



Somalia Crisis Response Plan 2020

2020

Funding Required

\$82,968,500

People In Need

5,200,000

Target Beneficiaries

2,088,200

IOM Vision

Since 2006, IOM Somalia has set a strong record on the delivery of frontline services to crisis-affected populations, while steadily developing models and partnerships for longer-term recovery and migration governance. IOM is strategically well-placed to operationalise the humanitarian-development-peace nexus through its vast portfolio. IOM aims to catalyse programming from multiple units to provide more holistic support to communities in a way that reinforces government legitimacy and enables the government to deliver services.

Context Analysis

Somalia has seen continued conflict since the outbreak of civil war in 1991. Since the formation of the Federal Government of Somalia in 2012, the country has made substantial progress towards restoring peace and security. While significant advances have been made in the battle against Al-Shabaab (AS), including the return of state control to main towns across Somalia, the presence of AS continues to fuel conflict and sustain a persistent state of insecurity in Somalia. Although reduced in size, armed actors remain a serious security threat to the country, with the capacity for large scale attacks and control over populations in rural areas. Civilians continue to bear the brunt of the conflict as deliberate targets and unintended victims.

In addition to conflict at the local, national and international levels, Somalia is highly susceptible to the effects of climate change and extreme weather conditions. With more than 80 per cent of its landmass designated as arid and semi-arid lands (ASAL), Somalia suffers periods of extended drought, flash floods, erratic rainfall, disruption to the monsoon seasons, strong winds, cyclones, sandstorms and dust storms.

In Somalia, the drought exacerbates conflict by increasing competition for resources. Al-Shabaab feeds off these tensions and exploits vulnerabilities. Conflict worsens the impact of the drought by depleting family assets, disrupting traditional coping mechanisms, including migration and impeding humanitarian access. Conflict and drought force internal displacement, which the National Development Plan (NDP) 2017-2019 recognizes as a cause of poverty (88 per cent of those living in IDP sites are poor), which further erodes resilience. Significantly reducing poverty, and strengthening the resilience of vulnerable households, communities and institutions are also the main objectives of the NDP 2020-2024.

The first half of 2019 was affected by drought due to below-average rainfall during the 2019 Gu' season (April-June), causing widespread crop failure and accelerated decline in livestock productivity. Conversely, heavy rainfall in October and November 2019 caused severe flooding; riverine areas along the Juba and Shabelle rivers were inundated, and flash flooding was reported in Somaliland and Banadir regions. The cumulative flooding has affected just over half a million people across the country, including 370,000 who have been displaced from their homes (UNOCHA, November 2019). Farmland, infrastructure, and roads have been destroyed in some of the worst-hit areas in Hirshabelle, Jubaland and South-West States. Displacement as a result of drought, flooding and conflict is used as a coping mechanism within Somalia as people crowd into cities and towns in search of humanitarian services. Already displaced populations are highly vulnerable due to social exclusion and lack of connectedness – they are often minority clans, women and children. Most IDP sites are overcrowded and lack basic infrastructure; living conditions are poor and services are overstretched.

While humanitarian actors are increasingly focusing on bridging humanitarian and development assistance, needs for immediate life-saving assistance remain vast. According to the Humanitarian Needs Overview (HNO) 2020, 5.2 million people, 42 per cent of the Somali population, are in need of assistance (including 3.5 million non-displaced; 1.7 million displaced by conflict, insecurity, forced evictions, droughts, and floods; 108,000 returnees; and 42,000 refugees.). This represents a 24 per cent increase compared to the 2019 HNO (4.2 million people in need).

The protracted nature of Somalia's crisis complicates the pursuit of long-term recovery and durable solutions, but it also renders it imperative that efforts to ameliorate the challenges begin immediately. Otherwise, Somalia's IDPs and returnees may face higher obstacles to recovery, as their reserves, assets and social capital are depleted. Moreover, progress on the governance agenda, reinforcing government leadership that is committed to sustainable and equitable development, recovery of some areas from Al-Shabaab, and a mobilized diaspora represent a unique opportunity for concerted action.

The response plan has been designed and will be implemented in close coordination with the Federal Government of Somalia (FGS) and relevant line ministries, UN partners, international and national NGOs, civil society organizations (CSOs), and other relevant stakeholders. As an active member of the Inter-Agency Standing Committee (IASC) Cluster system, IOM ensures that interventions are in line with relevant Cluster standards and strategic priorities of the Humanitarian Country Team (HCT).

IOM plays an active role in humanitarian coordination across the sectors. As a co-lead of the Camp Management Camp Coordination (CCCM) Cluster, IOM is present in the Inter-Cluster Coordination Group (ICCG), a member of the United Nations Country Team (UNCT), as well as an active member of the Water Sanitation and Hygiene (WASH), Shelter and Non-Food Items (SNFI), Health, Food Security and Protection Clusters. IOM is a provider of information and analysis at the OCHA-led coordination fora aimed at coordination, information sharing and planning, including the Information Management Working Group. IOM's strong multi-sector presence facilitates integrated and synergistic programming to meet the needs of vulnerable populations.

IOM Capacity

Since 2006, IOM Somalia has set a strong record on the delivery of frontline services to crisis-affected populations, while steadily developing models and partnerships for longer-term recovery and migration governance. The mission has a strong operational presence in all regions through a multitude of projects implemented by over 450 staff. With its head office located in Mogadishu, IOM operations are supported by seven field offices in Kismayo, Baidoa, Doolow, Hargeisa, Bossaso, and Garowe as well as satellite offices in Berbera, Garadag, Adado, Afgoye, Bardere, Dhobley, Hudur and Dhahar in Somalia and the Nairobi Support Office in Kenya. Please see IOM Somalia presence (map) in the documents section.

Since 2017, IOM scaled up its operations and capacities within Somalia and maintains a strong portfolio of multi-sector humanitarian interventions, including CCCM, shelter and non-food items (S-NFI), health, and water, sanitation and hygiene (WASH). IOM Somalia's Preparedness and Response Division provides technical support to the Government in the areas of emergency humanitarian coordination and disaster preparedness and response. IOM deploys third party staff to be able to reach hard-to-reach locations and enable the organization to respond quickly in areas that are difficult to access. IOM strongly engages in bridging the gap between humanitarian and development assistance, with a large transition and recovery, and durable solutions portfolio.

Objective

Save lives and respond to needs through humanitarian assistance and protection

\$46,968,500

Funding Required

1,338,200

Target Beneficiaries

Newly displaced internally displaced persons (IDPs) and crisis and climate-affected populations including vulnerable host communities.

Camp Coordination and Camp Management

Funding Required

\$9,250,000

Provision of Camp Coordination and Camp Management (CCCM) services to men, women, boys and girls in displacement sites in Somalia

IOM will continue CCCM activities in Baidoa, Dollow and Kismayo. IOM will coordinate the delivery of multisectoral services in sites by representing CCCM in relevant coordination forums; conducting site verifications on a quarterly basis; mapping the services available in sites; and monitoring service delivery in sites. IOM will improve the living conditions of displaced people by supporting community-led site maintenance activities to ensure the upkeep of sites; conducting safety audits to identify areas of high protection risk; implementing emergency sites improvement projects to minimise protection risks and ensure safety in sites; and developing new land for the relocation of displaced people. IOM will strengthen community self-management and access to information for displaced populations by supporting diverse and inclusive governance structures; providing capacity building to existing governance structures on CCCM and related principles; providing community spaces for management committees; and operating timely and responsive feedback and complaint mechanisms.

Provision of Coordination capacities for the Camp Coordination and Camp Management Cluster

In order to ensure effective and efficient coordination of camp management operation across affected areas, IOM's contribution towards the co-led cluster coordination team will include a national cluster coordinator, a national cluster information manager and 3 sub-national focal points (Baidoa, Dollow, Kismayo). The team will ensure regular cluster meetings at both the district and national level, working with relevant actors and responders to mobilise assistance and services for those most vulnerable. The coordination team will also ensure representation at inter-cluster and inter-agency forums, representing the need and gap within the sector and advocate for the need of the displaced population living in camps as required.

IOM will continue to expand upon its efforts to build and develop the capacities of local partners and local authorities on CCCM to ensure appropriate, adapted and localised response, while at the same time opening up opportunities and exploration towards durable solutions. The cluster will continue to prioritise its advocacy towards land for the displaced population with local authorities and relevant ministries, as well as ensuring that their need and rights are also reflected in the Somalia Durable Solutions Initiative and other similar coordination mechanisms. At the same time, the cluster will ensure that camp management agencies are actively engaging with community governance structures to ensure that the displaced population are informed about their options on durable solutions.

Health Support

Funding Required

\$12,100,000

Delivery of Primary Health Care Services

IOM will focus on increasing access and utilisation of primary healthcare services among the most vulnerable and crisis-affected populations in the country. IOM will operate 35 static health facilities with integrated community outreach, as well as 10 mobile medical teams. Many of the facilities are in areas that are hard-to-reach, conflict-affected and lack other health actors, and where the population does not have access to basic life-saving health services. IOM will provide comprehensive primary healthcare services in line with the Essential Package of Health Services (EPHS), continuously build the capacity of health workers to ensure high quality of medical service delivery, and preposition medicines and medical supplies in regional hubs to ensure continuous supply to all of IOM-supported health facilities, as well as to the region at large in the event of a sudden emergency. At IOM-operated static facilities, health workers will conduct outreach into the surrounding and nearby communities, including preventative and curative services as well as health education aimed towards behaviour change. IOM will upgrade several existing health posts to provide basic emergency obstetric and newborn care (BEMONC) services, particularly in geographic areas where there are no other health facilities for safe deliveries. This includes providing equipment and supplies as well as training health care workers. To mitigate against recurrent and expected shocks and the effects of continued conflict, IOM will conduct mass vaccination at the entry points to IDP sites, thus increasing immunisation coverage and reducing outbreaks of communicable diseases. IOM will provide health education at the health facilities and in their catchment communities to effect behaviour change in health, nutrition and hygiene practices that contribute to high excess morbidity and mortality, and to increase demand and utilisation of preventative services such as antenatal care, facility delivery, and immunisation. Where needed, IOM will refer the cases to higher-level care.

IOM is proposing to improve service provision for the human immunodeficiency virus (HIV) and tuberculosis (TB) in Somalia by setting up a clinical mentoring system to enhance clinicians' treatment skills. The programme will be implemented in three phases. The first phase will build the capacity of three 'national mentor medical institutions' through training of clinicians by several HIV/TB specialists, focusing on clinical protocols, case management, standardisation of the content of care, service management systems, and task-shifting. In the second phase, the three national medical mentor institutions will roll out clinical mentoring to three national hospitals with support from the HIV/TB specialists, and then additionally conduct clinical mentoring at eight regional medical facilities with robust monitoring and oversight. This approach cascades the HIV, TB and MDR-TB capacity-building from national to sub-national levels of the health system. Building on the first two phases of the project, the third phase will focus on supporting national mentor institutions to incorporate clinical mentorship into institutions' curricula and establish rotations for students (including continuing education) through mentored facilities.

Provision of life-saving curative nutrition services for crisis-affected displaced populations and their host communities in Somalia

IOM plans to integrate 25 Outpatient Therapeutic Programme (OTP) centers into primary health care facilities currently supported by IOM, and into seven mobile clinics in Jubaland, Southwest State, Somaliland, and Puntland. This will allow to identify and treat children aged 6-59 months with severe acute malnutrition (SAM) through access to equitable, high-quality lifesaving OTP services using ready-to-use therapeutic food (RUTF) and micronutrient

supplementation. Pregnant and lactating women will be enrolled in an infant and young child feeding (IYCF) programme and provided with counselling and training, combined with micronutrient supplementation and linkage to immunisation services, especially measles vaccination. In addition, IOM will establish referral mechanisms from the community level to OTP sites, and from OTP sites to/from other nutrition programs— to/from therapeutic supplementary feeding centers (TFSC) for moderate acute malnutrition, and to/from stabilisation centers (SC) for SAM with complications requiring inpatient care. Clinical health and nutrition staff across all integrated OTP and primary healthcare centers will be provided with training and on-the-job mentorship for 200 on integrated management of acute malnutrition (IMAM) and IYCF guidelines. Community outreach nutrition volunteers will be selected and trained via on-job training on mid-upper arm circumference (MUAC) screening, referral to OTPs, and counselling in catchment communities of the OTPs.

Mental Health and Psychosocial Support in Humanitarian Response

Funding Required

\$2,000,000

According to the HNO 2020, 2.4 million individuals are at risk of health outbreak and mental illness. Much of the population face psychosocial problems stemming from the effects of acute and protracted conflict, further exacerbated by climatic and other shocks.

As part of IOM's integrated emergency response program, IOM will focus on providing integrated mental health and psychological support (MHPSS) services to individuals suffering from mental health and psychosocial problems in conflict-affected IDP settlements. IOM will also focus on including those who have experienced violence, assault, sexual assault, and other violations including forms of exploitation.

IOM will implement a pilot project, the first of its kind in Somalia, breaking new ground in improving understanding of the links between mental health and conflict in Somalia. The project aims to address a critical gap contributed to the persistent conflict in Somalia - the lack of psychosocial support and mental health services for conflict-affected youth in Somalia - through a socially-inclusive integrated approach for peacebuilding. The activities in this project will directly empower conflict-vulnerable youth to be agents of peace and positive change in their communities, re-directing youth away from harmful or self-damaging practices that fuel tension and contribute to conflict. This will lead to improved individual and collective youth well-being and resilience, reduced vulnerability of youth to conflict drivers, and stronger community social cohesion.

Activities will be in line with IOM Manual on Community-Based Mental Health and Psychosocial Support in Emergencies and Displacement - which can be found here: <https://www.iom.int/mhpsed>.

Shelter, Settlements and Non-Food Items

Funding Required

\$9,118,500

Provision of life-saving Shelter and life-sustaining NFI services to vulnerable populations in Somalia

IOM Somalia, in conjunction with the Shelter Cluster, set-up in 2018 a contingency stock to preposition life-saving emergency Shelter items in a central warehouse in Mogadishu (Aden Abdulle International Airport - AAIA). The SNFI contingency stock is in line with the Humanitarian Response Plan 2019 (HRP) SO1, SO3 and SO4 along with Somalia Shelter Cluster Strategy 2019 and more specifically objective 1: Contribute to the protection of newly displaced people, IDPs/refugee returns/host community and those affected by natural hazards; and objective 2: Improve the living conditions and contribute to local reintegration of the protracted internally displaced persons (IDPs) and refugees returning to their place of origin. With the establishment of the SNFI contingency stock in 2018, the ability of Cluster partners to respond rapidly to emergencies and crises has greatly improved. IOM and the Shelter Cluster have addressed and improved the preparedness and timeliness of emergency SNFI responses in Somalia. Within the Cluster, IOM oversees procuring, prepositioning, storing, and transporting SNFI supplies to Shelter Cluster partners. The contingency stock also ensures ICRC/IFRC standardization and quality-control of SNFI items, making it easier for national and international partners with presence in remote regions of Somalia to gain access to quality SNFI supplies.

In 2020, IOM will continue to provide a comprehensive SNFI response to affected populations in Somalia through:

1. Procurement of NFI and shelter kits and management of the contingency stock. These kits are available for distribution nationwide by NGO partners where the need arises and as endorsed by Shelter cluster.
2. Emergency shelter and NFI support to newly displaced IDPs in Gedo and Bay Region. Geographical priority will be Gedo and Bay regions given the prevalence of high numbers of newly displaced IDPs affected by conflict, drought and forced eviction in these areas. IOM has active CCCM teams within these regions which enables optimal targeting of beneficiaries, response tracking and accountability. Additional focus will be given to regions such as Lower Juba and Benadir through use of mobile interventions. Based on the cluster guidance, the target is to have 70 per cent of the beneficiaries reached through cash-based interventions, whenever this is feasible and appropriate. The positive impacts of CBI are that it contributes to the sustainability of the project through increasing people's freedom of choice and purchasing power, helps the capitalisation of community assets such as the land on which beneficiaries will be relocated, supports community and social cohesion, and creates temporary income opportunities. This modality also supports local traders and market systems. 10 per cent of the target population will be provided with shelter construction skills training and will be expected to disseminate information and support the wider community in shelter construction. The quality programming of this response will revolve around a solid approach to accountability to the affected population by promoting community participation in programme implementation and accountability to inform analysis and future response.
3. Improve the durability of IDP shelters for those who already have received basic emergency shelter provision.

Funding Required

\$5,500,000

Informing humanitarian planning and response to the needs of internally displaced persons (IDPs) in Somalia through baseline assessments and population-based surveys

Somalia continues to be affected by a humanitarian crisis triggered by natural and man-made factors. With reoccurring floods and droughts as a result of climate-related changes, episodes of armed conflict, clan-related violence, lack of resources and ongoing evictions of internally displaced persons (IDPs) living in urban areas, human mobility and displacement in Somalia is highly fluid (Somalia Humanitarian Needs Overview 2020).

Given access constrains in Somalia, overall IDP figures and needs are calculated through the triangulation of multiple data sources (including IOM's Displacement Tracking Matrix). Each data source uses different methodologies and indicators which makes the creation of a commonly agreed overview of the situation cumbersome and likely unprecise. In addition, Somalia remains characterised by the lack of systematic displacement tracking tools and limited information on IDPs residing in host communities, potentially hampering the effective delivery of humanitarian assistance to a significant part of the IDP population. As such, IOM intends to assist in the implementation of CCCM Cluster tools and to complement them by filling gaps in displacement-related information through its DTM and ad hoc surveys informing durable solutions. In addition, while multiple actors work in information management, an underserved need relates to the reinforcement of Government operational capacities in data collection and information management. As such, IOM intends to work closely with relevant Government authorities to reinforce their capacities, including through the implementation of joint surveys, and the provision of technical assistance, as well as the support in designing information management tools and products.

Displacement Tracking Matrix (DTM) is IOM's global displacement and mobility tracking programme, implemented in more than 60 crisis-affected countries, with the Somalia programme started in April 2016. Humanitarian and development assistance is highly dependent on trends and patterns of human mobility. DTM Somalia aims to improve information management in fluid displacement situations, thereby enhancing evidence-based and timely prioritisation in the delivery of humanitarian assistance. As the need for accurate data on displacement and migration spans both humanitarian and development programming, DTM also aims to support development partners and the Somali government with analyses that can inform the programming of durable solutions to displacement.

IOM will continue to operationalize the DTM with the following three strategic objectives: 1) inform humanitarian action in order to save lives and alleviate suffering in crisis-affected populations; 2) support evidence-based decision making for long-term recovery and durable solutions; and 3) advance the well-being of society and migrants through stronger migration governance and development based on reliable and relevant data.

To achieve the above objectives, the following DTM components will be deployed:

Mobility Tracking:

- DTM Somalia will conduct a baseline assessment (utilizing DTM's B1 and B2 tools) aiming to provide a country-wide mapping of the presence of IDPs, returnees (from abroad and

from internal displacement), absentees (people who left the location and have not returned since) and residents per location (locations in urban areas, villages in rural areas, and IDP sites).

- Utilising the information collected through the baseline assessment, DTM will conduct multi-sectorial location assessments (MSLA) in locations in 20 selected districts. The MSLA will include information on population demographics and priority needs. In addition, the MSLA will report on the community's vulnerabilities to climatic shocks and their coping mechanisms. Read in conjunction with information on weather events collected by other partners, this information will aim to contribute to early warning systems for areas at high risk of displacement in order to inform preparedness efforts. This assessment will take place bi-annually in districts selected together with humanitarian and government partners.
- Given the likelihood of rapid displacement caused by flooding and violence, DTM Somalia will implement the Emergency Trend Tracking (ETT) to provide basic information on displacement and needs within 48 hours of an alert. The data will mostly be collected remotely through the key informants identified in the baseline assessment. Where possible and needed, DTM will also send enumerators to observe the situation and verify the information received by key informants. In the case of displacement caused by flooding, IOM Somalia will count with the support of DTM Geneva to enrich the information with satellite imagery of water.

Flow Monitoring:

- Cross-border flow monitoring: DTM will continue monitoring migratory flows in eight flow monitoring points (Bosasso, Buuhoodle, Cabudwaaq, Dhobley, Dollow, Elayo, Harirad, and Lowyacado). Data will be collected through flow monitoring registry and flow monitoring survey tools on a daily basis, to create monthly dashboards as well as an annual report. The datasets will also be shared with IOM's Regional Data Hub in Nairobi in order to feed into regional analyses of migration flows.
- Internal flow monitoring – Movement Trend Tracking (MTT): in collaboration with IOM's Camp Coordination and Camp Management (CCCM), DTM will produce weekly reports on entry and exit flows in three towns: Baidoa (Bay), Doolow (Gedo) and Kismayo (Lower Juba). CCCM's enumerators will collect the information on the ground with technical assistance from the DTM team. Later on, DTM will process and analyse the data and will release it to the public.

Provision of Water, Sanitation and Hygiene in Emergencies

Funding Required

\$9,000,000

Provision of life-saving assistance and sustainable solution of safe water sanitation and hygiene (WASH) services, for people in crises and their host communities in multiple regions in Somalia

IOM is proposing to contribute to the provision of emergency and sustainable water, sanitation and hygiene promotion services to individuals living in vulnerable settlements and communities in multiple regions in Somalia. Strategic water sources will be constructed and/or rehabilitated,

which will provide reliable and sustainable safe water and mitigate water shortages as a result of displacement and recurrent drought/flooding in hotspots districts to be identified. IOM further proposes to construct new emergency latrines and rehabilitate/desludge others in targeted settlements. The project will also strengthen the capacity of the federal/state government officials, community leaders and water committees/technicians for better coordination and sustainability of the constructed/rehabilitated WASH infrastructures. In addition, the project will nurture community participation in good hygiene practices through training and community sensitization campaigns. The project is aligned with protection mainstreaming to ensure the safety and dignity of affected populations without causing harm. Projects are designed to be inclusive and to focus on supporting the most vulnerable families (female-headed households, child-headed households, elderly-headed households, households headed by or including persons with disabilities, and households headed by or including persons with a chronic disease). Affected populations will further have meaningful access, accountability and participation of activities/beneficiaries design, implementation and feedback mechanism for WASH services. The activity will be part of an IOM integrated emergency response program and resilience building and where possible, efforts will be made to integrate IOM health, nutrition, shelter, CCCM and protection activities.

All activities will be implemented following the WASH cluster recommendations and SPHERE standards.

Multi-sectoral support

Funding Required

\$0

Includes funding which supports multi-sectoral interventions or cannot be attributed to a specific activity area.

Objective

Address the drivers and longer term impacts of crises and displacement through investments in recovery and crisis prevention

\$36,000,000

Funding Required

750,000

Target Beneficiaries

Internally displaced people (IDPs), returnees, and host communities in conflict-affected areas of Somalia.

Community stabilization

Funding Required

\$16,000,000

Communities emerging from crises access basic services sustainably

Community stabilisation seeks to support governments, States and communities undergoing significant socioeconomic and political changes during and following a crisis, in order to

(re)establish stability and security, prevent further forced migration, restore trust among community members, vulnerable populations and local authorities and lay the foundations for durable solutions, lasting peace and sustainable development. Based on an overarching goal to contribute to peace and stability in Somalia, the specific objectives are as follows:

1. Strengthen the government's accountability and responsiveness to the needs of its constituents;
2. Address social exclusion and conflicts over unresolved clan disputes and land as principal drivers of instability;
3. Support communities to drive their own recovery and development processes. Activities will include: i) conduct inclusive community planning resulting in community action plans; ii) implement or refer identified prioritized activities which will increase absorption capacity and provide short term employment opportunities through a cash for work scheme; and iii) hold cultural, arts and, sports events aimed at strengthening social cohesion.

IOM will seek out opportunities to transition from delivering frontline services to addressing long-term challenges more sustainably. For example, as communities emerge from crises, IOM may prioritise borehole rehabilitation or mini water system operation over water trucking. Likewise, regarding shelter, IOM will work with urban communities on participatory planning exercises to better integrate new migrants and assist IDPs to access safer and legally secure housing. Finally, in the pursuit of durable solutions, IOM will help local authorities to strengthen service provision through the implementation of community infrastructure plans. In the case of reintegration of Somalis returning from abroad, IOM will support the government to establish opportunities based on an informed market needs assessment, and encourage beneficiaries to develop opportunities that are individually empowering, but also have a positive impact on the wider community.

Durable Solutions

Funding Required

\$10,000,000

Durable solutions advanced in urban and peri-urban settlements

The Durable Solutions Programme works with the Government, donors, communities, UN and NGO partners to increase the dividends of rapid urbanisation in Somalia and ensure that these result in dignified and voluntary processes of local integration, return and resettlement. Interventions progressively ensure increased access to basic social services, land tenure security, housing and livelihoods, in line with Somali government policy frameworks such as National Development Plan (NDP), Wadajir Framework for Local Governance, FMS/BRA Durable Solutions Strategies, Somalia aid architecture including Somalia Development and Reconstruction Facility (SDRF) and other institutional arrangements. The programme will aim to be more flexible and adaptive with a crisis modifier (early solutions) as well as harness rural-urban linkages, diaspora remittances and private sector engagement opportunities to contribute to durable solutions for IDPs, returnees and host communities, when possible.

Urbanisation is a key challenge that is interlinked with displacement trends. Somalia is anticipated to be 62 per cent urbanized by 2040. Local authorities in Somalia are therefore not only confronted with the enormous pressures of responding to the needs of the displaced

persons, but they are also expected to simultaneously address challenges posed by a very rapid pace of urbanisation. There are serious risks related to urbanisation processes that are non-inclusive and extractive (such as development of irregular settlements/slums, repeated evictions complicating land governance, inadequate service delivery, unemployment, land conflicts, environmental degradation, pollution, increase in land market prices), yet the government has limited capacity and resources to adequately respond to these challenges. The Somali context therefore warrants an overhaul of the traditional approaches dealing with displacement, in order to achieve durable solutions at scale for the approximately 2.6 million IDPs, and building on the newly established Federal Government of Somalia-led Durable Solutions Secretariat.

The IOM Somalia Durable Solutions Programme builds on good practices and is learning from ongoing and previous successful interventions such as the Midnimo and Danwadaag projects to design responsive, value-added, multi-year and multi-partner programmes to address contemporary challenges to influx of returnees, recurrent and protracted displacement in urban and peri-urban setups. These are aligned to Somali's NDP Resilience Chapter: "To reverse the trend of protracted displacement and substantially reduce the number of IDPs in such displacement by facilitating and supporting durable solutions that bring them back into mainstream life and address underlying causes of their displacement and its protracted nature." Activities will follow IOM's Progressive Resolution of Displacement Situations (PRDS) Framework. The PRDS Framework outlines four programmatic pillars which support progression towards durable solutions. These include:

1. Protection, safety and security;
2. An adequate standard of living (access to adequate food, water, housing, health services and education);
3. Access to sustainable livelihoods and employment;
4. Inclusive governance.

The intervention framework will promote a rights-based, migrant centred and government-led community-based planning process to entrench ownership and sustainability of interventions and concurrently bridge the humanitarian-development-peacebuilding nexus. A livelihoods centred approach to foster comprehensive urban solutions linked to HLP, access to basic services, solid waste management, conflict and climate mitigation will incrementally be explored. Programming may also include a range of supporting activities for understanding and resolving the causes of displacement, including research, strategy and policy development and verification of progress using tools such Local (Re)Integration Index (LORI).

Peacebuilding and peace preservation

Funding Required

\$7,500,000

IOM's Disarmament, Demobilization and Reintegration (DDR) programme is a key component of IOM's peacebuilding and stabilisation portfolio that aims to increase Somalia's resilience to destabilising conditions and build national capacity towards sustained peace. The programme aims to contribute to peace and improved security in Somalia through supporting the National Programme on the Treatment and Handling of Disengaged Combatants (National Programme).

The National Programme, which is coordinated by the Defector Rehabilitation Programme (DRP), Ministry of Internal Security, aims to establish a comprehensive process to rehabilitate low-risk male disengaged combatants and women formerly associated from Al-Shabab (AS) and safely reintegrate them in communities to become productive citizens. IOM works in joint partnership with government counterparts to manage rehabilitation centres, and partners with civil society actors to facilitate community-based reintegration and engage the community in dialogue to promote peace, tolerance, reconciliation, and social cohesion.

IOM will continue and extend support to women formerly associated with armed groups and survivors of conflict-related sexual violence (CRSV). Through women's civil society organisation and capacity building of government institutions and communities, IOM will provide women formerly associated with AS, and survivors of CRSV, with gender-responsive and survivor-centred services to include case management, individualised and community mental health and psychosocial support (MHPSS), medical care, livelihoods support, and other social protection mechanisms. IOM will work with communities to improve identification and referral pathways, improve community mental health, encourage help-seeking behaviours, and address issues of stigma and isolation.

With 80 per cent of Somalia's population under 35 years of age and many of them trapped in an environment of violence, fear, unemployment and poverty, IOM specifically focuses on supporting youth-at-risk of joining and/or being recruited into armed/criminal groups to reintegrate into civilian life. IOM's approach focuses on developing human and social capital among the youth and helping them to secure dignified livelihoods, often in dedicated facilities such as vocational training, job or youth centres that bring these services closer to the target population.

Health System Strengthening

Funding Required

\$2,000,000

Over the year 2020, IOM will continue its efforts towards health system strengthening. This includes a continued partnership with the Ministry of Health at the national and local level, secondment of staff towards capacity building, and development of activities for improved preparedness and risk reduction and MHPSS. Public health risk reduction, capacity building and health system strengthening supports the government health system to better respond to shocks such as droughts, flooding, severe food shortages, displacement, and the health consequences of each of those such as disease outbreaks and limited access to essential services which impacts the health and well-being of the displaced populations and host communities.

Displacement Tracking for Recovery and Crisis Prevention

Funding Required

\$500,000

IOM's Displacement Tracking Matrix (DTM) will conduct thematic and annual surveys on community stabilisation. Through these surveys, IOM seeks to better understand the level of trust that displacement affected communities have in local authorities, as well as community cohesion. The data will be presented in the form of a Community Stabilization Index (COSI) that will serve to inform community stabilisation activities as well as the transition towards durable solutions programming. This survey will be repeated annually in selected locations.

OPERATIONAL PRESENCE

63	International staff and affiliated work force	and	506	National staff and affiliated work force	5	IOM Field Offices
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