A. SITUATION ANALYSIS

Description of the disaster
On Friday 26 March 2021, two trains had collided in the Tahta township in Sohag governorate, killing at least 20 people and injuring more than 185. Two passenger cars flipped on their side from the force of the collision, the latest in a series of deadly accidents along Egypt’s troubled rail system, plagued by poor maintenance and management.

The Surveillance Cameras from the scene in the southern province of Sohag, 270 miles south of Cairo, taken shortly after the collision showed derailed cars turned into twisted piles of metal, with some passengers trapped inside. Bystanders carried bodies and laid them out on the ground near the site. Seventy-two ambulances from MoH and ERC were sent to the scene reinforced by medical teams in the Tahta district of the Upper Egypt governorate of Sohag from the capital Cairo.

Health Minister Hala Zayed said in a news conference that two planes were dispatched from Cairo with 52 medical teams from various specialties on board to treat the injured. The ministry announced that a technical committee has been formed to determine the cause of the crash, with efforts underway to resume train traffic on the line.
Summary of response

The Egyptian Red Crescent (ERC) has headquarters and 27 branches and more than 30,000 volunteers nationwide. The ERC has volunteers Emergency Response Teams (ERT) who are trained on First Aid, dealing with Disasters, Psychological First Aid (PFA), tracing and restoring family links, logistics, water and sanitation, and needs assessments.

After the government declaration of the emergency alert, the ERC activated its Emergency Operations Center (EOC). The EOC has remained open since then. ERC deployed 15 staff its headquarters, 15 emergency response teams (ERTs), and six Psychosocial support teams in four branches were activated with an average of 150 volunteers mobilized following the announcement. The deployed team provided First Aid and emergency medical services, psychological support, distributed relief items, and assisted in managing dead bodies.

Over the next few hours following the crash, ERC first aid volunteers treated 65 wounded people, provided them with first aid and emergency medical assistance, and transported them to the hospitals. Transport to the hospitals was performed by the Egyptian Ambulance Authority. The ERC team helped the ambulance authority in the recovery of dead bodies, while more were trapped under the collapsed train.

In addition to providing Psychological First Aid (PFA) for the people with injuries and their relatives, the ERC deployed team assisted the hospitals with medical supplies, first aid kits, blood bags, hygiene kits, blankets, hot meals, and unconditional cash for 14 households. Furthermore, a hotline was launched to help out citizens in distress.

The ERC HQ had deployed a team of staff and senior volunteers to conduct a detailed needs assessment at the hospitals.

At the time of response, ERC provided affected people with blankets, cushions, and hygiene kits from its warehouse, as well as hot meals and cash distribution to over 266 people.

The ERC has also distributed cash assistance to 122 families (a total of 610 people). The distributions by governorate are shown in the table below.

<table>
<thead>
<tr>
<th>Governorate</th>
<th>No of families</th>
</tr>
</thead>
<tbody>
<tr>
<td>Al-Minya Governorate</td>
<td>2</td>
</tr>
<tr>
<td>Asyut Governorate</td>
<td>23</td>
</tr>
<tr>
<td>Suhag Governorate</td>
<td>52</td>
</tr>
<tr>
<td>Qena Governorate</td>
<td>33</td>
</tr>
<tr>
<td>Al-Auxor Governorate</td>
<td>7</td>
</tr>
<tr>
<td>Aswan Governorate</td>
<td>5</td>
</tr>
</tbody>
</table>

Cash assistance was provided to the most vulnerable and affected populations including, 27 people with disabilities and eight families who had lost their household heads.

Additionally, ERC provided psychological support to 610 people, 20 of whom were suffering from post-traumatic stress disorder, and 16 of whom are still being followed upon. Additionally, psychoeducation or awareness sessions, stress management sessions, and emotional support sessions are provided to avoid stress or vicarious trauma.

With IFRC support, ERC and IFRC regional delegation provided Psychosocial Support in Emergency training for ERC volunteers in the Luxor governorate. The trainees were from the governorates of Upper Egypt’s seven
governorates. The training aimed to ensure the best possible short and long-term effects of mental health and psychosocial support (MHPSS), as implementation in such a context necessitates specialized knowledge of a number of disciplines within the field. The training covered all of the objectives associated with initiating well-structured mental health and psychosocial interventions during emergencies.

Additionally, the IFRC facilitated a lessons learned and a CVA self-assessment workshop for ERC staff and volunteers. Staff and Heads of branches that implemented CVA activities participated in those workshops.

![Lessons Learned Workshop facilitated by IFRC](https://example.com/lesson Learned Workshop.jpg)

**Needs analysis and scenario planning**

Hundreds of people have been affected, and all health facilities in Sohag and surrounding areas are overcrowded due to the influx of injuries, dead bodies, and the psychological impact of the train crash.

Since the start of the operation, ERC assessment teams comprised of five teams (25 volunteers) have been mobilized to conduct assessments in the affected areas and provided assistance to over 266 people.

ERC maintained the communication channels with the Ministry of Social Solidarity (MoSS) to obtain the list of beneficiaries who received cash assistance to ensure that cash assistance was not given to the same family twice.

Alternatively, ERC developed a verification questionnaire to identify the most vulnerable families to provide them with unconditional cash assistance. This questionnaire was administered by ERC volunteers to identify the most vulnerable families.

As a result of the rapid assessment, 204 affected families were identified to receive unconditional cash assistance. On the other hand, and through this DREF operation, 122 families were reached.

**Operation Risk Assessment**

The DREF operation, the needs assessment, and its operational strategy considered the risks related to the current COVID-19 pandemic and is aligned with the IFRC global Emergency Appeal that supports National Societies to deliver assistance and support to communities affected or at risk of being affected by the COVID-19 pandemic.
In response to the crisis in the shadow of COVID-19, the ERC maintained operational safety and security measures throughout its operations to ensure that it maintains access to the affected population, as far as possible, without undue risk to its personnel.

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

Because the first instalment of the DREF was received on 18 April 2021, ERC started implementing the DREF activities on 21 April 2021, and ERC has yet to receive the remaining instalment. As a result of the foregoing, delays were encountered in the implementation of DREF activities.

B. OPERATIONAL STRATEGY

Overall Operational objective:
The objective of this operation is to provide basic emergency assistance, livelihoods support, healthcare, psychosocial support, COVID-19 prevention measures, livelihood, cash for health, and rehabilitation to 204 families affected by the train crash as well as to support ERC to provide assistance through the following activities:

- Provided services related to First Aid, dressing kits, blood transfusion through the replenishment/provision of medical and first aid consumables, laboratory tests, and running costs.
- Ensured the capacity reinforcement and emergency response equipment's in place for ERT volunteers in Upper Egypt.

An Operations Coordinator was hired by Egyptian Red Crescent for a period of 3 months to overlook and manage the DREF operation.

The ERC will proceed with the procurement of all items and financial services aligned with the IFRC procurement regulations and standards. In addition to ensure the process of distributions and assessments and transport to targeted communities.

Please refer to the original DREF plan of action for details on the intervention strategy, available here.

C. DETAILED OPERATIONAL PLAN

<table>
<thead>
<tr>
<th>Livelihoods and basic needs</th>
<th>People reached: 610 (122 families)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Indicators:</td>
<td>Target</td>
</tr>
<tr>
<td># of households supported through cash assistance</td>
<td>204</td>
</tr>
</tbody>
</table>

Narrative description of achievements

- ERC volunteers conducted several assessments and verifications to ensure that the families were in need of cash assistance and had not obtained cash assistance from another organization.
- The cash was distributed in two amounts depending on the size and composition of the family.
- Families consisting of 1 to 5 members received 4,200 EGP per HH.
- Families consisting of 5 to 10 members received 8,400 EGP per HH.
The families who obtained the cash assistance were able to cover the amounts they borrowed from others to cover medical expenses, as well as some additional expenses incurred as a result of the train crash.

**Challenges**

- Some affected people's phone numbers were not correct in official documents received from the ministry of social and solidarity, which hampered distribution timeframes because ERC volunteers spent more time locating these beneficiaries' correct phone numbers.
- Reaching out to the locations of the affected people with recent disabilities from the crisis to distribute the cash was extremely challenging due to the geographical nature of their areas, which was particularly visible in Upper Egypt governorates.
- The days designated for distribution in each governorate were changed because some of the beneficiaries did not commit to arriving on the days designated for the respective governorate.

**Lessons Learned**

Incomplete data registration from the field at the time of response hampered identification and outreach to beneficiaries. This will necessitate additional training for volunteers in rapid assessment during emergencies.

### Health

**People reached: 610 people (122 families)**

<table>
<thead>
<tr>
<th>Indicators:</th>
<th>Target</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td># of people provided with direct and indirect psychosocial support.</td>
<td>1,020</td>
<td>610</td>
</tr>
<tr>
<td># of volunteers trained in Psychosocial Support in emergency</td>
<td>30</td>
<td>27</td>
</tr>
<tr>
<td># of people reached through first aid and pre-hospital care</td>
<td>204</td>
<td></td>
</tr>
<tr>
<td># of First Aid kits replenished</td>
<td>80</td>
<td>80</td>
</tr>
<tr>
<td># of people reached through increased access to blood transfusion services</td>
<td>350</td>
<td>350</td>
</tr>
<tr>
<td># of blood bags replenishment</td>
<td>150</td>
<td>150</td>
</tr>
<tr>
<td># of personal protective gears purchased</td>
<td>60</td>
<td>60</td>
</tr>
</tbody>
</table>

**Narrative description of achievements**

- Different mental health and psychosocial support (MHPSS) interventions were provided to affected people through the ERC helpline and volunteers during distribution:
  - Psychoeducation, awareness sessions about post-traumatic stress disorder for those who had symptoms, as well as a remote follow-up session.
  - Stress management sessions for beneficiaries in the waiting area while they wait to receive their cash.
- Outcomes of the psychosocial support in emergencies (PSIE) training:
  - Identified an opportunity for ERC Upper Egypt branches to participate in a regional training where all of these branches were responding to the same crisis.
  - Disseminated the importance of basics of psychosocial wellbeing aspects during an emergency.
Identified the needs of the affected people and how to better share the MHPSS needs assessment forms and draft an MHPSS Plan of Action.

- Introduced new concepts of DAPS framework and Child Protection in Emergencies.
- Strengthened the Psychosocial Support structure within the branches.
- Procured medical reagents and consumables for blood transfusion and voluntary donations.

**Challenges**

- Limitation in reaching affected people due to a wrong phone number or an incomplete home address.
- COVID-19 restrictions that were adhered to in order to protect trainees from the risk of infection.
- Transportation for trainees from seven governorates to Luxor.

**Lessons Learned**

To avoid any delays in procurement and response, it would be preferable to increase the transfer of the allocated amount of DREF to the National Society immediately after approval and to allocate the entire amount rather than a portion of it and wait for the National Society reports to allocate the remaining amount. It is difficult for the National Society to pause the response activities while sending the report and awaiting the transfer of the remaining amount.

### Strengthen National Society

**Outcome 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

<table>
<thead>
<tr>
<th>Indicators:</th>
<th>Target</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td># of volunteers involved in the operation and actively participating in the activities.</td>
<td>150</td>
<td>320</td>
</tr>
</tbody>
</table>

**Output S1.1.4:** National Societies have effective and motivated volunteers who are protected

<table>
<thead>
<tr>
<th>Indicators:</th>
<th>Target</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td># of volunteers involved in the operation who are trained in Security, Code of Conduct and Standards and principles of humanitarian aid.</td>
<td>150</td>
<td>320</td>
</tr>
</tbody>
</table>

**Progress towards outcomes**

The Egyptian Red Crescent provided insurance to 150 volunteers involved in the disaster. The insurance was obtained through a contract with the IFRC. All volunteers have been trained to provide assistance in the event of a disaster, and have signed the code of conduct.

### International Disaster Response

**Outcome S2.1:** Effective and coordinated international disaster response is ensured

<table>
<thead>
<tr>
<th>Indicators:</th>
<th>Target</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td>Effective and coordinated international disaster response ensured</td>
<td>yes</td>
<td>yes</td>
</tr>
</tbody>
</table>

**Output S2.1.4:** Supply chain and fleet services meet recognized quality and accountability standards

<table>
<thead>
<tr>
<th>Indicators:</th>
<th>Target</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td># of rented trucks, used in this operation</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td># of surge missions</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td># of monitoring visits</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td># of days of transport</td>
<td>60</td>
<td></td>
</tr>
</tbody>
</table>
**Progress towards outcomes**

ERC rented trucks to facilitate transporting the PSS items to the beneficiaries in their places during the disaster as well as to transport relief items to ERC warehouses and volunteers to distribution and trainings locations.

---

**Influence others as leading strategic partner**

**Outcome S3.1: The IFRC secretariat, together with National Societies use their unique position to influence decisions at local, national, and international levels that affect the most vulnerable.**

<table>
<thead>
<tr>
<th>Indicators</th>
<th>Target</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td>IFRC and NS are visible, trusted and effective advocates on humanitarian issues.</td>
<td>yes</td>
<td>yes</td>
</tr>
</tbody>
</table>

**Output S3.1.2: IFRC produces high-quality research and evaluation that informs advocacy, resource mobilization and programming.**

<table>
<thead>
<tr>
<th>Indicators</th>
<th>Target</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td># of lessons learned workshop</td>
<td>1</td>
<td>1</td>
</tr>
</tbody>
</table>

**Outcome S3.2.: The programmatic reach of the National Societies and the IFRC is expanded**

**Output S3.2.1: Resource generation and related accountability models are developed and improved**

<table>
<thead>
<tr>
<th>Indicators</th>
<th>Target</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td>DREF coordinator allocated to support</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Amount of funding mobilized by the IFRC</td>
<td>103,864</td>
<td>65,464</td>
</tr>
<tr>
<td>Planning, monitoring, and reporting sessions to ensure effective accountability internally and externally.</td>
<td>1</td>
<td>1</td>
</tr>
</tbody>
</table>

**Progress towards outcomes**

The role of the DREF coordinator was critical in finalizing all operations and coordinating with IFRC regional delegations to ensure that all steps were completed in accordance with DREF procedures.

---

**D. Financial Report**

The operating budget and response activities remain unchanged. The financial report will be included in the final report.
Contact information

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

In the Egyptian Red Crescent (ERC)
- CEO, Dr Ramy Elnazer; phone: +201090000054; email: Ramy.Elnazer@egyptianrc.org
- Head of Health and Care Department: Dr Mahmoud Tharwat; phone: +201012995640; email: Mahmoud.tharwat@egyptianrc.org

In the IFRC
- IFRC Regional Office: Dr. Hosam Faysal; Head of Disaster, Climate and Crisis (Prevention, Response and Recovery) – MENA; phone +961 71 802 916; email: hosam.faysal@ifrc.org

In IFRC Geneva
- Karla Morizzo, DREF Senior Officer; phone: +41 22 730 4295; email karla.morizzo@ifrc.org

For IFRC Resource Mobilization and Pledges support:
- IFRC Regional Office: Anca Zaharia, MENA Regional Head of Partnership and Resource Development; phone: +961 813 11 918; email: anca.zaharia@ifrc.org

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 Office, Beirut: 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.

The IFRC's work is guided by Strategy 2020 which puts forward three strategic aims:
1. Save lives, protect livelihoods, and strengthen recovery from disaster and crises.
2. Enable healthy and safe living.
3. Promote social inclusion and a culture of non-violence and peace.