



# Final Report

## Egypt: Aswan Floods



<b>DREF Operation</b>	<b>Operation n° MDREG019</b>
<b>Date of Issue: 2-2-2024</b>	<b>GLIDE n° FL-2021-000190-EGY</b>
<b>Operation start date:</b> 29 November 2021	<b>Operation end date:</b> 31 May 2022 (2-month extension included from 31 March 2022)
	<b>Operation budget: (CHF):</b> 373,314 CHF
<b>Number of people affected:</b> 5,935 people	<b>Number of people assisted:</b> 5,125 people
<b>Host National Society:</b> Egyptian Red Crescent	
<b>Red Cross Red Crescent Movement partners currently actively involved in the operation:</b> International Federation of Red Cross and Red Crescent Societies (IFRC).	
<b>Other partner organizations actively involved in the operation:</b> Egyptian local authorities and local non-governmental organizations (NGOs).	

*The major donors and partners of the IFRC-DREF include the Red Cross Societies and governments of Australia, Austria, Belgium, Britain, China, Czech, Canada, Denmark, German, Ireland, Italy, Japan, Luxembourg, Liechtenstein, Malta, Norway, Spain, Sweden, Switzerland, Thailand, and the Netherlands, as well as DG ECHO, Mondelez Foundation, and other corporate and private donors. The IFRC, on behalf of the National Society, would like to extend thanks to all for their generous contributions.*

## A. SITUATION ANALYSIS

### Description of the disaster

In November 2021, Aswan experienced heavy rainfall in most parts of the region. On November 12-14, 2021, the Egyptian Meteorological Agency predicted heavy rains that would result in flooding in Upper Egypt. Additionally, the agency anticipated that the weather conditions in southeast Egypt could be impacted by intense rainfall and strong winds similar to those experienced in 2019 and 2020.

The widespread flooding registered in municipalities of Nag El Hegab, Sadr, El Baleda, Kema, Ezbet El Sonya, Nag El Bastawisy, Nag El Ababda, and Benbanput these communes in alert.



Many community infrastructures, including more than 1,157 households were affected as several houses were destroyed or partially damaged and these households had to be hosted in 220 temporary houses run by the local authority of Aswan Governorate, while 4,685 people (937 families) were still living in their houses that had been partially damaged and refused to leave. Following the detailed assessment conducted by the Egyptian Red Crescent in November 2021, at least 3 deaths caused by scorpion stings were recorded, and the injury of 450 others due to scorpion stings. Significant agricultural and livestock losses, food, and crops were rendered useless by the floods in more than 11 villages across the affected areas.

The National Society, alongside other partners, coordinated efforts to support communities. Starting from 29 November 2021, ERC through this DREF Operation provided urgent lifesaving assistance in the above 11 most affected villages for 4 months in coordination with its partners. In May 2022, the National Society (NS) published an update of the initial plan to extend the implementation to complete the operation.

## **Summary of response**

### **Overview of Host National Society**

The Egyptian Red Crescent (ERC) has headquarters 27 Branches and more than 30,000 volunteers nationwide. The ERC has volunteer Emergency Response Teams (ERT) who are trained in 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 has assisted affected people with First Aid services, blankets, mattresses, and hot meals.

A total of 20 ERC senior staff at the headquarters and branch levels were overseeing the overall operation at the Emergency Operations Center, while 500 volunteers were deployed to provide the following services: First Aid for the 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 Centers (PHCs).

The ERC's response efforts were reinforced by establishing a comprehensive roadmap for mobile health service delivery. This roadmap, agreed upon with the Aswan local authority, will see the deployment of mobile health units, each equipped with doctors, nurses, and pharmacists. Operating on a rotating schedule, these units will address healthcare needs in the most affected areas lacking access to nearby Primary Health Centers (PHCs). Additionally, the roadmap emphasized the importance of community engagement, calling for the deployment of volunteers to raise awareness about hygiene practices and disease prevention within these areas.

## Overview of Red Cross Red Crescent Movement in country



Figure 1: ERC relief services point to people affected by flash floods., Source: ERC.

The IFRC MENA regional delegation assisted with the implementation of the Emergency Action Plan by, among other things, providing technical guidance on disaster management, finance, planning, monitoring, evaluation, and reports (PMER), as well as monitoring the implementation of this DREF-funded operation in the provinces of Aswan governorate. To ensure the proper identification of successes and challenges faced, along with discussing the lessons learned during the response, a Lessons Learned Workshop was conducted with the relevant staff. The workshop was facilitated by PMER and Operations Staff from MENA RO, and attended by relevant key people who operated operational positions during the response,

### Overview of non-RCRC actors in the 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.

To ensure effective collaboration and responsiveness throughout the response phases, the ERC held regular coordination meetings with the directorate of the health and social solidarity local authority in Aswan. The first meeting, held on 16 November 2021, facilitated the integration of the local authority's response plan with the ERC's, prioritizing the organization's role in shaping interventions and coordinating with local NGOs. These ongoing meetings helped refine the EPoA for the affected areas, assigning responsibilities based on evolving needs. The ERC committed to addressing crucial areas like shelter, livelihood, health, and WASH, while other organizations, depending on location-specific requirements, would provide support in rebuilding houses, major and minor maintenance, and furniture distribution.

### Needs analysis and scenario planning

#### 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. At the time of the assessment, the affected families were being accommodated by their neighbors and relatives, while a portion of them chose to remain in their damaged houses instead of relocating to temporary shelters. These families were eagerly awaiting the rehabilitation of their homes, which were in flood-prone areas and faced the persistent risk of collapsing due to potential floods in the nearby flood streams.

In addition to the infrastructure damage, the muddy flood water has damaged most household items and electric appliances.

**Livelihoods and Basic Needs:** Because of the damage the floods had caused to their stocks, affected people were struggling to obtain food and other basic needs. Additionally, the floods 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 a 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 safe drinking water for the population's overall health. It is also essential to improve hygiene conditions by launching preventive health care measures for the populations returning to their homes, to avoid the risk of outbreaks caused by floods. In addition to the need to provide hygiene supplies to families who do not have access to funds.

### **Operation Risk Assessment**

Landslides, slope collapse, and road blockage are among the risks identified in the operation. According to the Egyptian Ministry of Health, 352,123 people have been affected by COVID-19, with 20,052 deaths. In addition, approximately 15% of the Egyptian population has been immunized, to reach 40% nationwide coverage by the end of December 2021. Therefore COVID-19 remains a major risk during the operation.

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

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

## **B. OPERATIONAL STRATEGY**

### **Proposed strategy**

#### **Overall Operational objective:**

The objective of this operation was to provide humanitarian assistance to at least 4,685 people (937 families) in 11 villages affected by the heavy rains in the Aswan governorate through:

1. Basic emergency shelter assistance
2. Livelihoods support
3. primary healthcare services
4. psychosocial support
5. hygiene promotion including COVID-19 prevention measures

The ERC's operational strategy for the operation was as follows:

#### **Shelter**

As part of the response a total number of 937 families received household items (5 per family), consisting of blankets and mattresses delivered to the affected families for residency in the shelter and rehabilitation during the recovery period, in response to a direct request from the affected population.

During the delivery of household items, efforts were made to raise awareness among the recipients about future prevention, preparedness, and response to potential events. This was achieved through various means such as distributing informational materials, conducting interactive sessions, and promoting community engagement. The

objective was to empower individuals with knowledge and skills to enhance their ability to handle future incidents effectively.

### Livelihoods and basic needs

The implementation of cash and voucher assistance is proposed to help at least 888 families recover economically. Cash assistance will enable families to meet their immediate food and other needs. The targeted families will receive multipurpose cash disbursement for the amount of 122 USD for one month.

### Health


ERC provided affected families with integrated health and care services. They were able to access health services, health promotion, and psychosocial support as a result of their ability to access health services.

- Primary healthcare services in many requested specialties were developed through 11 Mobile Medical Units (MMU) in targeted affected areas.
- The preparedness of the ERC branch volunteers in and surrounding the affected area was increased by conducting two Emergency Response refreshment training.
- MHPSS actions were developed through individual or group sessions, as well as disseminating critical messages of care and self-care to interveners, and follow-up was done via calls, media, and social networks.
- The capacity of the volunteers in the ERC Aswan branch was increased by holding a PSS in Emergency workshop.
- Personal protective equipment was distributed to reduce the risk of contagion for both the affected population and the ERC response teams. This activity was carried out during the overall DREF operation.

### Water, Sanitation and Hygiene

WASH activities were carried out through the distribution of 4,685 hygiene kits during hygiene promotion as well as raising awareness about safe water storage and water usage monitoring. The distributed items from the ERC prepositioned stock were replenished through this DREF Operation.

## C. DETAILED OPERATIONAL PLAN

	<h3 style="color: red;">Shelter</h3> <p><b>People reached: 5,100 people (1,020 families)</b></p> <p>Male: 2,550 people</p> <p>Female: 2,550 people</p>		
<p><b>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</b></p>			
<b>Indicators:</b>		<b>Target</b>	<b>Actual</b>
% of people satisfied with the shelter assistance provided		90%	94%
<p><b>Output 1.1: Shelter and settlements and basic household items assistance are provided to the affected families.</b></p>			
<b>Indicators:</b>		<b>Target</b>	<b>Actual</b>

# of people provided with blankets and mattresses.	4,685	5,100
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**Narrative description of achievements**

To meet the objectives set in this sector, activities were carried out in several stages including assessment, procurement, distribution, and PDM.

Based on the multi-sectoral assessment and available data. ERC had prioritized household items (mattresses and blankets) to be distributed. The people affected were suffering from losing their household items to flooding of their homes made the decision to relocate to their relative homes. The affected people required warm and dry blankets, and mattresses to create suitable living conditions.

A total of 4,685 Household Items were procured from the local market in HQ and delivered to the Upper Egypt strategic warehouse to be replenished. On the first day of response, ERC decided to prioritize its immediate distribution of Household Items from the nearest strategic warehouse of disasters in upper Egypt until the completion of the financial transfer and procurement process.

The proposed operation supported the immediate needs of 5100 people (1,020 families' households that were the most vulnerable), in 11 most affected municipalities (Nag El Hegab, Sadr, El Baleda, Kema, Ezbet El Sonya, Nag El Bastawisy, Nag El Ababda, and Benban). The operation plan and distribution method were in consultation with local authorities and the affected people to ensure that distribution sites were close to selected households. In addition, ERC teams were using 4\*4 cars to reach flooded areas during distribution.

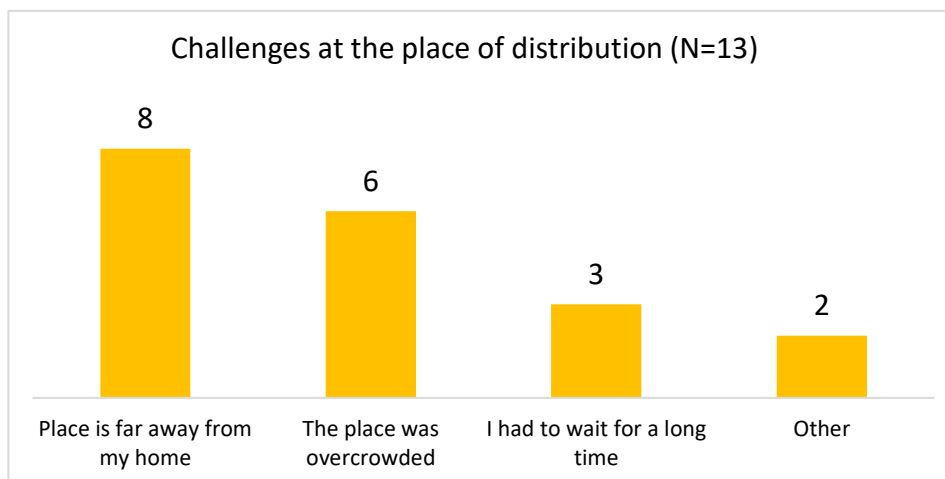


Figure 2: ERC volunteers during providing household items to people affected by flash floods., Source:

The ERC conducted a joint PDM for both household items and hygiene kits following the below methodology and findings:

- Random sample size was selected with consideration of the total population of each village to ensure proper representation for each area.

- Total Households reached = 1,020
- Total Sample size selected = 350
- Total Actual participation in the Survey = 326
  - 55% of HH members who took part in the survey were male, while 45% were female.
  - A total of 322 out of 326 participants received the Household items with an average of 5 Household items (mattress and blanket) per HH.
  - All the participants (326) received the Hygiene Kits (HK) with an average of 5 HK kits per HH.
  - 94% were satisfied with the Quality of Mattress, participants reported that the kits they received were useful and that they were satisfied with the quality of the content of the HK.
  - Nearly 94% of the participants reported that the distribution site was accessible to them compared to 6% who reported it was far from their place of residency mainly at El-Kobaneyya.
  - Also, there was a main challenge reported: the distribution site was far from the affected people and the crowded distribution sites.



### Challenges

- Due to the weak internet coverage and damage caused to the electricity infrastructure, the needs assessments had to be done using hard copies, and the communication during the response was challenging.
- Widespread damage caused by the floods imposed a challenge on the accessibility of volunteers to affected people (with the geographical nature of Aswan having mountains and hills).
- Limited vehicles in the Aswan branch to transport volunteers to affected areas and limited contingency stock available at the branch level which required the transportation of additional stock from the central warehouse.

### Lessons Learned

- Develop a map for the damaged area in order to better deploy volunteers.
- The annual tenders and long-term agreements fastened the procurement process.



## Livelihoods and basic needs

**People reached: 4,390 people (878 families)**

Male: 2,282 people

Female: 2,108 people

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

Indicators:	Target	Actual
% of people satisfied with the cash assistance provided.	100%	90%

### Output 1.5: Households are provided with unconditional/multipurpose cash grants to address their basic needs

Indicators:	Target	Actual
# households supported with vouchers/ cash assistance.	937	878

### Narrative description of achievements

#### Pre-multipurpose cash distribution process:

The damage to some households was much greater than previous floods in Aswan, but this type of support through DREF had contributed to improving the living conditions of flood-affected people when it comes to meeting their basic needs. The value of USD 122 has been defined based on previous experience in cash assistance during the operations in 2020 and 2021. The process of multipurpose cash distributions began with a review of the assessment of vulnerable people based on the agreed-upon criteria, their health condition and location, and the extent of their ability to move to cash distribution centers. The team used it to develop two methods for CVA: hand-to-hand distribution and electronic financial distribution. A meeting was held with the responsible authorities, civil associations, and community leaders in the locations of the targeted distributions to introduce the mission, and methods of distribution, and to coordinate the workflow. Financial aid and phone support procedures were taught to staff and volunteers. Several assessments and verifications were carried out to avoid duplication of services by ensuring that the families needed cash assistance and had not previously received cash assistance from another organization.

#### Multipurpose cash distribution process:

The cash assistance was successfully provided to 878 Households out of the 888 Households in the initial plan on the first batch. As ERC provided the cash assistance using two different modalities (In hand cash and E-cash through a digital platform and a local financial service provider (FSP) "Fawry". The first batch of Cash assistance was provided to 666 families (in hand) as they are living in cities that were 90 km away from the center, with no access to (FSP) Fawry offices located in the center of Aswan city. The ERC team was mobilized to local districts of Aswan, and they managed to distribute Cash in hand for 666 families. The second batch targeted 222 households who relatively are near to the center of Aswan city and ERC managed to deliver the cash assistance to 210 households through Fawry.

#### Post-distribution monitoring (PDM):

Data collection for the post-distribution monitoring took place during May 2022. The objectives of PDM were to ensure that the Cash assistance helped and filled a gap in the needs of the targeted population, enhance future learning, and community engagement, and reinforce accountability, effectiveness, and cost efficiency. Furthermore, it measures the targeted population's satisfaction with the CVA program. The ERC team interviewed a sample of 357 households

(representing 70% in-hand and 30% through Fawry) out of 878 beneficiaries who were interviewed by a household questionnaire using Kobo ToolBox.



Figure 3: ERC committee during Cash distribution in hand to people affected by flash floods., Source: ERC.

The main results of the PDM include:

- 55% of HH members who took part in the survey were male, while 45% were female.
- 17% of people assessed are old age (+60).
- Use of received assistance:
  - (42%) of people received Cash assistance on basic needs such as Food and clothes.
  - (21%) used the assistance for household appliances.
  - (14%) used the assistance for medical expenses.
  - (10%) used the assistance to pay debts that were caused also due to the damages.
  - (6%) used the assistance for small fixes around the house.
- In general, the beneficiaries were satisfied with both distribution processes with 99% of the responders satisfied.
- There were no complaints about fraud and corruption, and zero respondents said they had to provide some kind of goods, services, or money to receive the support.

### Challenges

The challenges faced in planning yielded the need to extend the response's timeframe.

### Lessons Learned

- Ensure the presence of proper protocol and mechanisms for coordination with other NGOs
- Shared data bank across active actors responding to an emergency and activating the coordination mechanism across actors before emergencies.



## Health

People reached: 5,125 people

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

Indicators:	Target	Actual
# of people reached with medical services.	4,685 people	4,278 people

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

Indicators:	Target	Actual
# of people reached with medical care screening to reduce relevant health risks.	4,685 people	4,278 people

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

Indicators:	Target	Actual
# of people reached through first aid and pre-hospital care.	238 people	320 people

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

Indicators:	Target	Actual
# of FA (First Aid) kits replenished.	100 kits	100 kits

### Outcome 4: Transmission of diseases of epidemic potential is reduced

Indicators:	Target	Actual
# of people reached through RCCE activities	4,685 people	5,125 people

### Output 4.6: Improved knowledge about public health issues among.

Indicators:	Target	Actual
# of people reached with IEC messages posted and materials distributed.	4,685 people	5,125 people

### Outcome 6: The psychosocial impacts of the emergency are lessened

Indicators:	Target	Actual
# of people provided with psychosocial support services.	4,685 people	1,494 people

### Output 6.1: Psychosocial support provided to the target population as well as to RCRC volunteers and staff

Indicators:	Target	Actual

**ERC Medical team has a good progress toward achieving goals which are represented in:**

General health screening and examinations, as well as ophthalmological, orthopedic, dermal, ENT, pediatric, maternal, and paramedic services such as medications, investigation, and imaging, were provided to the targeted population.

A total of 11,217 healthcare services were provided for 4,278 people affected through mobilizing 9 integrated Mobile Medical Units (MMUs) that were scheduled in two groups, covering 11 areas over affected towns in Aswan governorate, in coordination with MOHP that allows some cases to be referred requiring some subspecialties, specific drugs, advanced investigations, and minor operations.

The launch of a health awareness campaign included a specific message about COVID-19 vaccination.

Emergency Response refresher training was provided to 20 volunteers from affected ERC branches and surrounding branches. The training is designed to ensure that ERC volunteers are fully prepared to respond to any upcoming emergencies.

Mobile COVID-19 vaccination points were integrated into the overall DREF operation activities.

Personal protection equipment (PPEs) was distributed to 500 volunteers to help reduce the risk of contagion for both the affected population and the ERC response teams during the implementation of the DREF operation activities.

Health awareness messages were disseminated by the CBHFA team through a one-day workshop for community leaders, awareness sessions, and a social media campaign. High-risk groups (elderly, mothers, etc.) are educated on COVID-19, Acute Watery Diarrhea, Bloody Diarrhea, Dermatitis, and how to prevent its spread during an emergency. Raising awareness about animal bites, particularly scorpion bites, and how to manage them until you get to the hospital.



Figure 4: ERC volunteers during providing medical services to people affected by flash floods, Source:

The following psychosocial support activities were carried out to assist flood-affected families in coping with the potential trauma of the flooding which represented in:

Families affected by the floods during the crisis:

Psychosocial first aid and psychological assessment were provided for the affected 756.

A team of psychologists had been remotely following up on the psychological state of 58 affected people through the helpline.

Stress management sessions for beneficiaries in the waiting area while they wait to receive their cash to 32 beneficiaries.

Families affected by the floods during integrated MMUs:

Psychoeducation awareness session: raising psychological awareness about post-traumatic stress disorder for those who had symptoms and including stress management, adaptation, dealing with feelings)

Individual sessions: individual psychological sessions and assessment of the psychological state.

Psychosocial support activities for children: awareness-raising activities for children about mental health to raise psychosocial well-being, including (anger management, adaptation, expressing feelings, and renunciation of violence).

The following table shows the number of affected people who received MHPSS services:

Activities	Individual sessions	Helpline follow up	psychoeducation awareness session		Activities for children		Total affected people
			Male	Female	Male	Female	
Total affected people	108	60	41	445	316	524	1,494
			486		840		

The MHPSS unit conducted a series of Painting and coloring sessions after the crisis response targeting frontline responders. All staff and volunteers have several MHPSS helplines to arrange with specialists who are required during a crisis period to provide culturally relevant trauma assistance.



Figure 5: ERC MHPSS team during providing MHPSS services to people affected by flash floods., Source: ERC.

Psychosocial Support in Emergency training conducted for branch-affected volunteers. The training is to ensure the best possible short and long-term effects of mental health and psychosocial support (MHPSS), the

implementation requires specialized knowledge of several disciplines within the field. The training delivers all the objectives that related to initiating well-structured mental health and psychosocial interventions during emergencies.

### Challenges

- No sustainability for the activities after the response was terminated knowing that the targeted population is in dire need of support.
- The mental health team classified the identified cases based on the severity and duration of support needed.

### Lessons Learned

- The emergency response team is well-equipped and trained in responding to floods.
- The availability of a proper coordination mechanism with the ministry of Health to ensure the proper referral of detected cases needed for more intervention and with the Ministry of social solidarity to ensure proper referral of child protection cases identified.



## Water, sanitation and hygiene

People reached: 5,125 people

### Outcome1: Immediate reduction in risk of waterborne and water related diseases in targeted communities

Indicators:	Target	Actual
<i>% of target population that has access to sufficient safe water.</i>	100%	--

### Output 1.1: Continuous assessment of water, sanitation, and hygiene situation is carried out in targeted communities

Indicators:	Target	Actual
<i># of site and community assessments carried out</i>	7 sites	9 sites
<i># of HHs assessment conducted</i>	120 HHs	148 HHs

### 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

Indicators:	Target	Actual
<i># of people provided with safe water (according to WHO standards) in the affected area</i>	4,685	1,874 (40%)

### Outcome 2: Sustainable reduction in risk of waterborne and water-related diseases in targeted communities in the recovery phase

Indicators:	Target	Actual
<i># of people reached by hygiene promotion activities.</i>	4,685 people	5,125 people
<i># of people provided with hygiene kits.</i>	4,685 kits	6415 kits
<i>% of beneficiaries satisfied with the services provided</i>	100%	94%

**Output 2.4: Hygiene promotion activities are provided to the entire affected population.**

Indicators:	Target	Actual
# of hygiene promotion sessions conducted	1	125 session
# of hygiene kits distributed	937 kits	6415 kits

**Narrative description of achievements**

**Needs assessment**

- Individual WASH assessments were performed on 148 affected families in addition to 9 general rapid assessments in Nag El Hegab, Sadr, El Baleda, Kema, Ezbet El Sonya, Nag El Bastawisy, Nag El Ababda, and Benban.

**The needs assessment shown:**

- 100 percent of households receive water through piping into the dwelling; almost all households experienced a lack of water for some time to meet their basic needs.
- More than 60% of affected families have had to transfer water by container. They are also inconvenienced by the distance, which may take more than 30 minutes to arrive at the source of water, and the waiting time to get water.
- About 35% of the affected population receives an average of 7 to 8 liters of water per day, 15% receives more than 20 liters per day, and the remaining population receives an average of (10-13) liters per day.
- While 75% of families complain about visible wastewater in the vicinity (30 meters or less) of the accommodation 1 - 2 times per month, 25% complain about the visibility of wastewater in the vicinity throughout the month.

**Procurement and Deliveries to beneficiaries (Hygiene kit)**

- The process of purchasing the hygiene kit had been completed, and it had been completely replenished. Due to the money transfer delay, ERC decided to prioritize its distribution from ERC's warehouse immediately. The distribution was determined through careful consideration and was based on a detailed assessment.

**Hygiene promotion**

- The WASH team ran a campaign to deliver specific messages such as safe water storage, how to use a hygiene kit, and personal hygiene during menstruation. This campaign was combined with the distribution of hygiene kits, assessment visits, and social media.



Figure 6: ERC WASH team during providing WASH services to people affected by flash floods., Source: ERC.

**Challenges**

- The absence of enough WASH trained volunteer in the Aswan branch,

**Lessons Learned**

- The need to focus on building the capacities in the Aswan branch.

**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**

Indicators:	Target	Actual
# of volunteers involved in the operation and actively participating in the activities.	500 volunteers	500 volunteers

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

Indicators:	Target	Actual
# of volunteers involved in the operation who are trained in Security, Code of Conduct and Standards and principles of humanitarian aid.	500 volunteers	500 volunteers

**Narrative description of achievements**

<ul style="list-style-type: none"> <li>Volunteering management in an emergency was handled by ERC youth and volunteer teams. Participants can improve their management of volunteers in their ERC branches who responded to the crisis as a result of the rain, as well as their roles and responsibilities in this capacity. They will also have received training in management and planning tools.</li> <li>ERC rented trucks to facilitate transporting household items and hygiene kits to beneficiaries in their locations during the disaster, as well as transporting relief items to ERC warehouses and volunteers to distribution and training locations.</li> <li>500 volunteers involved in this disaster were insured, trained on how to provide disaster services, and signed a code of conduct.</li> </ul>
<b>Challenges</b>
<ul style="list-style-type: none"> <li>Limitation in Aswan branch volunteers who trained on assessment.</li> </ul>
<b>Lessons Learned</b>
<ul style="list-style-type: none"> <li>Train volunteers properly on relevant tools and activities as preparedness to effective emergency responses.</li> </ul>

<b>Influence others as leading strategic partner</b>		
<b>Outcome S2.1: Effective and coordinated international disaster response is ensured</b>		
<b>Indicators:</b>	<b>Target</b>	<b>Actual</b>
<i>Effective and coordinated international disaster response ensured.</i>	Yes	Yes
<b>Output S2.1.1: Effective and respected surge capacity mechanism is maintained.</b>		
<b>Indicators:</b>	<b>Target</b>	<b>Actual</b>
<i>Performance of IFRC monitoring visits</i>	1	1
<b>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.</b>		
<b>Indicators:</b>	<b>Target</b>	<b>Actual</b>
<i>IFRC and NS are visible, trusted and effective advocates on humanitarian issues.</i>	Yes	Yes
<b>Output S3.1.2: IFRC produces high-quality research and evaluation that informs advocacy, resource mobilization and programming.</b>		
<b>Indicators:</b>	<b>Target</b>	<b>Actual</b>
<i># of Lessons Learned Workshop.</i>	1	1
<i># of M&amp;E plan produced.</i>	1	2
<b>Narrative description of achievements</b>		
<ul style="list-style-type: none"> <li>Following the publication of the DREF Emergency Plan of Action, an M&amp;E plan was produced. The M&amp;E plan was designed to assist the NS in tracking and assessing the outcomes of their interventions throughout the DREF Operation. It also helped to ensure that data is being used efficiently as well as to allow the NS to report on results at the end of the operation.</li> <li>Lessons Learned Workshop (LLW) was conducted after terminating the response of Aswan Floods (DREF) initiated in Egypt. The LLW was held in Cairo on May 2022. The participants were technical focal points and volunteers from ERCS who responded to the floods in Aswan. The workshop was facilitated by Senior PMER Officer and co-facilitated by Senior Response Officer and Regional Cash and Voucher Assistance Coordinator from IFRC MENA Regional Office. In-turn, The LLW complements the review from both a Planning, Monitoring,</li> </ul>		

Evaluation and Reporting (PMER) and technical perspective. The main findings represented the challenges, lessons learned, and successes for the DREF operation described previously.

The following are the main findings of recommendations for Aswan DREF:

- Continuously refreshment training for the staff and volunteers in the branches to improve their readiness to respond to be able to respond and conduct the digitalized emergency needs assessment independently.
- Ensure proper community engagement and share the selection criteria to make sure that the community leaders are aware of the selection criteria and share it with non-selected beneficiaries.
- Distribute direct relief items during assessments.
- Train all relevant actors on child protection policies and initiating safe spaces.
- Sign long-term contracts with available FSPs assisting electronically to ensure the timely reach of beneficiaries during disasters.
- Enhance the knowledge of Aswan residents on psychological well-being through regular community events and awareness sessions.
- Develop a unified digital platform for (national) disaster response and draft a unified geographical disaster risk map.
- Enhancement the transportation and tools for communication.



Figure 7: Lessons learnt workshop., Source: ERC.

## D. Financial Report

# DREF Operation

## FINAL FINANCIAL REPORT

### MDREG019 - Egypt - Aswan Floods

Operating Timeframe: 01 Dec 2021 to 31 May 2022

Selected Parameters			
Reporting Timeframe	2021/12-2023/8	Operation	*
Budget Timeframe	*	Budget	APPROVED

Prepared on 25/Sep/2023

All figures are in Swiss Francs (CHF)

### I. Summary

<b>Opening Balance</b>	<b>0</b>
<b>Funds &amp; Other Income</b>	<b>373,314</b>
DREF Response Pillar	373,314
<b>Expenditure</b>	<b>-351,542</b>
<b>Closing Balance</b>	<b>21,772</b>

### II. Expenditure by planned operations / enabling approaches

Description	Budget	Expenditure	Variance
PO01 - Shelter and Basic Household Items	134,717	107,505	27,212
PO02 - Livelihoods			0
PO03 - Multi-purpose Cash	107,459	120,982	-13,524
PO04 - Health	33,228	24,957	8,271
PO05 - Water, Sanitation & Hygiene	35,688	32,127	3,561
PO06 - Protection, Gender and Inclusion			0
PO07 - Education			0
PO08 - Migration			0
PO09 - Risk Reduction, Climate Adaptation and Recovery			0
PO10 - Community Engagement and Accountability			0
PO11 - Environmental Sustainability			0
<b>Planned Operations Total</b>	<b>311,092</b>	<b>285,572</b>	<b>25,520</b>
EA01 - Coordination and Partnerships	2,663	291	2,372
EA02 - Secretariat Services	17,360	5,916	11,444
EA03 - National Society Strengthening	42,201	59,764	-17,563
<b>Enabling Approaches Total</b>	<b>62,223</b>	<b>65,970</b>	<b>-3,748</b>
<b>Grand Total</b>	<b>373,314</b>	<b>351,542</b>	<b>21,772</b>

# DREF Operation

## FINAL FINANCIAL REPORT

### MDREG019 - Egypt - Aswan Floods

Operating Timeframe: 01 Dec 2021 to 31 May 2022

Selected Parameters			
Reporting Timeframe	2021/12-2023/8	Operation	*
Budget Timeframe	*	Budget	APPROVED

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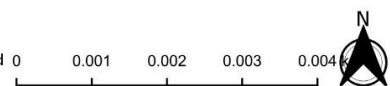
### III. Expenditure by budget category & group

Description	Budget	Expenditure	Variance
<b>Relief items, Construction, Supplies</b>	<b>281,605</b>	<b>304,448</b>	<b>-22,843</b>
Shelter - Relief	126,495		126,495
Clothing & Textiles		141,654	-141,654
Water, Sanitation & Hygiene	33,510	27,679	5,831
Medical & First Aid	20,700	12,609	8,091
Other Supplies & Services		37,823	-37,823
Cash Disbursement	100,900	84,683	16,217
<b>Logistics, Transport &amp; Storage</b>	<b>9,000</b>		<b>9,000</b>
Transport & Vehicles Costs	9,000		9,000
<b>Personnel</b>	<b>44,925</b>	<b>6,221</b>	<b>38,704</b>
National Staff	4,800		4,800
National Society Staff		4,801	-4,801
Volunteers	40,125	1,420	38,705
<b>Workshops &amp; Training</b>	<b>12,500</b>	<b>17,103</b>	<b>-4,603</b>
Workshops & Training	12,500	17,103	-4,603
<b>General Expenditure</b>	<b>2,500</b>	<b>2,314</b>	<b>186</b>
Travel	2,500	1,018	1,482
Information & Public Relations		1,288	-1,288
Financial Charges		8	-8
<b>Indirect Costs</b>	<b>22,784</b>	<b>21,456</b>	<b>1,329</b>
Programme & Services Support Recover	22,784	21,456	1,329
<b>Grand Total</b>	<b>373,314</b>	<b>351,542</b>	<b>21,772</b>

# 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.



## Contact information

Reference documents



Click [here](#) for:

- Previous Appeals and updates
- [Emergency Plan of Action \(EPoA\)](#)

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## 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.

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Saving lives, changing minds.



The IFRC's work is guided by Strategy 2020 which puts forward three strategic aims:

- Save lives, protect livelihoods, and strengthen recovery from disaster and crises.
- Enable healthy and safe living.
- Promote social inclusion and a culture of non-violence and peace