

FEDERAL GOVERNMENT OF SOMALIA



Ministry of Labour & Social Affairs

**PROJECT:
SOMALIA SHOCK-RESPONSIVE SAFETY NET FOR HUMAN
CAPITAL PROJECT**

SOCIAL MANAGEMENT PLAN (SMP)

September 2019

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Abbreviations and Acronyms

CBT	Cash-Based Targeting
CBPT	Community Based Participatory Targeting
CFM	Complaints and Feedback Mechanism
CPF	Country Partnership Framework
CSC	Community Steering Committee
DFID	U.K. Department for International Development
DPFP	Data Protection Focal Person
DWG	Donors Working Group
EAFS	External Assistance Fiduciary Section
EU	European Union
FAO	Food and Agriculture Organization of the UN
FCV	Fragility, Conflict, and Violence
FGS	Federal Government of Somalia
FM	Financial Management
FMFA	Financial Management Framework Agreement
FMS	Federal Member States
FRS	Federal Republic of Somalia
GBV	Gender-Based Violence
GDP	Gross Domestic Product
GRM	Grievance Redress Mechanism
HIPC	Heavily Indebted Poor Countries
IDA	International Development Association
ICSP	Interim Country Strategic Plan (WFP)
IDP	Internally Displaced Person
IFMIS	Integrated Financial Management Information System
IFR	Interim Financial Report

IMF	International Monetary Fund
IPC	Integrated Phase Classification
MAM	Moderate Acute Malnutrition
M&E	Monitoring and Evaluation
MEB	Minimum Expenditure Basket
MIS	Management Information System
MoF	Ministry of Finance
MoLSA	Ministry of Labour and Social Affairs
MTR	Midterm Review
NDP	National Development Plan
NGO	Nongovernmental Organization
PDO	Project Development Objective
PFM	Public Financial Management
PIU	Project Implementation Unit
PP	Procurement Plan
PPA	Public Procurement, Concessions, and Disposal Act
PPSD	Project Procurement Strategy for Development
SAM	Severe Acute Malnutrition
SCALED-UP	Somalia Capacity Advancement, Livelihoods and Entrepreneurship through Digital Uplift Project
SCD	Systematic Country Diagnostics
SEA	Sexual Exploitation and Abuse
SEP	Stakeholders Engagement Plan
SMP	Staff-Monitored Program
SNHC	Shock Responsive Safety Net for Human Capital Project
SP	Social Protection
SSN	Social Safety Net
STEP	Systematic Tracking of Exchanges in Procurement
TA	Technical Assistance

TAF	Technical Assistance Facility
TOR	Terms of Reference
TMT	Transfer Management Team
TPM	Third-Party Monitoring
UCS	Use of Country Systems
UCT	Unconditional Cash Transfers
UN	United Nations
UNICEF	United Nations Children's Fund
WFP	World Food Programme

1. Country context:

- 1.1. Over the past two decades, Somalia has endured persistent periods of conflict, political instability, and environmental and economic shocks, resulting in widespread hunger and malnutrition. Over half of the country's 12.3 million people live below the poverty line of USD 1.9 per day¹. Conflict, drought and floods have triggered large-scale displacements: 2.6 million Somalis are displaced and an additional 1 million are refugees in neighbouring countries². Since 2012, Somalia has made considerable strides from a “failed” state to a “fragile” state with the establishment of the Federal Government of Somalia. Significant progress continues with the founding of permanent political institutions and a federal institutional structure. These developments are hindered to deliver benefits for the majority of the Somali people due to recurrent cycles of conflict, drought and floods and the resulting damage to infrastructure left many without access to basic public services, now being progressively re-established. Inequality is high. Internally displaced person (IDP) settlements fare the worst, with poverty rates of over 70 percent³. Between 70 and 80 percent of IDPs and refugees are women and children⁴. Gender inequality in Somalia is the fourth highest in the world⁵, with high levels of gender-based violence, harmful practices such as girl marriage, the under-representation of women in decision-making bodies and discriminatory customs relating to the production, procurement, purchase and preparation of food. School enrolment and educational attainment are low and access to education is skewed in favour of boys, who constitute 56 percent of children enrolled in primary school⁶. Only 17 percent of children living in rural areas and IDP settlements are enrolled in primary school. Somalia also has a growing population of young people for whom unemployment is a concern.
- 1.2. From mid-2015, severe drought conditions, conflict, increased displacement, lack of access to basic services and the absence of a formal social protection system caused an acute food and nutrition crisis that brought Somalia to the brink of famine in 2017. Scaled-up humanitarian assistance and some seasonal improvements helped to avert famine, but humanitarian and recovery needs are expected to remain high. The latest drought caused an estimated USD 3.25 billion in damage and losses, resulting in a recovery process that is likely to last many years⁷. With historical trends showing droughts occurring regularly at intervals of 2–3 years in the deyr season and 8–10 years in consecutive deyr and gu seasons⁸, alongside annual flooding during the rainy season, it is expected that seasonal hardships will be extended, and that recovery will be hindered in the absence of resilience strengthening measures.

¹ See www.worldbank.org/en/country/somalia/overview.

² United Nations High Commissioner for Refugees. 2018. Somalia: Factsheet – 1-30 June 2018.

³ See www.worldbank.org/en/country/somalia/overview.

⁴ United Nations Development Programme. 2016. Gender in Somalia Brief 2.

⁵ Organisation for Economic Co-operation and Development Centre. 2014. Social Institutions and Gender Index.

⁶ Federal Government of Somalia. 2017. Education Sector Analysis 2018–2020.

⁷ Federal Government of Somalia, World Bank, the European Union and the United Nations. 2018. Drought Impact Needs Assessment.

⁸ Ibid

2. Purpose of SMP

- 2.1. The main purpose of this Safeguards Management Plan (SMP) is developed to address the concerns raised in the Environmental and Social Commitment Plan (ESCP) that may arise during implementation of the 'Shock responsive Safety Nets for Human Capacity' Somalia. The SMP aims to a) assess the social risks and impacts of the proposed project interventions; b) Develop measures to enhance positive impacts and mitigate negative risks and impacts, if any arising from the project. This document therefore establishes procedures and methodologies for social assessments, review, approval and implementation of investments to be financed under the Project, as the nature, scope and locations of activities become known during the implementation of the Project, under Component 1 only. As the Project under the Systematic Operations Risk Rating Tool (SORT) has identified Social Risks as substantial, this management plan intends to address the identified risks and mitigation measures to be addressed by Ministry of Labour and Social Affairs (MoLSA) / Federal Government of Somalia (FGS) through WFP and partners during project implementation. WFP implementing on behalf of MoLSA will provide learning for other components to adapt these interventions. Component 2 which will be implemented by UNICEF on behalf of MoLSA and Component 3 will be managed by MoLSA directly, therefore these components are presently, outside the scope of this document.
- 2.2. The SMP describes the appropriate roles and responsibilities of WFP, Cooperating Partners and other stakeholders, and outlines the reporting procedures on social issues. It describes the managing and monitoring processes of social concerns related to the project investments. It further determines the training, capacity building and technical assistance required for WFP and Partners to successfully implement the provisions of the SMP and ESCP; and provides practical information resources for implementing the SMP. It also lays out the Project's staffing and institutional arrangements clarifying the relations between WFP as the key implementer, the target communities, beneficiaries, the relevant ministries and the key partners – UNICEF & World Bank, including their roles and responsibilities in view of the implementation of the SMP.

3. Progress towards implementing Social Protection policy by MoLSA

- 3.1. The National Development Plan (2017 -2019) envisions the consolidation of the five different Peace and State Building Goals and the capacity development of the three comprehensive pillars, namely Pillar 1: Consolidation of Security, Peace and Promotion of Good Governance, Pillar 2: Consolidating the Macro-economic Framework and Restoring Key Sectors, Pillar 3: Access to Basic Social Services and Social Welfare. The SNHC project will directly contribute towards Pillar 1 of promoting good governance by providing safety nets to vulnerable Somali population and Pillar 3, by increasing access of vulnerable population to Social Service and Social Welfare. The SNCH project also contributes towards the Social Protection Policy objectives of establishing and strengthening systems and capacities of the government of Somalia and other stakeholders to design, implement, and monitor coordinated and effective social protection programmes;

Progressively expanding access to social assistance, especially social transfers that support poor vulnerable people to invest in their future and build resilience to shocks; Extend access to social care services for poor and vulnerable households and individuals.

- 3.2. WFP in undertaking the SNHC project on behalf of MoLSA also fulfils the mandate under SDG 2 which the FGS is committed to achieve. In 2016, the Somali Government officially launched its plan for implementing the Sustainable Development Goals (SDGs) of the 2030 Agenda for Sustainable Development and established its first national development plan in over thirty years. Building on the new deal compact, the National Development Plan 2017–2019 (NDP)⁹, outlines a strategy for accelerating socio-economic transformation in order to reduce poverty, revive the economy and transform Somali society in a socially just and gender-equitable manner¹⁰. The SDGs are mainstreamed throughout the plan. Several chapters relate to SDG 2, including those on social and human development, economic development and resilience. While recent data on all the SDG indicators with age and sex disaggregation are currently unavailable, the information below demonstrates the current challenges to achieving SDG 2. The SNHC project in building human capacity will contribute towards improved access to food all year round and end all forms of malnutrition in Somalia.

4. Macroeconomic environment

- 4.1. Somalia's current economy is dependent on imports, which creates a trade deficit financed by remittances and international aid¹¹. Agriculture, mainly livestock, is the largest sector, the biggest employer in rural areas and the major export earner. Largely because of the growing economic importance of livestock production and exports, at least 75 percent of gross domestic product (GDP) comes from agriculture. Somali farmers lose up to 30 percent of their crop harvests annually due to poor post-harvest storage, which limits potential export growth¹². Domestic markets are linked with Kenya and the Gulf States through ports and towns bordering Kenya, Ethiopia and Djibouti.
- 4.2. Although economic growth averages 3.4 percent a year, the economy is vulnerable to market shocks, particularly commodity price fluctuations and environmental shocks¹³. Government capacity to generate revenue and stabilize the macroeconomic environment is constrained by the small size of the formal economy and difficulties in collecting taxes because of insecurity and institutional constraints. Official development assistance accounted for 21 percent of Somalia's

⁹ The National Development Plan for Somalia 2017 – 2019 <http://bit.ly/2ZEpz0k>

¹⁰ National Development Plan 2017–2019, p. iii.

¹¹ Ibid

¹² Ibid

¹³ African Development Bank. 2018. African Economic Outlook 2018.

GDP in 2016¹⁴. Unemployment is high: 48 percent among those under 3023 and 74 percent for women¹⁵.

5. Cross-sectoral linkages

- 5.1. Poverty and a lack of a national social protection system inhibit people's access to nutritious food (SDG 1). Somalia ranks among the weakest countries in the world for health indicators¹⁶, reflecting consistently poor nutrition and health (SDG 3). Limited educational attainment and enrolment leave children and young people less aware of food security and nutrition and limit job opportunities and livelihoods (SDG 4). High gender inequality exacerbates food insecurity by curtailing women's access to nutritious food (SDG 5). Poor water and sanitation facilities and practices compound poor health and nutrition (SDG 6). Economic growth is insufficient to provide employment for all those able to work, affecting the ability of Somalis to purchase adequate food (SDG 8). Weak infrastructure hinders the transportation of food to markets and to vulnerable populations (SDG 9). Conflict, coupled with the resulting infrastructure damage and access challenges, limits food access and availability (SDG16).

6. Hunger gaps and challenges

- 6.1. The underlying causes of food insecurity and malnutrition are complex. Household access to food is hampered by poor crop production and high livestock losses in consecutive years, poverty, conflict, displacement, political and economic instability, gender inequality, low income and climate shocks. This is more challenging for poor households; IDPs; marginalized groups including women and disadvantaged minorities; and vulnerable social classes such as women-headed households, children, the elderly and the disabled. Somalis rely on social capital and kinship networks to meet their basic needs. Years of conflict have degraded natural capital, increasing vulnerability and acute hunger. Drought has exacerbated existing vulnerabilities and the social, economic and political marginalization of women, who bear disproportionate responsibilities¹⁷ that can hamper their ability to meet their own food needs and those of their dependants.
- 6.2. Food insecurity is more frequent and intense in parts of regions in the north (Awdal, Bari, Sool, Sanaag, Togdheer and W. Galbeed), centre (Galgaduud, Hiiraan and South Mudug) and south (Bay, Bakol, Gedo, Lower Sabelle and Lower/Middle Juba) and among IDP populations mainly concentrated around urban centres¹⁸. Given the limited capacity to withstand shocks and

¹⁴ Ibid

¹⁵ United Nations Development Programme. 2016. Gender in Somalia Brief 2.

¹⁶ For life expectancy, maternal mortality, the mortality of children aged under 5 and immunization coverage.

¹⁷ Federal Government of Somalia, World Bank, the European Union and the United Nations. 2018. Drought Impact Needs Assessment

¹⁸ Somalia integrated context analysis 2007–2017.

stressors, coupled with the frequency of droughts and flooding, food insecurity is likely to continue to rise in the absence of assistance.

- 6.3. Migration to the main urban centres is increasing, exacerbated by recurrent droughts. Food insecurity is increasingly linked to urban poverty, and IDPs (who have largely lost their livelihood opportunities and community support networks) regularly have the highest GAM and food-insecurity rates. Rising numbers of returnees and refugees from neighbouring countries face similar challenges and require help to protect their food security and nutrition status.
- 6.4. A nutrition causal analysis study in southern Somalia found that malnutrition is driven by food insecurity and socio-cultural factors that lead to suboptimal infant and young child feeding practices and care¹⁹. These factors include systemic gender inequalities evident in women's disproportionate workloads (domestic and casual labour), the prevalence of girl marriage and early motherhood, low formal education rates for girls, restrictions on mobility, lack of sexual and reproductive health services, and discriminatory socio-cultural beliefs about childcare and health-seeking practices.

7. Environment and Social Standards (ESS)

- 7.1. The World Bank Environmental and Social Framework sets out the World Bank's commitment to sustainable development. Through the ESS policy and a set of Environmental and Social Standards that are designed to support Borrowers' projects, the Bank aims to help end extreme poverty and promote shared prosperity. At the appraisal stage of the project, the social risks associated with this project were rated as substantial. This is due to the possibility that unconditional cash transfers issued to women and other vulnerable groups might generate gender-based violence, exclusion, selection bias, elite capture, challenges to access the site for project delivery and monitoring, as well as inward migration. These risks would in turn upset the delicate socio-political balance in the project areas. Owing to these factors the following social standards apply:
 - a. **ESS 1: Assessment and Management of Environmental and Social Risks and Impacts.** Based on the Bank risk classification of this project, which is rated as substantial, this document looks at the type, location, sensitivity, and scale of the project; the nature and magnitude of the potential social risks and impacts; and the capacity and commitment of the Federal Government of Somalia (including WFP responsible for the implementation of the project) to manage the social risks and impacts in a manner consistent with the ESS.
 - b. **ESS 2: Labor and Working Conditions:** ESS2 recognizes the importance of employment creation and income generation in the pursuit of poverty reduction and inclusive economic growth. WFP on behalf of the Federal Government of

¹⁹ Strengthening Nutrition Security in South Somalia Consortium. 2015. Nutrition Causal Analysis Study: South and Central Somalia.

Somalia will promote sound worker-management relationships and enhance the development benefits of the project by treating workers in the project fairly and providing safe and healthy working conditions. This section is covered in the Labor Management Plan, which is a separate document

- c. **ESS 10: Stakeholder Engagement and Information Disclosure:** ESS 10 recognizes the importance of open and transparent engagement between the Borrower and project stakeholders as an essential element of good international practice. The project will undertake effective stakeholder engagement to improve the social sustainability of project, enhance project acceptance, and make a significant contribution to successful project design and implementation. This section is covered in the Stakeholder Engagement Plan, which is a separate document.

8. WFP Interim country strategic Plan (ICSP) 2019 -2021

- 8.1. The WFP ICSP lays out the overarching framework for all WFP activities in Somalia. The following section provides a brief background to the rationale for WFP engagement and its Strategic Objectives in Somalia.
- 8.2. **For over the past twenty years, Somalia has experienced frequent conflict, political instability, and environmental and economic shocks, resulting in widespread hunger and malnutrition.** Despite significant political progress, poverty is rife, and many Somalis still do not have access to basic public services. Chronic food insecurity and poor nutrition, exacerbated by shocks and weak food systems and national capacity, pose a challenge to the achievement of Sustainable Development Goal (SDG) 2, on achieving zero hunger. To address these challenges, WFP has adopted a holistic approach that recognizes the interconnected nature of relief, nutrition, resilience, food systems, capacity building and partnership. Through this interim country strategic plan, WFP will continue to respond to critical needs while supporting national systems – such as by working with national authorities and partners to establish reliable safety nets that respond to shocks, to strengthen food systems and to strengthen national capacity through a consolidated approach. Thus, while continuing to draw on its comparative advantage and coverage to respond to crises, WFP will implement broader safety net and resilience-strengthening activities, working across the humanitarian-development peace nexus.
- 8.3. **WFP’s interim country strategic plan (ICSP)²⁰ encompasses lessons learned from WFP programming and reflects feedback gathered across Somalia during stakeholder consultations.** It is closely aligned with the Somalia National Development Plan (2017–2019) and regional development plans, as well as the humanitarian and recovery priorities for food security and nutrition set out in the humanitarian response plan and the drought impact needs assessment for Somalia. This reinforces WFP’s commitment to work within national priorities to achieve SDG 2. WFP will work with a range of actors to deliver efficient, effective and equitable assistance,

²⁰ Interim Country Strategic Plan 2019-2021. <https://www.wfp.org/operations/so01-somalia-interim-country-strategic-plan-2019-2021>

including through innovative partnerships with national and regional government institutions, United Nations and international organizations, international and national non-governmental organizations, civil society and the private sector.

- 8.4. The ICSP contributes to SDGs 2 and 17 and WFP strategic results 1, 2, 4, 5 and 8 through six strategic outcomes: ➤ **Strategic outcome 1:** Food-insecure and nutrition-insecure people in areas affected by natural or human-caused disasters have access to adequate and nutritious food and specialized nutritious foods that meet their basic food and nutrition needs during and in the aftermath of shocks. ➤ **Strategic outcome 2:** Food-insecure people in targeted areas are better able to withstand shocks and stresses throughout the year. ➤ **Strategic outcome 3:** Malnourished and food-insecure children, adolescent girls, pregnant and lactating women and girls, and clients undergoing anti-retroviral therapy or directly observed treatment for tuberculosis in areas with persistently high rates of acute malnutrition have improved nutritional status throughout the year. ➤ **Strategic outcome 4:** National institutions, private sector actors, smallholder farmers and food-insecure and nutritionally vulnerable populations benefit from more resilient, inclusive and nutritious food systems by 2021. ➤ **Strategic outcome 5:** National institutions have strengthened policies, capacities and systems for supporting food-insecure and nutritionally vulnerable populations by 2021. ➤ **Strategic outcome 6:** The humanitarian community is better able to reach vulnerable people and respond to needs throughout the year. Together, these outcomes will support Somalia on the path towards zero hunger, recovery and lasting stability.

9. Safety Nets and Human Capacity (SNHC) Project Development Objective(s)

- 9.1. The project development objective is to provide cash transfers to targeted poor and vulnerable households and establish the key building blocks of a national shock-responsive safety net system.

Component 1: Nutrition-linked Unconditional Cash Transfers (US\$53 million equivalent):

- 9.2. This Component will provide unconditional cash transfers to households that are chronically poor and vulnerable to drought and malnutrition and link them to complementary nutritional support programs.
- 9.3. The objectives of the component are: (i) support households to strengthen their resilience and avoid negative coping mechanisms (e.g. selling off existing households' assets) to meet escalating needs as a result of the drought in the short term; and (ii) promote human capital investment in the medium to long term by linking beneficiary households to complementary nutrition services

(where it exists)²¹ and continuing to smooth consumption gaps through predictable and reliable provision of cash transfer, even after drought risks are no longer present. Around 200,000 beneficiary households (approximately 1.2 million individuals)²² with children under five years of age will receive a monthly payment of US\$ 20 delivered on a quarterly basis. The benefit size has been based on estimates and initial data on prices of the minimum expenditure basket (MEB) for food²³. The average food MEB for 2019/2018 is 70 USD per family per month. The transfer value under the SNHCP 20 USD per households and per month is 42% of that average.

- 9.4. The Component will complement humanitarian assistance as a means of responding to the 2019 drought. Humanitarian agencies focus on areas experiencing emergency and crisis levels of food insecurity in order to prevent famine, based on the results of the countrywide seasonal assessments led bi-annually by FSNAU. By contrast, this component will be targeting areas, which have been affected by food insecurity and malnutrition chronically over the past years; and are therefore more at risk of sliding into emergency and stressed during climate shocks. Component 1 will therefore lessen the burden on the humanitarian assistance programs by preventing beneficiary households from reaching emergency and crisis levels of food insecurity, or by providing long term support and cushioning against the impact of such shocks.
- 9.5. The cash transfers will cover all of Somalia's states as well as Somaliland and focus primarily on rural areas²⁴. Most humanitarian assistance covers urban and peri-urban areas as well as IDPs, and relatively less goes to rural and nomadic areas where around 50 percent of the population reside and experience chronic levels of food insecurity. Districts selection will be based on a distress index as described in the targeting methodology mutually agreed with MoLSA, as well as based on access and presence of WFP partners.
- 9.6. Implementation of Component 1 will be supported by WFP who will be contracted by MoLSA under a service contract arrangement to deliver nutrition-linked cash transfer. To enhance the visibility of the role of FGS in delivering assistance to its people, WFP will make clear that this is a Government project through its sensitization and communication to communities and the general public.

Component 2: Delivery Systems and Institutional Capacity Building (US\$ 6 million equivalent)

- 9.7. Component 2 will establish the key building blocks of a social protection delivery system and advance policy development, as well as strengthen institutional capacity of relevant government ministries to manage and implement it. The objective of the component is to build capacity of FGS/MoLSA to gradually take over full management and implementation of a safety net program and form the foundation for a more comprehensive social protection system in Somalia. The

²¹ It would also be expected that this could lead to an increased demand by households for nutrition services, thereby compelling service providers to expand coverage in rural areas.

²² This assumes an average household size of 6 members.

²³ Food MEB calculation is based on caloric needs for cereal, cowpeas, oil and sugar for household of six members.

²⁴ For instance, Banadir will not be covered under component 1 as it is a main urban municipality.

component will provide policy support; technical assistance for the development of safety net delivery systems: a unified social registry, MIS, operational procedures for registration, enrolment, targeting, grievance redress, payment delivery, monitoring, community outreach and information campaign; and capacity building activities.

- 9.8. As the component will not directly target beneficiaries and does not include any assistance to the Somali population, no associated specific social risks have been identified.

Component 3: Project Management, Monitoring and Evaluation, and Knowledge Management (US\$ 6 million equivalent)

- 9.9. Component 3 will establish a Project Implementation Unit (PIU), strengthen MoLSA's coordination arrangements, promote learning and knowledge management through robust M&E and support explore a design of a pilot productive safety net targeted at youth.

- 9.10. As the component will not directly target beneficiaries and does not include any assistance to the Somali population, no associated specific social risks have been identified.

10. Management of Social Risk

11. Social Risks Management Plan

The Social Management Plan (SMP) will be specifically cognizant of the following factors and include specific mitigation measures to address them. The following risks have been identified:

- 11.1. **Exclusion:** The security and other challenges associated with working in rural Somalia make effective stakeholder engagement and community participation very challenging. As such, the challenges of ensuring the project reaches vulnerable community members, (such as minorities, people with disabilities or widows) present in any cash transfer project are amplified.
- 11.2. **Selection:** The project targets women and children at risk of malnutrition due to the drought. As such, gender and other cultural dynamics will need to be managed to ensure transferred cash being captured by spouses, family, nominated caregivers, community leaders or armed groups but instead makes it to the intended beneficiaries.
- 11.3. **Elite or Clan capture of project:** With no formal safety net system, Somalis largely depend on informal, clan-based support in the face of increasingly frequent shocks. As such, there is a risk that local community dynamics will see attempts to capture the benefits of the project for a particular group.
- 11.4. **Remoteness:** The unconditional cash transfer system employed on this project has been used more in urban and peri-urban areas of Somalia than rural areas to date. While the methodology has been tried and tested in rural areas of Somalia, the cultural differences between rural areas creates a different set of challenges to urban environments which if not managed could complicate project implementation.

- 11.5. **Systemic Weakness:** As noted below, the borrower capacity for preventing adverse social impacts on the project is limited, as is the borrower’s capacity for redressing the impacts of social harm where it has occurred.
- 11.6. **Difficulty monitoring:** Security concerns and the remoteness of the project target areas combine to provide a significant challenge for monitoring and supervising project implementation. This can include challenges for community and stakeholder engagement, grievance redress and other risk mitigation protocols.
- 11.7. **Inward migration:** As the project only operated in a small number of districts in each region in Somalia (the most drought affected) there remains a possibility, that people from neighbouring districts will seek to migrate to the project areas to benefit from the project. This runs the risk of upsetting the clan balance in remote regions and exacerbating social and environmental fragility through associated population flows.
- 11.8. **Gender Based Violence:** There is the possibility of increased risk of gender-based violence and abuse of women and children in situations of poverty, hunger, conflict, insecurity and displacement. Women’s lack of access to and control of assets, services and income increases their economic dependence as well as their vulnerabilities to abusive and exploitative situations. Cash assistance may also unintentionally contribute to GBV. Special safeguards need to be put in place to ensure that these risks are averted and or mitigated and redressal mechanisms put in place.

To mitigate the above-mentioned risks, the following measures will be put in place. Some of the measures address multiple risks and are accordingly referred to the relevant section within this document.

12. [Exclusion:](#)

Exclusion:

Identified risk: The security and other challenges associated with working in rural Somalia make effective stakeholder engagement and community participation very challenging. As such, the challenges of ensuring the project reaches vulnerable community members, (such as minorities, people with disabilities or widows) present in any cash transfer project are amplified.

Mitigation measure: To ensure that the project mitigates challenges associated with effective stakeholder engagement and community participation, the project has specifically designed a) an **objective targeting process**; b) **clan dynamics and equity across geographical areas**; c) **Community Inclusive Targeting**; d) **Complaints and Feedback Mechanism**. These are elaborated in the section below.

[Objective Targeting process](#)

- 12.1.1. WFP will undertake a Mixed Targeting method to ensure that the most vulnerable households are identified from the targeted communities, in the jointly agreed districts, from all states of Somalia. Within each state, targeting will be conducted in three stages: (a) selection of districts, (b) selection of communities in the targeted districts, and (c) community-based targeting (CBT) of households in selected communities based on the household eligibility criteria.
- 12.1.2. Within each state, the districts are ranked according to an objective distress rating, which is an index that considers: (a) the proportion of rural population in the district's total population, (b) the district's projected IPC rating (number of times the district was given a crisis or emergency IPC rating since December 2012), and (c) the incidence of SAM and MAM in the population of children under five years.
- 12.1.3. In addition to the distress index, the selected districts will be assessed against the criteria of security and access, as well as capacity for partners to implement. If any of the districts are deemed to lack accessibility because of security challenges or capacity, they will be replaced by the next most distressed district in the state. The access factor will be determinant in choosing between 2 districts with the same distress index, or even between 2 districts, one having a high distress index with very little access, the following having next highest distress index but adequate access.

Clan dynamics and Equity across geographical areas

- 12.2. To ensure that the project mitigates challenges associated with effective access and engagement of the communities, and as the population of Somalia is structured based on the clan system, the project will take steps to ensure that minority clans as well as vulnerabilities characterising of these affiliations are represented in the project. The project will address exclusion risk at both the macro level – district, and at the micro level – community level (elaborated in the section below).
- 12.3. At the macro level, while the districts with the highest distress are generally selected, in case two pre-selected districts within the same state index are mainly populated by the exact same clan, then the second one is replaced by the district with the next highest distress index instead. This allows for some balance in clan representation.

Community Inclusive Targeting

- 12.4. To avoid exclusion at the micro level or community level, the process of Community Based Participatory Targeting (CBPT) enables the vulnerable community members to have a say in the selection process.
- 12.5. Within the targeted communities, WFP and partners conduct community-based participatory targeting (CBPT) to select the most vulnerable households in the community as beneficiaries of the programme. To ensure that the CBPT process is inclusive and minimizes potential exclusion, it consults not only local authorities and clan leaders, but also various groups such as women groups, and clan minority groups. Based on the cultural sensitivities, women's meetings will be held separately to those of the men. The Community consultation is also aimed

at sharing information regarding the project. The information includes; the project design; geographical target location; target population; selection criteria and methodology; feedback and complaints mechanisms. The following steps will be implemented in the targeting process²⁵.

- i. The CP, MoLSA and WFP will sensitize community leaders (traditional, elected and religious) on the criteria of selection to ensure clarity and understanding, but also to seek their support on the methodology. A broad agreement on the modalities of the selection process will enable the targeting process to continue with the consent of the local leaders.
- ii. The CP, MoLSA and WFP will hold consultative meetings with men, women, disabled, the elderly and the clan minority group representatives to share details of the project and selection criteria, and get their views on the project and criteria.
- iii. A selection committee is established with full membership drawn from the different stakeholders, including local traditional leaders, religious leaders, representatives from local Government/municipality, women's group and minority groups. A selection committee is formed through a nomination process. Names are proposed, discussed, and the final list of committee members validated.
- iv. The committee organises village consultative meetings, which are open meetings. The committee shares project information on aim and objectives, coverage, target group, targeting criteria and entitlements, collaborations and targeting process.
- v. Based on the established selection criteria (family with children under five belong to poor and very poor groups), the committee records the names of proposed beneficiaries on paper. The list is then read publicly for confirmation and validation. Once validated, the list is signed by the committee and submitted to the CP. A window period of one week is given for any complaints or feedback from any community member. If preferred, the feedback can be given anonymously to the CP, WFP, or through the WFP hotline.

12.6. The main selection criterion is primarily that families need to have children under 5. Besides, additional suggested targeting parameters include: enrolment of a household member in nutrition treatment programme over the past 6 months; high dependency ratio to sole bread winner – more than 6 people-; child headed household; lack of a breadwinner; female headed household²⁶, disabled dependent; livelihood assets disproportionate to generating income for the household²⁷. Those are some of the identified factors generally associated with vulnerability in Somalia and will be indicated as broad parameters to communities for the selection. This logic of selection will be explained to the community so that they understand that resources are channelled to the neediest amongst them. However, this list of criteria is not prescriptive, and, should the Community Based Targeting exercises reveal that other vulnerability factors are also relevant in a given community, they will also be taken into consideration for prioritization.

²⁵ For details on the planned Targeting process, refer to the updated Targeting Note of the PAD.

²⁶ Women divorced, separated, absentee husband.

²⁷ Livelihood assets collectively don't generate income to meet the Minimum Expenditure Basket (MEB)- *Food* for the household.

Complaints and Feedback Mechanism (CFM):

- 12.7. To ensure that WFP is able to effectively reach key stakeholders and the most vulnerable members of the community, WFP has established a toll-free hot line to provide a direct channel for interface. In case issues with the selection process arise, people will be able to call the hotline and log in their complaint with WFP directly. The CFM not only aims at strengthening accountability to communities but also to identify a range of protection, fraud and diversion issues as well as other concerns related to delivery of WFP assistance.
- 12.8. The toll-free hotline is managed by WFP through a call centre located in Somalia (Puntland), which is open from Sunday through Thursday from 8.30 am to 5 pm. The call centre hosts 14 WFP Somali staff (Somali speakers) that can be reached through four different phone numbers from several operators, Hormuud, Golis, SomTel and Nationlink, so that it can be accessed from all over Somalia. The WFP Somalia hotline numbers are: Hormud: 0617 140164; Golis: 0907 053722; Telesom: 0633 228003; Somtel: 0627 795373. The entire country is covered by either of these mobile phone operating companies. The information on WFP's hotline numbers is widely available through posters that will be displayed in the communities benefiting from the project and is also printed on the backside of SCOPE cards.
- 12.9. Telephone coverage has been expanding very fast in Somalia over the past years and phones are now accessible to most Somalis. In 2013, according to a study based on a national survey conducted by the Broadcasting Board of Governors (BBG), and Gallup, more than seven in 10 Somalis (72.4%) said they personally owned a mobile phone. As of end 2018, according to the World Bank, about 9 in 10 Somalis over the age of 16 owned a phone. In the rare case when they do not own one, people borrow a relative's or a neighbour's when there is a need.
- 12.10. The Call Centre operators receive complaints through the CFM, record them and log them in the WFP online case management system. All information related to a case is recorded in the online system, including: case description, complainant information (name, phone where the person can be called back, location, etc.), date, location, activity, CP. Operators classify the cases according to their risk level (high, medium, low and residual risk).
- 12.11. Cases are assigned to specific WFP staff, who receive an automatic notification by email for follow up – for instance the Head of Programme in a specific WFP office. The staff responsible for taking action records his/her actions in that same system to close the loop, after which the call operators call back the complainants and inform them of the resolution of their issue.
- 12.12. Different risk levels have different process flows and time limits for action, with high risk cases (suspicion of fraud for instance having a shorter timeline for action). WFP's monitoring unit monitors case resolution closely, to ensure that cases are addressed within the defined timeframes. Cases can be closed in the system only after the complainant has confirmed that the issue was actually solved.
- 12.13. In case of reports of conflict of interest, abuse of power or harassment by WFP or WFP CP staff, the operators escalate the cases through the Risk Management and Compliance officer.

Reports of sexual exploitation and sexual harassment by project staff will be referred to WFP PSEA focal points, and onward to WFP' Investigation Office at Headquarters. Reports of alleged SEA as well as other GBV incidents can be received from anonymous letters, incident reports, emails, or through the call centre and regular monitoring. WFP has developed a GBV referral and programming protocol to support all staff (including WFP's call centre staff) in reporting and referring cases of domestic abuse or sexual assault to trained service providers who would be able to offer the specialized assistance. Cooperating partners will use the referral pathway to refer GBV survivors to available services in coordination with protection actors. Call centre operators will receive refresher training on how to handle GBV/SEA cases, support survivors and refer them to the appropriate services. WFP will ensure that all staff in the field offices as well as call centre operators and CPs are informed and have an updated list of GBV/Protection actors working in each area. Details of the referral protocol are discussed in GBV Action Plan. (Annex – 2).

- 12.14. In addition, contingent on resource availability, WFP will request its partners to have their own complaints and feedback mechanisms, particularly to handle minor on-site operational issues to allow for a smooth assistance process. It is in the interest of WFP and its beneficiaries that all issues are solved as quickly and thoroughly as possible, and sometimes the most effective way is to address issues directly at the site by the implementing partner. To increase the channels and safe spaces available for people to report SEA and GBV incidents related to the SNHCP project, WFP will partner with the service providers that receive the most referrals and that offer a wide range of services (such as one-stop centres that offer comprehensive medical, legal and psychosocial support) to ensure that GBV support services are available for each targeted community and that cases related to the project can be tracked. WFP will also collect information from its CPs on the incidents reported directly to them and referred to identified service providers.

13. Selection:

Selection

Identified Risk - The project targets women and children at risk of malnutrition due to the drought. As such, gender and other cultural dynamics will need to be managed to ensure transferred cash being captured by spouses, family, nominated caregivers, community leaders or armed groups but instead makes it to the intended beneficiaries.

Mitigation measure: WFP will use its **SCOPE system** to ensure that people collecting the cash transfers are the selected and intended beneficiaries of the programme. In case of capture of benefit after redemption, by non-entitled people, beneficiaries will be able to contact the **Complaints and Feedback Mechanism** or WFP hotline, or to address their grievance directly to the WFP monitors or CP staff on site for WFP or the CP to take action.

Information technology solution through SCOPE

- 13.1. WFP will guarantee, through its SCOPE registration and payment modality, that the actual recipients of the assistance are the intended ones. Once the beneficiaries are selected through the community-based selection targeting criteria, the CP will register them in SCOPE and enrol them under the SNCHP intervention. The biometric data (ten fingerprints and well as picture) of the principal recipient and two alternates will be recorded in SCOPE and on the Scope card.
- 13.2. WFP will print the cards, which the CP will then distribute to all enrolled household. Only the household principal or alternate recipients, whose biometrics are collected during the SCOPE registration, will be able to redeem the cash assistance from the service providers. The SCOPE card itself stores the biometric information of the registered recipients. When the beneficiary comes to the service provider to collect his/her cash, the bank employee starts by verifying on the finger print scanner, the biodata of the beneficiary. He/she then checks that the fingerprint recorded in the chip on the card, matches with the finger print read on the scanner. The card can therefore only be used by the intended beneficiary of the programme. This process eliminates the risk of a non-intended person capturing the assistance meant for the beneficiary.

Complaints and Feedback Mechanism (CFM):

- 13.3. In case any issue arises, and a non-intended person captures the entitlement of an intended beneficiary following redemption, the beneficiary will be able to contact WFP and/or the CP, either physically during the monitoring visits, or at any time through the call centre, as described under paragraphs 12.7 to 12.14. The CP and WFP, as relevant, will raise the issue with the CP or local authorities as appropriate, for corrective actions to be put in place.

14. Elite or Clan capture of the project:

Elite or Clan capture of project:

Identified Risk With no formal safety net system, Somalis largely depend on informal, clan-based support in the face of increasingly frequent shocks. As such, there is a risk that local community dynamics will see attempts to capture the benefits of the project for a particular group.

Mitigation measure: The risk of elite or clan capture will be mitigated at several stages. **The wide stakeholder and community consultations** will clearly explain the aim of the project to authorities and all community members, while community-based targeting will be inclusive of the various community groups. **Objective selection criteria** will also be used for household selection. Besides, community members will have one week following the publication of the list for any contestation to the selection, which they will be able to do confidentially directly through the hotline or to WFP and the CP staff. Once the selection is finalized, **SCOPE registration** will ensure that the entitlement reaches the intended person, mitigating against capture post-targeting. Multi layered **monitoring systems and hotline** will also track any attempts of clan/ elite capture, while the CFM will add an extra layer of assurance.

Wide Stakeholder and Community consultations

- 14.1. To ensure that the project circumvents any attempt of clan or elite capture the following key decision makers and authorities will be consulted and involved in the process:
- i. **Engaging with the Government:** The government at the federal, state and district will be consulted at all stages. Information from key government informants will help ensure that the project is representative of all clans and ethnicities. Further community selection process will be communicated and agreed in advance of the project.
 - ii. **Engaging with the Community Leaders:** Clan elders and local leaders such as Sheikhs, and key opinion makers will be involved to explain the project rationale and share the process it will follow in the implementation. This will be done to facilitate the identification of the neediest household's and selection for the project. The targeting criteria and beneficiary selection process will be discussed to ensure that there is a good understanding and commitment to support the project by leaders.

- iii. **Engaging with the community and special focus groups:** There are various key groups in the community who will be sought for their participation such as youth, women, elderly and disabled to ensure that all stakeholders are involved.

14.2. WFP will also utilize community-based consultations and targeting. The overall aim of Community Consultations is to promote an all-inclusive- decision-making process on issues that impact the community's well-being and interests. Community engagement will also provide WFP with an opportunity to strengthen the relationship with communities and build a consensus that the project aims to reach the neediest amongst them. Communities are traditionally bound by the cultural commitment of zakat²⁸, and the project will be able to build on this tradition to ensure that the vulnerable identified as per the targeting criteria are enrolled.

14.3. Community consultations will seek opinions and input from the communities at the initial stage of the project. Based on the agreed timelines for the consultations at each location, WFP's partners, will contact all the relevant community leaders beforehand, informing them of the upcoming meetings and the need for every community member's participation. The CP staff will then work with the leaders to facilitate and mobilise the community members to attend and participate in the planned gatherings. Consultation meetings will be held at appropriate times of the day and month and venues chosen that are convenient to the various segments of the community with reference to local customs, age, gender and productive activities in each location. Arrangements will be made to support the participation of both men and women as well as other vulnerable groups by providing safe spaces for these groups to provide feedback (e.g. separate women-only focus discussion groups).

14.4. As detailed on paragraphs 12.4 to 12.6, a community-based approach will also be used for the targeting of the beneficiaries themselves, and once the list of selected beneficiaries is publicly displayed, people will have one week for any reclamation.

Objective selection criteria

14.5. To ensure that elite capture at the community level is mitigated against, the project will provide clear targeting criteria at the household level. All beneficiaries will need to be families with children under 5, while a set of additional poverty and vulnerability indicators will be applied, as detailed on paragraph 12.6. This logic of selection will be explained to the community so that they understand that resources are channelled to the neediest amongst them.

Information technology solution SCOPE

²⁸ Zakat is a religious obligation for all Muslims who meet the necessary criteria of wealth to provide mandatory charitable contribution, often considered to be a tax.

- 14.6. This step will mitigate against any possibility of elite capture at the household level. The use of the SCOPE identification and mode of transfer through SCOPE cards with biometrics identification at point of redemption, will ensure that only intended beneficiaries receive their assistance and mitigate the risk of the transfer going to non-intended people. This is further explained in paragraph 13.2.

WFP monitoring system and hotline

- 14.7. Any attempt of Clan capture will be closely followed by using different layers of physical and remote monitoring conducted by WFP Somali directly or through contracted monitors, and by Cooperating Partners (CPs). WFP field presence is an important channel to immediately gauge and track any attempts of clan or elite capture.
- 14.8. Finally, beneficiaries and other stakeholders will be able to contact the hotline to report any case or elite or clan capture if they arise. (Please refer to paragraph 16.15 of this document for greater details on the WFP M & E system).

15. Remoteness:

Remoteness:

Identified Risk : The unconditional cash transfer system employed on this project has been used more in urban and peri-urban areas of Somalia than rural areas to date. While the methodology has been tried and tested in rural areas of Somalia, the cultural differences between rural areas creates a different set of challenges to urban environments which if not managed could complicate project implementation.

Mitigation measures: WFP is working in both rural and urban areas in Somalia, and its systems and processes, which WFP has developed over the years, function equally well in both settings. Besides, WFP has a **large presence in Somalia** with a **large network of staff and offices**. In addition, WFP will **work with local organisations and NGOs** based in the target areas.

WFP's experience and programmes across the country

- 15.1. WFP Somalia Country Office has been operating since 1995. WFP's presence targets all livelihood zones, in both urban and rural areas and, except for the few districts under control from Al-Shabaab in the southern part of the country, all districts in the country, are covered based on assessed needs.
- 15.2. WFP's systems, developed over the past 25 years, are therefore proven to be effective in urban as well as more rural locations, across all states.

'On the ground' organizational presence

15.3. WFP has a large administrative presence in Somalia through a total of 11 offices. The Country office is located in Mogadishu and is supported by 4 Area offices (Hargeisa, Garowe, Gaalkacyo and Dollow) and 6 sub offices spread across Somalia (Bossasso, Baidoa, Beletweyne, Dohle, Dushamareb, Kismayo), as well as a Liaison office with support and oversight functions in Nairobi. A total of 332 staff are based in Somalia, ensuring the implementation and monitoring of WFP programmes, as well as day-to-day relationship with NGO partners and government.

Working through Partners

15.4. WFP implements its programmes through contracted local or international NGOs, and currently has around 110 such partners. The rationale for partnerships is multi-fold, enabling WFP to reach the most remote locations effectively and build national capacities of the civil society to deliver services. WFP ensures that partnership is managed in a transparent and accountable manner, as explained below under paragraph 16.3 onwards.

The large majority (90 percent) of WFP's CP are national, locally based NGOs which are anchored in the communities that they serve. They are in charge of the day-to-day management of the activities and are the direct interface with the beneficiaries.

16. Systemic Weakness

Systemic Weakness:

Identified Risk: As noted, the borrower capacity for preventing adverse social impacts on the project is limited, as is the borrower's capacity for redressing the impacts of social harm where it has occurred.

Mitigation measures: In order to circumvent systemic weaknesses, the project will be implemented by WFP until the Government of Somalia has developed its own systems and policies to take over implementation in the future. The **security of payment modality** will be addressed though adhered to the WFP security standards. The contracting of the NGO partners will be done through WFP's standard procedures, including **selection and vetting of all CPs**, as well as their **periodic performance evaluation**. Financial service provider and mobile money agents, if applicable, will be contracted as per corporate policies. WFP will ensure that **Financial due diligence** in payment system is adhered to in the project. In addition, WFP will ensure that **Data Protection and Privacy** through SCOPE system is managed so that the interest of the beneficiaries are protected.

Security of Payment modality

16.1. The WFP security unit supports the implementation of Safe Food/ Cash Distribution programme in a manner that does not increase the risks faced by the crisis affected populations receiving assistance as well as staff or cooperating partners carrying out distribution. This activity consists in safe distribution trainings provided to cooperating partners (CP) and local district officials involved in the implementation of programs. The unit has developed a “Safe Delivery handbook” that outlines essential guidelines for WFP personnel, NGO’s and CP’s to carrying out distribution that contributes to the safety, dignity and integrity of all involved. The handbook covers the following subjects:

- Principles of Safe Distribution.
- Safe Distribution Model.
- Distribution Point.
- Site Selection.
- Security Planning.
- Ideal Model.
- Generic Security Measures.
- Pre-Distribution Measures.
- Post-Distribution Measures.
- Training.
- Key Security Equipment.
- Safe Distribution Measures for Helicopter Food Deliveries.
- Coordination with the host government.

16.2. Concerning Bank branches and mobile money outlets, the overall security arrangements are determined and implemented in coordination between the Bank, the mobile money service outlet, and the NGO implementing the program in a manner that is required to be consistent with the do no harm policies. WFP exercises an overall duty of care obligation in line with the Saving Lives Together Framework (SLT), whereby the WFP Security Unit maintains NGO security information sharing and coordination channels with the International NGO Safety Organization (INSO) and with the Somalia NGO Consortium through the UNDSS Security Cell and through the OCHA Civil-Military Coordination and Access Unit. This allows to enhance security coordination arrangements, strengthen operational practices, share relevant security information, enable humanitarian access and consult on common ground rules for humanitarian action between the United Nations and NGOs.

Selection, Vetting and Evaluations process of Cooperating Partners

16.3. WFP selects and contracts all its CPs through a solid set of procedures and checks. The Partnerships unit, hosted within WFP Programmes Department in the Liaison Office, is in charge of ensuring that the protocol for engagement and management of civil society actors is followed.

16.4. Every potential new NGO must go through a vetting process which requires them to submit an updated and signed profile, including copies of national identity cards or passports of board members and key staff, as well as information on the NGO Mission statements, Objectives,

structure, geographical coverage, technical competence, Financial status etc. The NGO profiles are first reviewed at the field level by the relevant WFP area office, and then forwarded to the Programme Partnership Unit.

- 16.5. WFP undertakes Due Diligence Checks on prospective CPs. e.g. if they are legally registered in the country of operation, if they adhere to the Principles of Partnership as endorsed by the Global Humanitarian Platform, if they are vetted against the UN Sanctions List to ensure resources received under the partnership will not be used to provide support to terrorist entities or individuals. The vetting of partners and of its board of directors against the UN sanctions list is performed before signing a new agreement or addendum. WFP doesn't work with partners who have identified fiduciary risks but supports partners with identified medium risks linked to capacity (i.e. monitoring) and together with the partner develop mitigation measures and improvement plans to strengthen their capacity. As part of the WFP corporate fiduciary responsibility, WFP vets all entities and individuals that are party to any contractual commitment entered by WFP Somalia against the latest available consolidated United Nations Sanctions (UNSC) list. This is done to ensure that both vendors and national staff recruited locally, undergo proper due diligence, which is part of WFP's fiduciary responsibility.
- 16.6. Capacity Assessment is a requirement for all new partners or partners returning after 2 years. This is done by WFP at Area Office, by visiting relevant main offices/ sub-offices of the potential partner; checking on the Organisation vision/strategy, Programme capacity (Project Design, Infrastructure, Implementation and Monitoring / Evaluation), financial management and resource mobilisation, gender, protection. This allows AOs to define the suitability of the partner or identify areas where the capacity of a partner can be improved through the provision of training, equipment or facilities.
- 16.7. In order to select partner for a specific project, WFP launches a call for proposals through the AOs and all applicants are provided with equal opportunity to apply. Proposals are submitted to the WFP Area office (AO) as per a specified date. The Area Office conducts the initial review, undertakes capacity assessment and recommend projects to undergo further review by Cooperating partners Committee (CPC). The CPC is appointed by the Country Director and is made up of staff members from different functional areas (programme, finance, logistics, budget and programming etc). The Area offices are then required to liaise with the Partner and review the CPC comments and undertake the necessary corrective steps in the project design. Once these have been satisfactorily addressed, the Field Level Agreement is drawn for management approval. During project implementation, partners are closely monitored by WFP Area and Field offices as well as an end of project CP evaluation is undertaken. Please refer to Annex 4 on Partner Process and Flow chart for more details on timeframe / steps of engagement.

Financial due diligence procedures

- 16.8. WFP has put in place stringent measures to ensure that financial diligence is embedded in the cash transfer project. As part of WFPs fiduciary responsibility, WFP vets all Financial service providers (FSP's) that that are party to any contractual commitment entered by WFP Somalia against the latest available consolidated United Nations Sanctions (UNSC) list. The objective is to ensure that the vendors undergo proper due diligence, which is part of WFP's fiduciary

responsibility. WFP also monitors its financial service providers to verify that beneficiaries are served correctly and that adequate measures are provided for their protection and safety.

- 16.9. The UN headquarters carries out a global tendering procedure to acquire FSP's for UN operations. The FSP's undergo a rigorous assessment and vetting process to ensure that they are financially strong and meet global international standards. Standard Chartered Bank (SCB) won the UN tender in the year 2014 after the tender process was concluded by the New York office. As WFP works within the UN framework, WFP Somalia is working with SCB to carry out its financial operations. In Somalia, SCB is using its sub-contractor on whom they confirmed due diligence was performed. SCB works on a model whereby they pre-finance WFP operations, and WFP reimburses them upon confirmation of payment.
- 16.10. WFP Somalia carries out additional vetting procedures for all FSP's. On an annual basis, WFP issues a Request for Information inviting potential FSP's in the region to submit proposals regarding their ability to carry out CBT operations. WFP then carries out a Micro financial assessment (MiFA), which is a detailed review of each supplier providing a detailed understanding of his or her financial performance. Key elements assessed include their audited financial statements, geographical coverage, anti-money laundering policies, staffing and technical ability to facilitate CBT operations.
- 16.11. As it explores mobile money solutions to cash transfers, WFP is currently performing due diligence checks of major mobile money operators in Somalia.

SCOPE and Data protection policy of WFP

- 16.12. WFP will ensure that the projects systems and procedures used under this project are robust. The project will help put in place the initial building blocks of a national single social registry which will maintain the database of the project beneficiaries as long as it implements this component. Once the Government's capacity to manage the database is in place, and upon formal consent from the beneficiaries, data will be migrated to the government database. While maintaining the database on behalf of the FGS, WFP will apply its established personal data protection and privacy processes that are aligned with the 2017 WFP corporate guideline.
- 16.13. WFP Data Protection and Privacy Handbook sets standards on handling and processing a large amount of information, including personal data of its beneficiaries and prospective beneficiaries, to achieve its mandate. Protecting this information is a fundamental part of WFP's duty of care to those it serves. Breaches its confidentiality could have dire consequences for individual beneficiaries or beneficiary communities, ranging from abuse and ostracization, to death. The Handbook sets out five Principles: 1: Lawful and Fair Collection and Processing of data, 2: Specified and Legitimate Purpose for data collection, 3: Required Data Quality, 4: Participation and Accountability to beneficiaries and all key stakeholders, 5: Security. Further, the handbook elaborates on operationalization of these principles through Informed Consent, b) Third-party Data Sharing, c) Media, d) Data Controller or Data Processor and e) Retention and Disposal.

- 16.14. During the period of programme implementation, WFP will assess that all data usage is compliant to its data protection principles. In particular, WFP will verify that the data is only handled by authorized and trained staff; that the beneficiaries have been informed of how the data is used and that they have given their consent; that the data is only used for its intended purpose; and that it is stored, backed up and protected as per corporate policies.

Difficulty monitoring

Difficulty monitoring:

Identified Risk: Security concerns and the remoteness of the project target areas combine to provide a significant challenge for monitoring and supervising project implementation. This can include challenges for community and stakeholder engagement, grievance redress and other risk mitigation protocols.

Mitigation measures: The mitigation measures put in place to address the remoteness of the projects target areas is addressed by 1) WFP will only **implement where the site can be monitored**; 2) WFP uses **contracted monitors**, where staff cannot access a project site.

- 16.15. WFP Somalia has an established policy of only implementing projects on the condition that it can monitor all activities in all locations. WFP uses different layers of physical and remote monitoring directly or through contracted monitors, as well as through its call centre. WFP considers close programme monitoring as one of its primary responsibility to track inputs, activities, outputs and outcomes and determine whether they are proceeding according to the work plan and overall project design. In areas where WFP staff cannot access, WFP uses monitors hired by a private monitoring company (CTG) with which WFP has a contract.

- i. **Direct Physical Monitoring** by WFP staff or contracted monitors is conducted every month in 20 percent of all active cash distribution points. Locations are rotated to ensure that each location is covered every at least twice a year. WFP will recruit 6 monitors (one per state) who will be dedicated full-time to the monitoring of this specific project. Monitoring checklists are developed by WFP in line with corporate Monitoring and Evaluation guidelines to assess WFP's and its partners' performance for processes, outputs and outcomes.
- ii. Besides, WFP's NGO partners carry out monitoring of their programmes and findings are included in **monthly reports** to WFP.
- iii. To add another layer of monitoring, WFP use **remote monitoring** through the call centre to crosscheck information. Information collected through the call centre is triangulated with information from the physical monitoring.

Inward Migration

Inward Migration:

Identified Risk: As the project only operated in a small number of districts in each region in Somalia (the most drought affected) there remains a possibility, that people from neighbouring districts will seek to migrate to the project areas to benefit from the project. This runs the risk of upsetting the clan balance in remote regions and exacerbating social and environmental fragility through associated population flows.

Mitigation measure: this risk is not relevant or realistic under this project, as the process of registration will be short, while the community-based targeting will ensure that only people from that community are eligible. Besides, the relative low value of the transfer will be a low incentive for migration.

- 16.16. The SNHC project targets a set number of people (approximately 200,000 households) across 21 districts. Ceilings of the maximum number of people that can be targeted in a given district are pre-established. When the process of beneficiary selection is initiated in a given community, it is finalized after a few days only, while the number of people targeted can only reach up to the ceiling number. No new registration will take place after this process is concluded, not leaving time for word of mouth to travel to other communities.
- 16.17. Besides, the community-based targeting implies that beneficiaries are selected by the community itself. Rural communities in Somalia are relatively small, and community members know each other well. If a person or family was to migrate from another location to a targeted village, the community would immediately recognize that person as not being a member, and automatically exclude him/her from the selection process.
- 16.18. Finally, the relatively small amount of the transfer value will not present an attractive pull factor for any inward migration. As a comparison, humanitarian programmes, which operate in Somalia as a short-term response to drought or floods, are based on full food MEB and deliver to beneficiary families on average 3 to 4 times more than the transfer value of the SNCHP.

17. Gender based violence (GBV) and Protection against Sexual Exploitation and Abuse (PSEA):

Gender Based Violence (GBV) and Protection against Sexual Exploitation and Abuse (PSEA):

Identified Risk: There is the possibility of increased risk of gender-based violence and abuse of women and children in situations of poverty, hunger, conflict, insecurity and displacement. Women’s lack of access to and control of assets, services and income increases their economic dependence as well as their vulnerabilities to abusive and exploitative situations. Cash assistance may also unintentionally contribute to GBV. Special safeguards need to be put in place to ensure that these risks are averted and or mitigated and redressal mechanisms put in place.

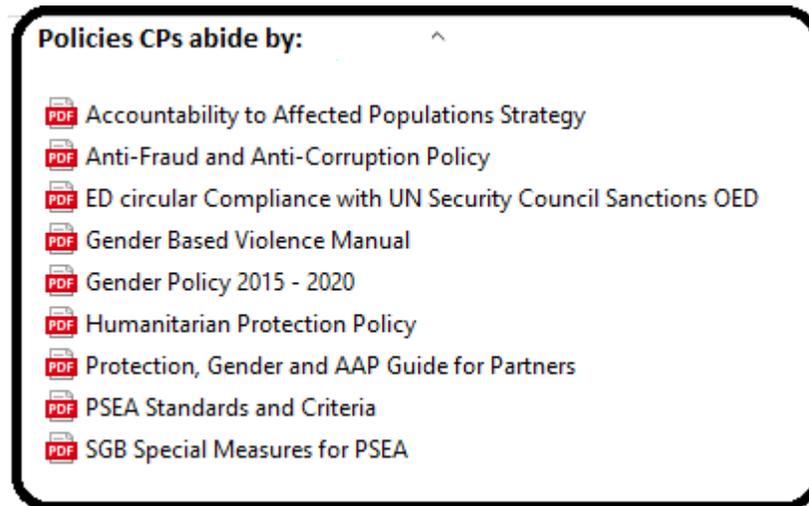
Mitigation measures: WFP has multiple channels to mitigate against any risk arising out of the project that may exacerbate any underlying GBV incidences or contribute towards it. The measures will include **WFP Corporate policy on SEA** defining protocol for recognizing, inhibiting and dealing with SEA; **WFP referral protocol** will enable beneficiaries to access the professional support services; **Complaints and Feedback mechanism** will help receive any complaints and direct the victim to seek specialized services; **Training and capacity building** gaps will be identified among all key stakeholders and trainings undertaken ; **Protection protocol** will be followed in all stages of the project cycle. For further detail refer to Annex 2 of this document on **GBV Action Plan**.

17.1. The following is a summary of the mitigation measures-

17.1.1. **WFP Corporate Policies on SEA:** WFP has a zero-tolerance policy on SEA which focuses on acts committed against the people it serves, by WFP employees or others associated with its work. WFP adopted the Secretary-General’s Bulletin on “Special Measures for Protection from Sexual Exploitation and Sexual Abuse” (ST/SGC/2003/13) in 2004 and has continued to reaffirm its commitment to protection from SEA with four Executive Director Circulars issued since then, the latest in 2014. Any acts of SEA constitute serious misconduct and is grounds for disciplinary measures, including summary dismissal and referral to enforcement authorities for criminal prosecution, where appropriate. WFP’s policy on SEA covers acts which occur at or away from the workplace, during or outside working hours, including sexual activity with children (under the age of 18), exchange of money, employment, goods, assistance or services for sex, including sexual activity with prostitutes.

17.1.2. **WFP Corporate SEA policies for Cooperating Partners:** WFP’s cooperating partners (CPs) are required to abide by WFP’s regulations and to adhere to its commitments. By entering into an agreement with WFP, cooperating partners undertake to adhere to: (i) the standards set out in the Secretary-General’s Bulletin Special Measures for Protection from Sexual Exploitation and Sexual Abuse (ST/SGB/2003/13); (ii) any minimum operating standards

adopted as a result of the Statement of Commitment on Eliminating Sexual Abuse and Abuse by UN and Non-UN Personnel of 4 December 2006; and (iii) any other Protection from Sexual Exploitation and Abuse (PSEA) policy or guideline as may be adopted by WFP, and notified to the implementing partner by WFP from time to time. In addition, CPs need to ensure that their personnel, agents, contractors and subcontractors conform to the highest standards of moral and ethical conduct.



17.1.3. Training and capacity building of WFP staff: WFP provides mandatory training on prevention of harassment, SEA, ethics and standards of conduct to all its staff. WFP has designated PSEA focal points in all country offices to support senior managers to create an environment that prevents SEA, undertake awareness raising of WFP employees and partners, participate in in-country PSEA networks, and receive complaints and submit reports of SEA to the Office of Inspections and Investigations (OIGI).

17.1.4. Training and capacity building of WFP Cooperating Partners & CFM operators: WFP and the Somalia Food Security Cluster (co-chaired by WFP) has provided training to its partners on gender and protection mainstreaming including the principles of humanitarian protection, and prevention of GBV and SEA. In addition, WFP will review any gaps and provide refreshers to the CFM operators as the primary interface with the communities recording and referring any GBV & SEA cases.

17.1.5. WFP Somalia GBV Referral Protocol: WFP, in collaboration with the GBV sub-cluster in Somalia, has developed a GBV referral and programming protocol that outlines WFP's corporate strategy on GBV, particularly on reporting and referring cases for medical, legal or psychosocial assistance, as well as working with GBV survivors. This will be followed in the SNHC project too.

17.1.6. Community consultations and sensitization: As elaborated in the earlier section on Community based Participatory Approach, special mention is being provided under this section owing to the seriousness assigned to Protection, GBV, PSEA and Accountability to Affected Population (AAP) by WFP. The targeting criteria for the project and focus on women will be shared with the communities to ensure that there is broad consent and

support for the vulnerable members, especially women. The consultative process of identifying needy women in the community will increase awareness of their plight and circumvent any animosity towards them as recipients of the cash transfer. In identifying risks related to sexual exploitation and abuse (SEA) and gender-based violence to the community, local leadership and partners, every precaution and sensitivity will be adhered in use of language, presentation of the case to identify any GBV risks and immediate referral of any cases that may arise from participants, voluntarily sharing issues, during this initial stage of consultations. These identified risks will be noted during the Community consultations and factored into the project delivery. With keeping to the principles of 'do no harm' the confidentiality and welfare of the affected person will be of utmost priority for WFP.

17.1.7. **Safety, access and security at each stage of the project:** Security and safety to access the project services such as access to payment points, access to CPs/ CFM will be considered to ensure that no one is put in harm's way when participating in the project. For example, the financial service provider will deploy mobile teams if the bank branches is located more than 8 km from the selected community. Quarterly payment tranches will also reduce frequency to visit payment sites.

17.1.8. **Communication with beneficiaries throughout the project cycle:** WFP will ensure that all community members, including non-beneficiaries, are aware of the project design, ability to participate and channels of complaints so that there is transparency and accountability at each step of the project.

17.1.9. **SEA monitoring in cash-based transfers:** WFP will undertake referrals of GBV cases as per established protocol and follow up these cases. Please refer to 12.12 to 12.14 under the Complaints and Feedback system of this document.

18. [Budget](#)

18.1. The mitigation measures detailed in the SMP are factored into the main operational cost of the programme. However, an additional budget of **USD 579,600** is requested for activities to be covered under GBV and community consultations. The details are provided in the Annex – 7 of this document.

Annexes:

1. Inclusion Action Plan
2. GBV Action Plan
3. Security Action Plan
4. Partner Processes and Flow Chart
5. Social Incidence Reporting – WFP Somalia
6. Social Incidence Reporting Flow chart
7. SMP Action Plan

Annex – 1 Inclusion Action Plan

Action points	Who is responsible	Benchmark	Q1	Q2	Q3	Q4
Community consultations						
Recognize excluded segments in community	WFP/ CP	All target villages				
Ensure traditionally marginalized beneficiaries are included	WFP/ CP	All target villages				
Identify barriers to participation	WFP/ CP	Documented & monitored				
Address barriers in implementation	WFP/ CP	Documented & monitored				
Set up accessible complaints systems	WFP/ CP	100%				
Counter part selection						
CP partners vetting - sensitive to Inclusion; good track record	WFP	FLA process 100% administered				
CP monitoring to ensure excluded groups are tracked for participation	CP	CP monthly reports				
Ensure that optimal no. staff are women	CP	50% women				
CP processes and procedures are women & child friendly	CP	Reports by AO/FO				
Payment system						
Payment system is vetted to be accessible to women, disabled & elderly	CP	site monitoring				
Recognize & address any barriers to access payments	CP/WFP	Action reports to resolve				

Action points	Who is responsible	Benchmark	Q1	Q2	Q3	Q4
Payment system						
Review and adapt system based on monitoring reports or CFM/ GRM input	CP/WFP	Action reports to resolve				
Monitoring & Evaluation						
Indicators in M & E capture gender disaggregated data	WFP	All beneficiaries				
Hotline, CP reports, AOs / FOs reports, TPM reports are analysed. Action points shared with WFP AO & FO for corrective action.	WFP	Reports				
Regular reports analyse project for barriers to inclusion	WFP	Action reports				
AOs & FOs identify issues and undertake corrective measures with CPs.	CPs/ WFP	Action reports				
Communication outreach						
CPs to provide information to all target beneficiaires	CP	Accessible/ understandable messaging				
Ensure that extension workers and staff are trained in GBV and Protection	WFP	80% trained				
Information on Hotline widely provided	WFP	All sites				
Hotline is well maintained and monitored	WFP					

Annex – 2 GBV Action Plan

ACTION PLAN

INTRODUCTION

Conflict and insecurity, as well as drought- and climate-related shocks have made protection and incidences of gender-based violence (GBV) an ongoing concern as movements in search of food, services or livelihoods often threaten the safety of vulnerable groups such as women, girls, children and people living with disability. The separation of many women and girls from community and familial support structures, as well as from traditional livelihoods activities, also contributes to an increased reliance on marginal, inconsistent, and hazardous livelihood strategies, which often increases exposure to violence. Additional protection risks for children include family separation and child recruitment; arbitrary arrest; drop out from or lack of access to education; hazardous child labor; and elevated exposure to GBV, including assault, trafficking, and psychosocial distress.

The SNHCP focuses on providing cash transfers to women in an effort to contribute to positive impacts on equity, poverty, and gender empowerment. Specifically, the project will provide cash transfers to women with children under the age of five years from poor and vulnerable households and pregnant women. This aims to prevent the deterioration of human capital for women and children, including female children in the household. Consequently, targeting of women and children as beneficiaries necessitates the management of gender-based violence risks. The exchange of sexual favors for registration or transfer of funds, or spousal abuse to receive cash are key risks for the project.

This Action Plan details the operational measures to assess and mitigate the risks of gender-based violence, most notably sexual exploitation and abuse (SEA) and how they will be integrated over the life of the project. This includes procedures for reporting, responding and managing grievances related to such abuse.

Definition of GBV and SEA

The Inter-Agency Standing Committee (IASC)²⁹ Guidelines for GBV in Humanitarian Settings defines gender-based violence as “an umbrella term for any harmful act that is perpetrated against a person’s will, and that is based on socially ascribed (gender) differences between males and females. GBV broadly encompasses physical, sexual, economic, psychological/emotional abuse/violence including threats and coercion, and harmful practices occurring between individuals, within families and in the community at large. These include sexual violence, domestic or intimate partner violence, trafficking, forced and/or early marriage, and other traditional practices that cause harm such as female genital mutilation, honour killings and widow inheritance³⁰.

The United Nations³¹ defines “**sexual exploitation**” as any actual or attempted abuse of a position of vulnerability, differential power, or trust, for sexual purposes, including, but not limited to, profiting monetarily, socially or politically from the sexual exploitation of another. Sexual abuse on the other hand is “the actual or threatened physical intrusion of a sexual nature, whether by force or under

²⁹ Inter-Agency Standing Committee- the primary mechanism for inter-agency coordination of humanitarian assistance among UN and non-UN humanitarian partners.

³⁰ World Food Programme. 2016. Gender- Based Violence Manual

³¹ Secretary-General’s Bulletin on “Special Measures for Protection from Sexual Exploitation and Sexual Abuse” (ST/SGC/2003/13)

unequal or coercive conditions³².” SEA is therefore a form of gender-based violence and generally refers to acts perpetrated against beneficiaries of humanitarian programmes by staff, cooperating partners (CPs) and contractors.

WFP makes a distinction between SEA and sexual harassment. When WFP refers to sexual harassment, it is focused on WFP employees, while with the term SEA focuses on acts against those we serve. In this document we are focusing on acts against the people we serve (beneficiaries). Sexual harassment for WFP staff is covered by the WFP policy on Protection from Harassment, Sexual Harassment, Abuse of Authority and Discrimination, and therefore is addressed under the Labour Management Plan (LMP) in greater detail. The following is an excerpt from the LMP:

“Protection from Harassment, Sexual Harassment, Abuse of Authority and Discrimination policy. *WFP is committed to working environments that respect the inherent dignity of all persons, affording them the opportunity to reach their fullest potential and empowering them to deliver the best possible results for all the people that WFP serves. WFP is committed to a zero-tolerance approach to abusive conduct. This means that any reports of abusive conduct will be dealt with promptly, justly and effectively in accordance with the applicable regulatory framework and the procedures set out in the Circular. Failure to meet obligations under this Circular may lead to administrative or disciplinary action, up to and including summary dismissal. This policy also describes mechanisms meant to ensure the responsibilities of WFP as an employer and of each WFP employee, of promoting safe and harmonious workplace environments, and taking action when alerted to potential abusive conduct. Finally, this policy provides guidance for WFP employees on how to seek support and raise concerns regarding any abusive conduct they have experienced or witnessed.”*

Contextual GBV Risks

Poverty, hunger, conflict, insecurity and displacement exacerbate some forms of GBV. For example, women and girls who are traditionally tasked with finding fuel to prepare food, may need to venture to unsafe areas to collect firewood, thereby exposing them to the risk of assault. Within households, domestic violence can rise during periods of food scarcity, and may decline as assistance fills the food gap. Conversely, people who have been exposed to GBV may suffer psychosocial or physical harm, stigma and exclusion, and consequently be unable to generate income and care for their dependents.

In many contexts, women’s lack of access to and control of assets, services and income increases their economic dependence as well as their vulnerabilities to abusive and exploitative situations. Women heads of households may engage in transactional sex to be able to meet food needs, and parents may push for early marriage for their daughters in the hope they will have their food needs met elsewhere. Changing gender roles in times of crisis and the increased entry and participation of women into the labour force increases women’s vulnerability as they can be sexually exploited in the workplace or targeted when travelling to or from work³³.

Food or cash assistance in itself may also unintentionally contribute to GBV. A food or cash distribution site that is located in an unsafe area, or is far from where people live, may expose women to sexual violence. Cash delivered to women without taking into consideration gender roles and responsibilities may unintentionally increase domestic violence in a society that is strictly opposed to women having control over economic resources. The real or perceived empowerment of women in household decision-making through the enhanced income may trigger or worsen intimate partner violence.

32 World Food Programme. 2014. Executive Director’s Circular (OED2014/020): Special Measures for Protection from Sexual Exploitation and Sexual Abuse.

33 REACH, “Drought and Protection Concerns in IDP Sites, Joint Partner Assessment”, April 2018.

A 2016 GBV survey commissioned by the World Bank and United Nations (UN) partners found that 17 percent of women in Somalia had experienced some form of physical or sexual violence from a non-partner.³⁴ The study further found a link between intimate partner violence and women's engagement in income-generating activities, affecting 36 percent of women interviewed. Data emerging from the Somalia GBV Information Management System reveals that over 14,000 cases of GBV were reported from January 2015 through June 2016³⁵. Men and boys also experience gender-based violence, especially in conflict and post-conflict situations where abduction and forced recruitment may put them at risk of sexual assault and other forms of GBV. However, in Somalia, GBV disproportionately affects women and girls³⁶.

In 2017, the pervasive drought and the related large-scale displacement led to an increase in the numbers of reported cases of gender-based violence (GBV) including sexual assault and intimate partner violence³⁷. Widespread insecurity and the presence of armed non-state actors has had a significant role in the incidence of GBV in the IDP settlements in urban and peri-urban areas.

Despite recent commitments by the Government, the protective environment for the IDPs and civilians affected by the conflict still requires strengthening. Limited access to legal redress, psychosocial and medical services, social stigma, and lack of confidence in a fair trial and fear of reprisals constitute major barriers to the support and protection survivors of GBV and their families. Limited public education on human rights issues is also a key barrier to ending GBV.

EXISTING RISK MANAGEMENT SYSTEMS

Based on its experience in implementing programmes in Somalia, WFP already has developed several measures to ensure the protection of the people and communities it works with, including mechanisms to limit, report and follow up on potential cases of gender-based violence (GBV).

a) WFP Corporate Policies on SEA

WFP has a zero-tolerance policy on SEA which focuses on acts committed against the people it serves by WFP employees or others associated with its work. WFP adopted the Secretary-General's Bulletin on "Special Measures for Protection from Sexual Exploitation and Sexual Abuse" (ST/SGC/2003/13) in 2004 and has continued to reaffirm its commitment to protection from SEA with four Executive Director Circulars issued since then, the latest in 2014. These Circulars outline specific measures WFP staff at both HQ and field levels must take to ensure that protection threats to beneficiaries do not emanate from WFP staff or cooperating partners and external service providers. In situations where there is the absence of a direct report on a GBV case and lack of consent from the affected person, the WFP with other protection actors will try to find practical solutions to the situation. Also refer to the section on SEA and GBV given above.

Any acts of SEA constitute serious misconduct and is grounds for disciplinary measures, including summary dismissal and referral to enforcement authorities for criminal prosecution, where appropriate. WFP's policy on SEA covers acts which occur at or away from the workplace, during or outside working hours, including sexual activity with children (under the age of 18), exchange of money, employment, goods, assistance or services for sex, including sexual activity with prostitutes. WFP provides mandatory training on prevention of harassment and SEA and ethics and standards of conduct to all its staff. WFP has also designated PSEA focal points in all country offices to support senior managers to create an

³⁴ World Bank. 2018. Country Partnership Framework for the Federal Republic of Somalia. Washington, DC: World Bank.

³⁵ GBV is often under-reported due to issues of stigma, retaliation for the survivor. This data represents cases exclusively reported by GBV services providers in a limited number of locations across Somalia.

³⁶ UNFPA Somalia Bulletin, Issue no. 3, (April -June 2016)

³⁷ UNFPA Somalia Monthly Situation Report, Issue no. 3, (20 March to 3 April 2017)

environment that prevents SEA, undertake awareness raising of WFP employees and partners, participate in in-country PSEA networks, and receive complaints and submit reports of SEA to the Office of Inspections and Investigations (OIGI).

WFP's cooperating partners (CPs) are required to abide by WFP's regulations and to adhere to its commitments. By entering into an agreement with WFP, cooperating partners undertake to adhere to: (i) the standards set out in the Secretary-General's Bulletin Special Measures for Protection from Sexual Exploitation and Sexual Abuse (ST/SGB/2003/13); (ii) any minimum operating standards adopted as a result of the Statement of Commitment on Eliminating Sexual Abuse and Abuse by UN and Non-UN Personnel of 4 December 2006; and (iii) any other Protection from Sexual Exploitation and Abuse (PSEA) policy or guideline as may be adopted by WFP, and notified to the implementing partner by WFP from time to time. In addition, CPs need to ensure that their personnel, agents, contractors and subcontractors conform to the highest standards of moral and ethical conduct. WFP and the Somalia Food Security Cluster (co-chaired by WFP) has provided training to its partners on gender and protection mainstreaming including the principles of humanitarian protection, and prevention of GBV and SEA. Any failure by cooperating partners to take preventive measures against sexual exploitation or abuse, to investigate allegations thereof or to take corrective action, constitutes grounds for termination of the Agreement with WFP.

b) WFP Somalia GBV Referral Protocol

WFP (in collaboration with the GBV sub-cluster in Somalia), has developed a GBV referral and programming protocol that outlines WFP's corporate strategy on GBV, particularly on reporting and referring cases for medical, legal or psychosocial assistance, as well as working with GBV survivors in terms of programming. The guidelines were developed to support all staff (including WFP's call center staff) in reporting and referring cases of domestic abuse or sexual assault to trained service providers who would be able to offer the proper assistance. The guidelines have been disseminated to WFP programme staff at the field level to enable them to protect the identities of the survivors with confidentiality as well as provide appropriate assistance. Details of the referral protocol are discussed in the section on mitigation measures for this project.

c) Complaints and Feedback Mechanism (CFM)

To complement field monitoring visits and in line with the IASC principles on accountability to affected populations (AAP), WFP Somalia has a complaints and feedback mechanism (CFM) that handles complaints and feedback from all stakeholders involved in the assistance process. The CFM not only aims at strengthening accountability to communities but also to identify a range of protection, fraud and diversion issues as well as other concerns related to delivery of WFP assistance. Complaints can be made through the well-established Somalia-based toll-free hotline, directly (face to face) to WFP monitoring staff and cooperating partner staff at programme implementation sites, through telephone calls and email or short messaging to WFP offices, and through local authorities and local leaders. Information on WFP's hotline numbers is widely available through posters at food and cash distributions points and is also printed on the SCOPE cards. Reports of alleged SEA as well other GBV incidents can be received from anonymous letters, incident reports, emails, or through the call center and regular monitoring. Cases of GBV or SEA received through the call center are (with the consent of the survivor) forwarded to PSEA focal points who report the cases to the Office of Inspections and Investigations (OIGI) for investigation and further action. For greater detail on monitoring the voices of women through their feedback and incorporating design changes to the programme refer to the section below under Action Plan (iii) Communication with beneficiaries throughout the project cycle

ACTION PLAN

This section details the specific measures for mitigating GBV and SEA risks under the SNHCP project. These include the prevention measures already in place as well as steps to be undertaken in case of reports of alleged SEA committed by WFP staff or cooperating staff or contractors, as well as GBV cases related to the project.

a) PREVENTATIVE MEASURES

i) Community consultations and sensitization

Before the onset of the project, WFP will carry out consultations with the target communities, local authorities, and partners to discuss the overall objectives, duration and mode of implementation of the project. The eligibility criteria for the project, including vulnerability and the rationale behind the targeting and participation of women and children for this project will be discussed so as to avoid any backlash that could lead to violence against the recipients of the cash transfers, both domestically and from the community.

WFP will use the consultations to introduce the issue of sexual exploitation and abuse (SEA) and gender-based violence to the community, local leadership and partners and to identify the potential protection risks and needs specific to each location and the prevention and mitigation measures for all stakeholders including the community members and beneficiaries. During the consultations, WFP will reiterate the expectations governing the implementation of the project, including the expected code of conduct and relevant disciplinary sanctions for all actors (WFP staff, partners, local authorities, and service providers), and inform them about the available reporting and redress mechanisms such as the WFP hotline, post-distribution monitoring, the referral system for addressing GBV cases, and a list of GBV support services nearest to them.

ii) Safety, access and security

Under this project, WFP will distribute cash to beneficiaries through the SCOPE system and in partnership with Standard Chartered Bank and its affiliate Amal. Cash is less visible than food, making it easier to protect from theft or physical assault. For this project, mobile banking services (physical cash delivery) will be provided to beneficiaries who are more than 8 kms away from the nearest bank branches or cash points.

In addition, the disbursement of the transfers in quarterly tranches will also reduce the number of times beneficiaries will have to travel to redeem their entitlements. The introduction of mobile money transfer, if applicable, will allow beneficiaries even greater convenience by reducing the steps in the redemption process (by eliminating the visit to the bank for example), while beneficiaries receiving cash at the bank have the option to have it sent to their mobile phone.

To prevent overcrowding at cash distribution points, WFP provides top-ups in batches on different days and over extended periods of time. This enables financial institutions to plan and ensure that sufficient resources are available, both in terms of staffing and cash. WFP will continue to work closely with local authorities and service providers to enhance security measures at distribution points and ensure the provision of culturally -appropriate water and sanitation (WASH) facilities.

iii) Communication with beneficiaries throughout the project cycle

To reduce the exposure of the beneficiaries to fraud and abuse (e.g. exploitation by service providers), WFP will continuously engage in beneficiary sensitization and communication to increase people's understanding and ownership of the entitlement, the payment instrument (how to access and use it)

and the complaints and feedback mechanism (CFM). Beneficiaries can then use the CFM to ask questions or voice concerns, including reporting incidents of SEA or GBV. On average, about 50 percent of the calls received on the WFP hotline are made by women, indicating that there are no major social barriers preventing female beneficiaries from contacting WFP. Call center operators are trained on how to handle calls on GBV or SEA and will receive refresher training in the course of this project. As part of WFP's regular monitoring process, beneficiaries will receive phone calls or voice/text messaging with questions or information regarding including their experience of the entire process and any problems they may have encountered. A list of GBV services that are closest to each location will also be displayed in posters (in the local language) in all registration centres. WFP's monitoring process throughout the lifecycle of the project will also provide opportunities for community members (especially women and girls), to participate freely and provide feedback on project implementation and any risks or barriers they may be face as a result of the project.

iv) Sensitization and training of WFP staff and partners

Community sensitization and engagement throughout the project duration will be conducted in person by cooperating partners and field monitors, and through text and voice messaging to ensure that those who are illiterate are not left out. WFP provides training to its cooperating partners on the expected standards of behaviour and consequences for breach of conduct. In addition, in 2018, WFP provided training on gender, protection and accountability to 113 cooperating partners and staff in all the Area Offices and in Nairobi. In September 2019, the Food Security Cluster (which WFP co-leads with FAO) provided additional training on gender and protection in Hargeisa and Mogadishu, prioritising cooperating partners who had not received the training. All the cooperating partners (CPs) implementing this project will receive refresher training and briefing on how to ethically and effectively communicate and engage with the community. Call center operators and CPs will also receive training on how to receive and appropriately refer and report on cases of GBV or PSEA, including providing psychological first aid. All WFP partners will be required to sign and adhere to the WFP Code of Conduct and other relevant policies and standards of ethical conduct mentioned in the section on existing risk management systems.

iv) Effects of cash-based transfers on social relations

In general, studies are yet to find sufficient evidence of a direct link between cash-based transfers and a significant change in gender relations, given the complex socio-cultural norms and dynamics that undergird these relations. In fact, some studies³⁸ in the humanitarian context have increasingly found that cash-based transfers help to decrease intimate partner violence by decreasing tensions and stressors within households. In addition, there are indications that cash injections to communities can strengthen community mechanisms for child support- especially orphaned or abandoned/unaccompanied children. Rather than exacerbate social relations, the planned transfers in this project are more likely to help reduce tensions within households and help strengthen community care for vulnerable children.

In its implementation of cash-based transfer operations in Somalia, WFP has not observed an increase in intrahousehold abuse of the system including among spouses, family members or caregivers. However, as this always remains a potential concern, WFP will continue to monitor the effects of its cash programs on intra-house dynamics through qualitative post-distribution monitoring (PDMs).

³⁸ Buller, Ana Maria; Peterman, Amber; Ranganathan, Meghna; Bleile, Alexandra; Hidrobo, Melissa; Heise, Lori. 2018. A mixed-method review of cash transfers and intimate partner violence in low- and middle-income countries. The World Bank Research Observer 33(2): 218-258. <https://doi.org/10.1093/wbro/lky002>

Among the aggravating factors for gender-based violence in Somalia is the increased vulnerability of women and children as a result of poverty and limited access to economic opportunities, conflict, displacement and food and nutrition insecurity. These factors often compel women to adopt negative coping mechanisms for survival that expose them to various protection risks. Disbursing the designated safety net transfer in a quarterly tranche of USD 60 is likely to help the recipients meet their most urgent household needs (including the health need of their children) and thereby reduce negative coping mechanisms that might expose them to physical harm, sexual exploitation and other forms of gender-based violence. The transfers also provide the potential for the recipients to accumulate savings or invest in small businesses thereby helping to reduce their economic vulnerability over the medium or longer term.

b) REPORTING AND MANAGING INCIDENTS OF SEA AND GBV

i) Sexual Exploitation and Abuse

WFP's policy for prevention of SEA applies to allegations of acts committed by WFP employees including consultants and interns, cooperating partners, contract workers, and external service providers. Reports of alleged cases of sexual exploitation and harassment can be received from anonymous letters, incident reports, emails, or through the call center and regular monitoring. In situations involving third party reporting of GBV or SEA, the balance between the survivor centre approach (where consent is mandatory) and the obligation to report presents a real challenge. WFP will work with other protection actors over the course of the project to determine the most appropriate actions to take in such a scenario. Any acts of SEA constitute serious misconduct and is grounds for disciplinary measures, including summary dismissal for WFP staff and referral to enforcement authorities for criminal prosecution, where appropriate.

Referral Pathway

- a) Staff who receive and/or report allegations who are not a designated SEA focal point (including call center operators) must:
 - Upon consent of the affected person, inform a designated WFP PSEA Focal Point at the field or country level as soon as possible.
 - Provide accurate information about where to receive assistance e.g. medical/clinical, legal, psychosocial support (address, phone number).

- b) Upon receipt of a complaint or referral, the PSEA Focal Point will ensure that consent has been obtained before reporting the incident to OIGI- WFP's Office of Inspections and Investigations. All employees and SEA Focal Points/Alternates are bound to maintain confidentiality of all reported allegations, including the identity of complainant/s and subject/s. Personnel who report misconduct in good faith have the right to be protected against reprisals and retaliation. Procedures for this are found in the WFP "Whistle-blower" Protection Policy. OIGI will launch an independent assessment of the cases and conduct investigations as required. WFP will notify the World Bank of any project related GBV/SEA case occurring within 24 hours of being reported. During the investigation process, all efforts will be made to keep the identity of personnel and others involved in the investigation confidential. The requirement for confidentiality extends equally to all those involved in, or with knowledge of, the investigation.

If requested, the staff/call operator that received the complaint can act as a liaison between the complainant (including his/her family) and those persons conducting any subsequent investigation, ensuring at all stages that the safety, health and legal needs of the complainant

are taken into consideration and that he or she is not subject to intimidation as a result of lodging the complaint.

- c) **If the complaint implicates a staff member of a different organisation** such as the cooperating partner, a copy of the incident report will be forwarded to the SEA Focal Point in the organisation subject to an allegation, and the World Bank. WFP will discuss and agree with the Focal Point on the responsibilities for follow up on the safety, security, health and legal needs.
- d) **If the complaint is a rumour or the alleged perpetrator (s) affliction is unknown**, a copy of the incident report will be forwarded to the RC/HC and the World Bank. The RC/HC will call for a meeting of the PSEA Taskforce that consists of designated PSEA Focal Points from UN agencies in the country, as well as the Red Cross/Red Crescent Movement and relevant International and local non-governmental organisations (NGOs). The PSEA Taskforce will be asked to develop a strategy for assessing the veracity of the rumours or allegations. The RC/HC will then pursue the issue through the appropriate channels. If an investigation is deemed to be warranted and WFP personnel are suspected to be involved, the RC/HC will inform the referring Focal Point and refer the matter to WFP's OIGI.
- e) **Sanctions:** Any acts of SEA constitute serious misconduct and is grounds for disciplinary measures, including summary dismissal for WFP staff and referral to enforcement authorities for criminal prosecution, where appropriate. For cooperating partners and contractors, any failure to take preventive measures against sexual exploitation or abuse, to investigate allegations thereof or to take corrective action, constitutes grounds for termination of the Agreement or Contract with WFP.

ii) Gender-Based Violence

Whilst WFP is not mandated or qualified to assist survivors of gender-based violence directly with the services they need, WFP does have an obligation to treat survivors with dignity and respect when approached. Furthermore, WFP will use the existing referral pathway to refer survivors to available services in coordination with protection actors. Alternative mechanisms for ensuring that survivors access support services will be explored with other partners during the course of the project. WFP can inform survivors or people at risk of GBV about potential services, but it is up to the survivor whether they choose to access those services. Where protection incidents are linked to a WFP programme, general information regarding the problem is passed on to the relevant technical units for their evaluation and adjustments to the programme if needed, to avoid further protection problems. WFP will explore alternative means of ensuring that transport cost are supported through partners and other key actors.

Responding to a Call or Report of a GBV incident

It takes a great deal of courage for a survivor of GBV to reach out and ask for help. In most cases, social stigma, shame, and personal trauma prevent survivors from attempting to find assistance. If they do reach out and do not receive a positive and respectful response, they may never ask for help again; or they could be even further traumatised.

Survivors have the right to decide whether to access services and which services they would like to receive. Referrals should always be safe, confidential and respectful, taking the following into account:

a) **Safety:** Individuals who disclose an incident of gender-based violence or a history of abuse may be at risk of further violence from the perpetrator(s) or from others in the community. Strategies for ensuring safety include:

- Making sure that survivors can access systems of care that are private and respectful
- Maintaining confidentiality always
- Never acting without the informed consent of the survivor

b) **Confidentiality:** Maintaining confidentiality means not disclosing any information at any time to any party without the informed consent of the survivor. Strategies for ensuring confidentiality include:

- Only sharing relevant information with others at the request of the survivor and after obtaining informed consent
- Even if individual names are not used, it is important not to share general characteristics about the survivor (ethnicity, age, family situation) that may identify them.

c) **Respect:** Respect for the survivor includes showing kindness and courtesy, with consideration for their feelings. Strategies to ensure you are being respectful include:

- Ensuring non-judgmental and sensitive behaviour
- Maintaining confidentiality
- Placing the survivor at the centre of decision-making and informing/involving her at every stage of the process
- Allowing the survivor to speak to someone they are comfortable with (e.g. female staff)
- Minimizing the number of times, a survivor needs to tell his or her story

In cases where a beneficiary is in distress, it is important to deliver basic psychological first-aid, until he or she can be referred to professionals. There are five basic elements to psychological first aid drawn from research and expert agreement: promote a feeling of safety, a sense of calm, connectedness to others, self-sufficiency, and a sense of hope. Please refer to page 48 which provides more detailed description of the five principles.

The following table summarises appropriate and inappropriate actions for WFP staff or partners to undertake when approached for assistance by a survivor of gender-based violence, or when they become aware of a case of gender-based violence. Emphasis is placed on the need to assist survivors in getting the help they need, from those qualified and capable of providing it.

WFP staff/CP staff should	WFP staff / CP staff should not
<ul style="list-style-type: none"> • Ensure their own safety 	<ul style="list-style-type: none"> • Interview the affected person(s)
<ul style="list-style-type: none"> • Ask if the affected person(s) are safe 	<ul style="list-style-type: none"> • Interview witnesses or others implicated in the incident
<ul style="list-style-type: none"> • Alert medical services if immediate assistance is required 	<ul style="list-style-type: none"> • Provide counselling to the affected person(s)
<ul style="list-style-type: none"> • Be supportive and show empathy 	<ul style="list-style-type: none"> • Cut off or send away the person(s) seeking to share their experience
<ul style="list-style-type: none"> • Provide accurate information about where to receive assistance: address, phone number 	<ul style="list-style-type: none"> • Document, monitor, or otherwise record details of the incident

<ul style="list-style-type: none"> • If immediate assistance is necessary (e.g. medical care), facilitate by requesting others to find transport or making phone calls on their behalf 	<ul style="list-style-type: none"> • Encourage the affected person(s) to report the abuse to the authorities
<ul style="list-style-type: none"> • Inform their manager 	<ul style="list-style-type: none"> • Encourage the person to return to the source of abuse e.g. family member

Referral Pathway

There are three scenarios in which WFP Somalia staff or CP staff can make a referral. In all the three scenarios, referrals should only be done with the informed consent of the survivor, and confidentiality maintained throughout the process.

a) Scenario 1: Presence of protection actors in affected areas

WFP staff and CPs will direct the affected person to the appropriate agency/actor for services in their area of operation, e.g. sharing contact details for GBV/Protection Officers in the area or advising of the location of specific support services. WFP staff making a GBV referral will contact the WFP Protection Officer to make them aware a referral has taken place, without sharing specific details. WFP will ensure that all staff in the field offices as well as call centre operators and CPs are informed and have an updated list of GBV/Protection actors working in each area.

b) Scenario 2: Protection actors with established information management systems exist only at central level, or with irregular or limited access to affected areas

In this case, WFP staff, call centre operators and CP staff will forward basic, essential information of the GBV incident to the relevant actor (e.g. the central GBV hotline) on behalf of the affected person, e.g. incident type, date of event, location; include the name or contact information of the person only when confidentiality can be ensured and consent has been obtained from the complainant. The WFP Protection Officer will be informed to let them know a referral is in process but without sharing details outside of the established CFM system.

c) Scenario 3: Complete absence of protection actors in affected areas

There are very few effective GBV services in Somalia and much less so in the rural areas where this project is targeting. This was confirmed by a mapping of GBV service providers in the targeted project locations. In cases where there is no protection actor or GBV services, it must be made clear to the affected person that WFP is not equipped to handle the case itself. WFP will work with other protection actors over the course of the project to determine the most appropriate actions to take in such a scenario. WFP partners will still provide information on the nearest protection and GBV services providers even if they are located further from the affected person's location.

iii) SEA Incidents Reported to Other Protection Actors and Service Providers

To increase the channels and safe spaces available for people to report SEA and GBV incidents related to the SNHCP project, where feasible, WFP will partner (establish agreements) with the available service providers in the targeted communities so appropriate support can be provided and cases related to the project tracked. WFP will also collect information from its CPs on the incidents reported directly to them and referred to identified service providers. WFP has established protocols for handling of data from the complaints and feedback mechanism. Before any data is shared with or received from others (e.g.

GBV service providers, World Bank), WFP will establish agreements to determine how data will be shared, protected and used (for what purpose).

In addition, as part of the community consultations, WFP partners will ask the communities to identify local channels for safe reporting of GBV incidents (e.g. respected village leaders or prominent women's organizations) and through which referrals can be made. Referral pathways will then be established between WFP, the channels identified by the communities and available service providers to ensure that affected persons get the services they need, and perpetrators are held accountable. WFP will notify the World Bank of any project related GBV/SEA case occurring within 24 hours of being reported. This will apply to all cases received by WFP directly (including through the hotline) and those received through partners.

Sharing of information on GBV/SEA incidents will be guided by WHO Ethical and Safety Recommendations for Researching, Documenting and Monitoring Sexual Violence in Emergencies and other best practices. These include ensuring that survivor/incident data is non-identifiable (no names, contact info, or other identifiers), only sharing survivor/incident data with the informed consent of the client, sharing a survivor's information only within the context of a referral and with the informed consent of the survivor, protecting client data at all times and only sharing with those who are authorized. Details of the incident reports to be shared with the World Bank are listed in the section below.

Five Elements of Psychological First Aid

Adapted from Psychological First Aid: An Australian guide to supporting people affected by disaster, Australian Red Cross and Australian Psychological Association, 2013.

There are five basic elements to psychological first aid that have been drawn from research on risk and resilience, field experience and expert agreement.

1. Promote safety

- Remove from, or reduce exposure to, threat of harm.
- Help people meet basic needs for food, water, shelter, financial and material assistance.
- Help people obtain emergency medical attention.
- Provide physical and emotional comfort.
- Provide repeated, simple and accurate information, in a range of methods, on how to get these basic needs met.

2. Promote calm

- Stabilise people who are overwhelmed or disoriented.
- Provide an environment, as far as practical, removed from stressful situations or exposure to sights, sounds and smells of the emergency.
- Listen to people who wish to share their stories and emotions, without forcing them to talk.
- Remember that there is no right or wrong way to feel.
- Be friendly and compassionate even if people are being difficult.
- Offer accurate information about the disaster or trauma and the relief efforts underway to help survivors understand the situation.
- Provide information on stress and coping.
- When they express fear or worry, remind people (if you know) that more help and services are on the way.

3. Promote connectedness

- Help people contact friends and loved ones.
- Keep families together. Keep children with parents or other close relatives whenever possible.
- Help establish contacts with support people (friends, family or community helping resources).
- Respect cultural norms regarding gender, age and family structures.
- Offer practical help to people to address immediate needs and concerns.
- Provide information and direct people to those services that are available.
- Link people with available services.
- Respect cultural norms regarding gender, age, family structures and religion.

4. Promote self-sufficiency

- Engage people in meeting their own needs.
 - Assist with decision making, help them to prioritise problems and solve them.
- ### 5. Promote hope
- Convey expectancy that people will recover.
 - Be there/be willing to help.
 - Reassure people that their feelings are normal.

GBV/SEA Incident Reporting Format

INCIDENT DETAILS		Guiding Notes
1	Case Category	SEA (by WFP or CP staff)
		GBV (by third party)
2	Nature of the incident reported	Basic facts of the incident. What was reported by the complainant (in his or her own words). Is the incident related to the project?
3	Source of information	Hotline, CP, other (specify)
4	Where did the incident occur	District
		Region
5	When did the incident occur	Date
6	Additional information (if available)	Sex, Age
<p>The identity and safety of a survivor must be protected at all times. No personal data or identifying information about a survivor or their experience can be shared through this document. Personal/identifying information includes the survivor's name, perpetrator(s) name, date of birth, home address, the exact time and place the incident took place, visible disability, residence status e.g. minority clan or IDP, which can be identified in small village/community settings.</p>		

GBV Service Providers in Somalia

SNHCP targeted location

State	Region	District	Organization	Services Available	Village, town or IDP Settlements	Name and contact of focal person (email address and telephone)
Somaliland	W/Galbeed	Gabiley	Gabiley General Hospital	Clinical care, Referral	Gabiley	Dr. Deka Hassan Abdi, Tel: 0634466587
Somaliland	Awdal	Borama	Baahi-Koob Center, Borama Hospital	ONE STOP CENTER: Psychosocial Counselling, Clinical care, Referral	Borama	Faisa Abdi Hadi, Tel. 0634450934
Somaliland	Togdheer	Burao	Baahi-Koob Center, Burao Hospital	ONE STOP CENTER: Clinical Care, psychosocial counselling, Referral	Burao	Khadra Nouh, Tel. 0634321277
Somaliland	Sanaag	Ceel Afweyn, Cerigabo, Lasqoray	Agency for Peace and Development (APD)	21 MCH In Lasqoray dealing with GBV and Protection issues	Ceel Afweyn, Cerigabo, Lasqoray	Siyad Mohamed Abdi, Tel. 0711117773
Somaliland	W/Galbeed	Hargeisa	SOFHA Health Center	Psychosocial counselling, Referral	Hargeisa	Amal Ahmed Mohamed, Tel: 0634008320, Ahmed Dhagax
Somaliland	W/Galbeed	Hargeisa	WAAPO Center	Psychosocial counselling, Temporary shelter, Material assistance, Referral	Hargeisa	Abdalle Mo, Tel: 0633613609
Somaliland	W/Galbeed	Hargeisa	CCBRS Office, Sha'ab area	Psychosocial counselling, Temporary shelter, Material assistance, Referral	Hargeisa	Saxardiid Mohamed, Tel: 0634404023
Somaliland	W/Galbeed	Hargeisa	SWLA	Psychosocial counselling, Legal support, Referral	Hargeisa	Fatuma Muse, Tel 0634432133
Somaliland	Sanaag	Ceel Afweyn, Cerigabo, Lasqoray	NAGAAD	Legal Service: Trained paralegals will guide GBV victims to seek justice.	Ceel Afweyn, Cerigabo, Lasqoray	Mustafe Ahmed Hassan, Mustafeh2@gmail.com. Tel +252634424873
Somaliland	Sool	Caynabo, Laascanod, Taleex, Xudun	NAGAAD	Legal Service: Trained paralegals will guide GBV victims to seek justice.	Caynabo, Laascanod, Taleex, Xudun	
State	Region	District	Organization	Services Available	Village, town or IDP Settlements	Name and contact of focal person (email address and telephone)

Puntland	Mudug	Galkayo	CESVI	Medical, psychosocial support and provision of dignity kits for GBV survivors.	Docol, Bandiradley, Wargalo and Galkayo IDPs (Alanley, Arafat and Hiran)	Habiba Abass Maalim Galinsor, habib.cesvi@gmail.com. Tel. 616662936
Puntland	Mudug	Galkayo	SBACO	Transportation, Case referral & emergency grant fund	Galkayo	Mahamed Abdi 0907712682
Puntland	Mudug	Galkayo	TASS	Transportation, Case referral & emergency grant fund	Galkayo	Jamaludin Cawke 0907790098
Puntland	Mudug	Galkayo	Hope foundation	Transportation, Case referral & emergency grant fund	Galkayo	Mohamed Farah Olad 0907751123
Puntland	Mudug	Galkayo	SORDA	Transportation, Case referral & emergency grant fund	Galkayo	Mohamed Mohamoud Ereg 090 7611612
Puntland	Mudug	Galkayo	Mudug Regional Hospital	PEP, STI Antibiotics, Emergency Contraception, HIV Testing and Counselling	Galkayo	Dr. Mohamed Hussein 0907795651
Puntland	Mudug	Galkayo	IRC/ South Galkayo Hospital,	PEP, STI Antibiotics, Emergency Contraception, HIV Testing and Counselling.	Galkayo	Abdikadir
Puntland	Mudug	Galkayo	GMC	PEP, STI Antibiotics, Emergency Contraception, HIV Testing and Counselling	Galkayo	Dr. Abdulqadir Dhagade 090779009
Puntland	Mudug	Galkayo	CESVI	Medical (South Galkayo Health posts	Galkayo	Habiba Abass Malin- 0906181775
Puntland	Mudug	Galkayo	VCT Center MRH/Merlin	HIV service /screening /ART	North Galkayo	Dr Mohamed Hussein 0907795651
Puntland	Mudug	Galkayo	GMC	HIV service /screening /ART	North Galkayo	Dr. Abdulqadir Dhagade 090779009
Puntland	Mudug	Galkayo	GECPD	Child Friendly Spaces	Halaboqad and Buula Ba'aley	Zamzam Abshir 0907705368, Abdulkhani Hassan 0907755346
Puntland	Mudug	Galkayo	GECPD	Psychosocial support including counselling, subsistence support	Galkayo	Mama Hawa Aden 0907795111
Puntland	Mudug	Galkayo	CESVI	Psychosocial support	Galkayo South	Habiba Abass malin- 0906181775
Puntland	Mudug	Galkayo	IRC/MPHDO	Psychosocial support including counselling,	Galkayo South	Ahmed Yusuf Hussein 0907307307396
Puntland	Mudug	Galkayo	PMWDO	Psychosocial support including counselling,	Galkayo	Dr Maymun Farah Samatar 0907795960
Puntland	Mudug	Galkayo	DRC	GBV support kit	Galkayo	Mohamoud Abdirahman 0907793948
Puntland	Mudug	Galkayo	Galkayo Main Police station	Security assistance	North Galkayo	Zakariye Mohamed 090775669
Puntland	Mudug	Galkayo	Warshad Galey Police Station	Security assistance	North Galkayo	Hassan Kaafi 0907750174

Puntland	Mudug	Galkayo	Tawakal Police Station	Security assistance	Tawakal IDP Camp	Qalinle 0907757387
Puntland	Mudug	Galkayo	Police Station	Security assistance	Galkayo South	Mohamed Ilmi Gulafe, 0907707555,
Puntland	Mudug	Galkayo	Alanley Police station (Eastern Police Station)	Security assistance	Galkayo South	Mohamed Ilmi Gulafe, 0907707555
Puntland	Mudug	Galkayo	Puntland Legal Aid Centre	Legal Aid Services	North Galkayo	Mubarak Abdi Ali 0907708463
Puntland	Nugaal	Garowe	UNDP, PL Police Force (Community Policing Unit)	Community policing female volunteers to bridge the gap in the process of reporting and following up on SGBV cases	Garowe	Gladys Mpere, mpere@un.org
Puntland	Nugaal, Mudug, Bari, Karkaar	Garowe, Galkayo, Bosasso, Gardo	Puntland Legal Aid Center (PLAC), Puntland State University (PSU)	Provision of legal aid services using legal aid lawyers, paralegals and interns. Mediation services are also provided by paralegals.	Garowe, Galkayo, Bosasso, Gardo	Hawo Omar, hawo.mahmoud@undp.org,
Puntland	Bari	Bosasso	Care International	Administration of PEP: Examination, Referral, Treatment of physical injuries, transport to hospital	Bosasso	Dr. Sundus Mohamed, Tel. 090-7728349
Puntland	Bari	Bosasso	Care International	Counselling, case management/emotional support, transportation	Bosasso	Fadumo Ahmed, Tel. 090-7080404
State	Region	District	Organization	Services Available	Village, town or IDP Settlements	Name and contact of focal person (email address and telephone)
Galmudug	Galgaduud	Dhusamareeb	Swiss- Karmo / IRC	PEP, HIV test, ECP, Pregnancy test, STI treatment, Tetanus vaccination, Wound treatment	Dhusamareeb	Dr. Abdirahman Beerey, Tel. +252 619999988. Sumaya Abdirazak Tel. +252 616395494, Ibrahim Mohamed Abdullahi +252 619809161
Galmudug	Galgaduud	Dhusamareeb	SWACEDA	Counselling	Dhusamareeb	Abdirahman Ali Abdi, Tel. +252 615233940
Galmudug	Galgaduud	Dhusamareeb	SWC	Counselling	Dhusamareeb	Abdi Hoshi Adan, Tel. +252 615600033
Galmudug	Galgaduud	Dhusamareeb	District Police	Arrests of perpetrators	Dhusamareeb	Hassan Mohamed Abdi, Tel. +252 617141472, Fardowsa Abdi

Galmudug	Galgaduud	Dhusamareeb	IRC	Medical support for GBV survivors including provision of PEP treatment to rape survivors. Case management and Psychosocial support to GBV survivors	Dhusamareeb	Ibrahim, GBV/Protection Manager +2520612621770
Galmudug	Galgaduud	Dhusamareeb	SWACEDA	Provision of dignity kits, psychosocial support and sensitization program, provide hotline services, safe house for survivors, follow up and referral.	Dhusamareeb	Abdirahman Ali Abdi +2520615233940
Galmudug	Galgaduud	Dhusamareeb	Swiss-Kalmo	Provide medical services.	Dhusamareeb	Berrey Omar +2520619144466
Galmudug	Galgaduud	Dhusamareeb	SRCS	Provide health care services	Dhusamareeb	Abdulkadir Jimaale, +252 61 5275823
Galmudug	Galgaduud	Dhusamareeb	Dhusamareeb Police	Arrests of perpetrators	Dhusamareeb	Hassan Mohamed Ali, +252 61 7141472
Galmudug	Galgaduud	Dhusamareeb	Dhusamareeb district court	Hearing cases, Refer to Heer Berg (traditional court)	Dhusamareeb	Ali Warsame Farah +252616345423

State	Region	District	Organization	Services Available	Village, town or IDP Settlements	Name and contact of focal person (email address and telephone)
Hirshabelle	Hiraan	Beletweyne	HIWDO Family Care (Hiiran Women Development Organization)	Medical assistance	Haweyo	Dahir Dhi'isow Tel. 0615109151; E-mail: hwdfamilycare@gmail.com
Hirshabelle	Hiraan	Beletweyne	Salama Hospital	Medical assistance	Beletweyne	Awale Abdi Farah, Tel. 0616666605; E-mail cawaale500@gmail.com
Hirshabelle	Hiraan	Beletweyne	Rajo Relief and Development Organization	Medical assistance	Beletweyne	Farah Hassan Mohamed Tel. 0615536247 E-mail: rrd099@gmail.com
Hirshabelle	Hiraan	Beletweyne	Doyale Relief and Development Organization	Medical assistance	Beletweyne	Mohamed Abukar, Tel. 0615597789, E-mail: Doyaley@yahoo.com Ahmed Dhubow Abdi, Tel. 0615571506, Email: Doyaley@yahoo.com
Hirshabelle	Hiraan	Beletweyne	HIWA (Humanitarian Integrity for Women Action)	Medical assistance	Beletweyne	Aliya Adan Abdi, Tel. 0615209999 E-mail: Hiwa.Hiran@gmail.com
Hirshabelle	Hiraan	Beletweyne	WARDI	Medical assistance	Beletweyne	GBV/CP Head of the officer Hussein Abdi Issak, Tel. 0615501688, E-mail: wardi.hiran@hotmail.com; wardiorg@yahoo.com

Hirshabelle	Middle Shabelle	Balcad	SHARDO	Provision of dignity kits	Balcad health centre	Hassan Shariff, Tel. +252615563994
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State	Region	District	Organization	Services Available	Village, town or IDP Settlements	Name and contact of focal person (email address and telephone)
South West	Gedo	Bardera	SORDES	Psychosocial Support	Bardera	Farhan Hassan Mohamed. Tel. 0616384444
South West	Gedo	Garbaharay	SORDES	Psychosocial Support	Garbaharay	Mahad Qassim Olad Tel. 0615818272
South West	Bakool	Wajid, Xudur, Tayeglow	DREDO	Psychosocial support, medical referrals and GBV services	Wajid, Xudur, Tayeglow	Dahir Mayow Muktar, Tel 0615010005
South West	Bakool	Wajid, Xudur, Tayeglow	SCWRD	Psychosocial support, medical referrals and GBV services	Wajid, Xudur, Tayeglow	Adan Ali Tel 0615928661

State	Region	District	Organization	Services Available	Village, town or IDP Settlements	Name and contact of focal person (email address and telephone)
Jubaland	Lower Juba	Kismayo	ARC	Provision of PEP treatment to rape survivors. Case management and Psychosocial support, provision of dignity kits and follow-up and referral.	Kismayo	Fatima Ahmed Ali: +252619840899 Shair Ibrahim, GBV/Protection Manager: +252619840865
Jubbaland	Lower Juba	Kismayo	SEDHURO	Medical support, Provision of dignity kits and psychosocial support. IDTR for children and a day care. Support foster mothering for un-accompanied minors. Legal Aid Assistance for GBV Survivors.	Kismayo	Hassan Abdi Ali, GBV Focal Point/ Protection Officer
Jubbaland	Lower Juba	Kismayo	SWACEDA	Medical support to GBV cases, psychosocial support	Fanoole Village	Abdirahman, Tel. 061683796
Jubbaland	Lower Juba	Kismayo	SRCS	Medical response including provision of PEP kits to Rape survivors.	Kismayo	Hassan Weheliye, Tel. 0615836501
Jubbaland	Lower Juba	Kismayo	CEDA	Psychosocial first aid for child rape survivors .	Kismayo	Mohamed.Qadar +252617439441
Jubbaland	Lower Juba	Kismayo	Motherland Somalia	Legal assistance and advocacy	Kismayo	Abubakar Mohamed Tel. 0616513311

Jubbaland	Lower Juba	Kismayo	WRR	Counselling to GBV survivors, provision of medical treatment and dignity kits to the survivor.	Kismayo	Dekow Yussuf Maalim Tel. 0615924990
Jubbaland	Lower Juba	Hagar	SORDES	Medical assistance at MCH/OPD	Hagar	Omar Dagalyahan, Tel. 0615356478
Jubbaland	Lower Juba	Kismayo	Ministry of Health	Medical assistance	Kismayo General Hospital	Hussein Kassim Maalim, Tel. 0615877836, Email: husseinkassimali@gmail.com
Jubbaland	Lower Juba	Kismayo	ICRC	Medical assistance	Kismayo General Hospital	Dr. Abdulqani Mohamed Mohamud, Tel. 0617495262
Jubbaland	Lower Juba	Kismayo	SRC	Medical assistance	Kismayo	Dr. Hassan Wehliye, Tel. 0615836501
Jubbaland	Lower Juba	Kismayo	ARC	Medical assistance	Kismayo	Nurse, Hamdi Hassan, Tel. 0619840899/618908882
Jubbaland	Lower Juba	Kismayo	ARC	Medical assistance	Kismayo	ARC Bula Abliko, Nurse, Shukri Sulub, Tel. 0619840899/616683470
Jubbaland	Lower Juba	Kismayo	SWACEDA	Medical assistance	Kismayo	Abdirahman Mohamed Guraa, e-mail: swaceda.org@gmail.com/ sirmed6@gmail.com, Tel. 0612566528
Jubbaland	Lower Juba	Kismayo	SEDHURO	Medical assistance	Kismayo	Ali Abshir, Email- a.abshir@sedhuro.org, Tel. 0616524559
Jubbaland	Lower Juba	Kismayo	WRRS	Medical assistance	Dalhiska MCH	Abdisamad Mohamed Abdille, Medical Doctor, Tel. 0615250816
Jubbaland	Lower Juba	Kismayo	ARC	Psychosocial support	Kismayo	Psychosocial Counsellor, Fatima Ahmed, E-mail: FatimaAA@arcrelief.org, Tel. 0619840899
Jubbaland	Lower Juba	Kismayo	SEDHURO	Psychosocial support	Kismayo	Ali Abshir, Email: a.abshir@seduro.org, Tel. 0616524559
Jubbaland	Lower Juba	Kismayo	CEDA	Psychosocial support	Kismayo	Mohamed Qadar, Email- qadar12311@gmail.com, Tel. 0617439441
Jubbaland	Lower Juba	Kismayo	SWACEDA	Psychosocial support	Kismayo	Abdirahman Mohamed Guraa, Email: swaceda.org@gmail.com/ sirmed6@gmail.com, Tel. 0617787039
Jubbaland	Lower Juba	Kismayo	WRRS	Psychosocial support	Kismayo	Nuney Dekow Kalba, E-mail: wrrskismayo@gmail.com, Tel. 0612665787

Annex – 3 Security Action Plan

Action points	Who is responsible	Benchmark	Q1	Q2	Q3	Q4
Cash distribution						
Principles of Safe Cash Distribution shared with CPs	WFP	WFP/ CPs trained				
Safe Distribution Model developed & disseminated	WFP	WFP/ CPs trained				
Security Planning & evacuation advice shared	WFP	All CPs informed				
Ideal Model for commodity distribution developed and communicated	WFP	All WFP/ CPs informed				
Generic Security Measures in place	WFP	All WFP/ CPs informed				
Pre-Distribution Security measures in place	WFP	All WFP/ CPs informed				
Post-Distribution monitoring measures.	WFP	All WFP/ CPs informed				
Training on Security	WFP/ CP	All relevant WFP/ CPs trained				
Coordination with the Host Government.	WFP/ CP	Key stakeholders informed and aware				

Annex – 4 Partner Processes and Flow Chart

Activities	No of days
1.NGO profiling, due diligence checks and capacity assessment for new partners or those returning after 2 years	2 weeks before project commences
2) Call for proposals shared with Area Offices (AOs) by Head of Programmes/Tech units and the AOs disseminating to the call for proposals to their potential CPs	1-2 days
3) Proposals to be received by AOs	Within 10 days
4) initial review and comparative analysis of the proposals by the AOs in collaboration with the relevant technical teams.	Within five (5) days
5) Review and clearance of the proposals by technical team; submission for Cooperating Partner Committee (CPC) review	Within five (5) days
6) Receipt of proposals by Partnership Unit and CPC scheduling	2 working days
7) CPC review	Within three (3) days after receipt by Partnership unit
8) FLA preparation/ signatures/Partner Accounts creation in COMET <ul style="list-style-type: none"> • If approved by CPC with no comments • If not approved by CPC as it requires amendments/corrective measure by the AO and CP: 	Five (5) days 10 (5 days for AOs to address comments; 5 days for FLA preparation and signatures)
9) CP signing FLAs and sending back to WFP	Five (5) days
10.CP performance evaluation	2 months before the end of the Field Level Agreement (FLA)

Annex - 5 Social Incidence Reporting – WFP Somalia

Incidence classification

- **Indicative:** Small or contained incident which is handled by A) /FO. Example: delay of cash distribution timing.
- **Serious:** Inappropriate venue for cash distribution.
- **Severe:** Attempt by staff to seek kickback

Guidance and Proportional response

- **Indicative:** Dealt by the AO/ FO. Reported in the WFP
- **Serious:** Dealt in coordination between FO, AO and CO with Heads of departments.
- **Severe:** Reported to Senior management and dealt in coordination between FO, AO and CO with Heads of relevant departments. Immediate reporting required.

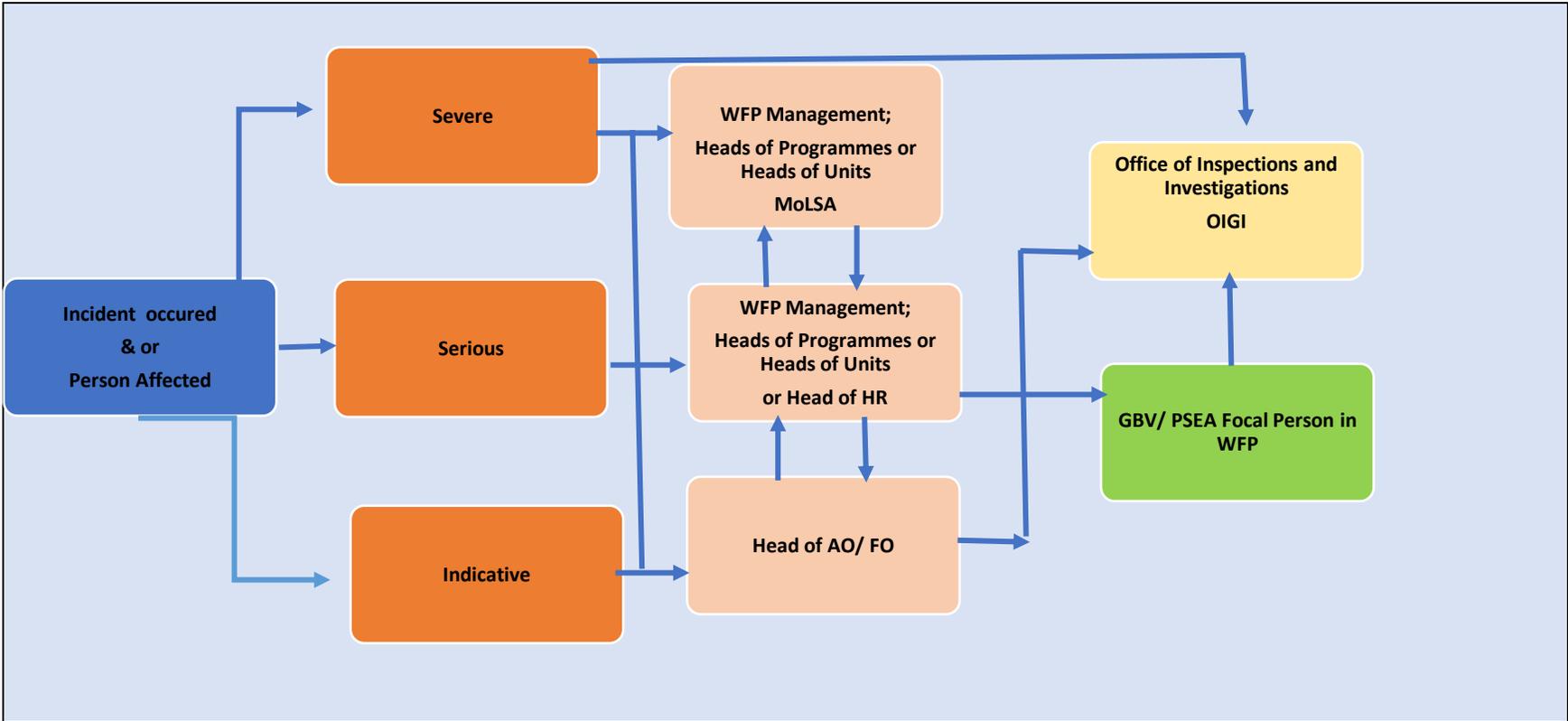
Classification of Responsibilities

- **Indicative:** Once appropriately classified, action is taken by WFP or partner as appropriate
- **Serious:** WFP and management
- **Severe:** WFP, Management, UNICEF and MoLSA

Templates

- **Indicative:** Dealt by the AO/ FO. Reported on a weekly basis to respective departments
- **Serious:** Immediate report by email to supervisor - Incidence, time, persons involved, measures suggested or taken.
- **Severe:** Incidence Report - Incidence described in detail, time period of occurrence, persons involved, mitigation measures in place, timeliness of report, Management action- if needed.

Annex - 6 Social Incidence Reporting – WFP Somalia



Annex - 7 SMP Implementation Matrix

SMP risks	Description	Method used	Timetable: and dates	Location	Target stakeholders	Responsibility	Tentative budget
Exclusion	The security issues and exclusion in effective stakeholder engagement and community participation can be very challenging. The project must ensure it reaches vulnerable community members.	Objective targeting; Clan dynamics and equity across geographical areas; Community Inclusive Targeting; Complaints and Feedback mechanism;	November – December 2019		Communities, community leaders, CPs, District officials	MoLSA through WFP	Security aspects will be taken care in the implementation of the project. Additional budget requested for Community consultations. Budget breakdown presented below. Total USD. 220,000
Selection	Gender and other cultural dynamics will need to be managed to ensure transferred cash is not captured by unintended beneficiaries.	Information technology solution SCOPE; Hybrid approach	November – December 2019; Monitoring through the project cycle till completion		Communities, community leaders, CPs, District officials	MoLSA through WFP	Covered in the original budget
Elite or Clan capture of project	There is a risk that local community dynamics may result in attempts to capture the benefits of the project for a particular group.	Community consultation, Objective selection criteria; wide stakeholder consultations; Information technology solution SCOPE; Monitoring systems	Monitoring through the project cycle till completion		Communities, community leaders, CPs, District officials	MoLSA through WFP	Covered in the original budget
Remoteness	The cash transfer methodology to be implemented in rural areas of Somalia, cognizant of	'On the ground' organizational	Monitoring through the project cycle till completion		WFP & CPs	MoLSA through WFP	Covered in the original budget.

	the cultural differences between rural areas creates a different set of challenges which if not managed could complicate project implementation.	presence; Working through partners;				All monitoring and Incidence reporting are taken into consideration in the original budget.
SMP risks	Description	Method used	Timetable: Location and dates	Target stakeholders	Responsibility	
Systemic Weakness	The borrower capacity for preventing adverse social impacts on the project is limited, as is the borrower's capacity for redressing the impacts of social harm where it has occurred.	Security of Payment modality; Financial due diligence procedures; Scope and Data protection policy of WFP;	Payment modality followed. Vetting and due diligence checks in place. Monitoring through the project cycle till completion	WFP & CPs	MoLSA through WFP	Covered in the original budget.
Difficulty monitoring	Security concerns and the remoteness of the project target areas combine to provide a significant challenge for monitoring and supervising project implementation. This can include challenges for community and stakeholder engagement, grievance redress and other risk mitigation protocols.	Multi layered monitoring system: Direct WFP monitoring Third Party monitoring CP monitoring	Through the project cycle.	WFP & CPs	MoLSA through WFP	Covered in the original budget
Inward migration	People from neighboring districts will seek to migrate to the project areas to benefit from the project. This runs the risk of upsetting the clan	One-time enrolment; Small transfer amount to beneficiaries.	Through the project cycle.	WFP & CPs	MoLSA through WFP	No additional budget required.

	balance in remote regions and exacerbating social and environmental fragility through associated population.					
Gender Based Violence	There is the possibility of increased risk of gender-based violence and abuse of women and children in situations of poverty, hunger, conflict, insecurity and displacement. Women's lack of access to and control of assets, services and income increases their economic dependence as well as their vulnerabilities to abusive and exploitative situations. Food or cash assistance may also unintentionally contribute to GBV. Special safeguards need to be put in place to ensure that these risks are averted and or mitigated and redressal mechanisms put in place.	GBV plan: Sharing GBV policies and redress system to communities; Ensuring CP abide by WFP policies; Trainings to CFM staff & CPs; Safety, access and security of cash transfers; Communication to beneficiaries throughout the project cycle. Well established GBV referral system	Community meeting, trainings, communication outreach- 1 st quarter of the project. Continuous monitoring and follow up.	WFP & CPs	MoLSA through WFP	Additional budget requested for GBV. Budget breakdown presented below. Total USD 359,100

Additional budget request for SMP

GBV Prevention and Mitigation Activities	Qty	Unit Cost (USD)	Total cost (USD)
Training for Call Center Operators and PSEA Focal Points on receiving and referring GBV and SEA cases	1	22,000	22,000
Communication materials (posters)	750	520	320,000
Sub-total			342,000
Contingency	5%		17,100
Grand total			359,100

Community consultations	Qty	Unit Cost (USD)	Total cost (USD)
Additional sessions of consultations with communities, during the initial (verification, validation & implementation) phase of the project as per CC plan.	21	5,000	105,000
Hold consultation with communities / key decision makers planning the exit or hand over or extension of project during the final months of the project.	21	5,000	105,000
Sub-total			210,000
Contingency	5%		10,500
Grand total			220,500

Total budget for SMP

\$ 579,600