ANTICIPATORY ACTION PLAN

For Drought in Somalia

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1. Introduction

Drought in Somalia

In the last quarter century, Somalia has experienced three major droughts and two famines. Famine in 1992 killed over 200,000 people and displaced 1 out of 5. During the 2011 East Africa drought, more than a quarter of a million people died in Somalia, half of them children under five. This event resulted in 955,000 Somali refugees in neighboring countries and devastating economic losses to agriculture, livestock and other critical sectors. In 2016-2017 Somalia experienced another devastating drought which left 5.4 million people in need of humanitarian assistance, displaced more than a million and caused damages and losses over \$3.25 billion. The Horn is expected to face even more erratic and extreme weather patterns over the next half century.

Nearly 8 in 10 Somalis are estimated to live in severe poverty with incidence highest among the displaced. Poverty in Somalia is widespread with 77 percent of the population estimated to live in poverty in 2017¹ - the third highest poverty rate in the region. In rural areas, 8 out of 10 households do not have access to an improved water source within 30 minutes of their primary residences, with even higher rates without access to basic sanitation or hygiene facilities. Over half of children are not enrolled in primary education, and Somalia's infant mortality rate of 9.5 percent is the second highest in the world - largely driven by malnutrition.

Since the 2016/17 drought, the Federal Government of Somalia (FGS), Federal Members States (FMS) and international partners have developed strategies to mitigate severe food insecurity and other risks in Somalia. This has included joint efforts to calculate the damages, losses and needs of the last major drought as captured in the 2018 Drought Impact Needs Assessment (DINA). This work led to the development of the Somalia Resilience and Recovery Framework (RRF) which articulates how partners can better coordinate financing and implementation efforts to address some of the country's most pressing short- and long-term needs.

The World Bank, OCHA as well as UN agency and donor partners are looking to bolster support for the anticipatory action agenda in a harmonized way to mitigate severe food insecurity and other risks in Somalia. Much work has been ongoing at the global level to develop frameworks for shifting financial instruments toward earlier responses. This includes efforts by the World Bank and OCHA to explore new ways of deploying their crisis financing tools such as the IDA Crisis Response Window (CRW) – currently under consideration by IDA Deputies – and the Central Emergency Response Fund (CERF).

¹ Defined by a total daily per capita consumption expenditure below the international poverty line of US\$1.90 (2011 purchasing power parity).

The development of the anticipatory action framework in Somalia builds on existing global experience in early and anticipatory action, including WMO's multi-hazard Impact based forecasting guidelines and the work of the IFRC, WFP, FAO and Start Network on methodologies to trigger early action.

Objectives of Anticipatory Action

Anticipatory action is fundamentally different from humanitarian response and development programming in that anticipatory humanitarian actions are actions taken in *anticipation* of a crisis, either before the shock or at least before additional humanitarian needs have manifested themselves in slow-onset situations, which are intended to mitigate the impact of the shock. They are therefore only implemented if there is a high probability of such a shock occurring, and the implementation is extremely time-critical.

Anticipatory action therefore requires proactive measures to get ahead of major shocks to mitigate their potential impacts on vulnerable populations. Anticipatory action has three core components designed to maximize the speed and effectiveness of interventions, including:

- (i) robust forecasting (to define triggers/parameters) and country-level decision-making processes linked to
- (ii) pre-agreed activities, and
- (iii) pre-agreed financing;

There is a compelling case for anticipatory action in Somalia:

- 1. Anticipatory action helps to **prevent and reduce human suffering**, as interventions mitigate the impact and humanitarian need is reduced; and
- 2. Anticipatory action helps to protect hard-won development gains and enhances resilience.

Anticipatory action differs from early response. Early response, however fast and timely, is a type of reactive intervention that is triggered after a hazard has occurred to address emerging or fully manifested humanitarian needs. Anticipatory action is **not** preparedness, resilience building or climate adaptation, as anticipatory action is in response to a specific relatively imminent high-probability shock.

Core principles of the plan

Multi-sectoral: Partners should prioritize multi-sectoral, co-targeted interventions when possible to maximize synergies. The bundled delivery of services [such as school feeding and locating water services at a school] can have multiplier effects. (not only a food security response)

Centrality of protection: Designing interventions ahead of time allows for a much higher quality of programming in general and to ensure the centrality of protection in particular.

It is critical that anticipatory actions are planned, implemented, monitored and evaluated through the protection lens. In line with the IASC centrality of protection policy, and the principle of "leaving no one behind" (2030 agenda), all partners implementing anticipatory interventions have the responsibility to ensure that their response will not aggravate the exposure of communities to risks of violence, insecurity, extortion and exploitation.

Anticipatory actions must also ensure that they benefit all communities (local communities, displaced communities, returnees, and refugees) based on their needs, with due attention given to obstacles linked to gender, age, disability or social (clan) affiliation. Finally, actions are required to prevent further risks of violence which droughts could trigger, and the resulting displacement and humanitarian dependency.

Cash where possible: Cash should be systematically considered as a response option: Humanitarian actors should work together to ensure that cash is the preferred and default form of assistance where markets and operational contexts permit. Cash should be systematically considered on an equal footing with in-kind assistance to determine the appropriateness of different response modalities.

Development Co-Benefits: The World Development Report 2017 found that many countries are richer not because they have grown faster than poorer ones, but because they have had fewer episodes in which crisis or conflict shrank their economies. Short-term impacts can disguise longer-term impacts, because losses can make households permanently poorer by undermining their capacity to recover.

Making development finance and humanitarian finance complement each other to reduce suffering and address the root causes of problems. Therefore, partners were encouraged to think through how the design of an anticipatory intervention could, where possible, generate development co-benefits, for example so that the quality of repair of boreholes ensures water supplies beyond the crisis. In this respect, the importance of integrating the anticipatory action plan into the overall humanitarian/development architecture in Somalia and ensuring alignment with other relevant planning frameworks, was broadly agreed and emphasized.

2. The evolution of the impact of a drought shock

Section to be updated once revised FSNAU input is received.

Out of the ordinary shocks in Somalia have historically been the result of consecutive failed rainfall seasons; however, this is a not a linear process. The impact of a shock cascades through society, results in secondary and tertiary shocks [food price increases, resource conflicts etc.] and exacerbates existing vulnerabilities. There are three related dominant processes that result in humanitarian need:

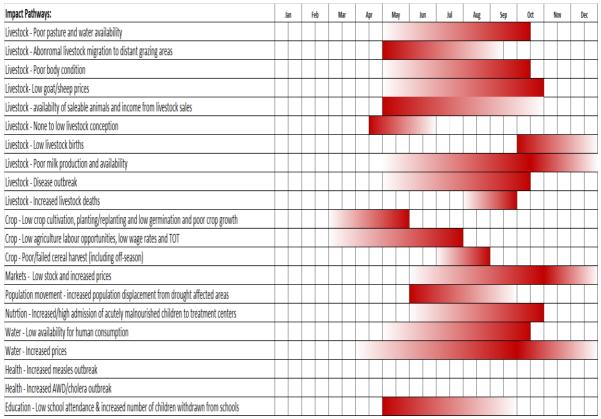


Figure 1: Somalia Crisis timeline (initial draft, February 2020) provided by FSNAU. For projected poor Gu (long) rains.

Water deficit for human consumption

Between starvation and death is disease: After water sources dry up, people are forced to consume contaminated water, raising the risk of communicable diseases. Cholera outbreaks occur within 2-3 weeks after water sources have dried up, and measles outbreaks after 3-4 months. The exposure to disease results in an increase in malnutrition and child mortality. The lack of clean water also disrupts the provision of public goods, like education in schools, and healthcare in hospitals and clinics. Commercially purchased water is more expensive and people who are forced to buy are accumulating debt. Having to travel further to access water also exposes the population, especially women and girls, to SGBV.

Water deficit for agricultural production

Insufficient water to grow crops reduces the yield and thus the income of the farmers. In addition, there are reduced agricultural labor opportunities for casual workers, reducing their income. A poor harvest leads to food scarcity, which drives up food prices and reduces purchasing power in both rural and urban areas. This leads to reduced food consumption, and rising food insecurity and poor nutrition. Collapse in livelihoods and disruption in the provision of public goods also lead to displacement out of rural areas. Many crop pests become more prevalent during a drought (e.g. Fall Armyworm, aphids), and compound the already severe production losses faced by farmers during a drought.

Water and fodder shortage for animal consumption

Depleted pasture and limited water results in poor livestock body conditions, reducing their price and breeding. Herds start shrinking [due to lower reproduction rates and deaths], representing the loss of livelihood assets and related food sources such as meat and milk, leading to rising child malnutrition. The concentration of weak animals around water points makes them more prone to animal disease outbreaks which can lead to export bans for livestock, which accounts for the majority of export, reducing their price and hard currency income. Also when livestock fall ill, their products are unsafe for human consumption (milk, meat). Competition over scarce water and pasture causes conflict and further displacement.

3. Forecast and Triggers

Forecast

Financing for anticipatory action will be triggered when there is an increased risk of an extraordinary crisis, which would likely result in out-of-the-ordinary and severe spikes in food insecurity, U5 malnutrition, population displacement, school drop-out and/or communicable disease outbreaks. Anticipatory action should focus on mitigating and preventing "out-of-the-ordinary crises" like the drought-induced crises 2010/11 (famine) and 2016/17 (near famine).

There is consensus that food security forecasts can generally serve as an acceptable proxy for worsening conditions across many sectors, including for lagging (or cascading) indicators, like malnutrition and displacement. While food security forecasts may be an acceptable means for mobilizing global funding earlier, this does not imply that the underlying crisis is strictly a food security crisis. In fact, needs are multi-dimensional, interrelated and complex.

Forecast sources

The Somalia Food Security and Nutrition Analysis Unit (FSNAU) together with FEWS NET provides projections on a quarterly basis. These shall serve as data sources on which to base the activation of the Anticipatory Action Framework.

Trigger and thresholds

While subnational and complementary triggers are under development, finance will be triggered if the projected food insecurity level and projected increase exceed the following pre-identified thresholds.

- The projected population in phase 3 and above exceed 20%, AND
- The projected population in phase 3 is projected to increase by a further 5%, OR

■ The projected population in phase 4 or above is 2.5%²

Such thresholds establish a minimum level of projected food insecurity as well as account for risk of worsening trends, serving as a quick reference for events that may qualify for anticipatory financing. The triggering rule is based on the proportion of the population expected to be in IPC3 (crisis) or higher ("IPC3+") conditions. This is widely accepted as an appropriate focus for anticipatory action as those experiencing IPC 3 conditions are in "crisis" and have high food consumption gaps and rates of acute malnutrition. These conditions are also accompanied by the accelerated depletion of livelihood assets which leave affected populations highly susceptible to future shocks.

Roles and responsibilities in monitoring the projections

FSNAU as provider of IPC projections is responsible for alerting the HC should the trigger be reached according to their projection. When a trigger has been reached, it is then responsibility of the HC (or OCHA Country Office on her/his behalf) to immediately send the trigger notification to OCHA headquarters to ensure availability of funds. In addition, the HCT and ICCG should be alerted.

4. Anticipatory Actions

Anticipatory actions will aim to interrupt the above pathways by targeting populations most at risk of being impacted by a shock. The targeting of anticipatory action is therefore distinct and different from targeting for humanitarian response which is determined by being in need.

Priority interventions

The identified anticipatory action can be categorized in two ways:

Activities that prevent or mitigate the potential impact.

Empower communities to make informed choice by risk communication

These are interventions that provide advance warning of risk and opportunities to local communities to allow them to make risk-informed choices.

Sustain clean water provision for animals and humans by rehabilitating water points and optimal water capture and storage

² The last criterion is included as a fail-safe to capture movements into more extreme stages of severe food insecurity.

Drought will result in shortage of water that forces animals and humans to consume contaminated water and travel longer distances to access those, leading to communicable disease outbreaks, malnutrition and increased mortality, displacement, asset loss in case of loss of livestock and conflict risk. Sustaining the supply of clean water, will help mitigate potential water scarcity during a drought situation by increasing access to clean water, and mitigate the secondary impact of such a shortage [displacement and disease outbreaks caused by water scarcity].

Sustain food production for human consumption through the distribution of drought tolerant or short season seed varieties, the promotion of new varieties like green gram and reduction of severe losses due to pests

During drought, most crop varieties perform poorly due to limited moisture, high temperatures, salinity and higher incidences of pests and diseases. This package would include a cereal and a pulse that mature faster and perform better under drought conditions than seeds usually distributed to farmers in emergency. This will ensure optimal yield by farmers (compared to no yield in the event of severe drought where mono-cropping is practiced). Fall Armyworm prevalence is higher during drought, and control efforts have proven to reduce crop losses by a significant margin

Sustain animal productivity in times of crisis through livestock supportive treatment campaign and provision of supplementary feeds

With worsening drought conditions, livestock illness and disease can spread rapidly, reduce animal productivity, kill livestock in large numbers and ultimately deplete a major food source for much of the affected population. A countrywide treatment campaign can become necessary to treat a critical mass of livestock against common illness and bacterial disease that spread quickly during drought (e.g. parasites, respiratory and skin infections). While reducing the rate of disease spread and morbidity, the treatment quickly boosts animals' body condition, milk production and overall energy to move, feed and remain a viable asset. Providing livestock supplementary feeds will boost livestock production [particularly milk yield], resulting in rapid improvements to household food supply and nutrition. Feed resources will save livestock and the lives of people who depend on livestock for daily milk supply [and other animal products] to survive.

Activities that stabilize and protect vulnerable people and contain worsening conditions

Stabilize purchasing power of the vulnerable people by horizontally and vertically scaling up cash transfers

As a result of a drought shock casual agricultural labour opportunities decline, agricultural yields fall and livestock conditions deteriorate reducing income for farmers and pastoralists. At the same time, food prices rise, reducing purchasing power for vulnerable households who will be forced to liquidate their assets. To prevent districts classified as IPC2, which cannot fully meet livelihood protection needs, from falling to level 3 and 4 cash transfers are provided to vulnerable households by horizontally and vertically scaling up cash transfers systems:

Contain and rapidly respond to any communicable disease outbreaks by standing up/re-activating Rapid Response Teams

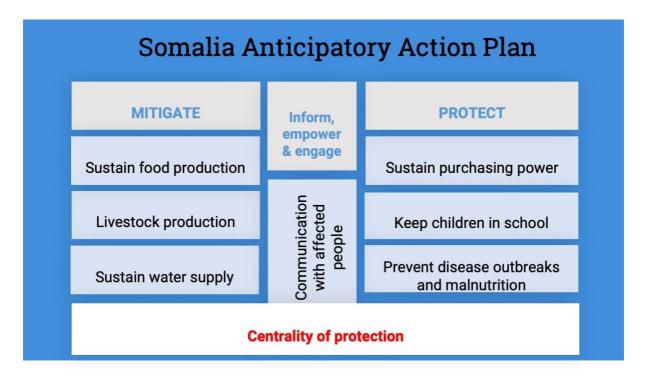
There is a very clear causal link between drought and increased morbidity and mortality rates of several diseases and this is further exacerbated by drought related displacement. While the causal link between drought and communicable diseases such as acute watery diarrhoea (AWD) and measles as well as acute malnutrition is well established, managing these illnesses puts considerable pressure on the health system This jeopardises resilience and development gains and risks creating a secondary healthcare crisis that can drive populations further into crisis.

Keep children in school through school feeding programmes

The food insecurity and depletion of livelihoods lead to school dropout because of the lack of income at household level and no means for the parents to pay for the school fees. By targeting children still at school feeding [with access to safe water at school level] contribute to avoid dropout and households food security deterioration and, to some extent, contribute to avoid household displacement.

Blanket feeding programme to protect the nutritional status of the most vulnerable people

The aim of this blanket feeding programme, is to protect the nutritional status of the most vulnerable people [children, pregnant and lactating women] during the peak drought period. In addition, blanket supplementary feeding would improve timely detection and referral of the malnourished children, pregnant and lactating women.



Summary of interventions and key information

The following table presents key information on the anticipatory actions (indicative target caseload, lead times and cost estimates).

Cluster	Anticipatory Action	Agency(ies)	Caseload scenario	Lead time	Cost Estimate
	Drought-smart farming package distribution	FAO	Approx. 40 000 households (depending on need and season)	45 days in south central, 90 days in northwest	≈ USD 270-330 per household (in rainfed and irrigated areas, respectively)
	Control of Fall Armyworm or other crop pests (e.g. aphids)	FAO	Depends on region affected/need	75 days	≈ USD 60 000 per district
	Desert Locust early control	FAO	Depends on region affected/need	60 days	≈ USD 33 per hectare
FOOD	Countrywide livestock supportive treatment	FAO	Up to 14.7 million animals based on clinical diagnosis	60-75 days	≈ USD 0.40 per animal
FOOD SECURITY	Livestock Supplementary feeds	FAO	Depends on region affected/need	120 days	≈ USD 110 per household
	Unconditional cash programmes to prevent depletion of assets	FAO & WFP	Depends on region affected/need	30-90 days (beneficiaries registered vs not registered)	Depends on the value of the Minimum Expenditure Basket, in the target area, at the time of implementation
	Conditional Cash programmes (CFW, FFA)	FAO & WFP	Depends on region affected/need	60-105 days (beneficiaries registered vs not registered)	Depends on the value of the Minimum Expenditure Basket, in the target area, at the time of implementation
				4 weeks	
	Rehabilitation/upgrade of existing strategically located boreholes	UNICEF, IOM	600,000 individuals		7,200,000
WASH				4 - 6 weeks	
	Drilling/installation of new strategically located boreholes		250,000 individuals		20,000,000

	Rehabilitation/upgrading/construction of shallow wells	UNICEF, IOM	400,000 individuals	2-4 weeks	3,600,000
	Temporary/Permanent extraction of sub-surface water in/near dried river beds	UNICEF, IOM	300,000 individuals	3 months	3,600,000
	AWD outbreak prevention; preventive treatment of unprotected water sources, provision of household water treatment and safe storage products (HWTSS) and WASH in emergency treatment centers.	UNICEF, IOM	2,700,000 individuals located in AWD/Cholera hotspots with an increased exposure to outbreak risk factors	1 month	13,050,000
	Emergency school feeding	UNICEF	338,773 school children	1.5 months	USD 7 per child per month for 6 months - USD 42
	Water for school children	UNICEF	338,773 school children	1.5 months	for 6 months it is USD 3.96 per child
	Teacher incentives	UNICEF	8,469 teachers	1.5 months	The standard emergency techer incentive is USD 100 per months
EDUCATION	Child protection services	UNICEF	338,773 school children	1.5 months	a standard recretional kit: cost per child is USD 3 the total cost amounts to USD 381,060 (4234 teachers trained) the total cost per child for child protection services is USD 4.1
NUTRITION	Supplementary feeding (BSFP) micro-nutrients supplementation	WFP	Children U2 -90,948 PLW- 30,943	1 month 1 month	3154077 2231609

	Micro-nutrients supplementation Micronutrient tabs,/PAC-1000 PAC	UNICEF	PLW- 282,571	1 month	729881
	Multiple Micronutrient Powder (MNP), single-use 1-gram sachets, packs of 30 sachets	UNICEF	Children U2- 334,911	1 month	612887
	Establish Public Health Emergency Operations Centres (PHEOCs), including mobilization of Rapid Response Teams	WHO	The intervention will target an estimated vulnerable people in about one third of the districts in Somalia assuming will be affected by drought. The target population will include IDPs, women, elderly and children under 5 years of age in the drought affected districts. The estimated number of people living in these districts will be 5,000,000	one month	\$ 1,650,000
HEALTH	Scale up the Early Warning Alert and Response Network (EWARN) - mainly training and procurement	WHO	The intervention will target an estimated vulnerable people in about one third of the districts in Somalia assuming will be affected by drought. The target population will include IDPs, women, elderly and children under 5 years of age in the drought affected districts. The estimated number of people living in these districts will be 5,000,000	one month	\$ 735,000
	Strengthen laboratory capacity	WHO	The intervention will target an estimated vulnerable people in about one third of the districts in Somalia assuming will be affected by drought. The target population will include IDPs, women, elderly and children under 5 years of age in the drought affected districts. The estimated number of people living in	one month	\$ 250,000

	Risk communication	WHO	these districts will be 5,000,000		
			estimated vulnerable people in about one third of the districts in Somalia assuming will be affected by drought. The target population will include IDPs, women, elderly and children under 5 years of age in the drought affected districts. The estimated number of people living in these districts will be 5,000,000	one month	\$ 280,000
	Infection prevention and Control activities in health facilities	WHO	The intervention will target an estimated vulnerable people in about one third of the districts in Somalia assuming will be affected by drought. The target population will include IDPs, women, elderly and children under 5 years of age in the drought affected districts. The estimated number of people living in these districts will be 5,000,000	one month	\$ 1,400,000
	Provision of emergency lifesaving healthcare services (curative care, case management, referral, vaccination campaigns) through static and mobile clinics and outreach	UNICEF	300,000 (most vulnerable children and women in IPC 3 and 4 areas, including those living in IDP camps, and host communities primarily)	2-4 weeks	3,097,347
PROTECTION	Protection monitoring for corrective response management	UNHCR	FSNAU caseload	Two weeks	For a deployment of monitors in 40 districts for three months: 300,000 USD

	Community level risk communication	UNICEF/OCHA/all relevant clusters	Scenario 1 (Worst case): 30 affected districts; approximately 3.5 million population Scenario 2 (Moderate shock): 15 affected districts; approximately 1.75 million population Scenario 3 (Most optimistic scenario): 5 affected districts; approximately 0.58 million	60 days	\$459,200 (plus \$80,000 for material printing, \$150,000 for training, \$152,000 for monitoring, \$105,000 for
Risk			population		surge)
Communication	Media campaign	UNICEF/OCHA/all relevant clusters	Scenario 1 (Worst case): 30 affected districts; approximately 3.5 million population Scenario 2 (Moderate shock): 15 affected districts; approximately 1.75 million population Scenario 3 (Most optimistic scenario): 5 affected districts; approximately 0.58 million	60 days (integrated with mobilization under community-leve risk communication)	
			population		\$180,000

Calendar of anticipatory actions

To achieve maximum impact and mitigate humanitarian needs arising as a result of the extraordinary drought shock, activities must be well timed in line with the crisis timeline presented in section 2. The following tables show when interventions should take place if the triggers is reached in case of a projected poor Gu season or a projected poor Deyr season:

Projected poor Gu (long rainy) season

green= core activities if Gu is projected to be poor Mobilization for Gu activities follow up/PDM for Gu activities \$\$ = receipt of funds

Cluster	Intervention/Activity	Ja	n	Feb	Mar	April	N	I ay	Ju	ne	Ju	ıly	Au	ıg	Se	ep e	C	ct	N	ov	D	ес
	Drought-smart farming package distribution	\$\$		Ï																		
	Control of Fall Armyworm (FAW) or other crop pests (e.g. aphids)																				\$\$	
	Desert Locust early control																\$\$					
Food Security	Countrywide livestock supportive treatment						\$\$															
	Livestock supplementary feeds							No	ot appli	icable	(in this	seasoi	1)									
	Unconditional cash transfers (farmers)																					\$\$
	Unconditional cash transfers (pastoralists)							No	ot appl	icable	(in this	seasoı	1)									
	Conditional cash transfers					\$\$																
	Borehole rehabilitation /upgrading																	\$\$				
	Borehole drilling and construction of water distribution points																	\$\$				
WASH	Shallow wells construction /rehabilitation/upgrading																			\$\$		
	Temporary/Permanent extraction of sub-surface water in/near dried river beds																			\$\$		
	Water points disinfection/HHWTS		\$\$																			
Nutrition	Agro pastoral (BSFP & MNS/vitamins)									\$\$												

	Pastoral (BSFP & MNS/vitamins)								\$\$						
	IDP/URBAN (BSFP & MNS/vitamins)								\$\$						
Education	Emergency school feeding					\$\$									
Education	Water for school children					\$\$									
Education	Teacher incentives					\$\$									
Education	Child protection services					\$\$									
	Establish Public Health Emergency Operations Centres (PHEOCs), including mobilization of Rapid Response Teams	8	3\$												
	Scale up the Early Warning Alert and Response Network (EWARN) - mainly training and procurement	4	3\$												
	Strengthen laboratory capacity	9	3\$												
Health	Risk communication	9	3\$												
	Infection prevention and Control activities in health facilities	8	3\$												
	Provision of emergency lifesaving healthcare services (curative care, case management, referral, vaccination campaigns) through static and mobile clinics and outreach			\$\$											
Protection	Protection monitoring for corrective response management				\$\$										
Risk	Community level risk communication			\$\$											
Communication	Media campaign			\$\$											

Projected poor DEYR (short rainy) season

yellow=core activities if Deyr fails

Mobilization for Deyr activities

follow up/PDM for Deyr activities

\$\$ = receipt of funds

Cluster	Intervention/Activity	Jan	Feb	M	[ar	Aj	pril	M	ay	Ju	ne	Ju	ıly	A	ug	Se	ep	O	ct	N	ov	De	ec
	Drought-smart farming package distribution											\$\$											
	Control of Fall Armyworm (FAW) or other crop pests (e.g. aphids)											\$\$											
	Desert Locust early control							\$\$															
Food Security	Countrywide livestock supportive treatment																			\$\$			
	Livestock supplementary feeds														\$\$								
	Unconditional cash transfers (farmers)										\$\$												
	Unconditional cash transfers (pastoralists)															\$\$							
	Conditional cash transfers															\$\$							
	Borehole rehabilitation/upgrading								\$\$														
	Borehole drilling and construction of water distribution points								\$\$														
WASH	Shallow wells construction/ rehabilitation/upgrading												\$\$										
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Temporary/Permanent extraction of sub-surface water in/near dried river beds							\$\$															
	Water points disinfection/HHWTS														\$\$								
Nutrition	Agro pastoral (BSFP & MNS/vitamins)														·						\$\$		

	Pastoral (BSFP & MNS/vitamins)												\$\$	
	IDP/URBAN (BSFP & MNS/vitamins)												\$\$	
	Emergency school feeding										\$\$			
Education	Water for school children										\$\$			
Equeation	Teacher incentives										\$\$			
	Child protection services										\$\$			
	Establish Public Health Emergency Operations Centres (PHEOCs), including mobilization of Rapid Response Teams Scale up the Early Warning Alert								\$\$					
	and Response Network (EWARN) - mainly training and procurement								\$\$					
Health	Strengthen laboratory capacity								\$\$					
	Risk communication								\$\$					
	Infection prevention and Control activities in health facilities								\$\$					
	Provision of emergency lifesaving healthcare services (curative care, case management, referral, vaccination campaigns) through static and mobile clinics and outreach									\$\$				
Protection	Protection monitoring for corrective response management									\$\$				
Risk Communication	Community level risk communication								\$\$					
Communication	Media campaign								\$\$					

Targeting

To be inserted (following learning from first implementation)

Ensuring readiness for a timely implementation of anticipatory action

The success of anticipatory action depends on the timely delivery of the interventions. This is frequently hampered by several factors, the requirement to assess needs, mobilise funds, deploy staff, operationalize partnerships, and establish supply pipelines in order to deliver at scale (including procurement, transportation to and distribution of relief assistance in the affected area).

Over time anticipatory action and humanitarian response readiness should ideally become an integral part of the contingency planning process in compliment to longer term prevention and mitigation activities undertaken by the Government and development partners.

Delays are often the result of operational and/or capacity gaps (lack of access due to impact on transport infrastructure or security concerns, or the unavailability of key items in-country, lack of expertise of staff in-country), it is critical that every effort is made to address these challenges ahead of time and thereby minimize the gap in the initial response.

In the detailed intervention sheets in Annex XX, agencies have outlined key considerations relating to readiness for each intervention. This should inform further analysis discussions in Somalia, including:

- How will the priority needs be met? (e.g. What goods and/or services can be provided to meet the need. Could it be through more than one activity).
- Logistically how will the activity be delivered?
- Who are the partners that you will work with to undertake the activity?
- What operational cross-cutting issues and/or opportunities are there to align with other sectors/clusters or agencies.

Implementing organizations

The anticipatory action plan will be implemented by the Somalia Humanitarian Country Team under the leadership of the Humanitarian Coordinator, in collaboration with the World Bank and the Somalia government institutions as well as the Somalia Food Security and Nutrition Analysis Unit (FSNAU).

Information on the capacity of UN agencies can be found in the annexes with the sector inputs. UN agencies will work together with international and national implementing partners, including NGOs and the Red Cross/Red Crescent.

5. Financing anticipatory action

This framework for anticipatory action seeks to serve as an overview of the indicative anticipatory actions that are most likely to help mitigate the impact of a shock (drought in the case of Somalia), stabilize vulnerable people and prepare for scale up for humanitarian action. There are various instruments, including the CERF, the World Bank's Crisis Response Window (CRW), Education Cannot Wait (ECW), bilateral donors and UN agencies' internal reserve funds that, within their own established criteria and in complementarity, can finance part of this plan when the need arises.

Central Emergency Response Fund

Established by the UN General Assembly in 2005 as the UN Emergency Revolving Fund, CERF enables humanitarian responders to deliver life-saving assistance by providing rapid and flexible funding when it is needed most. CERF funds allow UN country teams to kick-start relief efforts immediately through a coordinated and prioritized response, and help partners scale up their relief operations in underfunded emergencies to avoid critical gaps. UN organizations are directly eligible to receive CERF funding and implement grants in partnership with local and international non-governmental organizations (NGOs), host governments and Red Cross/Red Crescent societies.

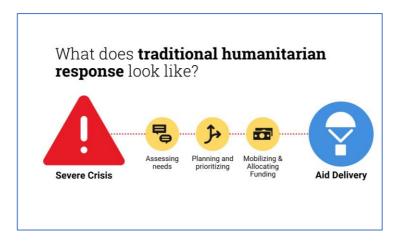
See Annex II, for an outline of how CERF finance would be released.

World Bank Crisis Response Fund

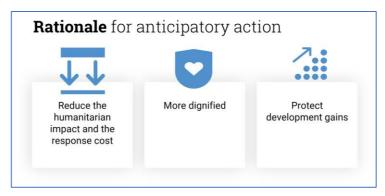
To be added and finalized, when WB design is completed.

Annexes

I. Anticipatory Action Objectives, impact and rationale









II. Full list of anticipatory actions (for drought)

Cluster	Anticipatory Action	Agency(ies)
	Drought-smart farming package distribution	FAO
	Control of Fall Armyworm or other crop pests (e.g. aphids)	FAO
FOOD	Desert Locust early control	FAO
SECURITY	Countrywide livestock supportive treatment	FAO
SECORTI	Livestock Supplementary feeds	FAO
	Unconditional cash programmes to prevent depletion of assets	FAO & WFP
	Conditional Cash programmes (CFW, FFA)	FAO & WFP
	Rehabilitation/upgrade of existing strategically located boreholes	UNICEF, IOM
	Drilling/installation of new strategically located boreholes	UNICEF, IOM
WASH	Rehabilitation/upgrading/construction of shallow wells	UNICEF, IOM
WASH	Temporary/Permanent extraction of sub-surface water in/near dried river beds	UNICEF, IOM
	AWD outbreak prevention; preventive treatment of unprotected water sources, provision of household water treatment and safe storage products	UNICEF, IOM
	(HWTSS) and WASH in emergency treatment centers.	UNICEF, IOM
	Emergency school feeding	UNICEF
EDUCATION	Water for school children	UNICEF
EDUCATION	Teacher incentives	UNICEF
	Child protection services	UNICEF
	Supplementary feeding (BSFP)	WFP
NUTRITION	micro-nutrients supplementation	WFP
NUTRITION	Micro-nutrients supplementation Micronutrient tabs,/PAC-1000 PAC	UNICEF
	Multiple Micronutrient Powder (MNP), single-use 1-gram sachets, packs of 30 sachets	UNICEF
	Establish Public Health Emergency Operations Centres (PHEOCs), including mobilization of Rapid Response Teams	WHO
	Scale up the Early Warning Alert and Response Network (EWARN) - mainly training and procurement	WHO
	Strengthen laboratory capacity	WHO
HEALTH	Risk communication	WHO
	Infection prevention and Control activities in health facilities	WHO
	Provision of emergency lifesaving healthcare services (curative care, case management, referral, vaccination campaigns) through static and mobile	UNICEF
	clinics and outreach	
PROTECTION	Protection monitoring for corrective response management	UNHCR
	Community level risk communication	UNICEF/OCHA/all
Risk		relevant clusters
Communication	Media campaign	UNICEF/OCHA/all
		relevant clusters

III. CERF finance release process

The following lays out the steps that would be taken at country level and headquarters once the pre-agreed food insecurity thresholds have been reached (according to the pre-agreed forecasting framework) in order to disburse funding from CERF.

Principles and assumptions

Anticipatory action should build on and reinforce existing and functioning structures, and not build parallel systems. The design of the finance allocation process aims to delegate authority to the field, increase responsibility and accountability by in-country stakeholders. It is meant to be simple, quick and predictable.

For what follows, the assumption is that the pre-agreed threshold (trigger) has been reached. It is also assumed that a validated forecasting framework is in place; and a pre-agreed anticipatory action plan exists which lays out a list or prioritized activities, timelines, capacity requirements for action to mitigate an anticipated shock.

Step 1: Trigger validation

Indicative timeline: 1 day (= 1 meeting)

Who is involved: The RC/HC decides, OCHA to provide coordination support.

Key questions:

- 1. Is there any country-level data that disagrees with the forecast?
- 2. Was the trigger mainly reached because of drought? (if not, many of the pre-agreed activities will not be useful)

Step 2: Rapid analysis of projected impact

Indicative timeline: 2 days

Who is involved: RC/HC leads process, OCHA supports. Key actors for the

implementation of the pre-agreed plan may be consulted.

Key questions:

- 3. What is the potential scope and scale (number of people affected and locations)?
- 4. Are there indications that the pre-agreed activities would not be the right ones?
- 5. What is the indicative cost of implementing the pre-agreed activities / action plan (i.e. requirement and timeline)?
- 6. Is the capacity in place (readiness) to implement the pre-agreed action plan or parts of it (i.e. to help define the financial ask)?
- 7. Are there access restrictions and how to mitigate those?

The RC/HC informs the ERC and seeks decision on total CERF funding envelope as per the overall requirement. ERC decision on allocation envelope (short turn-around) and communication back to RC/HC.

Step 3: Re-calibration of Anticipatory Action Plan

Indicative timeline: Who is involved:

1-2 days (might be covered through meeting on step 1, too). RC/HC leads with support of OCHA. This should include relevant actors involved in implementing the pre-agreed anticipatory action plan.

Key questions:

- 1. Which activities need to be prioritized and which locations and vulnerable groups will be targeted?
- 2. Are any adjustments needed to the pre-agreed plan to address the potential [drought]? If yes, what are they? Such changes if any should be minimal and in line with the objective of the plan.
- 3. How will the overall funding envelope by the CERF be prioritized towards the activities to maximize impact?
- 4. Which organizations are best placed to deliver the prioritized activities?

Step 4: Preparation and submission of CERF application

Indicative timeline:

5 days

Who is involved:

OCHA office compiles information from anticipatory action plan and rapid impact analysis into chapeau and projects. Cluster coordinators, working closely with the relevant agencies, update sections in projects as necessary. HC submits to CERF secretariat. (anticipatory action plan is annexed to application).

Step 5: Due diligence and disbursement approval

Indicative timeline: 4 days

Possible, additional action triggered by OCHA (headquarters and/or field):

- OCHA may engage in public and private advocacy to maximize resource mobilization. Other actors are encouraged to do the same.
- OCHA may facilitate the link with other financing instruments for anticipatory action link into this process (World Bank, Start Fund, DREF, crisis modifiers, etc.)
- OCHA headquarters may trigger an evaluation on how the CERF allocation achieved the strategic objective of anticipatory action.