Operation Update Report
Egypt: Train crash in Al Qalyubia

<table>
<thead>
<tr>
<th>DREF n° MDREG017</th>
<th>Glide number OT-2021-000039-EGY</th>
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</thead>
<tbody>
<tr>
<td>Operation update n° 1: 31 October 2021</td>
<td>Timeframe covered by this update: 28 April to 31 July 2021</td>
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<tr>
<td>Operation start date: 28 April 2021</td>
<td>Operation timeframe: 5 months / 30 September 2021 (2-month extension included from 31 July 2021)</td>
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<tr>
<td>Funding requirements (CHF): 84,694</td>
<td>DREF amount initially allocated: CHF 84,694</td>
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<tr>
<td>N° of people being assisted: 680 people (122 families)</td>
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<tr>
<td>Operating National Society: Egyptian Red Crescent Headquarter - 27 branches in 27 Governorates and more than 30,000 volunteers nationwide</td>
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<tr>
<td>Red Cross Red Crescent Movement partners currently actively involved in the operation: International Federation of Red Cross and Red Crescent Societies (IFRC)</td>
<td></td>
</tr>
<tr>
<td>Other partner organizations actively involved in the operation: Egyptian local authorities and local NGOs</td>
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A. SITUATION ANALYSIS

Description of the disaster
On Sunday 18 April 2021, a train derailed near the city of Toukh in Al Qalyubia governorate, killing at least 23 people and injuring more than 139 passengers, the latest in a series of deadly accidents along Egypt’s troubled rail system, plagued by poor maintenance and management. A video posted on social media showed the victims and the injured passengers scattered along the railway line, next to the overturned carriages. Sounds of distress could also be heard. Footage on social media shows wagons overturned and passengers escaping to safety along the railway after the horrific incident.

More than 50 ambulances transported the injured to three hospitals in the province, the Ministry of Health (MoH) said.

A few minutes after the accident, the Egyptian Red Crescent nearby branches responded with full capacity in first aid, disaster response services, and assisting in transporting the wounded to the nearby health facilities with the MoH ambulance.
**Summary of response**

**Overview of National Society Response Action**

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 five staff members from the ERC Head Quarter and 10 Emergency Response Teams (ERTs). Six Psychosocial support teams in four branches were activated with an average of 100 volunteers mobilized following the announcement. The deployed team provided first aid, psychological support, distributed relief items, and assisted in managing dead bodies.

Over the next few hours following the crash, ERC volunteers treated 74 wounded people, provided them with first aid and emergency lifesaving interventions, 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 affected people and their relatives, ERC deployed teams that assisted the hospitals with medical supplies, first aid kits, blood bags, hygiene kits, blankets, and Iftar meals. Furthermore, a hotline was launched to help out citizens in distress.

Following the incident, ERC had deployed a team of staff and senior volunteers to conduct a detailed needs assessment at the hospitals. The needs assessment had raised the urgency in supporting the affected people with unconditioned cash assistance and psychosocial support as well as replenishment of the first aid kits, medical consumables and blood bags that used in the early response.

The ERC distributed cash assistance to 122 households (680 individuals). 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>Sharqia Governorate</td>
<td>1</td>
</tr>
<tr>
<td>Dakhila Governorate</td>
<td>13</td>
</tr>
<tr>
<td>Gharbia Governorate</td>
<td>19</td>
</tr>
<tr>
<td>Al-Minufia Governorate</td>
<td>23</td>
</tr>
<tr>
<td>Al-Qalubia Governorate</td>
<td>9</td>
</tr>
<tr>
<td>Cairo Governorate</td>
<td>6</td>
</tr>
<tr>
<td>Giza Governorate</td>
<td>3</td>
</tr>
<tr>
<td>Upper Egypt Governorate</td>
<td>2</td>
</tr>
<tr>
<td>Kafr shiek Governorate</td>
<td>2</td>
</tr>
<tr>
<td>Dumiute Governorate</td>
<td>2</td>
</tr>
<tr>
<td>Alexandria Governorate</td>
<td>42</td>
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</tbody>
</table>

Cash assistance was provided to the most vulnerable and affected populations including 18 people with disabilities.

Additionally, ERC provided psychological support and evaluation 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.
Caring for volunteers in an emergency training was conducted by ERC MHPSS and youth and volunteer teams. Participants will be able to improve their care for volunteers in their ERC branches who responded to the crisis as a result of the training. Participants gained an understanding of key concepts related to staff and volunteer psychological well-being, as well as their roles and responsibilities in this capacity. They were equipped with practical skills in self-care, peer support, and psychological first aid by the end of the training. They will have also received training in management and planning tools.

Additionally, the IFRC facilitated a lesson learned and a CVA self-assessment workshop for ERC staff and volunteers. Staff and Heads of branches that implemented CVA activities participated in the workshops.
Needs analysis and scenario planning
Hundreds of people have been affected, while all health facilities in Al Qalyubia and surrounding areas are crowded and overflowed with injured patients.

In the immediate aftermath of the train crash, ERC provided immediate assistance such as First Aid, pre-hospital care, cash assistance, and relief items distribution through its emergency response and psychosocial support team, branches, EOC, and disaster management (DM) units.

The affected people are considered the households, where their injuries from the train crash added more vulnerability to their lives. The injuries range from fracture, multiple fractures, to contusions. These injuries take time to heal.

The Ministry of Health (MoH) provided urgent medical care to the injured during their stay at the hospital. The MoH covered the treatment costs of the injured, such as surgeries and essential drugs available at the hospital. However, the families of those injured have to cover the medical expenses incurred immediately after discharge from the hospital as well as post-hospitalization expenses.

The livelihoods of the families affected by the loss of a member or an injured member by the train crash were disrupted. Most of the affected people are the primary source of economic support for their families. Since those are daily labours, it will be impossible for them to meet the needs of their families, not only in the short term but maybe in the long term.

The Ministry of Social and Solidarity (MoSS) had announced that compensation will be disbursed for the families of the deceased and those injured in the train collision. EGP 100,000 will be paid as compensation for the families of each victim. The injured would also be paid compensation ranging between EGP 20,000 to 40,000, depending on their injury degree.

ERC is going to expand its operational capacities to maintain continuity of the services as the leading humanitarian actor and auxiliary to the public authorities. The identified immediate needs are to support and strengthen the capacity of the ERC in a) first aid, b) blood transfusion services, c) psychosocial support, d) medical supplies, e)
unconditional cash assistance and f) relief distributions for the ERC to be able to provide timely and effective assistance to the affected people, throughout this DREF operation.

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

As a result of this assessment, 162 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 consider 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.

No instalment had been transferred to the ERC since the DREF's approval, which had an impact on the implementation of the interventions and forced the ERC to cover all of the operation's expenses.

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 needs, healthcare, psychosocial support, cash for health and rehabilitation to 162 families affected by the train crash while respecting and applying COVID-19 prevention measures, as well as to support ERC to provide assistance through the following activities:

- Provided services related to First aid, dressing kits and blood transfusion through the replenishment/provision of medical and first aid consumables, laboratory tests, and running costs.
- Strengthened the capacity and equipped the Emergency Response Team (ERT) volunteers deployed to the targeted areas.
- Carried out distribution of unconditional cash grants to the affected households to ensure consistency in adequate medical treatment, dignified burial for the deceased, in addition to support with the daily basic needs until they adapt to longer coping mechanisms.

An Operations Coordinator was hired by the 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

Livelihoods and basic needs
People reached: 122 (610 families)

<table>
<thead>
<tr>
<th>Indicators:</th>
<th>Target</th>
<th>Actual</th>
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<tbody>
<tr>
<td># of households supported through cash assistance</td>
<td>162</td>
<td>122</td>
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**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: 750 people (150 families)
Male: 480
Female: 270

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<thead>
<tr>
<th>Indicators:</th>
<th>Target</th>
<th>Actual</th>
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<tbody>
<tr>
<td># of people provided with direct and indirect psychosocial support.</td>
<td>810</td>
<td>680</td>
</tr>
<tr>
<td># of volunteers trained in Psychosocial Support in emergency</td>
<td>30</td>
<td>19</td>
</tr>
<tr>
<td># of people reached through first aid and pre-hospital care</td>
<td>810</td>
<td></td>
</tr>
<tr>
<td># of First Aid kits replenished</td>
<td>50</td>
<td>50</td>
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# of people reached through increased access to blood transfusion services

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<tbody>
<tr>
<td></td>
<td>200</td>
<td>100</td>
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# of blood bags replenishment

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<tbody>
<tr>
<td></td>
<td>200</td>
<td>60</td>
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# of personal protective gears purchased

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<tbody>
<tr>
<td></td>
<td>60</td>
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</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 caring for volunteers and staff training:
  - Identified an opportunity for ERC branches to participate in a regional training where all of these branches were responding to the same crisis.
  - Disseminated the importance of psychosocial wellbeing aspects for volunteers and staff.
  - Identified the needs of volunteers.
  - Introduced new concepts of self-care, peer support, and psychological first aid.
  - Strengthened the system of caring for volunteers in areas of planning, implementing, and reviewing support systems for staff and volunteers in their ERCs branches.

- Procurement of medical reagents and consumables for blood transfusion and voluntary donations.

**Challenges**

- Delay in the procurement of medical items due to a delay in the transfer of the DREP's allocated amount from the IFRC.
- COVID-19 restrictions that were adhered to in order to protect trainees from the risk of infection.

**Lessons Learned**

To avoid any delays in procurement and response, it would be preferable to increase the transfer of the allocated amount of DREP 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>220</td>
</tr>
</tbody>
</table>

**Output S1.1.4:** National Societies have effective and motivated volunteers who are protected
# of volunteers involved in the operation who are trained in Security, Code of Conduct and Standards and principles of humanitarian aid. | Target | Actual |
--- | --- | --- |
 | 150 | 220 |

**Progress towards outcomes**

The Egyptian Red Crescent (ERC) 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. All volunteers have signed the code of conduct.

## International Disaster Response

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

| Indicators: | Target | Actual |
--- | --- | --- |
Effective and coordinated international disaster response ensured | yes | yes |

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

| Indicators: | Target | Actual |
--- | --- | --- |
# of rented trucks, used in this operation | 2 | 2 |
# of surge missions | 1 | |
# of monitoring visits | 1 | |
# of days of transport | 60 | |

**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 uses their unique position to influence decisions at local, national, and international levels that affect the most vulnerable.**

| Indicators: | Target | Actual |
--- | --- | --- |
IFRC and NS are visible, trusted and effective advocates on humanitarian issues. | yes | yes |

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

| Indicators: | Target | Actual |
--- | --- | --- |
# of lessons learned workshop | 1 | 1 |

**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**

| Indicators: | Target | Actual |
--- | --- | --- |
DREF coordinator allocated to support | 1 | 1 |
Amount of funding mobilized by the IFRC | CHF 84,694 | CHF 68,574 |
Planning, monitoring, and reporting sessions to ensure effective accountability internally and externally. | 1 | 1 |

**Progress towards outcomes**

The role of the DREF coordinator was critical in finalizing all operations and coordinating with IFRC regional delegation 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.