

## COMMUNITY CONSULTATION ACTION PLAN REPORT



## BACKGROUND INFORMATION

### BASIC DETAILS ON THE COMMUNITY

Village name:	Degreebe Gado
District:	Dolow
Region:	Agro-pastoral
Livelihood/agro-ecological zone(s):	
Population estimate (households or people):	
P-code:	
UNDP Estimated pop. (individuals):	
UNDP Estimated pop. (households):	
Latitude:	N:40.34.11
Longitude:	S:42.38.39

### BASIC DETAILS ON THE CONSULTATION & PLANNING PROCESS

Date completed:	20/21/01/2013			
Facilitation team members:	Mire Abdullahi Elmi, Halima Hassan Mohamud, Abdullahi Hussein Sheikh, Abdikadar Mohamed Abdullahi and Mohamed Shafie			
Facilitation team leader name and organisation:	Mohamed Shafie UNICEF			
Number of community members consulted:	42			
% of consulted community members who were female:	46			
% of consulted community members in each age group:	<18	18-24	25-54	55+
	30	20	40	10
Focus groups, if any:	Yes			
Comments on the process (including representation of different sectors of the community):	The community of agro-pastoralist were more prone to vulnerable due to the prolonged drought.			

## COMMUNITY CONSULTATION

### CONSULTATION ON SHOCKS (DISASTER ANALYSIS)

What are the major recurrent shocks faced by this community?	Recently, in which years have they occurred?	How was the community affected by them?
Drought	2012, 2011, 2010, 2009	Loss of life for animals and humans, degradation of land, poor crop production, displacement.
Floods		Impact on community

### CONSULTATION ON VULNERABILITY (VULNERABILITY ANALYSIS)

Within the household, which individuals are more vulnerable to shocks?	Infants/children, pregnant and lactation mothers, elders.
Why are these individuals more vulnerable to shocks?	They are the weakest among the community.
When are these individuals more vulnerable to shocks?	Malnutrition during pregnancy, during lactating, malnourished due to food scarcity in the last stage of the drought (time of the year or time during the shock).
Within the community or the area, which groups are more vulnerable to shocks?	Children under 5, pregnant mothers, lactating mothers, and the elderly people.
Why are these groups more vulnerable to shocks?	They are the weakest among the community.
When are these groups more vulnerable to shocks?	Between peak and end of shock or before any help comes.

### CONSULTATION ON PREPAREDNESS & COPING (RESILIENCE ANALYSIS)

How does the community forecast and prepare for shocks or difficult seasons? (Including moving, livelihood diversification, other...)	Increase fodder production, sale of weak animals, migration with animals in search of pasture and water, slaughter animals for food.
How does the community cope during shocks or difficult seasons? (e.g. moving, social support, aid, livelihood diversification, other...)	Skip one meal, social support, prayers, diversification of crops grown (previously they used to grow only maize and sorghum now they change to vegetables like tomatoes, onions, carrots for market to get income).
Who makes decisions about these coping strategies? (e.g. who decides to migrate, to diversify etc.)	Village committees comprising of a chair, deputy chair, community health worker and TBA.

<b>'HANDS UP' CONSULTATION ON PRODUCTIVITY, INCOME, EXPENDITURE</b>		
<b>Total Number of people present for this:</b>	<b>No.</b>	<b>Details</b>
Who owns livestock?	42	Some of the people have few animals and require restocking.
Who owns land?	18	Community of 60 HH ONLY 18 HH own land.
Who farms but does not own land?		
Who has a business?	0	None
Who has relatives who provide financial or other support?	0	None
Who has helped others by providing financial or other support?	42	We all help each other in the difficult periods.
Who sells their labour? (Farming, construction, other)	42	They only work for sharecropper.
Who makes charcoal?	0	None
Who sells or has sold their own products? (Agricultural, livestock-based, handicrafts, other)	42	They sell surplus after they store their family needs.
Who has done cash for work?	0	Only long ago rehabilitation of canals by NAPAD 8HH received per canal in a total of five canals.
Who has received a cash transfer from an NGO/UN agency?	0	None
Who has received food assistance?	42	Only WFP last September.
Who has an existing loan?	42	From shops in do low and surrounding villages.
Besides food, what do you spend the most on?		Cloths, medicine, animal drugs, fuel for land irrigation.
Where do you get your food from?		Farming, Buying and food Aid.

<b>CONSULTATION ON ACCESS TO BASIC SERVICES</b>	
What keeps people healthy?	Good hygiene and sanitation practice (e.g. proper use of latrine, boiling drinking water) and use of mosquito net to prevent malaria.
What is a hindrance to good health?	Poor hygiene and sanitation, lack of mosquito nets.
What allows people to access water?	Access to river, use of donkey carts for ferrying water and fetching water by women.
What hinders people's access to water?	Slippery river banks, low water levels in dry season a d crocodiles' threat.
What allows children to go to school?	Presence of school structures, schools, support of parents.
What hinders children from going to school?	Lack of school and teachers, lack of support of parents.

### FACILITATOR FOLLOW-UP

Recommendations on targeting of certain groups or individuals:	Targeted supplementary feeding for malnourished children and PWD (which groups or individual but not what intervention).
Recommendations on support to mobile groups (if any):	No mobile groups.
Recommendations on timing/seasonality (for normal + bad years):	January, February, March, June, July are the months the community require immediate intervention due to the seriousness of the drought and weakness of the community.
Recommendations for safety nets (types, modalities, conditional /unconditional, target groups, triggers, timing, frequency, duration):	Restocking with small ruminants, provision of raw materials for HH weaving and basketry, rehabilitation of farms (bushing clearing, channel rehabilitation/construction).
Have you found any major differences in this community compared to others in the area? Do we need to do anything differently?	No major difference with other villages.
What are the key resources/strengths/capacities/ways of coping that need to be considered when planning interventions? Resilience-building interventions will, where possible, complement and strengthen these.	Human capital (man power), land, river, semi qualified health personnel, construction materials locally available for construction of health centre or school, manpower for sinking hand dug wells.

## PROBLEM ANALYSIS AND INTERVENTION MAPPING

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Rank	Problem	Relevant existing/local resources, assets and strengths that could help counter this problem	Possible interventions - building where possible on local solutions	Problem Priority	Season
1	Loss of livestock during past drought - lack of livelihood asset.	Fewer HH have fewer numbers of animals, grazing land, permanent river for livestock watering, traditional skills in animal husbandry.	Re-stocking, improved animal health services.	1	
2	Lack of health facilities.	Land space, semi qualifies community health worker, TBAs, local materials for construction of health centre.	Construction of health post, refresher training for health personnel, provision of human drugs health equipment.	2	
3	Lack of access to primary school education.	Land space, in terms of construction of school, locally available construction materials.	Construction of school, teachers, provision of school supplies.	3	
4	Lack of clean water.	Potential for hand dug wells, available labour for construction of wells.	Support with construction of water and installed with appropriate water pump.	4	

SEASONAL CALENDAR														
Question	L/H*	M/F*	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
When are the months with peak rain?	All	N/A					x						x	
When are the dry seasons?	All	N/A	x	x	x					x	x			
When do human health problems peak?***	P	All												
When do human health problems peak?***	AP/F	All			x			x	x					
When do human health problems peak?***	U/I	All												
When do livestock health problems peak?	P	All												
When are the main crop production periods?	AP/F	All			x	x	x				x	x	x	
Crop production phase:	AP/F	All			x	x	x				x	x	x	
Crop production phase:	AP/F	All												
Crop production phase:	AP/F	All												
Crop production phase:	AP/F	All	x					x						
When are the main harvests?	AP/F	All												
When is work available (casual labour in town)?	U/I	All												
When is work available (farm labour)?	AP/F	All			x	x	x	x			x	x	x	x
When are people available to work (less busy)? (men)**	P	M												
When are people available to work (less busy)? (women)**	P	F												
When are people available to work (less busy)? (men)**	AP/F	M			x	x	x	x			x	x	x	x
When are people available to work (less busy)? (women)**	AP/F	F			x	x	x	x			x	x	x	x
When are people available to work (less busy)? (men)**	U/I	M												
When are people available to work (less busy)? (women)**	U/I	F												
When do people migrate with animals (if at all)?	P	All												
When are food prices high in local markets?	All	All					x					x		
When are children more likely to be out of school?***	P	All												
When are children more likely to be out of school?***	AP/F	All												
When are children more likely to be out of school?***	U/I	All												
Which are the most difficult months for men?***	P	M												
Which are the most difficult months for women?***	P	F												
Which are the most difficult months for men?***	AP/F	M			x	x	x	x			x	x	x	x
Which are the most difficult months for women?***	AP/F	F			x	x	x	x			x	x	x	x
Which are the most difficult months for men?***	U/I	M												
Which are the most difficult months for women?***	U/I	F												

When (if ever) are vouchers/cash preferred over food?	All	All			x					x			
When (if ever) is food preferred over vouchers/cash?	All	All				x						x	
Other (specify)													
Other (specify)													
* L/H = Livelihood group(s), M/F = Gender													
** Livelihoods codes: P = pastoralist, AP/F = agro-pastoralists/farmers, U/I = Urban/IDPs, Oth = Other, All = all groups; M/F = Male/Female													

The calendar above is for a normal year. What changes in years with major shocks, especially in timing/duration of most difficult times?	
Remarks:	

### FACILITATOR CHECKLIST

1. Holistic: Does the plan include at least 5 interventions each under resilience Pillars 1 and 2 and at least 2 interventions under Pillar 3?	Yes
2. Collaborative: How will the activities be linked? In what ways can organisations complement each other's work?	Yes
3. Inclusive: Is the plan participatory and representative of the whole community, including all ages, clans, genders, livelihoods? Has the community's own vulnerability analysis been used for targeting?	Yes
4. Appropriate: How are the activities adapted to the needs of mobile pastoralists and sensitive to cross-cutting themes (gender, age, protection, nutrition, environment, and cultural integrity)?	Yes
5. Timely: Are activities aligned with the seasonal calendar (e.g. timed for when needs are greatest, when it's not raining (for construction), etc.)? Are activities distributed across the 3 years?	Yes
6. Innovative: Will any activities be done differently than in the past? How do the plans build on lessons learned from past assistance?	Yes
7. Pro-Resilience: How will the activities facilitate the community's existing ways of coping and sources of resilience (e.g. mobility, social support, and diversification) and avoid undermining or discouraging them (especially in the case of safety nets)?	Yes



## COMMUNITY ACTION PLAN

COMMUNITY ACTION PLAN							
Community:		Degreebe Gado			Date:	21/01/2013	
Ser #	Pillar	Proposed Intervention	Details	Priority	Agency?	Duration/timing	
1		Re-stocking, improved animal health.	These are agro-pastoral community whose lives depend on both livestock and agriculture and the main shock they usually encounter are droughts that eliminates their stock and farms remains nonproductive thus; needs priority one is restocking.	1	FAO		
2		Construction of health post, refresher training for health personnel, provision of human drugs health equipment.	No health facility at all, an operational health centre essential to their health due to the distance to the nearest health centre which about 45 km.	2	UNICEF		
3		Construction of school, teachers, provision of school supplies.	No school, the nearest school is Gedweine which is about 15 km.	3	UNICEF		
4		Construction of well rims and appropriate water source technology.	No clean water, the community use water from river.	4	UNICEF		
<b>Remarks:</b>							