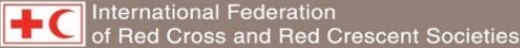


Emergency Plan of Action (EPOA)

Egypt: Aswan Floods



DREF Operation n°	MDREG019	Glide n°:	FL-2021-000190-EGY
Date of issue:	01 December 2021	Expected timeframe:	4 months
		Expected end date:	30 April 2022
Category allocated to the of the disaster or crisis: Yellow			
DREF budget allocated: CHF 373,314			
Total number of people affected:	5,935 people (1,157 families)	Number of people to be assisted:	4,685 people (937 families) in 11 villages
Provinces affected:	Aswan	Provinces/Regions targeted:	Aswan
Operating National Society: Egyptian Red Crescent Headquarter - 27 branches in 27 Governorates and more than 30,000 volunteers nationwide			
Red Cross Red Crescent Movement partners actively involved in the operation: International Federation of Red Cross and Red Crescent Societies (IFRC)			
Other partner organizations actively involved in the operation: Egyptian local authorities and local non-governmental organizations (NGOs)			

A. Situation analysis

Description of the disaster

The Aswan Governorate of Egypt faced heavy rains that led to floods in 11 areas between 12 and 14 November 2021. According to the [Ministry of Health announcement](#), the continuous severe weather, including heavy rain, strong winds, and thunderstorms, caused widespread flooding across the southeast part of Egypt, driving scorpions out of the ground, resulting in the death of three people and the injury of 450 others due to scorpion stings.

Several highways and some public infrastructure, houses, lands, and cemeteries have either completely or partially collapsed. Due to the blockage of main roads, some locations/ villages were isolated. A total of 1,100 people (220 families) who lost their houses due to total damage are hosted in 220 temporary houses run by the local authority of Aswan Governorate, while 4,685 people (937 families) are still living in their houses that have been partially damaged and refused to leave.

Because the losses were concentrated in the city's center, buildings in this region were exposed to the majority of rainwater and were severely damaged due to their mud-brick construction and palm-leaf roofing. Maintenance crews deployed to the streets to clear the puddles and restore power networks and connections in the affected districts, among other repairs. In response to the affected people, the Governor of Aswan stated that the distribution of relief will be the responsibility of non-governmental organizations (NGOs), in collaboration with local authorities.

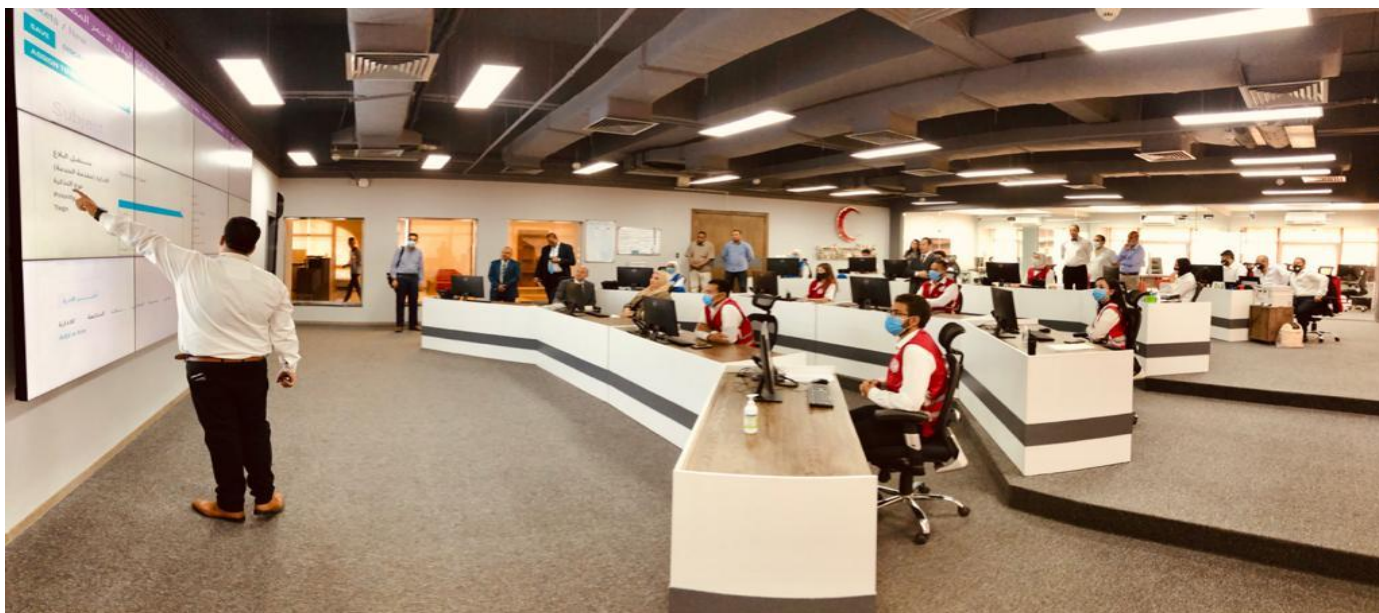


Figure 1: ERC volunteers at the Central Emergency Operation Center are closely monitoring the situation in the affected locations, **Source: ERC, 13 November 2021**

The Egyptian Ministry of Social Solidarity and the Egyptian Red Crescent are leading the detailed assessment in 14 villages in Aswan. According to preliminary data, floods had so far affected 5,935 people (1,157 families).



Figure 2: Areas affected by flash floods. ERC volunteers on the affected areas are conducting the rapid detailed assessment, **Source: ERC, 14 and 15 November 2021**

Summary of the current response

Overview of Operating National Society

The Egyptian Red Crescent (ERC) has headquarters and 27 Branches and more than 30,000 volunteers nationwide. The ERC has volunteer Emergency Response Teams (ERT) who are trained on First Aid, Disaster Management, Psychological First Aid (PFA), logistics, water and sanitation, and needs assessments.

After the government declared the emergency alert, the ERC activated its Emergency Operations Center (EOC). Additionally, 20 ERTs (Emergency Response Teams) in 3 branches were activated with an average of 100 volunteers mobilized following the announcement.

Since the first day of response, ERC had assisted 1,000 people (200 families) with First Aid services, blankets, mattresses, and hot meals.

Item	Families Assisted
First Aid	720 people
Blankets	200 families
Mattresses	200 families
Hot meals	200 families



Figure 3: ERC volunteers conducting the rapid detailed assessment and providing first aid, blankets and relief items to the people affected by flash floods. **Source: ERC, 14, 15 and 16 November 2021**

A total of 20 ERC senior staff at the headquarters and branch levels are overseeing the overall operation at the Emergency Operations Center, while 150 volunteers have been deployed to provide the following services: First Aid for injured, Psychological First Aid, transportation of the affected to designated assembly points, and distribution of food and essential household items. A total of 20 ERC senior staff at the headquarters and branch levels are overseeing the overall operation at the Emergency Operations Center, while 150 volunteers have been deployed to provide the following services: First Aid for injured, Psychological First Aid, transportation of the

affected to designated assembly points, and distribution of food and essential household items. In addition, a plan has been agreed upon with the Aswan local authority to provide mobile health services for one week in the four most affected areas where they do not have access to nearby Primary Health Centres (PHC).

The ERC has solid experience in responding to similar emergencies such as the 2020 Cairo flash floods, the 2018 Alexandria floods, and the 2016 Red Sea floods.

Overview of Red Cross Red Crescent Movement Action in-country

The first report of the situation was issued and posted on the [IFRC GO platform](#). Progress reports will be shared with the IFRC - MENA Regional Delegation throughout this DREF operation. Communication channels and coordination mechanisms on operational implementation will be maintained through the Program Manager that will be supporting in-country.

Overview of other actor's action in-country

The ERC, in its auxiliary role to the public authorities, has collaborated with the civil society, ambulance authority, and Ministry of Social Solidarity (MoSS) in response to the event.

A coordination meeting was held on 16 November 2021, between the ERC and the directorate of the health and social solidarity local authority in Aswan to look into the local authority's response plan, that prioritized the role of the ERC shaping its intervention and coordination role with local NGOs for the next phase. This meeting helped ERC in designing the EPoA for the affected areas. The ERC will take care of some aspects in the thematic areas of shelter, livelihood, health, and WASH, while other organizations provide support in rebuilding houses, major and minor house maintenance, and furniture based on the needs that vary from one location to another.

Needs analysis, targeting, scenario planning, and risk assessment

Needs analysis

From the start of the operation, ERC assessment teams composed of 15 teams (75 volunteers) were mobilized to the affected areas to conduct rapid assessments. Initial results show that there are approximately 5,935 people (1,157 families) affected, of which 220 families have been evacuated to safety houses provided by local authorities, while others remain at risk with imminent needs as listed below.

Shelter: Houses of 937 families in Aswan have been declared by the Civil Protection as partially to completely damaged. Currently, these families are being hosted by their neighbours and relatives, and some are still residing in their affected houses as they refused to evacuate to new temporary houses. These families are waiting for their homes to be rehabilitated, which are at risk of collapsing by potential floods as they are located in flood streams. In addition to the infrastructure damage, the muddy floods water has damaged most household items and electric appliances.

Livelihoods and Basic Needs: Because of the damage the floods have caused to their stocks, affected people are struggling to obtain food and other basic needs. Additionally, the floods have killed a significant number of livestock across flooded areas, while the number of floods-affected owners is still unknown. Hot meals were distributed at the beginning of the disaster, yet these people will require financial support to cover food and other imminent needs.

Health: According to the assessment findings, there is a high demand for basic health care to respond to diseases identified and exacerbated by the floods, such as those associated with respiratory diseases. Vectors have proliferated due to the accumulation of water and animal carcasses. Additional risks include the continuous risk of the COVID-19 pandemic in the country, and the health concerns related to its spread among the people, as the floods could precipitate the spread of the disease. In addition, there is demand for Mental Health and Psychosocial Support (MHPSS) for children and adults, especially for families who are unable to return to their homes because they have been declared uninhabitable.

Water and Sanitation: There is a need to provide quality of safe drinking water and to launch preventive health actions for the populations upon their return to their homes, to avoid outbreaks caused by the floods. It is essential to improve hygiene conditions. There is a need to provide hygiene supplies to families who do not have access to funds.

Targeting: This DREF operation will target 4,685 people (937 families) in 11 villages¹ in Aswan based on the findings of the coordination meeting with the MoSS and Local NGOs. Information on the number of people to be reached per sector is provided below, considering that not all families will receive the same level of support from Shelter, Livelihoods, and Basic Needs.

- **Shelter:** 937 families are targeted. These families are living with their neighbours/relatives or in their damaged houses. These families need household items such as blankets and mattresses, in addition to the replenishment of relief items distributed to 900 people (171 families) during the early response.
- **Livelihoods and Basic Needs:** from 1057, 888 families who lost their food stocks, crops, and livestock in the affected areas in 4 locations in Aswan will be targeted with livelihood and basic assistance in the absence of existing coping mechanisms. These families are selected based on coordinated assessments based on set criteria including the scale of damage, economic status, and livelihood. Those people will receive a one-time payment with a multipurpose cash grant of 122 USD through Financial Service Provider (FSP).
- **Health:** 937 families need essential health care services such as raising health awareness through outreach activities in the 11 locations, medical consultation services in 4 locations, COVID-19 prevention measures, and mental health and psychosocial support for 3 months.
- **Water and Sanitation:** 937 families will be targeted by hygiene promotion activities which include the distribution of family hygiene kits.

Scenario planning

The most recent weather forecast indicates that there will be a gradual decrease in the amount of rain.

Scenario	Humanitarian consequence	Potential Response
The rains stop and the water level drops.	The affected communities receive immediate assistance, reducing health risks and restoring facility operations.	Movement partners mobilize resources to provide immediate assistance to affected communities.
The rains continue to fall, and water levels in affected areas rise.	<ul style="list-style-type: none"> - Continued flooding resulting in a moderate increase in internal displacement among affected communities. - Continued destruction of properties and livelihoods and increased food insecurity at the household level - Potential outbreaks of water-borne diseases such as cholera and malaria. - WASH situation worsens. 	ERC mobilizes nearby branches and deploys teams and resources from the headquarters to provide the required support to the affected communities.

¹ Al Shallal, Koubanya, Bomban, West of Aswan, North and South Abo Reish, High dam, Elsail, Khour Awada, Mansourya and Al Akaab

Operation Risk Assessment

Landslides and slopes collapse, as well as road blockage, are among the risks identified in the operation. Another risk factor to consider is COVID-19. According to the Egyptian Ministry of Health², 352,123 people have been affected by COVID-19, with 20,052 deaths. In addition, approximately 15% of the Egyptian population has been immunized, with the goal of reaching 40% nationwide coverage by the end of December 2021.

In response to the crisis in the shadow of COVID-19, the ERC will continue to apply operational safety and security measures throughout the operation to ensure maintaining access to the affected population, while ensuring the safety of its staff and volunteers.

The ERC ERT constantly monitors the situation and maintains communication with the local authorities and government agencies to assess the context and the situation of the affected population.

B. Operational strategy

Overall Operational objective:

The objective of this operation is to provide basic emergency shelter assistance, livelihoods support, primary healthcare services, psychosocial support, hygiene promotion, and COVID-19 prevention measures to 4,685 people (937 families) in 11 villages affected by the heavy rains.

The below table shows the content of shelter items:

Item	No of people	Notes
Blankets	4,685 people (937 families)	(900) For replenishment and (3,785) for distribution
Mattresses		

The below table shows the content of the hygiene kits:

Item	Quantity
Sterile wipes 20 tissues	4,685
Tissue	4,685
Toothbrush medium size	4,685
Toothpaste 50ml	4,685
Alcohol 70% 150ml	4,685
Towel medium size	4,685
Female pads	4,685
Soap 90	4,685

The below table shows the contents of the medical items:

Item	Quantity	Notes
First Aid Set each set for 20 people	100	For replenishment

² [Egyptian ministry of Health](#)

PPE	500	Volunteers who will respond during the DREF period of operation
Medical consultation		ERC will provide the medication through ERC Mobile Medical Units (MMU)

Human Resources: The ERC will mobilize 500 volunteers to the targeted areas. Health volunteers (doctors, nurses, and paramedics) are part of the ERC volunteer network, which is comprised of ERT volunteers, MHPSS volunteers, and Health Promotion volunteers. An Operations Coordinator will be hired for a period of 4 months to manage the DREF operation along with a procurement officer to meet the operational requirements for timely implementation.

Communication and Visibility: ERC provided its volunteers with protection and visibility to assist them in their mission and to increase the visibility of RCRC actions on the ground. During the operation, ERC will use its megaphones to organize the work in the communities. Some IEC (Information, Education, and Communication) materials are on hand to promote hygiene and health awareness.

Planning, monitoring, evaluation, & reporting (PMER): ERC will oversee all operational, implementation, monitoring and evaluation, and reporting aspects of the present operation in the affected areas through its country-wide network of branches and volunteers along with HQ (Head Quarter) PMER unit. IFRC, through its regional delegation, will provide technical support in programme management to ensure the operational objectives are met. Reporting on the operation will be carried out in accordance with the IFRC DREF minimum reporting standards. Regular updates will be issued during the operation's reporting timeframe and a final report will be issued within three months from the end of the operation. A lessons learned workshop will be organized at the end of the operation and a report will be subsequently published.

Community Engagement and Accountability (CEA): CEA is initially addressed through the rapid needs assessment where community priorities and preferences contributed to guide the intervention design. Beyond the design phase, CEA will be also mainstreamed throughout the rest of intervention phases to guarantee maximum and meaningful participation of the affected communities. A feedback and complaint desk will be installed in ERC centres so that recipients of various ERC services can provide direct feedback. Satisfaction surveys (conducted separately or as part of the PDMs) will be also used as a solicited approach to capture community feedback. All feedback will be handled appropriately and responded to within a reasonable timeframe, provided they fall within the scope of ERC work. The results of the analysis of community feedback will be reported to ERC decision makers and used to inform adaptive management. To ensure clarity and a smooth flow of information, clear roles and responsibilities will be agreed with representatives, community leaders and committees and information will be shared widely about selection criteria, distribution processes and response activities with the whole community. The selection process of people to be reached will be clearly communicated to all affected population through preferred and trusted communication channels.

Protection, Gender, and Inclusion (PGI): Acknowledging that women, girls, men and boys with diverse ages, disabilities and backgrounds have very different needs, risk and coping strategies, the operation will pay particular attention to protection and inclusion of vulnerable groups.

C. Detailed Operational Plan



Shelter

People targeted: 4,685 people (937 families)

Requirements (CHF): 134,717

Needs analysis: People in the affected areas were forced to leave their homes due to partial or complete damage, with some having their roofs or structures collapsed because of the floods. There is a clear need to ensure that all the evacuees have a bare minimum of basic supplies/items to cover their needs. Most of those families have sought refuge with neighbours and closed relatives. A total of around 937 families have been evacuated to safety. As soon as water level recedes, displaced families will return to their homes to repair them, yet they will need basic household items.

Population to be assisted: 937 HHs will be targeted through this DREF to receive emergency shelter items including blankets and mattresses. ERC has already reached 900 people (171 HHs) during their response and will provide assistance to an additional 766 families.

Programme standards/benchmarks: the blankets and mattress will follow the same quality of ERC standards.

P&B Output Code	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	% of people satisfied with the shelter assistance provided (Target: 90)			
	Shelter Output 1.1: Shelter and settlements and basic household items assistance is provided to the affected families.	# of people provided with blankets and mattresses. (Target: 4,685)			
	Activities planned Month	1	2	3	4
AP005	Coordination with other relevant sectors for integrated programming				
AP005	Coordination with government and other stakeholders				
AP005	Distribution of the household items to the affected population (blankets and mattresses)				
AP005	Monitoring of the use of distributed household items				



Livelihoods and basic needs

People targeted: 4,440 people (888 families)

Requirements (CHF): 107,459

Needs analysis: Food and coverage of short-term needs are the priority for the affected people. ERC had distributed hot meals to the families and as well some of the support from other humanitarian organizations during the first days of the response. The affected families will be selected based on the multi-sectoral assessment. These families who lost their belongings/livestock due to the floods, require cash to obtain supplies for their basic needs. The needs assessments indicate that the affected population consulted needs food, clothes, and medication.

Population to be assisted: 888 families will be targeted from the 937 HHs in 4 targeted locations, to receive multipurpose cash disbursement worth value 122 USD for one month through a contracted FSP. The calculation of 122 USD per month is based on the minimum expenditure basket³ developed considering the most immediate needs of the affected population. The cash will be distributed for one time based on the following selection criteria:

- Families directly affected by the flooding.
- Families whose livelihoods have been affected.
- Economic status of the household.
- Families identified by the sectoral assessment.

ERC had more than 6 years' experience in assisting the most vulnerable people (Palestinian) with Cash assistance that was in coordination with ICRC (International Committee of the Red Cross) and German Red Cross, Cairo Flash Floods 2020, Sohag and Qaliobya train crash in March and April 2021.

Programme standards/benchmarks: ERC will ensure alignment with local authority data base; SPHERE standards and the sustainable livelihoods framework will be considered for the provision of assistance.

P&B Output Code	Livelihoods and basic needs Outcome 1: Communities, especially in disaster and crisis affected areas, restore, and strengthen their livelihoods			% of people satisfied with the cash assistance provided. (Target: 100)	
	Livelihoods and basic needs Output 1.5: Households are provided with unconditional/multipurpose cash grants to address their basic needs			# households supported with vouchers / cash assistance. (Target: 888)	
	Activities planned Month	1	2	3	4
AP081	Unconditional/multipurpose cash distributions				

³ The minimum expenditure basket for a family of five members contains food expenditure of 90 USD, transport 20 USD and contingency fund 12 USD

AP008	Feasibility analysis including market and FSPs (Financial Service Provider) assessments for cash and voucher assistance (CVA)				
AP008	Procurement of financial services for cash disbursement				
AP008	Beneficiary selection and registration				
AP008	Post-distribution monitoring including and satisfaction survey				



Health

People targeted: 4,685 people (937 families)

Requirements (CHF): 33,228

Needs analysis: The floods have affected the community's infrastructure and caused the loss of household goods and assets. Skin diseases, diarrhoea and respiratory illnesses have all been reported. The operation will provide healthcare sessions and health promotion activities to address flood-related health concerns and prevent post-emergency diseases, while applying COVID-19 preventive measures. Anxiety and depression are common among the affected population, particularly those who have lost assets and resources. Given the lack of Primary Health Centres (PHCs) in the affected area, ERC held a coordination meeting with the Health directorate of the Aswan local authority and agreed to provide medical screening, examination, and medication for Non-communicable diseases before referral.

Population to be assisted: This operation will prioritize assistance to 4,685 people by providing primary health care services through the specialities of internal medicine, paediatrician, dermatology, ophthalmology, and gynaecologist for all who have acute symptoms. Furthermore, ERC will monitor the case load during the first two weeks of deployment. ERC will continue to provide PHC for three months, especially that the affected areas are deprived of medical health services (PHC) and the nearby Health unit requires more than 30 minutes driving, with distances ranging between 25 and 40 kilometres from the affected location. In addition, ERC will ensure that the referral system to the hospital is activated for cases that require more care.

ERC will also take the preventive measures of COVID-19 during the implementation of the health activities such as medical examination, raising awareness and Child Friendly spaces. ERC is monitoring the current situation in Egypt with local authorities on COVID-19 new detected cases, particularly in the affected area, and this has prompted ERC to consider implementing COVID-19 related-activities in coordination with the Ministry of Health.

Programme standards/benchmarks: The activities will meet the Egyptian Ministry of Health, Sphere and WHO (World Health Organization) standards.

P&B Output Code	Health Outcome 1: The immediate risks to the health of affected populations are reduced	# of people reached with medical services. (Target: 4,685)			
	Health Output 1.1: The health situation and immediate risks are assessed using agreed guidelines	# of people reached with medical care screening to reduce relevant health risks. (Target: 4,685)			
	Activities planned Month	1	2	3	4
AP022	Provision of health-care services to three communities (medical health screening and examination)				
AP022	Mobilization of ERC health volunteers				
P&B Output Code	Health Outcome 2: The immediate risks to the health of the affected populations are reduced through improved access to medical treatment	# of people reached through first aid and pre-hospital care. (Target: 238)			
	Health Output 2.1: Improved access to health care and emergency health care for the targeted population and communities.	# of FA (First Aid) kits replenished. (Target:100)			
	Activities planned Month	1	2	3	4
AP022	Replenishment of First Aid kits				
AP022	Training and recruitment of medical and non-medical staff				
AP022	Provision of Personal Protective Equipment to ERT volunteers				
P&B Output Code	Health Outcome 4: Transmission of diseases of epidemic potential is reduced	# of people reached through RCCE activities (Target: 4,685)			
	Health Output 4.1: Community-based disease control and health promotion is provided to the target population	# of RCCE activities conducted to promote community-based disease control (Target: TBD)			
	Activities planned Month	1	2	3	4
AP021	Identification and activation of CBHFA volunteers for integration into emergency response				
AP084	Performance of RCCE activities to promote community-based disease control and health promotion				
P&B Output Code	Health Output 4.6: Improved knowledge about public health issues among.	# of people reached with IEC messages posted and materials distributed. (Target:4,685)			
	Activities planned Month	1	2	3	4

AP021	Development and implementation of health and hygiene promotion campaigns on prevention and control of common communicable diseases such as COVID-19, Malaria, Acute Watery Diarrhoea, Bloody Diarrhoeas, Dermatitis, and other outbreaks likely to occur during emergency situations				
AP021	Reproduction and distribution of IEC materials on community-based disease prevention, epidemic preparedness, and health promotion, complemented by the use of social media and youth as agents of behavioural change (YABC).				
P&B Output Code	Health Outcome 6: The psychosocial impacts of the emergency are lessened		# of people provided with psychosocial support services. (Target: 4,685)		
	Health Output 6.1: Psychosocial support provided to the target population as well as to RCRC volunteers and staff		# of psychosocial support (PSS) sessions conducted. (Target: TBD)		
	Activities planned Month	1	2	3	4
AP023	Identification of and training for volunteers in psychosocial support				
AP023	Assessment of PSS (psychosocial support) needs and resources available in the community				
AP023	Provision of PSS (psychosocial support) to people affected				
AP023	Provision of PSS to staff and volunteers				



Water, sanitation, and hygiene

People targeted: 4,685 people (937 families)

Requirements (CHF): 35,688

Needs analysis: Affected families have identified a clean source of water, but they require safe water storage to maintain basic hygiene supplies to ensure their well-being and to avoid the increase of potential diseases associated with a lack of proper hygiene conditions. Because the affected people live in crowded houses

with relatives or neighbours, they consume more water than the basic capacity of a typical house. ERC will include female pads in the family hygiene kit as part of its commitment to female dignity and menstrual hygiene.

Population to be assisted: 937 families have not received hygiene supplies and have no means of storing safe water. ERC through its WASH (Water Sanitation and Hygiene) unit and volunteers will oversee the implementation.

Programme standards/benchmarks: Sphere standards and IFRC standard family hygiene kits.

P&B Output Code	WASH Outcome1: Immediate reduction in risk of waterborne and water related diseases in targeted communities	<i>% of target population that has access to sufficient safe water. (Target:100)</i>			
	WASH Output 1.1: Continuous assessment of water, sanitation, and hygiene situation is carried out in targeted communities	<i># of site and community assessments carried out. (Target: TBD) # of HHs assessment conducted. (Target: TBD)</i>			
	Activities planned Month	1	2	3	4
AP026	Performance of initial assessment of the water, sanitation, and hygiene situation in targeted communities				
AP026	Continuous monitoring of the water, sanitation, and hygiene situation in targeted communities				
AP026	Coordination with other WASH actors on target group needs and appropriate response				
P&B Output Code	WASH Output 1.2: Daily access to safe water which meets Sphere and WHO standards in terms of quantity and quality is provided to target population	<i># of people provided with safe water (according to WHO standards) in the affected area (Target: 4,685)</i>			
	Activities planned Month	1	2	3	4
AP026	Monitoring the usage of water through household surveys and household water quality tests.				
AP026	Training the population of targeted communities on safe water storage				
AP026	Monitoring the storage of water through household surveys and household water quality tests.				
P&B Output	WASH Outcome 2: Sustainable reduction in risk of waterborne and water related diseases in targeted communities in the recovery phase	<i># of people reached by hygiene promotion activities. (Target: 4,685) # of people provided with hygiene kits. (Target: 4,685) % of beneficiaries satisfied with the services provided (Target: 100)</i>			

Code	WASH Output 2.4: Hygiene promotion activities are provided to the entire affected population.	# of hygiene promotion sessions conducted (Target: 937) # of hygiene kits distributed (Target: 937)			
		Activities planned Month	1	2	3
AP030	Performance of baseline survey to define hygiene issues and assess capacity to address the problem				
AP030	Selection of target groups, key messages, and methods of communicating with beneficiaries (mass media and interpersonal communication).				
AP030	Design and production of IEC materials				
AP030	Post-distribution monitoring for the distributed items and content				
AP030	Distribution during hygiene promotion activities the needed hygiene items				

Strategies for Implementation

Requirements (CHF): 62,223

P&B Output Code	S1.1: National Society capacity building and organizational development objectives are facilitated to ensure that National Societies have the necessary legal, ethical, and financial foundations, systems, and structures, competences, and capacities to plan and perform	# of volunteers involved in the operation and actively participating in the activities. (Target: 500)			
		Activities planned Month	1	2	3
	Output S1.1.4: National Societies have effective and motivated volunteers who are protected				
AP040	Insurance coverage for volunteers is provided				
AP040	Provision of complete briefings on volunteers' roles and the risks they face, their rights and responsibilities				
AP040	Assurance of volunteers' safety and wellbeing				
AP040	Provision of proper trainings to volunteers				
AP040	Recruitment of a DREF coordinator				

AP040	Assurance of volunteers' engagement in decision-making processes of respective projects they implement				
AP040	Provision of personal protection equipment and visibility to volunteers				
P&B Output Code	Outcome S2.1: Effective and coordinated international disaster response is ensured	<i>Effective and coordinated international disaster response ensured. (Target: Yes)</i>			
	Output S2.1.1: Effective and respected surge capacity mechanism is maintained.	# of monitoring visit. (Target:1)			
	Activities planned Month	1	2	3	4
AP046	Performance of IFRC monitoring visits				
P&B Output Code	Outcome S3.1: The IFRC secretariat, together with National Societies uses their unique position to influence decisions at local, national, and international levels that affect the most vulnerable.	<i>IFRC and NS are visible, trusted, and effective advocates on humanitarian issues. (Target: Yes)</i>			
	Output S3.1.2: IFRC produces high-quality research and evaluation that informs advocacy, resource mobilization and programming.	# of Lessons Learned Workshop. (Target: 1) # of M&E plan produced. (Target: 1)			
	Activities planned Month	1	2	3	4
AP055	Development of an M&E plan				
AP055	End-of-Operation Lessons Learned Workshop				

Funding Requirements

International Federation of Red Cross and Red Crescent Societies

all amounts in
Swiss Francs
(CHF)

DREF OPERATION

MDREG019 Egypt Aswan Floods

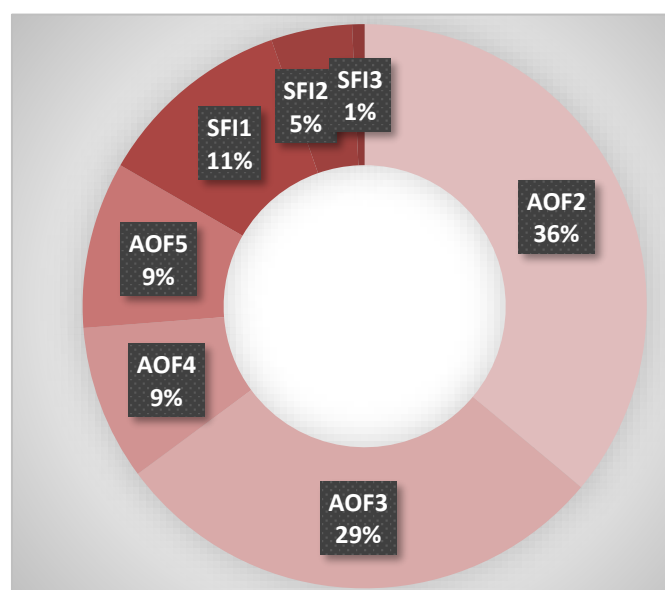
11/21/2021

Budget by Resource

Budget Group	Budget
Shelter - Relief	126,495
Water, Sanitation & Hygiene	33,510
Medical & First Aid	20,700
Cash Disbursement	100,900
Relief items, Construction, Supplies	281,605
Transport & Vehicles Costs	9,000
Logistics, Transport & Storage	9,000
National Staff	4,800
Volunteers	40,125
Personnel	44,925
Workshops & Training	12,500
Workshops & Training	12,500
Travel	2,500
General Expenditure	2,500
DIRECT COSTS	350,530
INDIRECT COSTS	22,784
TOTAL BUDGET	373,314

Budget by Area of Intervention

AOF1	Disaster Risk Reduction	
AOF2	Shelter	134,717
AOF3	Livelihoods and Basic Needs	107,459
AOF4	Health	33,228
AOF5	Water, Sanitation and Hygiene	35,688
AOF6	Protection, Gender and Inclusion	
AOF7	Migration	
SF11	Strengthen National Societies	42,201
SF12	Effective International Disaster	
SF12	Management	17,360
SF13	Influence others as leading strategic	
SF13	partners	2,663
SF14	Ensure a strong IFRC	
TOTAL		373,314



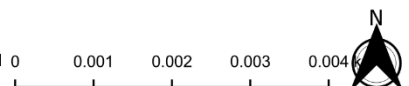


24 November 2021
FL-2021-000910-EGY
FL-2021-000910-EGY

Egypt : Aswan Floods Disaster Relief Emergency Funds



The maps used do not imply the expression of any opinion on the part of the International Federation of Red Cross and Red Crescent Societies or National Societies concerning the legal status of a territory or of its authorities.



Reference documents



Click here for:

- Previous Appeals and updates
- Emergency Plan of Action (EPoA)

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

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In the IFRC

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For In-Kind donations and Mobilization table support:

- Goran Boljanovic; Regional Head of Supply Chain- MENA; phone: +961 5 428 505; email: goran.boljanovic@ifrc.org

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

- **IFRC MENA Regional Delegation:** Nadine Haddad, Regional PMER Manager; phone: +961 71 802 775; email: nadine.haddad@ifrc.org

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.