



Somali Red Crescent Society

# ANNUAL REPORT







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**ANNUAL  
REPORT**

2023



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# Abbreviations

AIDS	Acquired Immune Deficiency Syndrome
ALMANACH	Algorithm Management of Childhood
ANC	Antenatal Care
AWD	Acute Watery Diarrhea
BEmONC	Basic Emergency Obstetric Neonatal Care
Berked/Barkard	Berkad is a water reservoir used in arid areas to collect water during the wet season used in the dry season, while berkard are cement water systems build on the ground to collect water.
CBHFA	Community Based Health and First Aid
CRP	Community Resilience Project
DHIS2	District Health Information System 2
DM	Disaster Management
DRR	Disaster Risk Reduction
EPI	Expanded Programme on Immunization
FCHWs	Female Community Health Workers
FGM/C	Female Genital Mutilation or Cutting
GAC	Global Affairs Canada
HCiD	Health Care in Danger
HIV	Human Immune Deficiency Virus
IDP	Internally Displaced People
IEC	Information, Education and Communication
IFRC	International Federation of Red Cross & Red Crescent Societies
IHCP	Integrated Health Care Programme
IHL	International Humanitarian Law
IMAM	Integrated Management of Acute Malnutrition
IMNC	Integrated Management Neonatal Child Illnesses
IYCF	Infant and Young Child Feeding
NFIs	Nonfood Items
NYSS	Custom Software platform for data collection, management
ORS	Oral Rehydration Salt
PGI	Protection Gender Inclusion
PHC	Primary Health Care
PMTCT	Prevention of Mother to Child Transmission
PNC	Postnatal Care
PNS	Participating National Society
RCMs	Red Cross Messages
RCRC	Red Cross Red Crescent
RFL	Restoring Family Links
PGI	Protection, Gender and Inclusion
PLW	Pregnant Lactating Women
RTI	Respiratory Tract Infections
STGs	Protocol Standard Treatment Guidelines Protocol
SAF	Safer Access Framework
TBAs	Traditional Birth Attendants
TSFP	Therapeutic Supplementary Feeding Programme
ToR	Training of Trainers
VCT	Voluntary Counseling and Testing
WW	Weapon Wounded

## **VISION**

Strong communities enabled to deal with the causes of suffering and respond to the needs of vulnerable people.

## **MISSION**

To prevent and alleviate human suffering by working with communities, local authorities and other partners to provide basic and quality services to vulnerable people in accordance with Fundamental Principles of the Red Cross and Red Crescent Movement.

## **CORE VALUES**

Integrity  
Commitment  
Transparency  
Accountability  
Value for People  
Teamwork

## **FUNDAMENTAL PRINCIPLES OF THE RCRC MOVEMENT**

The Principles of the International Red Cross and Red Crescent Movement which guides the National Society include the following:

Humanity  
Impartiality  
Neutrality  
Independence  
Voluntary Service  
Unity  
Universality

# Somali Red Crescent Branches

<b>REGION</b>	<b>NAME OF THE BRANCH</b>
Baidoa	Bay
Bardera	Gedo
Beledweyn	Hiran
Berbera	Sahel
Borama	Awdal
Bosaso	Bari
Burao	Togdheer
Dusamareb	Galgadud
Erigavo	Sanag
Galkayo	Mudug
Garowe	Nugal
Hargeisa	Galbeed
Huddur	Bakol
Jowhar	Middle Shabelle
Kismayo	Lower Jubba
Lasanod	Sool
Merca	Lower Shabelle
Mogadishu	Banadir
Bari	Bosaso

# Remarks from the SRCS President

In 2023 we experienced severe drought and an El Niño induced floods across the country.

The National Society in collaboration with its partners focused on lifesaving assistance and flood prevention and preparedness response activities to mitigate the suffering of the affected and vulnerable people due to the climate related disasters.

During the same year, the Society made significant evidence-based progress in reviewing and developing a wide number of organizational Policies, Strategies and Guidelines.

I would like to express my appreciation to our Staff, Members and Volunteers for working tirelessly in executing the humanitarian mandate of SRCS.

I acknowledge and express my gratitude to our partners namely, ICRC, IFRC, Norwegian Red Cross, German Red Cross, British Red Cross, Finnish Red Cross, Canadian Red Cross, Icelandic Red Cross, Danish Red Cross, Turkish Red Crescent, Kuwait Red Crescent, Qatar Red Crescent, Italian Red Cross, Arab Red Crescent, and Red Cross Organization (ARCO), Unicef, WHO and Hormuud Telecommunication Company for their support.

**Yusuf Hassan Mohamed**  
SRCS President

“

...the Society made significant evidence-based progress in reviewing and developing a wide number of organizational Policies, Strategies and Guidelines.”





# Integrated Health Care Programme

## PRIMARY HEALTH CARE

SRCS runs a total of 65 fixed and 35 mobile clinics that provide expanded package of health services to more than 1.2 million people most of whom are women and children. A total of 1,231,067 patients were treated in the clinics in hard to reach areas.

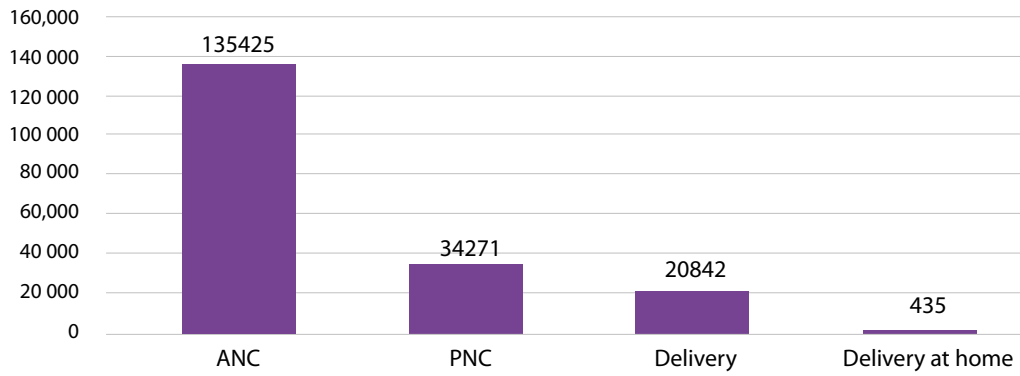
Item	Total
Fixed Health facilities	65
Mobile health facilities deployed	35
Estimated target population	1,231,067
<1 year	46,781
<5 years	221,592
Pregnant women	61,553
Women Childbearing Age (15-49 years)	270,835

## SAFE MOTHERHOOD

SRCS clinics provide Antenatal services to ensure early detection of pregnancy complications and risks associated with pregnancy and childbirth. A total of 270,835 pregnant mothers received antenatal services from qualified midwives. Out of the total, 135,425 mothers were given antenatal services two times and more. Moreover, 46,655 pregnant women were provided with multiple micronutrients and 48,452 received ferrous sulphate (iron) supplementation for prevention of anemia in pregnancy. 34,271 mothers received postnatal care at SRCS health facilities.



### Safe motherhood



## IMMUNIZATION

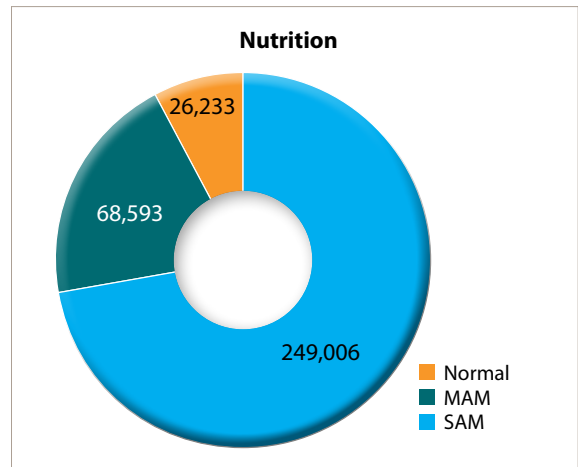
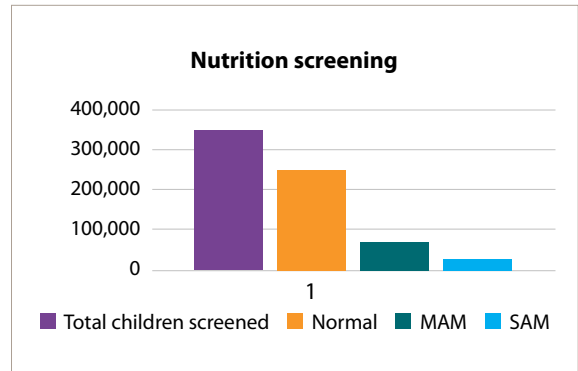


SRCS provided child and maternal vaccination services to children under five years, pregnant and women of childbearing age to ensure they are fully protected from diseases, illnesses and mortality.

Routine child immunization against childhood preventable diseases is one of the essential services delivered by the SRCS static and mobile clinics. A total of 46,664 children under one year were fully immunized against Measles, Diphtheria, Pertussis, Tetanus, Hemophilic influenza type b (Hib), Hepatitis B, Tuberculosis and Poliomyelitis.

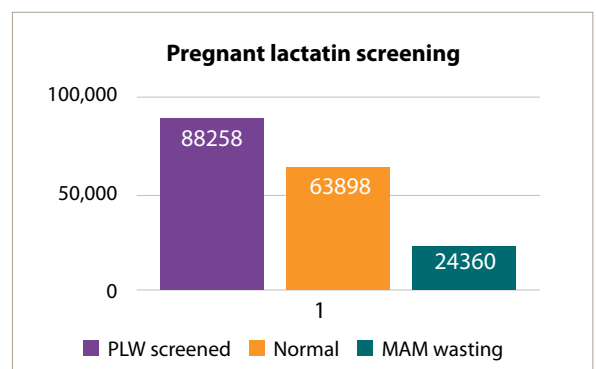
## NUTRITION

The nutritional status of children under five years of age was assessed monthly. Children are usually screened for anthropometric measurements together with the Mid Upper Arm Circumference (MUAC) measure. Staff used anthropometric measures to classify malnutrition in the children while family led MUAC was encouraged with intensified efforts in operational areas.



## INFANT YOUNG CHILD FEEDING PROMOTION

Complimentary to the nutritional surveillance of the children, the targeted clinics also carried out activities to promote infant nutrition, targeting pregnant and lactating mothers as well as child caregivers. Individual and group nutritional promotion sessions were conducted to facilitate discussions on Infant and Young Child Feeding (IYCF) practices that aim at preventing child malnutrition by promoting evidence-based recommended feeding practices. This enhances reaching care of first 1,000 days of the child.



## HEALTH PROMOTION

SRCS has a network of female community health workers linked to its health clinics. They are trained volunteers stationed in villages near the health clinics and collaborate with midwives and health facility staff to provide tailored health education messages on mothers' and children's health, tracing and referral of pregnant women, postnatal mothers and their infants, sexual violence survivors, fistula, comprehensive

awareness and link them to the health centers to receive the care they need.

All patients who underwent treatment were routinely given health education on disease prevention, precautions, prescription administration, and follow-up visits. A total of 902,435 beneficiaries were given health promotion sessions.

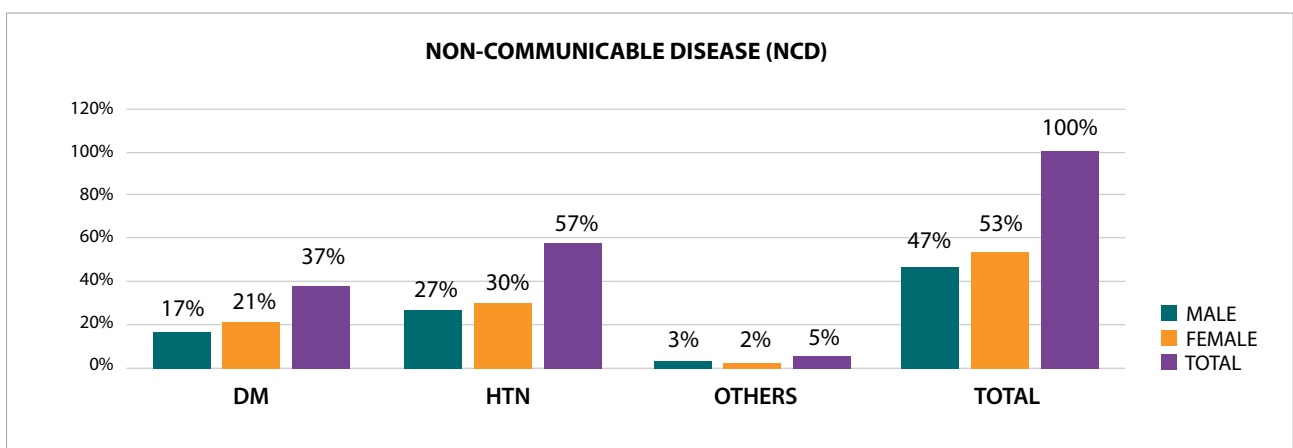


## NON-COMMUNICABLE DISEASES

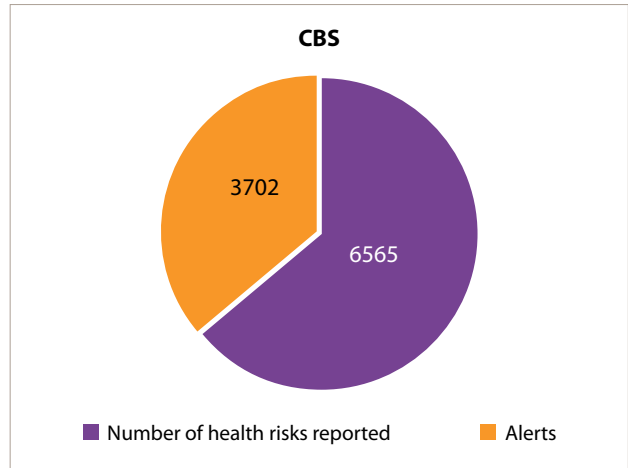
The program focused on diabetes and hypertension treatment. Clinical professionals and volunteers were trained in management, prevention and control of diabetic and hypertensive patients. The program is integrated in the current health service delivery, including a distinct program that provides NCD care to all integrated facilities.

SRCS piloted non-communicable disease program in selected cross border fixed facilities. Training was conducted, while kits and key equipment used for early detection of diseases were received.

Category	Patient treated with NCD		
	Male	Female	Total
DM	164	203	367
HTN	265	297	562
Others	28	23	51
Total	457	523	980



## COMMUNITY-BASED SURVEILLANCE



Community health programs focus on community-based surveillance, primary healthcare, reproductive health and health care in danger. The community-based surveillance (CBS) is operated in all branches of SRCS in the different regions with the support of the different movement partners through strong case reporting system which assists Ministry of Health with early detection and service prioritization.

NYSS is an electronic community surveillance where trained community volunteers send alerts using a designed text code via phone and then transmit the message to the system to capture real-time disease events and trigger action for responsible people as well as generated feedback guidance on how the volunteers are to manage the raised alerts.



## INTEGRATED COMMUNITY CASE MANAGEMENT (ICCM)

Integrated Community Case Management is a strategy to train, support, and supply Community Health Workers (CHW) to provide diagnostic, treatment, and referral services for three common, preventable, and curable childhood illnesses, malaria, pneumonia, and diarrhea.

A total of 3,699 children were treated, 2,322 cases for pneumonia and 2,377 for diarrhea. On January 20<sup>th</sup> 2023, a training session on Integrated Community Case Management attended by 40 community health volunteers was held respectively in 20 villages in Togdheer region.



## FIRST AID AND PRE-HOSPITAL EMERGENCY CARE

The First Aid and Pre-hospital Emergency Care is one of the core activities of the SRCS. The SRCS staff and volunteers are consistently present during various emergencies, offering timely and effective pre-hospital first aid services.

In the branches under SRCS Mogadishu Coordination Office, a total of 4,687 persons including staff and volunteers benefited from routine first aid training and 575 people received community first training. The Mogadishu Ambulance Response Team made 3,981 responses while Galkayo Response team made 1,323 including weapon wounded and non-weapon wounded emergency cases.

In the branches under the SRCS Coordination Office in Hargeisa, a total of 1,950 were trained while 255 individuals received First Aid training in 11 villages. The response volunteers assisted 155 people. In Sool region, the Response Team assisted 2,434 cases of trauma and 2,124 non-trauma cases. The medical cases assisted were 310 in general. A total of 2,000 First Aid booklets were distributed in six branches. 50 kits were distributed to target communities.

As for the capacity building, a new Centre for Emergency Medical Services, which hosts first aid responders and ambulance fleet, was inaugurated in Mogadishu on 27<sup>th</sup> December. 19 responders were recruited and given induction training. New ambulances were procured and distributed to Kismayo and Dusamareb branches. Two training courses were conducted in Beletwein and Kismayo respectively.



# Keysaney War Wounded and Fistula Hospital



Keysaney hospital provides war surgery and emergency medical care for civilians and the war wounded. The total outpatient visits were 4,863 and 2,018 patients were admitted.

OPD AND TRAUMA SERVICE	TOTAL
Overall OPD	4,863
Weapon Wounded	488
Non-Weapon Wounded	937
Medical	593

A total of 250 students from local medical universities and institutions received training and internship in the hospital. Hospital staff received different training courses to improve their capacity to deliver qualified health service.

The hospital celebrated its 32<sup>nd</sup> anniversary on 2<sup>nd</sup> February. Similarly, the hospital marked the International Day to End Obstetric Fistula on 23<sup>rd</sup> May. The two events were attended by the local authorities, community members, prominent religious elders, media and business people.

## OBSTETRIC FISTULA DEPARTMENT

The Fistula department continue to provide life-changing surgeries to women with obstetric fistula and continue to build capacity of the hospital staff to deliver quality treatment.

A total of 276 patients visited the fistula department for consultation. 209 patients were admitted for treatment. 194 patients had undergone fistula operation and 97% of the cases were successful. 39 patients were repaired and reintegrated



to their community. The SRCS branches referred 60 patients to health clinics or Keysaney hospital. Expenses of travel, accommodation and other essential needs of the patients and caregivers were covered.

### Fistula Operations

PATIENTS TREATED	DIAGNOSIS	SERVICES PROVIDED
70	VVF	Repair
32	VVF	Repair
86	Perineal Tear	Repair
6	VVF or RVF	Pre-required operation
<b>194</b>		

A total of 150 community volunteers were trained and 500 Internally Displaced Persons in Mogadishu were given awareness sessions on prevention and referral of obstetric fistula. 210 medical students were offered training on fistula prevention, case identification and referral system. 18 midwives from Dhoblee, Kismayo, Bardera, Jowhar, Mogadishu, Galkayo, Garowe and Bosaso received training on obstetric fistula prevention. A radio program on fistula services was launched in Baled-Hawo, Bal'ad, Guriel and Mogadishu.

The Hospital Community Engagement Officer and Head Nurse attended a four-week course in Hamlin Fistula in Addis Ababa, Ethiopia. 14 staff members attended a training course on Essential Care of Newborn and Critical Care Nursing held in Keysaney hospital. The Fistula Project Manager attended a two-week training on Monitoring and Evaluation offered by the AMREF International University in Nairobi, Kenya. A Fistula Surgeon completed a four-week training on Advance Fistula Surgeries at Gyno Care Women and Fistula hospital in Eldoret, Kenya.



## PHYSICAL REHABILITATION PROGRAM

The rehabilitation program for people with disabilities comprises of three Rehabilitation Centres strategically located in Mogadishu, Hargeisa and Galkayo. The Centres provide highly specialized tertiary services for persons with physical disabilities, including prosthetics, orthotic appliances, walking aids, physiotherapy service, wheelchair service and clubfoot management. In total the three rehabilitation centres supported 8,292 new beneficiaries.

The Centres carried out Rehabilitation Accessibility program which is intended to enable the persons with disabilities who are not able to access the rehabilitation service due to distance and insufficient economic capacity to afford the costs related to physical rehabilitation services. 49 beneficiaries benefitted from the program receiving transportation, living allowance and accommodation support.

The Physical Rehabilitation Program Annual Coordination Meeting was held in Borama from 24<sup>th</sup> – 27<sup>th</sup> July 2023 aimed at presenting achievement and challenges of the three centres, sustainability of the centre, ways forward to overcome raised challenges and extend and strengthen the service quality. The meeting was attended by SRCS Leadership, Rehab Management staff, the Norwegian Red Cross, ICRC and IFRC.

The meeting discussed various issues related to the sustainability and development of SRCS Rehabilitation Centres. The meeting agreed key action points which need to be addressed.



During the year, the Centres celebrated the World Clubfoot Day on 3<sup>rd</sup> June 2023 and the International Disability Day on 3<sup>rd</sup> December 2023. The theme of the year was “**United in action to rescue and achieve the Sustainable Development Goals (SDGs) for, with and by persons with disabilities**”. This was a reminder that people with disability in the community are to be given special care and increase their access to the available services.



## TRAININGS AND WORKSHOPS

Type of training	No of participants	Date	Location
Diabetic foot and Foot Orthosis	6 staff	May-June	Kigali, Rwanda
Clubfoot Data Management	2 staff	June	Darussalam, Tanzania
Health Care in Danger	36 staff	March	Mogadishu
Clubfoot Cast	5 staff	July	Mogadishu
African Clubfoot Training	4 staff		Mogadishu
Sensitization workshop	30 Volunteers		Hargeisa
Round table discussion	34 staff		Hargeisa
Advanced and basic clubfoot training	16 staff	December	Galkayo
Disability Identification and Rehabilitation	14 Volunteers	July 2023	Galkayo
Advanced and Basic Clubfoot Treatment Provider	10 staff	August 2023	Galkayo
Basic Rehabilitation Service	8 Rehab Focal Persons	November 2023	Galkayo
Rehabilitation of Amputees	2 staff		Kigali, Rwanda
Physioplus	3 Staff	June - December 2023	Online
1 Year Rehabilitation therapy assistant (completed)	1 staff	December 2023	India
1 Year Prosthetics and Orthotics Technician Course (completed)	1 staff	August 2023	Cambodia
Bench Workers Training	2 bench workers	June and November 2023	Galkayo

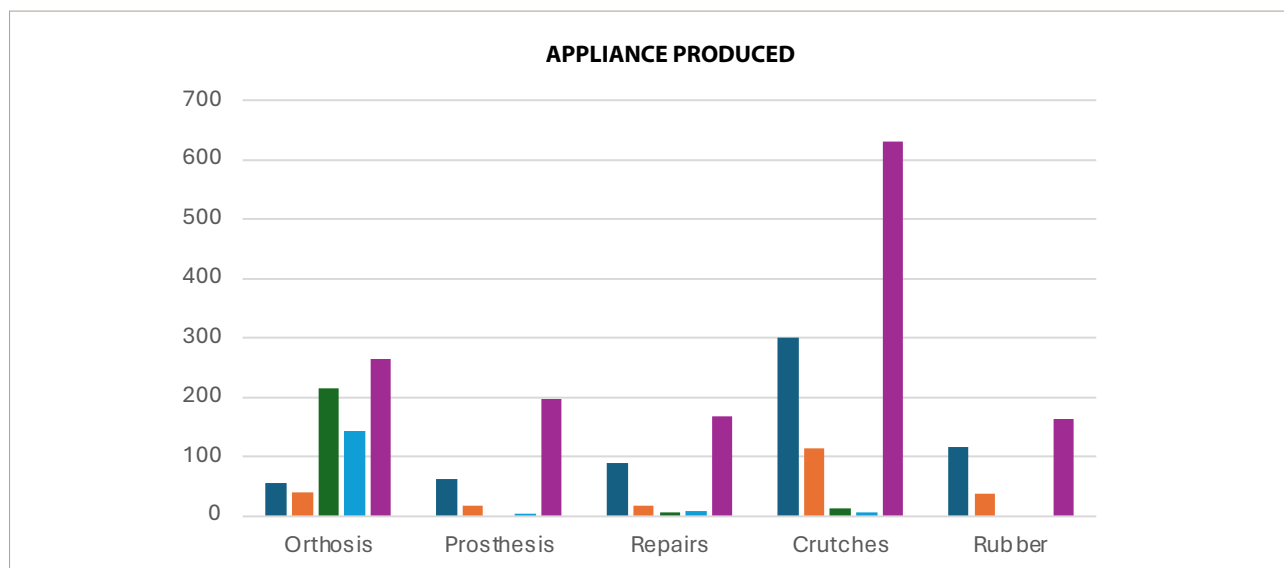


### MOGADISHU PHYSICAL REHABILITATION CENTRE

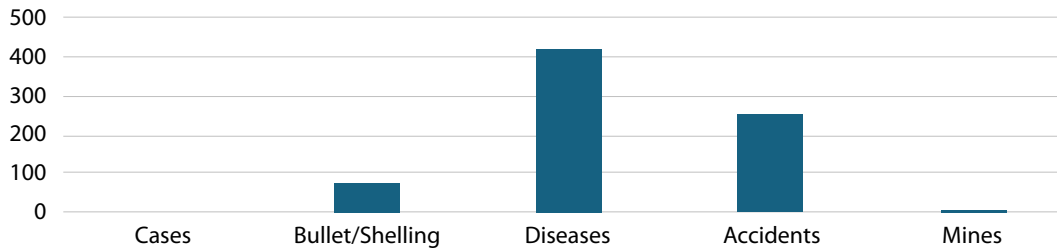
The Center continued to provide orthopedic and physiotherapy services to 4,128 beneficiaries in different regions.

Six professional staff from the two departments visited Baidoa, Kismayo and Jowhar and trained 35 volunteers on screening the amputee and clubfoot beneficiaries for referral. 16 clubfoot children and 33 amputees were referred and benefitted from the accessibility program.

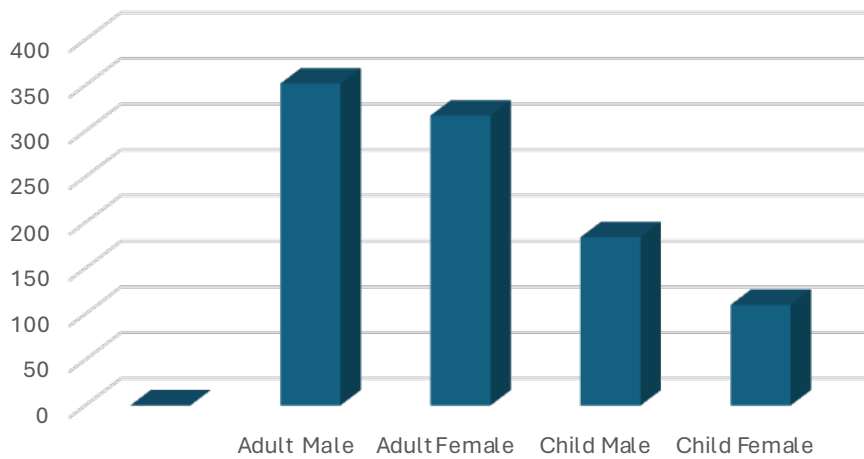
The team also conducted awareness training about the Rehabilitation activities in general. This community-based rehabilitation will be beneficial to the community information sharing and health seeking behavior for the disabled persons.



### CAUSES OF DISABILITY



### PHYSIOTHERAPY BENEFICIARIES



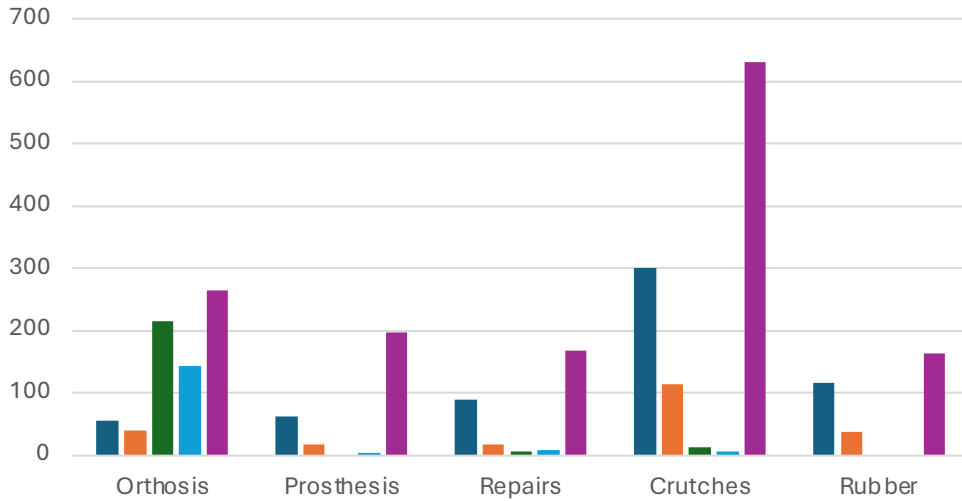
## HARGEISA PHYSICAL REHABILITATION CENTRE

The Centre continued to provide orthopedic and physiotherapy services to 2,620 persons with disabilities, the centre produced 1,238 orthopedic appliances.

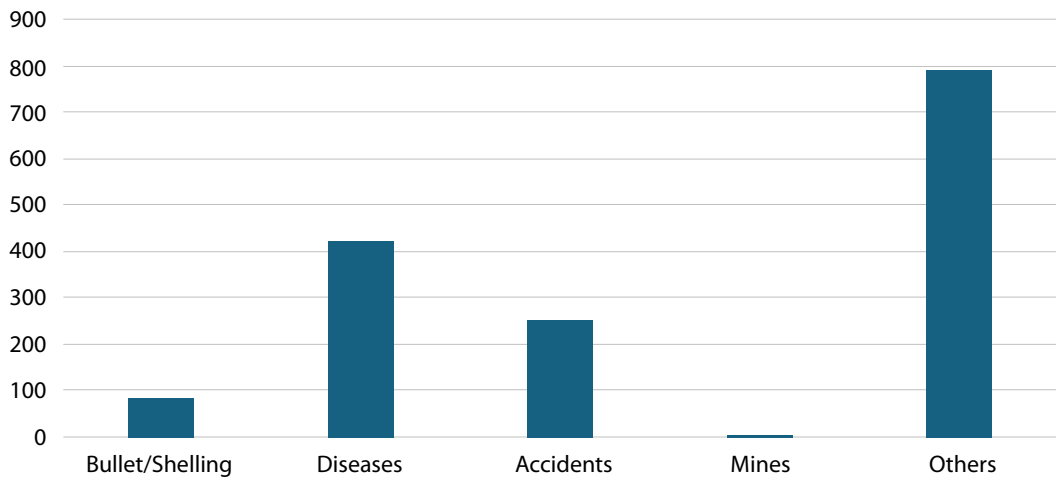
The centre extended its services to remote and hard to reach areas to assist people with disabilities who cannot access rehabilitation services. The Centre provided services to 67 individuals. The clubfoot outreach activity ran smoothly. A total of 14 children with clubfoot were assisted in Awdal, Galbed, Sahil, Togdheer, Sool and Sanag regions.



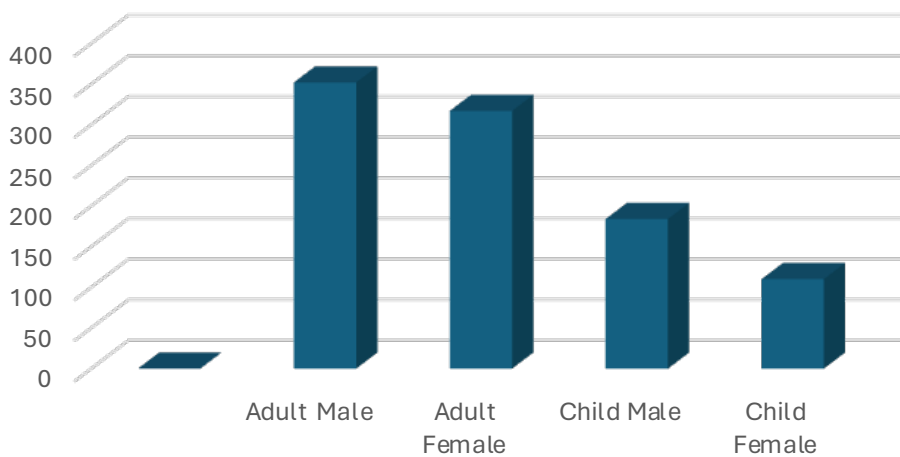
### APPLIANCE PRODUCED



### CAUSES OF DISABILITY



### PHYSIOTHERAPY BENEFICIARIES



## GALKAYO PHYSICAL REHABILITATION CENTRE

The Galkayo Physical Rehabilitation Centre provided specialized orthopedic and physiotherapy services to patients with disabilities. The Centre conducted a door-to-door assessment in Xaarxaar IDP camp and identified 105 persons with disabilities in the IDP camp and referred them to the rehabilitation centre.

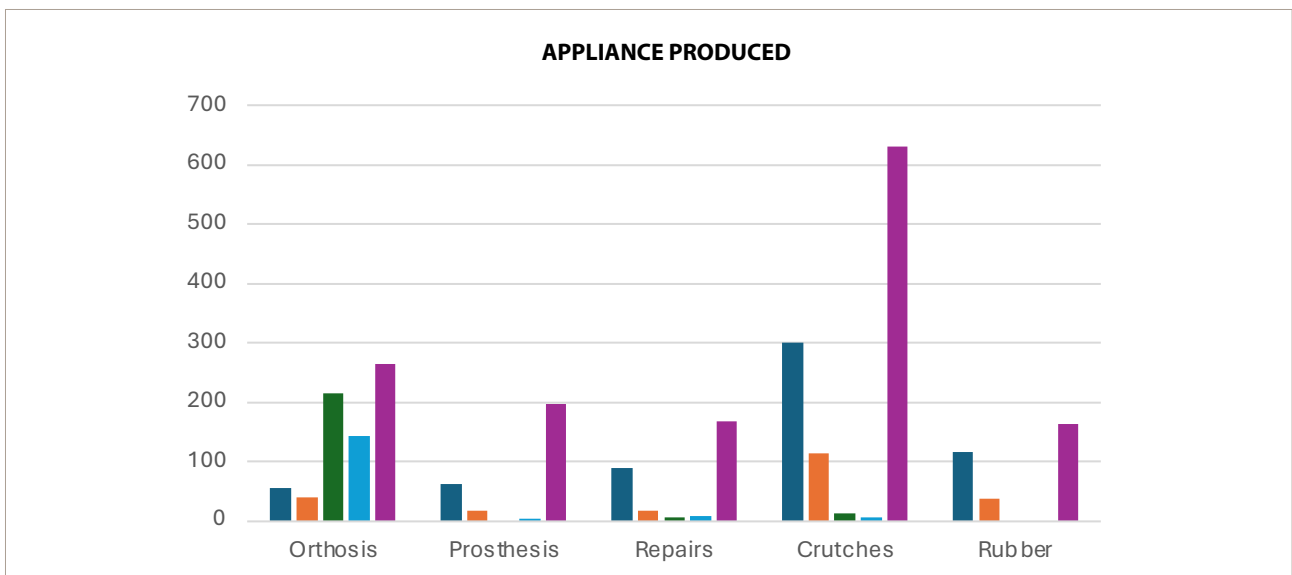


The Centre completed the rehabilitation accessibility and clubfoot outreach programs which enabled 47 persons with disabilities including 15 amputees and 11 clubfoot children from distant regions to access the rehabilitation service. Posters were fixed in 13 facilities in Mudug, Galgadud, Nugal and Bari Regions to raise awareness about the rehabilitation services. SRCS volunteers conducted a three-day assessment in Xaarxaar IDP camp to identify persons with disabilities. 105 people with disabilities were identified.

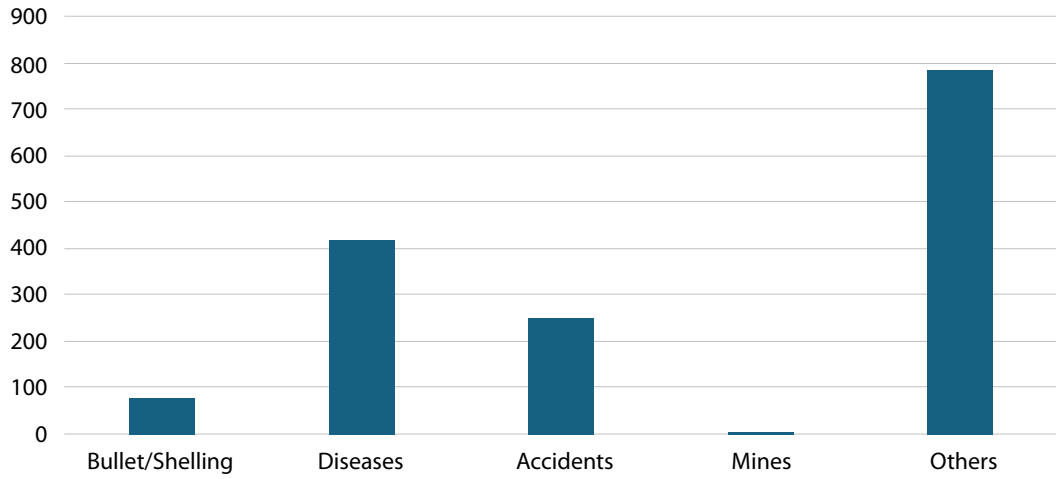
Galkayo Rehabilitation Centre team travelled to Garowe and supported Las Anod conflict victims with the provision of rehabilitation service to the victims in the Hospitals. The team treated 47 beneficiaries and provided with walking aids. Wheelchairs and walking aids were also donated to Garowe hospital to be used for patient transfers and mobility while in hospital.

The Centre delivered 40 pairs of crutches in four SRCS clinics and measurement materials in Galgadud. Two outreach activities were carried out in Nugal, Karkaar, Bari and Sool regions. 22 neglected clubfoot patients were referred to Galkayo Rehabilitation Centre and Adna hospital in Hargeisa for further treatment. 50 clubfoot patients mainly children were registered. The Centre successfully corrected 32 beneficiaries.

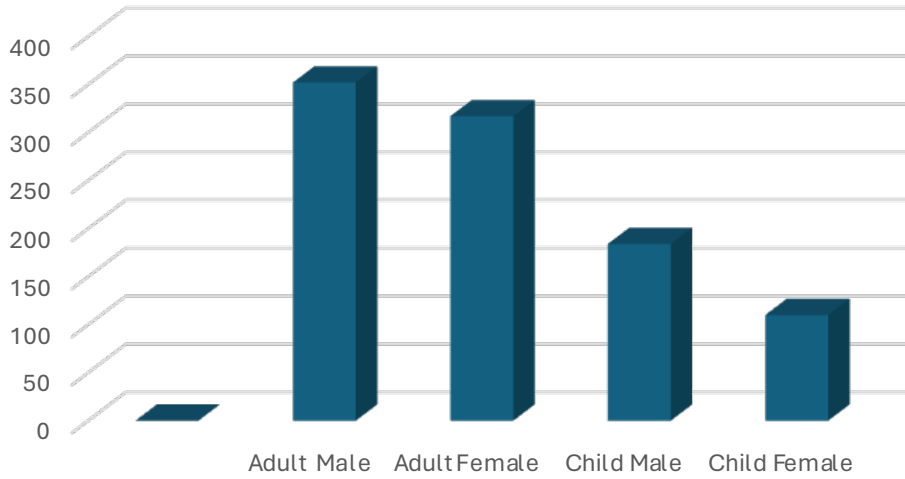
36 beneficiaries including beneficiaries from IDP camps and victims of Lasanod conflict received prosthetic limbs. The Centre trained 12 SRCS midwives and nurses in 12 SRCS clinics and offices in Galgudud, Karkaar, Bari, Nugal and Sool regions.



### CAUSES OF DISABILITY



### PHYSIOTHERAPY BENEFICIARIES



# Disaster Management



## RELIEF AND LIVELIHOOD ACTIVITIES

A total of 545 farmers in Sanaag and Togdher regions were provided with 360 hours tractor ploughing service in order to prepare soil for planting. 90 drought-affected women were given cash grant as livelihood support activities. 150 farmers were provided with agricultural tools. In November, Bosaso branch distributed farming tools to 180 farmers in Iskushuban town.



## SEARCH AND RESCUE OPERATION

Volunteers of Beledweyn and Jowhar branches carried out search, rescue and evacuation operations using boats. A total of 756 people were rescued. The volunteers also recovered one dead body.



Dewatering activities were conducted in Jowhar, Bardere and Beled-Hawa. Volunteers dewatered 207 houses, warehouses, schools and health facilities. Dewatering activities were also conducted in Galkayo, Mogadishu and Marka.



## WASH ACTIVITIES

150 volunteers were trained in dewatering in all the flood affected branches and 30 volunteers trained in boat operations while 50 volunteers received training in water, hygiene, and sanitation promotion activities and waterborne disease prevention.



293 water bags were distributed to communities in Hiriro village, Goomaaryo, Jariban, Medina village and Iskushuban under Bosaso and Galkayo branches. 17 latrines were rehabilitated in Kulmiye and Salama IDP sites in Galkayo and Ilfoocshe in Jariban, six latrines were constructed, and 10 water reservoirs were rehabilitated in Dhinowda, Ilfoocshe, Mareer village, Ceel madoobe and Dawacale. 28 barrels of fuel were given to the communities in Balibusle village.

A total of 26 water points (Berkeds) were rehabilitated targeting 18,720 beneficiaries. One sub-surface well was also constructed in Geed Abeera and eight shallow wells were rehabilitated with solar installations in Awdal, Maroodijeex and Sahil regions.



## DISTRIBUTION OF FOOD AND NON-FOOD ITEMS

On 27<sup>th</sup> January, the Mogadishu branch distributed non-food items and shelter materials consisting of 151 tents, 298 mattresses, 3,712 blankets and 1995 hygiene kits to 1,240 households in Mogadishu.

From 28<sup>th</sup> – 30<sup>th</sup> July, the Bosaso branch volunteers distributed non-food items to 500 households in Qardho following the devastating flash flooding in the district.

From 31<sup>st</sup> July – 2<sup>nd</sup> August, Galkayo branch distributed non-food items to 300 internally displaced families in Galkayo and Jeehdin. The branch also distributed non-food items to 63 households affected by the El Nino induced floods in Dhiganle village.

On 9<sup>th</sup> March, the Garowe branch distributed non-food and shelter items to 200 households in Jilab in Garowe. The branch also distributed non-food items to 2,800 households in Bo'ame, Kalabayr and Huddun. The branch also distributed shelter items to 285 households in Garowe, Dhiganle and Qardho towns.



## CASH AND VOUCHER ASSISTANCE

SRCS provided cash assistance to 6,702 households in all branches. A total of 1,300 displaced households received unconditional cash grants. Unconditional grants were distributed to 585 drought-affected households for three months.

A total of 645 households received cash for health for a period of 4 months. Unconditional cash assistance was distributed to 205 households for three months. A multi-purpose cash grant was given 3,967 households in Lasanod for three months.

The Garowe branch provided multi-purpose cash assistance with 274 households in the IDPs camps in Garowe and Dangorayo districts. Bosaso branch assisted 113 flood affected households with cash for a period of three months. Dignity and hygiene kits were distributed to 200 households in Jilab IDP camp in Garowe. In April and May, the Garowe branch distributed 750 hygiene kits to 1,600 displaced households from Lasanod.

In response to the impact of El Nino, SRCS distributed non-food items to 1,400 households. Hygiene kits were distributed to 2,100 households. A total of 1,700 households were provided with access to emergency shelter support.

Aquatabs were distributed to 1,500 households and other essential items were given to 2,450 displaced families from Lasanod town. Dignity kits were also distributed to 7,500 women and girls affected by conflict. A total of 1,500 households were provided with shelter and hygiene kits in Mandhera, Gargaara, Samorkaab, Garadag, Darasalam and Caqilyare. SRCS distributed nonfood items to 13,550 households. 80 volunteers were trained on early warning and evacuation in emergencies.



## TRAINING AND WORKSHOPS

Vulnerability Capacity Assessment (VCA) Level-Two Training attended by 25 SRCS staff members was conducted in Hargeisa during the months of February and March.

A workshop on Early Action Protocol, attended by 10 officers from the two SRCS Coordination Offices, was held in Hargeisa during the month of June. The Garowe branch trained 19 volunteers in community engagement and accountability and Protection, Gender and Inclusion.

A two-day Community Engagement and Accountability training was conducted in Badarbeyla town for 10 volunteers from 26<sup>th</sup>-27<sup>th</sup> November. A community feedback mechanism, data collection and analysis training were given to 27 volunteers and staff in Gardo, Waciye and Rako. In Garowe, 19 volunteers were trained in community engagement and accountability. 22 staff members from Bosaso, Garowe and Galkayo were trained in community engagement and accountability. Electronic Voucher and Cash Assistance (EVCA)

training was also conducted in Waciye town for 20 participants from 7<sup>th</sup>-12<sup>th</sup> October.

A training on Disaster Risk Reduction and Climate Change Adaptation was held in Waciye town. The training which was attended by 15 volunteers was aimed at providing the participants with essential skills and knowledge in Disaster Risk Reduction and Climate Change Adaptation.



## COMMUNITY RISK MAPPING EXERCISE

A community risk mapping exercise was conducted in Waciyi town during the month of November. The training was aimed to comprehensively assess the prevalent physical risks, see key challenges and assess the vulnerabilities within the community in consultations with local authorities, various community groups, including men, women and community elders. The participants did a comprehensive risk mapping during the exercise.

## RESTORING FAMILY LINKS



The Restoring Family Links play a vital role in reconnecting separated families. A total of 161,537 free phone calls were offered to separated families. 541 missing persons were located.

The RFL tools were updated to improve operational efficiency and enhance RFL service delivery. Aspera access was given to all RFL officers to facilitate the sharing of RFL cases and follow-ups collected from the field, ensuring oversight of the collected personal data. The phone call service was strengthened to respond to the conflict in Lasanod in February.

The Restoring Family Links program conducted a capacity-building training attended by volunteers and officers from



SRCS branches. The RFL needs and capacity assessment was conducted in a number of SRCS branches.

RFL annual planning meetings for SRCS Coordination Offices were respectively held in Mogadishu and Hargeisa where participants discussed achievement and challenges.

## SRCS ANNUAL REVIEW AND PLANNING MEETINGS

During the year, the SRCS Annual Review and Planning Meetings were respectively held in Mogadishu and Borama. The meetings were attended by the Coordinators of all SRCS branches and Senior Management staff.

Branches and departments presented their achievements and challenges. Each Coordination Office set their priorities and developed a plan of action.





## COMMUNICATION

During the year, a total of 19,860 audiences were reached during the year. The main target audiences were elders, community leaders, youth, students, teachers and women.

As for the publications, 1,200 copies of SRCS Annual Report, 500 pieces of Desk Calendars and 400 assorted items were produced and distributed to the SRCS stakeholders.

Media Monitoring was conducted regularly, and reports shared with partners. The Communication team supported 64 adverts through Somali jobs Website and facilitated recording of RFL radio script.

A high-level communication training for SRCS Senior Staff was held in Mogadishu from 7<sup>th</sup> - 8<sup>th</sup> August 2023. The training, attended by 30 SRCS senior staff members, was opened by the SRCS Vice President, Ahmed Jama Abdulle.



# National Society Development

## 1. INSTITUTIONAL CAPACITY BUILDING

### BOCA Training

The Somali Red Crescent Society (SRCS) provided training to 32 Training of Facilitators (ToF) from its 18 branches and two coordination offices, with support from the International Federation of Red Cross and Red Crescent Societies (IFRC) and the Kenya Red Cross. The trained ToFs conducted a self-assessment of Branch Operational Capacity Assessments (BOCAs) in 11 branches, and the remaining branches are scheduled to conduct BOCAs in 2024.



### Volunteer Management

As part of the collaboration between the Somali Red Crescent Society (SRCS) and the Kenya Red Cross Society (KRCS), two Volunteer Managers were deployed to the KRCS Volunteer and Youth departments for a two-week period from October 23<sup>rd</sup> – November 3<sup>rd</sup>. During this time, they acquired valuable knowledge and experience that will enhance their work performance.

In addition, SRCS organized several training courses across its branches, covering various subjects. Successful volunteers received certificates for their participation. The Volunteer Management Taskforce developed a comprehensive plan, including the implementation of Volunteer Management Guidelines and the establishment of Volunteers Database.

Furthermore, SRCS submitted a proposal on Volunteer and Resource Mobilization Development to the National Society Investment Alliance (NSIA) Bridge Awards. The application



was approved, resulting in funding for the establishment of a training institute in Mogadishu. This institute aims to contribute to the long-term sustainability of SRCS.



### Cash and Voucher Assistance Harmonization Workshop

The CVA Harmonization Workshop organized and held in Nairobi from 18<sup>th</sup> – 19<sup>th</sup> December. Four staff members from SRCS attended the workshop.

IFRC facilitated the workshop which intended to harmonize the CVAP self-assessment Plan of Action (PoA) from Hargeisa and Mogadishu Coordination offices.

### Finance Development

The SRCS has been actively working to enhance its Finance Management systems and processes through the Finance Development Program. Key achievements include:

1. SRCS underwent a comprehensive assessment conducted by Norwegian Red Cross. The resulting report was shared with SRCS for review and feedback.
2. SRCS diligently prepared for the ICRC Due Diligence exercise and after detailed engagement and submission of all the relevant documents the exercise was successfully concluded.

SRCS has developed its logistics capacity in terms of hardware by constructing new warehouses at branches and coordination levels. A taskforce was established to spearhead development of SRCS Asset Management Policy during the year 2023. The Policy was adopted by the SRCS Executive Committee. SRCS is currently in the process of mapping and valuing its Assets as per the new developed guidelines.



These efforts demonstrate SRCS's commitment to financial transparency and accountability.

## Digital Transformation

The Somali Red Crescent Society (SRCS) has embarked on a Digital Transformation journey to enhance the delivery of humanitarian assistance in alignment with our fundamental principles. The following key initiatives have been undertaken:

### Development of SRCS Digital Transformation Strategy:

SRCS conducted a series of sessions at various levels, resulting in several recommendations. A task force was established to assess the outcomes and prioritize key initiatives. Thanks to British Red Cross and Danish Red Cross for facilitating the self-assessment.

**Corporate Email Implementation:** As a significant recommendation from the Digital Transformation Assessment, SRCS management decided to set up corporate email addresses for staff. A technical team, comprising SRCS, ICRC, and IFRC members, developed a roadmap. A new SRCS domain was secured, and email addresses were created for most staff. User guidelines were developed, and orientation sessions were conducted for staff members.

These efforts demonstrate SRCS's commitment to leveraging digital solutions for efficient and effective humanitarian work.

## 2. POLICY AND STRATEGY DEVELOPMENT

### Health Strategy Development Workshop

Consultative Health Strategy Consultation Meetings were held in Mogadishu from 9<sup>th</sup> – 12<sup>th</sup> August and in Hargeisa from 16<sup>th</sup> – 18<sup>th</sup> September. This was followed by a Core Group Workshop was held in Nairobi from 4<sup>th</sup> – 6<sup>th</sup> December 2023 with the participation of SRCS Key Management Staff and Partners. The aim was to combine the reports of the two consultation meetings. The group discussed and agreed on the main objectives and key areas of intervention.

### SRCS Community Resilience Strategy Review

A workshop on Review of SRCS Resilience Strategy was held in Hargeisa from 26<sup>th</sup> - 29<sup>th</sup> November. Key SRCS staff members attended the workshop.



## 3. MOVEMENT COOPERATION AND COORDINATION

### SRCS Movement Partners Meeting

The SRCS Partners Meeting was held in Nairobi on 6<sup>th</sup> September 2023 with a good number of PNSs. The notes of the meeting were shared with all partners. SRCS appreciated partners' participation and commitments.



### Senior Leadership Dialogue

SRCS attended the Senior Leadership Dialogue (SLD) held in Geneva from 28<sup>th</sup> – 29<sup>th</sup> September 2023.

The Dialogue focused on the current humanitarian landscape including financial elements and its impact on the ICRC, Developing ICRC's new Institutional Strategy, Improving ICRC's Partnerships Offer and the 34<sup>th</sup> International Conference: Weapons issues and digital threats, and IHL in the contemporary world.

### **IFRC Extraordinary General Assembly**

SRCS attended the IFRC Extraordinary General Assembly held in Geneva on 11<sup>th</sup> December 2023. The Assembly elected Kate Forbes as new President of the International Federation of Red Cross and Red Crescent Societies.

On the sidelines of this event, SRCS had a meeting with the President and CEO of the British Red Cross.

### **Roundtable on Climate Change and Displacement**

The SRCS Executive Director, Mr. Mohamed Abdi Warsame, attended the virtual roundtable on Climate Change and Displacement on 16<sup>th</sup> November 2023.

This roundtable presented an opportunity to reflect on climate-related challenges. It was particularly significant considering the rising level of climatic effects on the ground, with climate change being a threat multiplier, impacting displaced persons and the communities hosting them.

### **El-Nino Movement Coordination**

SRCS convened several meetings on El-Nino Movement Coordination. The meetings agreed on coordination mechanism for El Nino Response and discussed possible preparedness and interventions.

### **NSD in Fragile and Conflict Contexts Study**

SRCS is currently participating in the NSD in Fragile and Conflict Contexts Study. The project will conclude in a Learning Event, hosted by the British Red Cross and attended by the six participating National Societies. Representatives from the Study Task Force Group, including IFRC, ICRC, American Red Cross, Australian Red Cross, British Red Cross, Canadian Red Cross, Danish Red Cross, and German Red Cross, are also present. SRCS has formed a task force comprising 15 members.

### **Strengthening SRCS International Partnerships**

During the months of February and March 2023, SRCS delegation visited Germany, Finland, Norway, Denmark, the Netherlands and the United Kingdom. The delegation consisted of the SRCS President, Mr. Yusuf Hassan Mohamed and the Director of Organizational Development and Communication, Mr. Abdulkadir Ibrahim "Afi" held meetings with the National Societies and Ministries of Foreign Affairs of the respective countries.

The delegation had the opportunity to provide clarity on the humanitarian situation of the country, activities of the Somali Red Crescent Society which operates in a complex and sensitive environment as well as its wide country coverage and acceptance from all parties. The aim of the trip was to seek more international partnerships.





**Programmatic Partnership (PP) Stock-taking Workshop**

SRCS attended the Programmatic Partnership (PP) Stock-taking workshop which was held in Senegal from 2<sup>nd</sup> - 6<sup>th</sup> October 2023. The PP results in Somalia were among the best in Africa.



**Pan-Africa Conference**

SRCS attended the IFRC Pan Africa Conference held in Nairobi from 16<sup>th</sup> - 19<sup>th</sup> September 2023 with a commitment to collectively and individually grow people-centric sustainable domestic investments strengthen youth and volunteer networks, general accountability and risk management.

### 47th Session of ARCO General Assembly

The SRCS Vice President, Mr. Ahmed Jama Abdulle, attended the 47<sup>th</sup> Session of the General Assembly of the Arab Red Crescent and Red Cross Organization (ARCO) held in Doha, Qatar from 5<sup>th</sup> - 6<sup>th</sup> June 2023.

The two-day meeting was attended by the Presidents, Secretaries General, and representatives of the Arab Red Cross and Red Crescent Societies as well as observers from the

World Health Organisation (WHO), the Organization of Islamic Cooperation, the Arab League, the International Federation of Red Cross and Red Crescent Societies (IFRC), the International Committee of the Red Cross (ICRC), the Standing Committee of the Red Cross and Red Crescent and other invited guests.

The 46<sup>th</sup> General Assembly discussed the humanitarian situation in the Arab countries with a special focus on Sudan, Syria, and Somalia.







## ABOUT SRCS

The Somali Red Crescent Society is an independent, non-political humanitarian organization that was founded in April 1963 and was established with presidential decree No. 187 in 1965.

It was then recognized by the ICRC in 1969 and in the same year became a member of the International Federation of the Red Cross and Red Crescent Societies.

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