

# YEMEN SITUATION REGIONAL REFUGEE AND MIGRANT RESPONSE PLAN

*October-December 2015*

*January-December 2016 (Preliminary estimates)*



**October 2015**

**Cover photograph:**

August 12, 2015 - IOM staff in Obock (Djibouti) receiving migrants who just disembarked from IOM chartered boat that evacuated them from Hodeidah, Yemen. © IOM Djibouti

# Strategic Overview

<b>Period</b>	October – December 2015 January – December 2016 ( <i>preliminary estimates</i> )
<b>Current Population</b>	69,167 persons as at 31 August 2015 in Djibouti, Ethiopia, Somalia, Sudan (110,167 with Saudi Arabia and Oman)
<b>Population Planning Figures</b>	2015: <b>103,350</b>   2016: <b>201,800</b>
<b>Target Beneficiaries</b>	Refugees, migrants, and returnees fleeing from Yemen to Djibouti, Ethiopia, Somalia, Sudan and host communities
<b>Financial Requirements</b>	2015 (October-December): USD <b>36,412,375</b> 2016 (January-December): USD <b>119,528,602</b>
<b>Number of Partners</b>	10*

\* While 10 agencies are part of this appeal, there are 48 partners who are contributing to provide protection and assistance to the refugees, migrants, and returnees fleeing from Yemen to Djibouti, Ethiopia, Somalia, and Sudan.

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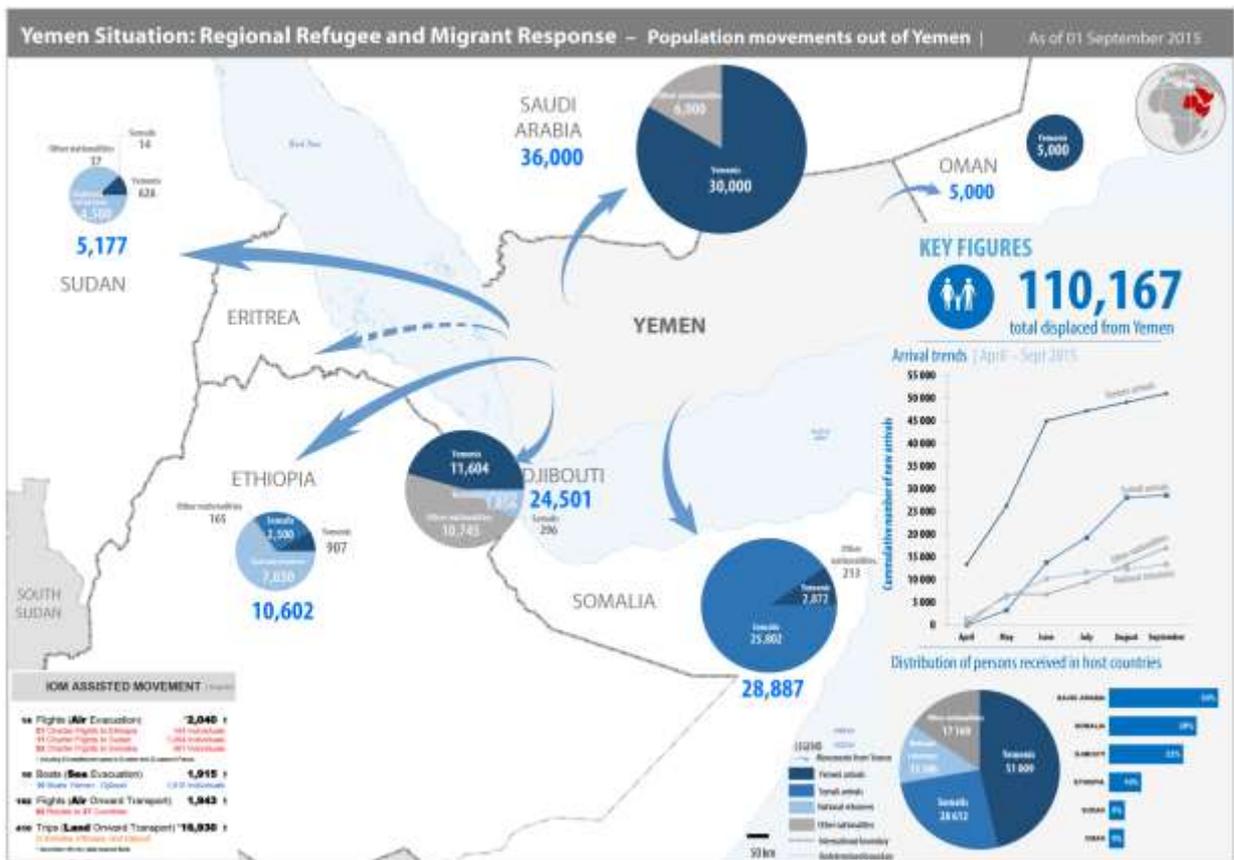
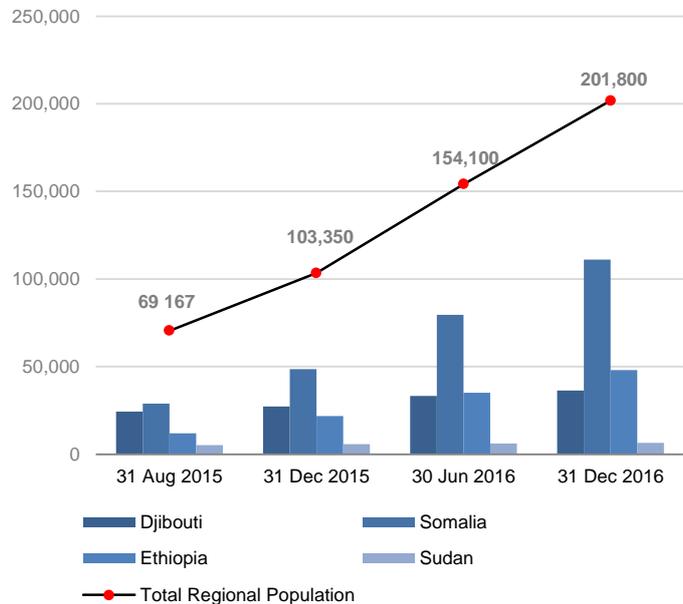
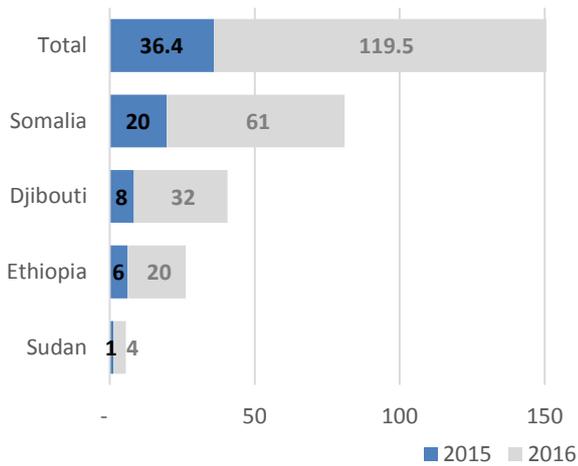
# REGIONAL RESPONSE DASHBOARD

USD **36.4 million** (Oct-Dec 2015)

USD **119.5 million** (Jan-Dec 2016)

## Population Trends

Requirements (in millions USD)



# REGIONAL STRATEGIC OVERVIEW

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## ***Introduction***

The situation in Yemen has deteriorated dramatically since fighting and violence intensified in late March 2015. Deepening insecurity and violence have taken a heavy toll on civilian lives and triggering large-scale internal displacement and cross border population movements. Partners now estimate that 21.1 million people – 80 per cent of the population – require some form of humanitarian protection or assistance. More than 1.2 million people are internally displaced in Yemen, and alongside internal displacement, Yemenis, refugees and migrants are fleeing the country in considerable numbers. As of the end of August, more than 100,000 arrivals from Yemen have been reported in countries in the Middle East, as well as in the East and Horn of Africa, mainly in Djibouti, Ethiopia, Somalia, and Sudan.

As of 31 August, close to 70,000 people have arrived in Djibouti, Ethiopia, Somalia and Sudan fleeing the crisis in Yemen. Despite the ongoing crisis, migrants from Eritrea, Ethiopia, and Somalia are continuing to take the often perilous journey from the Horn of Africa to Yemen. The drivers of migration in the Horn of Africa include political, conflict and security, demographic, economic, environmental, and social factors. Despite some economic gains, there is widespread poverty in the region and inequitable distribution of the benefits of economic growth. Environmental concerns, specifically climate change and environmental degradation, contribute to resource-based competition and conflict. Migration is facilitated by trafficking and smuggling networks that actively promote their services to migrants, and compounded by poor governance and weak border management. The situation of mixed migration in the Horn of Africa is marked by high risks, dangers, documented abuse, and deaths at sea or on land. Large numbers of migrants are opting to move between countries in this manner, despite being aware of the risks and dangers.

In addition, prior to the crisis, there were 257,645 recognized refugees under international protection in Yemen, mostly Somalis, who also require continued humanitarian assistance. Somali refugees are currently living in precarious conditions either in Kharaz camp, the only refugee camp, or in urban areas. Somali refugees in Yemen may be forced to make the difficult decision to return to Somalia, despite the associated protection risks. Since the beginning of the crisis, 28,887 individuals (89 per cent Somalis; 10 per cent Yemenis, and 1 per cent migrants) fleeing the conflict in Yemen have arrived in Somalia. Reintegration of Somali returnees poses additional challenges as the widespread conflict and political strife have crippled essential infrastructure and more than three quarters of the population lack access to healthcare, proper sanitation and safe drinking water.

In the Gulf region, the majority of Yemenis are residing in Saudi Arabia. Oman kept its borders with Yemen closed since the beginning of the conflict. None of the Gulf Cooperation Council (GCC) countries is party to the 1951 Convention and/or the 1967 Protocol relating to the Status of Refugees nor has national legislation dealing with refugees and asylum seekers. The application of migration regimes and national immigration laws applicable to third country nationals, including Yemeni, is rather strict, unpredictable and often influenced by security concerns. However, governments in the GCC countries have shown a certain level of tolerance toward the presence of

Yemenis and humanitarian considerations, including, respecting the principle of *non-refoulement*. In Saudi Arabia, a visitor visa for six months has been issued for more than 465,400 Yemenis to regulate their stay in the country. The visitor visas enable Yemenis to access basic health services, education and the labour market. Overstay has been tolerated in most of the GCC countries.

In response to the influx of persons fleeing from the conflict in Yemen, humanitarian actors in Somalia and Djibouti respectively launched an inter-agency appeal (Djibouti Response Plan for Yemen Crisis; Somalia Response Plan for Yemen Crisis) in March 2015, covering the period from April to September 2015, to address the protection and assistance needs of persons fleeing Yemen.

As the situation in Yemen continues to deteriorate, it is anticipated, based on recent trends that the movement during 2015-2016 into neighbouring countries such as Djibouti, Ethiopia, Somalia, Sudan and the Gulf Countries will continue and might accelerate.

In order to continue to address the needs of persons fleeing Yemen in receiving countries, and further to the nomination by UNHCR of a Regional Refugee Coordinator for the Yemen crisis to harmonize the response in the neighbouring countries affected by the Yemen Crisis (see section below on “Coordination”), this plan brings together the respective country plans of Djibouti, Ethiopia, Somalia and Sudan in a Regional Refugee and Migrant Response Plan (RRMRP) co-led by UNHCR and IOM. The RRMRP covers the requirements to provide protection and assistance to those fleeing Yemen into Djibouti, Ethiopia, Somalia and Sudan for the remainder of 2015 (October-December 2015) and onto 2016<sup>1</sup>. While the situation of Yemeni arrivals in the GCC countries has been highlighted above, this Plan does not cover the Gulf countries.

### Beneficiary Population

	<i>Current Population 31 August 2015</i>	<i>Planning Population December 2015</i>	<i>Planning Population December 2016</i>
<b><i>Djibouti</i></b>	24,501	27,250	36,300
<b><i>Ethiopia</i></b>	10,602	21,800	48,000
<b><i>Somalia</i></b>	28,887	48,500	111,000
<b><i>Sudan</i></b>	5,177	5,800	6,500
<b><i>TOTAL</i></b>	<b>69,167</b>	<b>103,350</b>	<b>201,800</b>
<b><i>Kingdom of Saudi Arabia &amp; Oman*</i></b>	<b>41,000</b>		

\* For information only and not part of this Plan

<sup>1</sup> The 2016 planning figures and financial requirements are preliminary estimates at this stage, and will be revised and launched towards end of 2015.

## ***Regional Protection and Humanitarian Needs***

The needs of those fleeing as a result of the Yemen crisis are vast. Individuals coming to Djibouti, Ethiopia, Somalia and Sudan arrive after many hours on the move distressed and exhausted after the sea journey and, in some instances, the land crossing, with little or no personal belongings, and in urgent need of food, water, shelter and emergency healthcare. The most pressing response therefore is to address their basic needs and to register and provide documentation to enable access to essential services.

Of the people who have the intention to leave Yemen, some seem to lack the means to reach embarkation points or are hesitant to return home due to precarious socio-economic and security conditions in areas of origin in Somalia. The situation is forcing many of them to embark on hazardous sea journeys. IOM has evacuated those most vulnerable by air and sea.

The coastal guards in Somalia as well as in Djibouti are overwhelmed with the number of arrivals and are in need of further support to augment their capacity to rescue people at sea who often undertake very dangerous journeys. The European Union Naval Force ATALANTA (EU NAVFOR) and IOM are working on enhancing their capacity and provide additional training. The increased movements of migrants at sea requires a new strategy reinforcing training and capacity building, which is being developed with the Combined Maritime Forces (CMF).

All persons fleeing Yemen have access to territory. However, the lack of freedom of movement upon arrival in certain countries and the need for a sponsor to be allowed to enter some countries, are protection concerns. Some refugees and migrants are confined in inappropriate shelters in harbours in the region. UNHCR continues to advocate for freedom of movement and its policy on alternatives to camps.

The reception centres in neighbouring countries, while being upgraded, need to be able to respond to the various core protection activities including provision of psychosocial support. Facilitating links with families is essential and in this regard the work done, for example, by the Red Crescent in Djibouti for family tracing is a critical psychosocial support. It is also essential to address the needs of persons with specific needs and persons facing protection risks such as victims of sexual and gender based violence (SGBV), trafficking, and unaccompanied and separated children.

There are thousands of Yemenis who refuse to register with UNHCR or IOM either fearing the loss of freedom of movement, or being forcibly returned. However, many are faced with the hardship of life in urban centres living in deplorable conditions and leading precarious lives with no adequate dwelling and living on the fringes of society with no documentation, access to basic services such as health, education and employment. Many are not known to UNHCR, exposing them to further risks and vulnerability. There is a need to ensure their protection and assistance needs are met as part of an urban programme to ensure a dignified stay. However, access to beneficiaries is made difficult either because the governments do not want UNHCR to register those in the city, or because of security considerations.

Awareness campaigns need to be conducted to provide information to the Yemenis and migrants of the assistance provided by agencies in order that they make an informed decision and are not misled to take an early flight back to Yemen.

Registration is conducted in several countries, however, the system needs to be streamlined, and further communication and cross-checking of data is required with Yemen and host countries to also be able to detect secondary movements.

While some refugees, returnees and migrants have some family links in the receiving country and can count on the support of relatives, many lack the means to sustain themselves. Provision of livelihoods and employment opportunities to ensure self-sufficiency pending durable solutions is also a key need.

The host communities of the receiving countries also require support as the arrivals from Yemen have put an enormous burden on the existing resources and services, which in most cases are already stretched. Timely support is needed to the new arrivals and the host communities, to mitigate against possible increases in food prices and exploitation of limited resources. The response has been designed to take into consideration the needs of the host communities and to reinforce existing structures and services where possible.

The current movement of refugees, returnees and migrants fleeing Yemen is one of the few instances in history of such movement towards the East and Horn of Africa. Unless protection, assistance and information are provided, a further secondary movement towards the northern countries, including Europe and the GCC cannot be ignored. The secondary movement could be encouraged by smuggling and trafficking networks already established along the North Africa and the Eastern Mediterranean routes. This highlights the urgent need to address the humanitarian crisis in a comprehensive way in order to avert the need for a secondary movement and support the host communities preventing further instability in a fragile region. In other words, addressing the crises in a comprehensive humanitarian manner would have a positive ripple effect.

The regional objectives in relation to the Yemen Situation are:

1. Refugees, migrants and returnees fleeing from Yemen have access to safe, orderly and humane movements enabled through a harmonized, comprehensive and coordinated approach in the region.
2. Affected populations, especially vulnerable populations and those with specific needs and those faced with protection risks, have access to protection and assistance upon arrival, regardless of their migratory status, and enjoy a dignified stay in the country with access to basic services and freedom of movement.
3. Refugees, migrants and returnees have access to durable solutions such as regularization of stay, voluntary return and reintegration, local integration, resettlement for vulnerable individuals with specific protection needs, as well as promoting labour mobility schemes.

4. Strengthen partnerships (at national and regional levels) to address the complexities of mixed migratory flows and promote dialogue and cooperation among source, transit and destination countries as well as support existing coordination mechanisms with regional organizations and initiatives (IGAD, EU, AU, GCC, OIC, Khartoum process, and Sana'a Declaration).

#### Overall strategy

The priority is to ensure that refugees, migrants, and returnees have access to adequate levels of protection and assistance in the receiving countries upon arrival as well as during their travel.

This encompasses ensuring access to territory and asylum; screening to identify persons in need of international protection; documentation; access to basic services; counselling; and referral services. In addition, UNHCR and IOM are collaborating and liaising with the international shipping industry, the International Maritime Organization, the CMF, EU NAVFOR, operational partners and concerned Governments in the region to ensure protection at sea and search-and-rescue at sea, and the provision of timely assistance and disembarkation in safe places for all persons in distress at sea who are fleeing Yemen.

Depending on the arrangements agreed with the host Government, new arrivals will be assisted with essential services including temporary shelter, food, non-food items (NFIs) and healthcare. Concerned organizations will also advocate and support further rights such as access to work and freedom of movement, to maximize their self-reliance pending the identification of solutions. In accordance with UNHCR's policy on alternatives to camps, and the urban refugee policy, advocacy will continue for refugees and migrants to be able to have a choice to settle outside of the confinement of a camp and enjoy freedom of movement, while at the same improving their access to adequate housing and services within camps or settlements.

Organizations in the response will also work to identify solutions including resettlement, humanitarian admissions and alternative legal avenues to protection, resilience, and complementary forms of protection such as allowing legal temporary stay. It is notable, however, that conditions are currently not conducive for return to Yemen, and hence pending the identification of the most suitable durable solution, efforts will be made to promote self-sufficiency of Yemeni arrivals in the receiving countries.

In view of reports of persons going back to Yemen, a comprehensive approach is required to ensure informed and voluntary movements and to deter any forced movements back while conditions are not conducive for return.

### Key challenges in the regional response

The **diversified and complex outflow** from Yemen poses a unique challenge to address the needs of persons fleeing the country. Different nationalities leave Yemen for different reasons (seeking safety, going back to their country of origin, etc.), and it is difficult to capture their numbers and their concerns, posing a challenge in categorising the populations and identifying their different immediate and longer-term needs including durable solutions. It is therefore important to adopt an inclusive approach among actors in order that individuals who do not fit into a specific category are assisted. For example, there is a great number of Yemenis who are of concern but do not want to register as refugees in Djibouti due to the difficult conditions in the Obock camp. In addition, all Somalis coming back to Somalia from Yemen are considered as Somali returnees, regardless of whether they were registered as refugees in Yemen.

The lack of orderly movements, and the **risky journeys** that people take to reach safety is another key characteristic which adds to the complexity of population movements. The EU NAVFOR and the CMF to combat piracy and smuggling are present but there is no proper search/rescue/disembarkation policy in place agreed and adhered to by all stakeholders. There is a need for a strong Protection at Sea strategy for the Gulf of Aden and this is currently being developed under the UNHCR and IOM leadership. Governments in the region also require the necessary operational capacities, which includes standard operating procedures, coordination mechanisms at various levels, risk and trends analysis capacities, mobile capacities, and search and rescue operations.

**Outreach to beneficiaries** presents yet another challenge. Establishing and maintaining contact with the arrivals is difficult given that they are scattered, and not necessarily approaching any agency upon arrival. In Somalia, the security situation in certain areas makes it difficult to have access to returnees coming back to that area, and constrains the delivery of protection and assistance. There is also insufficient information-sharing between agencies calling for the need to improve coordination coupled with better outreach to persons affected by the Yemen crisis.

## **Achievements**

### **1. Access to Safe, orderly and humane movements**

- All migrants and refugees fleeing from Yemen have access to territory with no reported cases of *refoulement*.
- As of 17 September 2015, 2,040 individuals were evacuated on 14 flights to Ethiopia, Somalia and Sudan; 1,915 individuals were evacuated by boat to Djibouti; 1,943 individuals received onward transportation by air to 37 different countries; and onward transportation was provided by land to 16,269 individuals arriving in Somalia, Ethiopia and Djibouti.

## 2. ***Protection and assistance upon arrival***

- The Governments of Djibouti, Ethiopia, Somalia and Sudan have granted prima-facie refugee status to Yemeni asylum seekers.
- Reception and registration centres have been established in all receiving countries and they are being improved and upgraded.
- All registered migrants, refugees and returnees have received some kind of documentation upon arrival.
- Systems and procedures have been put in place to identify and assist persons with specific needs including victims of SGBV and unaccompanied minors.
- 21,980 migrants arriving in Djibouti, Ethiopia, Somalia and Sudan assisted with shelter, water and sanitation, NFIs, food, health assistance, transportation, registration, documentation, and a reinsertion grant.
- More than 6,500 registered refugees and 25,800 Somali returnees have been assisted with essential services including temporary shelter, food, NFIs and healthcare.

## 3. ***Strengthen partnerships, regional coordination, and promote dialogue and cooperation***

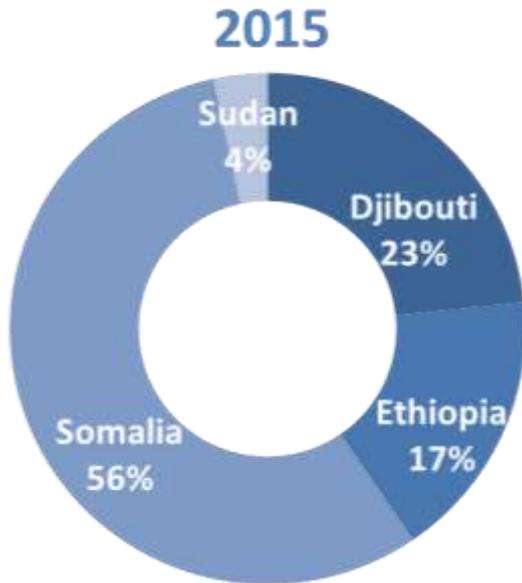
- The co-leadership of UNHCR and IOM was established given the mixed migration flows.
- A number of partners were sensitized on the regional dimension of the Yemen crisis and the need for regional coordination and harmonized approaches facilitated by the set-up of the Regional Refugee Coordination Unit.
- Donors, media and other external partners have been kept informed of the Yemen Situation through weekly operational updates.



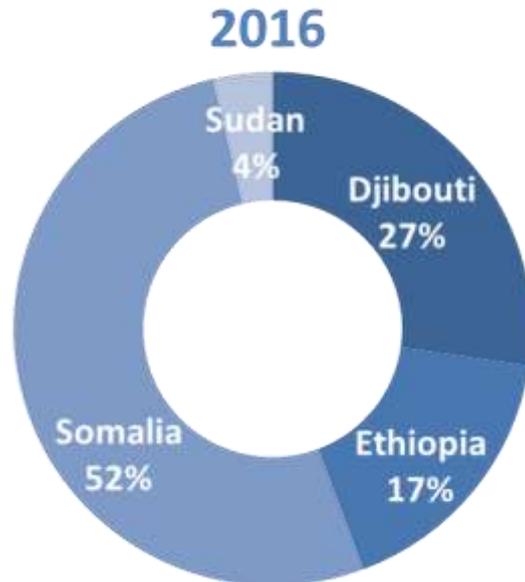
People fleeing war in Yemen arrive in Obock, Djibouti May 2015. © UNHCR / M. Sowinetz

## Budgetary Requirements

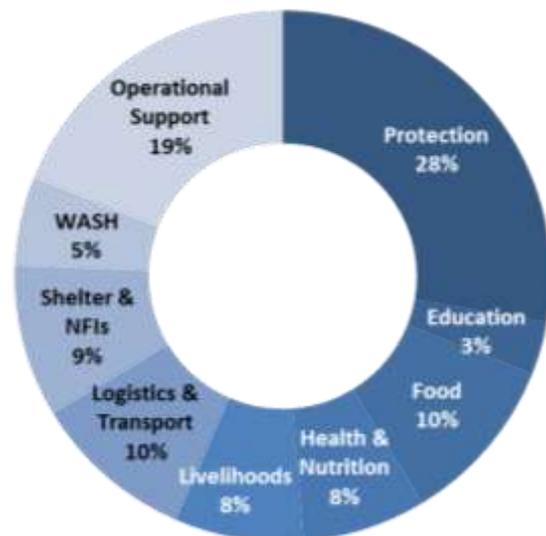
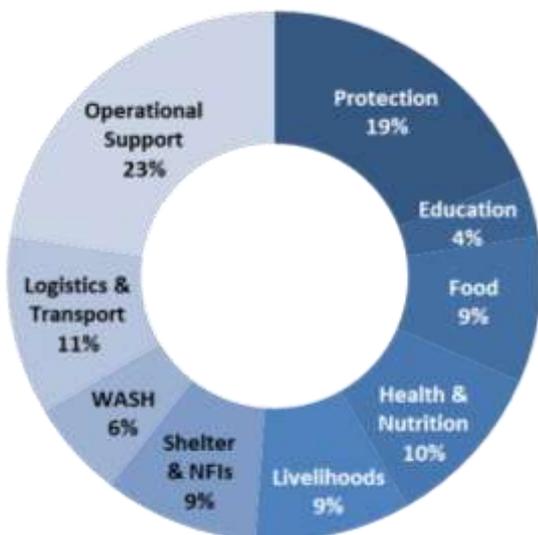
**US\$ 36,412,375** (Oct-Dec 2015)



**US\$ 119,528,602** (Jan-Dec 2016)



## Sector breakdown of requirements



## ***Coordination***

Further to the declaration on 1 July 2015 of a Level 3 humanitarian emergency in Yemen for six months by the Inter-Agency Standing Committee (IASC), the United Nations High Commissioner for Refugees subsequently declared the Yemen Situation an internal Level 3 emergency as per UNHCR's Policy on Emergency Response Activation, Leadership and Accountabilities, and designated a UNHCR Regional Refugee Coordinator (RRC) for the Yemen Situation. IOM declared an internal Level 3 emergency in May 2015 appointing a Migration Emergency Coordinator and activated surge staff and the Migration Emergency Funding Mechanism.

Based on the Refugee Coordination Model, the RRC assumes inter-agency strategic coordination, ensuring a common understanding of the protection and assistance needs; sets priorities; harmonizes standards and the response; and identifies challenges and monitors the timely and effective delivery of assistance. The RRC will also enhance communication to increase visibility of the humanitarian and protection needs in the receiving countries of the Yemen Situation. The RRC is based in Djibouti, and will ensure coherent and coordinated support on the ground for UNHCR's response to the overall regional dimensions of the crisis. The RRC will liaise closely with IOM, and with other humanitarian agencies and the Regional Humanitarian Coordinator for the Yemen crisis to strengthen UNHCR's leadership and coordination role for the refugee response and maximize collaboration and synergies with other regional-level partners including the Regional Mixed Migration Secretariat based in Nairobi, and the Inter-Governmental Authority on Development (IGAD). UNHCR and IOM will work closely with the Humanitarian Coordinator based in Yemen and other key regional stakeholders notably in the Gulf region, in order to ensure a coordinated response to the persons fleeing Yemen to the Horn of Africa.

Since taking up her position in July, the RRC held meetings with key regional institutions involved in migration matters to gain a better understanding of their respective mandates, to seek entry points – if any – to enhance protection of refugees and returnees, and to raise awareness of the dangerous trip for migrants who continue to go to Yemen, as well as seek views on setting up a regional coordination mechanism for the Yemen Situation.

On 18 and 19 August, UNHCR and IOM convened an inter-agency workshop to discuss the planning scenarios and set the planning parameters for the RRM RP. This platform will serve as the start of an ongoing process of increased coordination between UNHCR and IOM and other concerned agencies. The two organizations will continue to explore the best regional coordination mechanism to address the protection and assistance needs of the Yemeni outflow. While coordination at the national level is improving, some challenges remain integrating into existing coordination mechanisms within the country while respecting the mandate of organizations.

Coordination mechanisms at country level are elaborated in each country chapter.

## ***Organizations in the Response***

<b>Organization</b>	<b>Total Oct-Dec 2015</b>	<b>Total Jan-Dec 2016</b>
Danish Refugee Council (DRC)	1,230,460	5,839,000
International Organization for Migration (IOM)	7,750,732	34,345,099
International Rescue Committee (IRC)	892,336	-
Norwegian Refugee Council (NRC)	660,420	3,982,000
Save the Children International (SCI)	489,796	1,736,776
United Nations Children's Fund (UNICEF)	4,357,450	2,635,063
United Nations High Commissioner for Refugees (UNHCR)	16,776,595	58,401,224
United Nations Population Fund (UNFPA)	1,605,000	1,950,000
World Food Programme (WFP)	2,202,116	8,849,560
World Health Organization (WHO)	447,470	1,789,880
<b>Total</b>	<b>36,412,375</b>	<b>119,528,602</b>

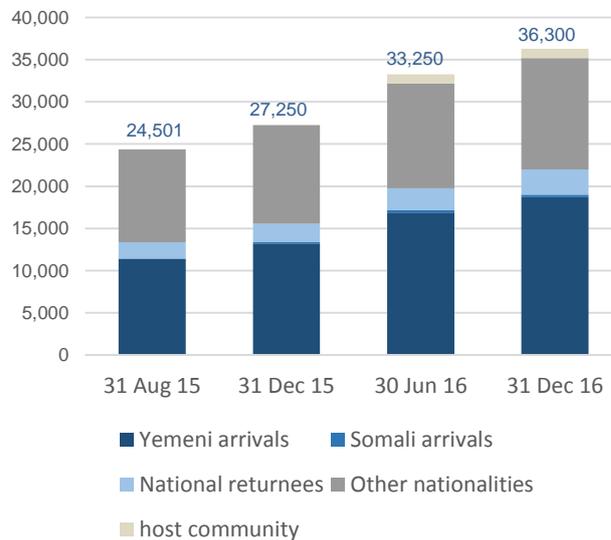
*While 10 agencies are part of this appeal, there are 48 partners who are contributing to provide protection and assistance to the refugees, migrants, and returnees fleeing from Yemen to Djibouti, Ethiopia, Somalia, and Sudan*

# DJIBOUTI RESPONSE PLAN



As of 31 august 2015

## Population Trends



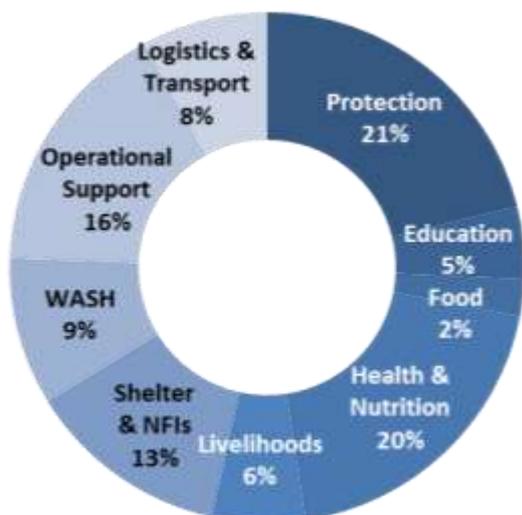
### Key challenges

- Need for a suitable site to host Yemeni refugees
- Limited freedom of movement
- Protection and assistance in urban areas

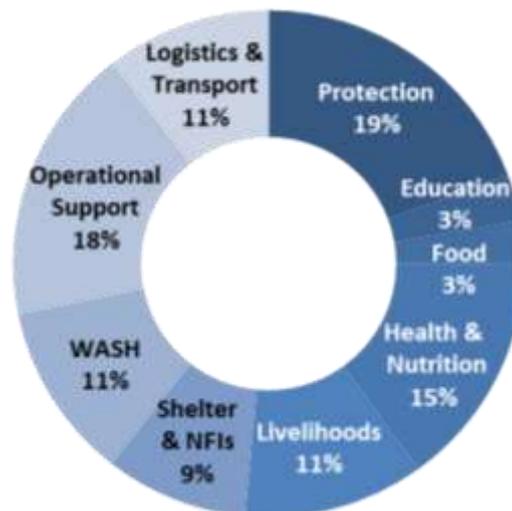


### Financial Requirements

**US\$ 8,336,690** (Oct-Dec 2015)



**US\$ 32,220,335** (Jan-Dec 2016)



## ***Background and Achievements***

Despite its limited resources, Djibouti has for decades been host to refugees from neighbouring countries, who have fled war and political conflict in the Horn of Africa.

Since the outbreak of the Yemeni crisis at the end of March 2015, a total of 2,768 Yemeni and Somali refugees have been registered by UNHCR and the *Office National d'Assistance aux Réfugiés et Sinistrés* (ONARS), the Government body responsible for refugees. Djibouti was already host to 18,234 refugees and asylum seekers mainly from Somalia, out of whom 12,666 are hosted in two camps (10,611 Ali-Addeh and 2,055 Holl Holl) and 2,800 are living in urban areas.

The new influx has placed additional strain on the country, which experiences poverty and lack of development. Despite some economic growth and the numerous investment projects currently under way across the country, more than 23 per cent of the population lives in extreme poverty and there is a national unemployment rate of 48 per cent, which reaches up to 60 per cent in some regions. Djibouti has no permanent source of fresh surface water, less than 0.05 per cent of arable land and non-mechanized agriculture. The long-lasting drought that persists since 2008 has led to an increased vulnerability of the population. Newly arrived migrants and refugees have placed an enormous burden on already overstretched social services, natural resources and economic assets.

The Government has allocated Markazi site, which is four kilometres from Obock, to establish a refugee camp. Nevertheless, the strong winds from May to July, which are characteristic of the region, forced some refugees to leave the camp. The presence of partners in Markazi is limited. The government restricts refugee movements in the country, and refugees must register and stay in Obock rather than Djibouti-city.

The Government of Djibouti, supported by local and international humanitarian actors, has also facilitated the return of Djiboutian citizens, and has provided access to territory for stranded migrants. Furthermore, the conflict has triggered the return of many vulnerable undocumented Ethiopian migrants in Yemen, who were transiting through the country in order to reach the Gulf countries. Similarly, numerous Ethiopian migrants who had reached Djibouti, and Obock in particular, on their way to Yemen across the Gulf of Aden and the Red Sea found themselves stranded in Djibouti.

### **Achievements**

#### **Protection**

- Daily protection monitoring was carried out at the point of entry to ensure access to the territory.
- One reception centre was established in Obock.
- A total of 2,768 refugees were registered on an individual basis, including four new-borns, and received protection documentation, and 2,574 undocumented migrants were documented.

- Some 3,742 migrants from/to Yemen of 29 nationalities were assisted with documentation, transportation and access to other basic services.
- Vulnerable migrants and refugees (separated and unaccompanied children, survivors of violence, abuse and exploitation, as well as persons with specific needs) were identified and provided with adequate support. A child protection rapid assessment was conducted, providing critical information to guide the child protection response and five Best Interest Assessments were conducted for separated and unaccompanied children. A child protection committee established to help monitor and report protection concerns.
- Ten emergency boat evacuations from Yemen saved the lives of 1,915 persons.
- A two-day workshop was organized on Mixed-Migration to all concerned national officers.
- Some 600 local youth and young refugees participated in activities on sexual and reproductive health in celebration of International Youth Day and 80 young boys and girls were trained on sexual and reproductive health.

#### **Food**

- A total of 2,352 migrants were assisted with food and cooked meals at the Migrant Response Centre (MRC). Hot meals were distributed to 2,768 refugees on arrival by UNHCR and ONARS and 650 refugees in the camp received 3 hot meals per day during 3 months by the Al Rahma Association.
- At least 845 refugees received dry rations after registration and High Energy Biscuits were provided to vulnerable new comers on arrival.

#### **Health/Nutrition**

- Some 1,948 migrants in transit from Yemen and 2,768 refugees were provided with primary healthcare.
- The Centre Medical Hospitalier (CMH) in Obock and Dar El Hanan Maternity in Djibouti-city were supplied with essential drugs against childhood and motherhood diseases.
- Sixty health providers and social workers were trained on the Minimum Initial Service Package (MISP) regarding reproductive health and SGBV services in an emergency situation. One hundred migrant SGBV survivors were supported with care and assistance.
- Ten medical staff of CMH Obock were trained on Reproductive Health Commodity Security.
- Some 339 children under 15 years of age were immunized for all antigens (including polio and measles).
- Nutrition screenings were conducted for all under-five refugee children, pregnant women and lactating mothers upon arrival, including 8 nutrition screenings in Markazi camp.
- The screenings identified 38 cases of moderate acute malnutrition, 15 cases of severe acute malnutrition and 102 cases at risk of acute malnutrition among under-five children, pregnant and lactating women both at Markazi refugee camp and in Obock, and were referred for care and treatment.

- Almost 95 per cent of severely acute malnourished under-five children, pregnant, lactating women and people living with chronic diseases have been admitted and treated in Obock Regional hospital or Djibouti hospitals (upon referral) with quality indicators in line with SPHERE standards.

#### **Non-Food Items**

- Some 2,352 migrants and 2,768 refugees have been provided with NFIs including kitchen sets, soaps, hygienic kits (for women of reproductive age), mats, jerry cans, solar chargers, and tents.

#### **Shelter and infrastructure**

- One refugee camp was established and provided with electricity by Al Rahma Association.
- Some 2,446 migrants and 2,768 refugees were provided with emergency shelter in Markazi camp.
- The shelter capacity of the Migrant Response Centre (MRC) was tripled.
- At least 325 emergency shelters, 136 tents (provided by the Bahrain Royal Charity), two resting areas and two hangars were installed for refugees in Markazi camp.

#### **Water, Sanitation and Hygiene**

- Up to 2,352 migrants were provided with access to WASH services and 2,768 refugees received water and sanitation kits.
- Three emergency public water systems of 15,000 litres each were installed in the Markazi camp, and 107 latrines and ten community kitchens were constructed.
- Some 1,486 women and girls of reproductive age were provided with hygiene kits.
- Almost 80 per cent of vulnerable refugees and host community people were sensitized on basic hygienic practices, solid waste management and water quality.
- Potable water was provided on a daily basis at the port of Djibouti.

#### **Education**

- A Memorandum of Understanding (MoU) and joint plan of action (UNHCR, UNICEF, UNESCO, LWF, Al Rahma Association) was developed to ensure Yemeni refugee children's access to educational services. As per the joint plan of action, 60 refugee children benefited from a six-week programme of basic literacy and recreational activities, 100 refugee children benefited from a four-week programme of catch-up classes, and 8 teachers were recruited.
- One emergency education assessment was conducted.

#### **Transport/Logistics**

- Some 2,868 migrants were assisted with emergency transportation to their country of origin/destination and 2,768 refugees were assisted with emergency transportation.

## ***Humanitarian Needs and Vulnerabilities***

As the conflict continues in Yemen, Djibouti expects more than 27,000 arrivals, including some 13,000 Yemenis, by the end of 2015, and a further 36,000 people, including 19,000 Yemenis, by the end of 2016 should the situation continue to deteriorate. As the conflict spreads, it is expected that arrivals will occur on a regular basis in the form of small groups rather than mass arrivals. The above figures take into account the fact that Djibouti will continue to play the role of both transit country for migrants and host country for refugees.

Djibouti suffers from extremely limited resources and the presence of refugees and migrants places an added strain, forcing them to depend solely on humanitarian aid. As such, there is a risk that some refugees will resort to negative coping mechanisms unless adequate levels of response are assured. The strain in terms of resources, and on already limited services, could also be a source of tension with the host community. Additionally, access to farmland and drinking water remain important challenges.

Government policy does not allow out-of-camp assistance. Despite this, a mere 2,768 Yemeni refugees have been registered by the end of August out of some 12,000 who have arrived in Djibouti. This is due to an unwillingness to go to Markazi camp because of the harsh living conditions there. The government policy could result in people resorting to negative coping mechanisms that could further increase the risk of child violence and abuse, and sexual and gender-based violence (SGBV). The Child Protection Rapid Assessment revealed a high level of distress among children (sleeping problems, constant crying, increasingly aggressive behaviour and refusal to interact with peers) and parents (lack of coping mechanisms). There is a high level of stress among young men and girls at risk of sexual assault due to the distance required to walk to the latrines and limited light in Markazi camp. Furthermore, water exhibits high salinity rates and potable water is in short supply; the medical centre in Obock has no surgeon and has only recently recruited a midwife; and many tents were destroyed as a result of the difficult climate. Finally, there are very few opportunities for livelihood projects for refugees due to the high poverty and unemployment rates of the local population.

Conservative estimates indicate that some 12,000 migrants will need emergency humanitarian assistance<sup>2</sup> by the end of 2015. This figure includes persons with medical conditions requiring immediate health assistance upon arrival, such as war-wounded persons who need specific medical aid including psychological support. The figure also demonstrates a need for additional protection services at the MRC in Obock, notably to counsel migrants and victims of trafficking on regular migration options and to give them access to legal recourse. In addition, while some Djiboutian returnees can count on the support of their families, those who had remained in Yemen for a prolonged period might have lost their ties with Djibouti and have arrived with no means to sustain themselves and their households. These vulnerable individuals, estimated to be 300 persons, will need emergency assistance.

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<sup>2</sup> Figures that should be updated later this year based on the developments in Yemen. In a worst-case scenario, the number could reach up to 20,000.

Despite the war in Yemen, migrants continue to arrive in Djibouti from Ethiopia in the hope of reaching the Gulf countries. Therefore, it is necessary to sensitize migrants as to the risks of continuing on their journey. Urgent support to build the capacity of law enforcement authorities, national police and immigration services is necessary to support their interventions related to the protection of, and provision of emergency assistance to, migrants. The drastic increase in the number of movements of vessels in the Gulf of Aden calls for strong support to step up emergency response capacities in case of marine accidents.

## ***Response Strategy and Priorities***

Priority interventions for refugees, migrants and returnees are grouped into the following objectives:

- **Ensure freedom of movement, security and protection:** Advocacy efforts will continue with the Government of Djibouti for freedom of movement. Training will be given to national public forces (police, gendarmerie, coastguards and military bodies), regarding the rights of refugees and migrants. Similarly, advocacy will continue for registration and assistance to refugees to be extended to urban areas. Separated and unaccompanied children will continue to be identified and family tracing will also be conducted. Special focus will be put on child violence and SGBV cases with protection, medical and psychosocial support. Capacities of law enforcement authorities, national police and immigration services will be developed through targeted training, provision of life-saving equipment and the development of an operational national action plan for marine safety and rescue. *(Regional Objective 1, 2, 4)*
- **Improve access to justice:** In order to track irregular migration fluxes, a user-friendly information communication technology (ICT)-based tracking system will be developed. With the aim of reducing irregular migration to Yemen, awareness raising campaigns will be organized on the risks related to irregular migration, smuggling and trafficking. *(Regional Objective 1)*
- **Enhance access to basic services, medical and psychosocial assistance:** Healthcare services and referral mechanisms will be reinforced. In order to respond rapidly to the significant increase in demand for specialized health emergency services, a psycho-medical, neurological and emergency surgery unit will be established at the MRC in Obock. Reproductive health services need to be further supported in particular in responding to and preventing HIV/AIDS. Malnutrition screening will continue on a regular basis for children under 5 years old, and for pregnant or lactating women, and the necessary corrective nutrition interventions made, including supplementary feeding programmes. There is also a need to put in place measures to ensure continued access to quality potable water, adequate sanitation and appropriate hygiene practices to prevent malnutrition and medical issues. Community-based child protection mechanisms will be strengthened and psychosocial support will be provided to children and caregivers in order to help them cope with trauma and stress. Special focus will be put on child violence and SGBV cases with protection, medical and psychosocial support. Access to education will be guaranteed to children in Markazi camp and to the most vulnerable Yemeni children in urban areas. Access to primary healthcare and reference system will be guaranteed. *(Regional Objective 2)*

- **Enable access to livelihoods opportunities:** While some Djiboutian returnees can count on the support of their families, those who had lived in Yemen for a prolonged period might have lost their ties with Djibouti and have arrived with limited or no means to sustain themselves and their households. To support vulnerable Djiboutian returnees, host community youth and Yemeni refugees, a livelihood programme will be implemented. Asset creation projects are also being implemented in the Obock region. They will be further developed, mostly in the area of water management, in order to increase access to potable water or create conditions for small-scale agriculture initiatives. To help migrants overcome psycho-trauma related to the war in Yemen while simultaneously reducing the environmental impact of migration influx for the benefit of the host community, a plant nursery will be established at the Migrant Response Centre in Obock. *(Regional Objective 2 & 3)*
- **Reinforce assistance to migrants in transit and asylum seekers:** Increase availability of protection services at the MRC in Obock to wounded migrants, minors (including unaccompanied minors), women, girls, victims of sexual violence and victims of trafficking. Protection services at the MRC include: safety, security, shelter, food, drinking water and clothing, medical assistance, emergency medical treatment, referral mechanisms, HIV voluntary testing, family tracing, counselling on risks of being an irregular migrant, assistance to voluntary return, legal assistance, and documentation assistance with relevant diplomatic missions. The intended impact is to ensure that basic protection needs and services are provided to migrants upon arrival. Onward transportation to country of origin/destination will be ensured. Continued advocacy with the Government of Djibouti in order to lift the policy preventing out-of-camp assistance will be maintained in order to target unregistered Yemenis living in urban areas. *(Regional Objective 2)*



Yemeni refugees at the water facility in Markazi camp, Djibouti/UNHCR May 2015.

## ***Partnership and Coordination***

The Government of Djibouti and UNHCR will lead the coordination of the refugee response. The coordination efforts are mainstreamed through the existing sectorial approach to ensure a more efficient use of resources. Also, it aims to ensure that cross-cutting issues such as protection, gender, youth and adolescents, and the environment are taken into consideration by all actors.

Sector experts will provide technical leadership, signal gaps in assistance and ensure that these gaps are addressed. In addition, refugees of different ages and backgrounds will be involved in all the phases of the programme cycle, including a participatory needs assessment during the review of the emergency plan in order to ensure relevance and avoid aid duplication and gaps.

The emergency response for migrants in transit, stranded migrants and Djiboutian returnees is coordinated by IOM in partnership with the Government of Djibouti, the Ministry of Interior, all relevant central and local authorities and concerned diplomatic missions.

The multi-sector response is supported and coordinated with FAO, UNDP, UNICEF, UNFPA, WFP, WHO, UNAIDS, UNESCO, OHCHR, UNODC and their partners. These UN agencies work with experienced local and international partners, such as Action Contre la Faim (ACF), African Humanitarian Action (AHA), Danish Refugee Council (DRC), Lutheran World Federation (LWF), Norwegian Refugee Council (NRC), Al Rahma, Croissant Rouge de Djibouti (CRD), The Johanniter International Assistance and Union Nationale des Femmes Djiboutiennes (UNFD).

In addition to the projects implemented through agreements with the UN, three INGOs (DRC, NRC and LWF) seek additional funding for their projects in support of refugees and host communities.

The inter-agency plan is also coordinated with the International Federation of Red Cross (IFRC) as well as with the International Committee for the Red Cross (ICRC) which have their own programmes, while sharing information according to their institutional parameters and participating in the sector working groups as observers.

## ***Planned Response***

<b>SECTORS</b>	<b>OUTPUTS</b>	<b>INDICATORS</b>	<b>2015</b>	<b>2016</b>
<b>Protection</b>	Vulnerable migrants and refugees (separated and unaccompanied children, survivors of violence, abuse and exploitation as well as people with specific needs), identified, and provided adequate support	% of vulnerable migrants and refugees who received appropriate protection services	100%	100%
	Refugees on arrival and new-borns registered and provided with documents	% of refugees and new-borns registered with documents	100%	100%
	National capacities for ensuring marine safety is reinforced	Action plan for marine safety available	1	1

	Migrants for voluntary return programme assisted	% of persons assisted in voluntary return	100%	100%
	Government officials trained on refugee and migrant protection	# of government officials trained	150	300
	Temporary or semi-permanent structures for emergency caseloads and appropriate support for rehabilitation or expansion of existing infrastructure provided	# of structures set up and infrastructure rehabilitated	1	2
<b>Education</b>	Education in Emergency, including psychosocial programming and teacher training provided	# of children enrolled and teachers trained	925	1,623
	Appropriate pedagogical, learning and recreational materials provided	# of teachers and students who receive appropriate materials	8	23
	Accelerated French language courses across caseloads provided	# of children enrolled in accelerated French courses	617	1,200
	Child Friendly Space infrastructure established and personnel to support alternative learning opportunities for Refugees and Migrants engaged	# of infrastructure established and children enrolled	1	1
	Energy-saving stoves distributed	# of households with energy-saving stoves	248	600
<b>Environment and Livelihoods</b>	Agricultural inputs and material (seeds, fertilizers, tools, small livestock, etc.) distributed	# of households assisted with seeds and livestock activities	80	120
	Food-vouchers and micro-business start-ups for Djiboutian returnees provided	# of Djiboutian returnees assisted with food-vouchers and micro-businesses	525	2,100
	Braiding and fishing activities supported	# of households with braiding and fishing activities	125	300
	Vocational training and technical skills provided	# of persons trained on livelihoods activities	248	600

SECTORS	OUTPUTS	INDICATORS	2015	2016
<b>Food</b>	Food assistance provided to refugees	% of refugees receive timely monthly food assistance of 2,100 kcal or cash equivalent	100%	100%
	Immediate response rations (high energy biscuits) available at point of entry	% of vulnerable newcomers receive a 5 day HEB ration on arrival	100%	100%
	Maximum of 250 migrants per month during 15 months provided with food assistance at the MRC in Obock	% of migrants receive 2 meals a day	100%	100%
	Capacity of supplementary feeding programmes for malnourished children and Pregnant and Lactating Women (PLW) increased	% of identified MAM under-5 children and PLW receive supplementary feeding	100%	100%
<b>Health and Nutrition</b>	Quality care treatment to under-5 children, pregnant women and lactating mothers suffering from acute malnutrition provided	% of under-5 children, pregnant and lactating women, and people living with chronic diseases suffering from acute malnutrition admitted to CMAM programme	95%	95%
	Clinic for primary healthcare; referral mechanism set-up, medical equipment and supplies to health posts in host community distributed	# of people with access to primary healthcare services	1,242	3,000
	Health and nutritional condition of refugees upon arrival and through home visits and mobile teams monitored	# of health and nutrition screenings conducted	3	12
	Preventive and curative care on maternal and child health, non-communicable and communicable diseases including malaria prevention, and mother-to-child transmission of HIV provided	% of Persons of Concern who have access to comprehensive reproductive health services	100%	100%
	Multi-sectoral gender-based violence coordination mechanism/working group established and expanded at the national, regional and local levels	% of incidents on SGBV reported and assisted	100%	100%

SECTORS	OUTPUTS	INDICATORS	2015	2016
<b>Logistics and Transport</b>	NFIs distributed to refugees	# of households where NFIs were distributed	248	600
	Transport capacity by buying/renting vehicle enhanced	# of vehicles rented	2	5
	Logistics capacity of partners in term of storage and transport of NFIs boosted	% of metric tons of goods transported	100%	100%
	Emergency onwards travel assistance provided to stranded and transiting migrants	# of migrants transported to their respective countries of origin/destination	1,050	4,200
<b>Non-Food Items (NFI)</b>	Standard non-food item kits distributed to refugees	# of refugee households where NFIs were distributed	248	600
	Standard non-food item kits distributed to migrants in transit	# of migrants distributed with NFIs	282	1,128
	Implementation of the distribution against set timeline and quality standard monitored	# of monitoring conducted	1	4
	Kitchen sets distributed to refugees	# of households where kitchen sets were distributed	248	600
<b>Shelter and Infrastructure</b>	Refugee camp is maintained according to standards maintained	The site plan is being adhered to contingency planning, expansion zone	100%	100%
	Emergency shelters for refugees set up	All shelter solutions meet agreed technical and performance standards and are culturally accepted	100%	100%
	Hotel accommodation for migrants in transit, upgraded MRC capacity to host more people	# of migrants in transit accommodated	1,410	5,640
	Family tents to vulnerable families distributed	% of vulnerable families distributed with tents	100%	100%

SECTORS	OUTPUTS	INDICATORS	2015	2016
<b>Water, Sanitation and Hygiene (WASH)</b>	Water systems in the camp improved and maintained	Average number of litres of potable water available per person per day	30	30
	Gender-sensitive showers and latrines according to SPHERE standards constructed	# of functional showers/latrines constructed according SPHERE standards	265	500
	Hygiene kits to most vulnerable women and girls of reproductive age procured and distributed	% of women and girls of reproductive age distributed with hygiene kits	100%	100%
	Water quality testing and monitoring conducted	% of tests realized	100%	100%
	Garbage pits built	# of garbage pits built	2	6
	Hygiene promotion activities and distribution of hygiene kits to families conducted	# of refugees benefiting from hygiene promotion activities and kit distributions	3,080	4,000

## ***Financial Requirements Summary – DJIBOUTI***

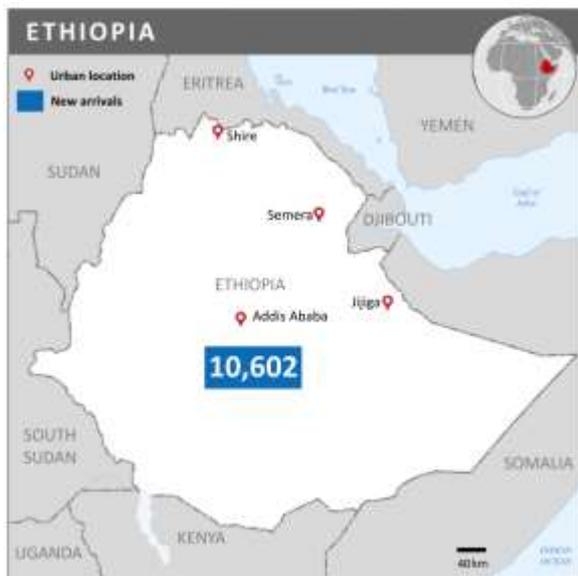
### **Financial requirements by agency (in US dollars)**

<b>Organization</b>	<b>Total Oct-Dec 2015</b>	<b>Total Jan-Dec 2016</b>
DRC	244,500	2,403,000
IOM	2,073,656	11,904,646
NRC	97,500	617,000
UNHCR	4,280,000	12,831,465
UNICEF	709,560	1,939,680
UNFPA	805,000	1,950,000
WFP	126,474	574,544
<b>Total</b>	<b>8,336,690</b>	<b>32,220,335</b>

### **Financial requirements by sector (in US dollars)**

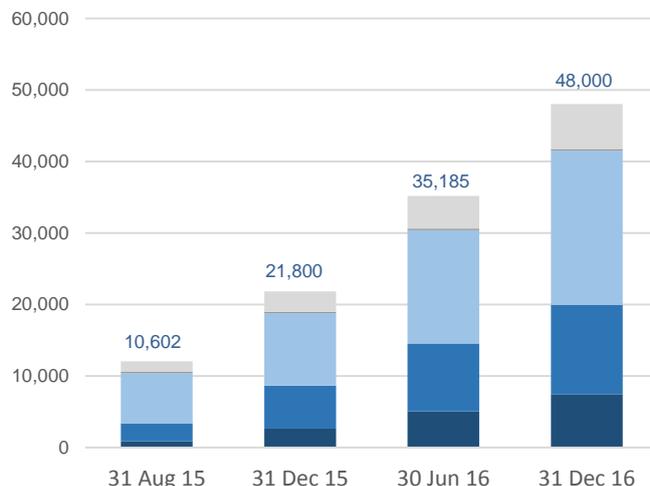
<b>Sector</b>	<b>Total Oct-Dec 2015</b>	<b>Total Jan-Dec 2016</b>
Protection	1,762,670	6,212,330
Education	380,000	970,000
Food	197,874	860,144
Health and Nutrition	1,631,700	4,863,800
Livelihoods	485,680	3,680,720
Logistics and Transport	658,080	3,375,610
Shelter and NFIs	1,064,200	2,916,800
WASH	779,990	3,630,960
Operational Support	595,460	5,709,971
<b>Total</b>	<b>8,336,690</b>	<b>32,220,335</b>

# ETHIOPIA RESPONSE PLAN



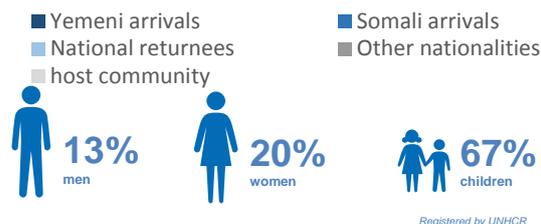
As of 31 August 2015

## Population Trends



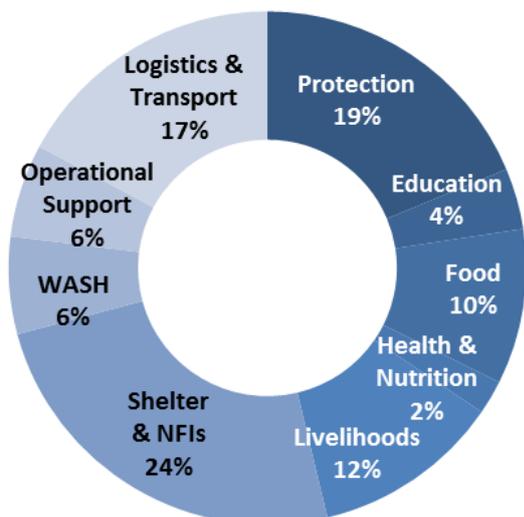
### Key challenges

- No work permit for refugees
- Countering information from smugglers and traffickers
- Reintegration; and psycho-social assistance to VoTs/most vulnerable migrants

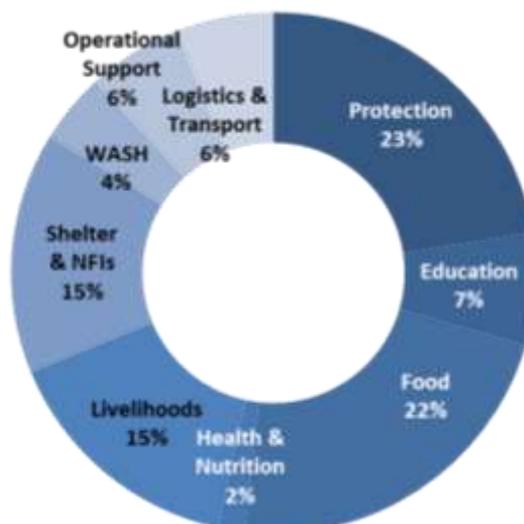


### Financial Requirements

US\$ 6,111,790 (Oct-Dec 2015)



US\$ 20,051,000 (Jan-Dec 2016)



## ***Background and Achievements***

Since the outbreak of the conflict in Yemen, Ethiopia has been receiving Yemeni asylum-seekers. Somalis, Eritreans and Iraqis previously registered as refugees in Yemen are also arriving in the Eastern and Northern regions of Ethiopia, after crossing the borders of Djibouti and Somalia. The country's open-door policy, geographical proximity and close ties to Yemen, make Ethiopia a destination country for those fleeing the conflict and seeking international protection.

From 26 March to 1 September 2015, Ethiopia received a total of 3,416 refugees, out of which 868 individuals are Yemenis, 2,500 individuals are Somalis, four individuals are Eritreans and five individuals are Iraqis, all coming from Yemen. As of 1 September, 1,699 refugees were already registered by UNHCR and the Government Administration for Refugees and Returnees Affairs (ARRA).

In keeping with Government policy, Yemeni and Iraqi refugees are assisted under the urban programme in Addis Ababa. As of 1 September, 877 out of the 1,699 registered new arrivals have been assisted. Upon arrival in Addis Ababa, Yemeni asylum-seekers are registered and provided with ID cards. The main entry point of Yemeni asylum-seekers in Ethiopia is Addis Ababa International Airport. However, since June, 57 Yemeni asylum-seekers were reported to have arrived in Jijiga (Eastern region) after crossing the border into Ethiopia from Somalia. According to the Government's policy, this group will be transferred to Addis Ababa for registration and assistance under the urban programme.

Around 2,500 Somalis previously registered as refugees in Yemen were also identified in a registration exercise in Jijiga. They fled by boat and later travelled from Djibouti or Somalia to Ethiopia by land in search of international protection. The majority of them reported having family ties in Jijiga as the main reason for moving to Ethiopia. Finally, four Eritrean refugees with family ties in Ethiopia were reported to have arrived in the northern region after leaving Yemen by boat and crossing the border through Djibouti. As per Government policy, assistance is being provided in the refugee camps in these locations until further reallocation of Somalis to Dollo Ado camps.

In addition, the Government of Ethiopia has requested for emergency evacuation and post-arrival assistance to Ethiopian migrants stranded in Yemen. Many of these Ethiopian migrants have already experienced a hazardous journey to reach Yemen with the intention to find employment opportunities in the Kingdom of Saudi Arabia. Many survived various forms of mistreatment including torture, exploitation, and physical and sexual abuse. Others are stranded in Yemen without resources or documentation as their employers abandoned them when the conflict started. This group of migrants, in addition to trauma experienced from the conflict, require immediate assistance.

So far, 7,030<sup>[1]</sup> Ethiopian migrants (4,092 males and 2,938 females; 1,078 children) have evacuated from Yemen, including 4,664 most vulnerable migrant returnees who received post-arrival assistance. Of the number of people evacuated, the Government of Ethiopia arranged the emergency evacuation for 3,275 persons using land transportation from Sanaa to Jizan and then air

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<sup>[1]</sup> As of August 31, 2015

transportation from Jizan to Addis Ababa. In addition to migrants from Ethiopia, a total of 157 migrants from other countries arrived on 19 April and transited through Addis Ababa.

Despite the ongoing conflict, there are still reports indicating a continued flow into Djibouti of migrants from Ethiopia in an attempt to cross the Red Sea to Yemen and on to the Kingdom of Saudi Arabia. Some Ethiopian returnees reported that smugglers and traffickers share false information that Yemen has ample work opportunities for reconstruction of the country, which encourages Ethiopians to risk their lives to reach Yemen and the Kingdom of Saudi Arabia.

## **Achievements**

- Successful advocacy has resulted in the Government of Ethiopia granting prima facie refugee status to Yemeni asylum-seekers. The registered Eritrean and Somali refugees have already been granted prima facie refugee status in Ethiopia, irrespective of their refugee status in Yemen.
- Due to reservations made by the Government to the 1951 Refugee Convention, refugees are not allowed to work in Ethiopia. Thus, under the urban programme, all refugees, regardless of their nationality, are provided with a monthly stipend to contribute towards their housing, food and other basic needs, including education and primary healthcare. By the end of August 2015, 868 Yemeni registered refugees received cash assistance and were provided with health services. In accordance with the health strategy, urban refugees should have access to health facilities as Ethiopian nationals. Refugees can access primary healthcare in government health facilities and are also supported by UNHCR to access secondary and tertiary healthcare in selected government facilities or, if need be, in private health facilities.
- Newly arrived Somalis and Yemeni refugees in Jijiga are temporarily assisted in a make-shift camp and provided with food rations, while they await transportation to Dollo Ado camps and Addis Ababa respectively.
- Ethiopian returnees received the following assistance as of 20 August 2015:
  - Airport reception and transportation to bus station or the IOM-managed transit centre in Addis Ababa.
  - Transportation assistance from border crossing points with Djibouti and Puntland/Somaliland to Addis Ababa or Jijiga.
  - Some 243 Ethiopian returnees received emergency medical care, including referral to hospital for specialized treatment.
  - A total of 3,954 Ethiopian returnees were accommodated at the transit centre, where they also had access to food. Basic items, such as shoes and soap were also distributed.
  - All 3,954 Ethiopian returnees received an allowance for onward transportation to areas of origin.
  - At least 150 unaccompanied minors benefited from a family tracing and reunification programme carried out in collaboration with the Ministry of Women, Children and

Youth Affairs (MoWCYA). Social workers conduct an in-depth assessment of the child and his/her family before making a decision to reunify with the family. Ethiopian returnee children were provided with a grant when reunified with their families, as well as supplies, including clothing and sanitary materials. MoWCYA notifies its respective regional Bureaux (BOWCYA) to follow up on the reintegration of the children so to ensure they are not subject to secondary migration and trafficking. BOWCYAs also provide family support to facilitate family reintegration.

- Ethiopian returnee children received psychosocial support during their short-term stay in the transit centre.

## ***Humanitarian Needs and Vulnerabilities***

So far, Yemeni asylum-seekers coming to Ethiopia have a fairly similar profile. Most were either born or had lived in Ethiopia for many years prior to returning to Yemen. Due to their close ties to Ethiopia, many were able to flee Yemen before the air space was closed, while others were already in Addis Ababa visiting relatives. Recent arrivals reported having reached Ethiopia by plane from Saudi Arabia or Sudan; or by sea towards Djibouti or Somalia and then by plane to Addis Ababa or by land to Jijiga. Amongst the total new arrivals of Yemeni nationality, 41 per cent are children and 56 per cent are female, out of which, 253 women (more than half of the female Yemeni arrivals) are either single or heads of household.

Somali, Eritrean and Iraqi nationals arriving in Somalia or Djibouti reported having family ties in Ethiopia as one of the main reasons for coming. The security situation, limited assistance in transit countries and the low cost of living were also reported as a pull factors for moving towards Ethiopia. Amongst the total of the registered arrivals of other nationalities, 56 per cent are female and 94 per cent are children.

Given their family ties in Ethiopia and the security situation in Somalia, asylum-seekers of Yemeni and Somali nationalities are expected to continue to arrive in Ethiopia.

In the most likely short-term scenario, conflict will be prolonged; there will be an increase in the number of IDPs and a continuous limited outflow of civilians. An increase of Yemeni new arrivals is expected. Reopening of the airspace and the Saudi Arabia's special visa arrangements for Yemeni in the Gulf countries will facilitate transit to Ethiopia.

It is expected that by the end of 2015, almost 3,000 Yemenis will have arrived in Ethiopia. The number of Somali refugees arriving from Yemen is roughly estimated to be 6,000 by the end of 2015. Moreover, by the end of 2016, it is expected that more than 7,000 Yemenis will have arrived in Ethiopia seeking international protection; while the total number of Somalis is estimated to be 12,500.

By 8 August 2015, 6,190 Ethiopians evacuated from Yemen, of whom 3,824 individuals were in need of post-arrival assistance as they did not have sufficient resources for onward transportation to their areas of origin. Many who managed to flee are coming with little or no resources and are in dire need of assistance. It has also been observed that many Ethiopian returnees have been subjected to

exploitation, kidnapping, torture, sexual and gender-based violence, starvation and other abuses on route and upon arrival and are weakened by the long and dangerous journey.

To this end, it is important to screen out the most vulnerable people, such as those requiring medical attention, older persons, pregnant and lactating mothers, acutely malnourished children, unaccompanied minors, and victims of trafficking will need immediate support on arrival.

Given the continued smuggling and trafficking into Yemen and Saudi Arabia, there is also a need to conduct prevention activities such as awareness raising campaigns, behavioural change activities (such as peer education and community conversation) and livelihood opportunities in areas of origin.

As the Embassy of Ethiopia has closed down in Yemen at the moment, the anticipated figure is unpredictable. However, some reports indicate that 150 migrants a day are still attempting to cross into Yemen via Djibouti. In addition, around 1,400 migrants (mainly Ethiopians) are accommodated at a detention centre in Hudaydah, of which around 700 Ethiopians have only been in Yemen for less than a month. Based on this trend, an additional 15,200 Ethiopians could require post-arrival assistance by the end of 2015 (in addition to the 6,336 Ethiopian migrants who have been evacuated from Yemen), amounting to 21,536 individuals. However, it is important to note that the number may increase if the conflict intensifies as the population of Ethiopians in Yemen is significant and movement towards Yemen has not stopped.

## ***Response Strategy and Priorities***

The strategic objectives for this response in Ethiopia are as follows:

- Strengthen registration and identification of the most vulnerable refugees, migrants and returnees coming from Yemen to (1) better provide protection and assistance; (2) provide documentation to refugees and asylum seekers; and (3) ensure identification and appropriate screening of victims of trafficking (VoTs) and vulnerable migrants, including unaccompanied minors. *(Regional Objective 2)*
- Support refugees, vulnerable migrants and returnees by providing (1) post-arrival assistance to Ethiopian returnees; (2) care and maintenance in the camps for Somali refugees arriving from Yemen; (3) alternatives to camps (urban setting) for Yemenis; and (4) psycho-social support and appropriate referral for VoTs and vulnerable migrants. *(Regional Objective 2)*
- Pursue appropriate durable solutions for refugees and provide reintegration and livelihood opportunities for returnees, potential migrants and source/host communities. *(Regional Objective 3)*
- Enhance community based awareness-raising to prevent irregular migration and secondary movement. *(Regional Objective 1)*
- Strengthen coordination, resource mobilization and partnership within the country and in neighbouring countries on mixed migration. *(Regional Objective 4)*

On arrival, and in collaboration with ARRA, all refugees under the urban programme will undergo registration and nationality screening or RSD procedures in order to be issued with ID documentation, while Somalis and Eritreans will be registered in existing refugee camps.

Survivors of violence, torture and SGBV, children at risk, older persons and other persons with specific needs will be identified during the registration process and referred to a competent agency to access psycho-social support and medical and legal assistance.

Yemeni new arrivals will receive assistance and protection under the existing urban programme in Addis Ababa. Due to reservations made by the Government of Ethiopia to the 1951 Refugee Convention, refugees are not allowed to work in Ethiopia. Under the urban programme, refugees receive a monthly stipend as a contribution towards their housing, food and other basic needs, including education and primary healthcare. Somalis will be assisted in camps in Dollo Ado. Eritreans will be assisted in existing camps in the northern region of Ethiopia.

Ethiopian returnees evacuated from Yemen will receive post-arrival assistance, including (1) airport reception; (2) transportation to bus stations or the IOM transit centre in Addis Ababa; (3) emergency medical care; (4) accommodation, food and water at the transit centre; (5) family tracing and reunification for unaccompanied minors (UAMs); and (6) onward transportation assistance.

Screening and early identification of victims of trafficking and vulnerable migrants in order to provide appropriate referral services, including psycho-social assistance and reintegration, are key activities. Furthermore, to address irregular migration, human trafficking and smuggling from Ethiopia into Yemen, it is important to intensify prevention activities such as awareness raising campaigns, behavioural change activities (such as peer education and community conversation) and livelihood opportunities in areas of origin. There is a need to strengthen the Emergency Migration Response Centre located at the border crossing point with Djibouti to track movements in and out of Ethiopia and build up the data on Ethiopian migrants. Immediate life-saving assistance will also be provided to stranded and intercepted irregular migrants.

Ethiopian children who have returned from Yemen will receive psychosocial support and a reunification grant.

## ***Partnership and Coordination***

The coordination and response to Yemeni new arrivals will continue through existing mechanisms such as the Refugee Operations Task Force (co-chaired by UNHCR and the Government (ARRA)), the Protection Working Group, as well as using mechanisms of the UN Country Team and OCHA in Ethiopia.

UNHCR will work with partners, especially with those located in the northern and eastern regions bordering with Somalia and Djibouti for developing protection/border monitoring, data collection and reporting on new arrivals from Yemen by air or through the land border. The border and protection monitoring applies also to other refugees and nationalities such as Somalis and Eritreans who might be arriving in Ethiopia from Yemen using well-known smuggling routes through Somalia or Djibouti.

Relevant updates are shared on a weekly basis with all agencies on new arrivals and registration of Yemeni nationals in Ethiopia.

The coordination and response to Ethiopian returnees will continue through existing mechanisms, such as the Ministry of Foreign Affairs, especially the Consular Affairs and Immigration with regard to the return of Ethiopian migrants, and the Ministry of Women, Children and Youth Affairs (MOWCYA) and UNICEF collaborate on family tracing and reunification for UAMs. IOM also coordinates with the Federal Micro and Small Enterprises Development Agency (FeMSEDA) for reintegration and access to micro- finance services and Technical and Vocational Education and Training (TVET) for vocational training.

For irregular migration and trafficking in general, IOM coordinates with the Ministry of Labour and Social Affairs (MOLSA), the Deputy Prime Minister’s office and the national Task Force on Human Trafficking and Irregular Migration at federal and regional levels.

## ***Planned Response***

<b>ACTIVITIES</b>	
<b>Protection</b>	<ul style="list-style-type: none"> <li>- Strengthen border monitoring and register arriving refugees, asylum seekers and Ethiopian returnees. Ensure they have the necessary ID.</li> <li>- At border points and registration centres, victims of human trafficking, UAMs, victims of SGBV and other vulnerable individuals or groups are screened and identified and referred to the appropriate mechanism for assistance.</li> <li>- Conduct intensive awareness raising campaign and behavioural change activities to prevent irregular migration and trafficking.</li> </ul>
<b>Education</b>	<ul style="list-style-type: none"> <li>- Refugee children have access to and are enrolled in educational facilities in urban and camp settings and are equipped with the necessary education materials, including school uniforms.</li> </ul>
<b>Environment and Livelihoods</b>	<ul style="list-style-type: none"> <li>- Seeds and livestock are distributed to refugees to help them be self-sufficient.</li> <li>- Ethiopian returnees and potential migrants have access to reintegration and livelihood opportunities.</li> </ul>
<b>Food</b>	<ul style="list-style-type: none"> <li>- Refugees in camp settlements receive food.</li> <li>- Malnourished children receive supplementary food rations regardless of where they are living (camps, urban settings or at the transit centre).</li> <li>- Vulnerable families in urban settings receive cash assistance to contribute towards their nutritional needs.</li> <li>- Ethiopian returnees receive food at the transit centre and en route to their places of origin.</li> </ul>
<b>Health and Nutrition</b>	<ul style="list-style-type: none"> <li>- Provide health services to refugees in Addis Ababa as per the urban programme policy.</li> <li>- Provide health services to refugees through the existing health facilities in the camps.</li> <li>- Provision of medical and psycho-social support to VoTs and vulnerable migrants</li> </ul>

## ACTIVITIES

<b>Logistics and Transport</b>	<ul style="list-style-type: none"> <li>- Transport of refugees to camps or Addis Ababa.</li> <li>- Provision of transportation assistance from border points to Addis Ababa or Jijiga for Ethiopian returnees.</li> <li>- Provision of Airport reception and transportation to bus station or the IOM transit centre for Ethiopian returnees.</li> <li>- Provision of allowance for transportation from Addis Ababa to areas of origin.</li> </ul>
<b>Non-Food Items (NFI)</b>	<ul style="list-style-type: none"> <li>- All refugees transferred to camps and Ethiopian returnees receive NFI packages.</li> </ul>
<b>Shelter and Infrastructure</b>	<ul style="list-style-type: none"> <li>- Construct a reception centre in Jijiga to receive new arrivals.</li> <li>- Set up 2,500 transitional shelters in Dollo Ado camps to accommodate newly arrived refugees.</li> <li>- Provide accommodation at the transit centre and the Emergency Migrant Response Centre (EMRC) for Ethiopian returnees.</li> </ul>
<b>Water, Sanitation and Hygiene (WASH)</b>	<ul style="list-style-type: none"> <li>- Existing water systems in Dollo Ado camps are maintained and rehabilitated and an additional water trucking system in Jijiga transit centre is put in place.</li> </ul>

## ***Financial Requirements Summary – ETHIOPIA***

### **Financial requirements by agency (in US dollars)**

Organization	Total Oct-Dec 2015	Total Jan-Dec 2016
IOM	1,626,280	6,604,210
UNHCR	3,952,914	10,352,907
UNICEF	173,846	695,383
WFP	358,750	2,398,500
<b>Total</b>	<b>6,111,790</b>	<b>20,051,000</b>

### **Financial requirements by sector (in US dollars)**

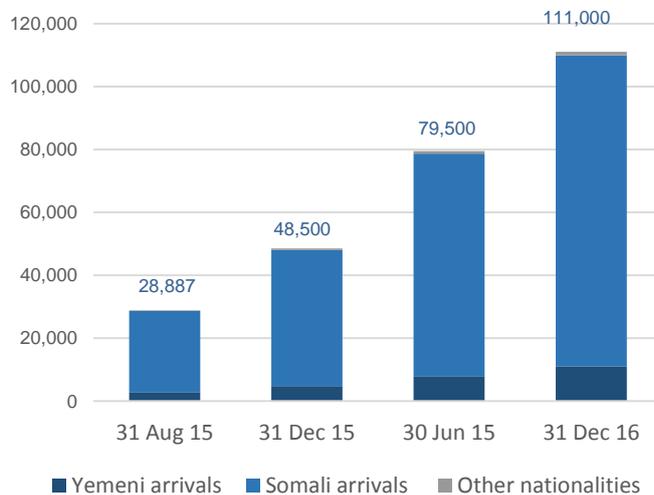
Sector	Total Oct-Dec 2015	Total Jan-Dec 2016
Protection	1,143,758	4,517,313
Education	235,000	1,397,062
Food	597,835	4,468,100
Health and Nutrition	131,750	328,250
Livelihoods	720,000	3,080,000
Logistics and Transport	1,049,000	1,201,000
Shelter and NFIs	1,500,845	3,006,982
WASH	375,000	875,000
Operational Support	358,602	1,177,293
<b>Total</b>	<b>6,111,790</b>	<b>20,051,000</b>

# SOMALIA RESPONSE PLAN



As of 31 August 2015

## Population Trends



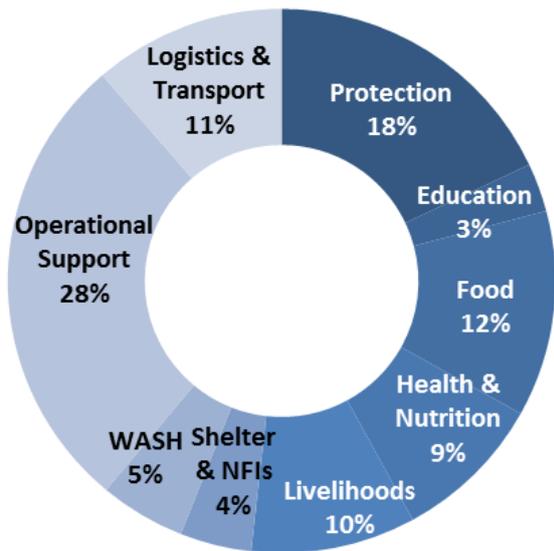
### Key challenges

- Limited humanitarian access
- Limited absorption capacity in host communities
- Registration – limited capacity of immigration and delay in setting-up biometric registration/verification system

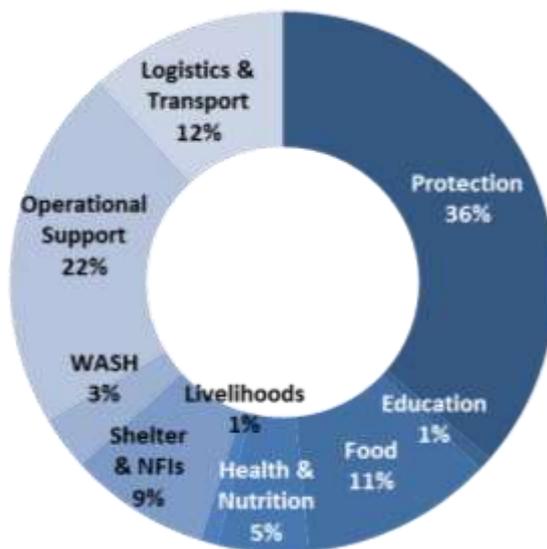


## Financial Requirements

US\$ 20,061,055 (Oct-Dec 2015)



US\$ 61,346,825 (Jan-Dec 2016)



## ***Background and Achievements***

Since 28 March 2015, a total of 28,887 new arrivals had travelled from Yemen to Somalia as a consequence of the ongoing hostilities. This includes 25,802 Somali returnees primarily from South Central regions of Somalia, 2,872 Yemeni nationals, and 213 migrants of other nationalities. The majority of people arrived by boat in Bossaso, Puntland and Berbera, Somaliland, with a small number also arriving in Mogadishu by air. The majority of arrivals have indicated regions in South Central Somalia as their final destination.

The Republic of Somalia has ratified both the 1951 Refugee Convention and the 1967 Protocol. There is however, no national legislative framework for refugees in Somalia, nor are there established procedures for reception of mass influxes. Due to a low capacity within the government institutions, refugee status determination is carried out by UNHCR, while UNHCR and the Government jointly carry out registration. In the semi-autonomous Puntland State of Somalia, in the north-eastern regions, the Refugee Affairs Department (RAD) of the Ministry of Interior is mandated to protect and promote the rights of refugees in Puntland, while in the self-declared independent state of Somaliland, in the north-western regions, the Ministry of Rehabilitation, Resettlement & Reconstruction (MRRR) works in close collaboration with UNHCR to do the same there. The National Commission for Refugees and IDPs (NCRI) under the Ministry of Interior and Federal Affairs of the Federal Government of Somalia is working together with UNHCR to ensure protection and assistance of refugees at federal level, and particularly Mogadishu and other southern and central regions of Somalia. The governments of Puntland, Somaliland and the Federal Government of Somalia have declared that all Yemeni nationals seeking asylum will be recognized as *prima facie* refugees upon arrival.

The overall operational environment in Somalia remains challenging, given the political and security volatility which persists despite some positive developments in certain areas. The authorities in Somalia generally have limited capacity to manage a medium/large influx of arrivals, and many face a difficult environment characterized by conflict, violence, insecurity, protracted displacement, poor living conditions, and absence of functioning or effective institutions. This is further compounded by poor road infrastructures and long periods of drought that continue to threaten food security, particularly in north-western regions, as well as floods in other south central regions, and by the limited capacity of government institutions vis-à-vis the delivery of basic services. Consequently, access to shelter, infrastructure, health, water and sanitation, education, and livelihood opportunities continues to be a challenge for refugees, returnees and IDPs alike; durable solutions remain limited.

The sudden and rapid increase in the number of refugees, returnees and migrants from Yemen in 2015 has strained the capacity of agencies to provide adequate assistance, and urban areas like Hargeisa and Bossaso have struggled and continue to struggle to absorb the number of new arrivals looking for food, shelter and housing. Given the lack of capacity within Somalia to absorb and accommodate a large influx of people, Yemeni new arrivals are particularly struggling to find affordable accommodation. There are limited livelihood opportunities for new arrivals who generally rely on their savings, community support and humanitarian assistance to subsist, due to the relatively limited level of services and opportunities available in Somalia as a whole. Difficult

living conditions in urban settings in Somalia are also prompting some Yemeni and Somali new arrivals to consider returning to Yemen before it is safe to do so.

Identification of all new arrivals that enter through the ports is difficult as only approximately 60 per cent of new arrivals pass through and register at the reception centres set-up by UNHCR in Bossaso, Puntland, and Berbera, Somaliland, and by IOM in Mogadishu.

New arrivals in Somalia are at the ports of entry, where they receive medical assistance when necessary, vaccinations, screening for diseases of epidemic potential, fitness for travel assessment, referral services, refreshments, protection assessment and transportation to the relevant reception centres where they are registered by UNHCR and the government authorities. The centres also provide new arrivals with temporary shelter for up to three nights, as well as food and water, core relief items, and basic services including healthcare, water and sanitation facilities, hygiene promotion, nutrition screening and treatment, psychosocial support and family tracing. Vulnerability assessments are conducted to identify Somali returnees who require onward transportation assistance to enable them to return to their area of origin or choice and referrals for further assistance. A total of 17,493 people were registered and assisted in the reception centres since late March 2015, and 9,013 Somali returnees have been provided with onward transportation assistance to help them return to their areas of origin or choice.

Additionally, to reduce the protection risks of Somalis from South Central regions who decide to return, up to date information is provided about conditions in their place of origin/place of choice to enable them to make an informed decision.

Projects specifically targeting Somali returnees from Yemen are not yet in place in areas of return, although assessments have been conducted by the Protection Cluster to identify new arrivals that have joined IDP settlements in Bossaso and the UNHCR-funded Protection and Return Monitoring Network (PRMN), manned by NRC, has reported that there are over 8,000 Somali returnees from Yemen in areas in South Central regions, including some 6,000 in Mogadishu. IOM has also commissioned a district profile for Mogadishu to assess the gaps and needs of arrivals and identify opportunities. In this sense, it is important to link up Somali returnees with livelihoods, health, food, WASH, nutrition and education projects that are ongoing as part of the Somalia 2015 Humanitarian Response Plan (HRP) and that will be included in the 2016 HRP, as well as with ongoing programmes by resilience/development actors within the framework of the New Deal Compact Peacebuilding and State-building Goals (PSGs).

Security concerns may prevent humanitarian actors from undertaking planned tasks. Similarly, road network infrastructure is very poor throughout Somalia and many locations remain inaccessible. Security concerns relating to certain new arrivals from Yemen have also prompted the government of Somaliland to close its borders to new arrivals in the past, and there is little capacity to identify these people once they have arrived.

## Achievements

### Protection

- Two reception centres in Berbera and two in Bossaso were established and rehabilitated by UNHCR. One of the reception centres in Berbera was a school and it was renewed and returned to the community in time for the start of the school year in September 2015. Alternative reception sites in Berbera are being assessed by UNHCR in collaboration with authorities and partners. A temporary reception centre was set up in Mogadishu by IOM.
- Standard operating procedures on registration and documentation of persons of concern through UNHCR's biometric registration system ProGres were developed and are now being implemented. ProGres equipment was installed in Bossaso and is being set-up in Berbera and Mogadishu to enable proper registration and verification of new arrivals (refugees and returnees) at ports of entry and areas of return. Verification system is already in place also in Luuq, Baidoa and Kismayo, at UNHCR's Way Stations established for the voluntary refugee return process from Kenya.
- Registration training was conducted by UNHCR Protection/Registration experts in Bossaso, Berbera/Hargeisa and Mogadishu for UNHCR, government and partner staff.
- Systems were also established in Berbera to provide formal but temporary documentation that confirms a new arrival's right to remain in Somaliland, which will be replaced with a standard certificate once the registration process is completed with MRRR in Hargeisa.
- Immigration departments have been provided with training and equipment by IOM to increase their capacity to register and screen new arrivals.
- In collaboration with the inter-agency task force in the field, UNHCR designed a prevention and response action plan, response chart and information brochures (translated into Arabic, Somali, Oromo and Amharic) for the new arrivals in Berbera, Bossaso and Mogadishu. These brochures provide new arrivals with information about their rights and obligations as well as the availability of services in the respective locations.
- Vulnerability assessments<sup>3</sup> are conducted at the reception centres to identify persons with special needs and refer them as required for further assistance. A special needs desk was set up at the centres to provide services to persons with special needs including survivors of SGBV and unaccompanied children. Cash assistance and dignity kits are provided to vulnerable individuals on a discretionary basis. Psychosocial, medical and material assistance support is provided to survivors of SGBV.
- UNICEF set up Child Protection Desks at reception centres in Bossaso and Berbera, where children requiring special assistance are identified and referred to specialized services and also offered psychosocial support. Unaccompanied and separated children (UASC) were identified and reunified with their families and extended families and provided access to essential services.

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<sup>3</sup> The Inter-Agency Task Force has been applying the following vulnerability criteria to identify those arrivals who require urgent assistance: 1. Children at risk (below 18 years of age); 2. Women at risk (above 18 years of age); 3. Older person at risk (60 years old or above); 4. Disability; 5. Specific legal/protection needs; 6. Torture; 7. Sexual and Gender Based Violence (SGBV). For the provision of onward transportation assistance (OTA), expanded vulnerability criteria are used to include casual labour/youth not able to sustain their travel costs to their areas of return, in order to avoid protection concerns due to possible overcrowding of reception centres.

- In Bossaso, Save the Children identifies and supports separated and unaccompanied children with family tracing and reunification. A total of 48 UASC have been reunited with their biological parents.
- In Berbera, the Somali Red Crescent Society (SRCS) works closely with Comprehensive Community Based Rehabilitation in Somaliland (CCBRS) to identify and immediately assist any UASC new arrivals and works with other child protection agencies to ensure that the child protection needs of new arrivals are met.
- Save the Children is currently constructing a playground at the reception centre in Berbera, and CCBRS engages in a range of activities with children at the centre.
- Women and children are accommodated in a separate area to men at all reception centres in Bossaso, Berbera and Mogadishu, and security guards provide 24-hour security at centres while they are occupied.
- Reception centre staff and volunteers of the SRCS are on standby in Berbera and Bossaso ports and respond to all new boat arrivals. The SRCS provides family tracing services (free phone calls to help people re-establish contact with relatives in Somalia, Yemen or elsewhere) at the reception centres in Berbera and Bossaso.
- In Mogadishu, IOM provides reception assistance to all new arrivals, including temporary accommodation, care and maintenance as well as NFIs and cash grants.

#### **Food**

- Refreshments are provided to new arrivals at the ports of entry upon arrival of each boat by IOM and DRC.
- Vulnerability assessments are conducted to identify new arrivals vulnerable to food insecurity<sup>4</sup>, and cash assistance is provided to those in need.
- New arrivals can access three meals per day and water at the reception centres.
- In Bossaso, WFP registers vulnerable new arrivals using the SCOPE database and provides them with an e-transfer card that both links them to existing WFP food programmes and has a small balance to use at WFP contracted retailers to supplement food provided at the reception centre. The system has also been put in place for arrivals in Berbera and e-transfer cards are being distributed.

#### **Water, Sanitation and Hygiene (WASH)**

- Water is trucked in to overcome water shortage problems that occur in Berbera and Bossaso, and an elevated water tank is being constructed in Berbera reception centre to further alleviate this problem.
- Laundry facilities are currently being constructed in the first reception centre in Berbera and are already available in the two reception centres in Bossaso.

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<sup>4</sup> Vulnerability criteria used by WFP and partners for provision of food assistance: 1. inter-generational households; 2. single women; 3. chronically ill, mentally ill, those with disabilities; 4. any extra justifiable criteria agreed on by the inter-agency committee conducting the assessment.

- Latrines have been built and hygiene promotion has been incorporated in the new arrival induction.
- Save the Children has distributed 419 baby hygiene kits in Gardo and 1,594 NFI/hygiene kits in Bossaso, Puntland.
- UNICEF has distributed hygiene kits in Berbera and Bossaso.

### **Health and Nutrition**

- WHO and the Puntland Ministry of Health officials vaccinate all new arrivals in Bossaso with polio vaccine upon arrival to the port, and all children aged 9 months to 10 years receive measles vaccinations in addition to screening for diseases of epidemic potential. The SRCS provides first aid at Bossaso port.
- Through Save the Children, 1,240 new arrivals have benefitted from emergency health interventions in Bossaso and Gardo. IOM, DRC, and UNICEF's local partner TASS (Tadamun Social Society) also provide medical referrals.
- WHO staff and Somaliland Ministry of Health officials provide emergency vaccinations and conduct screening for diseases of epidemic potential to new arrivals at the port in Berbera, with support from the SRCS volunteers, who also provide first aid, medical treatment and health information to people as they disembark from the boats and refer urgent cases to the hospital. New arrivals can then access primary medical care at the IOM Medical Clinic that operates at the reception centres 24 hours per day, with support from UNICEF (health kits).
- As at 23 September 2015, 2,423 new arrivals were provided by IOM, in collaboration with UNICEF, with medical treatment at the reception centre in Berbera, and 39 new arrivals were referred for further treatment at hospital in Berbera. A total of 77 pregnant women have been assisted and 9 delivered their babies soon after their arrival.
- In Berbera, malnourished children have been promptly identified and referred to public hospitals for treatment by IOM.
- Vulnerable female new arrivals are provided with UNFPA dignity kits, and psychosocial support is provided by UNHCR partners in both Bossaso and Berbera.

### **Logistics and transport**

- As of 23 September 2015, 9,013 Somali returnees from Yemen have received onward transportation assistance (OTA) in Somaliland and Puntland combined to enable them to return to their areas of origin or choice. Agencies that have supported OTA are UNHCR (through IOM), DRC, TASS, and Save the Children.
- 100 migrants of other nationalities (primarily from Ethiopia) have been supported through IOM with consular assistance, temporary accommodation and transport to their country of origin.
- Core Relief Item (CRI) kits are distributed to vulnerable new arrivals in Bossaso. Save the Children provided 174 CRI kits for Yemeni refugees in Gardo.
- By 1 September 2015, 503 CRI kits had been provided to vulnerable new arrivals in Berbera by UNHCR.

- Transportation between the ports of arrival and the reception centres have been made available by IOM (Bossaso and Mogadishu) as well as DRC (Berbera).

#### **Education**

- All refugee and asylum seeker children have access to public education in Somaliland and Puntland as of September 2015. Arabic language private schools are also available to Yemeni refugee children in Puntland and Somaliland; however the enrolment fees are often not affordable for refugees/asylum seekers. Somali language classes will be provided through the Peaceful Co-existence centre in Hargeisa.
- UNHCR, through Gruppo per le Relazioni Transculturali (GRT), continued to provide school uniforms/materials to vulnerable Yemeni refugee children in Bossaso/Garowe, and through NRC in Somaliland.
- An information leaflet explaining the benefits of joining the public school system was prepared and translated to encourage enrolment in public schools in Hargeisa.

#### **Environment and livelihoods**

- In Somaliland, UNHCR, through its partners currently supports more than 60 refugees in livelihood activities as part of its regular operations, but this is being extended to more than 200 new arrivals (Yemeni refugees) as well.
- Livelihood projects have been planned for 100 Somali returnees from Yemen with plans in place to increase the number should funds be made available.

## ***Humanitarian Needs and Vulnerabilities***

While there was a decrease in the number of new arrivals reaching Somalia in August-September 2015, the security and political situation in Yemen remains the major push factor for new arrivals into Somalia. Although the current security/political situation in Yemen may not lead to massive outflows of Yemeni refugees, Somali returnees, and migrants of other nationalities, a steady flow into Somalia with the same number of arrivals since April 2015 is envisaged (5,000 per month).

In Somalia, African Union Mission in Somalia (AMISOM)/Somali National Armed Forces (SNAF) offensive and Al Shabaab attacks will continue in certain regions and districts, leading to a further deterioration of security with substantial effects on the humanitarian situation. The security situation and new displacements as a result of the offensive are impacting the designated areas of return and absorption capacity of host communities, as well as restricting road access and provision of humanitarian assistance, such as in Baidoa, Belet Weyne and Luuq. However, it will have no effect on the overall trend of arrivals from Yemen.

By the end of 2015, it is expected that the number of new arrivals in Somalia will have reached 48,500, and by the end of 2016, the figure is expected to have reached 111,000 new arrivals. The demographic trend has been, 89 per cent of the new arrivals are Somali returnees, 10 per cent are Yemeni refugees, and the remaining 1 per cent of the new arrivals is migrants from other countries. Some 67 percent of the new arrivals enter through Bossaso, 32 per cent through Berbera, and 1 per cent through Mogadishu on evacuation flights organized by IOM.

The areas of intended return are distributed as follows: 55 per cent to Mogadishu, 11 per cent to Hargeisa; 5 per cent to Bossaso, 3 per cent to Kismayo, 3 per cent to Baidoa and 23 per cent to other areas.

While arrivals who benefit from organized evacuations from Yemen by IOM generally arrive in good health or have access to medical escorts, and a majority have not experienced serious protection risks on route from Yemen, arrivals who reach Somalia using informal commercial vessels (often used for smuggling and human trafficking) may have been exposed to serious human rights violations and protection risks as the boats are not fit for transportation and lack basic facilities. Some may not survive the crossing from Yemen. As numbers of arrivals increase, humanitarian partners will need to increase capacity to protect and assist survivors by providing immediate support upon arrival, including assessing the needs of different categories of arrivals using the age, gender and diversity approach.

The majority of the Somali returnees who arrive in Somaliland and Puntland originated from South Central regions of Somalia, including Mogadishu, and are returning to various areas of origin and/or of choice where relatives are located<sup>5</sup>. The most vulnerable individuals are likely to stay a maximum of three days in the reception centres and onward transportation assistance will continue to be provided on the basis of a vulnerability assessment, so as to decongest the reception centres and avoid further protection risks.

However, return to places of origin/choice will be difficult for many Somali returnees from South Central regions of Somalia due to the prevailing conditions as conditions for mass return to Southern and Central regions of Somalia are not yet established. Despite a gradual return movement, notably under UNHCR's project on Voluntary Return of Somali Refugees from Kenya, and IDPs returning spontaneously and assisted by the UNHCR-led Somalia Return Consortium since mid-2012, many areas, particularly those outside the major urban centres, remain insecure and volatile.

Assistance will be provided to returnees in areas where agencies are present such as Kismayo, Baidoa, Luuq, Jowhar, Afgoye, Balcad, Beletweyne, Mogadishu, Wanla Weyne, Galkayo, Bossaso, Garowe, Hargeisa, Dhobley, and Dollow. Return assistance will include unconditional reinstallation cash grant to most vulnerable returnees in order to support them re-establish their household, and information will be provided to returnees moving to these areas about the ongoing humanitarian programmes (livelihoods, health, education, food, WASH, etc.) under the Somalia 2015 HRP and the planned initiatives that will be included in the 2016 HRP cluster chapters. In addition, linkages will be ensured as required with programmes by the resilience and development actors under the New Deal Compact framework, and particularly under PSG 4 – Economic Foundations (for livelihoods, employment, infrastructure, etc.) and PSG 5 – Revenue and Services (for education, health, etc.).

It is expected that a limited number of returnees (around 20 per cent) will continue to join families in Somaliland (Hargeisa, Berbera) and Puntland (Bossaso, Galkayo, Garowe and Gardo). A limited number of returnees will also join relatives in IDP settlements, and this needs to be assessed and

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<sup>5</sup> Confirmed by monitoring conducted by the Protection and Return Monitoring Network and assessments conducted by the Protection Cluster.

monitored in all areas of return where IDP settlements exist, by linking with the Protection Cluster and the Protection and Return Monitoring Network.

New arrivals with clan/family links are welcomed by respective communities. Those who do not have clan/family links are likely to be exposed to discrimination and exclusion affecting their livelihoods and well-being. This discrimination mainly affects Somali returnees from South Central regions who arrive in Somaliland. Under return and reintegration programmes, humanitarian partners will continue to pursue durable solutions for all returnees including those most marginalized, and will strengthen linkages with resilience and development actors to ensure sustainable reintegration, in line with UNHCR's Reintegration Framework (July 2014).

The Government capacities in Somaliland, Puntland and South Central regions require support to identify and respond to protection and basic service needs of new arrivals. The response by humanitarian partners should include boosting basic service infrastructure in health, education, shelter and water and sanitation. Capacity building of line Ministries and other Government actors at federal and regional level is paramount and should be streamlined across cluster response plans. With the anticipation of the continued and stable influx of new arrivals from Yemen the main needs of the operation include:

- Strengthened protection at sea; provision of lifejackets if possible, tracing and tracking ships and rescue at sea *(Regional Objective 1)*
- Awareness campaigns relating to the inherent dangers of returning to Yemen at this point in time to discourage people from taking such action. *(Regional Objective 1)*
- Registration of all new arrivals and issuance of civil documents at four reception/registration centres in Berbera, Bossaso and Mogadishu (ProGres registration system is still being established in Berbera, Bossaso and Mogadishu. Once established, it will be possible to issue formal certificates immediately at the reception centres). *(Regional Objective 2)*
- Construction of a reception centre in Mogadishu. *(Regional Objective 2)*
- Maintenance of five reception centres in Bossaso, Berbera and Mogadishu *(Regional Objective 2)*
- Access to protection services for UASC, SGBV survivors and children requiring special assistance including psychosocial support. *(Regional Objective 2)*
- Provision of onward transportation assistance for vulnerable returnees and Yemeni refugees to enable them to reach to their area of origin or choice (for Somali returnees) and refuge (for Yemeni refugees). *(Regional Objective 2)*
- Provision of Core Relief Items to vulnerable new arrivals and host families. *(Regional Objective 2)*
- Access to education and health for refugees and asylum-seekers. *(Regional Objective 2)*
- Establishing return monitoring projects, including new arrivals who join the current IDP settlements. *(Regional Objective 3)*
- Provision of return assistance (information, dissemination and return help desk). *(Regional Objective 3)*
- Initial reintegration package to returnee families (reinstallation grant). *(Regional Objective 3)*

- Establishment of and link with ongoing livelihood programmes so that persons of concern are better able to support themselves in urban settings. This will include Somali language courses for Yemeni refugees and livelihood skill training and provision of start-up grants. *(Regional Objective 3)*
- Provision of subsistence allowance to all refugees for a three month period to assist them in re-establishing their household. *(Regional Objective 3)*
- Capacity building activities enhancing the Government's capacity to provide protection to all persons of concern at federal and regional level, and improve its response capabilities, including strengthening immigration and border management. *(Regional Objective 4)*

Vulnerability criteria will continue to be applied to ensure protection and assistance are provided to the most vulnerable individuals and families. The protection and assistance package agreed in the tasks force will continue to be applied during reception, transit and final destination:

**Phase 1: Arrival Assistance** (i.e. until leaving the reception centre) in Berbera, Bossaso and Mogadishu including:

- Arrival refreshments. (IOM, DRC)
- Support during disembarkation, counting, luggage handling, distribution of water, transfer to the reception centres, etc. (SRCS, NRC)
- Food at reception centre (WFP)
  - Cooked
  - Complementary
- Nutrition support. (WFP)
- Registration. (Puntland: Ministry of Interior, Somaliland: Ministry of MRRR, UNHCR, IOM)
- Provision of psychosocial support to new arrivals as required, especially minor and female survivors of gender based violence. (UNFPA, UNHCR, UNICEF)
- Identification, documentation, registration, and tracing of separate/unaccompanied minors. (UNICEF through its partners)
- Healthcare/referral access for emergencies; polio, measles immunization for children. (Ministry of Health, IOM, WHO, UNICEF, UNFPA, SRCS, SC, MDM)
- Psychosocial counselling, distribution of hygiene kits. (CCBRS, UNHCR)
- Screening of malnourished children on arrival and referral of cases of Severe Acute Malnutrition to outpatient therapeutic centre and/or stabilization centres. (UNICEF)
- Distribution of BP5 biscuit as supplementary for children under five with no sign of severe malnutrition. (UNICEF, WFP)
- WASH access. The provision of sufficient water, sanitation and hygiene facilities, and operation and maintenance of these facilities for the duration of the returnees stay in the reception/transit centres, raising awareness on how to use properly these facilities. (DRC/UNHCR, NRC, IOM)
- Protection/accommodation up to 3 nights. (UNHCR, DRC, IOM)
- Return Help Desk-Information sharing on protection and assistance (UNHCR, NRC, DRC, IOM)
- Onward transportation assistance for vulnerable individuals: up to US\$ 120/person depending on the locations of return (for Somali returnees) and of refuge (for Yemeni refugees). (UNHCR/IOM, SCI, NRC)

- Provision of a mobile phone (where necessary) and a SIM per family for cash transfer and monitoring/tracing in areas of destination. (UNHCR, IOM)
- Provision of free phone calls at the reception centres to help people re-establish contact with relatives living in Yemen, Somalia or elsewhere. (SRCS with support from ICRC)
- Provision of First Aid services at the points of entry in Berbera and Bossaso. (SRCS with support from IFRC)

**Phase 2: Transit Assistance** (*on route* to final destination of return) including:

- Food assistance – cooked meal programme through wet feeding centres (WFP) for returnees in transit.
- WASH hygiene kits. (UNICEF, NRC)
- Accommodation (up to 3 nights) in Mogadishu (IOM, UNHCR) for the most vulnerable transiting and those whose final destination is Mogadishu. Those whose final destination is Mogadishu and have family linkages in the city will immediately re-join their families, while the ones who do not have families in Mogadishu will be assisted with accommodation up to 3 nights at the reception centre. During the time they are in the centre, the partners will work together on family tracing and referral to affordable shelter alternatives.
- Healthcare/referral access for emergencies and vaccination for those arriving directly to Mogadishu from Yemen.

**Phase 3: Final destination**

- Food assistance for 3 months (WFP) through e-card transfer system for returnees.
- Unconditional reinstallation grant of US\$ 100/person (up to a maximum of 6 members per household) for vulnerable Somali returnees as contribution towards re-establishing the household. (UNHCR, IOM, SCI, NRC)
- Linkages to ongoing activities such as education and nutrition programmes. (WFP)
- Provision of information and linkages to ongoing livelihoods, nutrition, education, health, food, etc. activities coordinated through the cluster system. (WFP, FAO, UNICEF, WHO, UNHCR, UNFPA, DRC, IRC, etc.)
- Provision of information and linkages to ongoing resilience and development initiatives, including livelihoods, cash for work, rehabilitation of schools, health facilities, markets, etc. coordinated through the New Deal Compact framework. (FAO, UNICEF, WFP, UNDP, UNOPS, ILO, IOM, DRC, etc.)

## ***Response Strategy and Priorities***

Humanitarian and development partners will continue to pursue an out-of-camp approach to hosting refugees in Somaliland, Puntland and South Central regions of Somalia (i.e. accommodation arrangements within host communities). However, given the large numbers of IDPs and the limited resource availability in these areas, particularly in towns and urban centres, UNHCR and partners will continue to sensitize the host communities and link up with programmes implemented by clusters, in complementarity with the 2015 and 2016 HRP, and by resilience/development actors, and will support ongoing programmes targeting host communities by building and increasing their absorptive capacity. A majority of Yemeni refugees will continue to be hosted in facilities through existing

Yemeni Community structures in Hargeisa, Bossaso and Mogadishu. However, as the absorption capacity of host communities has already reached a saturation point, particularly in Hargeisa, UNHCR and humanitarian partners are exploring other arrangements in Hargeisa, Bossaso and Mogadishu. One of the solutions is to develop a comprehensive livelihoods strategy that includes Yemeni refugees and Somali returnees in ongoing self-reliance/livelihoods programmes in urban settings. However, livelihood opportunities in Somalia are extremely limited. The unemployment rate amongst the host community is around 80 per cent, and language and cultural barriers make it even harder for persons of concern to find sustainable employment.

Based on the achievements in 2015, and the existing needs and vulnerabilities, the Inter-agency Task Force on Yemen has identified the following priorities until the end of 2016:

- Increase the availability of safe and dignified movement options from Yemen to Somalia (evacuation capacity to be expanded from Yemen). *(Regional Objective 1)*
- Strengthen and enhance reception, registration and onward transportation assistance capacities. *(Regional Objective 2)*
- Provide emergency humanitarian assistance for new arrivals. *(Regional Objective 2)*
- Provide protection and basic assistance to Yemeni asylum seekers and refugees in line with UNHCR policy on urban refugees. Strengthen capacity of local authorities on responding to critical needs of the new arrivals including registration. Improve and strengthen coordination mechanisms with clusters/sectors/PSGs in areas of return to facilitate reintegration of Somali returnees. *(Regional Objective 2, 3 & 4)*
- Improve persons of concern's capacity to become self-reliant focusing on linkages with livelihood initiatives in the HRP and New Deal Compact framework. *(Regional Objective 2 & 3)*
- Identify and work to achieve durable solutions for persons of concern in Somalia including voluntary repatriation of Yemeni refugees when conditions are conducive to return in the country of origin. *(Regional Objective 2)*

## ***Partnership and Coordination***

Since 1 April 2015, an inter-agency Somalia Task Force on Yemen Situation co-led by UNHCR and IOM, in line with their respective mandates, was set up **at country-level**. The Task Force informs the Somalia Humanitarian Coordinator and comprises all relevant humanitarian agencies of the UN and NGO community members of the Somalia Humanitarian Country Team (HCT).

In addition, **field-level Task Forces** were also formed and co-led by UNHCR and IOM, with participation by government authorities in Somaliland, Puntland and South Central/Mogadishu, partners and local business community, to ensure effective response and coordination. The field-level Task Forces were formed based on the pre-existing structures of the Mixed Migration Task Force (MMTF) to coordinate the responses in Berbera and Bossaso specifically for the Yemen situation. As the MMTF has a regional scope, it was agreed at country level to establish a Task Force structure specifically for the Yemen response.

Meetings of the inter-agency Somalia Task Force on Yemen Situation occur on a weekly basis in Mogadishu/Nairobi, as well as field-level Task Forces meetings in Somaliland and Puntland, attended by authorities, partners and local business community. Regular coordination will also continue with the Emergency Task Force on Yemen established by the Federal Government of Somalia and led by the Ministry of Interior and Federal Affairs.

UNHCR has also been closely coordinating with EU NAVFOR to monitor conditions at sea and provide information on any boat fleeing Yemen towards Somalia.

As discussed in a meeting of the inter-agency Somalia Task Force with the UNHCR Regional Refugee Coordinator and agreed by the Somalia Humanitarian Coordinator, the inter-agency Somalia Task Force will remain the coordination body for the Yemen response for the following activities (but not limited to): monitoring and rescue at sea, reception, registration, assistance and response upon arrival, provision of onward transportation assistance to areas of return (for Somali returnees) and areas of refuge (for refugees).

For refugees (Yemenis or others): upon arrival in areas of refuge, they will fall under the UNHCR-led refugee/asylum seeker programme, in line with existing guidelines and the Refugee Coordination Model.

For Somali returnees: upon arrival in areas of return (areas of origin or choice) and inclusion into the local communities, they will fall under the prevailing coordination system, be it Cluster or Sector/development. UNHCR/IOM-led Task Force will continue to coordinate the initial humanitarian assistance in areas of return, including provision of reinstallation grant, 3-month food assistance and provision of information and linkages with ongoing humanitarian and development programmes, coordinated through the cluster/sector/PSG systems.

In line with the agreed coordination mechanism, all activities aimed to assist new arrivals from the ports of entry to their areas of return/choice (for returnees) or refuge (for refugees) will be under the Somalia HRP refugee chapter, together with UNHCR's existing refugee programme, while the activities aimed to assist returnees once in areas of return will be under the HRP respective cluster chapters. Therefore, the Response Plan October-December 2015 will be part of the 2015 HRP, while the Response Plan January-December 2016 will be included in the 2016 HRP.

UN agencies and IOM are working in partnership with several NGOs and government institutions, including: CARE International, Comprehensive Community-based Rehabilitation in Somaliland (CCBRS), Gruppo per le Relazioni Transculturali (GRT), Danish Refugee Council (DRC), Norwegian Refugee Council (NRC), General Assistance and Volunteers Organization (GAVO), HEAL, Horn Youth Development Association (HYDA), International Rescue Committee (IRC), KAALO Aid and Development (KAALO), Médecins du Monde (MDM), Puntland Elders Network (PEN), Somali Red Crescent Society (SRCS), Puntland Youth and Social Development Association (PSA), Save the Children International (SCI), Tadamun Social Society (TASS), Action Africa Help International (AAH-I), and University of Hargeisa Legal Clinic.

## Planned Response

OBJECTIVES	ACTIVITIES	PERFORMANCE INDICATORS
<b>Protection</b>	<ul style="list-style-type: none"> <li>- Register and document arriving refugees.</li> <li>- Provide training to Government officials on refugee protection</li> <li>- Maintain reception conditions</li> <li>- Identify and assist persons of concern with specific protection needs, such as survivors of SGBV, children at risk, and persons with other specific needs.</li> <li>- Provide subsistence allowance /reinstallation cash for vulnerable refugee/returnee families</li> <li>- Increase capacity of immigration officers and partners on issue of human trafficking</li> </ul>	<ul style="list-style-type: none"> <li>- # of new arrivals registered and provided with refugee certificates</li> <li>- # of training sessions provided</li> <li>- # of officials trained</li> <li>- # of reception centres established and maintained</li> <li>- # of persons of concern (PoC) with specific needs identified and assisted</li> <li>- # of PoC families benefiting from cash assistance</li> <li>- # of partners trained</li> </ul>
<b>Education</b>	<ul style="list-style-type: none"> <li>- Provide education materials to refugee children aged 6-17</li> <li>- Continue advocacy efforts with the government to ensure all refugee and asylum seekers children enrol in public schools to boost sustainability and peaceful co-existence with host community.</li> </ul>	<ul style="list-style-type: none"> <li>- # of refugee children provided with education materials</li> <li>- # of refugee children enrolled in schools</li> </ul>
<b>Environment and Livelihoods</b>	<ul style="list-style-type: none"> <li>- Provide numeracy and literacy training for refugee adults to improve their business accounting; vocational training programmes for a period of six months</li> <li>- Business management, entrepreneurship &amp; financial management trainings for selected business groups</li> <li>- Provide business start-up micro-loans and grants for small scale trading, agriculture and horticulture enterprises</li> <li>- Provide youth and business owners entrepreneurial mentorship opportunities</li> <li>- Increase access to livelihood programs for Somali returnees and provide information on ongoing livelihood programmes coordinated under cluster/sector/PSGs</li> </ul>	<ul style="list-style-type: none"> <li>- # of livelihood trainings implemented for refugees</li> <li>- # of refugee families benefiting from start-up grants</li> <li>- # of Somali returnees included in ongoing livelihood programmes under cluster/sector/PSGs</li> </ul>

OBJECTIVES	ACTIVITIES	PERFORMANCE INDICATORS
<b>Health and Nutrition</b>	- Strengthen absorption capacity of local and public health services providers to support new arrivals	- # of health facilities supported and strengthened
	- Cover medical costs for vulnerable individuals	- # of vulnerable PoC with health complications assisted
	- Strengthen diseases surveillance and response	- # of rumours and outbreaks responded to within 48 hours
	- Strengthen health services at reception centres, emergency healthcare, and case referrals	- # of referrals conducted
	- Establish a health post in Bossaso and Berbera ports	- # of health posts built
	- Support delivery of quality maternal and child health – including provision of health supplies and high impact commodities - for pregnant women and children under-5	- # of pregnant women and children accessing PHC services
	- Provision of immediate preventative nutrition support for 1 month to all PLWs	- # of people provided with immediate preventative nutrition support
<b>Logistics and Transport</b>	- Ensure transport of new arrivals from ports of entry to reception centres	- # of PoC transported
	- Provide onward transportation assistance to vulnerable PoC moving to their areas of origin/choice (Somali returnees) and areas of refuge (Yemeni refugees)	- # of PoC provided with onward transportation assistance
	- Provide consular assistance and transport to third country nationals	- # of PoC provided with consular services
<b>Non-Food Items (NFI)</b>	- Distribute standard non-food item kits to vulnerable PoC	- # of NFI kits procured and distributed

OBJECTIVES	ACTIVITIES	PERFORMANCE INDICATORS
<b>Shelter and infrastructure</b>	<ul style="list-style-type: none"> <li>- Provide shelter support to vulnerable refugees</li> <li>- Maintain/rehabilitate reception centres</li> <li>- Provide temporary accommodation to third country nationals</li> <li>- Provide accommodation to the most vulnerable transiting in Mogadishu</li> <li>- Building government capacity for housing and shelter coordination in Mogadishu</li> <li>- Link up returnees with ongoing programmes on shelter/ infrastructure coordinated under cluster/sector/PSGs in areas of return</li> </ul>	<ul style="list-style-type: none"> <li>- # of shelters provided</li> <li>- # of reception centres rehabilitated</li> <li>- # of PoC and third country nationals reached</li> <li>- # of PoC provided with accommodation</li> <li>- # of housing facility provided</li> <li>- # of government officials trained for management</li> </ul>
<b>Water, Sanitation and Hygiene (WASH)</b>	<ul style="list-style-type: none"> <li>- Construct/rehabilitate/maintain male/female latrines, washrooms as well as laundry according to SPHERE standards in reception centres</li> <li>- Constructing community water points in areas of refuge</li> <li>- Hygiene promotion and provision of Hygiene kits at reception centres</li> <li>- Link up returnees with ongoing programmes on WASH coordinated under cluster/ sector/PSGs in areas of return</li> </ul>	<ul style="list-style-type: none"> <li>- # of wash facilities constructed/rehabilitated</li> <li>- # of hygiene kits distributed</li> </ul>
<b>Food</b>	<ul style="list-style-type: none"> <li>- Cooked meals upon arrival at reception centres</li> <li>- Initial transfers to purchase complementary food assistance upon arrival</li> <li>- 3 months of e-transfers to all returnees for accessing food in their declared location of origin / choice</li> </ul>	<ul style="list-style-type: none"> <li>- # of PoC provided food at reception centres</li> <li>- # of PoC provided 3 month food assistance</li> </ul>

## Financial Requirements Summary – SOMALIA

### Financial requirements by agency (in US dollars)

Organization	Total Oct-Dec 2015	Total Jan-Dec 2016
DRC	985,960	3,436,000
IOM	3,365,122	12,668,117
IRC	892,336	-
NRC	562,920	3,365,000
Save the Children	489,796	1,736,776
UNFPA	800,000	-
UNHCR	7,326,515	32,474,536
UNICEF	3,474,044	-
WFP	1,716,892	5,876,516
WHO	447,470	1,789,880
<b>Total</b>	<b>20,061,055</b>	<b>61,346,825</b>

### Financial requirements by sector (in US dollars)

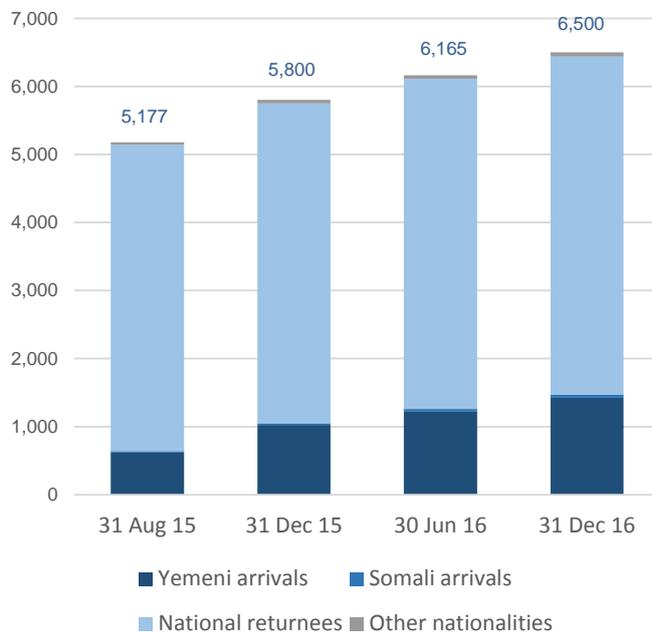
Sector	Total Oct-Dec 2015	Total Jan-Dec 2016
Protection	3,605,123	22,258,892
Education	578,129	500,000
Food	2,456,609	6,978,046
Health and Nutrition	1,795,053	3,296,428
Livelihoods	1,952,110	625,000
Shelter and NFIs	847,236	5,157,407
WASH	1,015,760	1,979,200
Logistics and Transport	2,280,358	7,170,438
Operational Support	5,530,677	13,381,414
<b>Total</b>	<b>20,061,055</b>	<b>61,346,825</b>

# SUDAN RESPONSE PLAN



As of 31 August 2015

## Population Trends



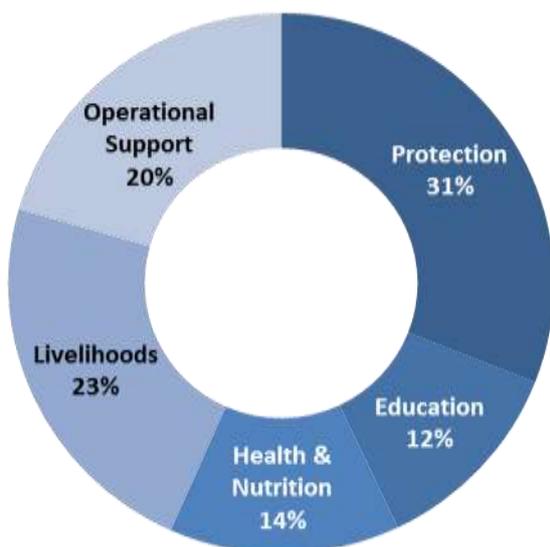
### Key challenges

- Challenges in registration process
- Refugee status and documentation

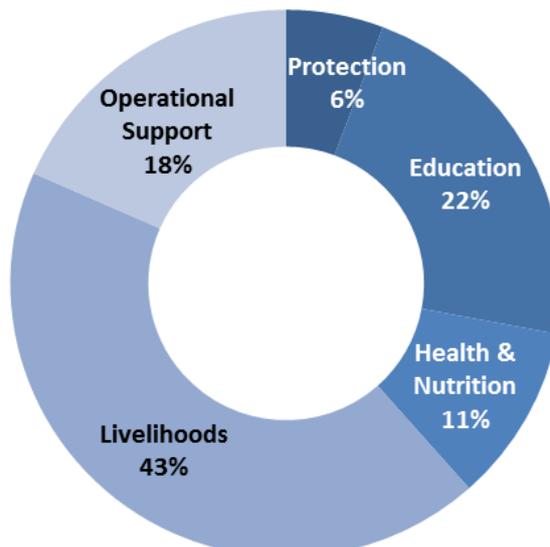


### Financial Requirements

**US\$ 1,201,190** (Oct-Dec 2015)



**US\$ 4,341,210** (Jan-Dec 2016)



## ***Background and Achievements***

The conflict in Yemen has lasted well over one year and there are no signs of an imminent end to hostilities, or that the refugee flows will end any time soon. As a result, there is a strong likelihood that the Yemeni refugees who have arrived in Sudan will remain in the country over the longer term. While the Government of Sudan has a long tradition of welcoming Yemeni nationals to its territory, and has kept its borders open for Yemeni asylum-seekers since the beginning of the current crisis, a more holistic and coordinated humanitarian response is now required to ensure that this positive approach is maintained and enhanced.

Given the scope and impact of the humanitarian crisis, particularly on vulnerable persons of concern, and at the request of the Sudanese Government, a dedicated assistance programme for Yemeni refugees and Sudanese returnees is aimed at providing effective protection, assistance and durable solutions. The response will address the needs of both refugee and host communities, drawing on the resources that already exist in Khartoum, as well as those that can be leveraged internationally.

The Yemeni community in Sudan is an old community which has existed since the beginning of the 20<sup>th</sup> century. The first waves of Yemeni migrants arrived in the 1950s and are well integrated into Sudanese society, either as naturalized Sudanese citizens or as Sudanese nationals by birth. They have traditionally been involved in a variety of business sectors, ranging from crops, groceries, textile and clothing, banks and low-scale industrial schemes. Following the oil boom in the 1990s many Yemeni investors established factories, and supermarket and wholesale enterprises, as they benefited from the reciprocal exemptions from entry visa requirements, as well as other regulations, facilitating access to Sudanese markets.

After the eruption of the conflict in Yemen in December 2014, and the subsequent deterioration of the humanitarian situation in the country, an estimated 5,000 – 7,000 Yemeni refugees and asylum-seekers have arrived in Sudan. Many arrived in Sudan because it was one of the only countries that did not require an entry visa. The majority of these new arrivals have settled in the wider Khartoum area, in particular in Khartoum East, Arkawiet East and West (including Tiff and Street 60), and Sahafa/Imtidad, and, to a lesser extent, Omdurman. There are also unconfirmed reports of Yemeni refugees in the Madani area. Overall, the new arrivals have integrated into urban host communities, mainly concentrated in areas where older Yemeni communities were already established.

In addition, Sudanese citizens have also returned from Yemen as a result of the crisis. Sudanese have migrated to Yemen in the past in search of job opportunities, particularly but not exclusively in the teaching sector. It is estimated that around 4,000 individuals have returned from Yemen to Sudan with assistance from the Government of Sudan, in addition to those who have been evacuated by IOM directly through its Humanitarian Charter Flights. While some Sudanese returnees can count on the support of their families, those who had remained in Yemen for a prolonged period might have lost their ties with Sudan and have arrived with no means to sustain themselves and their households. These vulnerable individuals will need assistance to reintegrate within their communities.

## **Achievements**

Following the outbreak of the crisis in Yemen, a Presidential statement reiterated the Government's intentions "to continue welcoming Yemeni to the Sudan". An agreement was reached between the Commissioner for Refugees (COR) and UNHCR in August 2015 to register new arrivals from Yemen as asylum-seekers and to grant them prima facie refugee status. The joint registration opened on 16 August 2015, with a high number of Yemeni asylum-seekers approaching the centre during the initial weeks. However, as concerns were raised about national passports being confiscated as a precondition for obtaining refugee ID cards, the rate of Yemeni approaching the registration site significantly slowed down, thus limiting the number of Yemeni refugees obtaining documentation and assistance. Enhanced assistance to Yemeni refugees and a resolution of the issue of passport confiscation should encourage an increase in the number of refugees wishing to be registered, and will more accurately reflect the recent influx of Yemenis to Sudan.

Immediate assistance was provided to seven Sudanese returnees evacuated from Yemen. The Secretariat for Sudanese Working Abroad (SSWA) is working closely with agencies to share information regarding numbers and type of assistance already provided to recent returnees.

A first participatory assessment was conducted with the Yemeni refugees in July 2015.

## ***Humanitarian Needs and Vulnerabilities***

The participatory assessment with Yemeni refugees identified a wide range of protection concerns, including difficulties obtaining documentation (related to administrative barriers and stay permit fees); high expenses related to accommodation; lack of livelihoods opportunities; and a need for mental health interventions, in particular for Yemeni children. Yemeni refugees were reported to have access to government schools and hospitals at the same level as Sudanese nationals. In practice, an alarming number of children reported not to be attending school, and this since their arrival from Yemen. The challenges highlighted were mainly related to the Sudanese curriculum, the differences in the Arabic language, and the inability to cover the school fees. With regard to health, Yemenis reported difficulties in covering medical fees and apprehensive about the quality of treatment available in government hospitals. In contrast to other urban refugee communities in Khartoum, no concerns were raised regarding their legal and physical security, their interaction with police, or their integration within the local community. The attitude of the local communities was described as "hospitable" by many refugees.

These findings were reconfirmed by the Yemeni refugee community in the results of the Yemeni Household Survey and the thematic community feedback sessions, conducted as part of the Comprehensive Urban Population Assessment in Khartoum in 2015. From the preliminary analysis of the Urban Population Assessment, the priorities of the community were identified as: documentation and lack of durable solutions; livelihoods; health; education; shelter and food security.

The groups that were identified as particularly vulnerable and in need of assistance were out-of-school children, female headed households/single women with children, families where the head of

household had been unable to find a job in Sudan, and individuals with serious mental health and medical problems.

In addition, Sudanese returnees and other vulnerable migrants are in need of assistance and are likely to put extra pressure on resources available in their communities of origin and host communities. Sudan is already facing complex emergencies and may not be well positioned to reintegrate returnees in their communities. Among returnees and migrants, there are cases that need close follow-up and assistance as well as cases in need of special healthcare and psychological follow-up. They may not always be positively perceived by host communities and tensions may develop, straining existing family and social networks that have the potential to support returnees and migrants with access to the job market as well as building a social capital.

## ***Response Strategy and Priorities***

The response aims to support the Government of Sudan in providing protection and assistance to Yemeni refugee and host communities, and through this, ensure that the Government is able to maintain its welcoming approach to Yemeni fleeing the current conflict. The strategy also aims to provide reintegration assistance to Sudanese returnees, and assistance to other vulnerable migrants fleeing Yemen to Sudan.

The strategic approach to respond to the needs of the Yemeni refugees as identified above, will be two-fold:

- A) Area-based interventions focusing on education and health to support Government services and institutions in areas hosting a high number of Yemeni refugees. (*Regional Objective 2*)
- B) Targeted assistance to extremely vulnerable individuals within the Yemeni refugee community, including through psychosocial support and mental health interventions, livelihoods initiatives, and the pursuit of resettlement as a durable solution. (*Regional Objective 2 & 3*)

Area-based interventions aim to support both refugee and hosting communities, whereas targeted assistance will focus only on vulnerable new arrivals from Yemen. Individual assistance will thus be limited to registered refugees, including both Yemenis and other nationalities who were refugees in Yemen prior to the conflict, and will be based on special needs profiling. This two-pronged approach aims to ensure that the essential needs of all extremely vulnerable refugees are met, while at the same time enhancing the ability of the Government and the local communities to host this new refugee population.

The needs of Sudanese returnees and other vulnerable migrants from Yemen will be covered through targeted reintegration assistance including start-up business plans, vocational training and job placements, educational and medical assistance.

The key principles of the response are as follows:

**Integration to the current urban programme in Khartoum:** UNHCR, COR and its partners already provide assistance to an urban refugee population of around 32,000 in the Khartoum area. The response will build on and enhance these services to be able to accommodate the growing number of Yemeni refugees approaching UNHCR and its partners.

**Community participation:** Community networks will be strengthened to monitor the situation of refugee, returnee and host communities in different locations and to assist identify extremely vulnerable individuals, raise awareness of their situation, and deliver assistance to urgent cases.

**Self-reliance and long-term solutions:** The Yemeni community has a long history and shares common cultural, economic and social ties with the host community, which should be used for the benefit of new arrivals. Moreover, agencies aim to maximize the possibilities inherent in the urban refugee context, such as the integration of refugees into existing government services and the local economy, so as to ensure self-reliance and reduce dependency on assistance. Similarly, reintegration of Sudanese returnees and other vulnerable migrants will aim at strengthening ties with communities of origin and host communities and provide alternatives for sustainable self-reliance.



Child being checked at a reception centre in Berbera/IOM 2015

Overview of the approach:

	Refugees & host communities		Migrants and returnees
	A) Area-based interventions	B) Targeted assistance	C) Targeted assistance
<b>Description:</b>	Support to Government institutions and services in “high density areas”	Targeted assistance to extremely vulnerable individuals	Targeted assistance to vulnerable individuals
<b>Target beneficiaries:</b>	Host and refugee communities	Individual refugees registered with UNHCR and COR (profiling based on special needs)	Individual returnees identified with assistance of the SSWA as well as other vulnerable migrants fleeing from Yemen
<b>Geographical areas:</b>	Khartoum East, Arquiet East and West, Sahafa/Imtidad (and possibly Omdurman and Medani based on further assessment)	All of Khartoum	According to returnees areas of origin and migrants’ settlements (based on further assessment)
<b>Key partners:</b>	Commissioner for Refugees (COR), Ministry of Education, Ministry of Health, local health/education facilities	COR, Refugee Counseling Services (RCS), Al Fanar, Business and Professional Women Organization (BPWO), NADA, AHFAD and Awatif	Secretariat of Sudanese Working Abroad (SSWA)
<b>Sectors of response:</b>	<ul style="list-style-type: none"> <li>- Health</li> <li>- Livelihood</li> <li>- Education</li> <li>- Mental health interventions</li> </ul>	<ul style="list-style-type: none"> <li>- Psychosocial support/counseling</li> <li>- Livelihoods and financial assistance</li> <li>- SGBV</li> <li>- Legal aid</li> <li>- Child protection</li> <li>- Durable solutions</li> </ul>	<ul style="list-style-type: none"> <li>- Vocational training</li> <li>- Job placements and business plan start-up</li> <li>- Education</li> <li>- Medical and psychosocial assistance</li> <li>- Cash grants</li> </ul>

The approach will be accompanied by a high level advocacy strategy to ensure the continued enjoyment of rights for Yemeni refugees in the Sudan, including access to documentation and effective access to basic services.

## ***Partnership and Coordination***

Implementation will be done through national NGOs and Government institutions, targeting schools and hospitals in areas with high densities of Yemeni refugees. Activities targeting returnees and other vulnerable migrants will be coordinated closely with the Secretariat of Sudanese Working Abroad (SSWA) and relevant line ministries including the Ministry of Labour, as well as through partnerships with vocational training institutions present in the country.

UNHCR and IOM as co-lead will convene coordination meetings with UN agencies, Government, donors and partners (in particular through the Donor Forum and the Sectorial Working Groups) to ensure that activities benefit local communities, and that refugees are included in development plans.

## ***Planned Response***

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<b>Protection</b>	<p><b>Advocacy and capacity building</b></p> <ul style="list-style-type: none"> <li>- Provide training to Government officials on refugee protection.</li> <li>- Advocate for access to documentation and reduced fees of stay, residence and work permits for Yemeni new arrivals.</li> <li>- Enhance coordination with major development actors and donors to ensure support and long term sustainability of the project.</li> </ul>
	<p><b>Documentation</b></p> <ul style="list-style-type: none"> <li>- Register and document arriving refugees.</li> </ul> <p><b>Community based networks and support</b></p> <ul style="list-style-type: none"> <li>- Support existing mechanisms and improve community outreach to identify extremely vulnerable individuals and to involve refugees in community initiatives.</li> </ul> <p><b>SGBV</b></p> <ul style="list-style-type: none"> <li>- Enhance psychosocial services and support for SGBV survivors.</li> </ul>
<b>Education</b>	<p><b>Access and quality</b></p> <ul style="list-style-type: none"> <li>- Establish collaboration with the MoE and key schools in high density areas and identify schools for rehabilitation and material support.</li> <li>- Provide school and tuition fee support to 250 Yemeni refugee children as well Sudanese returnees and other vulnerable migrants fleeing from Yemen.</li> <li>- Support remedial/catch-up classes to out-of-school children.</li> <li>- Open DAFI to Yemeni students (target: 5 students for 2015, 15 students for 2016) and explore the possibility of secondary school scholarships.</li> </ul>
	<p><b>Child protection and safe learning environment</b></p> <ul style="list-style-type: none"> <li>- Integrate school-based psychosocial support and mental health awareness campaigns in schools.</li> <li>- Provide training to teachers and PTAs on the identification of children at risk and referral pathways to existing child protection services.</li> <li>- Expand community network and engage in community awareness-raising campaigns to encourage parents to send children to school and remedial classes, and to inform about the available support opportunities.</li> </ul>

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## Environment and Livelihoods

### Assessment

- Conduct needs and market assessment to assess livelihoods and other needs of the target Sudanese returnee population and other vulnerable migrants.

### Job placement support

- Support job placement services, salary support, and expenses related to potential resettlement to take up the job opportunity for the Sudanese returnee population and other vulnerable migrants.

### Business start-up

- Support Sudanese returnee populations and other vulnerable migrants with starting up businesses, procuring materials and follow up.

### Skills

- Perform vocational skills training according to identified needs for Sudanese returnee population and other vulnerable migrants through identified partners.

### Finance

- Explore access to microfinance mechanisms.

### Financial assistance

- Explore the possibility of cash assistance to be issued through bank or phone cards instead of the current cash assistance (provided refugees can access bank accounts with the documentation available to them in Sudan).

### Work permits

- Advocacy to access work permits at reduced fees based on the legal status as refugees in Sudan.

## Health and Nutrition

### Awareness raising and information sharing

- Development and dissemination of brochures to inform persons of concern about health services available.
- Temporary scale-up of counselling services at RCS and through phone counselling and home visits.

### Quality and access to primary/emergency healthcare

- Establish collaboration with the Ministry of Health and key schools in density areas, in cooperation with RCS.
- Rehabilitation and material support to three public hospitals in high density areas.
- In-kind reintegration grants to cover medical expenses and treatment for returnees and other vulnerable migrants.

### Access to services for persons with disabilities

- Development of a pilot programme for urban refugees with disabilities, including mapping of needs and services, and provision of material support such as wheelchairs, hearing aids, glasses/visual aids, etc.

### Mental health and psychosocial support

- Enhance mental health services, including referral of individual cases.
  - Integrate psychosocial support to education activities for Yemeni children.
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## ***Financial Requirements Summary – SUDAN***

### **Financial requirements by agency (in US dollars)**

<b>Organization</b>	<b>Total Oct-Dec 2015</b>	<b>Total Jan-Dec 2016</b>
IOM	620,674	2,910,126
UNHCR	580,516	1,431,084
<b>Total</b>	<b>1,201,190</b>	<b>4,341,210</b>

### **Financial requirements by sector (in US dollars)**

<b>Sector</b>	<b>Total Oct-Dec 2015</b>	<b>Total Jan-Dec 2016</b>
Protection	372,245	247,755
Education	144,000	966,000
Health and Nutrition	164,150	455,850
Livelihoods	273,714	1,872,286
Operational Support	247,081	799,319
<b>Total</b>	<b>1,201,190</b>	<b>4,341,210</b>

## ***Annex 1: Financial Requirements by Agency and Country (US dollars)***

### ***2015 (October – December)***

<b>ORGANIZATION</b>	<b>DJIBOUTI</b>	<b>ETHIOPIA</b>	<b>SOMALIA</b>	<b>SUDAN</b>	<b>REGIONAL</b>	<b>Total</b>
DRC	244,500		985,960			1,230,460
IOM	2,073,656	1,626,280	3,365,122	620,674	65,000	7,750,732
IRC			892,336			892,336
NRC	97,500		562,920			660,420
SCI			489,796			489,796
UNFPA	805,000		800,000			1,605,000
UNHCR	4,280,000	3,952,914	7,326,515	580,516	636,650	16,776,595
UNICEF	709,560	173,846	3,474,044			4,357,450
WFP	126,474	358,750	1,716,892			2,202,116
WHO			447,470			447,470
<b>TOTAL</b>	<b>8,336,690</b>	<b>6,111,790</b>	<b>20,061,055</b>	<b>1,201,190</b>	<b>636,650</b>	<b>36,412,375</b>

### ***2016***

<b>ORGANIZATION</b>	<b>DJIBOUTI</b>	<b>ETHIOPIA</b>	<b>SOMALIA</b>	<b>SUDAN</b>	<b>REGIONAL</b>	<b>Total</b>
DRC	2,403,000		3,436,000			5,839,000
IOM	11,904,646	6,604,210	12,668,117	2,910,126	258,000	34,345,099
NRC	617,000		3,365,000			3,982,000
SCI			1,736,776			1,736,776
UNFPA	1,950,000					1,950,000
UNHCR	12,831,465	10,352,907	32,474,536	1,431,084	1,311,232	58,401,224
UNICEF	1,939,680	695,383				2,635,063
WFP	574,544	2,398,500	5,876,516			8,849,560
WHO			1,789,880			1,789,880
<b>TOTAL</b>	<b>32,220,335</b>	<b>20,051,000</b>	<b>61,346,825</b>	<b>4,341,210</b>	<b>1,311,232</b>	<b>119,528,602</b>

## ***Annex 2: Financial Requirements by Country and Sector (US dollars)***

***2015 (October – December)***

<b>SECTOR</b>	<b>DJIBOUTI</b>	<b>ETHIOPIA</b>	<b>SOMALIA</b>	<b>SUDAN</b>	<b>REGIONAL</b>	<b>TOTAL</b>
Protection	1,762,670	1,143,758	3,605,123	372,245		6,883,796
Education	380,000	235,000	578,129	144,000		1,337,129
Food	197,874	597,835	2,456,609			3,252,318
Health and Nutrition	1,631,700	131,750	1,795,053	164,150		3,722,653
Livelihoods	485,680	720,000	1,952,110	273,714		3,431,504
Shelter and NFIs	1,064,200	1,500,845	847,236			3,412,281
WASH	779,990	375,000	1,015,760			2,170,750
Logistics and Transport	658,080	1,049,000	2,280,358			3,987,438
Operational Support	1,376,496	358,602	5,530,677	247,081	701,650	8,214,506
<b>TOTAL</b>	<b>8,336,690</b>	<b>6,111,790</b>	<b>20,061,055</b>	<b>1,201,190</b>	<b>701,650</b>	<b>36,412,375</b>

***2016***

<b>SECTOR</b>	<b>DJIBOUTI</b>	<b>ETHIOPIA</b>	<b>SOMALIA</b>	<b>SUDAN</b>	<b>REGIONAL</b>	<b>TOTAL</b>
Protection	6,212,330	4,517,313	22,258,892	247,755		33,236,290
Education	970,000	1,397,062	500,000	966,000		3,833,062
Food	860,144	4,468,100	6,978,046			12,306,290
Health and Nutrition	4,863,800	328,250	3,296,428	455,850		8,944,328
Livelihoods	3,680,720	3,080,000	625,000	1,872,286		9,258,006
Shelter and NFIs	2,916,800	3,006,982	5,157,407			11,081,189
WASH	3,630,960	875,000	1,979,200			6,485,160
Logistics and Transport	3,375,610	1,201,000	7,170,438			11,747,048
Operational Support	5,709,971	1,177,293	13,381,414	799,319	1,569,232	22,637,229
<b>TOTAL</b>	<b>32,220,335</b>	<b>20,051,000</b>	<b>61,346,825</b>	<b>4,341,210</b>	<b>1,569,232</b>	<b>119,528,602</b>

### ***Annex 3: Financial Requirements by Country, Agency and Sector (US dollars)***

***2015 (October-December)***

Organization	Protection	Education	Food	Health and Nutrition	Livelihoods	Shelter and NFIs	WASH	Logistics and Transport	Operational Support	Total
<b>DJIBOUTI</b>	<b>1,762,670</b>	<b>380,000</b>	<b>197,874</b>	<b>1,631,700</b>	<b>485,680</b>	<b>1,064,200</b>	<b>779,990</b>	<b>658,080</b>	<b>1,376,496</b>	<b>8,336,690</b>
DRC	135,600				60,000				48,900	244,500
IOM	756,070		21,400	438,700	25,680	64,200	80,990	208,080	478,536	2,073,656
NRC							75,000		22,500	97,500
UNFPA	205,000			600,000						805,000
UNHCR	406,000	350,000	50,000	500,000	400,000	1,000,000	350,000	450,000	774,000	4,280,000
UNICEF	260,000	30,000		93,000			274,000		52,560	709,560
WFP			126,474							126,474
<b>ETHIOPIA</b>	<b>1,143,758</b>	<b>235,000</b>	<b>597,835</b>	<b>131,750</b>	<b>720,000</b>	<b>1,500,845</b>	<b>375,000</b>	<b>1,049,000</b>	<b>358,602</b>	<b>6,111,790</b>
IOM	906,280				720,000					1,626,280
UNHCR	63,632	235,000	239,085	131,750		1,500,845	375,000	1,049,000	358,602	3,952,914
UNICEF	173,846									173,846
WFP			358,750							358,750

Organization	Protection	Education	Food	Health and Nutrition	Livelihoods	Shelter and NFIs	WASH	Logistics and Transport	Operational Support	Total
<b>SOMALIA</b>	<b>3,605,123</b>	<b>578,129</b>	<b>2,456,609</b>	<b>1,795,053</b>	<b>1,952,110</b>	<b>847,236</b>	<b>1,015,760</b>	<b>2,280,358</b>	<b>5,530,677</b>	<b>20,061,055</b>
DRC	333,000		150,500	12,500		22,000		134,660	333,300	985,960
IOM	45,000		419,633	64,212		279,160	34,000	1,185,085	1,338,032	3,365,122
IRC	51,600			107,500			64,500	111,456	557,280	892,336
NRC	81,250					30,820	67,550	317,000	66,300	562,920
SCI	27,000		200,000	75,000		60,000	22,300	10,000	95,496	489,796
UNFPA	150,000			500,000					150,000	800,000
UNHCR	2,201,323	50,000		75,000	1,952,110	455,256		368,890	2,223,936	7,326,515
UNICEF	715,950	528,129		482,955			827,410	153,267	766,333	3,474,044
WFP			1,686,476	30,416						1,716,892
WHO				447,470						447,470
<b>SUDAN</b>	<b>372,245</b>	<b>144,000</b>		<b>164,150</b>	<b>273,714</b>				<b>247,081</b>	<b>1,201,190</b>
IOM		144,000		40,000	273,714				162,960	620,674
UNHCR	372,245			124,150					84,121	580,516
<b>REGIONAL</b>									<b>636,650</b>	<b>636,650</b>
IOM									65,000	65,000
UNHCR									636,650	636,650
<b>TOTAL</b>	<b>6,883,796</b>	<b>1,337,129</b>	<b>3,252,318</b>	<b>3,722,653</b>	<b>3,431,504</b>	<b>3,412,281</b>	<b>2,170,750</b>	<b>3,987,438</b>	<b>8,214,506</b>	<b>36,412,375</b>

**2016**

Organization	Protection	Education	Food	Health and Nutrition	Livelihoods	Shelter and NFIs	WASH	Logistics and Transport	Operational Support	Total
<b>DJIBOUTI</b>	<b>6,212,330</b>	<b>970,000</b>	<b>860,144</b>	<b>4,863,800</b>	<b>3,680,720</b>	<b>2,916,800</b>	<b>3,630,960</b>	<b>3,375,610</b>	<b>5,709,971</b>	<b>32,220,335</b>
DRC	542,400				180,000	700,000	500,000		480,600	2,403,000
IOM	3,559,930		85,600	1,754,800	1,600,720	256,800	323,960	1,575,610	2,747,226	11,904,646
NRC						175,000	300,000		142,000	617,000
UNFPA	750,000			1,200,000						1,950,000
UNHCR	1,100,000	850,000	200,000	1,400,000	1,900,000	1,785,000	1,600,000	1,800,000	2,196,465	12,831,465
UNICEF	260,000	120,000		509,000			907,000		143,680	1,939,680
WFP			574,544							574,544
<b>ETHIOPIA</b>	<b>4,517,313</b>	<b>1,397,062</b>	<b>4,468,100</b>	<b>328,250</b>	<b>3,080,000</b>	<b>3,006,982</b>	<b>875,000</b>	<b>1,201,000</b>	<b>1,177,293</b>	<b>20,051,000</b>
IOM	3,524,210				3,080,000					6,604,210
UNICEF	695,383									695,383
UNHCR	297,720	1,397,062	2,069,600	328,250		3,006,982	875,000	1,201,000	1,177,293	10,352,907
WFP			2,398,500							2,398,500

Organization	Protection	Education	Food	Health and Nutrition	Livelihoods	Shelter and NFIs	WASH	Logistics and Transport	Operational Support	Total
<b>SOMALIA</b>	<b>22,258,892</b>	<b>500,000</b>	<b>6,978,046</b>	<b>3,296,428</b>	<b>625,000</b>	<b>5,157,407</b>	<b>1,979,200</b>	<b>7,170,438</b>	<b>13,381,414</b>	<b>61,346,825</b>
DRC	960,000		600,000	120,000		600,000	240,000	160,000	756,000	3,436,000
IOM	3,091,092			438,078		1,287,407	250,000	3,804,344	3,797,196	12,668,117
NRC	178,000					1,670,000	1,100,000	417,000		3,365,000
SCI	81,000		600,000	600,000			89,200	30,000	336,576	1,736,776
UNHCR	17,948,800	500,000		250,000	625,000	1,600,000	300,000	2,759,094	8,491,642	32,474,536
WFP			5,778,046	98,470						5,876,516
WHO				1,789,880						1,789,880
<b>SUDAN</b>	<b>247,755</b>	<b>966,000</b>		<b>455,850</b>	<b>1,872,286</b>				<b>799,319</b>	<b>4,341,210</b>
IOM		576,000		160,000	1,522,286				651,840	2,910,126
UNHCR	247,755	390,000		295,850	350,000				147,479	1,431,084
<b>REGIONAL</b>									<b>1,311,232</b>	<b>1,311,232</b>
IOM									258,000	258,000
UNHCR									1,311,232	1,311,232
<b>TOTAL</b>	<b>33,236,290</b>	<b>3,833,062</b>	<b>12,306,290</b>	<b>8,944,328</b>	<b>9,258,006</b>	<b>11,081,189</b>	<b>6,485,160</b>	<b>11,747,048</b>	<b>22,637,229</b>	<b>119,528,602</b>

## Annex 4: Monitoring Framework

### REGIONAL REFUGEE AND MIGRANT RESPONSE PLAN monitoring framework

Regional Indicators to monitor the RMRP - October 2015

ID	Impact Indicator / Output	Impact Indicator or Output description	Performance Indicator	Unit	Frequency of reporting
<b>Strategic Objective 1. Refugees, migrants and other mobile populations fleeing from Yemen have access to safe, orderly and humane movements enabled through a harmonized, comprehensive and coordinated approaches in the region.</b>					
1.1.1	Impact indicator	Extent to which the Gulf of Aden strategy is implemented / Extent migration law and policy contain protection safeguards		%	Quarterly
1.2.1	Output	Advocacy conducted	# of advocacy interventions, events, workshops and seminars made.	#	Monthly
<b>Strategic Objective 2. Affected populations, especially vulnerable populations and those with specific needs and those faced with protection risks, have access to protection and assistance upon arrival, regardless of their migratory status, and enjoy a dignified stay in the country with access to basic services and freedom of movement.</b>					
2.1.1	Impact indicator	% of persons of concern registered on individual basis disaggregated by sex, age, location and diversity.		%	Quarterly
2.2.1	Impact indicator	Extent reception arrangements are adapted to assist persons of concern with specific needs		%	Quarterly
2.2.2	Output	Persons of concern at risk identified and individually supported	% of vulnerable individuals with specific needs* supported with material and/or psychosocial assistance  * persons with specific needs include only: survivors of exploitation, torture, trafficking, SGBV, unaccompanied minors	%	Monthly
2.3.1	Output	Sectoral cash grants or vouchers provided	% of PoC provided with cash/vouchers for livelihoods provisioning	%	Monthly
<b>Strategic Objective 3. Refugees and migrants have access to durable solutions such as regularisation of stay, voluntary return and reintegration, local integration, resettlement for vulnerable individuals with specific protection needs, as well as promoting labour mobility schemes.</b>					
<i>Applicable for refugees and migrants in Djibouti, Ethiopia, Sudan</i>					
3.1.1	Output	Comprehensive Solutions profiling of population conducted	# of intention surveys conducted after the arrival (not registration )	#	quarterly
<i>Applicable for Somali returnees in Somalia</i>					
3.2.1	Output	Land, housing, property and documentation rights of persons of concern are upheld	# of decisions of administrative or judicial bodies leading to reappropriation of land, housing, property or documentation of PoC	#	Monthly
3.2.2	Output	Partnerships with development actors established	# of development projects that benefit PoC	#	Monthly
3.2.3	Output	Partnerships with development actors established	# of joint assessments/programmes that UNHCR participated with Development actors	#	Monthly
<b>Strategic Objective 4. Strengthen partnerships (at national and regional levels) to address the complexities of mixed migratory flows and promoting dialogue and cooperation among source, transit and destination countries as well as supporting existing coordination mechanisms with regional organizations and initiatives (IGAD, EU, AU, GCC, OIC, RMMS, Khartoum process, and Sana'a Declaration)</b>					
4.1.1	Impact indicator	Extent cooperation among partners effective / Extent State cooperates with UN and NGO partners in addressing protection concerns and humanitarian needs		%	Quarterly
4.1.2	Output	collection, collation and dissemination of information by partners harmonized	# of information products shared with partners	#	Monthly
4.1.3	Impact indicator	Partnerships established with migration and development actors at national and regional levels	Partnerships on migration issues established with actors at national and regional levels (yes/no)	Y/N	Quarterly