

OPERATION UPDATE

Ethiopia, Djibouti, Sudan- Africa

Tigray Crisis: Population Movement Complex Emergency Appeal

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



Close to 300 families fled fighting in Tigray and stay at the Debarak IDP camp in North Gondar, Ethiopia. IFRC supported more than 200 families with cash assistance. Rita Nyaga ©IFRC

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: CHF 27 million (including IFRC secretariat) IFRC secretariat Funding Requirements: CHF 9.4million (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: CHF 906,154 (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: Afar, Amhara, Benishangul-Gumuz, and SNNPR 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 and the government Disaster risk management commission			
Sudan: Commission of Refugees (CoR), Humanitarian Aid Commission (HAC), Agency for Technical Cooperation and Development (ACTED), ALIGHT, Cooperazione Internazionale (COOPI), Concern Worldwide (CWW), Danish Refugee Council (DRC), Food and Agricultural Organization (FAO), Global Aid Hand (GAH), IOM, International Rescue Committee (IRC), Islamic Relief Worldwide (IRW), Medair Organisation, Médecins Sans Frontières (MSF), Ministry of Health (MoH), Ministry of Social Welfare (MoSW), Norwegian Church Aid (NCA), Norwegian Refugee Council (NRC), Plan International Sudan (PIS), Relief International (RI), Save the Children, Solidarities International (SI), United Nations Development Programme (UNDP), United Nations Population Fund (UNFPA), United Nations High Commissioner for Refugees (UNHCR), United Nations International Children's Emergency Fund (UNICEF), Welthungerhilfe (WHH), World Food Programme (WFP), World Health Organization			


(WHO).


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


This is the MDRTIGRAY Tigray Crisis: Population Movement Complex Emergency Appeal, 6-month Operations Update issued to inform on the overall Emergency Appeal which is a multi-country Federation-wide response to the cascading effects of the Tigray crisis across Djibouti, Ethiopia, and Sudan.


Chronology of the disaster


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3 September 2020: Tigray Regional Government holds parliamentary elections.
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3 - 4 November 2020: Fighting erupts between Ethiopian Défense Forces and security forces in the Tigray Region following an attack in Mekele on a military base resulting population movement, including across the border to neighbouring Djibouti and Sudan.
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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.
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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 Gedaref and Kassala.
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18/20 November 2020: IFRC releases CHF 498,763 from the Disaster Relief Emergency Fund (DREF) support Sudan Red Crescent Society (SRCS) provide assistance to 40,000 people that had crossed the border from Ethiopia into Gedaref and Kassala for 4 months.
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20 November 2021: IFRC releases CHF 359,213 from the DREF to support Ethiopian Red Cross Society (ERCS) aid 7,500 people that had been displaced into Amhara region; as well as complete assessments in Tigray region and other areas.
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26 January 2021: IFRC issues a coordinated [Tigray Crisis: Population Movement Complex Emergency](#) Appeal requesting CHF 27 million to support 600,000 people as part of a multi country response across Ethiopia (355,000), Sudan (300,000) and Djibouti. (5,000)
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30 March 2021: IFRC issues a [revised Federation-wide Emergency Appeal](#); with a retained funding requirement of CHF 27 million comprising: CHF 9.4 million Secretariat (Ethiopia CHF million, Sudan CHF 4.4 million, Djibouti CHF 0.5 million, Regional Coordination CHF 1.5 million), and CHF 17.6 million bilateral.

- **June 2021: Integrated Food Security Phase Classification (IPC) reports that 5.5 million people in Tigray and neighbouring Afar and Amhara regions are facing Acute Food.**
- **28 June 2021: IFRC issues a communication informing partners of the deterioration in food insecurity in northern Ethiopia (Afar, Amhara and Tigray); and need for CHF 2.5 million to support ERCS scale up their response in these areas.**
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- **28 June 2021: Ethiopian Government announces a unilateral ceasefire in Tigray; however, there are reports of ongoing clashes in Tigray.**
- **19 July 2021: Revision to the Secretariat component of the Ethiopia Plan of Action (PoA) is released through an [Operations Update](#).**
- **July 2021: Clashes between Ethiopian Defence Forces and security forces in Tigray persist; with spill over of violence into neighbouring Afar and Amhara regions generating internal displacement, as well as movement across the border to North Sudan.**

Situation Overview

In Ethiopia, the humanitarian situation; and the prevailing outlook remains of considerable concern – with more than 16 million people in need of urgent assistance. Since November 2020, fighting between the Ethiopian Government and the Tigray Defence Forces has resulted in loss of life; injuries; destruction of property and infrastructure; displacement; loss of livelihood and has led to psychological distress across northern Ethiopia. Displaced populations from Tigray region and other internally displaced people (IDPs) remain in camps.

On 28 June 2021, a unilateral humanitarian ceasefire in Tigray was announced by the Ethiopian Government; and while movement and access are improving, the security situation remains a concern. Persisting violence including spill over into Afar and Amhara regions has generated new population movement; and there remains disruption to basic services such as

electricity and communications, as well as reduction in availability of cash, food, and fuel.



ERCS have prioritized distribution of cash and in-kind support following a deterioration of the food insecurity situation; ERCS 2021

Food insecurity and malnutrition has been exacerbated by the cascading effects of the crisis; with an estimated 5.5 million in Tigray, and adjacent areas of neighbouring Afar and Amhara regions now experiencing acute food insecurity. According to analysis conducted by the Integrated Food Security Phase Classification (IPC) initiative – more than 400,000 people are in Catastrophic IPC Phase 5, which is the highest number of people in this category since the 2011 Somaliaⁱ. Below-average rainfall projected for the rest of 2021 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.

In other areas of Ethiopia, the humanitarian situation remains of considerable concern. In the North Shewa and Oromia Special zone of Amhara region, there has been spates of ethnic violence, which has resulted in the displacement of 358,000 people. There are also concerns regarding the deteriorating situation in Benishangul-Gumuz, where unknown armed groups are gaining momentum in western areas of the region and restricting access.

Meanwhile, though the 2021 general elections were conducted peacefully, the postponement of elections (until September 2021) in Harari and Somali regions, and parts of Oromia region; combined with delayed declaration of results in some polling stations in Oromia raises concerns on perceptions on the regularity in which they were conducted which may impact opposition groups acceptance of the results. In the complex security situation, these factors continue to exacerbate the risk of election-related violence.

In Sudan, the crisis has led to an increase number of arrivals of people fleeing the region seeking safety across the border. A total of 55,493 arrivals had been reported by the UN Refugee Agency (UNHCR) and Sudan's Government Commissioner for Refugees (COR) as of 31 July 2021 – with this number is expected to increase to upwards once verification processes are completed. These numbers also include nearly 897 people from the Qemant ethnic group who crossed the border in

late July 2021, following clashes between Ethiopian Federal Defence Forces and other affiliated groups, with Tigrayan Defence Forces in Gondar zone of Amhara region. This group is currently receiving assistance in Basundah locality of Gedaref state, while authorities assess a new site for these arrivals.

Living conditions in transit centres located in Kassala (Hamdayet) and Village 8 (Gedaref) remain congested with poor living conditions due to continued gaps in the provision of basic services. As of 31 July 2021, nearly 9,000 people remained at Hamdayet and Village 8 centre, facilities with an original capacity to host less than 1,000 people. Efforts to move people to permanent settlements has therefore been expedited, with more than 38,000 people relocated to permanent settlements in Um Rakuba and Tunaidba. Nonetheless the significant and rapid pace of the refugee influx has required a continuous scale up of services to respond to the urgent needs of refugees, as well as to support to the Government of Sudan (GoS) in its response to the growing demand in humanitarian assistance.

The influx of new arrivals has had a considerable impact on the host communities and the environment. Due to the overcrowding at transit centres, many refugees are also scattered among existing villages and staying with host communities, further stretching the already limited available basic services. Heavy rains and flooding have also caused widespread damage to shelter and other infrastructures, with increased the risk of COVID-19 due to overcrowding also exacerbated. Sudan is also experiencing increased food insecurity resulting from inflation, which has pushed the cost of basic items up by 200%.



SRCS volunteers have been provided with water so that they can support people in treatment training and ensure people in the El Tunaydba refugee camp have access to safe drinking water.

Djibouti shares border with Ethiopia and is accessible to refugees. Moreover, there is also formal refugee camp under UN agency for refugees UNHCR at Hol Hol. Latest news briefing by UNHCR on 7 June 2021¹ estimated the Ethiopian refugees in Djibouti to be over 12,000 of which 300 of them are of Tigray origin who are relative to the current conflict.

As much as the influx of refugees as result of Tigray crisis from the start of the violence were more to Sudan than Djibouti, with the escalation of fighting into the neighbouring Afar and Amhara regions there is possibility of prospective Ethiopian refugee population movement especially from Afar region because of ethnic homogeneity of the populations in either side of the border as IDP population builds up in these regions.

In January 2021, IFRC launched a coordinated [Federation-Wide \(FW\) Emergency Appeal](#) requesting CHF 27 million, to support Red Cross and Red Crescent National Societies (NS) in Ethiopia, Sudan and Djibouti provide humanitarian assistance to populations that had

¹ <https://www.unhcr.org/afr/news/press/2021/6/60be482c4>

been affected by the crisis. The [FW Emergency Appeal was revised](#) in March 2021, with a consolidated Secretariat (multilateral) component covering CHF 9.4 million Secretariat (Ethiopia CHF million, Sudan CHF 4.4 million, Djibouti CHF 0.5 million, Regional Coordination CHF 1.5 million), and CHF 17.6 million bilateral.

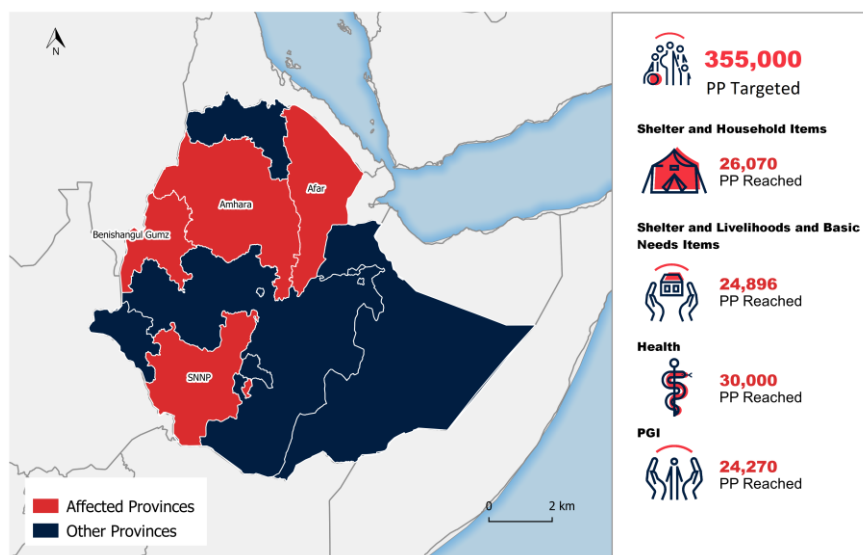
Minimum funding coverage on this Emergency Appeal relative to the needs across Ethiopia, Sudan and Djibouti have limited the provision of activities and services to affected populations in need of urgent humanitarian assistance.

Summary of Red Cross Red Crescent response to date

Overview of Host National Societies

Ethiopia

Ethiopian Red Cross Society (ERCS) has been privileged by its local network and acceptance by communities and has not been limited in terms of access across the entirety of Tigray region. ERCS mobilised support from ICRC, IFRC, bilaterally support from the partner National Societies (pNS) to respond to the range of



emerging needs including casualty evacuation ambulance services and first aid, temporary shelter needs for displaced populations crossing from Tigray region and capacity development in Protection, Gender, and Inclusion (PGI) and CEA. More specifically it collaborated with ICRC on the provision of medical supplies support to referral hospitals in Amhara region bordering Tigray.

ERCS, IFRC and the ICRC have coordinated their approach and issued a joint statement on their intervention strategies where the ERCS is at the centre of the response, with ICRC taking the lead inside Tigray, and IFRC and other RCRC partners cooperating to address the cascading effects of the fighting and spill-over in neighbouring regions of Amhara and Afar, as well as Benishangul-Gumuz and Southern Nations, Nationalities and Peoples (SNNP) regions. ERCS in its multisectoral response carried out the following interventions with the below summary achievement with support from the FW Emergency Appeal:

Shelter and Household Items

- A total of 4,035 IDP families (26,070 people) have been assisted with shelter and household items – this comprises 1,435 families in Gondar and North Wollo zones of Amhara region, who

received support from IFRC; and 2,610 families in Afar and Amhara, who received support from the Netherlands Red Cross (NLRC).

Livelihoods and Basic Needs

The FW Emergency Appeal contributed through IFRC and bilateral pNS support to accomplish targets related to in-kind food and multipurpose cash assistance for food and basic needs:

- A total of 2,516 IDP families (15,096 people) have been assisted with multipurpose cash assistance – this comprises 1,466 families in Gondar and North Wollo zones of Amhara region, who received support from IFRC; and 1,050 families in SNNPR, who received support from the Swiss Red Cross
- A total of 3,160 IDP families (9,800 people) have been assisted with in-kind food support – this comprises 1,160 families in Afar region who received support from NLRC; and 2,000 families in Amhara and Benishangul-Gumuz regions who received support from Finnish Red Cross.

Health

- The FW Emergency Appeal contributed through IFRC multilateral and bilateral pNS support to accomplish the following in Gondar and North Wollo branches in Amhara region: Medical evacuation of civilians and injured combatant casualties. ERCS prepositioned 21 ambulances and the FW Emergency Appeal had facilitated the maintenance and running costs as well as allowances of the crew. This had ultimate lifesaving impact on the casualties of the fighting.
- First aid services - procurement of First kits and distribution; as well as training of volunteers in integrated First Aid (FA) and PSS were completed to strengthen the capacity of these branches. A total of 500 FA kits were supplied, and 163 volunteers received training.
- Mobilization of volunteers to conduct Risk Communication and Community Engagement (RCCE), community-based health promotion; as well as provide immediate Psychosocial First Aid (PFA) and Psychosocial support (PSS) to IDPs and host communities. A total of 30,000 people have been reached.
- Psychosocial trauma referral: 1,631 people experiencing psychosocial trauma were provided with referral service.

Water, Sanitation and Hygiene (WASH)

Limited funding coverage on the FW Emergency Appeal has thus far meant that WASH related activities have not been undertaken

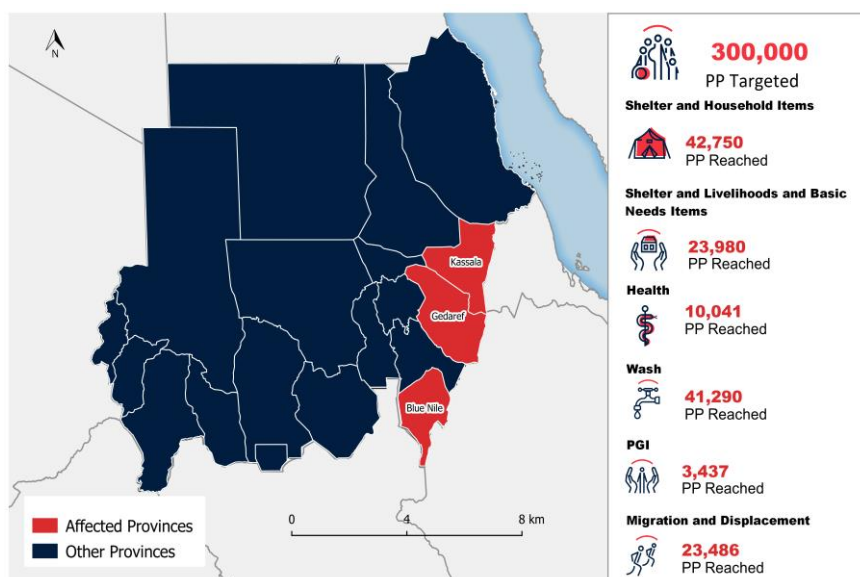
- NLRC has planned to scale up interventions in WASH and these will be reported in the next Operations Update.
- A WASH delegate has been recruited, supported jointly by NLRC (staff on loan) and IFRC, which will act as a FW resource to ERCS, IFRC and other pNS involved in the response.

Protection, Gender and Inclusion (PGI)

- A total of 163 volunteers were trained on PGI minimum standards in the Gondar and North Wollo branches in Amhara region. The volunteers were engaged in the response in delivering the activities planned, including assessments, and targeting and distribution of shelter and household items. 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. A total of 24,270 people have benefited from PGI services through the FW Emergency Appeal.
- With support by the FW Emergency Appeal, the recruitment of an ERCS PGI coordinator is being finalised. This will be a FW resource funded 9 months by IFRC (Secretariat multilateral resources) and 3 months bilaterally by the Austrian Red Cross. However, there remains a need to secure longer term funding to ensure sustainability of this position in ERCS.

Sudan

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. With support from the FW Emergency Appeal as well as other Movement and non-Movement partners, SRCS has undertaken the following key interventions since the onset of the influx.



Shelter and Household Items

- 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.
- SRCS constructed 25 communal shelters and eight communal kitchens in Hamdayet and Um Rakuba with support from German RC, UNHCR and IFRC.
- SRCS constructed 10 demonstration shelters and distributed 600 shelter kits with support from UNHCR.
- 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.
- QRCS and GRC provided an additional 975 and 1400 NFI kits to Um Rakuba and Tunaidba camps.

Livelihoods and Basic Needs

- Distribution of 4,796 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 existing clinic in Hamdayet, supported by IFRC.
- Establishment and ongoing operations for a new health unit in Tunaidba camp. World Health Organization (WHO) supported with the supply of medicines for the new facility 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.
- Provision of health services to the host community through a mobile clinic, one day per week, supported by UNDP.
- PSS Orientation session held for 14 Gedaref Branch staff and COR staff, with support by Danish RC. DRC also supports SRCS in Um Rakuba and Tunaydba camps with volunteer training for refugees and host community in basic PFA, who provide ongoing support in PFA and referrals for specialized and basic needs services in both camps.

WASH

- 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, servicing both the camp and the host community. IFRC supports the transport, installation and running costs of the WTU.
- SRCS constructed emergency communal latrines in Hamdayet and Village 8 in the immediate response to the influx.
- SRCS, in conjunction with GRC and NLRC, conducts health and hygiene promotion activities in all locations.
- SRCS is constructing 110 latrine blocks (with latrines, bathing spaces and handwashing facilities) with support from NLRC.

Tracing and Restoration of family links

- With support from ICRC, SRCS is providing Restoring Family Link services, including facilitating phone calls, tracing requests and registration of unaccompanied children.

Protection, Gender, and Inclusion

- Training of 65 SRCS volunteers in both camps on PGI and child protection.

Sagar's return to Sudan

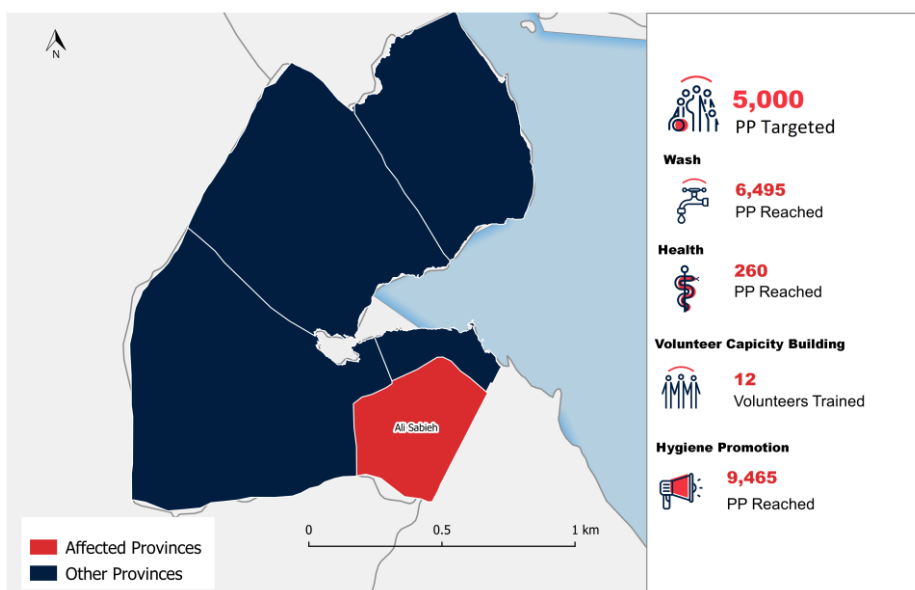
Sagar has lived in the Um Raquba refugee camp in Gedaref, Sudan for more than nine months. She fled fighting in Tigray accompanied by her 27-year-old son. She says she will return home when freedom comes. Her son was a driver while in Ethiopia but now he has no work. Sagar was living and working in Sudan and returned to Ethiopia 7 years ago. She fled back to Sudan when the fighting started and majority of her relatives are in Tunaydba camp, but she says she will join them in Ethiopia because peace is coming.

Rita Nyaga ©IFRC



Djibouti

Djibouti Red Crescent (DRC) has capacity in First Aid, Restoring Family Links (RFL), WASH (water purification, latrine construction/rehabilitation, waterpoint construction/rehabilitation, train community to safeguard waterpoints and latrines), COVID-19 awareness, health, and hygiene promotion.



Through the FW Emergency Appeal, DRC increased the geographical scope and target population of its ongoing COVID-19 RCCE and WASH activities; and diversified its First Aid, PSS and RFL activities to cover Hol Hol refugee camp and host communities.

- Training of volunteers in WASH, health and hygiene promotion, and COVID-19 prevention, 12 volunteers trained
- First Aid and PSS services for refugees on need basis, (260 persons reached)
- Awareness campaigns on hygiene promotion & COVID-18 in host communities,

- Carry out awareness campaigns on hygiene promotion & COVID-19 in Hol Hol refugee camp, 9465 persons reached
- Developed public handwashing points with soap and other sanitary supplies,
- Produced hygiene promotion materials,
- Provided personal protective equipment (PPE) kits for staff and volunteers,
- Procurement of Thermometer for screening.

Overview of Partner National Societies, ICRC and IFRC

Ethiopia

The IFRC provides technical and financial support to ERCS through an Operations Manager based in Addis Ababa and its Eastern Africa Country Cluster Delegation (EA CCD) and the Regional Office for Africa which are both based in Nairobi, Kenya. There are seven pNS present in Ethiopia: Austrian Red Cross, Danish Red Cross, Finnish Red Cross, German Red Cross, The Netherlands Red Cross, Qatar Red Crescent and Swiss Red Cross. The ICRC has a Delegation in Addis Ababa, Sub-Delegations in Mekele, Nekemte, Djijiga, and an Office in Shire. It supports and works closely with ERCS in areas affected by violence.

An IFRC surge team was deployed from December 2020 – May 2021, with profiles including Head of Operations (OPs), Cash and Voucher Assistance (CVA), Information Management (IM), Communications, Partnerships and Resource Development (PRD), Planning, Monitoring, Evaluation and Reporting (PMER), Security and WASH. This strengthened coordination of support to Partners and ERCS – in mobilizing resources for domestic appeals and technical support to deliver on programmatic objectives. FW-reporting systems were also developed, comprising a FW Picture, Indicator Tracking Tool (ITT), and a Financial Overview, which were cascaded to the National Societies in Ethiopia, Sudan, and Djibouti.

IFRC is in the process of recruiting a head of cluster position (Ethiopia and Djibouti) to strengthen, coordination, partnership, and strategic positioning; and has posted a senior PRD delegate (from July 2021 onwards) to Addis Ababa. To support the provision of FW technical services, recruitment of longer-term PGI, PMER and WASH (staff on loan from Netherlands Red Cross) personnel are also being recruited. A Movement Coordination Framework by ERCS, ICRC and IFRC has been ratified, and is operational in accordance with the SMCC structure. It includes a Movement Platform (Strategic-level) and Movement Coordination Meeting (Operational-level), which are supported by following technical committees: Emergency Coordination Taskforce, Election Contingency Planning Taskforce, and a Security Coordination Committee. Terms of Reference (ToR) are in place for all the committees; and meetings are held according to a pre-agreed schedule with rotational chairs. A Movement Coordination Agreement and Movement Communications Framework are being developed, while in July 2021 Ethiopia Movement Key Messages were endorsed.

Sudan

SRCS' Head of Disaster Management (DM) leads bi-weekly coordination meetings in Sudan. All in-country movement partners participate in this meeting, including IFRC, ICRC, Danish Red Cross, Spanish Red Cross, Swedish Red Cross, Swiss Red Cross, NLRCS, German Red Cross, Turkish Red Crescent and Qatar Red Crescent. The Head of DM and the IFRC Field Coordinator for the Population Movement response co-lead weekly operational meetings with active partners.

Movement support to the SRCS Refugee Response operation is coordinated through this national coordination platform to ensure complementarity and a joint approach to technical and operational support to SRCS in the response. SRCS developed a RCRC 4W coordination matrix and reporting template and contribute to the UNHCR-led interagency mapping exercise of activities for the host community.



Sudan, Gedaref, El Tunaydba refugee camp. The SRCS is running a health clinic in Tunaydba refugee camp. Close to 50 patients are treated at the clinic every day while more than 6 babies are delivered. Rita Nyaga ©IFRC

The Swedish Red Cross (SRC), together with the Austrian Red Cross (ARC), 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.

Djibouti

IFRC is supporting Djibouti Red Crescent in a wider perspective of strengthening the National Society capacity. Currently the IFRC 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 Operations Manager based in

Ethiopia. At strategic level the IFRC as mentioned is planning to recruit a head of cluster position (Ethiopia and Djibouti) to support an increased focus on National Society capacity development of DRC.



Sudan, Gedaref, El Tunaydba refugee camp. The water treatment plant in Tunaydba produces 265,000 litres per day. The SRCS dispatches close to 15 trucks of water per day, and they deliver 250,000 litres to refugee families within the camp and 15'000 Litres to the host community. Rita Nyaga ©IFRC



Sudan, Gedaref, El Tunaydba refugee camp Ahmed is one of the SRCS volunteers working at the treatment plant. He received water treatment training from the SRCS. Rita Nyaga ©IFRC

ICRC 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 remains no pNS in country supporting the NS. British Red Cross (BRCS) supported the DRC until the end of 2020.

Overview of non-RCRC actors in country

Ethiopia

ERCS coordinates with the National Disaster Risk Management Commission (NDRMC) in the planning and implementation of emergency response actions; and is a member of the National Operations Centre. ERCS is also part of the Humanitarian Country Team (HCT), is represented in clusters and participates in inter-agency working group meetings for various sectors (Cash, Food and Non-Food Security, Nutrition, ES/NFI, Protection, and Education) NHQ and regional levels as well as the NDRMC led national early warning task force and Cash Working Group.

Movement Partner focal points are supporting ERCS with engagement in the cluster system. The IFRC Ethiopia Operations Office is supporting in the Food and Non-Food Security, ES/NFI clusters, and as part of the Cash Working Group.

As auxiliary to the Government of Ethiopia, ERCS has coordinated with its security agencies to ensure that the NS and ICRC has had unlimited access inside Tigray; and IFRC and pNS to other areas of the country as needed.

Most Non-Movement humanitarian organizations have pivoted their resources to the situation inside Tigray region. ERCS has entered partnership with UN agencies including UNICEF and UNFPA; as well as international NGOs (Save the Children) in their response to the Tigray crisis. In order not to compromise National Society's neutrality it has ensured independence of engagement in these partnerships and implemented the interventions based on this principal.

In response to the deteriorating humanitarian situation in Ethiopia; the United Nations declared in May 2021, the Humanitarian System-Wide Scale-Up Activation by the Interagency Standing Committee (IASC); and released US\$ 65 million to support the response in Ethiopia. This comprised \$45 million from the UN managed Ethiopia Humanitarian Fund (EHF), and \$25 million from the UN Central Emergency Response Fund (CERF). Of the \$65 million, a total of \$40 million is dedicated for Tigray. The UN World Food Program are also appealing for \$180 million to respond to the food insecurity crisis in Ethiopia.

On 10 June 2021, the UN Under-Secretary General for Humanitarian Affairs and Emergency Relief Coordinator participated in a high-level round table held by the European Union and the United States, specific in Tigray. At this, the need for severity of the humanitarian situation; and the need for a scaled-up response was again reinforced. The U.S. Agency for International Development (USAID) has also announced \$181 million new USAID assistance to provide humanitarian assistance in Tigray.

Sudan

In Sudan, COR and UNHCR co-chair the Refugee Consultation Forum (RCF) at the national level. Operational coordination in the field takes place in the Refugee Working Groups (RWGs), also co-chaired by COR and UNHCR. UNHCR has launched the inter-agency refugee emergency response plan for the refugee influx from Ethiopia which is guiding the overall response. SRCS participates in the relevant sectoral working groups, including Health, Protection, Shelter/NFI and WASH, which are led by a combination of UN and INGO agencies. The IFRC in-country team based in Gedaref supports SRCS with the in-country coordination with external partners in Gedaref.

Djibouti

In Djibouti, Office National d'Assistance aux Réfugiés et Sinistrés (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 Aouraoussa 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

B. THE OPERATIONAL STRATEGY

The situation across Ethiopia, Sudan and Djibouti generated by the cascading effects of the crisis in Tigray, remains continuously complex and evolving – therefore, ERCS, SRCS and DRC with support from IFRC and its members must be ready to respond as needed. To ensure that actions remain relevant to the changing context, and resources available under the Emergency Appeal, it was agreed that country level Plans of Action would be revised every 3-months to ensure that activities planned remain appropriate to the evolving humanitarian situation and resources.



Ethiopia Johannes Chinchilla ©IFRC.

Ethiopia

Following the deterioration of the food security situation in areas of northern Ethiopia, specifically those adjacent to Tigray which have been considerably impacted by the cascading effects of the crisis; it was determined that a revision to the IFRC secretariat component of the PoA was

required. The PoA revision prioritized the scale-up of support to IDP, post IDP (returnees) and host communities over a period of six months (July – December 2021 in areas including,

- Livelihoods and Basic Needs,
- PGI and Community Engagement and Accountability (CEA),
- National Society Development (NSD) in Complex Settings.

The above interventions target specific zones in Afar and Amhara regions, that are adjacent to Tigray region, and have been impacted by the cascading effects of the crisis, which has triggered worsened Acute Food Insecurity (IPC Phase 3 (Crisis) and above). The Secretariat funding requirement for Ethiopia remains unchanged at CHF 3 million; of which CHF 2.5 million is needed (not covered) to implement the revised PoA.

Under the bilateral component of the FW Emergency Appeal, pNS will continue with complementary cash and voucher assistance (CVA), NSD, Health and WASH interventions in other zones inside Amhara, Benishangul-Gumuz, and Southern Nations, Nationalities and Peoples Region (SNNP) regions, and not targeted by IFRC.

Sudan and Djibouti

Thus far there has been no revisions to the PoA for Djibouti or Sudan, which following on consultation with the SRCS, DRC and pNS in these countries remain appropriate to the strategies that were articulated at the onset of the Emergency Appeal.


For more information on Operational strategy, Needs assessment, Targeting and Scenario planning” which provide the basis for the operational strategies under this operation – please refer to the [Revised Emergency Appeal](#) and [Operations Update no. 2 \(Ethiopia\)](#)

C. DETAILED OPERATIONAL PLAN

STRATEGIC AREAS OF FOCUS

SUDAN

	<p>Shelter</p> <p>People Reached: 42,750</p> <p>Male: 27,360</p> <p>Female: 15,390</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%	Data not yet available
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	3,000
# People reached with distribution of HH items	21,500	42,750
# 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. SRCS, with the support of the IFRC and members, is seeking to ensure that people in camps 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. Long-term vulnerability in Tunaidba is particularly enhanced due to the location and geography of the site, leaving people exposed to the strong winds and rains that are common to the region.</p> <p>IFRC and pNSs are supporting SRCS reaching an estimated 50,000 people in Gedaref and Kassala with emergency and transitional shelter assistance. Movement partners involved in the Shelter and HHI response in Sudan are 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"> • SRCS constructed 25 communal shelters and 8 communal kitchens in Hamdayet and Um Rakuba with support from German RC, UNHCR and IFRC. • SRCS supported UNHCR with the construction of ten demonstration shelters and distribution of 600 shelter kits. • 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. • QRCS and GRC provided an additional 975 and 1400 NFI kits to Um Rakuba and Tunaidba camps. <p>QRCS aims to continue to support in the sector in the coming months, with second and third phase NFI distributions in the planning phases.</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>Whilst the UN has undertaken major site works including construction of roads and drainage in and out of the camp, refugee populations in both camps remain vulnerable to the rainy season. Storms, winds and floods have caused, and will continue to cause, considerable damage and loss of property to shelters and household property.</p>		
	<p>Livelihoods and basic needs</p> <p>People Reached: 23,980</p> <p>Male: 15,347</p> <p>Female: 8,633</p>	

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%	Data not yet available
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	23,980
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	Pending funding (refer to progress towards outcomes)
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	Pending funding
Progress towards outcomes		
<p>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. SRCS is targeting both refugee populations in camps and host community with in-kind food rations.</p> <p>pNSs are supporting SRCS to reach an estimated 30,000 people. In the immediate response, 23,980 people (15,347 men and 8,633 women) have received food assistance. 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:</p> <ul style="list-style-type: none"> • Distribution of 4,796 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). <p>QRCS aims to continue to support in the sector in the coming months, with second and third phase food distributions in the planning phases.</p> <p>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. The food security and livelihood working group in Gedaref is yet to be active, causing a gap in standardisation and strong understanding of the needs (particularly with reference to the need for supplementary food) and preferred modality (in-kind versus cash). Col-</p>		

laboration with pNSs is ongoing to move towards cash-based modalities.
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: 10,041

Male: 6,426

Female: 3,615

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%	Data not yet available

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	50
# of volunteers actively reporting through CBS (Target needs basis)	-	Data not yet available
# of people reached with BFA (Target needs basis)	-	Data not yet available
# of people reached with PFA (Target needs basis)	-	Data not yet available
# of people reached with RCCE (Target needs basis)	-	Data not yet available

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%	Data not yet available

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	4,403
# of IEHK kits procured and distributed	2	(Pending receipt of international procurement)
# of health clinics supported with equipment and running costs	2	3

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%	Not yet available
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%	Data not yet 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	3
# of people referred for nutrition treatment (Target needs basis)	-	Data not yet available
Outcome 6: The psychosocial impacts of the emergency are lessened		
Indicators	Target	Actual
# of people reached with PFA and PSS services	Needs based	3,437
# of people referred to specialized services	Needs based	
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 limited access to 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. Most 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. 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 are supporting SRCS to reach 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. The</p>		

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: IFRC and Danish RC. The following Health activities continue to be implemented:

- Provision of Primary Health Care services through IFRC support to the existing clinic in Hamdayet.
- Establishment and ongoing operations at a new health unit in Tunaidba camp, supported by IFRC. 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.
- Provision of health services to the host community through a mobile clinic, one day per week, supported by UNDP.
- PSS Orientation session held for 14 Gedaref Branch staff and COR staff, with support by Danish RC.
- In Um Rakuba camp, 15 volunteers trained in basic PFA (8F/7M) - 5 refugees and 10 host community.
- Tunaidba camp 15 volunteers trained (7F/8M), 6 refugees and 9 from host community.
- Provision of PFA and referrals for specialized and basic needs services in both camps, supported by DRC.

SRCS, in collaboration with the health working group, is responding to the recent outbreak of Hepatitis E in both sites and host community activities through increased surveillance, testing and treatment.

QRCS is aiming to support the sector in the coming months, with a particular focus on support to the Tunaidba clinic.

Challenges have included delays in receipt of internationally procured goods, including the inter-agency 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.

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. PMER processes are being strengthened across the three health activities in the field, however currently, several key indicators are lacking consolidated data.



Water, Sanitation, and Hygiene

People Reached: 41,290

Male: 26,426

Female: 14,864

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%	Data not yet available

# of target population that has sufficient safe water	66,000	15,250
# number of volunteers trained in WASH	-	Data not yet available
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	15,250
# of water systems constructed and rehabilitated	-	1
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	36,800
# of latrine cubicle/stances constructed and rehabilitated	-	274
# of hygiene facilities constructed in camps	-	181
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	41,290
# of people reached with dignity kits	-	750
# of households reached with WASH items	-	37,465
# of people reached with hygiene promotion messaging	-	41,290
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. Access to emergency latrines has greatly improved through the efforts of SRCS and other partners, however gaps still remain for example, there is significant open defecation/ soiling of existing latrines. Handwashing stations are often absent posing a great risk of COVID-19 transmission and diarrheal diseases. It must be noted that the time spent by refugees in the transit camps has sometimes been in the order of months, compromising on the refugees' nutritional requirements, shelter and other services such as Health and WASH services.</p> <p>SRCS is providing 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). Hygiene promotion and awareness sessions, as well as hygiene related supplies (hand washing station with water and soap), is being provided.</p> <p>IFRC and pNSs are supporting SRCS to reach an estimated 66,000 people with safe drinking water, hygiene promotion and sanitation assistance. Areas of intervention include the camp settlements</p>		

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 WASH response in Sudan include: SRCS, IFRC, Netherlands RC (NLRC) and German RC (GRC). The following WASH activities were already implemented or are ongoing:

- 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, servicing both the camp and the host community. IFRC supports the transport, installation and running costs of the WTU.
- SRCS constructed emergency communal latrines in Hamdayet and Village 8 in the immediate response to the influx.
- SRCS, in conjunction with GRC and NLRC, conducts health and hygiene promotion activities in all locations.
- SRCS is constructing 110 latrine blocks (with latrines, bathing spaces and handwashing facilities) with support from NLRC.

QRCS is aiming to support the sector in the coming months, with a particular focus on support to sanitation for institutions (schools, clinics and market places) in Tunaidba camp.

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. The operations of the WTU have been extended until November 2021, at the request of the WASH working group, in order to fill the gap until the permanent UNICEF/CARE facility is finalized.

SRCS, in collaboration with the WASH working group, is responding to the recent outbreak of Hepatitis E in both sites and host community activities through increased chlorination of the water, to ensure a high enough residual at the point of use.

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.

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



Protection, Gender and Inclusion

People Reached: 3,437

Male: 2,200

Female: 1,237

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	3,437
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% (60)	108% (65)
# of complaints received through feedback mechanisms	Need based	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	Need based	Pending funding (refer to progress towards outcomes)
Progress towards outcomes		
<p>SRCS is mainstreaming 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 are being 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.</p> <p>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 increasing. The response is enhancing 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. SRCS is working with ICRC in uniting any displaced children as well as set up safe spaces for use by anyone at risk to enhance their safety.</p> <p>IFRC and Danish RC are supporting SRCS in reaching an estimated 40,000 people (including 32,340 men and 33,360 women) with PGI services. Areas of intervention include the camp settlements in Gedaref.</p> <p>Activities undertaken to date by Danish RC include training of 65 SRCS volunteers in both camps on basic PGI and child protection. Danish RC will continue to support the sector in the existing programme and is targeting additional activities in the next phase. The start-up of Danish RC activities was delayed given that the protection intervention is new for the Branch, and there is lack of capacity to support volunteer.</p> <p>IFRC supported PGI activities are yet to commence due to limited resources in the Branch.</p>		

Recruitment of a PGI focal point and start-up training and programming are underway.

MHPSS data was inaccurately reported in this section in the first update.

At the current funding level, there are no activities planned for child friendly spaces.



Migration and Displacement

People Reached: 23,486

Male: 15,032

Female: 8,454

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	-	Pending funding (refer to progress towards outcomes)

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	Pending funding

Output 1.2: Awareness raising and advocacy address xenophobia, discrimination and negative perceptions towards migrants are implemented.

Indicators	Target	Actual
# of advocacy initiatives conducted	-	Pending funding

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	23,486
% of people who have been reunited with their families through RFL services	Needs basis	97.4%

Progress towards outcomes

Although the influx of refugees into Sudan has slowed down in recent months, the risk of further displacement continues to be a reality. New Qemant arrivals from Ahmara region entered Sudan on 27 July. Both caseloads (old Tigray, and new Amhara) refugees in Sudan will continue to need assistance to ensure RFL service coverage.

ICRC has undertaken the following activities for the Tigray refugees: 22,884 positive family contacts; 602 tracing requests have been collected, and eight positively closed; 46 unaccompanied children registered.

ICRC will continue to support SRCS with RFL activities for the Tigray and Amhara refugees in the coming months.

At the current funding level, there are no additional activities planned for migration and development through SRCS and pNSs

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	1

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	Pending funding (refer to progress towards outcomes)

The National Society Transformation Plan implemented is holistic and encompasses several aspects contributing to increased quality, capacity, accountability and integrity of the organization and its services.

IFRC is strengthening the SRCS governance and management, institutional and disaster response capacities through a documented Transformation Roadmap that encompasses:

- Governance and Management Training
- Strengthening the Emergency Operations Centre.
- Strengthening Warehouse Capacity and more prepositioning of Stock
- Strengthening IT systems and PMER Capacity
- Enhancing NS capacity in Logistics and procurement
- Supporting Organizational Capacity Assessment (OCAC)
- Facilitating Branch Organizational Capacity Assessment (BOCA)
- Ensuring Volunteers Safety and Wellbeing

At the current level of funding, there are no PER assessments planned.

STRATEGIC AREAS OF FOCUS

ETHIOPIA



Shelter and Essential Household items

People reached: 26,070

Male:11,992

Female:14,078

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	26,070
# of HH reached with Household Items (target 2100 HH /10.500 people {5,000male 5,500 female})	10,500	26,070
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 FW Emergency Appeal contributed through IFRC and bilateral pNS support to accomplish targets related to shelter and household items.</p> <p>A total of 4,035 IDP families (26,070 people) have been assisted with shelter and household items – this comprises 1,435 families in Gondar and North Wollo zones of Amhara region, who received support from IFRC; and 2,610 families in Afar and Amhara, who received support from the Netherlands Red Cross.</p> <p>No constructed structural shelter support was provided since the IDP families are hosted in public grounds hence support was limited to the provision of emergency shelter materials. ERCS volunteers have been involved in the distribution of emergency shelter items, but there was no immediate need to train them on safe shelter construction.</p> <p>Limited funding coverage on the FW Emergency Appeal has resulted in the prioritization of emergency shelter to meet the immediate needs of the IDP population. This support has therefore been deferred to be done when appropriate.</p>		
Challenges		
Limited funding and the interventions were highly prioritised for providing emergency shelter materials like than constructing physical constructed shelters.		
Lessons Learned		
The conflict escalated in the target areas hence increased displaced displacement more than projected in the plans despite underfunding of the appeal.		



Livelihoods and basic needs

People reached: 24,896 people

Male: 11,452

Female: 13,444

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	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	36,667	9,800

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

# of families reached with LLH recovery support (target 16,000 families – increased under revised PoA for Phase July – December 2021)	16,000	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 20,580 HH / 123,480 people – increased under revised PoA for Phase July – December 2021)	20,580	15,096

Progress towards outcomes

The FW Emergency Appeal contributed through IFRC and bilateral pNS support to accomplish targets related to in-kind food and multipurpose cash assistance. Total of 2,516 IDP families (15,096 people) have been assisted with multipurpose cash assistance – this comprises 1,466 families in Gondar and North Wollo zones of Amhara region, who received support from IFRC; and 1,050 families in SNNPR, who received support from the Swiss Red Cross. In both cases separate zone-specific feasibility and market assessments were completed, and the values of the minimum expenditure baskets differed from 3,000 ETB and 4,000 ETB across the regions, respectively.

CVA assistance is the preferred intervention by IDP population according to assessments. Moreover, the Commercial Bank of Ethiopia which is the service provider has good coverage with almost all Woredas having a branch (80% access). The markets were also identified to be equally functional and accessible to support the needs of the IDP population. Total of 3,160 IDP families (9,800 people) have been assisted with in-kind food support – this comprises 1,160 families in Afar region who received support from Netherlands Red Cross; and 2,000 families in Benishangul Gumuz and Amhara regions who received support from Finnish Red Cross.

Limited funding coverage on the FW Emergency Appeal has thus far meant that activities related

to Cash for Work has not been advanced; and resulted in prioritization of multipurpose cash assistance to meet the immediate needs of the IDP population. This support has therefore been cancelled.

In the revised PoA (Phase July – December 2021) depending on funding received – there will be a scale-up of multipurpose cash assistance and food production capacity support through provision of production assets like seed, fertilizers, and tools. This intended to support farmers to meet their immediate basis needs and facilitate sustainable early recovery. A total of 16,000 families will be targeted (96,000 people) through these interventions; with targets revised accordingly.

Challenges

Security in Amhara region Gondar and North Wollo zones deteriorated. After the government forces withdrew from Tigray the TPLF insurgence went on the offensive with fresh fighting spreading into Amhara and afar regions borders.

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: Needs based)	-	1,631
# of people reached with RCCE	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.	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	100%	0
Health Output 4.1: Acute malnutrition cases are managed in the community, with referral established for severe cases		
Indicators	Target	Actual
% of referrals for malnutrition cases identified by the RCRC teams	100%	0
Screening and referral mechanism is in place	Needs based	0
# of people referred for nutrition treatment	Needs based	0
Health Outcome 5: The psychosocial impacts of the emergency are lessened		
Indicators	Target	Actual
# of people reached with PFA and PSS services	Needs based	7,500
# of people referred to specialized health services	Needs based	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 FW Emergency Appeal contributed through IFRC and bilateral pNS support to accomplish activities related to health support. In Gondar and North Wollo branches in Amhara region, medical evacuation of civilians and casualties. Procurement of First kits and distribution; as well as training of volunteers in integrated First Aid (FA) and PSS were completed to strengthen the capacity of these branches.</p> <p>Total of 500 FA kits were procured, 163 volunteers received training. Trained volunteers proceeded to conduct RCCE, community-based health promotion and provide immediate Psychosocial First Aid (PFA) and Psychosocial support (PSS) to the IDP population and host communities. Total of 30,000 people were reached with RCCE/community-based health promotion. Onward referrals to health facilities were made for 1,631 people experiencing psychosocial trauma. ERCS had already prepositioned ambulances and the FW Emergency Appeal has facilitated the maintenance and running costs as well as their crew to keep them on the road. This has had favourable impact</p>		

on the lifesaving needs of casualties of the fighting in the front line.

Total of 21 ambulances were supported. Limited funding coverage on the FW Emergency Appeal has thus far meant that not all activities have been advanced. To accompany the scale-up of the livelihoods and basic needs assistance under this PoA; priority will be given to training of volunteers on nutrition, nutritional awareness of communities, and establishing referral mechanisms for identified cases of malnutrition among the targeted population (under Health Outcome 3).

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 realised 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.



Water, Sanitation, and Hygiene

People reached: 0 people

Male: 0

Female: 0

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	73,333	Pending funding
# of target population using adequate sanitation	73,333	Pending funding

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	73,333	Pending funding
# of water systems constructed and rehabilitated	TBC	Pending funding

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	73,333	Pending funding
# of latrine cubicle/stances constructed and rehabilitated	TBC	Pending funding
# of hygiene facilities constructed in camps	TBC	Pending funding

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	Pending funding
# of people reached with dignity kits (Target;)	TBC	Pending funding
# of households reached with WASH items	TBC	Pending funding
# of people reached with hygiene promotion messaging	TBC	Pending funding
Progress towards outcomes		
<p>Limited funding coverage on the FW Emergency Appeal has thus far meant that WASH related activities have been advanced.</p> <p>The Netherlands Red Cross have plans to scale up WASH activities in the appeal. IFRC and NLRC have deployed surge delegate to ensure adequate technical capacity in the WASH response</p> <p>To accompany the scale-up of the livelihoods and basic needs assistance under this PoA; priority will be given to advocating for resources to implement complementary WASH interventions and/or to local government as well as other humanitarian organizations to promote an integrated approach to the response.</p>		
Challenges		
Limited funding		
Lessons Learned		
Not lessons learnt		
<div style="display: flex; align-items: center;">  <div> <p>Protection, Gender and Inclusion</p> <p>People reached: 24,270</p> <p>Male:11,164</p> <p>Female:13,106</p> </div> </div>		
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 staff and volunteers trained on minimum protection standards (Target 100%)	100%	163%
# of assessments including PGI with a gender and diversity analysis to inform operational strategy (Target:100%)	100%	0

# of people reached with dignity kits (target; 1,600 people, included for under revised PoA for Phase July – December 2021)	1,600	0
Collection and analysis of sex-age and disability-disaggregated data	TBC	-
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 trained on prevention and response to SGBV (Target:)	100	163
# of community engagements /awareness sessions including SGBV sessions/ messages (target: TBC)	TBC	Pending funding
Identification and sharing of information on safe referral pathways with communities, staff and volunteers in Afar and Amhara (target: needs based)	TBC	Pending funding
Printing and distribution of IEC materials on SGBV to be used in awareness sessions (TBC)	TBC	Pending funding
# of child friendly spaces actively providing services (Target: Needs based)	Needs based	Pending funding
Progress towards outcomes		
<p>Total of 163 volunteers were trained on PGI minimum standards in the Gondar and North Wollo branches in Amhara region. The volunteers were engaged in the response (Secretariat component) in delivering the activities planned including CVA and distribution of shelter and household items. 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.</p> <p>Total of 24,270 people have benefited from PGI services through the FW Emergency Appeal. Limited funding coverage on the FW Emergency Appeal has thus far meant that not all activities have been advanced accompany the scale-up of the livelihoods and basic needs assistance under this PoA; priority will be given to mainstreaming PGI in the activities planned – this will include strengthening the capacity of ERCS through conducting of ToR trainings of staff and volunteers on PGI in NHQ, and Afar and Amhara regional branches, among other interventions.</p> <p>Under the FW Emergency Appeal, the recruitment of an ERCS PGI coordinator has started. This will be a FW resource funded by IFRC and Austrian RC for the 12 months. However there remains a need to secure longer term funding to ensure sustainability of this position in ERCS.</p>		
Challenges		
More staff and volunteers to be trained on OGI and mainstreaming in programs		
Lessons Learnt		
The National Society needs to train TOT for continued and increased capacity development for volunteers in PGI. This Appeal is as areas focus strengthening PGI programming.		



Disaster Risk Reduction

People reached: 0

Male: 0

Female: 0

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	5branches,10 communities	Pending funding

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	1	Pending funding

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	-	Pending funding

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

Indicator s	Target	Actual
# of climate related actions tested and rolled out	1	Pending funding
# of volunteers trained in VCA, and CCA (Target: 82)	82	Pending funding

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	1	Pending funding
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Progress towards Achievements

Limited funding coverage on the FW Emergency Appeal has thus far meant that DRR related activities have been advanced. To accompany the scale-up of the livelihoods and basic needs assistance under this PoA; priority will be given to increasing support for branch development activity – including a package of preparedness actions to ensure they are able to sustain service delivery and respond to emerging crises, priorities and needs.

Challenges

Due to minimal funding the operation could not implement DRR activities

Lessons Learnt

Funding is limited for planned activities

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	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	100	125
# of RCRC volunteers receiving relevant trainings and ToTs to support scale up/implementation of activities (included under revised PoA for Phase July – December 2021)	100	Pending funding
Output S1.1.6: National Societies have the necessary corporate infrastructure and systems in place		
Indicators	Target	Actual
# of National societies that have appropriate NSD plans (Target:1)	1	1
# branches to receive installation of membership and volunteer digital management infrastructure (target: 3, included for under revised PoA for Phase July – December 2021)	3	0
# of staff trained in software user package (target: 10, included for under revised PoA for Phase July – December 2021)	10	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%	TBC
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	Pending funding
# of branches networked with EOC (target: 4, included for under revised PoA for Phase July – December 2021)	4	Pending funding
# of branches with established EOC standard operating procedures (target: 4, included for under revised PoA for Phase July – December 2021)	4	Pending funding
Output S2.1.1: Effective and respected surge capacity mechanism is maintained.		
Indicators	Target	Actual
# of surge deployed (Target:6)	6	6
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
Progress towards outcomes		
<p>The ERCS branches were strategic for the response they share borders with Tigray and was the route which where the fighting started as well as the reception for casualties and IDPs. The two branches of Gondar and North Wollo in Amhara region mobilized volunteers; and the FW Emergency Appeal has supported their engagement (allowances) and FA and PSS training of the volunteers. The FW Emergency Appeal also allocated resources for any injury or effect of the fighting on volunteers. Thankfully no ERCS volunteer casualty was reported. No satisfaction survey was conducted.</p> <p>To ensure delivery of humanitarian services can be sustained; priority will be given to increasing support for NSD in emergencies – namely training and ToTs for staff and volunteers, EOC networking in targeted branches, and digital transformation of improved member/volunteer management ding a package of preparedness actions to ensure they are able to sustain service delivery and respond to emerging crises, priorities and needs.</p> <p>Under the FW Emergency Appeal, the recruitment of a IM / PMER officer has started. This position will be embedded in the IFRC Operations Office to support the coordination of FW monitoring, data collection and reporting</p>		
Challenges		
The volunteers are at risk while responding to combat situations. However, they are insured, and the management undertakes due diligence before engagement		
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: 6,495 Male: 2,988 people Female: 3,507 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	5,000	6,495
Output 1.2: Adequate sanitation which meets Sphere standards in terms of quantity and quality is provided to target population		
# of people reached with sanitation services	5,000	6,495
# of latrine cubicle/stances constructed and rehabilitated	-	0

Output 1.3: NS promote behavioural change in personal and community hygiene (including MHM) among targeted communities		
# of people who receive support to maintain good hygiene	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	5,000	6,495
Output 1.2: Adequate sanitation which meets Sphere standards in terms of quantity and quality is provided to displaced population		
Indicators	Target	Actual
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	12	12
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	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	100%	0
Output S2.1.1: Effective and respected surge capacity mechanism is maintained.		
Indicators	Target	Actual
# of surge deployed	-	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	1	0
Progress towards outcomes		
Due to funding levels, there was limited activities. Activities will be reported in the next update.		

Challenges
Lack of funding.
Lessons Learned
No lessons learnt

D. Financial Report

The interim financial report has been annexed.

Contact information

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

In the Ethiopian Red Cross (ERCS)

- **Secretary General** Getachew Ta'a, Email: ercs.sg@redcrosseth.org,
- **Deputy Secretary General**, Disaster Risk Management: Engida Manfredo, Email: engida.mandefro@redcrosseth.org

In the Djibouti Red Crescent

- **Ag. Secretary General**; Amina Houssein Email: aminacrd@hotmail.fr

In the Sudanese Red Crescent (SRCS)

- **Secretary General** Dr Afaf Yahya, Email: afaf.yahya@srcs.sd,
- **Director of Disaster Management and Emergency Response** Hamid Gour, Email: hamid.gour@srcs.sd

In the IFRC

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For IFRC Resource Mobilization and Pledges support:

- **IFRC Regional Office for Africa** 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:

- **Logistics Coordinator** 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)

- **IFRC Regional Office for Africa** Philip Kahuho, PMER Manager, Philip.khuho@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.

¹ [Ethiopia: IPC Acute Food Insecurity Projection July – September 2021](#)

Emergency Appeal

INTERIM FINANCIAL REPORT

Selected Parameters			
Reporting Timeframe	2020/11-2021/7	Operation	MDRTIGRAY
Budget Timeframe	2020/11-2022/7	Budget	APPROVED

Prepared on 01 Sep 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 01 Sep 2021	802,112
Appeal Coverage	8.54%

II. IFRC Operating Budget Implementation

Thematic Area Code	Budget	Expenditure	Variance
AOF1 - Disaster risk reduction	769,994	473,715	296,280
AOF2 - Shelter	533,326	375,874	157,452
AOF3 - Livelihoods and basic needs	7,089	54,451	-47,362
AOF4 - Health	25,665	110,574	-84,908
AOF5 - Water, sanitation and hygiene	100,805	66,451	34,354
AOF6 - Protection, Gender & Inclusion	5,751	0	5,751
AOF7 - Migration	0	0	0
SFI1 - Strengthen National Societies	13,118	45,433	-32,315
SFI2 - Effective international disaster management	66,414	18,232	48,182
SFI3 - Influence others as leading strategic partners	149,941	332	149,609
SFI4 - Ensure a strong IFRC	12,798	16,697	-3,899
Grand Total	1,684,903	1,161,759	523,143

III. Operating Movement & Closing Balance per 2021/07

Opening Balance	0
Income (includes outstanding DREF Loan per IV.)	1,689,891
Expenditure	-1,161,759
Closing Balance	528,132
Deferred Income	0
Funds Available	528,132

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	2020/11-2021/7	Operation	MDRTIGRAY
Budget Timeframe	2020/11-2022/7	Budget	APPROVED

Prepared on 01 Sep 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		
On Line donations	3,019				3,019		
Red Cross of Monaco	43,871				43,871		
Swedish Red Cross	108,323				108,323		
The Canadian Red Cross Society	97,481				97,481		
The Netherlands Red Cross (from Netherlands Govern	275,671				275,671		
Turkish Red Crescent Society	20,000				20,000		
Total Contributions and Other Income	783,737	0	0	906,154	1,689,891	0	
Total Income and Deferred Income					1,689,891	0	