods through restocking with small ruminants. In 2016 FAO’s crop seed interventions benefited 200,000 households, and survival and supplementary livestock feeding benefited 9,600 HH. In addition, 1.4 million animals were treated and/or vaccinated and 18 water points rehabilitated benefiting livestock owned by more than 12,000 HH. The destocking of livestock also provided much needed income and improved the nutritional intake of 4 300 HH.

In response to the 2015 drought, **UNICEF** had been supporting the Government in scaling up its response to the emergency by increasing the number of health facilities capable of treating severe acute malnutrition, equipped facilities to treat severe acute malnutrition with supplies such as Ready to Use supplementary food and essential medicines.

By 2017, **OXFAM** had several drought response interventions including water tracking, installation of water storage tanks in key locations and rehabilitation of boreholes; conditional and unconditional Cash Transfers, hygiene promotion and community mobilization sessions and campaigns, distribution of jerry cans, water treatment chemicals, toiletries, AWD kits, construction of latrines and animal health support.

Following early warning and reports on progression of El Niño **USAID** announced an additional CHF 97 million in humanitarian assistance for Ethiopia on January 31, 2016 bringing the total U.S. humanitarian assistance to the country to more than CHF 532 million since the start of fiscal year 2015. The funding provided 176,000 metric tons of relief food assistance, building on earlier contributions for food, nutrition, water, sanitation and hygiene support. Between October 2015 and end of 2016 USAID provided 447,000 metric tons of food to more than 4 million people in Ethiopia as well as provided fodder vouchers to 15,200 households to help them retain livestock.

1. **Kenya**

USAID addressed the 2016/2017 drought through the following long-term Resilience programs

* 2015-2020 RAPID plan that invested CHF34.6 million worth of WASH interventions in Garissa, Isiolo, Marsabit, Turkana, Wajir.
* 2013 – 2017 PREG program that Invested CHF 283.4 million in building assets, livestock markets, and extension services in Baringo, Isiolo, Garissa, Marsabit, Mandera, Samburu, Tana River, Turkana and Wajir
* 2012-2017 REGAL-AG programme that invested CHF 19.5 million in Isiolo and Marsabit in extension services, market access and capacity building among pastoralists.
* 2012-2017 REGAL-IR programme that invested CHF43.8 million in opening businesses for pastoralist communities in Garissa, Isiolo, Marsabit, Turkana and Wajir counties

In response to the drought in 2017 World Vision managed to reach an estimated 391,345 people including 106,331 children. The interventions were building of boreholes, rehabilitation of shallow wells, water tracking, pipeline extension, nutrition screening, nutrition training for health workers and community health workers, cash transfers and food distribution. There were also ongoing resilience building programs that focused on climate smart agriculture such as fodder and vegetable production. The interventions were at a tune of CHF 72,886,342.

## Annex III: Documents reviewed

|  |  |
| --- | --- |
| **Ethiopia** | |
| **Organization** | **Documents Reviewed** |
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| **Save The Children** | 1. Save the Children-two-years-of-drought-response-in-ethiopia-june-2016-final |
| **FAO** | 1. FAO\_Horn of Africa\_Impact of Early Warning Early Action 2. FAO Early Action and Response 2015-2016\_ElNinoReport\_Working Draft 20151112 3. FAO Ethiopia\_El Nino Situation Report\_February 2016 4. FAO in Ethiopia El Niño Response Plan 2016 5. FAO El Niño: Preparedness and Response SITUATION REPORT – April 2016 6. Ethiopia: Drought response plan and priorities in 2017 7. FAOElNinoSitRep\_APRIL2016b 8. FAO\_Saving Livelihoods Saves Lives 2017 |
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**Somalia**

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| **Somalia** | |
| **Organization** | **Documents Reviewed** |
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| **USAID** | 1. <https://www.usaid.gov/NEWS-INFORMATION/FACT-SHEETS/AFRICA-EL-NINO-PREPARATION-AND-RESPONSE> |
| **DFID** | 1. dfid\_somalia\_2017\_irf\_real\_time\_review\_final |
| **IFRC** | 1. Emergency appeal Somalia: Drought-MDRSO005ea 2. Somalia Drought Response 2011 Mid-term evaluation Report 3. MDRSO005\_Emergency Appeal Revision Somalia: Drought 4. MDRSO005\_Emergency Plan of Action\_16032017 5. MDRSO00501OU\_Emergency Plan of Action operation update Somalia: Drought 6. Somalia Responding to Food Insecurity 2017 |
| **WFP** | 1. Somalia: Drought Response Situation Report Feb 2017 2. WFP Somalia Drought Response Factsheet - March 2017 3. WFP Somalia Drought Response Situation Report #6 (August 2017) 4. WFP Somalia Drought Response Situation Report #3 (April 2017) |
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| **UNICEF** | 1. Somalia Annual Report 2017 2. Somalia Humanitarian Situation Report March 2015 3. Somalia Humanitarian Situation Report Feb 2016 4. Somalia:El Niño preparedness & response Nov 2015 |
| Somalia Humanitarian Country Team | 1. Somalia\_el\_nino\_contingency\_planning\_september\_2015 |
| IDDRSI | 1. Somalia\_IDDRSI\_Country\_Review\_Report 2017 |
| ICRC | 1. Somalia Facts and Figures 2017 2. Annual Report 2011 3. Drought Emergency Response in Somalia 2017. |
| FEWSNET | 1. Somalia Food Security Outlook Update December 2017 |

**Kenya**

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## Annex IV: Key Informant Interviews Conducted

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| **Name** | **Organization** |
| David Fogden | Canadian Red Cross society |
| Jane Adisu | German Red Cross society |
| Dominique Mathieu | International Committee of the Red Cross |
| Luke Tredget | British Red Cross Society |
| Paul Davenport | British Red Cross Society |
| Hassan Abdi Jama | Somalia Red Crescent Society |
| Kelvin Kiprono | Kenya Red Cross Society |
| Knut Kaspersen | International Federation of the Red Cross/Crescent Societies |
| Lawrence Lutaaya | International Federation of the Red Cross/Crescent Societies |
| Quentin Le Gallo | European Civil Protection and Humanitarian Aid Operations (ECHO) |
| Fahim Sheikh | International Committee of the Red Cross |
| Dusan Vukotic | International Committee of the Red Cross |

## Annex V: Key organizations in drought response in East Africa

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| **County** | **Key organizations** |
| Ethiopia | WFP  Ethiopian Red Cross Society  UNOCHA  CARE  DFID  USAID  National Disaster Risk Management Commission (NDRMC) |
| Kenya | DFID  Kenya Red Cross Society  UNOCHA BRC UNICEF  EFP  Save the Children  Kenya Hunger Safety Net Program  National Disaster Management Authority |
| Somalia | ICRC  Somalia Red Crescent Society  WFP  FAO  UNICEF  CARE  Concern  BRC  DFID Somalia |

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10. FAO: Ethiopia Drought Response Plan and Priorities 2017 [↑](#footnote-ref-10)
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12. Mid-Year Review Ethiopia Humanitarian Requirements Document, July 2017 [↑](#footnote-ref-12)
13. FAO: Ethiopia Drought Response Plan and Priorities in 2017 [↑](#footnote-ref-13)
14. Kenya Drought 2016: www.climatecentral.org/analysis/Kenya-drought-2016/ [↑](#footnote-ref-14)
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18. Horn of Africa: Humanitarian Impacts of Drought – Issue 6 (OCHA 16th June 2017). [↑](#footnote-ref-18)
19. Somalia Food Security Outlook, October 2017 to May 2018 [↑](#footnote-ref-19)
20. See Annex V [↑](#footnote-ref-20)
21. See Annex III [↑](#footnote-ref-21)
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24. FAO: Ethiopia Drought Response Plan and Priorities in 2017 [↑](#footnote-ref-24)
25. See Annex I-Ethiopia [↑](#footnote-ref-25)
26. See Annex II - Ethiopia [↑](#footnote-ref-26)
27. FAO: Ethiopia Drought Response Plan and Priorities in 2017 [↑](#footnote-ref-27)
28. See Annex II - Ethiopia [↑](#footnote-ref-28)
29. Ethiopian Red Cross Society 2017 emergencies and ERCS and its partners’ responses [↑](#footnote-ref-29)
30. ERCS –FRC Community project through CBHFA Approach 2017. [↑](#footnote-ref-30)
31. See Annex I - Kenya [↑](#footnote-ref-31)
32. See Annex I-Kenya [↑](#footnote-ref-32)
33. UN Office of the Coordination of Humanitarian Affairs (OCHA), (2017). Kenya Drought Response Situation. (Report No.1). [↑](#footnote-ref-33)
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36. Investing in Dignity through Cash Transfer Programming 2018 [↑](#footnote-ref-36)
37. KRCS Drought Response Summary 2018 [↑](#footnote-ref-37)
38. See Annex I - Somalia [↑](#footnote-ref-38)
39. See Annex I - Somalia [↑](#footnote-ref-39)
40. Drought emergency response in Somalia 2017 [↑](#footnote-ref-40)
41. Somalia Facts and Figures 2017 [↑](#footnote-ref-41)
42. Contributions from WFP Ethiopia Country Office: Contacts - Sibi LAWSON-MARRIOTT, Email [sibi.lawson-marriott@wfp.org](mailto:sibi.lawson-marriott@wfp.org). [↑](#footnote-ref-42)
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