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Coordinated Emergency Appeal

Tigray Crisis: Population Movement Complex Emergency

 International Federation
of Red Cross and Red Crescent Societies

Revised Appeal n° MDRTIGRAY	To be assisted: 660,000 people (355,000 - Ethiopia, 300,000 - Sudan, 5,000 - Djibouti)	Appeal launched: 26 January 2021
Glide numbers: CE-2020-000229-ETH	DREF allocated: 498,763 Swiss francs (Sudan) and 357,391 Swiss francs (Ethiopia) 50,000 Swiss francs (Djibouti)	Appeal end: 26 July 2022
	Funding requirements: 27 million Swiss Francs	

This Emergency Appeal seeks a total of **27 million Swiss francs** to enable the International Federation of Red Cross and Red Crescent Societies (IFRC) to support three National Societies – **Ethiopian Red Cross Society (ERCS), Sudanese Red Crescent Society (SRCS) and Djibouti Red Crescent Society (DRCS)** to deliver humanitarian assistance to and support early recovery of some **660,000 people** (displaced and host communities) in Ethiopia (355,000 people), Sudan (300,000 people), and in Djibouti (5,000 people) affected by multiple disasters and compounding humanitarian vulnerabilities intensified by the Tigray crisis **for a period of 18 months**. The operation will focus on the following areas: **Shelter and Essential Household Items (EHI), Livelihood & Basic Needs, Health & Psychosocial Support (PSS), Water Sanitation and Hygiene (WASH), Protection, Gender & Inclusion (PGI), Disaster Risk Reduction (DRR), and Migration & Displacement**.

With social tensions increasing in different regions of Ethiopia and overwhelming conditions for displaced populations in Sudan and in Djibouti, new displacement routes into Kenya or other neighbouring countries cannot be ruled out. The International Red Cross and Red Crescent (the Movement) partners will continue to monitor these trends and may expand the geographical area if preparedness and response activities are necessary to ensure humanitarian services are provided to affected people in countries beyond the three proposed.

It must be noted that this coordinated emergency appeal in response to the complex emergency will reinforce the actions of the Movement by seeking complementarity with the International Committee of Red Cross (ICRC) response. A strong membership coordination mechanism will be put in place to ensure the support being provided by Participating National Societies (pNS) is fully aligned with this appeal in support of the plans of each of the three National Societies. A Movement coordination platform was created to ensure seamless coordination, co-operation, timely communication and maximizing resources. Movement Partners conduct regular meetings to ensure strong coordination, technical support to ERCS, SRCS and DRCS and complementarity. As of the launch of this Appeal, in addition to the initial DREFs, support to the responses have been through bilateral channels from pNSs in country. A Federation-wide footprint will be ensured to reflect the support provided through this appeal and by all National Societies.

The disaster and the Red Cross Red Crescent response to date

9 September 2020: Tigray Regional Government holds parliamentary elections despite notice by the Federal Government to postpone the national elections due to the COVID-19 pandemic

October 2020: Various attacks reported in Southern Nations, Nationalities, and People's Region (SNNPR) and Oromia region, with civilian casualties.

4 November 2020: Clashes between the Ethiopian Federal Government and the Tigray People's Liberation Front (TPLF) resulted in a growing humanitarian emergency including heavy casualties and population movements both internally and cross border. 9 million people within or near the Tigray region are at risk.

6 November 2020: A series of violent attacks reported in Tigray, Amhara and Asmara in Eritrea. Access in and out of Tigray by road and air is cut off and communication (both telephone and internet) shut down in the region.

9 November 2020: Sudan receives an initial influx of asylum seekers, with an arrival of 7,000 in 24-hours at two border entry points in Sudan's Gedaref and Kassala.

18/20 November 2020: IFRC launches a DREF in support to SRCS to grant relief to 40,000 refugees in Kassala and Gadared for a period of 4 months. Two days later, a DREF is issued to support ERCS providing assistance to 7,500 people displaced in Amhara region, while needs assessments are ongoing in Tigray and other areas.

1 December 2020: At least 950,154 people are reportedly displaced within the Tigray region of Ethiopia into Sudan and other areas since start of the armed violence, as per an assessment conducted by the Tigray regional sector bureaus (WASH, Health, Agriculture, BOLSA,) and the NGO REST (UNOCHA Situation Report Dec 7).

12 December 2020: ERCS/ICRC first humanitarian convoy arrived in Mekelle with humanitarian assistance and medical supplies to hospitals. Following this, regular pipelines were established between Addis and Mekelle

31 December 2020: Consultative meeting to strengthen collaboration between Ethiopia RC and Sudanese RC, Venue: Addis Abba, Ethiopia. To agree a set of actions and collaboration which will inform to a strategic framework which will facilitate both short- and long-term coalitions in response to the compounded humanitarian needs and their impacts between and in the three counties i.e. (Tigray crisis, Covid19, Locusts, food insecurity, population movements and climatic impacted crisis)

20 January 2021: ERCS/ICRC convoy from Mekelle to Adigrat, Axum, Adwa and Shire with humanitarian assistance and food to support medical facilities.



ERCS volunteers providing First Aid attention to people injured during recent violence. Source: @ERCS

The operational strategy

Description of the Humanitarian Situation

Continued tensions in Northern Ethiopia erupted in violent armed clashes early November 2020 and led to mass displacements within Tigray and into neighbouring regions of Ethiopia and Sudan. According to the latest report from United Nations Office for the Coordination of Humanitarian Affairs OCHA¹ about 950,000 people were in need of aid before the crisis, and a projected additional 1.3m will need assistance. Over 60,000 refugees have crossed the international border into Sudan as of mid-December 2020. Two months have elapsed since the crisis erupted in Tigray region resulting in loss of life, injuries, destruction of property, and displacement of the population. Livelihood activity has been disrupted, with livestock and crops damaged; people's access to food reduced dramatically, and property burnt down causing psychological distress. Affected population are without shelter, access to water and sanitation facilities, while existing government structures are partially or fully non-functional in some pocket areas. Roads, health centres, schools, electricity, hospitals, telecoms, are damaged and disrupted.

IDPs fleeing armed violence need emergency humanitarian assistance, such as first aid services and psychological first aid, basic health care as well as water, food and protection. However, humanitarian access is constrained for most agencies. During displacement, refugees are confronted by numerous protection risks with continued reports of violence, lawlessness, looting, abductions, and forced recruitment. Crossing over into Sudan, refugees encounter camp settings strained beyond capacity and lacking in basic healthcare, WASH and shelter infrastructures. There are also a significant number of displaced people who require special attention, such as people living with disabilities, pregnant women, and hundreds of unaccompanied children. Eventually, IDPs and refugees will seek support within the host communities which are already extremely stretched and stressed by previous shocks that have affected these regions since 2019, such as floods, droughts, locust infestations, malaria and COVID-19 pandemic.

¹ ETHIOPIA - TIGRAY REGION HUMANITARIAN UPDATE Situation Report Last updated: 14 Jan 2021

Ethiopia

The ongoing crisis in Tigray has aggravated an already dire situation in Ethiopia, with acute food insecurity escalating. It is estimated that over 1 million farmers in Ethiopia have suffered crop losses, heavily affected by locust infestations that have devastated an estimated 200,000 hectares of cropland. As a result, a food shortage is looming with food prices reported to have doubled. Before the crisis, 600,000 people in the Tigray region were already dependent on humanitarian assistance². Market functionality has been disrupted by the armed violence with limited access to financial institutions and banks, thus affecting the cash flow. This is normally the harvest season in the region, with farmers having very little or nothing at all to salvage. The projections are gloomy in Ethiopia, with climate induced La Niña conditions leading to below average rainfall which may eventually develop into a severe drought and devastate the remaining crops, cutting the already dwindling food supply and causing a sharp drop in incomes.

Sudan

In Sudan, refugees fleeing the crisis have settled mostly in Kassala and Gedaref States which are already overwhelmed with over 900,000 refugees and migrants. Sudan has received an influx of close to 60,000 refugees from Ethiopia within a two-month time. With the recent sudden unplanned influx of refugees from Ethiopia, the transit centres have exceeded their capacity. Gaps remain across all sectors, including access to clean drinking water, latrines, handwashing stations, and bathing units as well as shelter and basic health care and protection services. To accommodate refugees and migrants, a significant number of trees in the area were cut, deforesting the region, contributing further to soil erosion, which has impacted the displaced, migrants, refugees and the host communities alike. The risks associated with COVID-19 are extremely high in these crowded sites, and social tensions cannot be ruled out. Sudan is also likely to see increased food insecurity as the result of inflation, pushing the cost of some basic food items up by 200%, as well as the flooding which submerged approximately 1.4 million hectares of cropland³

Djibouti

In Djibouti, there are signs that the situation is starting to deteriorate. Currently, 66 Ethiopians of Tigray origin that have returned from the Gulf region transiting in Djibouti have now been stranded due to the current Tigray crisis. As tensions between the different ethnic groups were present in the transit camp of Aouraoussa, authorities decided to transfer the Tigrayans to Hol Hol refugee camp⁴ for processing and registration as refugees. It is possible any arriving Tigrayans wishing to claim asylum will have to be housed in Obock Camp, putting pressure on a town already suffering from scarce services and extreme levels of poverty. In the initial days of the crisis, over 600 Ethiopian trucks were abandoned in Djibouti and around 80% of Ethiopian truck drivers hail from the Tigray region⁵. So far, 165 truck drivers claimed asylum and were transferred to Hol Hol camp to be processed and registered as refugees. Moreover, Ethiopians from different regions continue to cross the border daily for private and commercial purposes, both officially and unofficially, and the situation can change rapidly stranding Ethiopians in Djibouti indefinitely.

² Ethiopia: Tigray Region Humanitarian Update No.3, UNOCHA

³Sudan: Acute Food Insecurity Projection Update October – December 2020, IPC

⁴ Hol Hol is a refugee camp, managed by UNHCR, housing around 6,500 refugees and asylum seekers, primarily from Somalia.

⁵ UNHCR briefing, Djibouti, 16.11.2020

Overview of the National Societies response to date

Ethiopia Red Cross Society

Ethiopia Red Cross has a fleet of ambulances that are strategically located in different areas to respond to emergencies. Additionally, ERCS has a functional network of 50 pharmacy outlets across the 12 identified regions which can be considered for the available and technically trained pharmacists. Through their volunteer paramedics, ERCS has been on the frontline from the onset of the clashes to offer first aid and ambulance services to injured civilians and military personnel for basic first aid, and referrals to the higher health centers. On 20 November, IFRC allocated CHF 357,391 DREF to enable ERCS to provide assistance to 7,500 people in Amhara following the Tigray clashes. The DREF allocation was to cover the needs of the affected population for a period of four months (end date:31 March 2021). The overall strategy focused on covering the immediate Health, WASH, shelter, livelihoods and Restoring Family Links (RFL) services for 7,500 displaced households.

To date, ERCS has undertaken the below actions:

- Fleet of ambulances and paramedics assisted 3,000 injured persons in Amhara and Southern Tigray and provided 1,172 psychosocial support (PSS) consultations through the financial support from ICRC, IFRC and pNSs.
- 230 families benefited from restoring family links (RFL) services in coordination from ICRC.
- Distribution of food to 10,000 households inside Tigray and to IDPs in neighbouring regions.
- Rehabilitating water systems and distributing water and Non-food items (NFIs) to hospitals to 5,466 households in Mekelle and neighbouring areas with the financial and technical support of ICRC.
- Together with the ICRC, distributed essential medicines and medical equipment to five hospitals in Tigray.



ERCS distribution of essential household items to people displaced by violence in Tigray. Source @ERCS

Ethiopia Red Cross: Existing Actions



Fleet of ambulances deployed
3,000 people treated



Fresh food distribution in
Tigray and to IDPs moving
to Amhara



WASH infrastructure at IDP
sites in Gondar
Water trucking in Mekele



RFL services with
coordination from ICRC



Distributed NFIs in Ofafa,
Ogalo, Humura, Dansha
and other areas

Sudan Red Crescent Society

SRCS has been implementing activities in refugee settlements in Eastern Sudan as the implementing partner of UNHCR before the current influx of refugees from Ethiopia. The National Society was therefore present from the outset of the crisis, supporting the registration of new arrivals, distribution of household items and food, as well as provision of primary health services through the existing SRCS Health centre in Hamdayet and offered much-needed protection services. On 18 November 2020, IFRC and SRCS launched a DREF operation to provide lifesaving emergency services to newly arrived Ethiopian refugees. The DREF allocation targeted a total of 8,000 households (40,000 persons) in Hamdayit centre, Al Lukdi transit centres and Um-Rakoba settlement. The key areas of focus were shelter and household items distribution for 5,000 households; provision of health services to 8,000 households; water and sanitation interventions to reach 8,000 households and Protection Gender and Inclusion for 8,000 households.



Registration of recipients of humanitarian assistance by SRCS volunteers
Source: @ SRCS

With support from the DREF as well as other Movement and non-Movement partners, SRCS has undertaken the following key interventions since the onset of the influx:

- Distribution of tarpaulins, blankets, jerry cans, mosquito nets and sleeping mats.
- Food distributions with support from Muslim Aid and World Food Programme (WFP).
- Provision of primary health care services through the SRCS Health Unit in Hamdayet.
- Establishment of a new health unit in Tunaidba camp. World Health Organization (WHO) supported with the supply of medicines for the new health unit and one ambulance has been deployed from Khartoum to support the new clinic.
- SRCS has deployed one Emergency Water Treatment Unit (WTU) from White Nile State to the new settlement camp in Tunaidba.
- Volunteers are deployed conducting COVID-19 screening in transit centres and at SRCS health units.
- SRCS provides support to United Nations High Commissioner for Refugees (UNHCR) with the development of new sites in Um Rakuba and Tunaidba, including clearance of land as well as setting up WASH and Shelter infrastructure.
- With support from ICRC, SRCS is providing Restoring Family Link services, including the collection of “Anxious for News” requests and facilitating phone calls.
- Support registration, protection desk and mobile teams in Hamdayet to identify persons with specific needs and provide safe referrals as well as PSS services.

Sudan Red Crescent: Existing Actions



2 SRCS health centres rehabilitated and operational



NFIs distributed with support from DREF for 1000 families



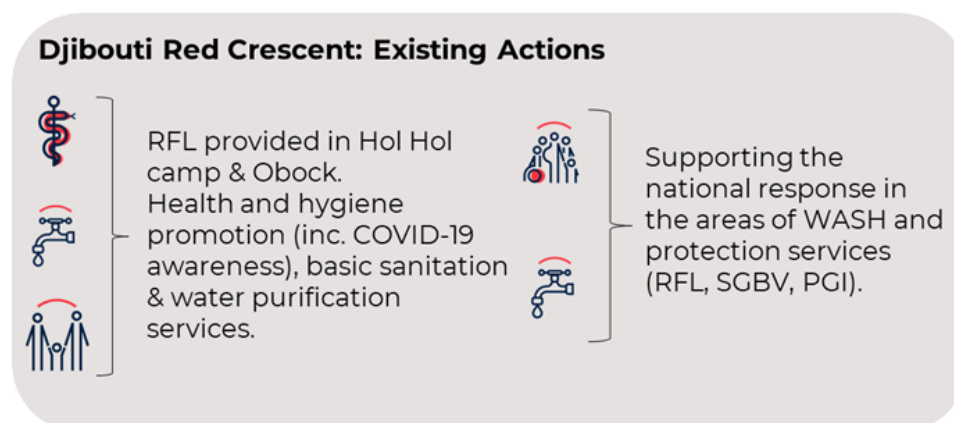
1 Water Treatment Unit installed and operational in Tunaidba



Provision of safe referrals and identification of PSN at protection desk in Hamdayet

Djibouti Red Crescent Society

Djibouti Red Crescent has been attending coordination meetings, hosted by Office National d'Assistance aux Réfugiés et Sinistrés (ONARS), since November. Between the 18 and 24 November 2020, DRCS took part in a joint assessment and planning mission together with ONARS, UN agencies (led by UNHCR) and the Ministry of Interior. Sector leads have been identified by the government and national authorities with Djibouti Red Crescent tasked to support the preparation and response in the areas of WASH (including COVID-19 awareness) and protection (RFL, Sexual and gender based violence (SGBV), Protection Gender and Inclusion). DRCS has volunteers present in Hol Hol refugee camp and Obock, providing RFL services and is also supporting IOM in Aouraoussa migrant camp in WASH, health and hygiene promotion, water purification, COVID-19 awareness and RFL services. DRCS is also actively monitoring the situation through its existing branch and volunteer networks and the ongoing COVID-19 operation.



Coordination and partnerships

Multi-Country Approach to the Emergency Operation

A multi-country approach is essential to ensuring safety and security through the provision of assistance and protection services to displaced persons and affected communities, particularly the most vulnerable groups. The Movement, with its special status as auxiliary to the national authorities in countries where it operates, has the opportunity to advocate on behalf of such vulnerable populations, ensuring that the rights of these groups are respected. This includes commitments made under the Global Compact on Refugees which recognizes the importance of a multi-country and multi-stakeholder approach, so as to better assist and to protect refugees and the importance of working towards durable solutions from the start of a crisis. A coordinated approach will help to ensure that those affected are able to make informed choices, support with voluntary repatriation once conditions are safe, and with effective reintegration into the country of origin. In addition, a multi-country coordinated response provides an opportunity for continued services for populations on the move, through Humanitarian Services Points, continued PGI and PSS support, including Restoring Family Links (RFL), and recovery services once a durable solution is found. A multi-country response will ensure essential information sharing and coordination for a more agile and effective response in all areas: advocacy, protection, gender and inclusion, restoring family links, and to seek durable, feasible and lasting solutions.

Red Cross Red Crescent Movement Coordination

Ethiopia

Response operations are coordinated between ERCS, ICRC, IFRC and several PNSs - Danish RC, Finish RC, Netherlands RC, German RC, Austria RC, Swiss RC, Qatar RC, British RC and Canadian RC. The ICRC and ERCS will continue addressing humanitarian needs stemming from episodes of armed violence throughout the country. The IFRC, through this appeal, will coordinate and provide support to ERCS and PNSs, IDPs fleeing the crisis, host communities and refugees in-country. Coordination mechanisms will be set-up to ensure streamlining of operations and activities, avoiding duplications, and ensuring maximising the optimal use of Movement resources.



ERCS conduct distributions at a IDP site for people displaced by recent violence. Source @ERCS *ERCS volunteers prepare for distribution of essential household items to people displaced by recent violence. Source @ERCS*

Sudan

SRCS' Head of Disaster Management leads weekly operational coordination meetings in Sudan. All in-country Movement partners participate in this meeting, including IFRC, ICRC, Danish RC, Spanish RC, Swedish RC, Swiss RC, Netherlands RC, German RC, Turkish RC and Qatar RC. Movement support to the SRCS Refugee Response operation is well coordinated through this national coordination platform to ensure complementarity and a joint approach to technical and operational support to SRCS in the response. A consolidated Movement Plan to the Refugee Response is in development, planning for three different scenarios and providing a detailed overview of Movement (planned) support to the plan.

Djibouti

Djibouti Red Crescent currently has no bilateral partners supporting it. A Disaster preparedness delegate is permanently based in Djibouti embedded in the National Society, providing it with technical and day to day coordination support. ICRC supports DRCS through their Mission in Djibouti, and support to the National Society is effectively coordinated with DRCS, IFRC and ICRC communicating several times per week in-country. Nevertheless, with DRCS currently only benefiting from ICRC annual programmatic funding and some limited, primarily earmarked IFRC COVID-19 funding, support is required for the National Society to be able to further engage in the ongoing response and to better prepare to scale up as required. ONARS are running weekly coordination meetings, which was paused during the Christmas holidays but will be resumed. IFRC, ICRC and DRCS are having regular communication following the development of the situation closely.

Overall Movement Coordination

A Movement coordination platform covering all three countries will ensure strengthened coordination and synergy in planning the response. The Movement will have a shared understanding of the situation and leverage each other's capabilities in multi-country humanitarian situation. Meetings will be led by National Societies and co-facilitated by ICRC and IFRC, with the presence of all involved PNSs. As the evolution of the crisis is still unpredictable and the humanitarian consequences go well beyond the Tigray region, National Societies and partners must be updated, coordinated, and prepared to engage in different circumstances.

Given the evolving situation, multi-country context analysis and regular information sharing between ERCS, SRCS and DRCS, mediated by the IFRC/ICRC is essential to understand and prepare for:

- Dynamic crisis trends and scenario building for any possible escalation
- The scale of population movement across international borders
- The type and cultural background of population (age, gender, disability, status) and gauge their specific needs in advance (first aid, PSS, Immunisation, PGI, Shelter, Food, WASH, and IPC).
- Access to information by the affected population.

- Potential scenarios for displaced/refugee populations (resettlement, voluntary repatriation once conditions are safe, third country solutions)

Multi-country services provided:

- One Movement Coordination platform with appropriate 4W tools and maps
- Multi-country communication and visibility
- Multi-country up to date security information
- Coordinated needs assessment and contingency planning.
- Technical advisory for population on the move, with attention to groups with specific needs
- Rapid surge activation for a timely response

Overview of other actors' actions in country

In Ethiopia, there are currently 31 actors involved in non-refugee response operations, including 16 INGOs, 9 UN agencies, 4 National NGOs and 2 Government agencies. The Inter-cluster coordination group (ICCG) and sectoral clusters were triggered in Ethiopia in the last week of November. WFP is leading the Food and Logistics Cluster. UNICEF is leading the WASH and Nutrition Clusters. UNHCR and IOM are co-leading a daily inter-agency coordination cell in Shire, which involves both refugee issues and the emerging IDP situation. Most agencies have preparedness plans in place, but access remains extremely constrained for all. The ERCS is co-leading the Prevention and Response to Sexual Exploitation and Abuse (PSEA) network with IFRC support. Depending on National Disaster Risk Management Commission (NDRMC) decision, the Strategic Multi-Agency Coordination (SMAC) forum, and Federal and Regional Emergency Operation Centers (EOCs) could be activated to mobilize and prioritize available scarce resources and coordinate emergency incident status information and other resources as required. The Government has activated the Zonal Emergency Coordination Center in Gondar and four more Incident Command posts in four woredas/districts bordering Amhara with Northern Tigray (Adiremets, Baker, Dansha, and Maikadr).

In Sudan, the Commissioner of Refugees (COR) and UNHCR co-chair at national level, the Refugee Consultation Forum (RCF). Operational coordination in the field takes place in the Refugee Working Groups (RWGs), also co-chaired by COR and UNHCR. The inter-agency response for the Tigray crisis is coordinated by the RWG based in Kassala and a subgroup RWG has been established in Gedaref. UNHCR has launched the inter-agency refugee emergency response plan for the refugee influx from Ethiopia⁶ which is guiding the overall response.

In Djibouti, ONARS has been holding coordination meetings which Djibouti Red Crescent has been attending together with IFRC and/or ICRC. ONARS and the Ministry of Interior have identified triage and transit points and Phase 1 and 2 campsites with lead agencies identified for each technical sector (Health, WASH, MHPSS) for the response. Djibouti Red Crescent is closely coordinating with all stakeholders on the preparedness measures and liaising with UNHCR and IOM daily through the ongoing activities at the Aouraoussa transit camp and Hol Hol camp.

Needs assessment and targeting

Ethiopia

With the areas in and around Tigray continuing to face insecurity and violence, the region is being impacted by significant internal displacement with an estimated 1 million people displaced within Tigray (according to ERCS' assessment). Approximately 96,000 Eritrean refugees currently face or are at risk of secondary displacement, with growing concerns that they may be forced to move into insecure areas. Access to basic resources such as food, water, fuel, cash, and medical supplies is extremely limited and has impacted essential services such as banking and hospitals. Areas bordering Tigray have noticed food price increases of 100 to 200 percent. Humanitarian access also remains limited and telecommunications disrupted in and around Tigray limiting both aid services and access to reliable information. The assessment report completed by ERCS highlights food, water, and shelter as the major critical needs as most of the people live in open space due to inadequate support reached in the affected areas. Psychosocial support and protection needs have also been highlighted as safe and free movement of civilians are in question.

Furthermore, Ethiopia is among the countries with the most humanitarian needs in the world, doubled in the past year to 16.5 million people, which is partly driven by the ongoing COVID-19 pandemic, but also long-term climate induced crisis driving food insecurity and poverty. With new IMF estimates of 0% GDP growth in 2021, many in Ethiopia will fall further into poverty and more vulnerable situations with negative coping mechanisms endangering people's safety and protection and fostering social tensions. Among the hardest hit regions by the 2020 locust plagues, the UNOCHA

⁶ <https://data2.unhcr.org/en/documents/details/83331>

estimates that at least 1 million Ethiopians suffered crop losses. As a result, it is now estimated that from January to June 2021, 12.9 million people will face acute food insecurity.

Sudan

Over 60,000 people have crossed the border from Ethiopia to Sudan stretching existing capacities despite continued scale-up efforts. Since the beginning of December, the number of new arrivals has been relatively stable with a daily arrival rate of 200 people a day. The Interagency Refugee Response Plan is planning for a most likely scenario of 100,000 new arrivals in the first six months of the response, and a worst-case scenario of 200,000 new arrivals in the first six months of the response. Both reception areas in Kassala (Hamdayet) and Village 8 (Gedaref) remain highly congested with poor living conditions due to continued huge gaps in the provision of basic services in all sectors, including WASH, Health, Food, Shelter and Protection. As of January 24, a total of 22,916 people remained at Hamdayet centre, a centre with an original capacity to host less than 1,000 people. Relocation to the permanent settlement of Um Rakuba and the newly identified Tunaidba settlement remains a priority, but the process has been slow due to various factors, including long distances, lack of transport and reluctance of refugees to move away from the border area.

In Sudan, inflation rose by 214% from August 2019 to August 2020, putting additional strain on many to be able to afford basic needs and continues to have a negative impact with the result that households cannot afford basic essential needs like water, food, housing, clothing, healthcare, and education. The economic crisis has led to a significant increase in food insecurity, deteriorating health, and malnutrition. In addition to the economic situation, 1.9 million people remain internally displaced due to years of conflict and the country hosts more than a million refugees from other countries including Eritrea, Ethiopia, and South Sudan. Many of these refugees are living in camps and settlements under dire conditions with lack of shelter, inadequate access to water, poor hygiene, and insecurity amongst others, further overstretched by the Tigray crisis and recent influx. The capacity of infrastructure and basic services are overstretched. Health systems were already under major pressure, which has only been further exacerbated due to the impact of the COVID-19 pandemic and recent Floods.

The high influx of new arrivals has a significant impact on the host communities and the environment. Due to the overcrowding at transit centres, many refugees are currently residing in the existing villages with host communities, further stretching the already limited available basic services. To expand Um Rakuba and clear land for the new camp Tunaidba, many trees were cut down. The environment will suffer further due to overcrowding and increased pressure on available natural resources.

SRCS has 2 regional branches involved in the response, Kassala and Gedaref branches. The capacity of Gedaref branch is especially overstretched, the branch needs urgent support in National Society Development (NSD), including staff and volunteer management.

Djibouti

There are currently 66 Tigrayan returnees from the Gulf and 165 truck drivers from Tigray (i.e., total of 231 persons) who have claimed asylum in Djibouti and have been transferred to Hol Hol refugee camp for processing and registration. The situation remains unpredictable as hundreds of Ethiopian returnees from the Gulf region pass through Djibouti each month with any Tigrayan unwilling to return to Ethiopia entitled to claim asylum and be registered as refugees in Djibouti. Around 5,000 trucks from Ethiopia enter Djibouti daily as Djibouti port serves over 95% of Ethiopian trade. In addition to the official entries, it is estimated thousands of Ethiopians enter Djibouti every year to transit through the country to migrate to the Gulf countries for employment opportunities. ONARS and UNHCR estimate a likely scenario of 5,000 Tigrayans claiming asylum in Djibouti with worst case scenario predicting some 30,000 refugees entering Djibouti if current unrest affects other regions bordering Djibouti directly. Djibouti Red Crescent has been designated to lead the WASH (including COVID-19 awareness) and protection (RFL, GBV, PGI) sectors, and DRCS volunteers will be called upon to provide First Aid support at designated triage and transit points. Within the country, Hol Hol refugee camp, managed by UNHCR and currently housing around 6,500 refugees primarily from Somalia, has the space to scale up to accommodate an additional 5,000 refugees.

Hol Hol itself is a small town with a population of around 3,000 with high levels of poverty and very limited services. The refugee population of the nearby camp is already more than double the town's population and new arrivals will be putting further pressure on the scarce resources and limited infrastructure. To promote social cohesion and inclusion, it is important to include the host community in the provision of basic services.

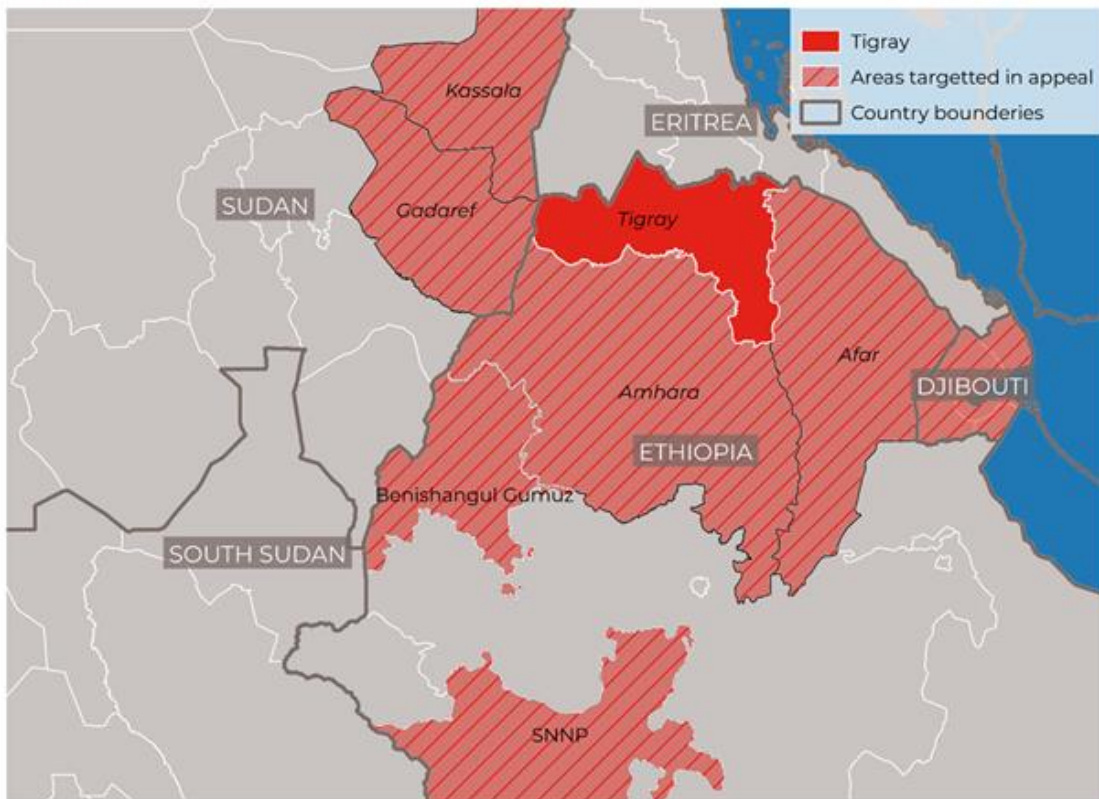
DRCS has volunteers present in Hol Hol town, however, there is no formal sub-branch structure that has been set up. Further, volunteers will need to be trained to both support the recent arrivals as well as to prepare for any further arrivals. Although Hol Hol town is only 60km from Djibouti-ville, the drive takes over two hours as the road is unpaved and in extremely poor condition after leaving the capital. Considering the poor connections, it is essential to establish a sub-branch structure in Hol Hol to be able to effectively coordinate with all stakeholders and to support the response operation and DRCS volunteers.

Targeting

The population targeted by this emergency operation has in consideration several factors: 1) geographic targeting, in non-armed violence affected areas, and in complementarity to the ICRC response supported actions; 2) the status of the population and consequently the type of their needs, and 3) the multiple shocks that have affected the population of concern in addition to the armed violence. Priority targeting will be informed by appropriate Protection, Gender and Diversity assessment and analysis. With the above in consideration, the following are the targeted areas and corresponding population in need.

Region	Locations	Status	Population Targeted	Typology of needs per sector
Ethiopia				
Beshangul Gumuz	Metekel Zone	IDPs and host communities Red Cross Branch volunteers and staff	170,000	Shelter, Health, WASH, IPC, MHPSS, PGI, DRR, NSD, livelihoods and basic needs
SNNPR region Konso zone	Konso Zone, Benshoko and benchmaji zone Ale Weroda Darashe Weroda	IDPs and host communities Red Cross Branch volunteers and staff	80,000	Shelter, Health, WASH, IPC, MHPSS, PGI, DRR, basic needs and livelihoods and NSD
Amhara	Addi Adekay district, North gondar includes Abdirafi, Ketema nugus and central Gondar zone	IDPs and host communities	70,000	Shelter, Health, WASH, IPC, MHPSS PGI, DRR, NSD, livelihoods and basic needs
Afar	Dalol district, Kilbati zone/zone 2 (Abala, Yallo, Megale, Erebti, Berhale and Kuneba) districts	IDPs and host communities	35,000	Shelter, Health, WASH, IPC, MHPSS, PGI, DRR, NSD, livelihoods and basic needs
Sudan				
Kassala	Hamdayet Transit Centre	Refugees, host communities and RC Kassala branch	18,000 refugees, 3,600 host communities Other: 81,900	Shelter, Health, WASH, IPC MHPSS, PGI, DRR and NSD Other beneficiaries are mainly reached with health and hygiene promotion campaigns
Gedaref	Lukdi reception centre, Village 8 transit centre, Um Rakuba settlement, Tunaidba settlement	Refugees, host communities and RC Kassala branch	37,000 refugees, 7,400 host communities Other: 152,100	Shelter, Health, WASH, IPC, MHPSS PGI, DRR and NSD Other beneficiaries are mainly reached with health and hygiene promotion campaigns as well as the tree planting initiative
Djibouti				
Ali Sabieh	Galilee (triage and transit centres), Aouraoussa	Refugees, host communities	3,000	WASH, First Aid, health and hygiene promotion, IPC, MHPSS, PGI especially SGBV

	(camp phase 1), Hol Hol (camp phases 1&2)			
Dikhil	Galafi (triage) Galafi 2 (transit centre), Gourabous (camp phase 1)	Refugees, host communities	500	WASH, First Aid, health and hygiene promotion, IPC, MHPSS, PGI especially SGBV
Obock	Obock (triage and transit centres)	Refugees, host communities	500	WASH, First Aid, health and hygiene promotion, IPC, MHPSS, PGI especially SGBV
Tadjoura	Balho (triage and transit centres), Dorra (camp phases 1&2)	Refugees, host community	1,000	WASH, First Aid, health and hygiene promotion, IPC, MHPSS, PGI especially SGBV



Ethiopia:

TARGETS

355,000
IDPs, host community members
& branch volunteers and staff

ACTIVITIES

- Health
- Shelter
- Livelihoods & Basic Needs
- PGI
- WaSH
- NSD
- DRR

Sudan:

TARGETS

300,000
Refugees, host community
members & branch volunteers
and staff

ACTIVITIES

- Health
- Shelter
- WaSH
- PGI
- DRR
- NSD

Djibouti:

TARGETS

5,000
Refugees & host community
members

ACTIVITIES

- Health & First aid
- RFL
- WaSH & Hygiene promotion
- PGI & SCVB

Proposed Areas of Intervention

Operational objective: Provide relevant humanitarian and early recovery assistance as well as protection services to the population affected by the Tigray crisis and underlying drivers of vulnerability (floods, droughts, locust, COVID-19, climate change), in Ethiopia, Sudan and Djibouti, while delivering an accountable operation that engages with and listens to affected people when meeting their needs, especially the most vulnerable and marginalized		
Ethiopia	Sudan	Djibouti
<ul style="list-style-type: none"> • Integrated humanitarian and early recovery assistance to IDP and host communities • Address compounded disasters, secondary impacts • Do No Harm • Support recovery process and durable solutions • ERCS's Strengthening Coordination 	<ul style="list-style-type: none"> • Integrated humanitarian and early assistance to refugees and host communities • Address compounded disasters, secondary impacts • Do No Harm • Support recovery process and durable solutions • SRCS's Strengthening Coordination 	<ul style="list-style-type: none"> • Integrated humanitarian assistance to refugees and host communities • Contingency planning • DRCS capacity strengthening • Do no harm
Multi-County Support		
<p>Peer to Peer support (NS/Branch – NS/Branch coordination, information sharing and support) PGI and PSS support: Continuous PGI and PSS services for cases requiring special attention people (refugees and voluntary returnees). Humanitarian Service Points: Allowing continuity of humanitarian services along the travel/journeys of the refugees and voluntary returnees. Advocacy for durable solutions Multi-country response services: i. RC/RC Coordination & IM tools ii. contingency planning and technical advisory. iii. Rapid Response / surge activation. iv. Coordinated logistics and supply chains; v. Coordinated efforts for positioning National Societies' Response and assertive Partnership and Resource Developments (PRDs).</p>		

The operational objective will be achieved through:

- **Multisectoral humanitarian relief services to IDPs and Refugees on the move, through Humanitarian Service Points**, providing: first aid services, Psychosocial support, Food and Household items (preferably through Cash and Voucher Assistance (CVA)), PGI including identification and referral of SGBV and children protection cases, Water and Hygiene, including Menstrual Hygiene Management (MHM), IPC, Immunisations, Malnutrition screening and referrals for pregnant women and women in labour, COVID-19 surveillance and preventative measures for high risk groups, access to timely, accurate and trusted information as a relief service. Communities will be kept informed about operational activities and progress including support available from the National Societies, selection criteria, distribution processes, delays, or challenges and how people can participate.
- **Short to medium term humanitarian assistance and protection** to IDPs, Refugees that have found **temporary accommodation in formal or informal shelters and settlements**, including Shelter & Essential household items (EHI), WASH, safe spaces for children and women, safe referral systems for cases of SGBV and child abuse or neglect, sexual and reproductive health (SRH), PSS support, primary health care (including includes referral systems and ambulance services), basic needs support (through cash or in-kind), community engagement & accountability services that promote the health, safety, wellbeing and awareness of IDPs and refugees about their rights and delivers an accountable operation that meets the needs of the affected population. Field interviews will be conducted to show the effects on special groups and their specific needs during emergencies, and message specific to these groups especially women and children, persons with disabilities will be communicated.
- **Support to host communities and population affected by the crisis and other shocks (non-displaced)**, including those families hosting IDPs and refugees, with basic needs support and livelihood strengthening or recovery, basic health care, drinking water supply, sanitation infrastructure requirements, hygiene promotion and materials provision, and PGI and PSS support wherever needed; Messages on coexistence between refugees and host communities and the need to support both groups will be disseminated during distributions and home visits.

Logistics and Supply chain

Logistics responsibilities will include sourcing the most urgent and relevant relief items, delivered and distributed equitably to those in need, in a timely, transparent, and cost-efficient manner. For the initial response, available prepositioned National Society stocks will be utilized and replenished locally or internationally depending on local availability.

Local procurement will be carried out in accordance with the IFRC and National Society's standard procurement procedures with support of any deployed logistics surge in the country and the IFRC Regional Logistic Unit in Nairobi to ensure procurement activities will be carried out in accordance with the IFRC standard procurement procedures. Warehousing may play a significant role in these operations, where possible the National Society will use central warehouses to store items in advance of distribution activities. Fleet assets will be deployed as and where requested, assessments of logistics capacity and systems (incl. procurement, transport, warehousing, fleet management) will be carried out where possible to enhance National Societies' logistics infrastructure on hardware, software, capacities and preparedness.

Planning, Monitoring, Evaluation and Reporting (PMER)

Programme planning, monitoring, evaluation, and reporting will be conducted with close collaboration with all stakeholders. Federation-wide monitoring and reporting approach will be adopted for this operation. PMER will support continuous monitoring and assessment of the situation in the three countries to inform response activities. PMER will work closely with Information Management (IM) to support the National Societies data collection, management, and analysis to inform timely decision making by National Societies and the IFRC. Data collection systems and tools will be set up to be able to collect disaggregated data. PMER will also support the necessary evaluation for this operation and will support real-time, midterm and final evaluations.

National Society Development

A strong focus will be placed on strengthening National Societies' capacities, enhancing skills and task shifting as leading humanitarian actors in their respective countries by promoting greater coordination and local cooperation and partnerships, governance and strategic planning, engaging and strengthening its existing volunteer network, stabilizing or increasing the National Societies' financial resources, including good management practices, investing in digitalization and digital inclusion and strengthening the National Societies' timely response capacities. The Appeal will thus focus on the following areas:

- **National Society Preparedness:** The Appeal will invest in supporting further implementation of the Preparedness for Effective Response (PER) Plan of Action in Ethiopia and support Sudan and Djibouti Red Crescent respectively to engage in the PER approach identifying areas of operational support that are required.
- **Coordination, cooperation and local equal partnership:** Support the ERCS, SRCS and DRCS to strengthen their auxiliary role and enhance their visibility and recognition as priority humanitarian actors in their countries through active participation and role in humanitarian country teams and coordination mechanism. Attention will be made to promote the application of the global IFRC-UNHCR partnership.
- **Governance and Strategic Planning:** support ERCS, SRCS and DRCS in the development of stronger and updated governance policies that allow accountable and agile decision-making, compliant with RC/RC internal rules and regulations as well as the principles and best standards of humanitarian action.
- **Financial Management and Resource Mobilization:** review of the financial procedures, and tools, and revisit the National Societies business model, including a resource mobilization plan that permits stability.
- **Digitalization and digital inclusion:** modernize the work platforms used in the National Society for better and faster coordination between teams, as well as better controls and outreach mechanisms to branches and volunteers.
- **Volunteer Management:** bring volunteers closer to the National Society, provide adequate duty of care, capacitate volunteers to act according to principles of humanitarian action and CEA.

COVID-19 Response

This operation and its operational strategy considers the risks related to the current COVID-19 pandemic and is aligned with the IFRC global emergency appeal that supports National Societies to deliver assistance and support to communities affected or at risk of being affected by the COVID-19 pandemic.

<i>COVID-19 cases as of 22 January (source: PAHO)</i>		
Country	Confirmed cases	Deaths
Ethiopia	132,034	2,044
Sudan	28,233	1,707
Djibouti	5,913	61

The National Societies' response to COVID-19 is supported through the [IFRC global appeal](#), which is facilitating and supporting them to maintain critical service provision, while adapting to COVID-19. This Coordinated Appeal operation is aligned with and will contribute to the current global strategy and regional Emergency Plan of Action for COVID-19 developed by the IFRC Africa Regional Office, in coordination with global and regional partners. This means that the National Societies will ensure, even as they respond to the humanitarian needs due to the Tigray Crisis, that COVID-19 prevention measures are adhered to, in line with the regional plan of action and their national COVID-19 country plans.

IFRC continues to assess how emergency operations in response to disasters and crisis should adapt to this crisis and provide necessary guidance to its membership on the same. The National Societies will keep monitoring the situation closely and revise the plan accordingly if needed, taking into consideration the evolving COVID-19 situation and the operational risks that might develop, including operational challenges related to access to the affected population, availability of items, procurement issues, and movement of National Societies volunteers and staff. For more information, please consult the [COVID-19 operation page IFRC Go platform](#).

Security Context of the response operation and security services in place

The operational risk environments in Ethiopia, Sudan and Djibouti are diverse and threats vary widely by location. IFRC has been progressing to erect a strong security system in support of this multi-country Emergency Appeal while safeguarding the operation, staff and assets. Considering the volume and scale as well as regional sensitivities a full-time operational security focal point will be sought. The security focal point will keep under security management control all three countries and the IFRC operation designed under this Emergency Appeal. Taking also in to account the fact that most of the operational areas are either in Orange or Red phase, a detailed and well-orchestrated security support mechanism will be deployed with strong emphasis on coordination and cooperation on security matters with key stakeholders such as the Host National Society, ICRC, UN and INGO Partners. An advanced telecommunication system will be designed and implemented to strengthen operational management and security oversight. Secured and well-designed internal security setting will support Country and Operations management with high standard MSR compliance (design, plans, contingencies, internal regulations, security oversight and controls). Close technical supervision from a security and safety angle will be carried out by the Regional Security Unit.

Areas of Focus



Shelter

People targeted: 160,000

Ethiopia: 110,000 (Male: 48,400 / Female: 61,600)

Sudan: 50,000 (Male: 16,500 / Female: 33,500)

Djibouti: N/A

Requirements (CHF): 4,236,000

Needs analysis & Proposed intervention

Displaced populations have abandoned their homes and moved to seek refuge in camps or host communities in different regions. Majority of displaced persons are living in congested open settings with minimum shelter support. ERCS and SRCS will seek to ensure that people in camps, particularly people needing special assistance, can live in safety and dignity, through the distribution of essential household items and emergency shelter kits and technical support, guidance and awareness-raising in safe shelter design and settlement planning provided. During the construction of emergency shelter, National Societies will encourage communities to utilize salvaged and locally available materials as part of community contribution to the assistance.

Shelter Outcome 1: Communities in disaster and crisis-affected areas restore and strengthen their safety, well-being and short-term recovery through emergency shelter and settlement solutions

Shelter Output 1.1: Short-term shelter and settlement assistance is provided to affected households

Ethiopia and Sudan

- Assessment of shelter and WASH needs, capacities, and gaps. Do no harm procedures will be ensured in the assessments to incorporate target recipient safety.
- Cash feasibility and market assessments will be conducted to inform possible cash interventions to support shelter outcomes, use of rental accommodation in urban settings or support host family arrangements.
- Identify coordination needs with shelter cluster, local authorities and communities; and ensure complementarity and strengthened coordination.

- Setting criteria for beneficiary eligibility, selection, registration, and training
- Distribution of emergency shelter kits and essential household items (Blankets, Jerrycans, Mattresses, Kitchen sets). Energy-saving cooking solutions and solar lamps will be considered in distribution prioritising single-headed female households and young girls.
- Construction of accessible communal shelters inclusive of WASH facilities
- Construction of communal kitchens
- Monitoring of the use of distributed shelter and household items and/or cash will be established through post-distribution monitoring (PDM) and satisfaction surveys.

Shelter Output 1.2: Technical support, guidance and awareness-raising in safe shelter design and settlement planning and improved building techniques are provided to NS staff, volunteers, and affected households

Ethiopia and Sudan

- Design, translate and disseminate shelter related IEC materials.
- Mobilization and training of volunteers on build back safer and “All under one roof” for targeted communities
- Demonstration of shelter kits use and emergency shelter construction at distribution site.
- Awareness-raising to beneficiaries on safe shelter techniques.
- Training on simple construction of fuel-efficient stoves techniques to reduce reliance on timber.
- Coordinate with WASH for service access, design and siting where resettlement happens other than original location.



Livelihoods and basic needs

People targeted: 66,667

Ethiopia: 36,667 (Male: 16,114 /Female: 20,553)

Sudan: 30,000 (Male: 12,500 /Female: 17,500)

Djibouti: N/A

Requirements (CHF): 5,075,000

Needs Analysis & Proposed intervention

Ethiopia and Sudan: Populations have had their livelihoods impacted as a result of armed violence, floods, droughts, locust infestations – reducing income, and negatively impacted purchasing power thus contributing to the risk of deteriorating food security in the affected areas. ERCS will target displaced populations in camps with food rations either in kind or through a cash mechanism (depending on market feasibility assessment) for at least six months, with further support to special population groups such as children, pregnant and lactating women, the sick, disabled, and older people with food supplements. Medium-term livelihood recovery needs including supporting farmers with seeds, tools and trainings will also be prioritized. From the assessment by ERCS food is prioritized as the most basic need. Depending on assessment of cash feasibility and market potentials in terms of supply chain and commodity pricing, cash mechanism is more dignified and logistically effective, efficient, and accountable approach. The assessment will determine the survival minimum expenditure basket of cash value per household per cycle.

Livelihood basic needs Outcome 1: Communities, especially in disaster and crisis-affected areas, restore and strengthen their livelihoods

Livelihoods and basic needs Output 1.1: Basic needs assistance for livelihoods security including food is provided to the most affected communities

Ethiopia

- Basic needs assistance (food) is provided to displaced households.
- Establish CEA mechanisms to ensure information can be shared with recipients on the assistance being provided, selection criteria, distribution processes and to provide feedback/complaints.
- Post-distribution monitoring

Livelihoods and basic needs Output 1.2: Household livelihoods security is enhanced through food production and restoration of income-generating activities

Ethiopia and Sudan

- Recovery needs assessments, market assessments, identification and targeting of vulnerable food insecure households/individuals PGI principles will be integrated the assessment approach; data analysis and design of the assistance to be provided.
- Distribution of seeds and tools
- Provide small grants for most affected/at risk groups and individuals (PGI) micro-business initiatives.
- Provide skills and vocational training.
- Establish CEA mechanisms to ensure information can be shared with recipients on the assistance being provided, selection criteria, distribution processes and to provide feedback/complaints.

Livelihoods and basic needs Output 1.3: Households are provided with multipurpose cash grants to address their basic needs.

Ethiopia

- Conduct market assessment and feasibility study to inform cash assistance strategies.
- Design of the multipurpose cash program, including definition of survival minimum expenditure basket (SMEB), cash delivery mechanism, feedback mechanism and roll-out of targeting criteria.
- Establish CEA mechanisms to ensure information can be shared with recipients on the assistance being provided, selection criteria, distribution processes and to provide feedback/complaints.
- Distribution of monthly cash assistance to selected vulnerable households.
- Monitoring of monthly cash distribution.



Health

People targeted: 221,000

Ethiopia: 150,000 (Male: 66,000 /Female: 84,000)

Sudan: 66,000 (Male: 21,780 /Female: 44,220)

Djibouti: 5,000 (Male: 3,000 / Female: 2,000)

Requirements (CHF): 3,805,000

Needs Analysis & Proposed intervention

Displaced populations are living without access to basic health services as hospitals have either been closed, damaged, looted or health care workers left for personal safety. With none or limited access to water supply and sanitation in the camps, it is anticipated that infectious, waterborne, and vector-borne diseases are likely to rise and will also exacerbate any pre-existing health conditions. Majority of the affected population (including children and youth) have been exposed to traumatic situations and severe mental stress as a result of displacement, separation, loss of loved ones, loss of property and livelihoods and forced to flee from their places.

All of these countries are also facing an increase in the number of COVID-19 cases; and the crowded settings in camps makes protocols such as social distancing challenging, while there are also no formal risk communication strategies in place; meaning that the camps may become a breeding ground for disease outbreaks. ERCS, SRCS and DRCS target people with integrated basic health services including Infection, Prevention and Control, Mental Health and Psychosocial Support, referrals, primary health care and routine immunization and nutrition services. Health activities are closely coordinated with the ICRC to avoid duplication and ensure a maximum coverage and impact.

Health Outcome 1: Vulnerable people's health and dignity are improved through increased access to appropriate health services

Health Output 1.1: Communities are provided with services to identify and reduce health risks

Ethiopia, Sudan and Djibouti

- Training volunteers on community-based epidemic surveillance, Early warning alert and response system (EWARS), Basic first aid (BFA), PFA, IPC and Roll-out of community-based epidemic surveillance and response systems.
- Nutrition services and supplements (identification and referrals) are provided to children and pregnant women
- Training on household treatment and awareness of symptoms for diseases such as COVID-19 and AWD/Cholera.

Health Output 1.2: Improved access to health care and emergency health care for the targeted population and communities.

Ethiopia, Sudan and Djibouti

- Prepositioning of health supplies for emergency trauma response and referrals
- Provision of First Aid and ambulance services to injured and displaced
- Provide equipment and furniture for ERCS health posts
- Support with running costs of health clinics, including additional staff

Health Output 1.3: Community-based disease prevention and health promotion is provided by NS to the target population

Ethiopia, Sudan and Djibouti

- Set-Up and equipping of Community Health Mobilization Points in vulnerable communities exposed to health risks
- Train volunteers in CBHFA, EWARS, BFA, PFA and IPC
- Equip volunteers with basic health kit, thermal scanners, pulse oximeters, protection gear and bicycles for outreach activities.
- Support MoH vaccination campaigns activities and maternal and infant health care through volunteers' mobile brigades

-
- Social mobilization and risk communication activities in Malaria, AWD, Cholera HIV, TB, Malnutrition and COVID-19 prevention, symptoms identification and treatments
- Distributing chlorine tabs, mosquito nets, soap as part of community-based disease prevention activities

Health Output 1.4: Communities are supported to effectively respond to health and psychosocial needs during an emergency

Ethiopia, Sudan and Djibouti

- Refresher trainings and reorientation of staff and volunteers in basic first aid, PSS, basic counselling and referrals
- Provision of psychosocial support to population displaced and affected by armed violence, including PFA, individual and group sessions, basic counselling for substance abuse and Adolescent Sexual and Reproductive Health (ASRH) psychoeducation and recreational activities for children and youth
- Strengthening the systems to provide psychosocial support to frontline staff and volunteers
- Coordination, Identification and Referrals of detected cases of diseases such as Malaria, acute water diarrhea (AWD), Cholera HIV, TB, Malnutrition and COVID-19
- Provision of psychosocial support to SGBV survivors



Water, sanitation and hygiene

People targeted: 144,333

Ethiopia: 73,333 (Male: 32,267 /Female: 41,066)

Sudan: 66,000 (Male: 21,780 /Female: 44,220)

Djibouti: 5,000 (Male: 3,000 / Female: 2,000)

Requirements (CHF): 4,478,000

Needs Analysis & Proposed intervention

Displaced populations currently depend on already limited access to clean, safe, and potable drinking water and water for domestic use in the host communities. If not controlled, it may bring competition and violence to access this scarce commodity between the IDPs and the host communities. Further to this, the prevalence of COVID-19 and the potential for community transmission within informal and temporary shelter areas and arrangements must be considered as an essential focus in the need for water provision, hygiene training and improving hygiene practices, such as the use of hands-free washing stations. In camps, there are no designated areas for solid waste disposal and there are no toilets forcing people in those camps to open defecation. The sudden influx of refugees to Sudan has overwhelmed the structures at entry points and transit, while the infrastructure in settlements is not ready to accommodate the increased number of refugees.

ERCS, SRCS and DRCS will provide people in camps and host communities with improved access to safe drinking water, sanitation, and hygiene. This will be achieved through the provision of household water treatment and storage kits (buckets, jerrycans with lids); as well as water trucking if required. Community-level construction of latrines through provision of toilet slabs and training of local sanitation artisans who will further train the local communities in the construction of locally and culturally appropriate latrines will also be prioritized. Hygiene promotion and awareness sessions, as well as hygiene related supplies (hand sanitizer and soap), will be provided; and handwashing stations installed

WASH Outcome1: Vulnerable people have increased access to appropriate and sustainable water, sanitation and hygiene services

WASH Output 1.1: Communities are provided with improved access to safe water

Ethiopia, Sudan and Djibouti

- Provision of safe potable drinking water (water trucking or other modalities such as the rehabilitation of existing water systems)
- Provision and installation of water systems such as T45, T70 and T95 CBM Water Tanks with tap stands
- Distribute water purification agents for household level use
- Train population of targeted communities on safe water storage and safe use of water treatment products
- Testing and purification in IDP and refugee camps, and at transit points
- Procurement and distribution of jerry cans
- Provision of handwashing points in strategic locations
- Provision of hygiene promotion, education and support in targeted communities
- Continuously monitor water, sanitation and hygiene situation in targeted communities including MHM
- Coordinate with other WASH actors on target group needs and appropriate response.
- Conduct WASH related trainings for National Society staff and volunteers.
-

WASH Output 1.2: Communities are supported by NSs to reduce open defecation

Ethiopia, Sudan and Djibouti

- Survey, construction and equipping community latrines (including for persons with disabilities (PWD)), with appropriate wastewater treatment and hygiene facilities.
- Construction and installation of bathing, shower and handwashing units in camps and host communities.
- Development and promotion of appropriate solid waste management plans at community level in conjunction with local authorities
- Rehabilitation of community latrines in host communities
- Ensure toilets and washing units are clean and maintained through provision of spraying pumps and insecticides
- Ensure that community-based approaches are implemented to support the design and location
- Develop and promote appropriate solid waste management plans at community level.
- Community based approaches through CEA approaches with adequate consideration of design and access (including ensuring separate facilities for men and women, and adequate lighting etc.)

WASH Output 1.3: NSs provide communities with the knowledge and best practice to improve community-based management of water and sanitation facilities**Ethiopia, Sudan and Djibouti**

- Establishing and equipping WASH committees

WASH Output 1.4: NS promote behavioural change in personal and community hygiene (including MHM) among targeted communities**Ethiopia, Sudan and Djibouti**

- Distribution of household hygiene kits including soap and other detergents.
- Distribution of women's dignity kits
- Awareness-raising for individual and community hygiene
- Maintenance and rehabilitation of water systems
- Develop a hygiene communication plan.
- Train volunteers and community leaders to implement activities of the plan
- Conduct hygiene promotion sessions in refugee settlements and host communities
- Design IEC materials and print materials for distribution and use during the hygiene sessions



Protection, Gender and Inclusion

People targeted: 100,000

Ethiopia: 55,000 (Male: 20,000 /Female: 35,000)

Sudan: 40,000 (Male: 13,200 /Female: 26,800)

Djibouti: 5,000 (Male: 3,000 / Female: 2,000)

Requirements (CHF): 1,036,000

Needs Analysis & Proposed intervention

Impact of armed violence is felt most greatly by vulnerable groups due to their special needs which communities may struggle to support in emergency situations. These groups include persons with disabilities (PWD), older persons, under-five children, women, girls, young adolescents, immune-compromised people, among others. If these groups are not identified and supported, these groups may face additional risks such as Sexual and Gender Based Violence (SGBV) including sexual exploitation and abuse, trafficking.

ERCS, SRCS and DRCS will mainstream PGI in all sectors with special consideration to gender, age, disability to minimize any stigma and discrimination or additional risks and vulnerabilities. Staff and volunteers engaged in the response will be sensitized on PGI mainstreaming and ensuring protection in all response activities as well as prevention and response to sexual and gender-based violence to be able to address any arising during as well as post-implementation period.

Girls, boys, women, and men shall be provided with dignity kits containing essential supplies such as sanitary towels for menstrual hygiene management for the females. Consideration for the inclusivity of PWD and older persons will be done through targeted and tailored interventions that meet their specific needs. Cases of gender-based violence, abuse, trafficking, exploitation, and other risks are likely to increase in displacement contexts. The response will enhance sensitization of communities on protection risks, including prevention of gender-based violence and protection of children as well as development and dissemination of referral pathways to facilitate access to services within the shortest time possible and maintaining strict confidentiality. Children are also at risk of being separated from their guardians during displacement. National Societies will work with ICRC in uniting any displaced children as well as set up safe spaces for use by anyone at risk to enhance their safety.

PGI Outcome 1: Communities become more peaceful, safe and inclusive through meeting the needs and rights of the most vulnerable

PGI Output 1.1: NS work ensure safe and equitable access to basic services considering different needs based on gender and other diversity factors

Ethiopia, Sudan and Djibouti

- Conduct assessment to identify the specific needs of the affected population based on criteria selected from the minimum standards for PGI in emergencies
- People with disabilities/organizations of persons with disabilities are included in humanitarian assistance, and barriers to their participation are reduced
- Vulnerable and marginalized groups are meaningfully included in the activities and supported throughout the intervention
- Dignity kits with MHM are provided to women and girls displaced and affected by the crisis
- Community participation and dialogue is promoted particularly in situations of IDPs, returnees, and host communities
- Social cohesion and peacebuilding initiatives are mainstreamed into durable solutions for IDPs and returnees

PGI Output 1.2: Affected population are protected from sexual and gender-based violence and other forms of violence, especially against women and children

Ethiopia, Sudan and Djibouti

- Ensure measures to prevent and respond to situations of Sexual Exploitation and Abuse (PSEA) and to identify and respond to situations of trafficking.
- Safe spaces (women and men) are set up providing PSS, life-skills, counselling and SGBV awareness raising, case detection and safe referrals for SGBV cases, child abuse and neglect.
- PSS is provided to SGBV survivors.
- Children safe spaces are set-up, providing psychosocial support, basic case identification, management and referrals, children recreational activities.
- Ensure that all staff and volunteers are briefed on Code of Conduct, prevention of sexual exploitation and abuse and have signed the Code of Conduct.
- Identification and sharing of information on safe referral pathways with communities for SGBV.
- Training to National society staff and volunteers on prevention and response to sexual and gender-based violence
- Printing of IEC materials on SGBV to be used in awareness sessions.
- Translate SGBV IEC materials into Arabic for Sudan
- Include messages on prevention and response to SGBV in all community outreach activities
- Print SGBV messages/materials to be shared with communities in awareness sessions



Disaster Risk Reduction

People targeted: 117,000

Ethiopia: 46,000 (Male: 26,000 / Female: 20,000)

Sudan: 66,000 (Male: 21,780 / Female: 44,220)

Djibouti: 5,000 (Male: 3,000 / Female: 2,000)

Requirements (CHF): 1,930,000

Needs Analysis & Proposed intervention

The Tigray situation is exacerbating the vulnerability of people to prevailing hazards and their capacity to recover. Communities have been forced to flee and are highly likely to have fewer financial or social assets and capital, increasing their vulnerability to hazards and reducing their capacity to cope with their effects. In some locations the high influx of new arrivals has a significant impact on the environment which will suffer further due to overcrowding and increased pressure on available natural resources. ERCS, SRCS and DRCS will provide integrated approaches that enhance community resilience in the face of the armed violence. Impacts of climate change are compounding hazards that exacerbate the vulnerabilities of the target communities including inter-changing drought, floods and reducing food production capacity and resource development. Conservancy and green initiatives are the most resilient and appropriate intervention to reduce climatological hazards which also contribute to strategic resource-based conflicts of farming and grazing land as potentiality of the land is reducing. ERCS, SRCS and DRCS branches will be supported through this response to establish, equip, and train community-based disaster risk reduction and management teams/volunteers who will also act as peace and reconciliation ambassadors at the grassroots level.

DRR Outcome 1: Communities in high-risk areas are prepared for and able to respond to disaster

DRR Output 1.1: Communities take active steps to strengthen their preparedness for a timely and effective response to disasters.

Ethiopia, Sudan and Djibouti

- Support and train local branches for disaster management
- Train Volunteers in disaster preparedness and response
- Strengthen and test early warning systems at community level

DRR Outcome 2: Communities in disaster-affected areas adopt climate risk-informed and environmentally responsible values and practices

DRR Output 2.1: Contributions to climate change mitigation are made by implementing green solutions

Ethiopia, Sudan and Djibouti

- Ensure recovery programmes are aware of and apply eco-system based and environmentally sustainable nature-based solutions where feasible
- Support tree planting initiatives, mobilising communities (refugee and host) and partner organisations
- Minimize use of single-use plastics across programmes and advocate for sustainable alternatives such as energy-efficient cooking stoves
- Promote and support energy transition at community level (solar panels, cooking stoves)
- Train volunteers in VCA, climate smart DRR and CCA

DRR Output 2.2: Community awareness-raising programmes on climate change risks and environmentally responsible practices are conducted in target communities

Ethiopia, Sudan and Djibouti

- Strengthen link with related RCRC initiatives at national and sub-regional level including Forecast Based Action
- Design and print CCA tools and materials
- Raise awareness on disaster risk and carry out drills and exercises in communities and schools



Migration and Displacement

People targeted: 150,000

Ethiopia: 90,000 (Male: 45,000 /Female:45,000)

Sudan: 55,000 (Male: 20,000 /Female: 35,000)

Djibouti: 5,000 (Male: 3,000 / Female: 2,000)

Requirements (CHF): 1,175,000

Needs Analysis & Proposed intervention

With an estimated 1 million internally displaced in the Tigray Region, over 60,000 Ethiopians crossed international borders, compounded by other population movements across Ethiopia, it is essential to ensure that those displaced have both their immediate, medium and long-term needs addressed. In the immediate, displaced populations must have access to information and essential services, in the medium to longer-term durable solutions must be considered while involving those affected in the decision-making process, including potential and future returnees. Cross border communication and coordination will be essential in the case of returnee populations.

Migration and Displacement Outcome 1: Displaced persons have access to essential services and information.

Output 1.1 Humanitarian Service Points (HSPs) are established in key areas providing targeted, adapted, and relevant support to those in need.

Ethiopia, Sudan and Djibouti

- Establishment of HSPs in key areas with services in Information (FEHI, First Aid, Food Items, PSS)
- Incorporation of CEA / Feedback mechanisms to ensure services are adapted to need
- Awareness raising and dissemination of information on RC/RC services
- Mapping of local services and establishment of effective/safe referral mechanisms

Output 1.2 Family links are restored for people separated from, or without news of their loved ones as a result of the disaster

Ethiopia, Sudan and Djibouti

- Coordination with ICRC for RFL services
- Phone and internet access via HSPs
- PSS support, including for when confronted with ambiguous loss

Outcome 2: Migration and Displacement context is continually assessed, actions are evidence-based, adaptive to needs using feedback mechanisms and CEA principles, and seek durable solutions

Output 2.1: CEA methods and periodic contextual assessments are established to ensure relevant and adaptive response based on current needs

Ethiopia, Sudan and Djibouti

- Periodic contextual assessments conducted, particularly for areas previously inaccessible
- Establishment of effective feedback mechanisms assessing direct beneficiary satisfaction of services as well as the wider-community perception of actions
- Continual adaptation of interventions based on feedback mechanisms to ensure that assistance is appropriate, and relevant to the evolving needs related to PGI, PSS and other as identified.

Output 2.2: Feedback and assessments are capitalized for service adaptation and to drive long term strategy focused on durable solutions

Ethiopia, Sudan and Djibouti

- Strategy development for IDPs, affected communities, and supporting returnees.
- Community communication activities ensure refugees, IDPs, affected communities have the necessary information and involve them in durable solution and recovery strategy planning.
- ERCS, with support of the ICRC and IFRC, advocates on behalf IDPs, affected communities, and returnees with reinforcement of relevant frameworks such as the Kampala Convention

Strategies for Implementation

Requirements (CHF): 5,265,000

Strengthen National Societies

Requirements (CHF): 3,471,000

Needs Analysis & Proposed intervention

ERCS, SRCS and DRCS are responding to numerous disasters from locust infestation to floods, civil unrest, malaria, population movement as well as an increase in cases of COVID-19. They have unparalleled access and reach to communities; and as such are strong partners to the United Nations Agencies, Government as well as other local and international Non-Governmental Organisations. This demands that the National Societies organisational policies, processes and procedures, and systems are place as well as skilled and experienced workforce at national and branch levels. There is a need to support the strengthening of the National Societies, particularly staff capacity especially in sectors such as Shelter, Health, WASH, PGI and CEA.

S1.1: National Society capacity building and organizational development objectives are facilitated to ensure that National Societies have the necessary legal, ethical and financial foundations, systems and structures, competencies and capacities to plan and perform

Output: NSs have a strong and effective leadership

- Continuous support to NS leadership in completing the Organizational Development plan and priorities

Output: NS has effective and motivated volunteers who are protected

- All active volunteers are trained and insured
- Develop and roll out an online volunteer management system
- Develop and roll out training modules for volunteer & youth training across key areas
- Strengthen volunteer and youth engagement in NS operations, programmes and services

Output: National Societies have the necessary corporate infrastructure and systems in place

- Strengthen NSs financial management capacity at NHQ and selected provincial branches
- Agree and support internal audit function at NHQ
- Support finance systems development & training and refreshers training
- Promote and support digital transformation and inclusion across programmes and general management
- Support upgrades to branch infrastructure and equipment in selected branches
- Support the establishment of sub-branch offices (as required)
- Facilitate BOCA in selected branches at provincial and district level
- Provide technical and financial support to develop comprehensive HR strategy and support systems and tools development
- Enhance HR management capacity and systems (incl. job descriptions, function description and roles and responsibilities, emergency procedures, databank)
- Strengthen PMER systems and train branch and project staff on PMER

Output: NS capacity to support community-based disaster risk reduction, response and preparedness is strengthened

- Develop a comprehensive strategy for DRM and institutional preparedness including health systems strengthening
- Engage the NS in the PER approach and support priority actions for response capacity strengthening under a detailed action plan
- Train volunteers in disaster risk management and response, including assessment, data collection, distribution, M&E, PGI and CEA
- Develop contingency plans, test and improve them through simulation drills for basic first aid and emergency
- Scale-up and support the management of pre-positioned NFIs

Effective International Disaster Management

Requirements (CHF): 1,503,000

Needs Analysis & Proposed intervention

This coordinated emergency appeal in response to the complex emergency will reinforce the actions of the Movement by seeking complementarities with PNSs and the ICRC response. A sub-regional cell was created to ensure seamless coordination, co-operation, timely communication and maximizing resources.

This regional response is supported by the IFRC, in-country PNS and the ICRC. Partners conduct regular meetings to ensure strong coordination, technical support to ERCS, SRCS and DRCS and complementarity. As of the launch of this Appeal, in addition to the initial DREF support response has been provided by PNSs through bilateral channels. A Federation-wide footprint will be ensured to reflect the support provided by all PNSs and the IFRC.

Multi-country response services will include RC/RC Coordination & IM tools; Contingency planning and technical advisory; Rapid Response / surge activation; Coordinated logistics and supply chains; Coordinated efforts for positioning NSs Response and assertive partnership and Resource Development; coordinated community engagement and accountability; Peer to Peer support (NS/Branch -NS/Branch coordination, information sharing and support).

Outcome 1: Effective and coordinated international disaster response is ensured

Output 1.1: Effective and respected surge capacity mechanism is maintained

Regional Coordination

- Regional Surge Coordination is provided to NSs, with appropriate tools
- Peer to peer surge support is enhanced amongst all 3 National Societies

Output 1.2: NS compliance with Principles and Rules for Humanitarian Assistance is improved

Regional Coordination, Ethiopia, Sudan and Djibouti

- Ensure community engagement and accountability is fully operationalised across all programmes
- Ensure that community feedback systems are established, and feedback acted upon and used to improve the operation
- Rapid community assessments to understand perceptions to outbreaks, vaccinations and prevention approaches
- Develop plans, tools & training to mainstream CEA into all programmes systematically
- Exit strategy developed that includes community consultation and sharing of the final evaluation results with the community

Outcome 2: The complementarity and strengths of the Movement are enhanced

Output 2.1: In the context of large-scale emergencies the IFRC, ICRC and NS enhance their operational reach and effectiveness through new means of coordination

Regional Coordination

- Co-host sub-regional coordination cell with NSs and ICRC
- Activate SMCC – Strengthened Movement Coordination and Collaboration
- Evaluate SMCC and develop case study

Output 2.2: Shared services in areas such as IT, logistics and information management are provided

Regional Coordination

- Supply partners and ICRC with information management products and tools

Influence others as leading strategic partners

Requirements (CHF): 200,000

Needs Analysis & Proposed intervention

Ethiopia, Sudan and Djibouti are severely affected by compounded effects of climatic shocks – leading to droughts and floods, locust infestation and disease outbreaks, including COVID-19 with dire impact over people’s coping capacities. Collective Movement response plays a vital role in providing bilateral and multilateral support to National Societies, responding to the critical needs. Together the Movement adds immense value in a coordinated response which respects clear roles and responsibilities, promoting a principled humanitarian approach where others don’t have access. The Appeal will promote, influence, and capitalize on the Movement’s unique position, leveraging relations with the respective governments and National Societies to ensure needs and respect of those affected by a principled, neutral, and independent intervention.

National Society capacity building and organizational development objectives are facilitated to ensure that the National Society is resilient and therefore has the necessary foundations, systems and structures, competencies, and capacities to plan for this operation. Based on the demand for technical and coordination support required to deliver the objectives of operation, the programme support functions below will be put in place to ensure an effective and efficient technical coordination. All the work on National Society capacity enhancement will also be coordinated with ongoing projects and programmes of the NSs’ to ensure sustainable and effective capacity enhancement efforts.

Outcome 1: The IFRC secretariat, together with National Societies uses their unique position to influence decisions at local, national and international levels that affect the most vulnerable

Output 1.1: IFRC and NS are visible, trusted, and effective advocates on humanitarian issues

Regional Coordination, Ethiopia, Sudan, Djibouti

- Enhance NS communications capacity & support strategy & policy development
- Develop communications materials in relevant languages including image bank, snapshots, web stories, social media and agents of positive change
- Leverage NSs advocacy for durable solutions in national and regional fora including ministries
- Enhance NS knowledge and communication on relevant frameworks such as the Kampala Convention and the Global Compact on Refugees

Output 1.2: National Societies are supported to undertake successful policy and legislative advocacy at the national level

Regional Coordination, Ethiopia, Sudan and Djibouti

- Ensure NSs auxiliary role is appropriately framed within national laws
- Advocate for governmental support to RCRC activities in country

Output 1.3: National Societies are supported in resource and partnership development

Regional Coordination

- Support development & adoption of a resource mobilisation strategy & policy
- Develop and support RM plan of action
- Support NSs in negotiation of partnerships with, national and local authorities, the UN and INGOs
- Provide advice about partnership agreements

Outcome 2: The programmatic reach of National Societies and the IFRC is expanded

Output: Strengthen planning, monitoring, evaluation, and reporting

Regional Coordination, Ethiopia, Sudan and Djibouti

- Support the NSs to develop quality plans and produce timely reporting
- Streamline operational monitoring using simple online tools and infographics where feasible
- Strengthen NSs’ reporting functions and evidence-based documentation

Ensure a strong IFRC**Requirements (CHF): 91,000****Needs Analysis & Proposed intervention**

Duty of care and staff performance will be increased in the operation, through adequate HR management that promotes personal and professional growth as well as performance but acknowledges the challenging environment staff is facing with consecutive shocks, unprecedented challenges and the COVID-19 pandemic. Therefore, the HR plan has in due consideration all issues related with duty of care and well-being.

The finance department will continue to promote all safeguards and high standards of accountability to financial resources and provide timely reconciliations, adequate filing and reporting to all partners and donors. This will be done using well established IFRC systems. The operation will continue to make progress on the recommendations of the Internal Audit conducted, addressing the risk matrix and improvement plans. This is publicly available.

Outcome: The IFRC enhances its effectiveness, credibility, and accountability

Output: IFRC staff shows good level of engagement and performance

- Conduct performance appraisals in due time

Output: Financial resources are safeguarded; quality financial and administrative support is provided contributing to efficient operations and ensuring effective use of assets; timely quality financial reporting to stakeholders

- Carry out internal IFRC financial & management audits
- Maintain active risk register across all areas
- Ensure all staff complete training on prevention of fraud and corruption.

Output: Staff security is prioritised in all IFRC activities

- Ensure active monitoring of security context, and make sure all operations are security compliant
- Enhance security management capacity for volunteers and staff (incl. security training)
- Carry out regular review of security risks, and update security rules & guidance accordingly
- The IFRC security plans will apply to all IFRC staff throughout. Area-specific Security Risk Assessment will be conducted for any operational area should any IFRC personnel deploy there; risk mitigation measures will be identified and implemented.
- All IFRC must, and RC/RC staff and volunteers are encouraged, to complete the IFRC Stay Safe e-learning courses, i.e. Stay Safe Personal Security, Stay Safe Security Management and Stay Safe Volunteer Security online training.

Funding Requirements

EMERGENCY APPEAL

MDRTIGRAY - Tigray Complex Emergency

Funding requirements - summary

Area of Intervention	Needs in CHF
DISASTER RISK REDUCTION	1,930,000
SHELTER	4,236,000
LIVELIHOODS AND BASIC NEEDS	5,075,000
HEALTH	3,805,000
WATER, SANITATION AND HYGIENE	4,478,000
PROTECTION, GENDER AND INCLUSION	1,036,000
MIGRATION AND DISPLACEMENT	1,175,000
STRENGTHEN NATIONAL SOCIETIES	3,471,000
EFFECTIVE INTERNATIONAL DISASTER MANAGEMENT	1,503,000
INFLUENCE OTHERS AS LEADING STRATEGIC PARTNERS	200,000
ENSURE A STRONG IFRC	91,000
TOTAL FUNDING REQUIREMENTS	27,000,000

Jagan Chapagain
Secretary General

Reference documents



Click here for:

- Previous Appeals and updates

For further information, specifically related to this operation please contact:

In the Ethiopian Red Cross, Sudan Red Crescent and Djibouti Red Crescent National Societies

- **Ethiopia:** Mr. Abera Lulesa, Ag. Secretary General, dsg.support@red-crosseth.org, +251 911 647 063
- **Sudan:** Dr Afaf Ahmed Yahya, Secretary General of Sudanese Red Crescent Society; phone: +249 901 230 869 Email: afaf.yaya@srcs.sd
- **Djibouti:** Mr. Abdi Khaireh Bouh, Secretary General; email: crd@intnet.dj

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- Louise Daintrey-Hall, Head of Partnerships and Resource Development Regional Office for Africa, Email: louise.daintrey@ifrc.org; phone: +254 110 843978,

For In-Kind donations and Mobilization table support:

- Rishi Ramrakha, Head of Africa Regional Logistics Unit, Email: rishi.ramrakha@ifrc.org; phone: +254 733 888 022

For Performance and Accountability support (planning, monitoring, evaluation and reporting enquiries)

- Philip Komo Kahuho, PMER Manager, Email: Philip.kahuho@ifrc.org ; phone: +254 732 203 081

How we work

All IFRC assistance seeks to adhere to the **Code of Conduct** for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGO's) in Disaster Relief and the **Humanitarian Charter and Minimum Standards in Humanitarian Response (Sphere)** in delivering assistance to the most vulnerable. The IFRC's vision is to inspire, **encourage, facilitate and promote at all times all forms of humanitarian activities** by National Societies, with a view to **preventing and alleviating human suffering**, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.

The IFRC's work is guided by Strategy 2020 which puts forward three strategic aims:



Save lives,
protect livelihoods,
and strengthen recovery
from disaster and crises.



Enable **healthy**
and **safe** living.



Promote social inclusion
and a culture of
non-violence and **peace.**