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## Emergency appeal operations update

### Regional Coordination: Food Crisis in Africa

 International Federation  
of Red Cross and Red Crescent Societies

<b>Emergency appeal n° MDR60003</b>		
<b>Operations update n° 1</b>		<b>covered by this update:</b> 19 April to 12 May 2017
<b>Emergency Appeal start date:</b> 19 April 2017		<b>Timeframe:</b> 18 months
<b>Appeal budget:</b> CHF 3,877,335	<b>Appeal coverage:</b> 13% (in-kind)	<b>N° of people being assisted:</b> 1,600,691
<b>Host National Society presence:</b> This regional appeal focuses on immediate regional support to those countries with existing country level appeals and responses.		
<b>Red Cross Red Crescent Movement partners actively involved in the country-level operations:</b> American Red Cross, Austrian Red Cross, Belgian Red Cross, British Red Cross, Danish Red Cross, Canadian Red Cross, Finnish Red Cross, German Red Cross, Icelandic Red Cross, Iran Red Crescent Society, Luxembourg Red Cross, Swiss Red Cross, Spanish Red Cross, Netherlands Red Cross, Norwegian Red Cross, and ICRC.		
<b>Other partner organizations actively involved in the operation:</b> In many of the countries under the umbrella of the Regional Coordination Food Crisis in Africa Emergency Appeal, the IFRC have ongoing programs with the following: <b>World Food Program (WFP)</b> operates in Kenya, Malawi, Mozambique, Puntland and Zimbabwe in the areas of Livelihoods and Food Security and in Water Sanitation and Hygiene. <b>Care International</b> is partnering in Mozambique, Somalia (Somaliland), and Zimbabwe in the areas of Livelihoods and Food Security and Water, Sanitation and Hygiene. <b>UNICEF</b> is present in Kenya, Malawi and Somalia (Puntland) supporting Water, Sanitation and Hygiene programs. <b>Others</b> – partners such as Norwegian refugee Council, FAO, Save the children, Oxfam, IRC, Caritas are also partnering with National Societies in the region.		



Figure 1 In Gaebilay, Somalia, most of the children brought by their mothers to the Red Crescent clinic are malnourished. Volunteers take their weight and height and, if necessary, provide a dietary supplement. Photo: Arie Kievit/Netherlands Red Cross

The Regional Food Crisis in Africa Emergency Appeal (EA) seeks CHF 3,877,335 to enable the International Federation of Red Cross and Red Crescent Societies to support National Societies in their activities to help the population affected by the Food Crisis in Africa. The Appeal was launched to complement and to support the current country-level emergency operations Emergency Appeals (EAs) related to the Food Crises, mainly those focusing on drought and food insecurity. It aims at providing a structural framework for the country-level EAs, enabling opportunities to support the country-level response activities by strengthening and scaling up operational support, coordination, communication, capacity building, security and safety for staff and volunteers in all affected

countries in the region. The scope is to better assist the affected population by addressing challenges in response and early recovery and effectively utilizing resources through shared opportunities. The Regional Coordination Food Crisis does not highlight specific implementation activities, but rather provides a strategy to coordinate implementation in the country-level EAs for enhanced synergies. In total, seven countries under the Regional Coordination for Food Crisis in Africa framework (Ethiopia, Kenya, Malawi, Mozambique, Namibia, Somalia and Zimbabwe), including DREF-supported operations, seek to reach over 1,600,691 people through the consolidated support of 53,835,245 Swiss francs. The main components of the response focus on multi-sectoral needs through Health and Nutrition, WASH, Food Security and Livelihoods' interventions. Anticipated appeals in Nigeria and South Sudan will drive the total beneficiary population of this appeal considerably higher.

The Regional coordination team dedicated to this Food Crisis Appeal is based in Nairobi and now functional with the arrival, between last week of April and first week of May of the following surge positions: Operations Coordinator, Health\Nutrition, Cash Transfer Programming (CTP), Planning, Monitoring, Evaluation and Reporting (PMER), and Logistics. The IFRC would like to thank the Australian Red Cross, the Canadian Red Cross, the Danish Red Cross, the Netherlands Red Cross and Luxembourg Red Cross to have funded the deployment of these key regional positions.

### **Situation Analysis:**

Since the end of 2016, the African continent is facing an unprecedented food crisis. According to the Famine Early Warning Systems Network (FEWS-NET), 70 million people across 45 countries could require food assistance in 2017. Famine was formally declared in parts of South Sudan by the UN in February 2017, and Nigeria, Ethiopia and Somalia are facing a credible risk of famine this year.<sup>1</sup>

The causes and factors of this crisis are multi-layered. At the environmental level, the severe droughts observed in 2015/2016 due to El Nino and in 2016/2017 due to La Nina with below-average rainfall have sharply reduced crop harvests and severely limited the availability of water and pasture for livestock in the region. These effects have been amplified by a chronic situation of below average rainfall and poor harvest seasons for the last few years. At the social level, the environmental impacts have drastically reduced the coping capacities of the population, especially for those already impacted by reduced livelihood opportunities or other circumstances, such as poor access to health facilities.

Conflicts and violence have further exacerbated vulnerabilities of the population present in affected countries. At the economic level, the persistence of local or regional conflicts have been creating disruption to household livelihoods, production of food and trade. Another consequence of this violence is decreased access to humanitarian aid. This is particularly true in Nigeria, Somalia and South Sudan. Further, the lack of preventive measures has not allowed for proper mitigation efforts for the risks connected to the food crisis.

In South Sudan, conflict and insecurity along with the upcoming lean season puts additional counties at risk of famine unless humanitarian assistance is delivered<sup>2</sup>. According to FEWS-NET, evidence suggests Nigeria was impacted by famine already in 2016 and the situation remains critical. In Somalia, failure of the October to December 2016 Deyr rains and a forecast of poor spring rains threatens a repeat of the 2011 disaster. The emergency has reached the highest levels of humanitarian concern (IPC Phase 4) in three countries and likely in Ethiopia through September. The situation is characterized by large food gaps, significant increases in the prevalence of acute malnutrition, and increased mortality among children.

Taking into consideration the effects of population movement, the situation is particularly problematic in the East Africa region due to the extreme complexity of population movements, which include Internally Displaced Persons (IDPs), refugees, migrants, people displaced because of the drought, returnees, as well as people moving in huge numbers from rural areas to urban centres. The current crisis is likely to lead to an increase in the number of displaced persons across the region, adding considerable pressure on the existing and already limited resources available in most of the countries concerned, thus having an impact on the overall humanitarian situation. These movements may also exacerbate competition for resources such as water, food and pasture, with increasing possibilities of local tensions that could lead to conflict. Provision of Health, water sanitation and hygiene (WASH), Relief, Shelter and Protection (provision of

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<sup>1</sup> <https://www.fews.net/>

<sup>2</sup> [www.ipcinfo.org](http://www.ipcinfo.org)

information, Restoring Family Links (RFL) in affected areas will be necessary for migrants also and measures in this regard should take into consideration the specific vulnerabilities of migrants. The IFRC expects some population movement to cause further overcrowding and disease outbreaks especially within urban centers. It is therefore important to keep the door open for multiple scenario planning which will further highlight population movements (or even stabilizing or host populations), where specific support such as shelter and gender/diversity could be included, fostering the links from relief to recovery (LRRD).

To prevent a situation similar to the one of 2011, where interventions and humanitarian support arrived too late and lacked longer-term vision, the IFRC has launched this appeal to scale-up actions in the most affected countries in support of the National Societies and to do more to increase the resilience of people to cope with the environmental, social and economic impacts.

### Summary of current response:

Since January 2016, when Ethiopia first launched its country appeal for drought, the IFRC has published the following Emergency Appeals in support of the current Food Crisis in Africa. Detailed response activities are provided in the links provided.

**Table 1**

Country	Appeal Code	Appeal Budget (CHF)		Targeted Beneficiaries	
		Original EA	Current Revision	Original EA	Current Revision
Ethiopia : Drought	<a href="#">MDRET016</a>	2,211,085	13,686,550	35,371	318,325
Kenya : Drought	<a href="#">MDRKE039</a>	3,844,037	25,062,572	114,620	1,033,300
Malawi : Food Insecurity	<a href="#">MDRMW012</a>	749,268	3,590,677	10,000	22,474
Mozambique : Food Insecurity	<a href="#">MDRMZ012</a>	1,702,895	1,702,895	14,767	21,762
Namibia : Food Insecurity	<a href="#">MDRNA009</a>	950,205	1,303,195	11,500	16,500
Somalia : Drought	<a href="#">MDRSO005</a>	1,290,936	3,308,035	78,990	150,000
Zimbabwe : Food Insecurity	<a href="#">MDRZW011</a>	832,900	5,181,321	10,830	38,330
Regional Coordination for the Food Crisis in Africa	<a href="#">MDR60003</a>	3,877,335	-----	-----	-----
<b>TOTAL</b>		<b>11,581,326</b>	<b>53,835,245</b>	<b>276,078</b>	<b>1,600,691</b>

The latest Appeal, the Regional Coordination for the Food Crisis in Africa Appeal, was launched on 19 April 2017 as per request for additional regional support and coordination to implement the country-level EA operations, scale and ramp them up. The benefits of regional coordination are eight-fold<sup>3</sup>, as it: 1) provides strategic oversight at the regional level; 2) consolidates monitoring and data information across the Africa Region; 3) develops and encourages partnerships at country and regional level; 4) enhances community resilience to future shocks; 5) facilitates and encourages regional learning; 6) harmonizes technical and operational approaches; 7) scales up engagement and accountability approaches; and 8) enables one voice within the Federation and the Movement.

The Regional Food Crisis in Africa Appeal's surge members, arrived between end of April and beginning of May, are now based in Nairobi and currently focusing on Ethiopia, Kenya, Nigeria, Somalia and South Sudan, operations where acute and urgent needs are prevalent<sup>4</sup>. Among the seven Emergency Appeals mentioned in Table 1, the ones for Malawi, Mozambique, Namibia and Zimbabwe, are now in their concluding phase. Nonetheless, these countries continue to be closely monitored as they remain highly vulnerable.

The Red Cross Red Crescent response may vary from one country to another accordingly with specific needs configuration. As part of the monitoring tools, the Red Cross Red Crescent Movement uses [FEWS NET](#)

<sup>3</sup> for a detailed description, see [MDR60003](#) Plan of action

<sup>4</sup> The full scope of the Regional Coordination for Food Crisis in Africa EA refers to 12 countries. As per FEWSNET, the 12 countries are: Ethiopia, Kenya, Somalia, South Sudan, Nigeria, DRC, Chad, Uganda, Niger, CAR, Tanzania and Burundi

emergency Integrated Phase Classification (IPC) levels to monitor the severity of food insecurity alongside other compounding factors (such as mortality and land degradation). Monitoring of IPC levels for the countries is included in the operational analysis of the EA. For this Food Crisis Regional Appeal, a Scenario Planning and Operational strategy document has been developed to ensure that all countries within the scope are closely monitored. This will allow for pro-active decision-making and moves towards preventing disaster. The scenario planning document is to be reviewed each month or more often if needs be. This document follows up global trends in climate, food security, and health as well as expected crisis peaks. For each country, it presents response options.

As for **specific highlights of this reporting period**, the National Societies of Nigeria and South Sudan, with the support of IFRC and ICRC are currently in the process of reviewing and finalizing their Operational plans for the food crisis. During this period, a Head of Operations with FACT has been deployed to **Nigeria** to conduct further assessments, review and consolidate the preliminary Emergency Plan of action, and proceed with implementation. The sectors covered by the response are Food security, Livelihoods, WASH, Shelter, DRR and NSD (at HQs and branch level). The response, will comprise a strong Cash transfer component for different sectors, namely Food security, Livelihoods and Shelter. The FACT, comprising of Team Leader, WASH, Information Management (IM), Health, Finance /Administration, Security, Logistics and CTP members is almost complete and mainly based in Yola (Adamawa). For its part, the **South Sudan** National Society is completing a Plan of action, in collaboration with ICRC and PNSs in country, which will comprise a strong capacity building component. The regional Operations Coordinator for the Food Crisis at regional level is heading to South Sudan end-May to support the finalization of the process. The **Ethiopia** Red Cross National Society is equally willing to ramp up its activities and has requested additional surge capacity in PMER, Logistics and Cash transfer programming to better support its programs and activities.

The **Somalia** Drought Appeal is currently under revision and should be transformed into a Complex Emergency Operation, which will have a strong Food/Nutrition component while including the Acute Watery Diarrhea (AWD) outbreak response plan. Efforts are under way to also produce a One Movement Plan that will focus on aligning partners' strategies, including ICRC, to ensure a higher level of complementarity within the Movement. To support the revision and the ramping up of activities, an Operation Manager has been deployed, with FACT WASH, Surge Health, Surge PMER and Surge Logistics at the end of April to Somalia. Also, a seven-day field mission comprising a Geneva-based health in emergencies Senior officer, the Somalia's office Health representative, the Head of Emergency Operations (HeOps) for IFRC regional food crisis, the Operation Manager for the Food Crisis in Somalia, together with the Surge WATSAN and the Surge CTP delegates travelled to Somalia. During their stay, a workshop on Health in Emergencies was held with Somalia Red Cross Society (SRCS) health coordinators from both Somaliland and Puntland, as well as operation managers, medical staff DM and volunteers from both regions. The workshop focused on AWD prevention and treatment to enhance capacities in both fixed and mobile clinics, as well as on a strategic positioning of Oral Rehydration Points and Centers. The participants were introduced to mobile data collection. The workshop also provided the opportunity for response plans to be developed for the AWD outbreak, and the integration of mobile data collection in their operations moving forward. A session on nutrition was conducted to enhance the nutrition intervention capacity of the teams in field.

Field assessment visits were also conducted outside of Hargeisa to ensure that all clinics are able to operate at capacity in the coming months, in response to the AWD and measles outbreaks as well as malnutrition, with lean season starting at the end of May. The visits led the Somali Red Crescent Society to request the deployment of a Health Emergency Response Unit (ERU) with AWD treatment capacity, which will be adjacent to a Regional Hospital and the support of activities in three different locations where dire needs were expressed. It is envisioned that the ERU will be the main referral center for the treatment of AWD and serve as a regional center of excellence. An advanced team of three arrived on 12 May to set up the ERU in-country and the remaining members are expected to land in country in coming days. The ERU will assist with resources including supplies, staff, and equipment, while providing assistance with clinical case management and co-ordination of activities with the National Society. A major focus of the ERU will be capacity building and training. Ongoing analysis of data will guide the team's operations. To reach the at-risk population, Somali Red Crescent Society will utilize its network of existing mobile and static clinics as AWD treatment units and its network of community volunteers to establish community-based treatment Oral Rehydration Points (ORP). Limited access to health care, limited access by response actors to affected areas due to insecurity, and high malnutrition rates require a tailored approach targeted at reducing the case fatality ratio of the outbreak and limiting the spread and reducing transmission.

A Surge Cash Transfer Programming delegate went in Somalia to meet with the SRCS and see what are the priorities in terms of cash as well as reviewing previous IFRC cash programming to see how to proceed efficiently with cash in the appeal revision. The Surge CTP coordinated with the German Red Cross cash delegate to ensure Red Cross Movement tools and guidelines are used within bilateral programs, as well. An induction training on mobile data collection tools focusing on ODK and Kokotoolbox was also held, including participants from SRCS, IFRC and GRC. WATSAN is also a priority, focusing on ensuring as much as possible, that adequate clean water is available in all clinics and Oral Rehydration Salts (ORS) and ORC's. The Somalia Drought Appeal revision is planned to be complete in June.

In **Nairobi**, between 1st and 5th May, the regional office organized a five-day training to support health and Nutrition coordinators, Disaster Managers and WASH program coordinators assess, design and plan interventions in context of malnutrition crisis. The training focused on understanding the context, scenario and response planning, monitoring and coordinating response with a focus on quality implementation. The training provided timely and context specific information to allow National Societies and partners to support communities with lifesaving and resilience building interventions. The training focused on technical content as well as support coordination and collaboration between the sectors to ensure a comprehensive response. Twelve implementing National Societies participated, including all high-risk countries in the current regional crisis for a total of 30 participants.

## IFRC overall Response Management and Coordination

The Regional Coordination team for the Food Crisis, based in Nairobi is now functional with the arrival between last week of April and first week of May of the following surge positions: Operations Coordinator, Health/Nutrition, Cash Transfer Programming (CTP), Planning, Monitoring, Evaluation and Reporting (PMER), Information Management (IM) and Logistics. Since their arrival, Work plans have been prepared, aligned with the EPoAs, the Food Crisis Scenario Planning and Operational strategy and the Joint Concept Note IFRC's plan for stopping hunger in Africa<sup>5</sup>. The team members have been actively involved with operations remotely or in countries.

**Cash transfer programming (CTP)** interventions were or are being planned and implemented within the seven Emergency Appeals (Somalia, Kenya, Ethiopia, Malawi, Zimbabwe, Mozambique and Namibia). For a better understanding and coordination of the current CTP capacities and activities, an assessment and mapping out was undertaken. The resulting CTP mapping displays a variety of modalities, from food assistance or restocking of livestock through vouchers, to unconditional cash-in-hand or mobile money.

During a seven-day mission in Somalia, a quality review of the Cash Transfer Program in Somaliland was initiated to assess the response needs and gaps and scale up engagement and accountability approaches. Further capacity building, aligned with the Movement Cash in emergency toolkit guidelines will ensue. Movement coordination is key to harmonize technical and operational approaches. The cash support delegate is also closely liaising with the various IM surge delegates (in Nairobi and Nigeria) to ensure that the relevant data collection and monitoring tools are set-up for CTP.

Contacts have been established with German Red Cross implementing mobile cash transfers in Somaliland, with Kenya Red Cross, which is implementing CTP in the 14 countries covered by the [drought Emergency Appeal](#). and with ICRC which has a wide footprint with CTP in various countries covered by the current appeal. External coordination has also been initiated by linking with the Somalia Cash Working Group, as well as the regional focal persons of the Cash Learning Platform (CaLP).

**Health and Nutrition:** The Health and nutrition specialist (IFRC Geneva Public Health in Emergencies, Senior Officer) was part of the Somalia seven-day mission during the last week of April leading assessments to feed the one-movement plan of action under revision, a mapping of health activities and a workshop on health and nutrition in Emergencies. The mission led to a request for ERU Health deployment.

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<sup>5</sup> **12-12-12 plan:** 12 life-saving interventions needed in 12 countries for at least 12 months.

Between 1st and 5th May, the regional nutrition in emergencies training was held in **Nairobi** to which participated Twelve implementing National Societies participated, including all high-risk countries in the current regional crisis. The surge Health and Nutrition delegate arrived on May 1st for handover and participated in the training. The surge delegate will be the regional technical focal point for health and nutrition for the food crisis in addition to assisting in better coordination of activities. Moreover, her role will involve developing shorter and longer term strategies in nutrition. Over this reporting period and the coming weeks, the focus will be on Somalia and Kenya.

**Logistics:** Logistics is an important component of the response due to difficult to reach areas as well as for procurement in technical areas like food procurement or technical health. During this reporting period, one week after arrival in country, the Logistics Surge was deployed to Somalia to support the operations team with assessments in Hargeisa and Berbera, with logistics modalities and steps for scaling up of operations related to the EPoA and its joint revision between Movement partners. The mission of the logistics surge in Somalia was eventually extended, to prepare the arrival and installation of the ERU-Health unit in Hargeisa.

**Planning Monitoring Evaluation and Reporting (PMER):** The priority for PMER is focusing on bringing together a cohesive regional monitoring and reporting framework as well as providing an overview of progress and of statistics for the overall regional food crisis operation and coordination. This should stem from standardization of the monitoring, reporting and planning of activities through harmonization of indicators, display of relevant data as well as from an enhanced flow of information through situation reports and planning exercises. Since arrival PMER and IM have been working together at launching processes for reporting, monitoring and mapping out Movement partners' activities as well as sectors' activities.

**Information Management (IM):** A Food Crisis [Dashboard](#) has been set up and is updated with links to relevant documents (Appeals, Operations updates and maps). Further work has been done to create an internal movement dashboard, which will be launched later this month. The dashboard is planned to be also used to display key indicators, now in the process of being defined. A SIMS delegate is in Nairobi to help with creating maps and a dashboard for the AWD and measles outbreak in Somalia. A number of secondary data (satellite and basic maps, security, Health, ...) sources have been identified to give a better overview of the situation. A 4Ws (Who, What, Where, When) mapping exercise is ongoing to better portray the Movement activities and programs in each country for the food crisis. For internal use an ARO-drought's SharePoint is continuously updated.

**Communications:** So far in the crisis, IFRC communication colleagues in Nairobi and Geneva have issued six [press releases](#) highlighting the East Africa food crisis and Red Cross and Red Crescent work in support of the millions of people affected. A number of web stories and photo galleries have been posted on [ifrc.org](#) and Medium, and all news and appeals have been promoted across social media channels such as Facebook, Twitter, Instagram and You Tube.

Since mid-February, IFRC work to promote the appeals and raise awareness of the crisis has also received strong support from ICRC and the National Societies of Germany, Australia, Salvador, the Netherlands, Britain, Uganda, Canada, Italy, Kenya, Spain, Norway, Finland, United States, Sweden and Turkey, all of which have covered East Africa on social media.

A large number of communications materials have been produced by IFRC or National Societies, and have been made available for use across the Movement network: 33 videos from Kenya, Uganda, Somalia, South Sudan and Ethiopia (including 13 interviews with expert spokespeople), 579 photographs, and 148 b-roll videos. These have been used extensively by National Societies to communicate with their domestic audiences, and also to support their own national appeals.

IFRC has facilitated or supported several National Society missions to the affected countries, including two missions by British Red Cross (Kenya and Somalia), Australian Red Cross (Somalia), Canadian Red Cross (Ethiopia), Netherlands Red Cross (Somalia), Icelandic Red Cross (Somalia), Norwegian Red Cross (South Sudan), and the Swedish Red Cross (Uganda). Many of these missions received strong media coverage internationally and in domestic markets.

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1. Revised Emergency Appeal budget (if needed) [below](#)

2. Click [here](#) to return to the title page

## 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 (NGO's) 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.

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

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3. Promote social inclusion and a culture of non-violence and peace