

www.ifrc.org
Saving lives,
changing minds.

IFRC Situation Report: Regional Food Crisis in Africa – 6 November 2017

 International Federation
of Red Cross and Red Crescent Societies



Hawa Magaji sits with Nigerian Red Cross divisional secretary of Song. During the armed conflict in north east Nigeria in 2014, Hawa Magaji's community was attacked. She escaped with her family to safety. She returned to find that her goats and grains, including maize and groundnuts, were gone. With the help of the Nigerian Red Cross, Hawa has received enough money to invest back into her livelihood. She has bought seven goats, fertilizer for her farm and food to sustain her until her crops grow. She has also been able to renovate the foundations of her home where her children reside. "Smiling alone cannot express how happy I am, because I have never received any help like this in my life," says Hawa. Gelena, Adamayo, Nigeria. Source: IFRC/Corrie Butler

Africa Food Crisis situation analysis

In October, the 2017 edition of the [Global Hunger Index report](#) (GHI)¹, subtitled *the inequalities of Hunger* in reference to the inextricable links between Hunger and inequality- geographic, income and gender -, was released. As related in the document, despite a decline of the level of hunger in the world by 27 percent percent from the 2000 level, the global level remains high, with great differences not only among countries but also within countries, where at the subnational level, inequalities of hunger are often obscured by national averages². With 20 million people currently at risk of famine, the [Zero Hunger by 2030](#) is still far from becoming a reality.

Of the 119 countries assessed, eight countries suffer from extremely alarming or alarming levels of hunger. Except for Yemen, all are in Africa, south of the Sahara: Central African Republic (CAR), Chad, Liberia, Madagascar, Sierra Leone, Sudan, and Zambia. Many of these countries have experienced political crises or violent conflicts in the past several decades. In reality, the overall outlook of the African continent is worse than what is reported, since Burundi, the Comoros islands, DRC, Eritrea, Somalia and South Sudan are among the 13 countries that lack sufficient data for calculating 2017 [GHI score](#) in fact some of these may account the highest levels of hunger. For an overview see in annex the [GHI index mapping](#) of the countries.

The latest UNOCHA [Horn of Africa drought update snapshot](#), dated 3 November, relates that **15 million** people are now **severely Food Insecure** in the Horn of Africa with some **3.1 million in Somalia**, **8.5 million in Ethiopia** and **3.4 million in Kenya**. An estimated **5.6 million** children are projected to be acutely malnourished this year, including **1.2 million in Somalia**. **Measles cases** are on the rise in **Somalia** where **18,000** cases were recorded between January and September while **3,151** measles cases have been reported in **Ethiopia**. Number of **AWD/Cholera cases** on the other hand, are declining. In **Somalia**, there has been a significant reduction in new AWD/Cholera cases over the last three months with no deaths reported. In **Ethiopia**, close to **48,000** AWD cases have been reported to date in 2017. but, except for Somali, overall situation on a decreasing trend. In **Kenya**, where some **3,304** cholera cases and **60 deaths** have been reported in 2017, the situation has stabilized in recent weeks, except in four counties (Garissa, Nairobi, Embu and kajiado) still reporting active cholera cases. There are currently **2.5 million people displaced** by drought and conflict in **Ethiopia, Somalia and Kenya; (IDPs)** and **55,000 refugees**. In **Somalia**, some **943,000** people have been internally displaced due to the drought from November 2016 to 22 October 2017, according to preliminary figures, while some **168,000** people have been displaced by conflict in 2017. In **Ethiopia**, nearly **1.1 million** people had been internally displaced by the end of August 2017, including some **423,914** displaced as a result of drought. At last in **Kenya**, **39,256** people had been displaced as at the end of October due to conflict and drought, among which some **15,957** children.

A [Food Security alert](#) was issued through Fewsnets on 29 September to state that a risk of Famine (IPC Phase 5) will persist in the sub-region given the extended drought, heavy livestock losses, disease outbreaks, and persistent challenges with provision of life-saving humanitarian assistance, without which outcomes would likely be worse. More details for current countries of intervention, **Ethiopia, Somalia, Kenya and South-Sudan**, can be found under their respective sections in this report. For further projections into 2018, Fewsnets also published, in October, its [Food Assistance Outlook Brief](#)

1. jointly published by the International Food Policy Research Institute (IFPRI), Concern Worldwide, and Welthungerhilfe (WHH). The annually published index aims at reflecting the multidimensional nature of hunger combining four indicators into one index: undernourishment, child wasting, child stunting and child mortality.

² to account for this the report provides a look at subnational-level data

on projected food assistance needs where **Ethiopia, South Sudan, Somalia, Kenya, Uganda** are expected to remain in Crisis or emergency.³

In **Southern Africa**, no new update as minimal (IPC Phase 1) outcomes are expected to continue through January 2018 in most surplus-producing areas in the region, while deficit production areas are expected to start experiencing Stressed (IPC Phase 2) outcomes starting in October. According to the [Food Assistance Outlook Brief](#) of October, the following countries should experience throughout the end of 2017 and beginning 2018:

- Crisis (IPC Phase 3) outcomes for **Democratic Republic of Congo** (Oct-Dec 2017), and **Madagascar** (Oct 2017- March 2018);
- Stress (IPC phase 2) outcome for **Mozambique** (oct 2017-March 2018), **Zimbabwe** (Nov 2017-February 2018) and **Lesotho** (Dec 2017-feb 2018). The situation is monitored closely by the Red Cross Red Crescent (RCRC) teams at regional, cluster and country levels.

In **West Africa**, improvement of the food security situation is expected from October except in **Nigeria**, which continues to record the highest level of food insecurity in the region; **Chad** where the persistence of the security crisis in the Lake Chad Basin continue to disrupt main livelihoods and the normal functioning of markets, keeping the Lake Chad region of Chad Crisis (IPC Phase 3) and the **Diffa region of Niger** in Crisis (IPC Phase 3) and Mauritania (IPC phase 3) until a June 2018.

Diseases outbreaks could compound already complex situations. WHO's [latest update on plague](#) outbreak identified **Tanzania, South Africa, Seychelles, Ethiopia, Mauritius, Reunion Island, Kenya, Comoro and Mozambique** as possible future points of contact with the disease if it should spread. So far, the plague in Madagascar has claimed 124 lives. An IFRC Emergency Appeal operation for [Madagascar](#) and DREF Plague preparedness operations In [Comoros Islands](#) and [Mauritius](#) are currently ongoing. The [Marburg virus](#) outbreak in Uganda and potential spreading is also a concern for the Agency.

For deeper Regional insight:

OCHA: [Regional Outlook for the Horn of Africa](#) – platform

Acaps: [Humanitarian access situation](#), August 2017 – MAP

2017 [Global Hunger Index](#) (GHI), October 2017 and [Synopsis](#) and [website](#)

MMP: [How Africa can build a future free from Hunger and Malnutrition](#). Oct 2017

All Africa: [Empower girls in Emergencies](#), October 2017

FAO: [The State of food and agriculture](#) October 2017

Al Jazeera: [Building an Africa free from Hunger and poverty](#), 8 October (Koffi Annan)

Fewsnet: [Food Assistance Outlook Brief](#), October 2017

The [Global Nutrition Report](#), 4 November 2017

DW: [COP23:What's at stake](#), 3 November

All Africa: [Global Nutrition Summit 2017](#), 5 November

FSNWG: [Snapshot at Food Security and Nutrition Situation](#), 6 November

To be found Annexed:

[COMMUNICATIONS](#)

[MAPS \(IFRC and External\)](#)

³ Learn about scenario development, FEWS NET's methodology to develop food security projections eight months in the future, by [watching their new eight-minute video](#).

To access directly Country's updates:

[Ethiopia](#) [Kenya](#) [Nigeria](#) [West Africa/ Sahel](#) [Somalia](#) [South Sudan](#)

[Regional Food Crisis Africa](#) [Regional maps](#)

SUMMARY OF MAIN IFRC APPEALS⁴, Response Plans and DREFs

Country	Appeal (CHF)	Cover ⁵ (%)	Funding Gap (CHF)	Targeted beneficiaries	Implementation on funding received	Start date	End date
Burkina-Faso (DREF) (MDRBF014)	189,679	100%	-	8,452	-	18 Aug 17	18 Nov 17
Chad (DREF) (MDRTD015)	233,017	100%	-	12,350	-	11 Aug 17	11 Nov 17
Ethiopia (MDRET016)	13,686,550	20%	10,982,225	318,325	85%	4 Jan 16	4 Jan 18
Kenya (MDRKE039)	25,062,572	21%	18,607,617	1,033,300	83%	23 Nov 16	23 Nov 17
Mauritania (DREF) (MDRMR008)	206,067	100%	-	9,750	-	11 Aug 17	11 Nov 17
Niger (DREF) (MDRNE019)	261,041	100%	-	13,130	-	25 Aug 17	25 Nov 17
Nigeria	10,415,433 (2017-18)	100% (2017)	-	300,000	42% (2017)	24 Apr 17	30 Sep 18
Senegal (DREF) (MDRSN015)	207,880	100%	-	9,893	-	11 Aug 17	11 Nov 17
Somalia (revised MDRSO005)	10,491,893	50%	5,232,212	150,000	36%	25 Mar 16	30 Jun 18
South Sudan (MDRSS006)	4,700,037	24%	-	60,000	16%	8 July 17	31 Dec 18
Regional Food Crisis Africa ⁶ (MDR6003)	3,877,335	21%	3,055,993	-	43%	19 Apr 17	19 Oct 18

⁴ Appeal funding figures, updated to publication, do not capture bilateral contributions supporting implementation of the plans – available details in this regard are provided in the country-by-country section.

⁵ The response plans for Nigeria and South Sudan are rolled out in two phases, the first one until end of December 2017 and the second one from 2018 on. Nigeria's IFRC response plan for 2017 is funded under the One International Appeal launched by the ICRC, For South Sudan, the 2017 response plan is covered through the ICRC 2017 South Sudan Appeal. The Funding for the IFRC operations in 2017 is channelled through the ICRC. Both countries are therefore 100 percent secured for 2017. For more detail on funding see [Donor's Response](#).

COUNTRY-BY-COUNTRY PROGRESS – Main focus countries

ETHIOPIA (MDRET016)
Start Date: 4 January 2016
End Date: 4 January 2018
Targeted beneficiaries: 318,325 people
Total amount: 13,686,550 Home

Funding: 2,704,325 CHF (20 percent of total target in hard pledges)

Implementation: 85 percent (expenditures vs Funding)⁷

Indicator	Target	Progress
Livelihoods, nutrition, food security		
n° of children U5, pregnant and breast-feeding mothers provided with supplementary food- CSB and Oil;	93,975	82,811 ⁸
n° hhds affected provided with livestock through Afar restocking program	1,000	1,000
Water, Sanitation and Hygiene Promotion		
n° of households assessed by volunteers	4,447	4,447
n° of volunteers trained	75	75
n° of households benefiting from potable water.	36,000	24,509 ⁹
Health		
n° of children U5 registered with SAM and MAM case	9,500	2,415
n° households that go home with a food parcel;	100	20
n° of Pregnant Lactating Women registered for supplementary feeding;	3,700	770

Operating Context:

According to [Fewsnet](#) :

- Early Deyr (October to December) seasonal rainfall has been light and sporadic, but slightly above average, over much of Somali Region during the first two weeks of October, according to satellite-derived rainfall estimates.
- Parts of Amhara, Tigray, north-eastern SNNPR, and eastern Oromia are expected to remain in Crisis (IPC Phase 3) until begin in October. However, Meher harvests, coupled with seasonal increases in labour income from cereal and cash crop harvests, should drive improvements in household food access and acute food insecurity outcomes to Minimal (IPC Phase 1) or Stressed (IPC Phase 2) levels between October 2017 and January 2018.
- Ethiopia is [expected](#) to continue facing a major food security Emergency (IPC Phase 4) through at least the first quarter of 2018, with updated forecasts indicating an increased likelihood of below-average Deyr rains in southeastern Ethiopia between October and December 2017. Many poor households in these mostly pastoral areas require sustained assistance beyond currently planned and funded levels to prevent worse outcomes.

Number of people affected by Food insecurity provided from UNOCHA's through [Horn of Africa drought update snapshot](#) and the [Weekly Humanitarian bulletin](#) remained the same in October with 8.5 million beneficiaries identified in need of emergency food assistance for the second half of the year with an estimated 376,000 children that may become severely acutely malnourished (SAM) by

⁷ The Ethiopia appeal response is currently at 18 percent. 90 percent of the funds raised so far has been utilized. The needs on the ground remain, the IFRC and the Ethiopia Red Cross continue to fundraise to support the rolling out of the Emergency Appeal Drought response to its fullest.

⁸ 3,135 people have been supported by IFRC, the rest have been supported by ERCS' funding and PNS

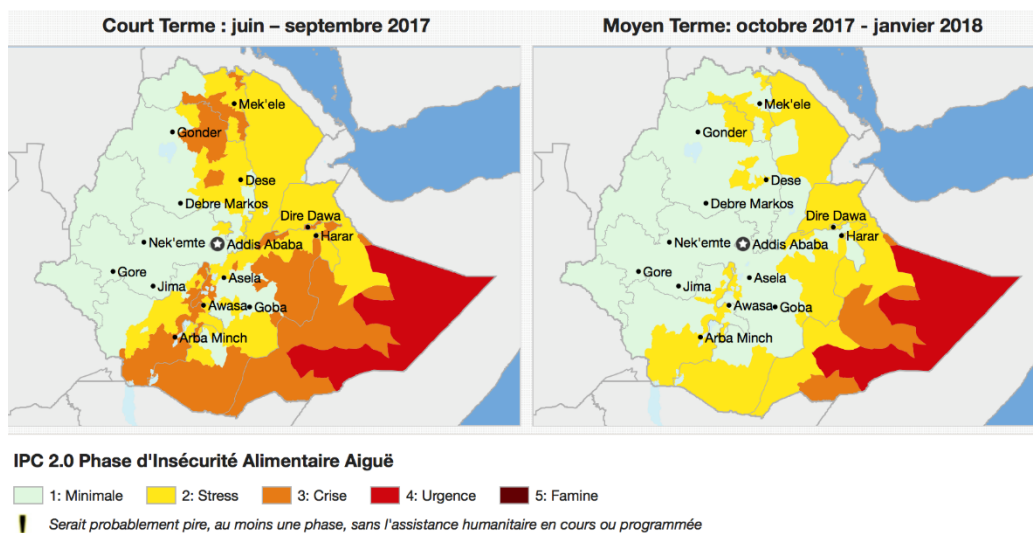
⁹ 10,400 households were supported by Canadian Red Cross in Kindo Koysha while 14,109 households were supported by ERCS through IFRC Appeal in Moyale. In Ethiopia one household accounts for five people.

the end of 2017, while some 3.6 million moderately acutely malnourished (MAM) children and pregnant and lactating women (PLW) would require supplementary feeding.

The October's [Humanitarian bulletin](#) relates that as of 30 September, Ethiopia was sheltering 883,546 registered refugees and asylum seekers, making it the second largest refugee-hosting country in Africa. At least 100,034 refugees arrived in Ethiopia in 2017, the majority from South Sudan (over 73,000) followed by Eritrea (over 18,000) and Somalia (over 6,500). 65 per cent of the total registered South Sudanese new arrivals since September 2016 are children, including 23,203 unaccompanied and separated children. A larger influx of South Sudanese refugees is expected in the coming weeks due to increased insecurity in South Sudan and the end of the rainy season, which makes road access easier.

In September and October, the Government and humanitarian partners, including ERCS and ICRC, have jointly conducted several verification assessments in areas affected by the Oromia Somali community conflict¹⁰ to gauge the scale of the emergency and the scope of needs of the conflict-affected people. Several additional verification and market assessments (for cash-based assistance) are planned. Meanwhile, the Government and partners continue to provide multi-sector assistances to the displaced people in both regions.

On 27 October, in a historic first, The Government of Ethiopia, with UNHCR and UNICEF, launched a [civil registration process for refugees](#) in Ethiopia. Starting the same day, all refugees in the country will be able to register their vital events, including birth, death, marriage and divorce directly with national authorities.



¹⁰ To know more about this conflict, see [What is behind clashes In Ethiopia's Oromia and Somali regions?](#) and related article on [ethnic strife in Ethiopia](#).

ERCS Operational highlights:

Animal re-stocking: As reported in the previous update, the goat re-stocking activity was successfully completed in the Bidu Woreda reaching the targeted 1,000 families with 5,000 goats (one male and four female goats per family) in 15 Kebeles¹¹.

Joint Assessment by Movement Partners: A joint assessment will be conducted, between 28 October to 15 November, by Movement Partners (*ERCS, IFRC, ICRC, Austrian Red Cross, the Spanish Red Cross, the Finnish Red Cross, the Netherlands Red Cross, the Swiss Red Cross and the Canadian Red Cross Societies*). An emergency assessment team will be deployed in the two geographic locations (Southern and Eastern and North-Eastern parts of Ethiopia) and will conduct a comprehensive assessment following the various emergencies (drought, flooding and ethnic conflict). The assessment will highlight the emergencies and their negative impacts, critical needs, gaps as well as potential future risks.

Donor Advisory Group (DAG) visit to Ethiopia: Following the DAG visit from 9th to 14th October 2017, there was a recommendation to extend the drought emergency appeal for nine months covering Afar, and the South regions of Ethiopia. The appeal coverage is currently at 20 percent and hence the need to intensify resource mobilization to reach targeted communities with lifesaving interventions remains. Emphasis will be put on resilience and recovery in specific areas where rains is improving the situation. The DAG consulted with the President of Ethiopia and Patron of ERCS, government officials, International humanitarian agencies, local leadership, ERCS volunteers, board members and staff.

Movement Coordination: Six Partner National Societies (PNSs) continue to operate in-country, including the Austrian Red Cross, the Spanish Red Cross, the Finnish Red Cross, the Netherlands Red Cross, the Swiss Red Cross and the Canadian Red Cross Societies implementing both on multilateral and bilateral projects with the ERCS. These PNSs, in coordination with ERCS and IFRC, continue to support the drought operation through the distribution of supplementary food, WASH, and livelihoods activities (provision of animal fodder) in Oromia, SNNPR and Somali regions, while ICRC and non-movement partners including UNICEF and IOM have focused on addressing the needs of conflicts induced internally displaced persons (IDPs) in Oromia and Somali regions. Efforts have been made to strengthen coordination of the PNS movement by conducting monthly based partnership meeting.

Documents of reference or key events to come:

[Ethiopia Drought Emergency Appeal revision 2](#) (published on 24 March 2017)

KENYA (MDRKE039)	
Start Date: 23 November 2016	
End date: 23 November 2017	
Targeted beneficiaries: 1,033,300 people	
Total amount: 25,062,572	Home

¹¹ A kebele is the smallest administrative unit of Ethiopia, similar to a ward, a neighbourhood or a localized ad delimited group of people. It is part of a woreda (district), itself usually part of a Zone, which in turn are grouped into one of the Regions based on ethno-linguistic communities (or Killoch) that comprise the Federal Democratic Republic of Ethiopia. Each kebele consists of at least five hundred families, or the equivalent of 2,500 to 4,000 persons. ([Wikipedia](#))

Funding for the Appeal: The Kenya drought EPoA is funded multilaterally through the IFRC, bilaterally through PNS and UN agencies, and thirdly, through corporate and individuals' contributions. Although funding through the IFRC emergency appeal stands at 21 percent, the total amount of funds raised through the three venues is approximately 68 percent. Below is a break down on amount raised.

- Movement Support - Multilateral CHF 6,454,955
- Bilateral Support CHF 9,990,582
- Corporates and Individuals CHF 1,418,602

Implementation rate: 83 percent (expenditures vs Funding)

Programs: Livelihoods and food security, Watsan and Health

Indicator	Target	Progress
Livelihoods, nutrition, food security		
Number of households received cash transfer	60,000	41,947 ¹²
Number of complaint and feedback documented	N/A	361
Number of feedback and complaint addressed in a timely manner	100%	71%
Water, Sanitation and Hygiene Promotion		
Number of people reached through Hygiene promotion activities	225,000	78,554
Number of target communities accessing safe water sources for drinking	225,000	143,160
Number of water supply schemes rehabilitated/equipped.	90	34
Number of hygiene related goods (NFIs) which meet SPHERE standards provided to the target population	N/A	1,624
Health		
Number of people reached with basic nutrition services	263,500	70,360
Number of CHWs sensitized on epidemic preparedness and community level surveillance	N/A	924
Number of nutrition outreaches conducted	N/A	469
Number of people reached through nutrition outreaches	263,500	70,360

Context:

The food security and nutrition situation in Kenya has deteriorated significantly since March 2017, due to late onset and below-average March-May long rains, high staple food prices and the Fall Army Worm infestation.

Off-season rainfall in July and August, particularly in parts of the northern Rift Valley and coast, has reduced distances to water and improved livestock body condition, with positive consequences for milk production, livestock prices, and food consumption. Elsewhere, however, drought stress is deepening as the dry season reaches its height. The prices of basic foodstuffs, though generally falling, are still unusually high. As expected, the long rains harvest was poor, and therefore unlikely to have any significant impact on households' access to food (National Drought Management Authority National - NDMA-Bulletin, September 2017).

According to the NDMA [Early warning bulletins](#) (August, 2017), seven counties are at Alarm phase (Wajir, Tana River, Marsabit, Kilifi, Kajiado, Isiolo and Garissa counties) while another 10 are at the Alert phase. In the 17 counties at Alarm and Alert Phase, the situation is on a worsening trend highlighting the need

¹² While further disbursements have been carried out, the number of people remained constant since those targeted under ECHO are the same beneficiaries previously targeted with IFRC funding.

for continued interventions to prevent further deterioration. According to the [Kenya Humanitarian snapshot](#) (OCHA, October 9), approximately 3.4 million people are currently food insecure in the country, including 2.6 million who are severely food-insecure (Crisis IPC Phase 3 and above)¹³ and a further 800,000 under stress (IPC Phase 2). The population in need of humanitarian food assistance is the highest since the major drought of 2011. Almost 421,000 children require treatment for acute malnutrition. Nutrition SMART surveys conducted in June and July 2017 indicated that global acute malnutrition (GAM) rates were above the emergency threshold of 15 per cent in eight counties.

In 2017, the cholera outbreak has so far affected 18 counties, with a total of 3,059 cases including 56 deaths (Case Fatality Rate 1.8 percent) reported as of 3 October. Three counties continue to report active outbreaks; Kajiado, Machakos and Nairobi. The Fall Army Worm infestation has impacted on cereal production, with a total of 250,00 hectares of crops affected in 27 out of 47 counties. An outbreak of Malaria cases is also signaled with more than 1,000 people having tested positive in Marsabit, norther Kenya, weeks after the disease claimed life of more than 26 people in expansive region. Meanwhile, the healthcare crisis continues as the strike by government nurses, which started in June over salaries, continues.

Summary of the current food security in arid and semi-arid lands (ASAL) counties (NDMA Bulletins).

County	Normal	Alert	Alarm
Worsening		Tharaka Nithi, Samburu, Nyeri North, Narok, Meru, Mandera, Makueni, Laikipia, Kitui and Embu	Wajir, Tana River, Marsabit, Kilifi, Kajiado, Isiolo, Garissa
Stable/ Improving	West Pokot, Turkana, Taita Taveta, Lamu, Kwale, and Baringo		

Livestock production has improved in areas of reasonable rainfall. In Turkana, for example, milk production increased by 550 percent on the previous month, though it is still less than one-third of the long-term mean. Elsewhere, such as Kajiado, livestock body condition continues to worsen. Milk production here is negligible – milk on sale is from outside the county at a price 50 percent higher than usual – while cattle are already emaciated in Mosiro, Ewaso, Meto and Dalalekutuk. Four counties reported mortality associated with drought: Kajiado (particularly Mosiro), Isiolo, Laikipia (mostly deaths of calves from exhaustion) and Meru (North) (NDMA Report, September 2017).

Political Context:

Kenyans went to the polls for a rerun of the presidential election on October 26, after the country's Supreme Court had nullified the result of an earlier vote held in August. Leading to the elections, the situation in the country went generally stable although incidents of protests have been experienced. The incumbent Kenyatta won 98 percent of the vote in the repeat but with opposition boycotting the election because their amendment requests had not been addressed by the electoral body (IEBC), turnout was low. On October 30, Uhuru Kenyatta was declared the winner of Kenya's presidential election for the second time in three months, while opposition, led by Odinga Raila, engaged to fight back, through social and economic measures.

¹³ See OCHA: [Kenya Humanitarian snapshot](#) , (October 9)

For this election repeat, KRCS requested an extension of its DREF ([MDRKE040](#)). During the electoral process, KRCS rolled out preparedness measures including activation of standby in 14 counties identified as being at relatively high risk of election related disturbances. Further deployments had been planned, depending on how the situation would evolved.

Operational Highlights:

KRCS continued with Cash disbursement through the ECHO project for communities affected by drought in **Turkana, Samburu, Isiolo, Marsabit, West Pokot and Wajir counties**. The second disbursement was paid on 24th October 2017. A total of 20,143 households were reached in the latest disbursement. The next disbursement is scheduled for November 2017. The number of people reached so far through KRCS interventions remains at 872,916 people as the current disbursement targets the same beneficiaries targeted in previous disbursement.:





- **Livelihoods and food security:** 664,422 people have been reached with cash transfer (251,682), food distribution (198,546) and livestock destocking (214,194) activities.
- **Water, sanitation and Hygiene:** 138,134 people have so far been reached with various activities such as hygiene promotion and water supply through rehabilitation of water facilities. A total of 34 water points has been rehabilitated out of the targeted total of 90.
- **Health:** 70,360 people were reached health services specifically through community sensitization activities, psychosocial support, reproductive health services and epidemic prevention.

Movement Coordination update:

- From 7 to 9 November 2017, The Kenyan Red Cross will be hosting the Cash Peer Working Group Meeting (CPWG) in Nairobi. The first two days will be devoted to technical discussion and on the 9th there will be an Open day for general experience sharing.
- KRCS and IFRC have continued coordinating with both Movement and Non-Movement partners through coordination meetings and regular sharing of information.
- KRCS has received support for the drought appeal from British Red Cross Society, Finnish Red Cross, Danish Red Cross and ICRC through bilateral support. Other PNSs have supported KRCS through the appeal.
- Joint monitoring visits are also conducted on a regular basis.
- Coordination at county level is done through the County Steering Group (CSG) and brings together agencies involved in disaster response at county level.

A summary of various partners is shown in the table below:

Sector	Movement Partners	
 Livelihoods	Danish Red Cross, British Red Cross, Finnish Red Cross, ICRC, Netherlands RC and Canadian Red Cross	
 Water, Sanitation and Hygiene	Norwegian Red Cross, British Red Cross, ICRC	
 Health	IFRC (appeal)	

Sector		Non-Movement Partners
	Shelter	Norwegian Refugee Council (NRC)
	Livelihoods and food security	National Drought Management Authority (NDMA), Hunger Safety Net Programme (HSNP), World Vision in partnership with World Food Programme (WFP), KRCS in partnership with WFP, Food and Agriculture Organization (FAO), Norwegian Refugee Council (NRC), German Agro Action, Ministry of Agriculture, Ministry of devolution, and ECHO
	Health	Norwegian Refugee Council (NRC), Ministry of Water, UNICEF, UNFPA, CBM
	Water, Sanitation and Hygiene	Ministry of Health (MoH) at national and county level, UNICEF, WFP and civil society organizations (CSOs), Non-Governmental Organisations (NGOs).

Documents of reference or key events to come:

- FewNet: [Kenya Food Security Outlook Update](#) August 2017
- Hinhua: [Kenyan Military Kills 4 Al-Shabaab Militants in Coastal Region](#), 24 October
- Al Jazeera: [Healthcare Crisis Deepens as Nurses' Strike Continues](#), 24 October
- All Africa news: [Malaria Cases Go Up as Over 1,000 Test Positive](#), 19 October
- All Africa News: [Nairobi On Alert After 'Deadliest' Somalia Explosion](#), 17 October
- OCHA: [Kenya Humanitarian snapshot](#) , 9 October
- NDMA: [National Drought early Warning Bulletin](#), October 2017
- All Africa: [Drought puts millions of Kenyans at risk of starvation](#). 9 October.
- All Africa: [Kenya seeks alternative funding after Aid Cuts](#). October

SOMALIA (MDRSO005)	
Start Date: 30 June 2017	
End date: 21 December 2018	
Targeted beneficiaries: 352,800	
Total amount: CHF 12,204,893 (including ERUs)	Home

Appeal Budget: 10,491,893 (excluding ERUs)

Funding: CHF 5,259,681 (50 percent of total target in hard pledges)

Implementation rate:

36 percent (Expenditures vs Total Funding)

Operational Context:

Severe drought and food insecurity continues in most parts of Somalia and according to the [Somalia Humanitarian Bulletin](#) of October, around 6.2 million people remain in need of support. The agricultural and livestock production continues to be severely affected. The FAO-managed Food Security and Nutrition Analysis Unit (FSNAU) estimates in July 2017 indicated that livestock holdings and herd sizes among poor households had continued to decrease, with some areas experiencing between 20 to 50 per cent livestock losses. Pastoralists in Mudug region have reportedly lost nearly 65 per cent of their livestock due to the severe drought conditions since November 2016, leading to the impoverishment of pastoral and agro-pastoral populations.

The numbers of measles cases remain at epidemic levels with more than 18,000 cases recorded between January and September this year. Some 1,469 suspected measles cases were reported in September. Although there has been a decline in recent months, the number of cases is four times as high as those reported in 2015 and 2016. A nationwide campaign to vaccinate 4.2 million children between ages 6 months and 10 years old is scheduled for November/December 2017. Over the past three months, there has been a significant reduction in new AWD/Cholera cases in all regions of Somalia. No cholera related deaths have been reported during this period in any of the regions. Since the start of the year, some 77,783 cases and 1,159 deaths have been reported in 55 districts of 16 regions across Somalia, with 58.8 per cent occurring in children below five years of age.

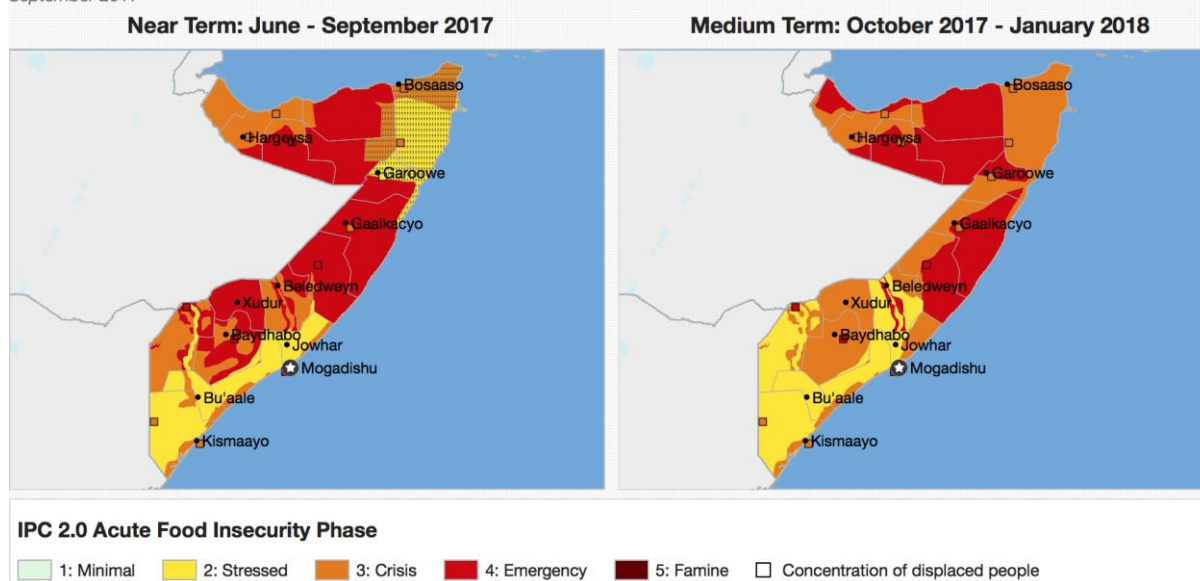
The situation is not expected to improve. As was reported in Fewsnet's [September key message Update](#), the October to December 2017 Deyr season is expected to be below average. This would be the fourth consecutive poor season in Somalia and is likely to lead to below-average crop production and regeneration of pasture and water. An estimated 2.34 million people are thus expected to be in Crisis (IPC Phase 3) and 802,000 in Emergency (IPC Phase 4) through December 2017. A risk of Famine (IPC Phase 5) still exists through at least early 2018 and continued, large-scale humanitarian assistance is needed to prevent the loss of life and livelihoods.

The overall nutrition situation in Somalia has continued to deteriorate, especially in northern and central parts of Somalia. At a national level, median prevalence of acute malnutrition has deteriorated from serious in Gu 2016 (14.5% GAM) to critical (17.4% GAM) in Gu 2017. Based on GAM prevalence from the Gu 2017 nutrition surveys, an estimated **388,000 children** under the age of five across Somalia were suffering from acute malnutrition at the time of the assessment including **87 000 that were malnourished**.

On Saturday 14 October 2017, a truck bomb exploded in one of the busiest areas in Mogadishu, resulting in what is considered the deadliest single attack Somalia has faced in decades. According to Government estimates as of 16 October, 358 people were killed, while 56 remain missing and 228 were injured. Six SRCS volunteers and one security personnel lost their lives while seven staff, three volunteers and three security personnel were injured. SRCS property including the office building, office equipment and vehicles were destroyed. SRCS emergency response teams immediately responded, administering first aid, taking the wounded to hospitals and conducting search and rescue missions. The Movement partners have provided overwhelming support to restore the SRCS headquarters back into working order.

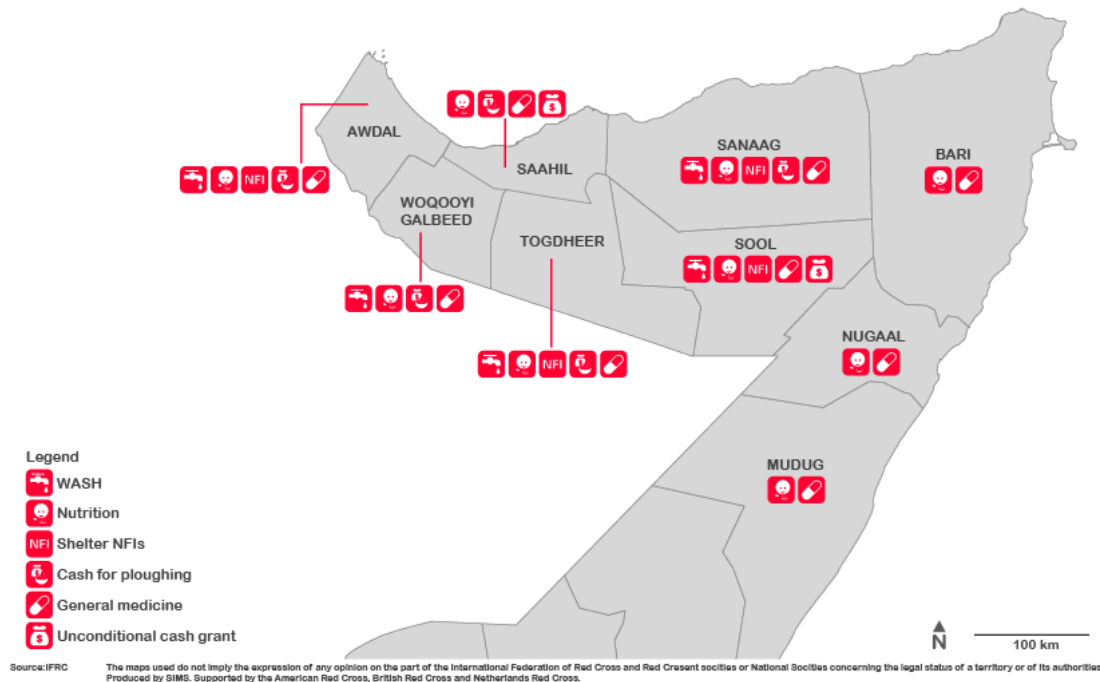
The first ten months of 2017 witnessed rising violence against humanitarians, particularly those with operations in hard-to-reach areas in southern and central Somalia. During this period, over 130 violent incidents impacted humanitarian organizations leading to the death of 15 humanitarian workers, injury of 31 others, physical assault of three, arrest and temporary detention of 17, abduction of 30 and attempted abduction of nine. Three of the abducted humanitarian workers were released on 16 October.

Somaliland's presidential elections are scheduled to take place on 13 November 2017. The situation so far remains calm and peaceful but unpredictable. IFRC and SRCS staff remain vigilant and alert at all times and only undertake field missions after assessing political activities in the areas that the mission plans to cross through.



Achievements by sector

Health and Nutrition	<i>Target 146,000</i>
Achievements:	
<ul style="list-style-type: none"> ➤ 132, 535 people received regular medical treatment through SRCS clinics supported by IFRC ➤ 39,113 people given nutritional treatment and supplements through SRCS clinics ➤ 1,364 people treated for AWD at the ERU Cholera treatment centre ➤ 4,773 people provided with ORS in ORPs 	
WASH	<i>Target 123,400</i>
Achievements:	
<ul style="list-style-type: none"> ➤ 4,600 people given access to safe water through rehabilitation of water points ➤ 10,752 people provided with safe water treatment and storage items ➤ 2,800 people provided with hygiene items (jerrycans, body soaps, laundry soaps) ➤ 78,990 people reached with hygiene promotion and hygiene education 	
Shelter and settlements	<i>Target: 6000 households (36,000 people) provided with NFIs.</i>
Achievements	
<ul style="list-style-type: none"> ➤ 2,800 families (2,000 in Sool and 800 in Awdal) have received emergency shelter NFIs 	
Food security and livelihoods	<i>Target: 7,900 households (47,400 people) with cash interventions</i>
Achievements	
<ul style="list-style-type: none"> ➤ 900 households received unconditional cash grants 	



Sector highlights:

- **Health and nutrition:**
 - All the six branches in Somaliland have received nutritional supplements--Plumpy Nut and Plumpy sup and both mobile and static clinics are already dispensing the supplements to treat cases of severe acute malnutrition and moderate malnutrition. Puntland has just received the consignment and now in the process of distributing them to the three branches and subsequently to the clinics.
 - The mass measles vaccination campaign planned for November will take place after the election in Somaliland. No date has been fixed at the moment.
 - ORP evaluation took place from 10 to 17 October 2017. The goal was to assess the effectiveness of SRCS volunteers staffing ORPs in response to the cholera outbreak in a context of malnutrition. 16 ORP sites were visited, 80 patients surveyed, 29 ORP volunteers and community leaders interviewed and 11 key informant interviews done
 - Devex media visit on universal access to healthcare took place from 18 to 20 October
- **Water, sanitation and hygiene promotion:**
 - All branches have been provided with aquatabs for blanket distribution by both mobile and static clinics to ensure the community has safe drinking water
 - Water trucking now in progress in Lascaanood targeting 2,400 households.
 - There is going to be training of selected staff from all the branches from the 4th to the 8th of November 2017 on setting up and managing a cholera treatment centre (CTC), including infection control, and WASH protocols. The WASH delegate will facilitate the WASH component of this training.
 - Commemoration of Global hand washing day done in Alleybadey district, at a school and clinic. Messages were centred on hand washing at critical times and demonstration of how to wash

hands properly with soap. Assessment of the WAH facilities in eight clinics (out of 25 targeted) have been carried out. As a result of these assessments, one clinic latrine that was full has been desludged. Other clinics will have latrines rehabilitated in the next two months, including desludging as necessary. Staff have been refreshed on the importance of proper waste management procedures for infection control. A refresher training will also be conducted for staff to strengthen community hygiene promotion activities. Aquatabs have been distributed to all clinics to ensure availability of clean water at all times.

- **Cash Transfer programme**

- ***Beneficiary identification***

- Sahil region has completed pre- registration of beneficiaries.800 hhs have been identified by the community leaders and they await verification.
 - Sool region-village targeting is in progress. Beneficiary identification will commence as soon as village targeting is complete.
 - The Baseline will go in parallel will the registration process.
 - Contracting of Mobile Company-Telesom has been selected to provide transfer services for the two regions. The signing of the agreement is now in progress.

- ***Cash for ploughing***

- Beneficiary orientation on Agricultural techniques is set to beginning November
 - Sanaag beneficiaries will receive 4 hrs ploughing time while Toghdeer will receive 2 hrs ploughing time.

Documents of reference or key events to come:

- IFRC FACT/ERU Situation Reports and [Somalia Dashboard](#)
- IFRC Revised [Appeal](#)
- IFRC MDRSO005, [Drought and Food Security Ops Update no. 7](#)
- IFRC MDRSO006, [AWD DREF Ops Update no. 1](#)
- UN-OCHA [Drought Update 31 August 2017](#)
- UN newscenter: [Somalia facing complex immediate and long term challenge](#) (13 sept)
- The Guardian: [Somaliland's Women Show Kindness and Leadership in the Face of a Humanitarian Crisis](#) (7 Sept)

SOUTH SUDAN

Start Date: 08 July 2017

End date: 31 December 2018

Targeted beneficiaries: 10,000 Households (60,000 people)

Total amount: CHF 4,700,037

(CHF 1,115,991 in 2017 & CHF 3,584,046 in 2018). The 2017 amount is integrated into the ICRC current 2017 South Sudan budget as per the IFRC and ICRC funding modality agreement [Home](#)

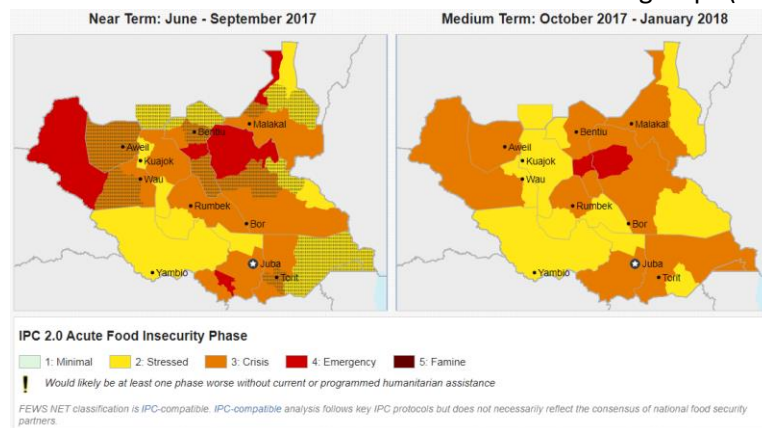
Implementation rate: Implementation just started.

Funding: 100 percent for 2017, CHF 1,115,991 funded through the ICRC South Sudan budget

Programs: The Response Plan recognizes that the food security crisis cannot be taken in isolation and is intrinsically linked to the other challenges faced by the population of the country, including the risks relating to **health, water and sanitation and nutritional levels**. For this reason, the Response Plan focuses on the wider needs of the protracted crisis and is addressing the situation at community level, focusing on Health, WASH, Shelter, Nutrition, Livelihoods, and Psychosocial (PSS) needs.

Context:

In recent years, the humanitarian situation in South Sudan has deteriorated considerably, leaving millions in need of food, health care, water and sanitation, and protection. Since the onset of the conflict in 2013 and subsequent devolution into a complex emergency in the years since, millions have been affected and many have exhausted their already stretched coping capacities. In 2017, the number of internally displaced rose to 1.9 million and, as of September, more than two million were reported to be seeking refuge in neighboring countries--the majority of those displaced being women and children ([Humanitarian dashboard](#), OCHA). A stalled peace process and the fragmentation of major political parties has fueled further fighting between Government and opposition forces, leading to an increase in the localization of non-state armed groups (NSAG) and a deepening of the conflict.



A broadening conflict and endemic displacement has had considerable impact on vulnerable populations across the country. The displaced have limited access to land and crops while rising commodity prices and economic instability have deteriorated household purchasing power and disrupted markets. Depleted health and water and sanitation infrastructure has increased community risk and

susceptibility to communicable diseases while fuel shortages and limited access to basic services have compounded the impacts of an already dire humanitarian situation.

At present, some 7.6 million people require humanitarian assistance across the country (UNOCHA 2017). At the height of the lean season in February 2017, some six million were severely food insecure, including 50,000 facing Integrated Phase Classification (IPC) Phase 5 (Catastrophic) food security outcomes and a further 1.7 million in IPC Phase 4 (Emergency) (UNOCHA 2017).

Although the local famine declaration in Leer and Mayendit counties of Unity was halted due to a massive multi-sectoral humanitarian response, severe food insecurity remains a major challenge in South Sudan and contributes to several secondary challenges for the most vulnerable. According to SMART surveys conducted at the end of the 2017 lean season, acute malnutrition prevalence remains at 'Critical' (GAM (WHZ) $\geq 15\%$) levels and, due to expectations of below-average production, continued very poor macroeconomic conditions, and low access to nutrition services, is expected to remain as such through to, at least, January 2018 (FEWSNET 2017).



IFRC staff members perform a quality control check of the contents of a household kit. These kits are scheduled for distribution to 5,000 HH (30,000 people) in November 2017 under the Movement Response Plan source: IFRC

Summary of major revisions made to the Response Plan

From 11 to 25 September 2017, SSRC, in partnership with the IFRC, conducted a detailed, emergency needs assessment (ENA) in the Response Plan's (RP) three target locations: Aweil East, Yirol East and Kapeota East. The ENA was commissioned to inform a strong response options analysis and ensure that Phase II of the project (January – December 2018) was designed on a solid and current evidence base. The activities in 2017 were not adjusted as they are being implemented to address the standing, critical needs of the most vulnerable internally displaced persons (IDP) and host families (HF) as well as build the capacities of the South Sudan Red Cross (SSRC). At the same time, the budgetary requirements for 2017 were not amended.

In 2018, the Response Plan has targeted its response on two primary sectors—Non-Food Items (NFIs) and Water, Sanitation, and Hygiene (WASH)—with support interventions from Health and Psychosocial Support (PSS). The ENA analysis provides a strong rationale for intervention in these sectors and positions the Movement to have a considerable and meaningful impact in the affected communities. Phase II of the RP will also expand its geographic focus to include Aweil Centre given its high displacement and vulnerability profile, relative stability from a security perspective, strong and growing National Society presence, and established logistics pipeline. The Response Plan will also focus on building the staff and volunteer capacity of SSRC in several sectors to ensure that the National Society (NS) is better prepared and positioned to scale-up its response to the growing humanitarian needs in-country.

This Response Plan is the product of continued Strengthening Movement Coordination and Cooperation (SMCC) initiatives in South Sudan and is representative of the new cooperative operating model of the Movement. Partners from across the Red Cross Red Crescent have been integral to the design of the RP since its inception and, as such, are jointly committed to ensuring its success. As such, the plan includes considerable space for Partner National Societies (PNS) to contribute in-kind resources and personnel to ensure the success of our coordinated and cooperative approach.

Overall, the Response Plan seeks to assist the following beneficiary targets within each sector:

Sector	Beneficiary Target
Emergency Shelter & NFI	17,500 HH (105,000 beneficiaries)
FSL	5,000 HH (30,000 beneficiaries)
WASH	Access to water (Hardware): 6,245 HH (37,470 beneficiaries) Sanitation (Hardware): 2,880 HH (17,280 beneficiaries) Sanitation (Software): 9,960 HH (59,760 beneficiaries)
Health	3,200 HH (19,200 beneficiaries)
PSS	13,800 direct beneficiaries

Disaggregated by target location, the following beneficiaries will be reached in each area:

Implementation in 2017
Implementation in 2018

Movement Response Plan Phase I and Phase II Activities Strategy					
Sector	Activities	Aweil Centre	Aweil East	Kapoeta East	Yirol East
ES & NFI	Provision of Household Kits to vulnerable households who are unable to satisfy the emergency-needs criteria for essential NFIs per the SPHERE Guidance	6,250 HH (37,500 beneficiaries)--4,170 Host Families and 2,080 IDPs	5,000 HH (30,000 beneficiaries)--3,330 Host Families; 1,670 IDPs	2,500 HH (15,000 beneficiaries)--1,670 Host Families; 830 IDPs	
FSL	Provision of basic agricultural input kits for HH subsistence agriculture (seeds and essential tools)	2,500 HH (15,000 beneficiaries)	2,500 HH (15,000 beneficiaries)		
WASH	Rehabilitation of existing boreholes, targeted primarily at areas with a high influx of newly arrived IDPs	2,083 HH (12,500 beneficiaries)	2,083 HH (12,500 beneficiaries)	833 HH (5,000 beneficiaries)	
	Construction of new boreholes, targeted primarily at areas with a high influx of newly arrived IDPs	415 HH (2,490 beneficiaries)	415 HH (2,490 beneficiaries)	415 HH (2,490 beneficiaries)	
	Provision of basic latrines training to support HH latrines construction using local material inputs--30% behavioural change expectation	720 HH (4,320 beneficiaries)	720 HH (4,320 beneficiaries)	720 HH (4,320 beneficiaries)	720 HH (4,320 beneficiaries)
	Provision of hygiene promotion awareness sessions within the target communities		120 HH (720 beneficiaries)	120 HH (720 beneficiaries)	120 HH (720 beneficiaries)
Health and PSS		2,400 HH (14,400 beneficiaries)	2,400 HH (14,400 beneficiaries)	2,400 HH (14,400 beneficiaries)	2,400 HH (14,400 beneficiaries)
	Provision of basic health promotion through the BHI methodology	800 HH (4,800 beneficiaries)	800 HH (4,800 beneficiaries)	800 HH (4,800 beneficiaries)	800 HH (4,800 beneficiaries)
	Provision of PSS and SGBV information through awareness sessions facilitated in the community to leaders and women's groups to target communities		600 direct beneficiaries	600 direct beneficiaries	600 direct beneficiaries
		3,000 direct beneficiaries	3,000 direct beneficiaries	3,000 direct beneficiaries	3,000 direct beneficiaries

Operational Highlights:

- The [revised Movement Response Plan's](#) narrative and budget for Phase II, redesigned relative to the core findings of the emergency needs assessment, has been validated internally and published on Fednet. The Revised Response Plan was submitted to ICRC on 10 October to conform with their planning timeframe for 2018.
- A rapid, multi-sectoral emergency needs assessment was conducted in early October by SSRC staff members with technical support from IFRC. The ENA examined household vulnerabilities in the Response Plan's three target areas to inform the response options analysis and design of Phase II. The Final ENA report is in the final stages of production and, following review and

technical input from the IFRC Regional Office in Nairobi, will be released to the public beginning of November.

- Relief distribution planning is strongly underway with the National Society to ensure the distribution of 5,000 household kits to 30,000 of the most vulnerable in Aweil East in November 2017. Beneficiary selection is scheduled for the final week of October with beneficiary verification to occur in the first week of November. Transportation of goods from Juba to Aweil will occur from the 13th of November with distribution of the items to beneficiaries occurring between 14 and 24 November 2017.



SSRC volunteers interview an emergency needs assessment respondent in Yirol East.

Source: IFRC

- Recruitment is being finalized for a Finance Delegate to support the Movement Response Plan from the 1st of November for a period of two months. The Finance Delegate will oversee the final financial reconciliation of Phase I of the Movement Response Plan as well as the issuance of all final financial reports.
- A CEA delegate will be deployed to South Sudan from 23 October to 3 November to support the SSRC and IFRC operations team to plan and set up CEA approaches and activities in support of the NFI distributions in Aweil East, including setting up systems for community communication and feedback and complaints. In addition, the visit will investigate how CEA could provide support to health and WASH teams in 2018 with behaviour change communication approaches.
- As part of efforts to profile the emergency response, the IFRC Regional Communications Delegate will deploy to South Sudan, beginning of November, to support the SSRC and IFRC, in coordination with ICRC, to implement the Response Plan's communications strategy and profile the response's flagship NFI distribution. Key outputs of the mission will include stories, photos and video footage of beneficiaries and Movement personnel to cover the NFI distribution as a "champion" programme for the response in South Sudan. Additional opportunities to cover hygiene and sanitation promotion, PSS and community health-based programmes will also be explored.
- The Mid-term report for Phase I of the Response Plan has been reviewed and shared with ICRC in South Sudan for comments. It will be shared with partners at regional and Geneva level as well as on fednet once the approval process is completed

Movement Coordination update:

Across the country, the National Society and its partners are working hard to address the multi-faceted needs arising from this complex crisis. In country, seven Partner National Societies (PNSs)—Austrian Red Cross, Canadian Red Cross, Danish Red Cross, Netherlands Red Cross, Norwegian Red Cross, Swedish Red Cross, and Swiss Red Cross—are actively supporting programmes in community health, WASH, Psychosocial support (PSS), and disaster response and preparedness. The International Committee of the Red Cross (ICRC) has one of its largest global operations in South Sudan, focusing on delivering its mandate in relation to the conflict and providing support in many areas.

The Response Plan comes out of a strong process of cooperation and coordination at the country level with these partners. Under the framework of Strengthening Movement Cooperation and Collaboration (SMCC), South Sudan is considered a pilot country or "country lab". As such, the RP

presents a good opportunity to show that a coordinated Movement response can be delivered in this complex environment. Adopting this approach, the Federation has taken a lead role in coordination and works closely with Movement partners to ensure the RP is supported and resourced and that capacity-building support is effectively delivered to the NS. This is coordinated through the mechanisms of the Movement Platform and other coordination meetings in Juba where decisions are taken on the response strategy, security and access, and communications. Throughout implementation of the RP, partners will adhere to the existing coordination agreements including The Movement Coordination Agreement, the Security Framework and the Public Communications Agreement. The plan will also be supported by operational and technical level coordination meetings.

Coordination Highlights:

- The Country Team is working with the Regional and Geneva Offices to host a global teleconference for interested PNS' to address several questions that have surfaced in relation to the unique funding modality adopted for this Response Plan. The date for this telecon is still being determined but will be shared with partners as soon as possible.

Key Reference Documents and publications

[MDRSS006-Response Plan](#) (found on FedNet through the Operational Plans database)

Fewsnet: [Food Security Outlook](#), October 2017

OCHA: [Humanitarian bulletin South Sudan](#), 10 October 2017

OCHA : [South Sudan Humanitarian Dashboard](#), 15 October 2017

ACAPS: [Global Access Ranking](#), August 2017,

DW: [South Sudan: starvation and violence](#), 17 October 2017

Xinhua: [ICRC to resume operations in South Sudan Equatoria region](#). 7 October

NIGERIA
Start Date: 24 April 2017
End date: 30 September 2018
Targeted beneficiaries: 300,000 people (50,000 families)
Total amount: CHF 5,096,838 (2017 budget) <i>through One International Appeal launched by ICRC</i>

Targeted Beneficiary: 80,000 people in 2017 and 192,000 people in 2018.

Funding: 5,096,838 (for 2017) funded through One International Appeal launched by the ICRC

Programmes: The operation will support most vulnerable population in the North East with focus on the following sectors: food security and livelihoods, health, water and sanitation, shelter, DRR and NSD. Cash transfers will be one of the main modalities.

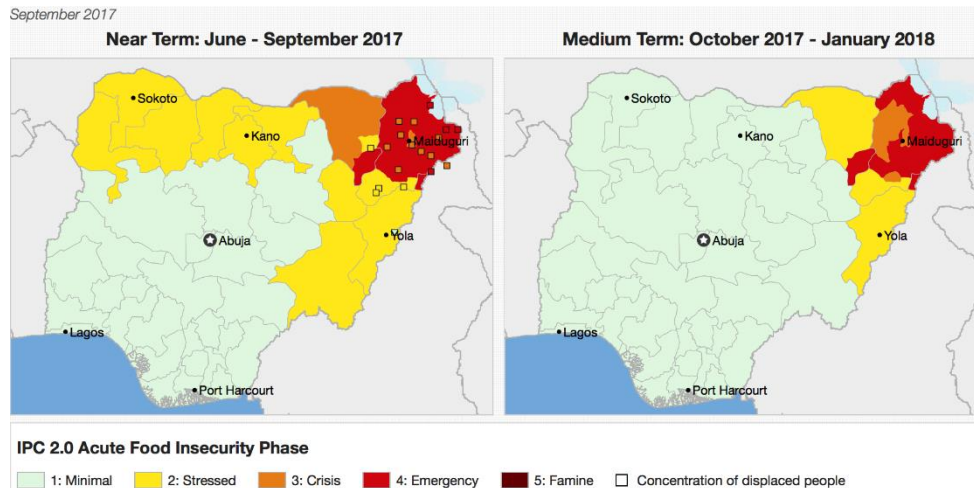
Context:

According to Fewsnet's [Food Security Outlook update](#) of September:

- Persisting insurgent activities in the northeast of Nigeria, coupled with trade restrictions, population displacements, restricted road access during the rainy season, and arrivals of refugees from Niger and Cameroon have continued to drive severe acute food insecurity and limit the efforts of humanitarian partners in assisting displaced persons in the region. A substantial proportion of the population in the northeast continues to face Crisis (IPC Phase 3) or Emergency (IPC Phase 4) acute food insecurity, with an increased risk of high levels of acute malnutrition and excess mortality. Less accessible areas remain at risk of Famine (IPC Phase 5).
- As of October 26th, total number of suspected cases of cholera reported by [Ministry of Health](#) stands at 5207 cases of cholera have been reported in Borno State, with 61 deaths and a Case Fatality Rate

of 1.2 percent. High concentrations of the outbreak have been reported in the Muna corridor of Jere LGA (2617 cases), Dikwa LGA (736 cases), and Monguno LGA (1,737 cases), while cases in Maiduguri metropolitan area and Mafa stand at 58 and 17, respectively.

- As at the 25th of October 2017, a total of 94 suspected cases of [Monkeypox](#) have been reported from 11 States (Akwa Ibom, Bayelsa, Cross River, Delta, Ekiti, Enugu, Imo, Lagos, Nasarawa, Niger, Rivers) and the Federal Capital Territory (FCT). No fatality and measures taken by the government.



Operational Highlights:

- The Cash transfer component has been completed successfully in Adamawa State. The operation is moving into the next phase with other sectors such as DRR, Livelihoods, Shelter, Health and WASH gradually scaling up the implementation of planned activities. The key aim of this is to ensure that local capacities and communities are involved in decision-making and implementation for local ownership, continuity and sustainability of operation's efforts.
- The IFRC/NRCS operation is currently focusing on three target Local Government Areas (LGAs) of Gombi, Hong & Song in Adamawa State. Needs assessment is ongoing in five LGAs of Yobe State including; Damaturu, Tarmuwa, Bursari, Bade and Fune. In 2017 IFRC/NRCS will target two LGAs in Yobe.
- A mission was deployed to Yobe for assessment and setting up of an operational base in Damaturu. The Assessment team went to Damaturu on 26th October 2017, where the assessment plan was discussed and agreed upon. The assessment team is composed of a team leader, four RDRT, six NDRT and support by IFRC staff.
- The EPoA was revised and shared with ICRC and Nairobi, for technical review and approval process.
- No major security concerns for Abuja but vigilance is maintained always. The security situations in the operation area of Adamawa remain stable but volatile. Continuous security monitoring in collaboration with ICRC and all personnel still subject to security clearance from the HoCCST before proceeding to the field.
- The Operation was supported by the food crisis regional Communications Delegate for three weeks, for better communication on the Operation; training of IFRC and NRCS staff in Yola on proper communication and photography. Communications material was gathered and already a few stories on the Operation written and published in social media.
- Recruitment for several national staff positions, including, IT/IM Telecom Officer, Finance and Admin Officer, six drivers for Yola has been completed. Three positions including Shelter, Food security and Livelihoods delegates will be advertised shortly while the PMER officer recruitment is ongoing.

Implementation:

Food Security and Livelihoods component:

- The Cash transfer component has been completed successfully in Adamawa State. A total 4,298 Households received unconditional (for food) and conditional (for livelihoods support) cash grants.
- Planning for the second post-distribution monitoring round in progress to start in mid-November.
- Selection of beneficiaries for vocational training is on-going, training center have been identified and negotiation started
- Final provisions with Adamawa Vocational Training Centre to reach an agreement to train beneficiaries within livelihoods components in the vocational-training centres. Similar terms of cooperation already in place with regards to other skills transfer projects implemented by UNDP and other humanitarian organisations.
- Final provisions with American University in Nigeria (AUN), which set up a vocational training course for women to reach an agreement to provide skills and basic financial literacy trainings to women and mother clubs under way. AUN can also organise mobile trainings in community themselves by mean of deploying instructors and equipment right to communities.

Shelter:

- Communities have been selected for model houses:
Song (2): Gargiji And Wuro Hetso (*see pictures below*)
Gombi (5): Guyaku, Tela Bala, Sabon Gari, Dzangola, Kakwara
Hong (8) Zah, Dabna, Garaha Mojili, Gaya Faa. Gaya Ldang, Larh, Banga, Hong Town
- Up to date seven Model houses completed, doors and windows fittings in progress.
- Procurement of six Bricks-Press machines and construction materials.
- PASSA process starting with volunteers identified in three LGAs: Song, Gombi and Hong. Sensitization of the Community Resilience Committees (CRC) members has started on shelter-planned activities.
- The 15 community members and 15 volunteers train in bricks making shelter construction are all active in the field.



Seven Model houses have been completed. Communities selected are Song, Gombi and Hong, Adamawa.

Source: NRCS

WASH:

- The Operation procured building materials and spare parts to rehabilitate or retrofit water facilities and 14 water points have been rehabilitated in five communities.
- Beneficiaries targeted through the Cash Transfer Program (CTP) component have been reached through WASH component with buckets and water purification tablets.
- Awareness raising, and hygiene promotion has reached about 63 communities.
- Distribution of emergency items such as buckets and water purification tablets continue under the operation.
- WASH is in the process of procuring spare parts for borehole rehabilitation. This will allow more communities with access to safe water. As the assessment team is planning to expand to Yobe in the coming weeks, most critical rehabilitation needs will be considered and handled at the same time by WASH team.
- Nigerian Red Cross Society water points mobile rehabilitation team repaired and fully constructed platforms for one water point in Pirkasa and two in Guyaku community in Gombi LGA.



14 water points have been rehabilitated in five communities. Here in Song. Source: NRCS

Community Engagement and Accountability (CEA):

- Hotlines are up and running weekly from Monday – Friday 10am to 5pm WAT.
- Feedback and complaints database was updated and a total number of 324 calls and five SMS were received from 21st July to 13th October 2017. Thirteen feedbacks were received for Cash transfer which were all appreciation to the RCRC for cash grants support from seven communities in the three operational LGAs of Adamawa State, one complaint was received for medical support which was later referred to International Rescue Committee who accepted to pay the medical bills and are now supporting the patient.
- A two-day training was organised for four NRCS hotline volunteers, three information management volunteers on introduction to CEA (basic components and importance of CEA), communication skills, managing conflicts, receiving and responding to feedbacks. In the training, sectors (livelihoods, shelter, WASH and DRR) briefed and updated volunteers on the activities carried out by the various sectors in the field for proper response through hotlines. After the training, all volunteers were enrolled in the IFRC learning platform to gain more knowledge on the Red Cross Movement.
- Supporting sectors (WASH and Health) in planning trainings on CEA components of their activities. Supporting Livelihoods sector in engaging Community Resilience Committees (CRC) on beneficiary identification for the pilot livelihoods vocational training targeting 100 beneficiaries.

Health:

- In Adamawa, 30 communities were targeted for health component intervention with 30 Community Resilience Committees (CRC) established and 30 volunteers trained on CBHFA.
- Seven health facilities have been selected and being supported by the Operation.
- Three health facilities are being rehabilitated; one each in Kwarhi and Kuva Gaya in Hong LGA and Dzangula in Gombi LGA.
- Customs' clearance for 10,000 Mosquito nets prior distribution is awaited for.
- Mother Support Groups have been formed in Dzangula and Kwarhi Health facilities.

- Monitoring and evaluation of CBHFA training is still ongoing.

Disaster Management and Disaster Risk Reduction (DRR):

- Five communities in Song, Gombi and Hong have been assessed on community mitigation measures and community DRR plans being developed. The delivery of pre-positioned stock for Adamawa State is in progress.
- Bill of quantities and design of the repairs needed to the NRCS’s Adamawa DP centre has been finalized, pending selection of the constructor to start the works in anticipation of the soon arrival of prepositioned stock.
- DRR key messages on floods have been finalized, translated into Hausa and will require pictorials and IEC, which has been contracted for design. This will be in a form of a 2018 wall calendar.
- NDRT training in Yola with 30 participants drawn from 25 States across Nigeria has been completed on October 27th. The training facilitated by six foreign and four local experts with wealth of experience in disaster management in Nigeria and similar contexts, aimed at:
 1. Improving the quality of NDRT members and enhancing technical knowledge through classroom work and real field work exposure.
 2. Improving the technical capacity of the Nigerian Red Cross Societies’ disaster responders, develop feasible and realistic local plan of action and able to transfer the knowledge and skills quickly to others.

Documentation:

ICRC: [Facts and Figures Jan-Sep 2017](#), 27 October 2017

[Food Security Cluster](#) website

Food Security Cluster: [North East Nigeria Food Security Sector Dashboard](#), (map), 28 October

Food Security Cluster: [NE Nigeria Food Security Sector Cash Dashboard](#), (map), 28 October

Recent Assessments:

OCHA: [Multisectoral Needs Assessment Adamawa State, Nigeria](#), 21 October 2017

OCHA: [Multisectoral Needs Assessment – Yobe](#), 16 October 2017

<p>West Africa/SAHEL (Burkina Faso, Mauritania, Niger, Chad, Senegal - DREFs)</p> <p>Start Date: August 2017 End date: November 2017 Cumulative Targeted beneficiaries: 53,575 people Cumulative Total amount: CHF 1,095,684</p>
--

Context:

Vulnerable people in the Sahel region are still struggling to recover from the aftershocks of four consecutive food and nutrition crises (2005, 2008, 2010 and 2012). The food security situation is exacerbated by conflicts in Mali, Northeast Nigeria, Libya and the Central African Republic. Approximately 20 percent of the population - at least 25 million people - are considered extremely poor, requiring some form of social protection. Although most people in the Sahel live from agriculture, many poor households barely cover 20 percent of their food needs through farming. The [ECHO FACTSHEET](#) relates that the periodic food and nutrition crisis in the Sahel is compounded by the

erosion of the populations' resilience due to the succession of crises, extreme vulnerability and poverty and lack of basic services.

Further, the authors underline that the emergency needs will persist in the sub-region unless the root causes of food insecurity and under-nutrition are properly addressed, and the resilience of the poorest people is strengthened. The European Commission championed the creation of [AGIR](#), a global alliance to strengthen resilience in West Africa/the Sahel which has set itself a '**Zero Hunger' goal by 2032**. To break the endless cycle of emergencies in the Sahel, the underlying causes of the chronic food insecurity and high acute malnutrition rates need to be addressed. These causes include extreme poverty and inequality, limited access to basic services, environmental degradation, climate change and population growth. Most of these structural causes require determined joint efforts by national governments, development and humanitarian donors to tackle these issues and reduce the impact of what could be called a "**resilience deficit crisis**".

In May 2017, **National Societies of Sahel Countries** with **Movement partners** (IFRC, ICRC, PNSs of Belgium, British, French, Spanish, Netherlands and Swedish Red Cross) met for a three-day workshop on Resilience and Food Security in Sahel. The workshop held in Ouagadougou, Burkina Faso, aimed at defining a concerted, coordinated, multi-annual approach to recurring food security crisis, on which the Movement's partners will align themselves for the next five years. During the workshop, based on the [Cadre Harmonisé](#) or Harmonized framework¹⁴ analyses, alarming data were highlighted pointing immediate needs to be addressed for some countries where pockets of food insecurity crisis were expected, although IPCs index were showing for overall country stable food security situation. To know more about the Sahel food security context, click [here](#).

Following the workshop, Sahel countries, National Societies and Movement partners prepared **Response plans (DREFs)** for **Senegal, Niger, Mauritania, Mali, Chad** and **Burkina Faso** to address current localized areas of Food Insecurity and crisis within each country. Concomitantly, a **joint longer-term program** for these areas is being prepared to address the recurrent food insecurity problem through a preparedness and resilience perspective. The program would promote a coordinated, multi-annual approach to recurring food security crisis, on which the Movement's partners would align themselves for the next four years.

In this current Food crisis, the countries of operations have been struggling with challenges among which **Caterpillar attacks, damaging crops**. However, in its October iteration of Key messages, [Fewsnet](#) reports that, caterpillar infestations such as *Spodoptera frugiperda* reported in Nigeria, Ghana, Togo, Benin, Niger, Burkina Faso, Chad, Mali, Cote d' Ivoire and Gambia appear to be under control and damage limited. Thus, food production in 2017/18 could remain above average and contribute to an improvement in the food situation from October/November onwards.

Operations' Highlights:

In August, DREFs for [Senegal](#) (MDRSN015), [Chad](#) (MDRDT015) and [Mauritania](#) (MDRMR008), [Burkina Faso](#) (MDRBF014) and [Niger](#) (MDRNE019) were approved and operations launched for a cumulative amount of CHF 1,097,684 and approximately 53,575 people. The responses comprise the following components: Cash Transfer Programming, Health, Water, sanitation and Hygiene promotion as well as Capacity-building of the National Societies and communities. Five RDRTs (one per DREF), with a team leader, specialized in Food security were deployed and are supporting the National Societies during the rolling out of the DREF responses in each country.

Implementation of the DREF operations are progressing. However, recent security incidents in the Sahelian region, procurement issues or late arrival of funds, have caused delays in the implementation


¹⁴ The cadre harmonise provides analysis and identification of areas at risk and vulnerable groups in the Sahel (*Cadre Harmonisé*). To know more about the Harmonized Framework, see [here](#).

of activities and a **two-month extension of the operational timeframe** for Chad, Mauritania, Burkina Faso and Niger is requested to allow efficient conclusion of the planned activities while Senegal is expecting to end within the initial timeframe. In accordance, Operational Updates have been submitted and now into the reviewing process for approval. A Lessons' learnt workshop is scheduled in late November 2017 to analyse successes, challenges, best practices and recommendations to be captured and applied in future programs and emergency appeals. An overall update for the DREF operations will be prepared for next regional issue sitrep.

Document:

- Action Against Hunger: [Pastoral Surveillance for Sahel Countries](#) -platform
- Action Against Hunger: [Biomass Analysis-sahel early warning system](#), Octobre 2017
- ECHO: [Fact Sheet Sahel](#), March 2017

Regional Coordination Food Crisis Appeal Support

Regional coordination Food Crisis in Africa (MDR60003)	
Start Date: 19 April 2017	
End date: 19 October 2018	
Total amount: 3,877,335 CHF	

Funding: 821,342CHF (21 per cent in hard pledges, but approximately 27% funded if account for soft pledges and in-kind/staff donations not registered in system)

Implementation: 43 percent (expenditures vs Funding)

Main Highlights:

- The [revised Response Plan](#) for South Sudan (MDRSS006) was completed and published on fednet on October 11 and a [Mid-term report](#) on November 2. The Final ENA report, to instruct Phase II of the Operation in 2018, is in the final stages of production and will be released to the public beginning of November.
- The Ops coordinator travelled to Nigeria from 10 to 17 October to support operations. The revised **Nigeria's** Response Plan has been shared with the Regional office for technical revision and approval.
- Somalia's [DREF final report](#) for AWD/Cholera (MDRSO006) was completed and published.
- The Revision of the Food Crisis Appeal (MDR60003) is under revision. Working sessions have been planned to revise strategy for coming months.
- Tlmeframe extension requests for the Sahelian DREF operations have been submitted for Niger, Mauitania, Burkina Faso and Chad, to the Regional office for approval process.
- A Regional Lessons Learnt and Emergency Response Workshop was organized by the Southern African Country Cluster with the support of the Regional office from 25 to 27 October in Pretoria South-Africa. The main objective of the workshop was to review the recommendations raised by the evaluation of the Food Insecurity Appeals that were implemented between 2015 and 2017. The encounter also aimed at launching the Global Framework for Community Resilience and the Southern Africa Resilience Plan.
- The new **Community Engagement and Accountability** (CEA) delegate dedicated to the food crisis operations has started on October 16th. She will be available to support operations from a few days to a few weeks upon request to support efforts to strengthen CEA approaches and activities.
- In the last two weeks of October, the CEA delegate has been deployed to South Sudan. The main purpose of the mission was to support the South Sudan Red Cross (SSRC) and IFRC operations team to plan and set up CEA activities for the NFI distributions in Aweil East, which are planned

for November 2017. Informed by the results from the recent Emergency Needs Assessment, a CEA plan for Aweil East was drafted with valuable input from key SSRC staff members in Juba, such as the national CEA coordinator. During the second week of the mission, the delegate visited the branch office in Aweil to ensure that CEA was integrated in the trainings for SSRC branch volunteers and to support CEA efforts during the registration process of target communities. This included, for instance, the establishment of a complaints desk and a system to register and follow up on feedback. The lessons from this field visit will be used to jointly finalize the CEA plan, which will also identify appropriate CEA approaches for the distributions and programs that are planned for 2018 as part of the emergency response plan.

- The **Communications delegate** has been supporting and organizing a media visit between 15 and 23 October in Somalia as part of a global partnership with Devex and other organizations covering a Universal Health Care Campaign. The Devex correspondent travelled to Somaliland with the communications delegate to cover Red Crescent health care and how the food crisis appeal has supported health interventions. The journalist will be publishing three stories, showcasing the work IFRC and Somali Red Crescent's work in health and food crisis. In addition, the communications delegate gathered content related to the food crisis to be repackaged and used for future promotions online and print, including a photo gallery with 100+ [photos, videos, stories](#) and social media coverage.
- Additionally, during this reporting period:
 - five factsheets for each food crisis operations in **South Sudan, Somalia, Ethiopia, Kenya and Nigeria** have been prepared and will be shared shortly.
 - a summary template is being developed and piloted with **South Sudan's** needs assessment report to incorporate infographics and visuals to provide a quick snapshot of the findings;
 - A regional communications plan is being drafted to support food crisis countries to be finalized by end of November. This incorporates considerations for the regional communications objectives as well as each country context.
 - Refreshed key messages have been drafted for all main food crisis countries under Appeals: **Ethiopia, Kenya, Nigeria, Somalia and South Sudan.**
 - Ongoing social media updates, based on available photos from field operations.
 - The **Donor Advisory Group (DAG)** visited **Ethiopia** to provide an overview of Ethiopian Red Cross' and IFRC's role in responding to communities affected by the drought. The Regional Communications Manager attended the visit from 9-13 October. Although the event was mainly internal for Red Cross Movement partners, live tweets were posted, and two stories were covered by media.
 - Communications' tools prepared so far by Communications team for the Food Crisis can be found [HERE](#). Latest communications products for the months of September and October 2017 can be accessed [HERE](#).
- The Communications' delegate left on November 2 for three weeks in South Sudan to support the SSRC and IFRC, in coordination with ICRC, the implementation of the Response Plan's communications strategy and profile the response's flagship NFI distribution. Key outputs of the mission will include stories, photos and video footage. additional opportunities to cover hygiene and sanitation promotion, PSS and community health-based programs will also be explored
- The **Information Management (IM)** and **Cash Transfer Programming (CTP)** delegates will join the team, respectively on 6 November and in two months. The recruitment process for a **Food Security and resilience delegate** is still ongoing.
- Mapping of RCRC activities have been produced for **Somalia** and **South Sudan** by the IM team and can be seen [HERE](#);



*A Somali Red Crescent mobile clinic supports the rural and remote community where access to health care remains a major challenge. The mobile clinic rotates to villages in the region, serving a total of 29 villages and over 28,000 people. In a country where maternal mortality rates are some of the highest in the world, a midwife is a vital part of the mobile team, ensuring pregnant women, new mothers and babies are receiving the care they need. Red Crescent midwife, Samira Mohamed Ali, speaks with a woman who has come into the mobile clinic. Many women she sees today – pregnant and new mothers – are suffering from anaemia. Samira prescribes them with essential multiple micro nutrients and iron tablets to help subsidize what they are unable to receive in their limited diet. **Source: IFRC/ Corrie Butler.***

Contact information:

For further information specifically related to these operations please contact:

Florent Del Pinto, acting Head of Disaster Management, Regional Office Africa, Kenya, phone +254 780 930 278; email: florent.delpinto@ifrc.org

Nicolas Verdy, Coordinator Operations, Regional Office Africa, Kenya, phone +254 780 771 161; email: nicolas.verdy@ifrc.org

Nathalie Proulx, PMER, Regional Office Africa, Kenya, phone + 254 780 771 136; email: nathalie.proulx@ifrc.org

How we work

All IFRC assistance seeks to adhere to the Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGOs) in Disaster Relief and the Humanitarian Charter and Minimum Standards in Disaster Response (Sphere) in delivering assistance to the most vulnerable. The IFRC's vision is to inspire, encourage, facilitate and promote, at all times, all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.

www.ifrc.org
Saving lives, changing minds.



The IFRC's work is guided by Strategy 2020 which puts forward three strategic aims:

1. Save lives, protect livelihoods, and strengthen recovery from disaster and crises.
2. Enable healthy and safe living.
3. Promote social inclusion and a culture of non-violence and peace.

List of communications materials produced by IFRC about the Food Crisis in Africa:

Press releases and statements:

- [Mobile cash reduces hunger, boosts local economies in Kenya](#) (10 Jul)
- [“In preparedness and response, reaching communities should be ‘first mile’, not the last”](#) (23 Jun)
- [“The most vicious of vicious spirals” – Cholera compounding famine risk in East Africa and Yemen](#) (21 Jun)
- [Lifting of famine in South Sudan a “precarious victory”](#) (30 Jun)
- [Tens of thousands of women and children are fleeing from South Sudan to Sudan](#) (30 May)

Web stories:

- [Africa drought and hunger](#) (central webpage)
- [Cash transfer programme puts Kenyans in charge of their recovery](#) (11 Jun)
- [Ethiopia: helping pastoral communities cope with drought](#) (28 Jun)
- [Kenya: Red Cross volunteers overcome natural barriers to response to drought](#) (22 May)
- [Red Cross volunteer puts others first during Ethiopian drought](#) (12 May)
- [Ethiopian drought pushes families into deeper cycle of vulnerability](#) (9 May)
- [Ethiopia: Red Cross volunteer walks hours to feed her drought-stricken family](#) (5 May)
- [Delivering emergency water to the drought-stricken in southern Ethiopia](#) (2 May)

Videos and social media assets:

- [IFRC Twitter feed with all drought-related assets produced](#)
- [Ethiopia: helping pastoral communities cope with drought](#) (28 Jun)
- Facebook posts:** [1 May](#), [16 May](#), [23 May](#), [25 May](#), [6 Jun](#), [16 Jun](#), [21 Jun](#), [28 Jun](#), [30 Jun](#), [4 Jul](#), [17 Jul](#), [28 Jul](#), [3 Aug](#),
- Instagram posts:** [23 May](#), [25 May](#), [26 May](#), [30 May](#), [5 Jul](#), [9 Jul](#)

Those interested are also invited to visit a dedicated [Food Security Dashboard](#) and a [webpage on the Food Crisis](#) on the IFRC website

The Press release for the Kenya CTP program generated reaction in the general media, as follow:

Kenya Red Cross (KRCS) Cash Transfer operation (CTP):

[Press Release: Kenya: Mobile cash reduces hunger, boosts local economies in Kenya, 10 July 2017](#)

Associated Press (AP): [KENYA DROUGHT - Red Cross providing a lifeline in Kenya drought. STORY NUMBER 4105916](#)
(Editor’s Pick)

SABC – Interview with KRCS

Business Daily Africa: [Mobile money effective in tackling hunger in Kenya: Red Cross](#)

Coast week: [Mobile cash efficient in curbing hunger in Kenya: charity](#)

The conversation: [East Africa: Droughts - Some Headway in Unpacking What's Causing Them](#)

Other stories

1. [Mobile cash efficient in curbing hunger in Kenya: charity](#) - (Xinhua)
2. [Mobile money effective in fighting hunger, Red Cross says](#) – (Kenya News)
3. [Mobile money helps stave off food insecurity for 250 000 Kenyans](#) – (IT News Africa)
4. [Mobile money effective in tackling hunger in Kenya: Red Cross](#) – (World News Report)
5. [Mobile cash reduces hunger, boosts local economies in Kenya](#) - (Relief Web)
6. [Kenya: Mobile cash reduces hunger, boosts local economies in Kenya](#) – (Humanitarian News)
7. [Mobile cash efficient in curbing hunger in Kenya: charity](#) - (Asia Pacific Daily)
8. [Iniciativa de telefonia móvel ajuda a combater fome no Quênia](#) - (UN)
9. [M-pesa yaokoa wahanga wa ukame, Kenya](#) – (UN)
10. [Mobile cash reduces hunger, boosts local economies in Kenya](#) - (IT Web Africa)
11. [Mobile cash reduces hunger, boosts local economies in Kenya](#) - (Africa Business Communities)
12. [Mobile cash efficient in curbing hunger in Kenya: charity](#) - (Coast week)

Twitter

Kenya Red Cross mobile cash program – 2.3 percent engagement rate on [Twitter](#) (vs. monthly average of 0.9 percent).

Latest IFRC Communication's tools for the food crisis – September and October:

Video assets:

Nigeria:

- [Broll and stories](#) have been submitted to Geneva for publishing:
- On Instagram: [Nigeria October 2017](#)
- [Livelihoods story from a beneficiary](#)
- [WASH story from a beneficiary](#)
- [Health story:](#)

Somaliland:

[Broll and stories](#) have been submitted to Geneva for publishing:

- The complex emergency appeal: How Red Cross is targeting the unique needs of nomadic communities
- Somali Red Crescent responds to cholera outbreak
- A day in the life of a mobile clinic in central Somaliland
- A testimony from a nomad grandmother at the mobile clinic

Photo assets:

Photos can be found on [Cumulus](#) (av.ifrc.org):

- [Photos from Nigeria](#)
- [Photos from Somalia:](#)

Food Crisis on Social Media

Based on the IFRC Africa and Global IFRC accounts, 1 September – 31 October:*

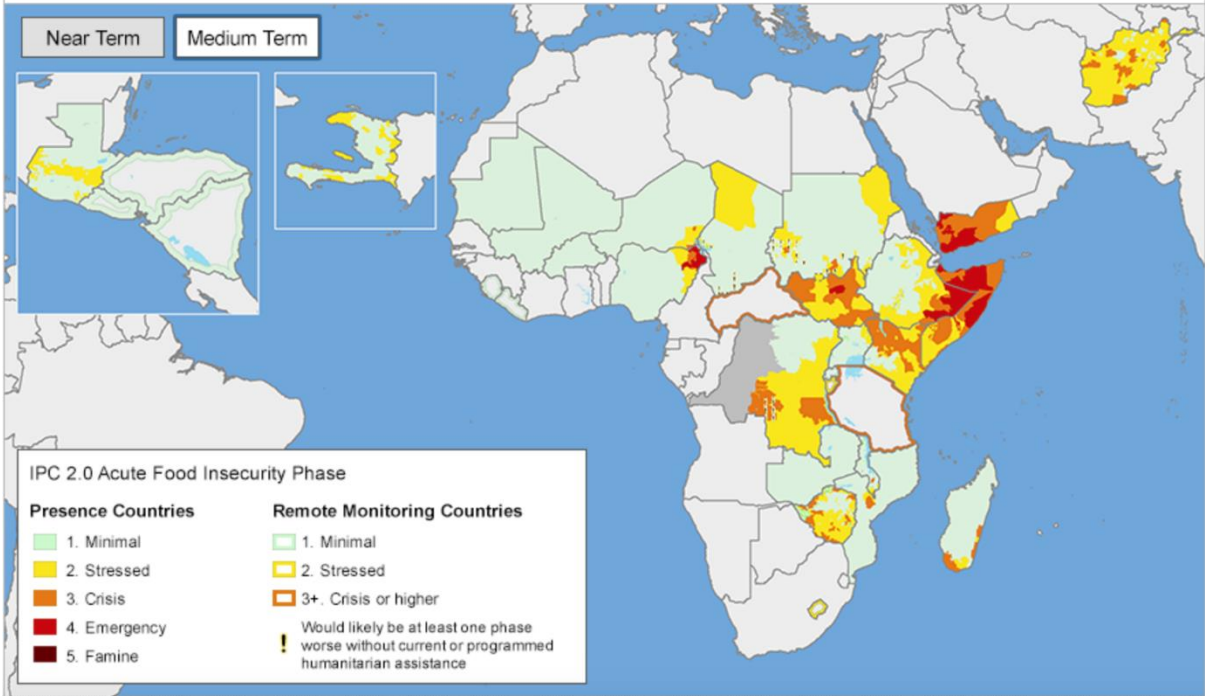
- **100,600** people reached
- **126,900** impressions
- **5900** engagements
- **19,101** video views

** Note that this does not include a impressions from IFRC Geneva twitter account, this is still to be added.*

The three top tweets for September on IFRC Africa were posts covering the food crisis, including NFIs being prepared in **South Sudan**, a **Kenya** Red Cross cash transfer beneficiary, and a regional overview of supporting food insecurity in Central and East Africa

#	Communication tools
4	Updated key messages for Somalia, Ethiopia, Kenya and Nigeria
1	Draft key messages for Nigeria and South Sudan
2	Final one-pagers for Somalia and South Sudan (Currently drafting and finalizing: Kenya, Ethiopia, Nigeria and Sahil)
3	Videos edited (Facebook Live, Instagram Reflection, Somaliland Cholera Response presented at)
1	Presentation for communication training – cell phone photography/spokesperson training
5	Videos (currently being produced)
2	Photo albums (100+ photos in each) for Somalia and Nigeria
5	Stories submitted to Geneva to be published on the global website
5	Social media banners designed and shared on twitter
28	TOTAL TOOLS DEVELOPED

Acute Food Insecurity: Medium Term (October 2017 - January 2018)



Fewsonet, October 2017

South Sudan: Complex Emergency Response

Urgent actions



Emergency household kits

Distribution of sleeping mats, blankets, mosquito nets, kitchen sets and jerry cans.



Agricultural inputs

Providing seeds, essential farming tools and fishing kits.



Health

Providing basic health promotion and nutrition education for mothers with children under five years.



Water, sanitation and hygiene

Constructing, rehabilitating and monitoring water points; constructing of latrines; and providing hygiene promotion.

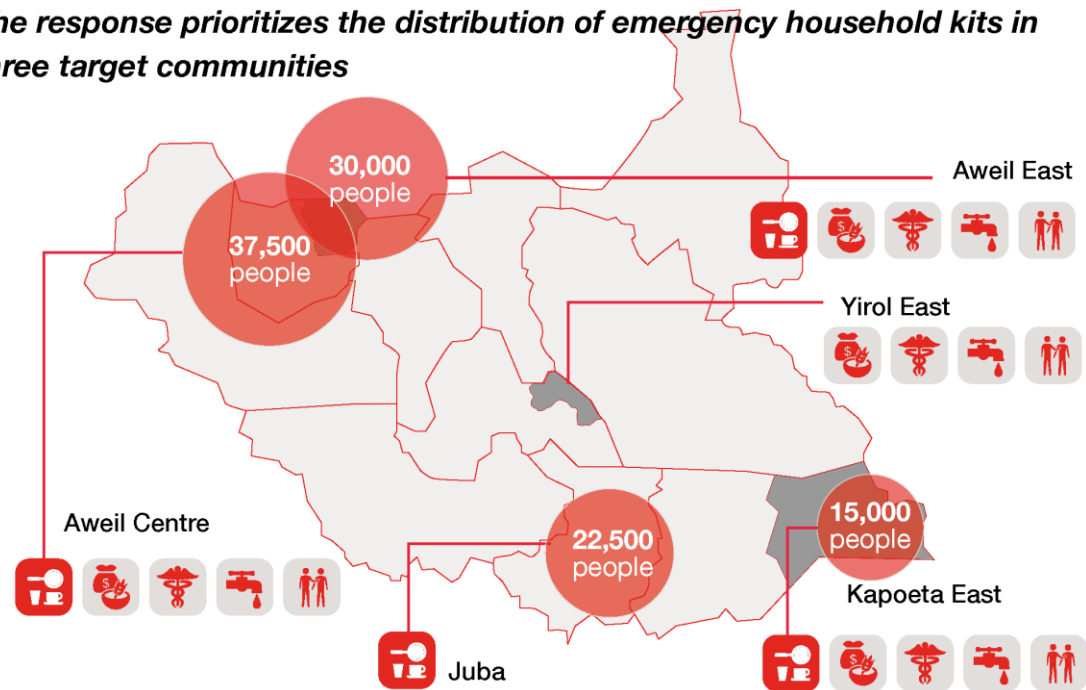


Psychosocial support

Providing support to individuals, families and communities who have experienced significant stress and trauma.

Providing information and education to communities to help prevent sexual and gender-based violence.

The response prioritizes the distribution of emergency household kits in three target communities

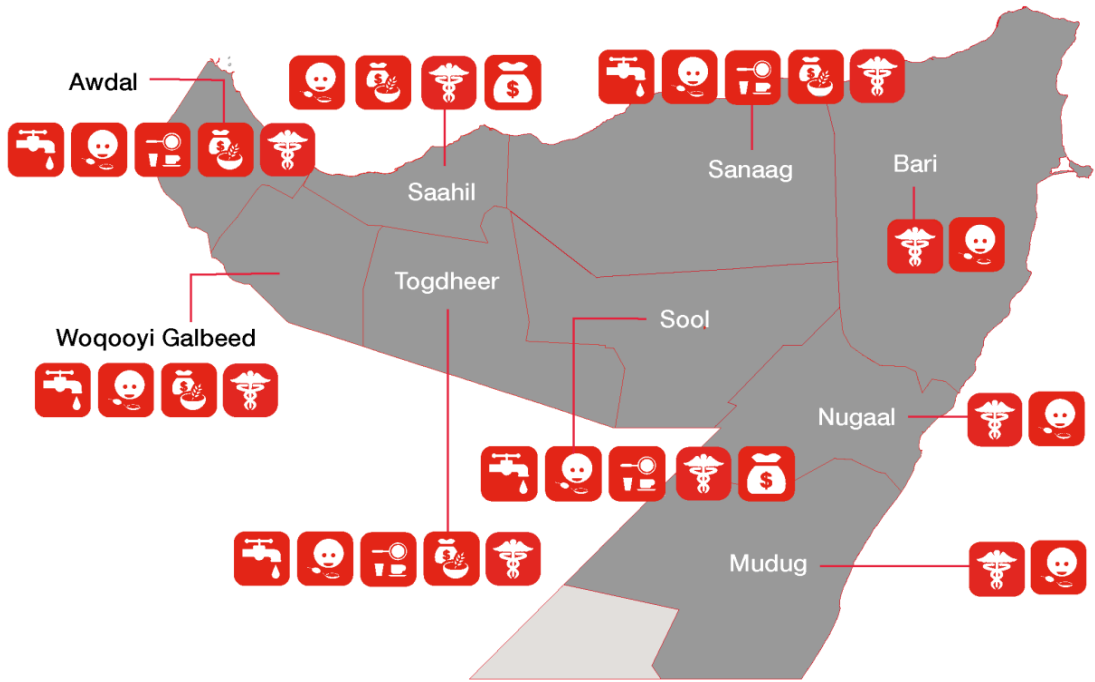


Ready to respond to the critical needs of 22,500 people across the country with household kits in 2018

Somalia: Complex Emergency Appeal

Urgent actions

- 
Health
Mobile and fixed clinics in rural areas.
- 
Water, sanitation and hygiene
Rehabilitation and monitoring of water points; distribution of water purification tablets, jerrycans and ceramic water filters; and hygiene promotion.
- 
Nutrition
Nutritional screening and supplementary feeding for children under five.
- 
Cash for plowing
Providing farmers means to plow their farmland.
- 
Unconditional cash grants
Emergency cash, allowing beneficiaries to respond to their own unique needs as they recover
- 
Shelter
Tarps, mats, blankets, kitchen sets and hygiene kits



IFRC/SIMS, Oct17

2017 GLOBAL HUNGER INDEX BY SEVERITY



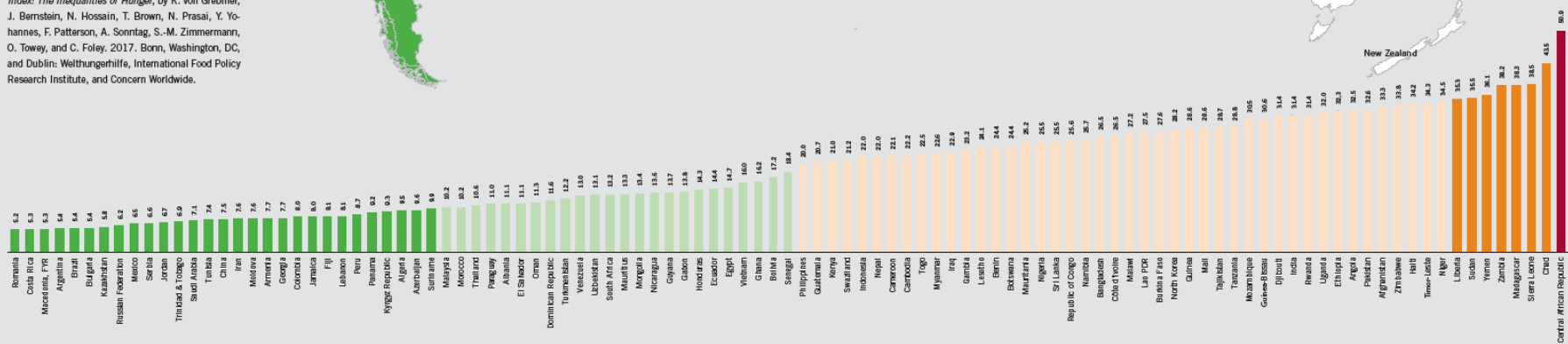
- Extremely alarming 50.0 <=
 - Alarming 35.0-49.9
 - Serious 20.0-34.9
 - Moderate 10.0-19.9
 - Low < 9.9
 - Insufficient data, significant concern*
 - Insufficient data
 - Not calculated**
- *See Box 2.1 for details
**See Chapter 1 for details

Source: Authors.

Note: For the 2017 GHI, data on the proportion of undernourished are for 2014-2016; data on child stunting and wasting are for the latest year in the period 2012-2016 for which data are available; and data on child mortality are for 2015. GHI scores were not calculated for countries for which data were not available and for certain countries with small populations.

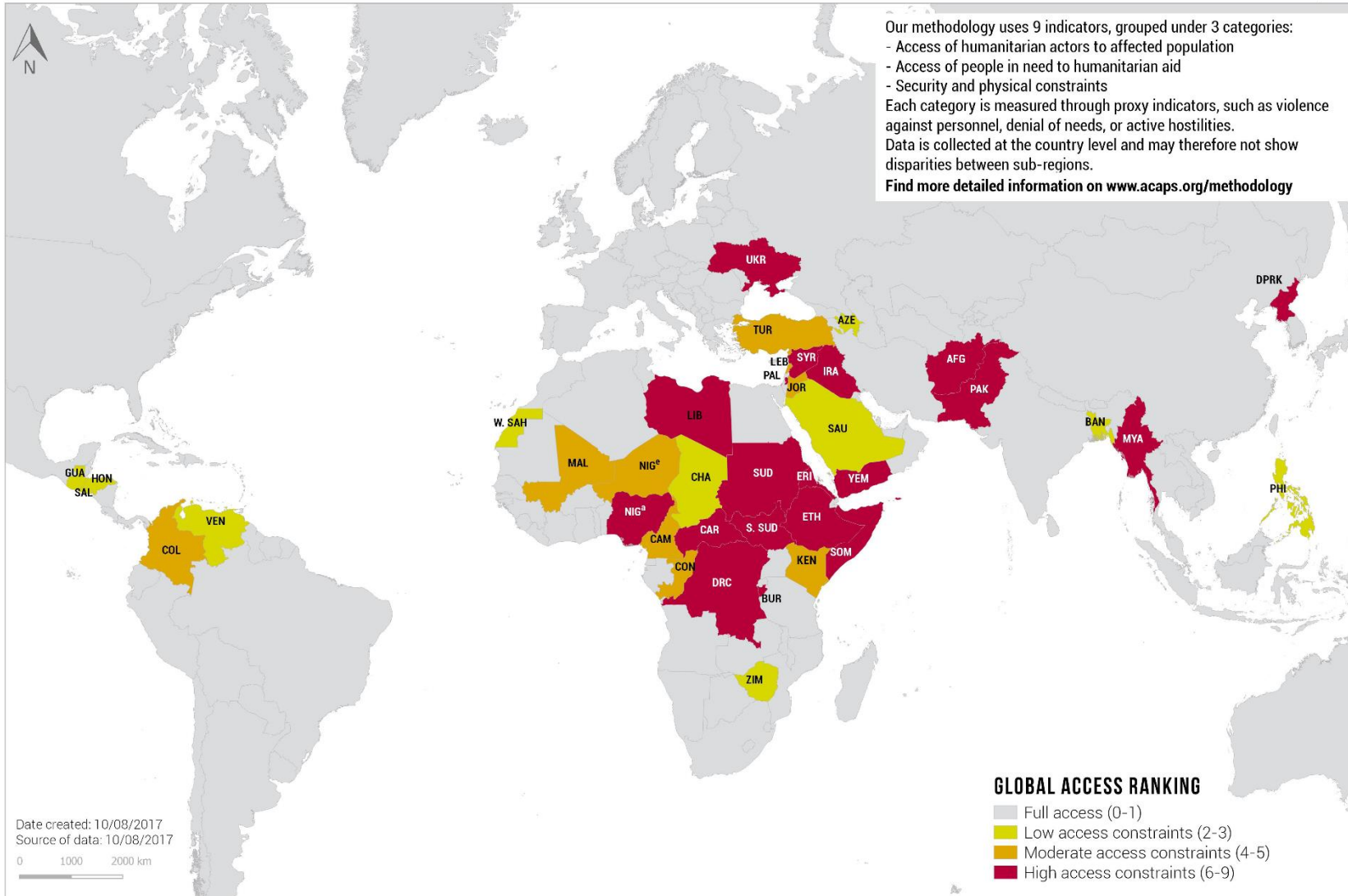
The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the International Food Policy Research Institute (IFPRI), Welter Hungerhilfe (WHH), or Concern Worldwide.

Recommended citation: "Figure 2.5: 2017 Global Hunger Index by Severity." Map in *2017 Global Hunger Index: The Inequalities of Hunger*, by K. von Grebner, J. Bernstein, N. Hossain, T. Brown, N. Prasai, Y. Johannes, F. Patterson, A. Sonntag, S.-M. Zimmermann, O. Towey, and C. Foley. 2017. Bonn, Washington, DC, and Dublin: Welter Hungerhilfe, International Food Policy Research Institute, and Concern Worldwide.



HUMANITARIAN ACCESS OVERVIEW

August 2017



HUMANITARIAN ACCESS OVERVIEW

August 2017



High access constraints

Afghanistan

Humanitarian access is heavily restricted due to the ongoing conflict and IEDs significantly hinder populations accessing vital services such as health.

Burundi

The government heavily restricts access through regulations requiring authorization for any NGO. Criminality and insecurity impact access particularly in Bujumbura.

CAR

Widespread insecurity due to continued fighting and frequent attacks on humanitarians, poor road infrastructure and years of low funding are severely constraining access.

DRC

Widespread insecurity and the kidnapping of humanitarians prevent assistance from being provided to people in need.

Eritrea

Access is almost impossible, only a few UN agencies operate in the country with limited mobility due to constraints set by Eritrean authorities.

Ethiopia

INGOs are often denied access to certain areas. Restrictions on movement is limiting access to aid. Insecurity in Somali and Oromia borders severely constrained aid delivery.

Iraq

Ongoing conflict in IS held areas severely restricts humanitarian access. In recently liberated areas, UXO and mines are a significant hindrance to both accessing the population and the populations access to critical services.

Libya

Most of southern and eastern Libya is either inaccessible or hard to reach. Most humanitarian agencies have been operating from Tunisia since 2014.

Myanmar

Rohingya populations are inaccessible in Rakhine state and their movement is severely restricted. Access to areas not controlled by the government is completely restricted. Insecurity and violence have restricted access of humanitarians to affected populations.

Nigeria

The ongoing conflict in northeast Nigeria is severely restricting humanitarian relief efforts as access to LGAs is mostly limited to major populations centres.

North Korea

Heavily restricted population movement and severely constrained access to the population for humanitarian organization.

Pakistan

Aid agencies struggle to deliver assistance because they lack government permission to operate in sensitive areas of the country, where needs are assumed to be highest. It poses restrictions also in the conduction of assessments.

Palestine

Access is severely limited by physical and administrative restrictions on access and movement of NGOs, restrictions of delivery of materials, limits on the implementation of projects and demolitions of donor-funded structures.

Somalia

Ongoing violence by extremist armed groups and clan wars, restriction of movement, and administrative impediments severely limit humanitarian operations in most regions.

South Sudan

Ongoing violence, armed groups' restriction of movement, and administrative impediments severely limit humanitarian operations, in addition to the rainy season.

Sudan

SPLM-N controlled areas of South Kordofan and Blue Nile are inaccessible. Access in Darfur is heavily restricted. Many INGOs were expelled in 2009 and are since then very careful. Access can also be hindered during rainy season.

Syria

Humanitarian access to populations affected by the conflict continues to be severely restricted by insecurity, as well as by physical and bureaucratic constraints. Violence against humanitarian workers has killed almost 1,000 since the beginning of the conflict.

Ukraine

Ad-hoc modalities imposed by the de facto authorities in non-government controlled areas in the east heavily

restricted the delivery of humanitarian assistance. People living in the demilitarised area lack continued access to assistance.

Yemen

The ongoing blockade by the Saudi-led coalition on al Hudaydah port, restricted air, land and sea travels, in addition to insecurity and movement restrictions of humanitarians, all severely restrict access.

Moderate access constraints

Cameroon

Humanitarian access remains difficult in the Far North due to insecurity and the presence of ERWs.

Colombia

Restrictions of movement where armed groups operate particularly limits affected population's access to services.

Jordan

Northern border closed to refugees, government control of NGO activities and restricted movement on Syrian refugees restrict access to/from affected population.

Kenya

Humanitarian access is limited due to communal violence in parts of the North-North East and sporadic attacks by Al shabaab in the East.

Lebanon

The undocumented status of many Syrian refugees restricts their movement and limits their access to services. Active conflict in some areas along the Syrian border hinders humanitarians to provide aid.

Mali

Insecurity restricts humanitarian operations in northern and central regions, as well as a motorcycle ban in central regions which limits access to remote areas.

Niger

In some parts of the Diffa region, humanitarian access is constrained due to the persisting threat of Boko Haram. Access beyond Diffa town requires a military escort. In some parts of Tillaberi and Tahoua departments, humanitarian access is also constrained due to insecurity and the presence of islamist/armed groups.

Republic of Congo

Due to insecurity and ongoing military operations, access is severely constrained in 8 of the 13 districts of the Pool region.

Turkey

Administrative constraints on top of on-going crackdown on NGOs restrict assistance. IDPs in south east are not assisted.

Low access constraints

Azerbaijan

Continued active hostilities and the presence of UXO and mines limits humanitarian access

Bangladesh

Violence against humanitarian workers has been reported in recent years. The government restricts access to the Rohingya refugee population in Cox's Bazar

Chad

Around Lake Chad islands, humanitarian access remains difficult due to Boko Haram attacks.

Guatemala, Honduras & El Salvador

Gang activity limits humanitarian operations in the Northern Triangle. Fear of reappraisals hampers the identification of people in need.

Philippines

On Mindanao island, due to insecurity access to some areas is limited, compounded to physical constraints.

Saudi Arabia

Border area with Yemen often affected by hostilities and Some NGOs not allowed to operate within the country.

Venezuela

Administrative impediments and denial of needs by the government severely restrict humanitarian operations.

Western Sahara

Restricted movement of the population and a heavily mined areas left over from the war in the 1975s.

Zimbabwe

Government regulations and denial of needs affect humanitarian operations.