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Tigray Population Movement Complex Emergency

International Federation
of Red Cross and Red Crescent Societies

Emergency Appeal n°	MDRTIGRAY	Glide n°:	CE-2020-000229-ETH
Date of launch:	26/01/2021	Expected timeframe:	18 months
		Expected end date:	26/07/2022
Category allocated to the disaster or crisis: Orange			
Federation Wide Appeal: CHF27 million (including IFRC secretariat appeal)			
IFRC appeal funding requirements: CHF9.4million (Ethiopia CHF 3 million, Sudan CHF 4.4 million, Djibouti CHF 0.5 million, Regional Coordination CHF 1.5 million)			
Emergency Appeal/ DREF amount initially allocated: CHF906,154 (Sudan - 498,763, Ethiopia - CHF 357391, Djibouti – 50,000 CHF)			
Total number of people affected:	12.3million	Number of people to be assisted (total):	660,000 (355,000- Ethiopia, 300,000 - Sudan, 5,000 – Djibouti)
Provinces affected:	Ethiopia: SNNPR, Amhara, Afar, Benishangul-Gumuz Sudan: Kassala, Gedaref, Blue Nile Djibouti: Hol-Hol	Provinces/Regions targeted:	Same as affected
Host National Society(ies) presence (n° of volunteers, staff, branches):			
Ethiopia			
<ul style="list-style-type: none"> - Within each operational zone, ERCS has mobilized at least five staff and fifteen volunteers to support the operation. 			
Sudan			
<ul style="list-style-type: none"> - In Kassala branch, a total of 66 volunteers and 14 staff are supporting the operation - In Gedaref branch, a total of 108 volunteers and 22 staff are supporting the operation 			
Djibouti			
<ul style="list-style-type: none"> - In the Hol Hol camp and host community 20 volunteers have been identified to support the operation - One programme manager will be dedicated to the operation, plus support of staff at HQ - Two RFL volunteers are working with RFL activities in Hol Hol (supported by ICRC) 			
Red Cross Red Crescent Movement partners actively involved in the operation:			
Ethiopia: Canadian Red Cross, Danish Red Cross, Monaco Red Cross, British Red Cross, Japan Red Cross, Netherland Red Cross, Turkey Red Cross, Swiss Red Cross.			
Sudan: Sudanese Red Crescent, Qatar Red Crescent, Danish Red Cross, Netherlands Red Cross, German Red Cross, International Committee of the Red Cross, Turkish Red Crescent, Kuwait Red Crescent			
Djibouti: IFRC and ICRC in country			
Other partner organizations actively involved in the operation:			
Ethiopia: OCHA, UNFPA, UNICEF, Save the children			
Sudan: Commission of Refugees (CoR), Humanitarian Aid Commission (HAC), Cooperazione Internazionale (COOPI)			

Médecins Sans Frontières (MSF), Ministry of Health (MoH), Ministry of Social Welfare (MoSW), United Nations High Commissioner for Refugees (UNHCR), United Nations International Children's Emergency Fund (UNICEF), World Food Programme (WFP), World Health Organization (WHO)

Djibouti : UNHCR, UNICEF, IOM ad Gouvernement Office of National d'Assistance aux Réfugiés et Sinistrés (ONARS)

A. THE DISASTER AND THE RED CROSS RED CRESCENT RESPONSE TO DATE

- 09 September 2020: Tigray Regional Government holds parliamentary elections.
- 03 – 04 November 2020: Fighting erupts between Ethiopian Defence Forces and security forces of TPLF following an attack in Mekele on a military base.
- 09 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 Gedaref and Kassala.
- 18/20 November 2020: IFRC launches a DREF in support of SRCS to grant relief to 40,000 refugees in Kassala and Gedaref for 4 months.
- 26 January 2021: IFRC launches a Coordinated Emergency Appeal in support of SRCS to grant relief to 55,000 refugees in Kassala and Gedaref for 18 months.
- 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.
- 18/20 November 2020: IFRC launches a DREF allocation in support to SRCS to grant relief to 40,000 refugees in Kassala and Gadared for a period of 4 months.
- 30 March 2021: IFRC releases revised Federation-wide Emergency Appeal
- 25 January: IFRC launches a Multi-Country Coordinated Emergency Appeal with a funding requirement of 27 million Swiss francs.

Situation overview

Sudan

Since early November, military confrontations between the federal and regional forces in Ethiopia's Tigray region, which border both Sudan and Eritrea, have led more civilians fleeing the region seeking safety in neighbouring Sudan. Prior to the Ethiopian emergency, East Sudan received 4,000 new arrivals this year, mostly from Eritrea. The significant and rapid pace of the refugee influx requires UNHCR and its operational partners to continuously mobilise resources and ramp up services to respond to the urgent needs of refugees, as well as to support and capacitate the Government of Sudan (GoS) in its response to the growing demand in humanitarian assistance. The UN Refugee Agency (UNHCR) and Sudan's Government Commissioner for Refugees (COR) are registering new arrivals from Ethiopia crossing the border into Sudan, increasing the total number of arrivals to 63,110 as of 30 April. COR, who is responsible for the preliminary registration at the transit centres, continues registering new arrivals at the household level, while UNHCR is registering new arrivals in all sites using its electronic registration and case management system (ProGres v4 reception module) at individual level.

Relocation from transit centres to permanent settlements have been slow, with 21,928 people remaining at the transit centres as of April 30, noting that UNHCR verification was ongoing at that time. Therefore, relocation remains urgent. A total of 41,182 people has been relocated to the 2 permanent settlements in Gedaref State (Um Rakoba and Tunaidba), with 20,573 people in Um Rakuba and 20,609 people in Tunaidba. The Sudanese government, together with UNHCR increased capacity of both camps to host 20,000 refugees in each camp. Discussions are on-going on further expansion in these 2 camps or opening of an additional location now that Um Rakuba and Tunaidba have both reached close to the final capacity of 20,000 people.

Summary of Red Cross Red Crescent response to date

Overview of Host National Societies

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.

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:

Shelter and NFIs

- 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.
- Distribution of Household Items, including 5,400 tarpaulins, 6,800 blankets, 2,500 jerry cans, 5,400 mosquito nets, 725 kitchen sets, 5,400 sleeping mats and 2,200 hygiene kits in Tunaidba, Um Rakuba and Hamdayet with support from IFRC, German RC, Netherlands RC, and Qatar Red Crescent.
- SRCS constructed 25 communal shelters and 8 communal kitchens in Hamdayet and Um Rakuba with support from German RC, UNHCR and IFRC.
- SRCS constructed 10 demo shelters and distributed 600 shelter kits with support from UNHCR.

Livelihoods and Basic Needs

- Distribution of 3,200 food baskets with support from Qatar RC, Turkish RC and Kuwait RC, as well as support to distribution of food items provided by Muslim Aid and World Food Programme (WFP).

Health

- Provision of primary health care services through the SRCS Health Clinic in Hamdayet and the newly established health clinic in Tunaidba, with support from IFRC, WHO, UNHCR and Qatar RC.

- 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. IFRC supports with the running costs of the health centre for 3 months and Qatar RC supports with additional running costs, equipment, and the procurement of 1 ambulance.

WASH

- SRCS has deployed one Emergency Water Treatment Unit (WTU) from White Nile State to the new settlement camp in Tunaidba. IFRC supports the transport, installation and running costs of the WTU.
- SRCS conducted health and hygiene promotion activities in all locations with support from various partners
- SRCS is constructing 27 latrine blocks and 167 individual latrines with support from various partners.
- SRCS is constructing 99 emergency bathing units with support from UNHCR and NLRC.
- SRCS is constructing 44 hand washing stations with support from UNHCR, German RC and IFRC.
- Volunteers are deployed conducting COVID-19 screening in transit centres and at SRCS health units.

Tracing and Restoration of family links

- With support from ICRC, SRCS is providing Restoring Family Link services, including the collection of “Anxious for News” requests, and facilitating phone calls.

Overview of Partner National Societies, ICRC and IFRC on SRCS, DRC, and ERCS Domestic Response Plans

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 and providing a detailed overview of Movement (planned) support to the plan. SRCS developed a RCRC 4W coordination matrix and reporting template.

The Swedish RC, together with the Austrian RC, have supported the WASH sector through an initial detailed WASH assessment in both camps and entry points during December 2020-January 2021. Three surge delegates supported this assessment. Recommendations from the assessment report led to further support by the SRC/ARC in seconding a Field Coordinator delegate to the IFRC for a period of six months to support the coordination of RCRC activities in the population movement response.

Overview of non-RCRC actors in country

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 Ethiopia which is guiding the overall response. IFRC in country team based in Gedaref will support SRCS with the in-country coordination with external partners in Gedaref.

Needs analysis and scenario planning

Over 63,110 people have crossed the border from Ethiopia to Sudan stretching existing capacities despite continued scale-up efforts. 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 30 April, a total of 21,928 people remained at Hamdayet and village 8 centre, a centre with an

original capacity to host less than 1,000 people. People are scattered in Hamdayet, and many hosted within the host communities. 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, and the value of the Sudanese currency devaluated more than 700% between the beginning of December 2020 until the end of April 2021. This puts 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 basic health services, and malnutrition status. 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 sanitation conditions, and deterioration of health 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 Tinaidba, 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.

Kassala	Hamdayet, Um Rakuba and host communities	Refugees, host communities	37,000 refugees Other 159,500
Blue Nile	Blue Nile camp and host community	Refugees, host communities	

Operation Risk Assessment

Beyond current tensions in the border with Ethiopia, there are ongoing clashes in the Darfur region of Chad, leading to population displacement within and across borders. Political instability is impacting the countries' ability to recover from shocks and has led the economy to fall back. Floods and droughts are also increasing in number and intensity. The geography where refugee camps are located and the projections of the rainy season in Sudan and Western Ethiopia indicates that the area is very prone to flooding. There is need to ensure resilience of WASH and Shelter solutions to the upcoming Floods and sandstorms in the refugee settlements. As of now, the exchange between host and refugee populations is peaceful, however, there is a risk to escalation, with many people relying on the same scarce basic resources available.

COVID19 cases continue to rise in the country and the refugee populations are particularly vulnerable to COVID 19 as well as other water and vector borne disease outbreak due to overcrowding and continuous big gaps in basic WASH facilities.

Ethiopia

The humanitarian situation in Ethiopia is still fluid, precarious and dire. According to UNOCHA, more than 16 million people are now in need of humanitarian assistance throughout Ethiopia, including an estimated 4.5 million in the Tigray region. In Amhara, Benishangul-Gumuz, SNNPR, Oromia, Gambelia and Afar - areas neighbouring and outside of Tigray -, besides dealing with displacement from Tigray, the scale and scope of needs is equally bad and may worsen. Climate shocks, devastating desert locust infestation, the continued economic impact of COVID-19, below-average rainfall projected for 2021 particularly in the south and south-eastern parts of the country threatens to exacerbate food insecurity

and other humanitarian needs, while also increasing the risk for violence as communities compete for even more limited water resources.

Amhara region has experienced new spates of ethnic conflicts according to an OCHA led Inter - Agency assessment mission conducted on 3-6 May in North Shewa and Oromo Special Zones of Amhara Region. The team identified that at least 358,000 people displaced due to conflict are in dire need of food, ES/NFIs, WASH and healthcare services. (<https://reliefweb.int/report/ethiopia/ethiopia-humanitarian-bulletin-issue-6-26-april-10-may-2021>).

Humanitarian actors have raised concerns regarding the deteriorating humanitarian situation in Benishangul-Gumuz, where unknown armed groups are gaining momentum in western areas of the region. Limited access and lack of information are a major issue, and humanitarian actor coordination forum led by OCHA indicated that organizations with existing localised structures such as the Ethiopian Red Cross Society could be best placed to support affected populations.

Displaced population from Tigray region and other internally displaced populations remain in IDP camps in Amhara. Benishangul-Gumuz and SNNPR regions. The IFRC federation wide appeal is consolidating assistance from movement Partner National Societies and the host Ethiopia Red Cross with its bilateral partners who have been coordinating and technically supporting humanitarian assistance to displaced populations outside Tigray.

Summary of Red Cross Red Crescent response to date

Host National Society

The National Society has a good network of regional and zonal branches in the specific areas of concern and good experience responding to armed clashes in Ethiopia including provision of life-saving interventions following the displacement of large populations in 2018 (through a DREF and Appeal operation). The national society addresses the multitude and complexity of crises and the high expectations from partners and the population but is stretched with its human resources and systems. The National society shows its strength as the partners of the referral ambulance service to the Federal government, which proved to be relevant when responding efficiently to the conflict in the turnaround of casualty response. 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 centres. On 20 November 2020, IFRC allocated CHF 357,391 DREF to kick start the operation and since then upscaled to a federation-wide appeal.

Responses by the Movement partners

Under the federation appeal umbrella the IFRC is coordinating and technically supporting humanitarian assistance by movement partners.

The IFRC provided an initial DREF fund to kick start the operation and the following results were achieved.

- 1466 HH Tigray IDP in Amhara region received multipurpose cash assistance of 3000 ETB per household
- 1435 HH Tigray IDP in Amhara region received NFI and shelter materials
- 163 volunteers were trained in FA and PSS
- 500 FA kits were procured and supplied
- 21 ambulances were maintained and supported
- 183 HH were supported with RFL services
- 193 volunteers sensitised on PGI
- 125 volunteers provided with personal protection gears (PPE) for covid19.

The IFRC mobilised a technical experts-surge team to support the federation wide appeal. This profile included CVA expert, WASH expert, IM expert, communications expert, PMER expert, combined security

and logistics expert and head of operations to support coordination together with the in-country team including the operations manager based in Ethiopia.

Swiss Red Cross (SRC) has been active in Ethiopia since 2014 with a delegation office and 5 ERCS cooperation projects under (NSD; DRM; livelihoods) mainly in SNNPR, Oromia and in the future, Diredawa. The SRCs in the current federation wide appeal has contributed the following humanitarian actions in support of IDPs in SNNNP region.

- SRC is presently supporting CVA, PSS, PGI, NSD under the project in SNNPR for conflict affected IDPs. CEA, PGI and PSS training for 20 volunteers and staff, and hold general assembly in 2 branches.
- In Derashe district and one community in Konso zone, a total target number for CVA is 1,050 HH with transfers of two tranches of ETB 4,000 multipurpose per household until end of June 2021.

The Netherlands Red Cross (NLRC) currently has 5 delegates in Ethiopia including a health, WASH, DM, integrated risk management delegate and a country representative. NLRC has also deployed a surge security delegate to strengthen the operational and institutional security needs of the PNS and ERCS in its cross cutting National society development support.

NLRC has been a pillar in the federation wide appeal and has contributed to the humanitarian assistance coordinated by this appeal through a bilateral partnership with ERCS. The Netherland Red Cross support include the following:

- NLRC responded to the emerging needs after the Tigray conflict erupted by providing support on ambulance services for North Wollo and North Gondar branches. Secondly 840 kitchen sets, 1608 tarpaulins, sleeping mats and blankets were distributed to IDP's from Tigray in Amhara region from the conflict preparedness and response project funded by EU Humanitarian Aid and implemented in partnership with DRC.
- Based on discussions among PNS and with own funds, NLRC supported ambulance services in Afar and distributed food and oil to 1160HH and NFI's to 1000HH in Abala and Koneba (Afar region) in January 2021. Also, NLRC supported ERCS with the recruitment and salary costs of an emergency WASH officer for six months. This colleague was recruited early March.
- From an ongoing Covid-19 response project, 50HH of IDP's were provided with mattresses, blankets, and soap in North Wollo (Amhara region) in January 2021.
- NLRC in partnership with DRC successfully requested a top-up from EU Humanitarian Aid to affected populations in Tigray and border communities in February 2021. This project is ongoing and focuses on ambulance support, distribution of NFI's, Hygiene and PSS trainings and restoring access to safe water to affected populations in North Wollo, Alamata, Maychew, Mekelle and Shire.
- NLRC also started a bilateral contribution to the Tigray appeal in April focusing on WASH, health and NSD for 20.000 IDP's and host communities in Derashe and Konso with support from the Dutch government. This project is closely linked to the bilateral support of the Swiss RC on CVA in the same area. A rapid needs assessment took place end of April and the MoU is expected to be signed in May.

Other partner National societies that contributed directly in cash to the intervention of the federation wide appeal include Canadian Red Cross, Danish Red Cross, Monaco Red Cross, British Red Cross, Japan Red Cross, Turkey Red Cross.

The IFRC maintained a coordinated appeal approach with the ICRC where the ICRC was the lead in the response inside Tigray as active conflict while IFRC federation-wide appeal will complement the relative humanitarian crisis outside Tigray.

Overview of non-RCRC actors in country

The Red cross is part of the humanitarian team and is active in the clusters of NFI and shelter, Cash working group, WASH, and the emergency coordination centre lead by government and OCHA.

The Ethiopian Red Cross has attracted both old and new bilateral partners in the response to conflict in Tigray and outside Tigray. The main included the UNICEF, UNFPA, Save the children among others.

Needs analysis and scenario planning

Needs analysis

Ethiopia, a regional hub in the Horn of Africa, has had a long history of dealing with and showing resilience against a variety of disasters and emergencies. Having achieved some semblance of stability under the new government, the recent desert locust invasion, recurrent climatic shocks such as floods and droughts, and socioeconomic impact of COVID-19 are the contemporary driver of humanitarian needs in Ethiopia. Other previous hazards include drought, cholera epidemic, desert locust invasion, floods, and civil unrest.

According to UNOCHA, more than 16 million people are now in need of humanitarian assistance throughout Ethiopia, including an estimated 4.5 million in the Tigray region. The most affected regions by the conflicts and which have experienced massive population displacement are Amhara, Benishangul-Gumuz and SNNPR regions. Primary needs among affected people affected by conflicts remain food and basic relief items, water and sanitation, medical supplies, and Psychosocial support.

Pregnant and lactating women, girls and children are some of the worst affected members of the local population, with significant psychosocial support, reproductive health, food, sanitation and for school-going children, education needs. Child and maternal health services have been drastically disrupted.

Operation Risk Assessment

Security remains the major risk of this operation with most of the operation areas either in orange or Red with consequential restriction of staff movement. Mechanism will be deployed with strong emphasis on coordination and cooperation on security matters with key stakeholders such as the Host National Society and ICRC. 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)

Djibouti

Djibouti borders with Ethiopia which makes the access easy for Tigray conflict refugees to cross. At the start of conflict in February 2021, the first Ethiopians crossed the border into Djibouti to seek asylum. Moreover, Ethiopia has been one of the countries in the horn that were experiencing migration effects, huge populations on the move to the gulf and beyond to Europe and Djibouti as transit points through the Red sea and the gulf. Recent years Kingdom of Saudi and many other gulf countries were forcefully repatriating illegal immigrant and the numbers of returnees were increasing. Since the war in Tigray the Tigray returnees are circumstantially held up in Djibouti in a different status as refugees now and are transferred to Hol Hol refugee camp¹ for processing and registration as refugees. The increase of arriving asylum seekers, refugees and or returnees are putting additional pressure on Hol Hol town already suffering from scarce services and severe 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 region². So far, 179 truck drivers claimed asylum and were transferred to Hol Hol camp to be processed and registered as refugees. Djibouti is accessible and potentially a hub for Ethiopian refugees if situation escalates due to the relatively good political relations of the two countries. Additionally, the pressure on the situation at Sudan border with the land dispute between the two countries and the active contacts of armed groups in the Sudan border which could have been the preferred option because of the facilities of the old camps in Sudan might have shifted movement trends of the refugees to Djibouti.

¹ Hol Hol is a refugee camp, managed by ONARS funded by UNHCR, housing around 6,500 refugees and asylum seekers, primarily from Somalia.

² UNHCR briefing, Djibouti, 16.11.2020

Summary of Red Cross Red Crescent response to date

Overview of Host National Societies

DRC has capacity in FA, RFL, WASH (water purification, latrine construction/rehabilitation, waterpoint construction/rehabilitation, train community to safeguard waterpoints and latrines), COVID-19 awareness, health, and hygiene promotion. DRC are during 2021 going to develop their health strategy with support of IFRC. DRC are aware of the importance of the mainstreaming of PGI and recognize their need to strengthen this in their overall operations and especially the Tigray operation. There is also an interest to develop the capacity to respond to the need of SGBV survivors and to strengthen the identification and referral pathways for SGBV survivors. The following are some of the services provided by the NS.

- Training of volunteers in WASH, health and hygiene promotion, COVID-19, First Aid
- Awareness campaigns on hygiene promotion & Covid Host community
- Carry out awareness campaigns on hygiene promotion & Covid in camp
- Developed public handwashing points
- Produced hygiene promotion materials
- Provided PPE kits for staff and volunteers
- Procurement of Thermometer, soap and tissues, water bottles

Overview of Partner National Societies, ICRC and IFRC

IFRC is supporting Djibouti Red Crescent in a wider perspective of strengthening the National Society capacity. Currently the East Africa Cluster has deployed a DRR delegate to strengthen Preparedness for Effective Response (PER) capacity of the National Society. The operation is also supported in close remote by the Emergency Operations manager based in Ethiopia and the cluster technical team in Nairobi. At strategic level the IFRC is planning to cluster Ethiopia and Djibouti together with more closer representative delegation based in Ethiopia with considerable focus in the National Society capacity development.

ICRS is currently supporting the ONARS with RFL services to the arrived refugees. ICRC are also in lead and coordinate with UNHCR and ONARS regarding separated children and the missing. Currently there is no partner National societies PNS in country supporting the NS. British Red Cross (BRCS) supported the DRC until the end of 2020. However, Djibouti Red Crescent National society capacity development is strategically a movement concern.

Overview of non-RCRC actors in country

Djibouti Red Crescent (DRC) has been attending coordination meetings, hosted by Office National d'Assistance aux Réfugiés et Sinistrés (ONARS), since November 2020. 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, Protection Gender and Inclusion). DRCS has volunteers present in Hol Hol refugee camp and Obock, providing RFL services and also supporting IOM in Aouroussa 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.

The Ministry of Water have the co-lead with UNICEF in the WASH cluster where DRC are actively participating. In the need assessment conducted by Ministry of Water, UN agencies with UNHCR having the lead and DRC, the NS was recognized to take on their auxiliary role to the ministry would additionally support be needed in the case of a high influx of migrants.

Coordination

In Djibouti, ONARS has been holding coordination meetings regarding Tigray crisis, which DRC 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 Aouroussa transit camp and Hol Hol camp. ONARS are running weekly coordination meetings from the start of the crisis in Ethiopia, which was paused from the end of the year and will be resumed as there would be a need from the actors in country to coordinate the response would the influx of migrants increase. IFRC, ICRC and DRC will participate as soon as they get re-activated

Needs analysis and scenario planning

Needs analysis

There are currently 66 Tigrayan returnees from the Gulf and 179 truck drivers from Tigray (i.e., total of 245 persons) who have claimed asylum in Djibouti and have been transferred to Hol Hol refugee camp for processing and registration. In February 2021, nineteen (19) Ethiopians crossed the border into Djibouti hiding in a truck and have now sought asylum in Djibouti. This is a new development of people fleeing directly from Ethiopia into Djibouti. 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 2,000 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 recognised to respond in WASH (including health awareness focusing on COVID-19 prevention) and protection (RFL), and DRC volunteers will be called upon to provide First Aid support at designated triage and transit points, would the contingency plan be activated. Within the country, Hol Hol refugee camp, managed by ONARS (supported by UNHCR) are currently housing around 6,500 refugees primarily from Somalia have been identified as the camp that is currently housing the new arrivals. Hol Hol have been identified as being able to house an influx of 5,000 asylum seekers working with UNHCR and ONARS best case scenario. Hol Hol itself is a small town with population of around 3,000 people with high levels of poverty and limited service. The refugee population it is hosting is already more than double the town's population and with any new arrivals from Ethiopia destined to be in the Hol Hol camp will put further pressure on the host community resources. To promote social cohesion and minimise disparity it is important to consider the host community in the provision of basic services

Operation Risk Assessment

Minimum underscore funding of the operation. The operation did not get adequate funding relative to the needs on ground and these exposes both the beneficiaries to lack of better and adequate services and reputational risks for the national society due to lack financial response capacity. However, the response is designed as multi stakeholder and is complimented by the government, ICRC, and different arms of the UN (UNHCR, UNICEF and IOM) which is anticipated to potentially cover the gaps where the National society is unexpectedly limited.

B. THE OPERATIONAL STRATEGY

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 more

than 60,000 refugees from Ethiopia until the end of April. 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 cropland.

Regular camp coordination meetings are held with refugee representatives, to receive and share feedback on services. In addition, SRCS volunteers collaborate directly in the field with refugees. COR is developing an overall feedback mechanism, whilst the SRCS CEA team, supported by a Senior CEA Officer, team is in progress of mapping existing feedback mechanisms in Gedaref state, as the basis for future mechanisms.

Monitoring visits are undertaken regularly by the volunteers and activities adjusted based on identified needs.

Ethiopia

According to UNOCHA, more than 16 million people are now in need of humanitarian assistance throughout Ethiopia, including an estimated 4.5 million in the Tigray region. The most affected regions by the conflicts and which have experienced massive population displacement are Amhara, Benishangul-Gumuz and SNNPR regions. Primary needs among affected people affected by conflicts remain food and basic relief items, water and sanitation, medical supplies, and Psychosocial support

The population targeted by this emergency operation has considered several factors:

- 1) Geographic targeting in conflict affected areas outside Tigray in Amhara, SNNPR, Beshangul Gumuz and Afar
- 2) A total population of 350,000 affected in IDP as a result of conflict
- 3) The status of the population and consequently the type of their needs, and
- 4) 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 in the region of Beshangul Gumuz, SNNPR region Konzo zone, Amhara and Afar. In total 350,000 people – IDPs and host communities - will be targeted with shelter, health, WASH, IPC, MHPSS, PGI, DRR, NSD, livelihoods and basic needs interventions

Djibouti

Djibouti national society will complementarily work with other humanitarian actors and position itself as an auxiliary to the government of Djibouti in the Tigray population movement response. In the coordinated approach DRCS will focus on supporting the camps hosting Tigray refugees starting with Hol Hol camp where it is already providing services including WASH, Covid19 prevention, First AID, Reunification of family links and other protection services including SGBV as well as integrated National society development service. The scope of the operation will be updated on quarterly basis depending on the escalation of situation. However as at now DRCS maintains but as at now retains the best-case scenario of 5000 refugees planning response projection.

The host communities are also affected by the influx of people Hol Hol especially. 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, the operation will consider extension of services to include the 3000-host community in Hol Hol which host the camp.

C. DETAILED OPERATIONAL PLAN

STRATEGIC AREAS OF FOCUS

SUDAN

	<p>Shelter People Reached: 27,375 Male: 17,520 Female: 9,855</p>	
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		
Indicators	Target	Actual
% of assisted families report being satisfied with the assistance provided	90%	0
Output 1.1: Shelter and settlements and basic household items assistance is provided to the affected families.		
Indicators	Target	Actual
# people reached with distribution of Shelter Kits	21,500	27,375
# people reached with distribution of HH items	21,500	27,375
# communal shelters constructed	4	23
Output 1.2: Technical support, guidance and awareness raising in safe shelter design and settlement planning and improved building techniques are provided to affected households		
Indicators	Target	Actual
# volunteers trained in shelter and distribution techniques	60	30
Progress towards outcomes		
<p>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. SRCS, with the support of the IFRC and members, 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 transitional shelter, National Societies will encourage communities to utilize salvaged and locally available materials as part of community contribution to the assistance.</p> <p>IFRC and PNSs will support SRCS reaching an estimated 50,000 people in Gedaref and Kassala with emergency and transitional shelter assistance. Areas of intervention include the camp settlements in Gedaref and Kassala. Movement partners involved in the Shelter and HHI response in Sudan include: SRCS, IFRC, German RC and Qatar RC. The following activities have already been implemented with support from RCRC Movement partners in Sudan:</p> <ul style="list-style-type: none"> - Distribution of Household Items, including 5,400 tarpaulins, 6,800 blankets, 2,500 jerry cans, 5,400 mosquito nets, 725 kitchen sets, 5,400 sleeping mats and 2,200 hygiene kits in Tunaidba, Um Rakuba and Hamdayet. - SRCS constructed 25 communal shelters and 8 communal kitchens in Hamdayet and Um Rakuba with support from German RC, UNHCR and IFRC. 		

- UNHCR is providing families that have been allocated a plot in the permanent settlements with shelter kits. SRCS have been supporting UNHCR with the construction of 10 demo shelters and distribution of 600 shelter kits.

Community feedback mechanisms for impact/outcome monitoring are yet to be established, due to limited resources. Feedback mechanisms and training are targeted to be rolled out in the next quarter.



Livelihoods and basic needs

People Reached: 18,500

Male: 11,840

Female: 6,660

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

Indicators	Target	Actual
% of the families are satisfied with the assistance provided	90%	0

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

Indicators	Target	Actual
# of people reached with basic needs assistance	30,000	18,500

Output 1.2: Household livelihoods security is enhanced through food production, increased productivity, and post-harvest management (agriculture-based livelihoods)

Indicators	Target	Actual
# of people receive LLH recovery support	15,500	0

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

Indicators	Target	Actual
# of people provided with cash assistance	10,000	0

Progress towards outcomes

Populations have had their livelihoods impacted because 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. SRCS will target refugee populations in camps with in-kind food rations 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. Livelihoods and skills trainings are essential for refugees and persons facing protracted displacement, addressing both immediate and long-term needs. Considering average refugee situations last from 10 to 26 years, livelihoods and skills trainings are also an essential component to long-term durable solutions including eventual integration or reintegration.

PNSs will support SRCS reaching an estimated 30,000 people. In the immediate, 13,750 people (including 6,738 men and 7,012 women) will received food assistance and livelihood recovery, in the first response cycle. Areas of intervention include the camp settlements and host communities in Gedaref and Kassala. In settlements, selection of families for distribution is done in close coordination with COR and UNHCR, based on vulnerability and interagency coordination. Movement partners involved in the LLH and Basic Needs response in Sudan include: SRCS, Qatar RC, Kuwait RC, and Turkish RC. The following activities have already been implemented with support from RCRC Movement partners in Sudan:

- Distribution of 3,200 food baskets with support from Qatar RC, Turkish RC, and Kuwait RC, as well as support to distribution of food items provided by Muslim Aid and World Food Programme (WFP).

Challenges have included delays in receipt of internationally procured goods and access to refugee populations due to coronavirus movement restrictions and office closures in both Khartoum and Gedaref

states. Lack of standardisation of food baskets contents has caused conflict between beneficiaries in the camps. Distribution processes are being refined, to ensure no duplication or gaps in beneficiaries.

Community feedback mechanisms for impact/outcome monitoring are yet to be established, due to limited resources. Feedback mechanisms and training are targeted to be rolled out in the next quarter.

At the current funding level, there are no activities planned for LLH and cash assistance.



Health

People Reached: 6,634

Male: 4,246

Female: 2,388

Outcome 1: The immediate risks to the health of affected populations are reduced

Indicators	Target	Actual
% of trained Volunteers have adequate technical knowledge in the targeted technical areas	90%	0

Output 1.1: The health situation and immediate risks are assessed using agreed guidelines

Indicators	Target	Actual
# of volunteers trained in health-related topics	100	0
# of volunteers actively reporting through CBS (Target needs basis)	-	0
# of people reached with BFA (Target needs basis)	-	0
# of people reached with PFA (Target needs basis)	-	0
# of people reached with RCCE (Target needs basis)	-	0

Outcome 2: The immediate risks to the health of the affected populations are reduced through improved access to medical treatment

Indicators	Target	Actual
% of target population reached with emergency health assistance	100%	0

Output 2.1: Improved access to health care and emergency health care for the targeted population and communities.

Indicators	Target	Actual
# of people assisted with emergency health care and medical treatment	66,000	2,216
# of IEHK kits procured and distributed	2	0
# of health clinics supported with equipment and running costs	2	1

Outcome 4: Transmission of diseases of epidemic potential is reduced

Indicators	Target	Actual
% of people attended who report being better prepared to respond to epidemics	80%	0

Output 4.1: Community-based disease control and health promotion is provided to the target population

Indicators	Target	Actual
# of people will benefit from community-based control and health promotion	66,000	6,604

Outcome 5: Less severe cases of disease or malnutrition are treated in the community, with referral pathways for severe cases established

Indicators	Target	Actual
% of malnutrition cases identified are referred for treatment	100%	Not available

Output 5.2: Acute malnutrition cases are managed in the community, with referral established for severe cases.

Indicators	Target	Actual
# of screening and referral mechanism is in place	3	1

# of people referred for nutrition treatment (Target needs basis)	-	0
Outcome 6: The psychosocial impacts of the emergency are lessened		
Indicators	Target	Actual
# of people reached with PFA and PSS services	Needs based	1,154
# of people referred to specialized services	Needs based	0
Output 6.1: Psychosocial support provided to the target population as well as to RCRC volunteers and staff		
Indicators	Target	Actual
# of volunteers providing PFA and PSS services	70	30
Progress towards outcomes		
<p>With none or limited access to water supply and sanitation in the camps, and poor hygiene and health status, it is anticipated that infectious diseases like COVID-19, 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 because of displacement, separation, loss of loved ones, loss of property and livelihoods and forced to flee from their places. Sudan also faces an increase in the number of COVID-19 cases; and the crowded settings in camps and shortage of water makes protocols such as social distancing and handwashing with soap challenging, while there are also no formal risk communication strategies in place; meaning that the camps may become a breeding ground for disease outbreaks. SRCS targets 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.</p> <p>IFRC and PNSs will support SRCS reaching an estimated 66,000 people (including 32,340 men and 33,660 women) with Health and MHPSS assistance in the first response cycle. Areas of intervention include the camp settlements and host communities in Gedaref and Kassala. Focus of the ongoing health activities will be mainly in Tunaidba, Hamdayet and Um Rakuba. Primary health care services are provided to all refugee and host population seeking medical care at the RCRC health clinics. Movement partners involved in the Health response in Sudan include: SRCS, IFRC, German RC, Danish RC, and Qatar RC. The following Health activities continue to be implemented:</p> <ul style="list-style-type: none"> • Provision of Primary Health Care services through RCRC clinics both in Hamdayet and Tunaidba • 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. IFRC supports with the running costs of the health centre for 3 months and Qatar RC supports with additional running costs, equipment, and the procurement of 1 ambulance. • Volunteers are deployed conducting COVID-19 screening in transit centres and at SRCS health units. • Provision of medicines, equipment and running costs of one health centre • Provision of ambulance services <p>Challenges have included delays in receipt of internationally procured goods, including the emergency health kits, and access to refugee populations due to coronavirus movement restrictions and office closures in both Khartoum and Gedaref states. The delayed upgrade of the original clinic facilities, to include running water and electricity, limits the operation of the clinic to daylight hours.</p> <p>Community feedback mechanisms for impact/outcome monitoring are yet to be established, due to limited resources. Feedback mechanisms and training are targeted to be rolled out in the next quarter.</p>		
	<p>Water, Sanitation, and Hygiene People Reached: 35,400 Male: 22,656 Female: 12,744</p>	

Outcome1: Immediate reduction in risk of waterborne and water related diseases in targeted communities		
Indicators	Target	Actual
% of the water samples indicate safe water quality	100%	0
# of target population that has sufficient safe water	66,000	5,400
# number of volunteers trained in WASH	-	0
Output 1.1: Daily access to safe water which meets Sphere and WHO standards in terms of quantity and quality is provided to target population		
Indicators	Target	Actual
# of people benefit from provision of safe drinking water	66,000	5,400
# of water systems constructed and rehabilitated	-	0
Output 1.2: Adequate sanitation which meets Sphere standards in terms of quantity and quality is provided to target population		
Indicators	Target	Actual
# of people reached with sanitation services	66,000	35,400
# of latrine cubicle/stances constructed and rehabilitated	-	0
# of hygiene facilities constructed in camps	-	0
Output 1.3: NS promote behavioural change in personal and community hygiene (including MHM) among targeted communities		
Indicators	Target	Actual
# of people who receive support to maintain good hygiene	66,000	15,500
# of people reached with dignity kits	-	0
# of households reached with WASH items	-	0
# of people reached with hygiene promotion messaging	-	0
Progress towards outcomes		
<p>Displaced populations currently depend on already limited access to safe, water in the host communities. If not controlled, it may bring competition and violence to access this scarce commodity between the refugees and the host communities. Further to this, the high prevalence of diarrhea and respiratory infections, malnutrition 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, improving hygiene practices, such as the use of hands-free washing stations. In camps, there are no designated areas for solid waste collection and disposal. Access to emergency latrines has greatly improved through the efforts of SRCS and other partners, however gaps still remain for example, there is rampant open defecation/ soiling of existing latrines and latrines design may not offer a safety environment for its usage at night/dark hours. Handwashing stations are often absent posing a great risk of COVID 19 transmission but also diarrheal diseases. The sudden influx of refugees to Sudan has overwhelmed the structures at entry points and transit, COR in partnership with UNHCR and other partners have escalated their relocation efforts of refugees from the transit centres to the two main refugee settlement camps. It must be noted that the time spent by refugees in the transit camps has sometimes been in the order of weeks, compromising on the refugees' nutritional requirements, shelter and other services such as Health and WASH services.</p> <p>SRCS 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, aqua tabs, 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. Consultation session will be held with community members to ensure acceptability of the facilities and safety. Hygiene promotion and awareness sessions, as well as hygiene related supplies (hand washing station with water and soap), will be provided.</p>		

IFRC and PNSs will support SRCS reaching an estimated 66,000 people with safe drinking water, hygiene promotion and sanitation assistance. Areas of intervention include the camp settlements and host communities in Gedaref and Kassala. Focus of the WASH activities will be mainly in Tunaidba, Hamdayet and Um Rakuba, and in host communities. Movement partners involved in the Health response in Sudan include: SRCS, IFRC, Netherlands RC. The following WASH activities were already implemented:

- Distribution of 3,900 jerry cans and 1,500 hygiene kits in Tunaidba and Um Rakuba settlement with support from IFRC, Netherlands RC and German RC.
- SRCS has deployed one Emergency Water Treatment Unit (WTU) from White Nile State to the new settlement camp in Tunaidba. IFRC supports the transport, installation and running costs of the WTU.
- SRCS conducts health and hygiene promotion activities in all locations with support from various partners
- SRCS is constructing 27 latrine blocks and 167 individual latrines with support from various partners.
- SRCS is constructing 99 emergency bathing units with support from various partners.
- SRCS is constructing 44 handwashing stations with support from various partners.

SRCS' water supply activity in Tunaidba is only one part of the entire system. This activity is complemented by other actors undertaking delivery of water to the camp, and as such, the activity is dependent on the success of the whole team.

Challenges have included delays in receipt of internationally procured goods and access to refugee populations and SRCS teams due to coronavirus movement restrictions and office closures in both Khartoum and Gedaref states. Lack of access has particularly affected training of hygiene promotion staff.

Further, recruitment of field staff has affected the progress of activities.

Reporting mechanisms are being strengthened to receive regular and complete quantitative data. To date, complete water quality records are not being consolidated centrally.



Protection, Gender and Inclusion

People Reached: 4,514 people

Male: 2,212

Female: 2,302

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

Indicators	Target	Actual
% of sectors to mainstream minimum protection standards	100%	0
# of people reached through PGI services	40,000	4,514

Output 1.1: Programmes and operations ensure safe and equitable provision of basic services, considering different needs based on gender and other diversity factors.

Indicators	Target	Actual
% of volunteers trained on minimum protection standards	100%	0
# of complaints received through feedback mechanisms	-	0

Output 1.2: Programmes and operations prevent and respond to sexual- and gender-based violence and other forms of violence especially against women and children.

Indicators	Target	Actual
% of staff and volunteers are prepared to prevent and respond to SGBV	100%	0
# of child friendly spaces actively providing services	-	0

Progress towards outcomes

NSs 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.

SRCS is providing PSS and protection services in 3 camps with support from Danish RC. This includes supporting UNHCR with the registration of new arrivals and the management of the protection desk as well as the setup of mobile teams to identify persons with specific needs and provision of safe referrals as well as PSS services.

IFRC and PNSs will support SRCS reaching an estimated 40,000 people (including 32,340 men and 33,360 women) with PGI services. Areas of intervention include the camp settlements and host communities in Gedaref and Kassala. Movement partners involved in the PGI response in Sudan include: SRCS, IFRC, ICRC, Danish RC, Netherlands RC.

Activities undertaken to date by Danish RC include:

Training

- PSS Orientation session held for 14 Gedaref Branch staff and COR staff.
- In Um Rakuba camp, 15 volunteers trained in basic PFA/PGI (8F/7M) - 5 refugees and 10 host community
- Tunaidba camp 15 volunteers trained (7F/8M), 6 refugees and 9 from host community.

Number of refugees provided with PFA (information, emotional support, linking with services):

Um Rakoba: 76 - 15 men, 26 women, 19 boys, 16 girls

Tunaidba: 4,438 - 1234 men, 1067 women, 944 boys, 1193 girls

The start-up of Danish RC activities has been delayed give that PSS/Protection intervention is new for the Branch, and there is lack of capacity to support volunteer. Currently Kassala Branch staff supporting.

SRCS PGI activities are yet to commence due to limited resources in the Branch. Recruitment of a PGI focal point and start-up training and programming will be undertaken in the next quarter.



Migration and Displacement

People Reached: 18,427

Male: 11,793

Female: 6,634

Outcome 1: Communities support the needs of IDPs and their families and those assisting migrants at all stages of migration (origin, transit and destination)

Indicators	Target	Actual
# of migrants assisted with humanitarian services and protection	-	0
Output 1.1: Assistance and protection services to IDPs their families, and communities are provided with immediate assistance and their need advocated for through engagement with local and national authorities as well as in partnership with other relevant organizations.		
Indicators	Target	Actual

# of migrants assisted with humanitarian services and protection	55,000	0
Output 1.2: Awareness raising and advocacy address xenophobia, discrimination and negative perceptions towards migrants are implemented.		
Indicators	Target	Actual
# of advocacy initiatives conducted	-	0
Output 1.3: “Family links are restored for people separated from, or without news of, their loved ones as a result of the disaster”		
Indicators	Target	Actual
# of people reached with RFL services	Needs basis	18,427
% of people who have been reunited with their families through RFL services	Needs basis	18,427
Progress towards outcomes		
<p>Although the influx of refugees into Sudan has slowdown in the past weeks, the risk of further displacement continues to be a reality. Furthermore, refugees in Sudan will continue to need assistance to ensure service coverage and protection of their rights as well as RFL services.</p> <p>ICRC has undertaken the following activities: 18,205 family contacts (18,198 successful calls, 7 tracing cases closed positively); 175 tracing requests have been collected; 47 unaccompanied children registered.</p> <p>At the current funding level, there are no activities planned for migration and development through SRCS and PNSs.</p>		

ENABLING ACTIONS

Strengthen National Society

Output 1.1.6: National Societies have the necessary corporate infrastructure and systems in place		
Indicators	Target	Actual
# of national societies who have a national society development plan in place	1	0
Output 1.1.6: National Societies have the necessary corporate infrastructure and systems in place		
Indicators	Target	Actual
# of National Societies who conducted a PER Assessment	1	0
<p>The National Society Transformation Plan implemented parallel to the flood operation is holistic and encompasses several aspects contributing to increased quality, capacity, accountability and integrity of the organization and its services.</p> <p>Through the operation, the IFRC will strengthen the SRCS governance and management, institutional and disaster response capacities through:</p> <ol style="list-style-type: none"> 1. Governance and Management Training 2. Finalization of a Transformation Roadmap Document. 3. Strengthening the Emergency Operations Centre. 4. Strengthening Warehouse Capacity and more prepositioning of Stock 5. Strengthening IT systems and PMER Capacity 6. Enhancing NS capacity in Logistics and procurement 7. Support Organizational Capacity Assessment (OCAC) 8. Facilitate Branch Organizational Capacity Assessment (BOCA) 9. Ensure Volunteers Safety and Wellbeing 		

STRATEGIC AREAS OF FOCUS

ETHIOPIA

	Shelter People reached: 20,225 Male:9,303 Female:10,922
Outcome 1: Shelter Outcome 1: Communities in disaster and crisis affected areas restore and strengthen their safety, well-being and longer-term recovery through shelter and settlement solutions	
Indicators:	Target Actual
% of assisted families report being satisfied with the assistance provided	90% 0
Output 1.1: Shelter and settlements and basic household items assistance is provided to the affected families.	
Indicators:	Target Actual
# of HH reached with Shelter Kits (target 2100 HH /10.500 people {5,000male 5,500 female})	10,500 20,225
# of HH reached with Household Items (target 2100 HH /10.500 people {5,000 male 5,500 female})	10,500 12,975
Output 1.2: Technical support, guidance and awareness raising in safe shelter design and settlement planning and improved building techniques are provided to affected households	
Indicators	Target Actual
# of volunteers trained in shelter and distribution techniques (Target:60*)	60* 0
Progress towards outcomes	
<p>The federation wide appeal contributed directly through the IFRC or through the bilateral contribution of the participating PNS in the achievement of the shelter and NFI support. A total of 4,045HH were assisted. The IFRC directly supported 1435HH in Amhara and North Wollo zones hosting Tigray IDPs. The Netherland Red cross assisted under the appeal bilaterally assisted 2610HH Tigray IDPs in Amhara and Afar regions.</p> <p>No structural shelter support was provided since the IDP were hosted in public grounds hence there was only support of shelter materials. Hence volunteers were only involved in distribution and there was no immediate need to train them on safe shelter construction. Moreover, the operation was limited with funding and prioritised on delivery of shelter materials as the immediate needs.</p> <p>The operation is yet to conduct PDM and will report when conducted.</p>	
Challenges	
The needs were more than available resources. There was minimal response to the displacement outside Tigray region.	
Lessons Learned	
No specific lesson.	



Livelihoods and basic needs
People reached: 22,380 people
 Male: 10,295
 Female: 12,085

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

Indicators:	Target	Actual
% of families are satisfied with the assistance provided (Target 90%)	90%	0

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

Indicators:	Target	Actual
# of people reached with food items (target 36,667 people)	36,667	9,800
# of people who have access to Cash for Work opportunities (target_7500 people)	7,500	0

Output 1.2: Household livelihoods security is enhanced through food production, increased productivity, and post-harvest management (agriculture-based livelihoods)

# of people reached with LLH recovery support (target 10.500 people)	10,500	0
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Output 1.3: Households are provided with multipurpose cash grants to address their basic needs.

Indicators:	Target	Actual
# of households who receive multipurpose cash grants (target 1500 HH 7,500 people)	1,500 HH	12,580

Progress towards outcomes

The operation through the federation wide response approach reached with multipurpose cash assistance 2516 households IFRC directly reached 1466 HH Tigray IDPs in Gondar and North wollo zones of Amhara region while the Swiss Red Cross through the bilateral support reached 1050 IDP households in SNNPR region. In both cases separate zone specific feasibility and market assesments were done and the values differeof the minimum expenditurre baskets differed as 3000 ETB and 4000 ETB in the two regions, respectively.

The operation is limited by funding to deleivere the other two cash support livelihood strategies of cash for work and livelihood assessts support where it has zero achievement. Priority was given basic household needs support including food in the unrestricted multipurpose cash approach.

The Netherland Red Cross through the bilateral support assisted with food in kind to 1160 HH (5,800 persons) of Tigray IDps in Afar region while the Finish Red Cross supported 2000 IDPs People in Beshangul Gumuz region and 2000 People in Afar region

PDM was not carried out and will be reported in the next update when it is conducted.

Challenges

. Security in Amhara region Gondar and North Wollo zones deteriorated. Despite hosting the Tigray refugees there was ethnic clashes of Amhara and Kement communities who live together in the same region. This created more internal displacement. Moreover, the Shoa zone of Amhara region experienced within the reporting period a fresh conflict between armed Oromo

and Amhara this resulted 250,000 new IDPs in both North Shoa Amhara community and the Oromo in Oromo special zones. according to joint movement assessment report by the movement emergency committee structure.

Lessons Learnt

- Cash and voucher assistance is the preferred intervention by displaced populations according to assessments. Moreover, the Commercial Bank of Ethiopia which is the service provider has a good coverage almost every Weroda has a branch, and 80% access is viable.



Health

People reached: 30,000 people

Male: 13,800

Female: 16,200

Health Outcome 1: The immediate risks to the health of affected populations are reduced

Indicators:	Target	Actual
% trained Volunteers have adequate technical knowledge in the targeted technical areas (Target: 90%) or 100 volunteers	90%	100%

Output 1.1: The health situation and immediate risks are assessed using agreed guidelines

Indicators:	Target	Actual
# of volunteers trained in health-related topics (Target: 100)	100	163
# of First Aid Kits procured and supplied	500	500
# of Emergency referral ambulances supported	20	21
# of people reached with PFA (Target:)	-	1631
# of people reached with RCCE (Target:)	150,000	30,000

Health Outcome 3: Transmission of diseases of epidemic potential is reduced

Indicators	Target	Actual
% of people attended report being better prepared to respond to epidemics. (Target: 80%)	80%	0

Health Output 3.1: Psychosocial support provided to the target population as well as to RCRC volunteers and staff

Indicators	Target	Actual
# people reached with community-based epidemic control and health promotion (target: 150,000)	150,000	30,000

Health Outcome 4: Less severe cases of disease or malnutrition are treated in the community, with referral pathways for severe cases established

Indicators	Target	Actual
% of referrals for malnutrition cases identified by the RCRC teams. (Target: 100%)	100%	0

Health Output 4.1: Acute malnutrition cases are managed in the community, with referral established for severe cases

Indicators	Target	Actual
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Screening and referral mechanism is in place (Target:)	-	0
# of people referred for nutrition treatment (Target:)		0
Health Outcome 5: The psychosocial impacts of the emergency are lessened		
Indicators	Target	Actual
# of people reached with PFA and PSS services (Target: needs based)		7,500
# of people referred to specialized health services		1,631
Health Output 5.1: Psychosocial support provided to the target population as well as to RCRC volunteers and staff		
Indicators	Target	Actual
# of volunteers providing PFA and PSS services (target: 100)	100	163
Progress towards outcomes		
<p>The national society has mobilized volunteers and first respondent material capacity by the onset of the conflict in Tigray. The Amhara and North Wollo Branches were the first respondent especially in medical evacuation of civilian and armed casualties from the conflict front line. The IFRC initial DREF allocation was designed to support this initial response. Procurement of First kits and distribution to responding branches and the training of volunteers in integrated FA and PSS was the initial activities to build their capacity to save life.</p> <p>ERCS had already prepositioned ambulances and the operation facilitated the maintenance and the running cost as well as their crew to keep them on the road. This has favorable impact on the lifesaving needs of casualties of the conflicts in the front line.</p> <p>The operation could not achieve in all planned strategies and intervention was prioritized depending on capacity including funding. Nutrition activities were not carried out due to lack of adequate funding to train and or recruit experts</p>		
Challenges		
Some of the different armed groups attacked ERCS ambulances and in some cases looted the vehicles. After thorough investigation by the national society, it was realized that this was a mistaken identity because most of the ambulances had the government number plate since ERCS was managing referral services on behalf of the federal government and opposing forces attacked.		
Lessons Learned		
It is a strategic lesson for ERCS to change number plate of government donated vehicles and ambulances not to compromise on the identity in similar situations.		
 <p>Water, Sanitation, and Hygiene People reached: 0 people Male: 0 Female: 0</p>		
Outcome 1: Immediate reduction in risk of waterborne and water related diseases in targeted communities		
Indicators:	Target	Actual
# of target population that has access to sufficient safe water (Target: 73,333)	73,333	0

# of target population using adequate sanitation (Target: 73,333)	73,333	0
Output 1.1: Daily access to safe water which meets Sphere and WHO standards in terms of quantity and quality is provided to target population		
Indicators:	Target	Actual
# of people who benefit from provision of safe drinking water (Target: 73,333)	73,333	0
# of water systems constructed and rehabilitated (Target:)	-	0
Output 1.2: Adequate sanitation which meets Sphere standards in terms of quantity and quality is provided to target population		
Indicators	Target	Actual
# of people reached with sanitation services (Target: 73,333)	73,333	0
# of latrine cubicle/stances constructed and rehabilitated (Target:)	-	0
# of hygiene facilities constructed in camps (Target:)	-	0
Output 1.3: NS promote behavioural change in personal and community hygiene (including MHM) among targeted communities		
Indicators	Target	Actual
# of people who receive support to maintain good hygiene (target:73,333)	73,333	0
# of people reached with dignity kits (Target:)	-	0
# of households reached with WASH items (Target:)	-	0
# of people reached with hygiene promotion messaging (Target:)	-	0
Progress towards outcomes		
The operation did not implement any WASH activities due to lack of funds.		
Currently the Netherlands Red cross through bilateral support is carrying out WASH activities in SNNPR region IDPs and will be reported in the next update.		
Challenges		
Limited funding		
Lessons Learned		
 <p>Protection, Gender and Inclusion People reached: 24,270 Male:11,164 Female:13,106</p>		
Outcome 1: Communities become more peaceful, safe, and inclusive through meeting the needs and rights of the most vulnerable.		
Indicators:	Target	Actual
% of sectors that mainstream minimum protection standards (Target 100%) {55,000 people}	100%	40%
# of people reached through PGI services	55,000	24,270

Output 1.1: Programmes and operations ensure safe and equitable provision of basic services, considering different needs based on gender and other diversity factors.		
Indicators	Target	Actual
% of volunteers trained on minimum protection standards (Target 100%)	100%	163%
# of complaints received through feedback mechanism (Target; needs basis)	-	0
Output 1.2: Programmes and operations prevent and respond to sexual- and gender-based violence and other forms of violence especially against children.		
Indicators	Target	Actual
# of staff and volunteers are prepared prevent and respond to SGBV (Target:)	-	163
# of child friendly spaces actively providing services (Target:)	-	0
Progress towards outcomes		
163 volunteers were trained in minimum protection standards in two branches of Gondar and North Wollo. The volunteers were engaged in the operation in delivering the different planned services including cash assistance and distribution of in kind NFI and shelter materials.		
PGI was mainstreamed in the sectors of shelter and livelihoods especially in the targeting criteria where PGI needs were considered as special needs among the population in the same situation. There were no complaints received through the feedback mechanisms.		
Challenges		
Lack of trainers for PGI on the ground.		
Lessons Learnt		
The national society needs to train TOT for continued and increased capacity development for volunteers in PGI.		
 <p>Disaster Risk Reduction People reached: 0 Male: 0 Female: 0</p>		
Outcome 1: Communities in high-risk areas are prepared for and able to respond to disaster		
Indicators:	Target	Actual
# of branches and communities prepared to respond to disasters (Target 5 branches 10 communities)	5 branches , 10 communities	0
Output 1.1: Communities take active steps to strengthen their preparedness for timely and effective response to disasters.		
Indicators	Target	Actual
# of people community plans of action developed (Target 1)	1	0
Outcome 2: Community awareness raising programmes on climate change risks and environmentally responsible practices are conducted in target communities		
Indicators	Target	Actual

% of communities that report an improvement on the living environment through incorporation of climate related actions (Target)	-	0
Output 2.1: Contributions to climate change mitigation are made by implementing green solutions.		
Indicators	Target	Actual
# of climate related actions tested and rolled out (Target 1)	1	0
# of volunteers trained in VCA, and CCA (Target: 82)	82	0
Output 2.2: Community awareness raising programmes on climate change risks and environmentally responsible practices are conducted in target communities		
# of countries implementing the FbF program (Target 1)	1	
Progress towards Achievements		
The operation due to minimal funding did not implement indicators relating DRR and early recovery and promised lifesaving and basic response interventions.		
Challenges		
Lessons Learnt		
-		
ENABLING ACTIONS		
Strengthen National Society		
OutcomeS1. 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, competences and capacities to plan and perform		
Indicators	Target	Actual
# of insured volunteers adequately supported (Target 100)	100	163
Output S1.1.4: National Societies have effective and motivated volunteers who are protected		
Indicators	Target	Actual
# of RCRC volunteers mobilized and protected (Target 100)	100	125
Output S1.1.6: National Societies have the necessary corporate infrastructure and systems in place		
Indicators	Target	Actual
# of National societies that have appropriate organization development plans (Target:1)	1	1
# of NS that have improved PMER systems	-	0
Output S1.1.7: NS capacity to support community-based disaster risk reduction, response and preparedness is strengthened		
Indicators	Target	Actual
% of HNS and PNS satisfied with the IFRC services provided (Target 100%)	100%	100%
OutcomeS2.1: Effective and coordinated international disaster response is ensured community-based disaster risk reduction, response and preparedness is strengthened		
Indicators	Target	Actual
# of National Societies conducted PER assessment (Target 1)	1	0
Output S2.1.1: Effective and respected surge capacity mechanism is maintained.		

Indicators	Target	Actual
# of surge deployed (Target)	-	0
Output S2.1.3: NS compliance with Principles and Rules for Humanitarian Assistance is improved		
Indicators	Target	Actual
# of feedback system set up (Target:1)	1	1
OutcomeS2.2: Effective and coordinated international disaster response is ensured		
Indicators	Target	Actual
% of HNS and PNS satisfied with the IFRC services provided (Target 100%)	100%	0
Progress towards outcomes		
The responding Branches were strategic for the response they share borders with Tigray and was the route which where the conflict started as well as the reception for casualties and IDPs. The two branches of Gondar and north Wollo mobilized adequate volunteers and the IFRC initial DREF allocation supported the engagement and training of the volunteers in terms of allowances, Covid 19 protection gear and refreshing their skills in FA and PSS. The operation also allocated resources for any injury or effect of the conflict on the responders. NO ERCS volunteer casualty was reported. No satisfaction survey was conducted.		
Challenges		
No challenges documented.		
Lessons Learnt		
ERCS should maintain the good volunteer management practice in the branches.		

STRATEGIC AREAS OF FOCUS

DJIBOUTI

	<p>Water, Sanitation, and Hygiene (WASH) People reached: 6495 Male: 2988 people Female: 3507 people</p>	
Outcome 1: Immediate reduction in risk of waterborne and water related diseases in targeted communities		
Indicators:	Target	Actual
# of target population using adequate sanitation (Target:5,000 people)	5,000	6495
Output 1.2: Adequate sanitation which meets Sphere standards in terms of quantity and quality is provided to displaced population		
Indicators	Target	Actual
# of people reached with sanitation (Target:5,000)	5,000	6,495
# of latrine cubicle/stances constructed and rehabilitated (Target:)	-	0
#r of hygiene facilities constructed in camps (Target:)	-	0
Output 1.3: NS promote behavioural change in personal and community hygiene (including MHM) among targeted communities		
Indicators	Target	Actual

# of people who receive support to maintain good hygiene (Target: 5,000 people)	5,000	6,495
#of people reached with dignity kits	-	0
# of households reached with WASH items	-	0
# of people reached with hygiene promotion messaging	5000	6,495
Progress towards outcomes		
Volunteers carried out hygiene portion activities in the Hol Hol refugee camp and the host community. The volunteers mainly used public address system for mass awareness		
Challenges		
Limited logistics the vehicle is in old and most time spent in garage inconveniencing the activity planning		
Lessons Learnt		
- No lessons learnt		
-		
ENABLING ACTIONS		
Strengthen National Society		
OutcomeS1. 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, competences, and capacities to plan and perform		
Indicators	Target	Actual
# of volunteers adequately supported (Target 12)	12	0
Output S1.1.4: National Societies have effective and motivated volunteers who are protected		
Indicators	Target	Actual
# of RCRC of volunteers mobilized and protected (Target 12)	12	0
Output S1.1.6: National Societies have the necessary corporate infrastructure and systems in place		
Indicators:	Target	Actual
# of National Societies that have appropriate organization development plans (Target:1)	1	0
# of National Societies improved PMER systems (Target;1)	1	0
Output S1.1.7: NS capacity to support community-based disaster risk reduction, response and preparedness is strengthened		
Indicators	Target	Actual
# of National Societies who conduct PER assessment (Target 1)	1	1
OutcomeS2.1: Effective and coordinated international disaster response is ensured		
Indicators	Target	Actual
% of HNS and PNS satisfied with the IFRC services provided (Target 100%)	100%	0
Output S2.1.1: Effective and respected surge capacity mechanism is maintained.		
Indicators	Target	Actual
# of surge deployed (Target:)	-	0
Output S2.1.3: NS compliance with Principles and Rules for Humanitarian Assistance is improved		
Indicators:	Target	Actual
Number of feedback system set up (Target: 1)	1	
Progress towards outcomes		

- Due to funding levels, there was limited activities. Activities will be reported in the next update.

Challenges

-

Lessons Learned

-

D. Financial Report

The financial report is as shown below.

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. Getachew Ta'a, Secretary General of Ethiopia Red Cross Society, ercs.sg@redcrosseth.org
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For IFRC Resource Mobilization and Pledges support:

- 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

Reference documents

Click here for:

- [Previous Appeals and updates](#)

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.

Emergency Appeal

INTERIM FINANCIAL REPORT

Selected Parameters			
Reporting Timeframe	2020/11-2021/5	Operation	MDRTIGRAY
Budget Timeframe	2020/11-2021/5	Budget	APPROVED

Prepared on 12 Jun 2021

All figures are in Swiss Francs (CHF)

MDRTIGRAY - Tigray Crisis - Population Movement

Operating Timeframe: 18 Nov 2020 to 26 Jul 2022; appeal launch date: 24 Jan 2021

I. Emergency Appeal Funding Requirements

Thematic Area Code	Requirements CHF
AOF1 - Disaster risk reduction	841,000
AOF2 - Shelter	898,000
AOF3 - Livelihoods and basic needs	813,000
AOF4 - Health	1,618,000
AOF5 - Water, sanitation and hygiene	1,985,000
AOF6 - Protection, Gender & Inclusion	378,000
AOF7 - Migration	626,000
SFI1 - Strengthen National Societies	688,000
SFI2 - Effective international disaster management	1,313,000
SFI3 - Influence others as leading strategic partners	142,000
SFI4 - Ensure a strong IFRC	94,000
Total Funding Requirements	9,396,000
Donor Response* as per 12 Jun 2021	801,756
Appeal Coverage	8.53%

II. IFRC Operating Budget Implementation

Thematic Area Code	Budget	Expenditure	Variance
AOF1 - Disaster risk reduction	299,738	374,117	-74,379
AOF2 - Shelter	533,232	532,798	434
AOF3 - Livelihoods and basic needs	0	43,481	-43,481
AOF4 - Health	25,665	18,787	6,878
AOF5 - Water, sanitation and hygiene	41,037	32,399	8,638
AOF6 - Protection, Gender & Inclusion	0	0	0
AOF7 - Migration	0	0	0
SFI1 - Strengthen National Societies	13,118	2,468	10,650
SFI2 - Effective international disaster management	0	13,442	-13,442
SFI3 - Influence others as leading strategic partners	332	332	0
SFI4 - Ensure a strong IFRC	15,355	8,113	7,242
Grand Total	928,477	1,025,938	-97,460

III. Operating Movement & Closing Balance per 2021/05

Opening Balance	0
Income (includes outstanding DREF Loan per IV.)	1,589,391
Expenditure	-1,025,938
Closing Balance	563,453
Deferred Income	0
Funds Available	563,453

IV. DREF Loan

* not included in Donor Response	Loan :	906,154	Reimbursed :	0	Outstanding :	906,154
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Emergency Appeal

INTERIM FINANCIAL REPORT

Selected Parameters			
Reporting Timeframe	2020/11-2021/5	Operation	MDRTIGRAY
Budget Timeframe	2020/11-2021/5	Budget	APPROVED

Prepared on 12 Jun 2021

All figures are in Swiss Francs (CHF)

MDRTIGRAY - Tigray Crisis - Population Movement

Operating Timeframe: 18 Nov 2020 to 26 Jul 2022; appeal launch date: 24 Jan 2021

V. Contributions by Donor and Other Income

Opening Balance							0
Income Type	Cash	InKind Goods	InKind Personnel	Other Income	TOTAL	Deferred Income	
British Red Cross	192,491				192,491		
DREF Allocations				906,154	906,154		
Japanese Red Cross Society	42,880				42,880		
Red Cross of Monaco	43,871				43,871		
Swedish Red Cross	108,323				108,323		
The Netherlands Red Cross (from Netherlands Govern	275,671				275,671		
Turkish Red Crescent Society	20,000				20,000		
Total Contributions and Other Income	683,237	0	0	906,154	1,589,391	0	
Total Income and Deferred Income					1,589,391	0	