Main challenges in the country

This document will detail the operational plan of the IFRC Egypt Country Office. It reflects the support provided to the Egyptian RC in Disaster Risk Reduction, Health, Migration and strengthening the National Society capacities.

Egypt, with over 99 million inhabitants, is the most populous country in North Africa and the Arab world and the fifteenth-most populous in the world. Egypt is prone to natural and man-made disasters (floods, fires, bombing, civil unrest).

The phenomenon of slums has started to take root as a result of population growth and demand for urban accommodation exceeding supply. New land developments cannot keep pace, and prices are out of reach for the majority of the newly urbanized population.
The fast increase in the population rate puts pressure on the government to reply to the increased demands. Critical gaps in service sectors like education, health, economy, housing, community development etc. have become obvious. Non-government actors are increasingly being recognized by authorities as a way to fill these gaps.

Since 2011, political turmoil has halted industry and production, decreased foreign investments and negatively impacted tourism. Growth rates have fallen, while food prices and unemployment have increased.

More than one in four Egyptians are estimated to live below the poverty line of two dollars per day (25 million people). Rural-to-urban migration has resulted in the uneven growth of urban centers in Egypt. High illiteracy rate (25% of females, 14% of males).

The National Society role and profile

The ERC has an active role as “first responder” in crisis. It is an official member of the National Committee for Crisis Management and Disaster Risk Reduction (NCCMDRR).

ERC has:

- 46 youth clubs
- 15 women’s clubs
- 7 elderly clubs
- 5 secondary health clubs
- 53 polyclinics
- 10 mobile clinics

The ERC, in 2015, has been engaged in a unique organizational development process to determine their organizational as well their specific roles in addressing humanitarian needs. The ERC completed that process in partnership with IBM to lead independent digital scoping to setup baselines, end lines and to benchmark the ERCS vis a vis other key humanitarian actors. The result of this scoping forms the foundation of the ERCS’ organizational development needs, as well as priorities for humanitarian actions.
Egyptian Red Crescent: scope of activities

The organizational development process identified the following strategic priorities for ERC in the next four years:

1. Save and serve more people, specifically in times of disasters
2. Empower communities to reduce disaster risks and build resilience
3. Institutionalize ERC work for sustainability, development and innovation

The role of IFRC country office

IFRC plans to have a total of 4 staff working in Egypt, however, no formal office structure is present yet. These are/will be:

1. 1 Program Manager (to be hired)
2. 1 Finance Officer (to be hired)
3. 1 PMER Officer (to be hired)
4. 1 Communication officer (to be hired)

This plan is designed to engage IFRC support in all three strategic priorities with a range of top priority activities identified jointly with ERC senior management and technical teams.
The operational activities will be implemented in five urban communities in the surrounding of Great Cairo and 4 other governorates with high presence of migrants, namely: Giza, Qalubeya, Sohag, Alexandria, and will address the needs of the vulnerable communities in health, disaster management and livelihoods. Additionally, IFRC will support ERC in enhancing its institutional capacities in the following areas:

1. Volunteer management
2. Communication between the HQ and the branches
3. Fundraising (with local fundraising being a priority)
4. Maximizing resources: Investing in volunteers, collaboration with IBM for a volunteer management database
5. Building institutional capacity in Finance, logistics, supply chain & HR

This document complements the 2019 Egypt Operational Plan of the IFRC and reflects the IFRC support to the Egyptian Red Crescent Society (ERCS) in the agreed areas of focus.

The ERC has branches in all governorates of Egypt; the 27 branches seek to spread the ethics of unity, volunteerism, and humanitarian work, especially among youth, and to provide assistance those affected by disasters.

ERC views Organizational Development as the process through which an organization develops the internal capacity to implement its activities most efficiently and effectively to sustain itself. In line with the recommendations from the recent evaluation, the size, structure and technical capacity of ERC will be reorganized to meet evolving needs; aimed at effectively supporting developmental and sustainable capacity building of both ERC and the communities it serves. Additionally, ERC aims to focus on supporting branch, organizational and leadership development. Therefore, ERC has identified the following priorities for 2019, where IFRC support would be essential in:

1. Drafting strategies on disaster management and health care
2. Establishing solid fundraising structure and tools
3. Establishing strong financial and administrative team
4. Establishing reliable logistics and supply chain structure and team
5. Establishing volunteer management system and volunteer leadership program
6. Establishing monitoring and evaluation unit and tools
7. Engagement in “peer exchange visits” with other National Societies in the MENA region
AREAS OF FOCUS

1,200,000
PEOPLE TO BE MADE RESILIENT AGAINST DISASTERS

1,200,000
PEOPLE WILL BENEFIT FROM APPROPRIATE HEALTH AND CARE SERVICES

57,500
PEOPLE WILL BENEFIT FROM HUMANITARIAN ASSISTANCE

STRENGTHEN NATIONAL SOCIETY CAPACITIES

STRATEGIES FOR IMPLEMENTATION
AREA OF FOCUS

**DISASTER RISK REDUCTION**

Egypt is susceptible to a multiplicity of natural and man-made disasters. Natural disasters include: flash floods, dust and sand storms, and earthquakes. Building collapses and domestic fires are frequent. The two biggest disasters in the past decades were the earthquake of 1992 and the flash floods that occurred two years later in upper Egypt. In 2017, ERC was engaged in a number of responses (bombing in Sinai, flooding, domestic building collapses, mitigation of spread of Dengue fever).

The National Committee for Crisis Management and Disaster Risk Reduction (NCCMDRR) was established in April 2006. The NCCMDRR is functioning as the “National Platform”, having several mandates corresponding to the goals and priorities of actions. Because DRR is a cross-cutting and complex issue, the NCCMDRR is a multi-stakeholder mechanism that provides coordination, develops a culture of prevention and DRR, and facilitates the integration of disaster management and risk reduction into national policies, planning and programmes.

Further to the establishment and functioning of the NCCMDRR, some sectoral plans and policies relevant to disaster management and risk reduction have recently been developed. Currently, a “National Strategy on Crisis Management and DRR” is being developed. This strategy incorporates a well-designed and mutually-reinforcing set of plans by the government to reduce the risk of disasters, including revision of existing legislation and resources allocation. ERC forms an integral part of the NCCMDRR and has a specific role in developing the DRR strategy in Egypt.

**NS IS SUPPORTED BY IFRC AND NETWORK TO DEVELOP FORECAST-BASED ACTION**

**COMMUNITY CONTINGENCY PLANS ARE IN PLACE**

**COMMUNITY EARLY WARNING SYSTEMS ARE ESTABLISHED OR IMPROVED AND LINKED WITH LOCAL OR NATIONAL METEOROLOGICAL SYSTEMS**

**OUTCOME**

Communities in high risk areas are prepared for and able to respond to disasters with environmentally responsible values and practices.
The health care system in Egypt is complex with a large number of public entities involved in the management, financing and provision of care. Egypt's wide network of public (several ministries beside the military and police), CSOs, faith-based charity organizations and private health facilities allow good geographic accessibility and coverage. The public-sector health care infrastructure comprises varied types of health facilities providing a broad array of services and levels of care.

Government-owned hospitals are the only choice available to low-income groups who constitute most of Egypt's population. These hospitals are however, hampered by huge demands that exceed capacities. This has led to a lack of public confidence with people turning to the private sector which is considered expensive for this group.

The private sector in Egypt plays an important role in delivering health care. It manages private clinics as well as specialized hospitals where people pay relatively high fees for what they consider better services. The private sector network includes general practitioners, specialists, dentists, psychiatrists, laboratories, pharmacists, etc. Competition in the private sector has induced the private hospitals to provide optimum care and over the years this sector has become highly rated in the Region.
The ERC Health and Care Programs aims to improve access to health care for the most vulnerable populations and to expand the outreach of quality care where the public health care sector is unable to reach.

ERC health and care programs aspire to contribute to the reduction of mortality, morbidity, injuries, psychosocial and physical impacts from diseases, disasters and public health emergencies.

The health and care unit currently operates 5 Secondary health care, 53 polyclinics and 10 mobile clinics. Additionally, ERC operates 5 Blood Banks spread all over Egypt.

The major focus for 2019 is to standardize, improve the quality and outreach of the health services via the following:

1. Improve and expand service delivery through “Mobile Medical Unit” in the fields of NCDs and Reproductive health
2. Continue to expand ‘community-based’ health care intervention.
3. Strengthen the capacity of health emergency response
4. Build the technical capacity of the medical staff and volunteers working with ERC
5. Expand blood donation services
6. Revise and update clinical and operational guidelines for primary health care and health facility management

Outcome: Vulnerable people’s health and dignity are improved through increased access to appropriate health services.
**AREA OF FOCUS**

**MIGRATION**

Egypt is a source, transit and destination country characterized by mixed-migration flows. With a long history of providing asylum to refugees, Egypt is also a traditional route of irregular migration to Europe directly by sea or via Libya. The proportion of departures from Egypt to Italy has been volatile but rose to 9%, as of July 31st, 2016, from 5% a year earlier. There is concern that African refugees in Egypt with pending refugee status are vulnerable in terms of access to work opportunities and basic services, which makes them more likely to consider moving on to Europe as an option. Smuggling from Egypt is being carried out mostly via non-flagged small fishing vessels going directly to Italy or Greece, and smugglers’ networks are also said to be active on routes going west to Libya.

In the current context, the risks and challenges migrants face are tremendous: absence of legal status, family separation, impoverishment and socio-economic hardship, among others. Egypt is experiencing an increase in numbers of refugees and migrants, either from the countries in conflict across the region, with a large presence of refugees from Syria, as well as from countries in the Horn of Africa which are characterized by high instability, insecurity and recurrent food crises, most of them as irregular migrants. As of 30 September 2016, Egypt accounted for 190,468 refugees and asylum seekers officially registered with UNHCR. Among them, 16% were Sudanese and 6% Ethiopian. The total population of concern registered in 2016 (29,846 individuals as of 30 September) represents a 50% increase compared to the entire year 2015 (19,715 individuals). Unregistered migrants are thought to be many folds higher in number.

<table>
<thead>
<tr>
<th>PEOPLE ARE REACHED BY NS HEALTH PROGRAMMES AND SERVICES</th>
<th>1,200,000</th>
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<tbody>
<tr>
<td>PEOPLE ARE REACHED BY NS WITH SERVICES TO REDUCE RELEVANT HEALTH RISK FACTORS</td>
<td>1,200,000</td>
</tr>
<tr>
<td>PEOPLE ARE REACHED BY LONG TERM HEALTH CARE SUPPORT</td>
<td>53,000</td>
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<tr>
<td>MIGRANTS THAT ACESS CULTURALLY SENSITIVE SOCIAL SERVICES, DISAGGREGATED BY MIGRATION OR RESIDENCE STATUS, AGE, GENDER, SEX, ETHNIC ORIGIN, NATIONALITY, NATIONALITY OF PARENTS, PLACE OF RESIDENCE AND LENGTH OF RESIDENCE</td>
<td>4,500</td>
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Although there are no camps for migrants and they live together with the host communities, migrants from the Horn of Africa tend to settle in the most popular and deprived areas, where living is less expensive. These areas usually suffer a lack of basic services, and some of them are considered slums. Migrants usually organise their own pockets of settlement, thus certain places are known to host large African communities, amongst them are Kilo 4.5, Arab Al Maadi and Ein Shams in Cairo, and Ard Al-Lewa, estimated to have a population of 700,000, located in the West of Giza. In these areas, migrants from the Horn of Africa live in poor economic conditions, with large family sizes, low incomes and a lack of access to basic services. On the other hand, the increased burden on local systems and services is leading to increased attitudes of intolerance and discrimination towards sub-Saharan migrants, with a particular impact on the youth population, creating risks to social cohesion. IFRC and the Egyptian Red Crescent have therefore identified these settlements as critical intervention locations for this programme.

Protection of migrant and refugee populations remains an issue of concern in Egypt. Since 2014, there has been a steady increase in the number of interceptions of refugees and migrants trying to leave Egypt in an irregular manner. On the Egypt to Italy route, a significant number of unaccompanied minors have been recorded. Even for those not subject to protection risks within Egypt, they are likely to have experienced abuse earlier along the journey, and therefore require PSS and referral support to overcome its impact on their wellbeing: migrants in Egypt have reported being kidnapped or having witnessed other people being kidnapped along their migration route, with the kidnapped are frequently subject to sexual abuse or torture.

The programme focuses on the provision of neutral, impartial and independent humanitarian assistance in support of vulnerable migrants, according to need and vulnerability. The activities as part of the programme will address urgent humanitarian needs, in accordance with our Fundamental Principles. Specifically, ERC and IFRC will scale up humanitarian assistance and protection activities in Egypt.

All work carried out by the Red Cross Red Crescent Movement is inspired by and adheres to the seven Fundamental Principles of humanitarian action. The work with migrants therefore stems from recognition of their humanity, irrespective of legal status, and their attendant needs and vulnerabilities. Neutrality, independence and impartiality with no stance on whether migration should or should not occur, and addressing needs to reduce vulnerability and risk wherever it is found.

Some of the implications of this approach include:

1. Providing non-discriminatory humanitarian support to those with identified needs and vulnerabilities across multiple sectors (Health and Livelihood)
2. In host communities with mixed migratory flows, where they reside together, and all are assessed as vulnerable with unmet needs, humanitarian assistance will be provided irrespective of definition
In 2019, the program will constitute of the following elements

1. Health and PSS services for migrants and host communities
2. Engaging migrants in vocational training and livelihood activities
3. Enhancing the awareness of migrants on trafficking and other protection issues
4. Improve the social cohesion with the host communities
The ERC counts on a network of:

1. 10,000 active volunteers with an additional number of 15,000 trained volunteers that could be mobilized in case of emergency

2. 46 youth clubs, 15 women clubs and 7 elderly clubs

3. There are approximately 20,000 members

The ERC has branches in all governorates of Egypt; the 27 branches seek to spread the ethics of unity, volunteerism, and humanitarian work among the people specially the youth and to give the disaster victims financial and in-kind aid.
ERC views organizational development as the process through which an organization develops the internal capacity to implement its activities most efficiently and effectively in order to sustain itself over a long period. In line with the recommendations from the recent evaluation, the size, structure and technical capacity of ERC will be reorganized to meet the evolving needs; aimed at effectively supporting developmental and sustainable capacity building of both ERC and the communities it serves. Additionally, ERC wants to focus also on support Branch Development, Well-functioning organization and Leadership and Management development. Therefore, ERC has identified the following priorities for 2019, where IFRC support would be essential:

1. Drafting strategies on Disaster Management and health care
2. Establishing solid fundraising structure and tools
3. Establishing strong financial and administrative team by
4. Establishing reliable logistics and supply chain structure and team
5. Establishing volunteer management system and volunteer’s leadership program
6. Establishing a reliable Monitoring and Evaluation unit and tools
7. Engagement in “peer exchange visits” with the NSs in MENA

**OUTCOME**

**NATIONAL SOCIETY HAS THE NECESSARY LEGAL, ETHICAL AND FINANCIAL FOUNDATIONS, SYSTEMS AND STRUCTURES, COMPETENCES AND CAPACITIES TO PLAN AND PERFORM.**

725,000 SWISS FRANCS SOUGHT
ENSURE EFFECTIVE INTERNATIONAL DISASTER MANAGEMENT

ERC aims to be the “Number One” organization in Egypt in the field of disaster response. ERC focus is to improve the response to emergency and mitigate recovery and build from recovery to long-term development.

The ERC is member of the National Crisis Management Committee at the level of Prime Minister Cabinet. Branches are represented at similar body at local level. It is member of DMAG. In the decree establishing the National Society estates the auxiliary body to the Government.

The regulatory bylaws for non-governmental organizations apply to ERC stating that due to international agreements ERC has unique position to deal with internal RCRC Movement and similar organizations.

The Egyptian authorities facilitate all ERC work in case of emergency, therefore there ERC would develop in the following areas:

1. Improve the theoretical and technical capacity of staff and volunteers involved in emergency response via NDRT trainings
2. Establish a well-functioning “Emergency Operations Center” linking the HQ to five main hubs in the branches
3. Design contingency plan and establish contingency stock

EFFECTIVE AND COORDINATED INTERNATIONAL DISASTER RESPONSE IS ENSURED.
Contact information of the IFRC Country office, for partners who wish to find out more

Deputy Regional Director, Regional Office MENA
Mohammed Mukheir
mohammedomar.mukhier@ifrc.org
Tel. +961 05 428 450

Head of Partnerships & Resource Development Unit,
Regional Office MENA
Sami Fakhouri
sami.fakhouri@ifrc.org;
Tel. +961 05 428 422

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