

Country card

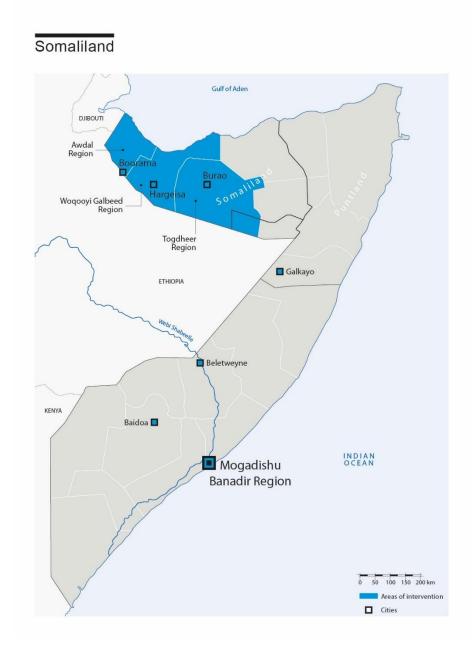
Somalia/Somaliland





HI Team and intervention areas

The HI Ethiopia Somalia program has 73 staff members.



In the Woqooyi Galbeed, Awdal and Togdheer regions of Somaliland and Benaadir of Somalia, HI intervenes in supporting at-risk people in accessing protection, psychosocial and mental health support, health and functional rehabilitation, and works towards ensuring that humanitarian action is inclusive of persons with disabilities and other populations at risk of being excluded (see details part V- scope of intervention).



General data of the country

a. General data

Country	Somalia	Ethiopia	France
Population	15893219	114963583	67391582
IHDI		4.49	0.90
Gender related development Index		0.837	0,987
Maternal mortality	829	401	8
GINI Index		35	31,6
Population with UNHCR Mandate	16741	903226	368352
INFORM index	9	6.3	2,2
Fragile State Index	110.89	94.60	30,48
Public social Protection		3.2	31,7
Net Official			
development	1864.5	4924.5	
assistance received			

b. Humanitarian law instruments ratified by the country

Humanitarian law instruments	Status
UN Convention on the Rights of Persons with Disabilities (CRPD 2019)	Ratified
Convention on Child Rights (2015)	Ratified
Convention on Cluster Munitions (2015)	Ratified

c. Geopolitical analysis

Endemic inter-clan fighting for control of land, pasture or water sources, a phenomenon intensified during drought conditions, continues to displace civilians. Insecurity also drives displacement and heightens humanitarian needs. Protracted internal displacement situations in Somalia have also led to loss of social protection networks. Many have been displaced from their homes for decades, are marginalized and at risk of forced evictions, discrimination, pervasive exploitation and abuse. Female-headed households within internally displaced communities are particularly vulnerable and often have limited access to justice, services and assistance, including medical care and psycho-social support. Children are especially vulnerable to various forms of abuse, including Harmful Traditional Practices (HTP) like female genital mutilation (FGM), forced and early marriage, family separation, child labor and forced recruitment into armed groups.



It should be noted that Somaliland is more socially homogeneous than Somalia or indeed most other African states (and greater homogeneity tends to mean higher levels of trust between citizens).

Summary of HI presence in the country

Handicap International started in Somaliland in 1992 by setting up a rehabilitation center in Hargeisa. HI's strategy in Somaliland is to advocate for the rights of persons with disabilities and to engage development actors in promoting inclusion and participation of people with disabilities at both local and national levels. From 2010-2014, with DAN, SNDF and the PDON, HI implemented a Human Rights project entitled "Enhanced participation of Somalis with disability for human rights and democracy in Somaliland and Puntland." This project strengthened the capacity of 15 Disabled Persons' Organizations (DPOs) at grassroots level to empower people with disabilities to actively promote and advocate for their rights for protection and inclusion. A major outcome of this intervention was the development of a Disability Policy for Somaliland and Puntland.

In 2017, when severe droughts occurred, HI was present with reduced activities in Hargeisa for an inclusive elections project. The worsening situation due to drought called for an adapted response. The organization decided to respond to the crisis along two axes: inclusion mainstreaming for NGOs working on the humanitarian response, and simulative therapy for malnourished children.

HI is implementing two projects, both focusing on promoting inclusive humanitarian action. One of the projects is funded by German Federal Foreign Office (GFFO) titled "Protection, psychosocial emergency aid and referrals to other lifesaving services for most at-risk displaced and host populations." This project has invested in raising awareness around inclusive humanitarian action through clusters such as CCCM, WASH and protection. The other project is a partnership with Danish Refuge Council (DRC) funded by ECHO, titled "Reducing risks and saving lives of crisis-affected households through inclusive and integrated community-based emergency response in Somalia." The role of HI is to support the DRC to be more inclusive, specifically working in three streams: MEAL processes, WASH and Protection sectors. This collaboration is designed also to produce some lessons learned and good practices for future replication and to influence more actors towards being more inclusive.

Through these projects, various aspects of inclusive Humanitarian Action have been explored, including how to collect quality data on disability, inclusive communication and exposure to various frameworks such as the IASC guidelines on inclusion of people with disabilities and the CRPD. The interest of humanitarian/mainstream actors about disability inclusion has been raised and continues to gain momentum.



Overview of ongoing projects

Sectors of services where HI conducts projects and focuses on beneficiaries and operational partnerships

sectors of intervention n Protection and risk reduction/ Inclusive Humaniatri an action an action Providing safe, equal access to water, Sanitation & Hygiene) emergency assistance HI provides: - Disability inclusion training and capacity building to consortium partners staff. - Awareness of disability inclusion - Review of plans and tools for inclusive data collection and response. - Capacity building partners on inclusive programming. - Documentation of lessons learnt and best practices to measure the impact and level of inclusive response provided. - Providing safe, equal access to water, sanitation and improved hygiene for comunity committees and volunteers trained and empowered volunteers trained and empowered on inclusive programming. - Premale-headed households, Child-headed households, Elderly individuals, Persons with disabilities; - People with chronic illnesses; - Pregnant and lactating women - Polish Humanitarian action (IHA) and inclusive programming in inclusive programming and capacity building partners on inclusive programming. - Documentation of lessons learnt and best practices to measure the impact and level of inclusive response provided.	Main	Objective of the	Main activities	Beneficiaries	Final beneficiaries	Partners	Location	Dates of beginning
Protection and risk reduction/ Inclusive Humaniatri an action How will be response. Capacity building partners on inclusive programming. Documentation of lessons learnt and best practices to measure the impact and level of inclusive. Providing safe, equal access to water, sanitation and improved hygiene for crisis-affected communities. HI provides: Disability inclusion training and capacity building to consortium partners staff. Awareness of disability inclusion Review of plans and tools for inclusive data collection and response. Capacity building partners on inclusive programming.	sectors of	project in the sector						and end of the
Protection and risk reduction/ Inclusive Humanitari an action Humanitari an action Review of plans and tools reinclusive data collection and response. - Capacity building partners on inclusive programming. - Documentation of lessons learnt and best practices to measure the impact and level of inclusive.	interventio							project and Donors
and risk reduction/ Inclusive Humaniatri an action Humaniatri an action Basilitation & Hygiene, emergency assistance Inclusive Humaniatri an action Households, emergency assistance Hill provides: Disability inclusion training and capacity building to consortium partners staff. Awareness of disability inclusion Review of plans and tools for inclusive data collection and response. Capacity building partners on inclusive programming. Capacity building partners on inclusive programming. DEC 2021 Action (PAH), Middle Shabelle Funded by ECHO Shabelle Persons with disabilities; People with chronic illnesses; Pregnant and lactating women Capacity building partners on inclusive programming. DEC 2021 Action (PAH), Middle Shabelle Funded by ECHO Shabelle Funded by ECHO Shabelle Funded by ECHO Action (PAH), Middle Shabelle Funded by ECHO Shabelle Funded by ECHO Shabelle Funded by ECHO Action (PAH), Middle Shabelle Funded by ECHO Shabelle Funded by ECHO Action (PAH), Middle Shabelle Funded by ECHO Shabelle Funded by ECHO Action (PAH), Middle Shabelle Funded by ECH	n							funding it
	intervention Protection and risk reduction/ Inclusive Humaniatri	WASH (Water, Sanitation & Hygiene)	sanitation and improved hygiene for crisis-affected communities. HI provides: Disability inclusion training and capacity building to consortium partners staff. Awareness of disability inclusion Review of plans and tools for inclusive data collection and response. Capacity building partners on inclusive programming. Documentation of lessons learnt and best practices to measure the impact and level of inclusive	community committees and volunteers trained and empowered in inclusive humanitarian action	households, Child-headed households, Elderly individuals, Persons with disabilities; People with chronic illnesses; Pregnant and	Humanitarian Action (PAH),	Hiran and Middle	project and Donors funding it MAY 2021 – DEC 2021





Protection
and risk
reduction/
Inclusive
Humaniatr
an action /
Protection
against
violence
and abuse

- Prevent, reduce and respond to the risks and consequences of violence, coercion, deprivation, exclusion and abuse.
- Improve access to safe drinking water, sanitation and hygiene for crisis-affected communities, IDPs and other vulnerable populations.

Provide inclusive, integrated, community-based emergency response in Somalia.

Extend mainstreaming of disability and inclusion issues to other actors through the Protection Cluster.

HI supports:

- Raising awareness of inclusive humanitarian action
- Capacity strengthening through tailored trainings, learning sessions, technical advisory, awareness sessions, and coaching.
- Documentation of lessons and best practices.
- Disability inclusion in other DRC's/Protection cluster programs

160 Humanitarian actors are empowered to be more inclusive in their programming

40 protection cluster partners trained on inclusive humanitarian action

• Children, • Elderly individuals,

• Persons with disabilities,

- Women,
- Pregnant lactating women (PLW)

Danish JAN 2021 -Benadir, DEC 2021 Refugee Gedo, Council (DRC) Hiraan, Bay,

Funded by ECHO

Somalila nd and

Bari



n and risk reduction/ Disaster risk reduction and climate change	Secure livelihoods of (agro-) pastoralists and reduce negative coping mechanisms. Provide unconditional cash assistance, water supply, assured survival of livestock, and inclusive disaster management.	 Identifying barriers and capacities for inclusion in WASH, food security and livelihoods. Technical assistance, orientation and training to project partners in Disaster Risk Management. Strengthening inclusion and humanitarian assistance in communities and organizations of and for persons with disabilities Documenting and sharing practices with stakeholders Access for older people and persons with disabilities to functional rehabilitation and mental health services Strengthening capacities for inclusive humanitarian action Peer support group creation 	 220 participants of GoSL and Consortium Partners staff trained in inclusive disaster risk reduction 620 volunteers/community leaders/consortium project staff trained in disability inclusion. 300 beneficiaries identified to access functional rehabilitation and/or mental health services 4 intervention sites supported to become accessible. 10 peer support groups established. 	Internally Displaced Persons, Host communities, Vulnerable people and households, Elderly and/or chronically ill people, Pregnant and lactating women, Community leaders and Consortium project staff.	Concern Worldwide (CWW), Welthungerhil fe (WHH), Veterinaires Sans Frontières (VSF Germany)	Somalila nd, Awdal Region, Zeylac, Lughaya and Baki Districts. Togdheer Region, Oodwey ne district.	APR 2019 – MAY 2022 Funded by GFFO.
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Donors

