



© HI

Country sheet

# Somalia/Somaliland

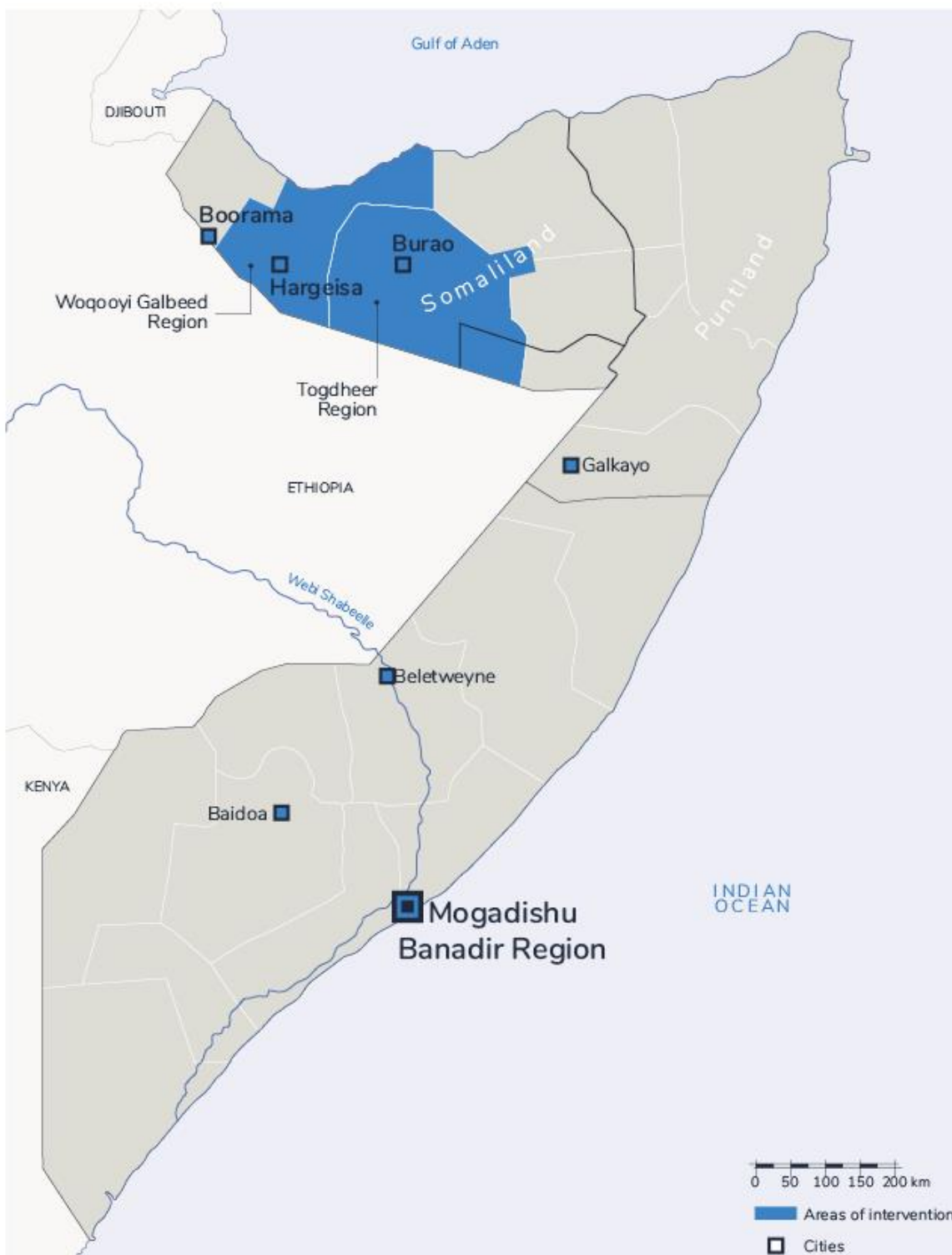




## HI Team and intervention areas

The HI Somalia program has 23 staff members.

### Somaliland





## General data of the country

### General data

Country	Somalia	Ethiopia	France
Population	18 143 378	126 527 060	68 170 228
IHDI		0.324	0.82
SIGI Score	51.3	30.8	10.1
Maternal mortality	621	267	8
GINI Index		35	31.5
Population with UNHCR Mandate	3 901 330	4 307 847	762 378
INFORM index	8.9	7.1	2.9
Fragile State Index	111.3	98.1	28.3
Public social Protection		7.4	100
Net Official development assistance received	1 937.8	4 925.6	

### Humanitarian law instruments ratified by the country

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

### Geopolitical analysis

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

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



## Summary of HI presence in the country

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

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

HI is implementing two projects in both Somalia and Somaliland, focusing on promoting inclusive humanitarian action, protection against abuse & violence, rehabilitation and MHPSS. The two projects are funded by German Federal Foreign Office (GFFO). First project is titled "Mainstreaming Disability in Global and Local Humanitarian Action in Line with the Inter Agency Standing Committee (IASC) Guidelines on Inclusion – Leave no one behind phase 3" this project is more on operationalisation of IASC guideline on the inclusion of persons with disabilities in humanitarian action through capacitating humanitarian actors, reinforcement of interagency coordination mechanisms, piloting of surge capacities more on ToT (Training of Trainers) to RAAL lab and documentation of best practices & lessons learnt. Second GFFO funded project is "Rehabilitation, Inclusive Humanitarian Action, MHPSS, & Stimulation Therapy in Crisis-Affected Sub-Saharan Africa for vulnerable groups (RIMSCASSA)" focusing more on provision of functional & physical rehabilitation services to persons with disability, Stimulation Therapy for children suffering from malnutrition, MHPSS persons in psychological distress and enhanced inclusion in general humanitarian response amongst crisis-affected populations.

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





## Overview of Ongoing projects

Main sector of intervention	Main activities	Beneficiaries	Location	Dates of beginning and end of the project	Donors
<b>Protection</b> IHA Inclusive Humanitarian Action  <b>Rehabilitation, Stimulation Therapy, psychosocial support and referrals (RIMSCASSA).</b>	<ul style="list-style-type: none"> <li>Inclusive humanitarian action capacity building on humanitarian actors &amp; cluster coordination mechanisms.</li> <li>Assessments, review of tools and provision of technical advisories to humanitarian actors.</li> <li>Provision of functional and physical rehabilitation services</li> <li>Stimulation therapy from children suffering malnutrition.</li> <li>Provision of primary/mental health and psychosocial support services (MHPSS) and referral.</li> <li>Community leaders' trainings on disability inclusion</li> <li>Psychological first aid trainings for frontline health workers in identification of psychosocial needs.</li> <li>Establishing peer support groups.</li> </ul>	<b>MOGADISHU</b> <ul style="list-style-type: none"> <li>150 partners from different clusters will be trained on disability inclusion to make their programs more inclusive</li> </ul> <b>BURAO &amp; LAS ANOD</b> <ul style="list-style-type: none"> <li>300 community leaders and focal points in the Internally Displaced Persons camps will be trained on the identification of people in need of rehabilitation, primary and mental health services</li> <li>400 people with disabilities identified through community mobilization will be referred for comprehensive rehabilitation care</li> <li>10 support groups for distressed people facing similar experiences will be established</li> <li>1 staff will be trained in stimulation therapy.</li> <li>300 children with their parents will benefit from stimulation therapy. Each child with his/her parents will receive 7 sessions in total 4 200 sessions</li> <li>Conduct 16 awareness-raising sessions for community leaders on stimulation for malnourished children</li> </ul>	Mogadishu  Burao  Las Anod	July 2024 – June 2026	GFFO



## HI\_CountrySheet-External\_Long\_SOMALIA-SOMALILAND-2024

		<ul style="list-style-type: none"> <li>• 400 participants from frontline health workers will be trained in Psychological First Aid (PFA)</li> <li>• Set up 50 peer support sessions for 10 groups</li> <li>• 300 people will be benefit general health.</li> </ul>			
<b>Inclusive Humanitarian Action – IHA</b>  Mainstreaming Disability in Global and Local Humanitarian Action in Line with the IASC (Inter Agency Standing Committee) Guidelines on Inclusion – Leave no one behind phase 3	<ul style="list-style-type: none"> <li>• Mapping of key stakeholders interested project</li> <li>• Capacity building humanitarian actors interested on inclusive humanitarian action.</li> <li>• Identification of assessment tools, review and technical advisory</li> <li>• Provision of ToT Training of Trainers training on surge capacity (RAAL) Lab</li> <li>• Supporting interagency coordination mechanism</li> <li>• Documentation of best practices and lesson learnt</li> </ul>	<ul style="list-style-type: none"> <li>• 80% participants in capacity-building activities under Result 1 reported that they have applied the IASC Guidelines, the learning and support materials or recommendations by the project in their teams or with their partners by end of the project</li> <li>• 80% users report improved identification of disability-specific barriers and risks applying the newly developed/ adapted tools by end of the project</li> <li>• 80% actors report improved evidence in-line with the IASC Guidelines for more inclusive programming in humanitarian action by end of the project</li> <li>• 260 staff of humanitarian actors participated in trainings</li> <li>• 10 organizations/ field teams which received technical support</li> <li>• 7 learning materials (learning packages, e-learning courses, etc.) published online on operationalizing the IASC Guidelines for humanitarian actors</li> <li>• 2 Disability-inclusion in-line with the IASC Guidelines was integrated into # humanitarian action module curricula at 2 German universities</li> <li>• 7 dissemination activities of mapping reports to humanitarian community by end of 2022</li> <li>• 6 assessment and monitoring tools adapted and / or developed in-line with the IASC Guidelines</li> <li>• 2 how-to-guidance documents on the development/adaption process and tool used during pilot phase</li> <li>• 60 focal persons trained on IASC Guidelines in the targeted countries by end of 2023</li> </ul>	Benadir, Mogadishu & Hargeisa	January 2022 – December 2024	GFFO



## HI\_CountrySheet-External\_Long\_SOMALIA-SOMALILAND-2024

		<ul style="list-style-type: none"><li>• 12 technical support assignments / packages on operationalizing the IASC Guidelines provided in the target countries</li><li>• 20 persons trained in 2-3 targeted countries for surge capacity to operationalize recommendations from the IASC Guidelines by end of 2023</li><li>• 4 reports by Emergency IHA Manager highlighting operational recommendations to ensure inclusive emergency response implementation in-line with the IASC Guidelines</li></ul>			
--	--	---	--	--	--

## Logos of Donors

GFFO

