

EMERGENCY APPEAL

REVISED OPERATIONAL STRATEGY

Libya, MENA | Storm Daniel



Members of the Libyan Red Crescent Society in a search and rescue operation amidst a scene of devastation. Photo: LRCs

Appeal No: MDRLY005	To be assisted: 300,000 People¹	Appeal launched: 13/09/2023
Glide No: FL-2023-000168-LBY	DREF allocated: CHF 1 million	Disaster Categorisation: Orange
Operation start date: 10/09/2023	Operation end date: 31/12/2024	
Operational Strategy Revision	Revision #: 1	Date: 14/11/2023

IFRC Secretariat Funding requirement: CHF 20 million
Federation-wide funding requirement: CHF 25 million²

¹ The number of people to be assisted has increased from 200,000 to 300,000 with this revision.

² The Federation-wide funding requirement encompasses all financial support to be directed to the Libyan Red Crescent Society (LRCs) in response to the emergency. It includes the Libyan Red Crescent's domestic fundraising requests and the fundraising appeals of supporting Red Cross and Red Crescent National Societies (CHF 5 million, increased from CHF 3 million), as well as the funding requirements of the IFRC Secretariat (CHF 20 million, increased from CHF 7 million). This comprehensive approach ensures that all available resources are mobilised to address the urgent humanitarian needs of the affected communities.

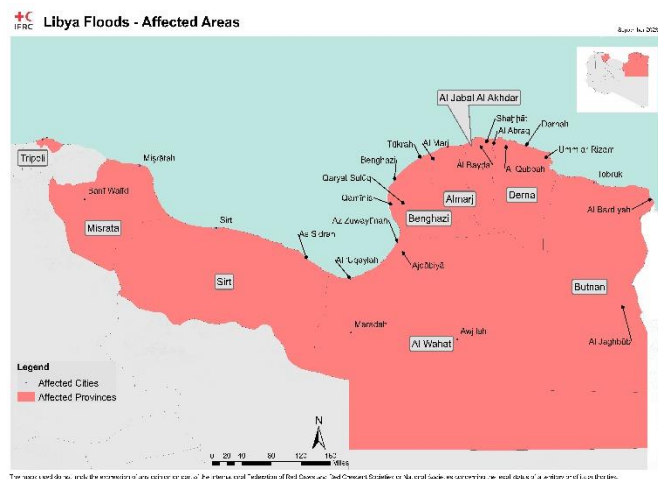
TIMELINE



Devastation in Derna following the passage of Storm Daniel and floods. Photo: LRCs

- 🎯 **9-10 September 2023:** IFRC regional red alert forecasts are shared with the Libyan Red Crescent Society, which activates its preparedness mechanism.
- 🎯 **10 September 2023:** Storm Daniel wreaks havoc. Two dams collapse in Derna, causing massive destruction in the town of Derna city and surrounding areas.
- 🎯 **12 September 2023:** The Prime Minister of the Libyan Government in the East declares a state of emergency in Derna and officially requests immediate international support. The IFRC releases CHF 1 million from its Disaster Response Emergency Fund (DREF) to support the launch of the LRCs response.
- 🎯 **13 September 2023:** The IFRC activates its Rapid Response Mechanism (RRM) to ensure the capacity to support the LRCs response in managing the operations as close to the disaster as possible. An operations manager is deployed in the country. SIMS is activated and an initial rapid response team of eight key function role profiles is requested, as well as a Health ERU (outpatient department - OPD/MHPSS Modules).
- 🎯 **14 September 2023:** The IFRC launches an Emergency Appeal for CHF 10 million
- 🎯 **7 November 2023:** The IFRC publishes the Operational Strategy.
- 🎯 **12 November 2023:** The IFRC Emergency Appeal is revised to CHF 25 million.

DESCRIPTION OF THE EVENT



On Sunday, 10 September 2023, Storm Daniel hit northeastern Libya, with winds of 70 to 80 km/h and record rainfall of up to 240 mm. The coastal city of Derna was hardest hit by this devastating weather system, with its dams suffering heavy damage. This led floodwaters to rise to three meters, submerging entire neighborhoods and washing them into the sea. The storm affected major population centers, including Benghazi, Tobruk, Toukra, Talmeitha, Almarj, Taknes, Al Owailia, Bayada, Albayda, Shahhat, and Sousa.

According to the United Nations Office for the Coordination of Humanitarian Affairs (OCHA), 4,352 people lost their lives and more than 8,000 are still missing as of 31 October. More than 43,400 people have been internally displaced, leaving 7,000 families stranded. This disaster aggravated an already challenging situation as eastern Libya was already home to 46,000 internally displaced persons (IDPs) and numerous migrants.

Communications and electricity infrastructure were in ruins, as shown in videos shared on social media and by the Libyan Red Crescent Society (LRCs). These videos revealed submerged cars, collapsed buildings, and torrents of water surging through the streets.

Following this event, the Libyan Government in the East declared a state of emergency and called on medical personnel and medical assistants to go to the port city of Derna. The Libyan parliament also appealed to the international community and all humanitarian actors in the country for support.

This powerful storm exacerbated existing challenges and added new levels of complexity to the pre-existing situation. Following the 2011 crisis, Libya has been grappling with complex population movements, involving over 706,000 migrants, refugees, and IDPs. Tropical Storm Daniel exacerbated these challenges, affecting numerous displaced people and migrants.

Despite recent progress towards stability, marked by a ceasefire agreement in 2020 and a national unity government in 2021, Libya's health system remains strained due to a decade of conflict. Low vaccination rates leave the population vulnerable to vaccine-preventable diseases, while global price hikes stemming from the Ukraine crisis have hit Libya hard, impacting food security. Relying on wheat and grain imports from Russia and Ukraine, the country is facing soaring food prices, forcing many to cut back on their daily food consumption.

As more IDPs gradually return to their homes, they continue to face obstacles such as damaged residences and restricted access to essential services. Additionally, forced expulsions of migrants have sharply increased, raising serious human rights concerns.

Moreover, women and girls in Libya remain at significant risk of gender-based violence, exacerbated by factors such as fear, social stigma, discrimination, and a scarcity of services, particularly in remote areas. Despite diminished large-scale hostilities, explosive remnants of war, including landmines and improvised explosive devices (IEDs), also pose an enduring threat, necessitating continued efforts to identify and mitigate risks.

EMERGENCY APPEAL AND OPERATIONAL STRATEGY REVISION

With gratitude, the LRCs and International Federation of Red Cross and Red Crescent Societies (IFRC) note the generosity and solidarity from the international community to support those impacted by Storm Daniel, as the Emergency Appeal launched on 14 September 2023, is projected to reach its original funding targets. During the first weeks of the operation, humanitarian needs were predominantly

tied to search and rescue efforts, as well as to the delivery of immediate life-saving assistance. The situation has evolved, and new needs and interests have been identified, necessitating new capacities.

This revised Operational Strategy reflects this understanding and builds on the available assessments and analyses. In addition to the scaling-up of activities described in the recently released Operational Strategy, this revision includes:

- Increased attention to recovery and resilience planning and implementation.
- Strengthening the National Society's capacity.
- Enhancing security management.

The severity of needs is likely to continue evolving, with additional complexities and scenarios arising based on how the recovery progresses in the medium and long term. Ultimately, strengthening the capacities of the LRCs, a respected and trusted humanitarian institution in the country, is foundational and will reduce the loss of life and the suffering of the Libyan people when faced with contextual changes.

Based on current assessments and anticipated needs, the Federation-wide funding requirement of this Emergency Appeal has been increased from CHF 10 million to CHF 25 million, to effectively and consistently respond to the ongoing and medium- to long-term recovery needs on the ground.

Severity of humanitarian conditions

1. Impact on accessibility, availability, quality of, use, and awareness of goods and services

1.a. Inadequate Accommodation Conditions: Informal sites and collective centers run by local authorities have been identified as hosting more than 2,600 people in affected districts, including schools in Benghazi, Derna, and Albayda. Residents of these shelters report a lack of privacy, limited space; and insufficient heating, lighting, and WASH (water, sanitation, and hygiene) facilities as their main concerns. Additionally, accommodation costs are high, and some IDPs fear eviction.

1.b. Protection and Documentation Needs: Refugees, asylum seekers, and IDPs, including those displaced by previous conflicts, face challenges due to the loss of essential documents during the floods. People need access to information about housing, land, and property (HLP), as well as compensation options.

1. c. Risks of increased gender-based violence (GBV) and child protection, as well as further marginalization of minority groups: Families who have lost members, often the breadwinners, are at increased risk of gender-based violence. Child protection efforts continue to register unaccompanied and separated children. Many children on the move are at greater risk of trafficking, abuse, and forced labor. UNICEF, which reported that more than 300,000 children affected by Storm Daniel are at increased risk of diarrhea, malnutrition, and dehydration, is also working with the authorities to increase public awareness, formal registration, and referrals of affected children, with the aim of reuniting them with their families or finding appropriate solutions.

A lack of proper service mapping in the region could lead to an inability to conduct proper referrals in order to fill in gaps that the National Society is not capable of addressing themselves.

2. Impact on physical and mental well-being

2. a. Mental Health: Difficult living conditions and the loss of family members, often breadwinners, have taken a toll on the mental health of affected communities. In the immediate aftermath of the disaster, cases of acute mental distress increased, with individuals experiencing flashbacks, nightmares, and panic attacks. As the recovery process unfolds, the long-term psychological consequences of the storm are becoming increasingly evident. The loss of loved ones, homes, and livelihoods has left the majority of the affected population feeling overwhelmed and struggling to cope with their grief and uncertainty about the future. As a result, we may see an uptick in hostilities and more reported cases of violence.

2. b. Physical Health Effects: Although the need for trauma care has largely passed, there is a gap in access to primary health care, due in part to the damage that has affected certain public health care (PHC) centres, including the Libyan Red Crescent Society Polyclinic, during the floods. PHCs in the central part of the city are the most heavily affected, while those in other parts of the city are often only

partially functioning. The main demand currently is for PHC consultations, with a focus on children's illnesses, such as upper respiratory tract infections, diarrhea, non-communicable diseases (NCDs), and skin diseases. At this stage, no cases of acute watery diarrhea or other outbreaks have been reported; however, there is a risk of outbreaks in areas linked to waterborne and vaccine-preventable diseases.

3. Risks and vulnerabilities

3.a. Environmental Concerns: Concerns about contaminated water, stagnant water, and the presence of livestock or animal feces in public spaces have been raised. There are also concerns about disaster waste, improper waste disposal practices, and soil contamination. Some industrial and waste processing facilities, as well as chemical plants, have been affected, raising concerns about water and environmental safety.

3. b. Population Displacement: Ongoing mapping of informal sites and collective centers hosting IDPs is indicative of continued population displacement. This situation, combined with previous conflict-related displacement, has put a strain on resources and social services.

3. c. Access to Essential Services: Challenges exist in accessing health facilities, with many remaining closed or offering limited services. The lack of information on continuity of services and logistical/physical barriers have hampered access to healthcare. There is also a shortage of essential medicines, vaccines, and medical equipment, further compounded by a lack of psychosocial support capacity. The [WHO](#) reports that about 63 percent of the health facilities assessed are partially or non-functional; that 101 health workers lost their lives in the floods; and that although hundreds of volunteer health care professionals came to Derna to help after the disaster, many returned home after three to four weeks, increasing the risk of an even more acute shortage of health care providers a few weeks after the disaster.

3. d. Water Accessibility and Sanitation: Even if water is available, it is not always safe or affordable. Water seller kiosks have become the primary source of drinking water, but not everyone can access them. People get their drinking water from a variety of sources, some of which are damaged, unprotected, or untested. Cases of diarrhea have been reported in affected areas, reinforcing the importance of disease surveillance and prevention, highlighting the risk for potential waterborne outbreaks.

4. Context in Libya

After several years of hostilities in Libya, the situation has managed to improve since the 2019 ceasefire agreement, where signs of stability have been evident in recent years, particularly in the eastern part of Libya, which encompasses areas such as Benghazi, Derna, and Tobruk.

Although there is the presence of two governments, the perception of the LRCs and the IFRC is very positive from both. The LRCs have opened channels with governments and authorities on both sides in the interest of its neutrality, impartiality, and humanitarian mandate.

Despite the calm situation, the IFRC is paying close attention and closely monitoring any developments in the security situation, while minimum security requirements (MSR) documents have been developed, and security personnel are available in the country to support the IFRC's operations.

5. Risks and vulnerabilities of the IFRC

The IFRC operates in Libya through the LRCs. During its humanitarian efforts, the IFRC and its staff are exposed to various risks and vulnerabilities, including road accidents, criminal activities, water and vector-borne diseases, and telecommunications problems.

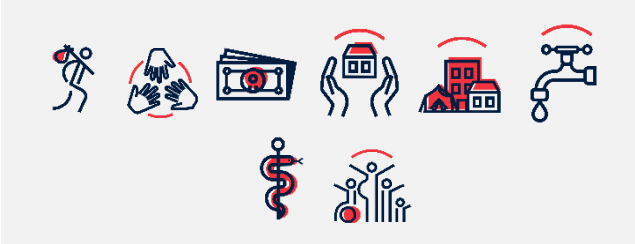
The IFRC is implementing several measures to address and mitigate the risks and vulnerabilities faced by its personnel in Libya. These measures include conducting routine security risk assessments to proactively identify and address hazards. Comprehensive, MSR-approved strategies are also in place for Derna and Benghazi.

Among other measures, the Movement sees the need to maintain close and active communications with local authorities to stay abreast of the evolving security environment and effectively coordinate its activities. Furthermore, fostering strong and complementary ties with various humanitarian actors, including the LRCs, the International Committee of the Red Cross (ICRC), and the United Nations (UN), is an integral part of our efforts. Various standard operating procedures (SOPs) are in place to improve the country delegation's preparedness.

CAPACITIES AND RESPONSE

1. National Society response capacity

1.1 National Society capacity and ongoing response



Number of staff:	655
Number of volunteers:	3,000
Number of branches:	38

The Libya Red Crescent Society (LRCs) was established in 1957 and was admitted to the IFRC in 1958, with a mandate to provide assistance to the most vulnerable segments of society. The LRCs is the main national humanitarian organization present in Libya, responding to emergencies and providing services to vulnerable populations nationwide, through a network of 38 branches, 655 staff, and 3,000 volunteers. The LRCs has maintained its unity and continued its work in Libya despite the country's political divisions, even if it had to amend certain programs implemented before the political crisis, such as first aid, road safety, and the promotion of hygiene for children. It has also developed additional programs to respond to humanitarian needs resulting from armed conflict.

In 2017, the IFRC conducted the first phase of the Organisational Capacity Assessment and Certification (OCAC) process, identifying human resources (HR); planning, monitoring, evaluation, and reporting (PMER), finance development, volunteering, and branch development as priorities for improvement. This guided the LRCs development plan, which is supported by various Movement partners.

In early 2022, the LRCs revised its current organizational strategy by identifying enabling priorities and emphasizing healthcare, risk reduction, and the promotion of volunteerism and humanitarian values. The ability of the LRCs to implement its humanitarian programs has been significantly challenged by infrastructure damage and looting, resulting from ongoing political tensions.

As part of the Response Capacity in 2022, the LRCs conducted a Preparedness for Effective Response (PER) self-assessment as part of its disaster risk management approach to guide the operational priorities in case of the response. The main priority areas under the PER exercise were emergency response and planning, including hazard risk analysis, information management, standard operating procedures, scenario planning, an early action mechanism in terms of operational support in emergencies; information and technology; logistics and supply chain; reporting and monitoring, as well as staff and volunteer management, among others.

Additionally, the LRCs faced a substantial reduction in financial support from the state, which had previously been a major source of funding for the organization. Therefore, the LRCs is currently relying on the support of its partners to alleviate the suffering caused by the armed conflict. This support is channeled through the

implementation of health and relief programs, with a particular focus on assisting migrants and the most vulnerable communities affected by the conflict.

The LRCs carried out different health activities in the affected areas related to clinical care (the Derna branch polyclinic provided primary health care services to an average of 500 patients per day, with a plan to expand its services to limited secondary health care). In addition, the LRCs managed mobile health teams providing primary health care in remote areas, pre-hospital care (two ambulances at the Derna branch), health promotion activities (through a community-based health and first aid-CBHFA-approach), and mental health and psychosocial support (MHPSS) through volunteers trained in the last five years in different branches of the affected areas.

LRCs volunteers, specifically the Derna branch, intervened during the disaster by evacuating vulnerable people stranded by rising waters, and, in some cases, at the unfortunate expense of their own lives and those of their families. LRCs teams from surrounding branches surged to immediately provide support on the ground. At the same time, LRCs headquarters (HQ) activated response mechanisms while coordinating closely with the IFRC and local authorities to assess the situation, support the search and rescue operation, and provide help to those affected.

A central emergency operations room has been set up, with two others on sites deployed in Derna (Eastern and Western). Emergency and rescue teams were tasked with providing urgent assistance, distributing basic aid and shelter to those affected, and providing necessary medical care to the injured, including psychosocial support to people impacted by the event.

Services provided included:

- Immediate search and rescue for stranded persons.
- Distribution of essential household items to 125,000 people affected.
- Delivery of 25,000 food parcels to families, with 19,000 distributed in Derna.
- Dead body management interventions, assisting 4,150 cases.
- Restoring family links (RFL) for 5,157 cases, facilitated by the LRCs through the opening of corresponding files.
- Assessments in IDP centers.
- Online awareness campaigns.
- Providing psychological first aid and support to volunteers.
- Coordination with local authorities.
- Psychosocial aid to over 1200 individuals.
- Implementing the distribution of food aid, essential household items, and medications to an estimated 230,000 recipients as part of the Operational Strategy.

The above-mentioned activities were successful in:

- Reaching 61 locations in 14 cities.

1.2 Capacity and response at the national level

Following the event, on 16 September, the Prime Minister of the Libyan Government in the East declared a state of emergency, and an official request for immediate international support was announced. Local authorities, including the armed forces, surged with all capacity to support the responding teams to the crises, especially those that are members of the Libya Crises Cell, including the LRCs. They also took the lead in coordinating the distributions of relief items in coordination with the Libyan Relief Committee for all local actors.

A two-day international conference for the reconstruction of Derna, organized by Libya's eastern government was held on 1 November, in Derna and on 2 November in Benghazi with three focus areas: the environment,

development, and future planning. More than 162 Arab and international companies from 26 countries around the world were present. These included China, US, UK, Russia, Portugal, UAE, Turkey, Romania, France, Belorussia, Tunisia, Jordan, Bulgaria, and Egypt.

The director of banking and currency control in Libya asked that banks give their full attention and priority to applications submitted by non-profit organizations, especially international organizations specializing in relief work that wish to provide assistance in the areas and cities affected by the flooding, to abide by the above-mentioned guidelines, and to expedite their processes and urgently refer them to the administration and on a daily basis so they can be addressed as quickly as possible.

2. International capacity and response

2.1 Red Cross Red Crescent Movement capacity and response

IFRC

In a swift response to the recent devastating floods in Libya, the IFRC partnered with the LRCs to provide essential assistance to affected communities. Recognizing the gravity of the situation, the IFRC promptly allocated CHF 1 million from the Disaster Relief Emergency Fund (DREF) within 48 hours and initiated an Emergency Appeal for CHF 10 million on 14 September, reinforcing their commitment.

The IFRC activated its Rapid Response surge system for several role profiles after identifying the needed expertise, supported by several National Societies from the Red Cross Red Crescent Movement, including the Canadian Red Cross, the Italian Red Cross, the Egyptian Red Crescent, the Jordanian Red Crescent, and the Lebanese Red Cross. Notably, the IFRC collaborated with in-country long-term presence partners, including the ICRC, the German Red Cross, and the Norwegian Red Cross, and this response underscores its unwavering commitment to supporting Libya during this crisis through proactive measures addressing the urgent needs of affected communities.

The IFRC activated requests for emergency response units (ERUs) that are being deployed, including the Canadian Red Cross outpatient department (OPD) and MHPSS modules. The Danish Red Cross supported the MHPSS module with equipment, while the Italian Red Cross supported the ERU Basecamp.

The IFRC continues to support LRCs relief operations through the provision of operational running costs and in-kind items from IFRC prepositioned stock in Dubai, based on the evolving needs, through the IFRC mobilization table. To date, the British Red Cross, Danish Red Cross, French Red Cross, and Canadian Red Cross have committed to most of the items, while the IFRC facilitated the transportation of the cargo via three flights (with a fourth in preparation) and one shipment by sea route. The flights were donated by UPS, Airbus, and IHC, standing partners of the IFRC network.

The IFRC's collaborative efforts involve close coordination with the LRCs and the ICRC in Libya, ensuring a well-structured approach encompassing planning, communication, resource mobilization, technical expertise, and accountability. Strategic meetings with Participating National Societies (PNSs) optimize support efforts.

As a core participant in inter-agency coordination under the United Nations Disaster Assessment and Coordination (UNDAC) team, the IFRC established thematic working groups, deployed additional personnel, and conducted a comprehensive multi-sectoral rapid assessment to guide recovery planning.

Membership Coordination

The IFRC is coordinating with the PNSs to ensure a comprehensive Federation-wide approach to supporting the LRCs, including planning, communications, resource mobilization, technical expertise, quality assurance, and accountability. Several meetings to date have been organized between member National Societies to share

information and mainstream the provided and expected support, including relief distribution and activities at the disaster site (involving the Turkish Red Crescent, Qatari Red Crescent, Kuwaiti Red Crescent, Emirates Red Crescent, Saudi Red Crescent, Tunisian Red Crescent, German Red Cross, Norwegian Red Cross, Russian Red Cross, French Red Cross, and Iran Red Crescent). These membership meetings continue to take place regularly to provide updates on the progress of the multilateral approach of PNSs supporting the LRCs in their response to the crises.

The Norwegian Red Cross (NRC) supported the LRCs with the rapid health assessment, in addition to scaling up the intervention of their two local mobile health teams in eastern Derna, namely Sousa and Qandulua. The NRC provided financial support for the LRCs to implement an MHPSS training on PFA and self-care, as well as support for MHPSS outreach activities in Derna. Hygiene promotion training and activities are also expected to be carried out.

Through the LRCs, the German Red Cross has implemented two Kit 15 systems (with a capacity of providing clean water for 15,000 people per day) for water purification of contaminated boreholes by the floods in Derna and is in the process of installing an additional two. Technical personnel were deployed to train the LRCs in operating the systems.

The Turkish Red Crescent (TRC) is providing support with an operational setup comprising a field kitchen, a mobile catering vehicle, and a communications vehicle that were deployed to facilitate essential services. Additionally, a dedicated emergency response team from the TRC is actively engaged in flood-affected areas, offering crucial assistance. In collaboration with the LRCs, various forms of aid have been provided, including food parcels, hygiene kits, clothing, personal protective equipment (PPE), as well as various essential household items, ensuring that the affected communities receive comprehensive support during this challenging period.

Movement Coordination

The IFRC continues to coordinate with the ICRC at the country level to support the LRCs with their response and will continue to closely coordinate with all Movement partners to ensure close alignment in support of the LRCs. The IFRC, ICRC, and LRCs convened for the two rounds of the mini-summit, to agree on having a coordinated approach in supporting the efforts of the LRCs.

In response to the recent devastating floods in Libya, the ICRC, in partnership with the LRCs, quickly provided aid to the affected communities. With a history of engagement in Libya since 2011, the ICRC has organised teams and essential supplies to assist flood survivors, particularly in the hardest-hit areas. They have been actively involved in critical activities, including managing mortal remains, reuniting families, and offering technical support for disaster management. Essential supplies like medicine, food, and household items are being delivered to the affected families, with a focus on supporting "Al Hawari" Hospital in Benghazi.

The ICRC is also providing support to the Ministry of Health by providing medications and covering operating costs for six PHC centers – two of them in Derna – with the rest in other affected areas. One month's supply of consumables/medications are being redirected from the Ministry of Health's twenty total PHCs supported by the ICRC across Libya to support the six PHCs in the affected area, in addition to two inter-agency emergency health kits (IEHKs) to be sent to the Derna PHC.

Looking ahead, the ICRC plans to continue its assistance efforts. This includes supporting primary healthcare centers, distributing aid to thousands of families, and providing emergency drinking water to 30,000 people. Long-term water repair projects are also being considered. In addition, the ICRC is exploring ways to extend support to hard-to-reach flood-affected areas, exemplifying its commitment to helping communities in need.

2.2 International Humanitarian Stakeholder capacity and response

International humanitarian stakeholders, led by UNDAC in-country with the IFRC's integral involvement, are demonstrating their robust response capacity to Libya's recent devastating floods. Working collaboratively, they have established thematic working groups and surged deployments, strengthening coordination with the LRCs. These efforts enable a comprehensive multi-sectorial assessment that builds on the UNDAC-coordinated multi-thematic rapid needs assessment (MTRNA) [findings](#), providing a solid foundation for early recovery and recovery planning.

The MTRNA is made possible through the support of valued partners such as the Danish Refugee Council, We World, Moomken Org, IOM, Première Urgence Internationale, Terre des Hommes, Norwegian Refugee Council, Intersos, Action Against Hunger, WFP, and UNFPA. This coordinated support has further enhanced the effectiveness of the response.

Moreover, the European Union (EU) Civil Protection Mechanism, activated on 12 September, drew significant assistance from eight EU member states, offering essential resources and contributing 5.7 million euros in funding. The Copernicus Emergency Management Service has also played a vital role, providing seven crucial maps to guide coordinated response efforts.

Together, 21 organizations, including seven UN agencies and 14 international and local NGOs, have intensified their efforts in the affected districts. This includes international search-and-rescue and emergency medical teams, in conjunction with non-governmental partners, all working diligently to assess and address the needs of flood-affected populations while prioritizing the delivery of effective and relevant humanitarian assistance.

3. Gaps in the response

The devastating floods in Derna have had varying impacts on different segments of the population, emphasizing the need for a tailored humanitarian response that considers various dimensions, including gender, age, disability, socioeconomic status, and access to safety. As per the rapid assessments carried out by the LRCs and the Libya Multi-Thematic Rapid Needs Assessment carried out by UNDAC, the following gaps were identified in order of priority:

Emergency Shelter and Essential Household Items: There is a significant gap in the provision of emergency shelter and essential household items to the affected population. Many displaced residents have lost their homes and belongings, and the majority of residential buildings along the riverbanks have been destroyed or are severely damaged. The disrupted market and financial systems further hamper the ability of affected households, particularly vulnerable and marginalized groups, to replace these lost items. Most displaced households have sought refuge in host communities (strong community and cultural cohesion), while others remain in community shelters and are grouped in designated shelters to mainstream humanitarian services. Nevertheless, this imposes security and privacy concerns (in Derna City, there are around 170 households-HHs).

Health and WASH: Access to medical services, including mental health and psychosocial support, is limited, particularly for individuals with chronic illnesses. The floods have damaged roadways, making it even more challenging for those in need of care to access healthcare facilities, at least those that continued to function after the floods damaged infrastructure and medical equipment. This is specific to the LRCs Derna Branch, which included polyclinics that used to provide several essential healthcare services to more than 500 patients per day.

The risk of waterborne diseases, vaccine-preventable outbreaks, and infectious hazards is high due to floodwater contamination. Hygiene items and drinking water continue to be in high demand in some affected areas. Furthermore, it is essential to provide support and counseling to the LRCs to ensure that they can make informed decisions while enabling them to undertake medium to long-term planning.

The MHPSS needs of the affected population are likely to intensify due to the significant distress and socioeconomic effects of the protracted humanitarian and protection situation, in addition to the ongoing collective grieving. First responders, who are primarily current volunteers within the LRCs, have been actively involved since the onset of the crisis and have firsthand experience of the daunting events that unfolded during those challenging times.

The catastrophic event created a major gap in MHPSS, which was confirmed by the LRCs leadership, the Ministry of Health, and in different interviews with healthcare providers in local PHCs, and surge emergency medical teams (EMTs). There are already several signs of severe distress in the different affected groups, including suicide attempts, self-harm, substance abuse, and anxiety. Addressing the gaps in services is crucial to meeting the escalating mental health needs of the Libyan population and mitigating the long-term impacts of the crisis, taking into account that Libya, as a country, already faces considerable deficiencies in mental health infrastructure and a severe shortage of mental health professionals, which could affect the provision of quality specialized MHPSS services.

Food Security and Livelihoods: Disruption of the local food supply chain and market systems has led to food shortages, making food security a pressing concern. Vulnerable groups, including marginalized and discriminated individuals, are at increased risk of food insecurity and malnutrition. Immediate food assistance, including ready-to-eat meals and nutritional support for infants and young children, is essential to address this gap. The price of food items has increased, the quantity of food in markets has decreased, and some essential food items are no longer available. Water selling points are difficult to reach and insufficient in number. Additionally, water is too costly, and water sources have been damaged due to the floods, though they are still operational.

Community Engagement and Accountability (CEA): There is a need to invest more to better support community needs, priorities, and context, and ensure ways of working collaboratively with people, including migrants speaking different languages, and communities by integrating meaningful community participation, timely, open, and honest communication, coordinated engagement, and mechanisms to listen and act on feedback throughout the response. This promotes positive accountability among communities and enables people to lead and shape changes in their lives and on their own terms.

These gaps highlight the urgent need for a comprehensive humanitarian response focused on addressing the immediate and potential needs of the affected communities, with a particular focus on vulnerable and marginalized groups. The response should prioritize the provision of emergency shelter, essential household items, medical assistance, psychosocial support, food assistance, and livelihood support to ensure the well-being and recovery of people impacted by the floods, in addition to those in less accessible areas.

Protection, Gender and Inclusion (PGI): Given the current capabilities and knowledge of the Derna Branch, in addition to the Benghazi headquarters, there is a need to enhance the capacity of the National Society's staff and volunteers, regarding PGI core concepts, as well as on safeguarding and prevention and response to sexual exploitation and abuse (PSEA) policies, in order to better meet the needs of the population in distress.

The need for an inclusive response is more important than ever given the extraordinary circumstances and the compounding problems facing the affected population.

OPERATIONAL CONSTRAINTS

1. Finance

Due to a shortage of physical Libyan dinars, the Libyan Central Bank has restricted the distribution of cash in the country, meaning that Libyan bank account holders can only access a fraction of their money. At the same time, access to foreign currency at the official exchange rate has been severely limited.

2. Access

Accessibility remains a significant operational challenge, mainly due to the extensive damage inflicted on infrastructure by the flooding. Although ongoing efforts are being made to restore access to isolated affected areas, the magnitude of the damage makes this a time-consuming task. Notably, the construction of a single route linking the two previously disconnected areas has been completed, but the terrain in this region is rugged and challenging. This presents additional difficulties for the affected communities, especially considering that all vehicles in the path of the floods have been rendered inoperable. Furthermore, there is a lack of available public transport services in Libya, exacerbating the transportation challenges. It is worth noting that this route may become impassable during rainy periods, as it traverses a valley, further complicating the accessibility to humanitarian and healthcare services.

3. Security

Although the overall security situation in Libya remains calm and without any active conflict, the general political turbulence in the country is seen as a tangible security tension that could have an immediate impact on humanitarian activities, including access to vulnerable groups and individuals. This is a major concern.

In recent years, Libya in general, including most of its regions, has remained calm and free of active conflict. However, safety and security risks are palpable. Security risks, such as kidnappings, crossfires, carjackings, armed robberies, detentions and arrests, and other petty crimes exist in the country, though the likelihood differs depending on the geographical location. Recent updates and assessments indicate that the south and west of the country are experiencing a high number of recorded security incidents, while in the north and east, the number of recorded incidents is decreasing.

Additionally, safety-related issues may arise due to damaged infrastructure such as roads, bridges, buildings, water supplies, and health facilities. Road safety is a significant concern due to road conditions, weather conditions, vehicle roadworthiness, and driving habits. Moreover, flooding has left many buildings and bridges in the affected areas unsafe for habitation and use.

4. LRCs Response Capacity

The LRCs, having suffered some losses to physical infrastructure and assets in the affected areas, including one destroyed branch (Derna), is operating from a temporary location (a school in Derna), and is expected to evacuate in the coming week. As the LRCs is pursuing its auxiliary role to the public authorities and its mandated role as an implementing partner for international and national organizations, this acute crisis has further stretched its financial and human resources. The capacity of the LRCs to scale-up this response is essential but also to recover its existing capacities at the branch level. Therefore, the IFRC is supporting the LRCs in coordination, technical, and logistical capacities to ensure the scaling-up of operations and response to this crisis, including having the necessary human resources (staff and volunteers) in place. Furthermore, the IFRC supports the National Society development and strengthening of the LRCs, including restoring, building, recovering, and improving its own capacities.

FEDERATION-WIDE APPROACH

This Emergency Appeal is an integral part of a comprehensive **Federation-wide approach**, which has been formulated in line with the response priorities of the LRCs and involves close consultation with all members of the IFRC contributing to the response efforts. The Operational Strategy outlined in this appeal aims to establish strong connections among all response activities, encompassing bilateral initiatives and domestically funded activities, and to leverage the collective capacities of all members within the IFRC network in the country (the German Red Cross and Norwegian Red Cross which are working under different modalities with the ICRC, the Turkish Red Crescent which is working through a government to government agreement, in addition to the Canadian Red

Cross and Danish Red Cross which operate in Libya through the IFRC under the ERU modality), with the ultimate goal of maximizing the collective humanitarian impact.

Furthermore, this approach fosters a spirit of shared leadership and collective humanitarian diplomacy. It seeks to actively engage the membership, aligning with the *Agenda for Renewal* objectives of enhancing the IFRC as a more effective platform for international coordination of emergency operations, collective representation, policy discussions, and National Society development and capacity strengthening. To reinforce the Red Pillar actions, the IFRC Cluster Delegation and MENA Regional Delegation in Beirut will provide expert membership coordination and support for effective Movement Coordination.

The Federation-wide funding requirements for this Emergency Appeal encompass all financial support to be directed to the Operating National Society in response to the emergency event. This includes the Operating National Society's domestic fundraising request, the fundraising appeals of supporting Red Cross and Red Crescent National Societies, and the funding requirements of the IFRC secretariat. This comprehensive approach ensures that all available resources are mobilized to address the urgent humanitarian needs of the affected communities.

The IFRC strategically prioritized a Federation-wide operational approach for the Libya Storm Daniel response, noting and recognizing the in-country partnership history of member partners of the LRCs, informing, advocating, and consulting with other partners on the operational updates, areas of support, and strategic collective planning and implementation. The IFRC has prioritized the safety and security of staff and deployed surge personnel/ERUs by scaling-up several measures to address and mitigate the risks and vulnerabilities confronting its staff in Libya.

OPERATIONAL STRATEGY

Vision

The IFRC is taking a key supportive coordinating role in the response, harmonizing the implementation support of member National Societies with an in-country presence and long-term programming. This coordination role will enable strong technical support in the emergency phase and in the transition to longer-term integrated resilience building. The IFRC, as per the mandate, is also supporting the LRCs in strengthening its capabilities and functions to be accountable and effective humanitarian actor supporting community response, recovery, and resilience.

The LRCs is the leading humanitarian organization in Libya responding to the needs of the most vulnerable people in times of crises and emergencies. In addition, the LRCs supports those affected in recovering from the effects of crises and emergencies according to the Fundamental Principles of the Red Cross and Red Crescent Movement using the latest methods in governance and accountability towards affected populations and donors.

This Emergency Appeal is linked to the strategic IFRC unified plan. In mid-2024, the country plan will reflect the long-term resilience activities, and at the end of 2024, the operation will transition to a one-country plan.

Anticipated climate-related risks and adjustments in the operation

In the short-term, low temperatures are expected, with night temperatures below 10°C, until mid-April. Spring rainfall creates the potential risk of flooding and landslides. The strategy should then focus on managing extreme summer temperatures which could pose a risk to the elderly, pregnant women, infants, and people whose health is compromised.

A vulnerability and risk assessment is required given the insecurity of the impacted population, the vast geography of the operation, climate change making seasonal hazards more difficult to anticipate, and ongoing and localized

hazards. The IFRC and LRCs will design their interventions with a climate-smart approach and integrate climate and disaster risk assessments, including environmental protection, throughout the planned operations.

Targeting

1. People to be assisted

This Emergency Appeal seeks to assist those most affected by the disaster, those whose homes were completely or partially destroyed; people whose livelihoods were affected, and those who evacuated their homes and are now displaced. Targeting will be based on assessments of household vulnerabilities while assistance will be based on the identified needs of the population, taking into consideration age, gender, and disability.

2. Considerations for protection, gender, and inclusion (PGI) and community engagement and accountability (CEA)


This response fully takes into account protection mainstreaming considerations, both in its design and in all its planned activities. However, additional attention and support will be provided to the LRCs in order to embed these ways of working and ensure that minimum standards are met in all areas of its work - both operational and support in the emergency response. While the focus will be at the branch level, this will inevitably encompass some targeted technical, operational, and institutional support to the LRCs headquarters office in Benghazi.

Community engagement and accountability (CEA) will be mainstreamed throughout the response, both in its design considerations and as a standalone focus of activities in support of the ongoing LRCs operations, especially in the absence of standard institutional CEA modalities. Ensuring strong participation and information sharing with affected populations and all stakeholders will be a core aim. This is particularly relevant for early disaster recovery as CEA is designed to shift towards community-based activities after focusing on deepening the understanding of the needs and capacity building of the National Society. CEA plans and tools will be developed for implementation at both branch and HQ levels of the LRCs, with an emphasis on selecting and developing appropriate communication channels with the targeted populations. The Multi-Sectoral Needs assessment and feedback from field workers will be the entry points to determine the means of engagement.

PLANNED OPERATIONS

Through the Emergency Appeal, the IFRC aims to support the LRCs in its response to Storm Daniel and its impacts. The IFRC's response strategy will be to help support 300,000 individuals and focus on the following areas:

INTEGRATED ASSISTANCE

 Shelter, Housing and Settlements	Female > 18:	Female < 18:	CHF 1,065,000
	Male > 18:	Male < 18:	Total target: 80,000 PP
Objective:	<p>Emergency phase: Communities in crisis-affected areas restore and strengthen their safety through the provision of emergency shelters and household items.</p> <p>Resilience building: Meeting medium-term shelter needs and urban resilience in line with the principles of dignity, protection, and an integrated approach.</p>		

Priority Actions:

1. Identify medium and long-term needs through the detailed multi-sectorial assessment to guide the response option and strategy, contributing to recovery.
2. Provide winterization and relief household items based on identified priorities, such as thermal blankets, kitchen sets, heating stoves/heaters, and bedding units/mattresses.
3. Conduct post-distribution monitoring (PDM) surveys on the support provided when the situation allows.
4. Replenish and pre-position shelter and essential household items distributed from existing stocks to maintain readiness to respond to crises and disasters.
5. Coordinate with Shelter Cluster agencies and local authorities on shelter strategy/solutions and actions.
6. Provide cash-based shelter support if possible and when appropriate.
7. Conduct a market assessment of the rental accommodation available in the targeted location.



Livelihoods

Female > 18:	Female < 18:	CHF 1,685,000
Male > 18:	Male < 18:	Total target: 300,000 PP


Objective:

Communities in crisis-affected areas and the displaced can cover their immediate food needs and protect and build resilient livelihoods.

Priority Actions:

- Assist in the initial recovery phase and recovery activities, including the strengthening of disrupted livelihoods among the affected population. These efforts will be based on the outcomes of assessments of food security and employment prospects conducted throughout both the response and recovery stages, while adhering to environmental considerations.
1. Provide food assistance in the form of bulk baskets in the initial phase and ensure longer-term food security through standard food parcels consisting of different rations.
 2. Replenish and pre-position standard and ready-to-eat food parcels distributed from existing LRCs stocks, to maintain response readiness.
 3. Facilitate a recovery orientation workshop with the LRCs to provide the appropriate actions.
 4. Enhance the LRCs capacity, improve their skills and train the volunteers involved in the response in livelihoods programming.
 5. Support affected households to protect their livelihoods and/or replace productive assets to recover their source of income (potentially through cash and voucher assistance based on a feasibility study).
 6. Conduct monitoring, evaluation, accountability and learning actions that ensure effectiveness and relevance of the

	<p>interventions, such as baselines, post-distribution monitoring and end lines.</p> <ol style="list-style-type: none"> 7. Provide the LRCs Livelihoods Unit with resources and technical support at the headquarters and branch level to develop livelihood interventions complementing the strategic priorities of the LRCs and the wider humanitarian response. 8. Integrate disaster risk reduction and climate change adaptation into livelihood protection and strengthening interventions to build the longer-term resilience of the affected population. 9. Capacity building of LRCs volunteers on the Livelihood and Integrated programming approach.
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 Multi-purpose Cash	Female > 18:	Female < 18:	CHF 4,260,000
	Male > 18:	Male < 18:	Total target: 32,000 HH

Objective:	Affected households are provided with unconditional multipurpose cash assistance to address their basic needs (life-saving and longer-term) in an accountable and participatory manner.
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Priority Actions:	<ol style="list-style-type: none"> 1. Coordinate on a national level with the national cash working group (CGW) and other humanitarian actors regarding cash and voucher assistance (CVA) programming (e.g., transfer value, installments). 2. Ensure continuous capacity assessments of financial service providers (FSPs), market assessments, and continued market monitoring (liquidity and resources in the affected areas). 3. Support registration of the affected population in a centralized database to guide future programming and avoid duplication. 4. Distribute multipurpose cash assistance for the affected population to meet their basic needs. 5. Monitor and evaluate CVA activities (PDM, endline). 6. Integrate risk communication and community engagement (key messages) for the affected populations into CVA programming and facilitate referrals to other LRCs services, such as health and protection. 7. Ensure the CVA response is based on a thorough understanding of community needs, priorities, and socio-cultural context, together with a CVA self-assessment for the LRCs. 8. Build the capacity of LRCs volunteers and staff on CVA and rapid market assessments (RAMs).
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HEALTH & CARE INCLUDING WATER, SANITATION, AND HYGIENE (WASH)

(MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT/COMMUNITY HEALTH)

 Health & Care (Mental Health and Psychosocial Support/ Community Health/Medical Services)	Female > 18:	Female < 18:	CHF 3,046,000
	Male > 18:	Male < 18:	Total target: 300,000 PP
Objective:	<p>Health and care services aim to preserve the short, medium, and long-term health, safety, and dignity of individuals and communities in the affected areas, including volunteers, and by strengthening the capacities of the LRCs in providing clinical care, public health in emergencies (PHiE), MHPSS, and engaging them through community health approaches like the CBHFA approach and care in communities as needed.</p>		
Priority Actions:	<p>Clinical services</p> <ol style="list-style-type: none"> 1. Rehabilitate and restore the clinical and pre-hospital care capacities of the LRCs Derna Branch. 2. Provide clinical care to vulnerable communities with support for the LRCs polyclinic operation. 3. Provide clinical care to remote vulnerable communities with the operation of two mobile health teams (MHTs). 4. Strengthen emergency clinical care capacity by providing equipment and training in basic emergency care. <p><u>Emergency Response Unit (ERU) – OPD Module:</u></p> <ol style="list-style-type: none"> 1. Strengthen and recover the LRCs outpatient department (OPD) services by handing over materials and equipment to be used in the temporary/rehabilitated polyclinic and by outreach mobile health teams. <p>Public Health in Emergencies (PHiE)</p> <ol style="list-style-type: none"> 2. Conduct community health awareness sessions via local community health committees targeting common public health risks. 3. Enhance the capacities of the LRCs to conduct first aid courses at the community level. <p>Mental Health and Psychosocial Support (MHPSS)</p> <p><u>Immediate assistance to meet the gaps in affected areas:</u></p>		

1. Support the provision of psychological first aid (PFA) and other tailored MHPSS services to the most vulnerable groups in the affected population.
2. Support the LRCs in conducting MHPSS assessments to identify the most vulnerable groups within the community and adapting the necessary MHPSS tools to provide the assistance required.

Deploying Emergency Response Unit (ERU) – MHPSS Module

1. Scale-up MHPSS activities for the initial three months of the response to meet the heightened demand.
2. Set up safe spaces for vulnerable groups to provide MHPSS activities, such as awareness and psycho-education sessions, community mobilisation activities, peer-group support sessions, recreational activities, etc. also where relevant in health facilities/outreach activities.
3. Build the capacity of volunteers on PFA while ensuring the integration of PGI.
4. Establish a system to care for volunteers at the HQ and branch level of the affected areas, including a peer support programme and supervision.


Strengthening the capacities of the LRCs to provide long-term MHPSS services to the affected population:

1. Build the capacity of staff and volunteers on PFA and related community-based MHPSS activities relevant to the needs identified.
2. Coordinate with both Movement and non-Movement partners and establish effective referral systems for MHPSS, reinforcing pathways to specialized mental health services.
3. Maintain the provision of community-based MHPSS services for the affected population based on multisectoral assessment results.
4. Mainstream MHPSS into health interventions and other relevant sectors/services conducted by the LRCs to the targeted population.
5. Ensure the sustainability of the caring for staff and volunteers system enhanced by the implementation of structured policies and procedures.
6. Support the LRCs in establishing a well-structured MHPSS unit capable of facilitating and supervising the implemented activities.
7. Establish a consistent supervisory system for staff and volunteers delivering MHPSS to a quality standard.

Community-based Disease Prevention

1. Conduct awareness sessions on communicable and non-communicable diseases and safe motherhood.

	<ol style="list-style-type: none"> 2. Build the capacity of LRCs volunteers through refresher trainings on community awareness and new agendas. 3. Encourage the affected population to seek advice to address concerns and stigmas. 4. Strengthen the promotion and advocacy of referral health services provided by LRCs polyclinics and MHTs. 5. Train staff and volunteers on community engagement, with a focus on behavioral change approaches.
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 Water, Sanitation and Hygiene	Female > 18:	Female < 18:	CHF 1,598,000
	Male > 18:	Male < 18:	Total target: 300,000 PP

Objective:	Reduce the risk of waterborne diseases and ensure the dignity of the affected population through the provision of inclusive WASH services.
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Priority Actions:	<p>Emergency assistance to cover basic needs through essential hygiene items and by facilitating access to drinking water.</p> <ol style="list-style-type: none"> 1. Undertake continuous and detailed assessments to better understand WASH needs in coordination with other sectors through the LRCs WASH team. 2. Provide access to lifesaving, secure, and safe drinking water supply via water trucking distribution of water bottles, complementing the installation of the M15 kit supported by the German Red Cross, etc. 3. Ensure that the target population has access to hygiene items. 4. Provide access and ensure the integration of lifesaving water, sanitation, hygiene, and waste management in designated shelters and facilities. <p>Mid-term support to cover basic WASH needs.</p> <ol style="list-style-type: none"> 1. Install water distribution points in different service areas and utilize water trucks to provide sustained access to life-saving safe drinking water supplies from desalination plants and by complementing the installation of the M15 kit supported by the German Red Cross. 2. Conduct hygiene promotion awareness sessions which include effective messaging to prevent diarrhoea, cholera, and other waterborne diseases with the relevant distribution of materials using IFRC hygiene promotion in emergency guidelines. 3. Ensure that the targeted population has continuous access to hygiene items by distributing essential WASH items, including hygiene kits, dignity kits, cleaning kits, culturally appropriate menstrual hygiene management (MHM) kits, and ensure community awareness and training of household water treatment, as needed.
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4. Assess WASH repair and rehabilitation needs at schools, PHUs, and community centres.
5. Repair, rehabilitate, and provide operational support, including both hardware and software interventions in schools, PHUs, and community centres, in close coordination with the Ministry of Education, Ministry of Health, and local authorities, in addition to developing the capacity of the LRCs.
6. Integrate PGI and CEA issues into WASH programming to guarantee safe, effective, and inclusive services.
7. Enhance the capacities of LRCs staff and volunteers on emergency WASH topics, including assessments, hygiene promotion, and different WASH interventions via various capacity-building modalities.
8. Integrate Kit 15 into LRCs contingency preparedness capabilities, complementing the ongoing efforts of the German Red Cross and LRCs with Kit 15.

Long-term support to cover WASH needs.


1. Define a transition and recovery plan to link the emergency response to development and sustainable targets.
2. Prioritise the provision and rehabilitation of WASH facilities in community facilities, such as schools and community centres.
3. Maintain hygiene promotion activities for the targeted population.
4. Review the WASH capacities of the LRCs and consider a WASH strategic direction with the feasibility of scaling-up WASH relevant to the country's context (in terms of HR at the HQ level, WASH volunteers, and the scale of implementation).
5. Enhance the WASH-related capabilities of National Societies by providing them with the necessary tools and equipment to strengthen their response capacity.
6. Coordinate WASH interventions with the relevant ministries, the General Company of Water and Wastewater (GCWW), and through clusters, technical working groups, and other agencies.

PROTECTION AND PREVENTION


(PROTECTION, GENDER, AND INCLUSION (PGI), COMMUNITY ENGAGEMENT AND ACCOUNTABILITY (CEA), MIGRATION, RISK REDUCTION, CLIMATE ADAPTATION AND RECOVERY, ENVIRONMENTAL SUSTAINABILITY, EDUCATION)


 Protection, Gender, and Inclusion	Female > 18:	Female < 18:	CHF 162,000
	Male > 18:	Male < 18:	Total target: 250,000 PP
Objective:	Ensure that dignity, access, participation, and safety (DAPS) is considered a safe and inclusive response by strengthening the PGI capacities of the LRCs, together with the mainstreaming of PGI		

	and its safeguarding in relevant technical sectors, and the strengthening of protection services.
Priority Actions:	<ol style="list-style-type: none"> 1. Include PGI in multi-sector needs assessments to ensure safe and equitable access to basic services, taking into account the different needs, based on gender and other diversity factors, such as the degree of marginalization, disability, and impairment. 2. Mainstream the PGI approach across the intervention with a focus on specific technical sectors. 3. Ensure that the LRCs is able to disaggregate data accordingly based on PGI, with a focus on gender, age, disability, and displacement. 4. Embed safe referral and feedback mechanisms into all activities, especially during the immediate, post-disaster recovery phase. 5. Strengthen RFL services, and community-based care and protection activities for unaccompanied and separated children, and for other persons with special needs. 6. Ensure that IDPs and migrants affected by the flooding are fully included in all service provisions. 7. Conduct regular, rapid community needs assessments to ensure an adequate and updated response modality. 8. Support the LRCs in establishing and operating humanitarian service points (HSPs) with functional referral systems that assist the affected population. 9. Ensure that staff and volunteers are made aware of safeguarding tools, mechanisms and reporting channels focused on PSEAH and child safeguarding. 10. Conduct trainings on LRCs and IFRC policies, including but not limited to general PGI, child safeguarding, and PSEA, amongst others. 11. Promoting in LRCS branches the PSEA policy finalized at the HQ, starting with Derna as the primary responder.

 Community Engagement and Accountability	Female > 18:	Female < 18:	CHF 320,000
	Male > 18:	Male < 18:	Total target: 300,000 PP
Objective:	Ensure the LRCs emergency response operations are built on a thorough understanding of the needs, priorities, and context while providing ways to closely collaborate with those affected by integrating meaningful community engagement, timely and transparent communications, and feedback mechanisms for an effective response.		


Priority Actions:	<ol style="list-style-type: none"> 1. Integrate CEA across the response so that staff and volunteers have the knowledge and capacity to effectively engage with communities. 2. Ensure the response is based on a thorough understanding of community needs, priorities, and the socio-cultural context, including preferred ways to receive information, participate, and give feedback. 3. Establish safe and accessible feedback and complaints mechanisms across all activities. 4. Disseminate and integrate the feedback and complaints mechanisms' standard operating procedures in the emergency response. 5. Conduct regular post-service satisfaction surveys. 6. Develop standardized templates for data collection across activities. 7. Train the concerned branches on CEA core concepts. 8. Conduct a lessons-learned workshop. 9. Actively engage with affected communities to ensure CEA early in the response.
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 Migration	Female > 18:	Female < 18:	CHF 0
	Male > 18:	Male < 18:	
Objective:	Reduce the vulnerabilities of both displaced and host communities by providing assistance and protection through existing community centres, HSPs, and mobile teams as well as finding durable solutions to ensure their safety and dignity for a resilient and sustainable future.		
Priority Actions:	<ol style="list-style-type: none"> 1. Support the LRCs with the registration of IDPs and returnees from the affected population. 2. Ensure the identification of the needs of migrants based on their displacement status. 3. LRCs to provide support in dead body management and the identification of non-Libyan migrants. 4. Provide basic services to migrants in nearby detention centers affected by the lack of resources due to the Derna floods. 		

 Risk Reduction, Climate Adaptation and Recovery	Female > 18:	Female < 18:	CHF 1,348,000
	Male > 18:	Male < 18:	Total target: 250,000 PP
Objective:	Proactively strengthen the resilience and capacities of communities through climate-smart community-based risk reduction actions informed by enhanced vulnerability capacity assessments (EVCAs), hazard awareness campaigns, and advanced planning.		

Priority Actions:	<ol style="list-style-type: none"> 1. Strengthen the capacity for disaster risk management by promoting and developing the abilities of staff and volunteers within the branches to engage in disaster risk reduction (DRR), resilience building, and climate change adaptation. 2. Mainstream climate-smart disaster risk reduction throughout all sectors (including WASH, migration, health, and cash). 3. Develop community hazard and risk awareness campaigns to prepare the community for future floods and other natural hazards. Can use cash as a modality to promote climate change adaptation approaches in the recovery. 4. Ensure that a comprehensive hazard, risk, and vulnerability assessment is completed to guide the response and early recovery (with health, shelter, PGI, and programs teams). 5. Enhance the capacity of the LRCs on DRR and risk management) as well as in resilience building at the community level. 6. Develop intervention scenarios and contingency planning with local communities together with testing.
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Enabling approaches

 National Society Strengthening	Female > 18:	Female < 18:	CHF 4,021,000
	Male > 18:	Male < 18:	
Objective:	<p>Reinforce the capacities of the LRCs HQ and branches to respond to the operation (repair structures and temporary operations basecamp) and enhance volunteer and staff competencies in preparedness and response, and continued service delivery in an inclusive manner.</p> <p>The LRCs responds effectively to the wide spectrum of evolving crises and its auxiliary role in DRR is well-defined and recognized.</p>		
Priority Actions:	<p>Disaster management and operational capacity of the LRCs to respond to emergencies: Response Capacity</p> <ol style="list-style-type: none"> 1. Strengthen and support the disaster management and response capacities of the LRCs and take critical actions to enable immediate service delivery, including establishment/support for the Emergency Operations Centre (EOC) and coordination. 2. Development of LRCs cash and voucher assistance (CVA) procedures and templates compatible with Movement-related counterparts. 3. Advocate for national legislation that further strengthens the auxiliary roles of the National Society utilizing humanitarian diplomacy efforts and dialogue with the relevant authorities. 4. Enable the LRCs to implement a branch plan of action based on PER assessments, adjusted as needed, to meet the ongoing priorities of the emergency operation. 5. Provide resources for critical DM needs across the National Society (HQ and branch level), including systems and procedures, 		

equipment, and HR based on the self-identified priorities and lessons learned from previous operations.

6. Develop an integration strategy for emergency response that incorporates and adapts existing procedures to transition to resilience and which aligns with the new LRCs Strategic Plan 2022-2025.
7. Provision of basecamp ERU support by the Italian Red Cross allowing the Derna branch to maintain provisions of humanitarian services in the emergency phase.

LRCs branch development

1. Support the LRCs HQ and branches to ensure that contingency planning, business continuity, and scenario planning are reviewed/updated as needed and relevant to the operational context.
2. Contribute to rebuilding and equipping the Derna branch, encompassing physical reconstruction—repairing and refurbishing the infrastructure that might have been damaged or deteriorated during the storm. This could involve renovating buildings, updating technological systems, and ensuring the structural integrity of the branch.


National Society systems and capacity strengthening

1. Equip the LRCs HQ and branches with the required infrastructure and equipment ensuring secure internet connectivity and data protection.
2. Equip the LRCs with the required VHF/UHF and VSAT equipment ensuring business continuity and disaster preparedness.
3. Support and strengthen the logistics capacity of the LRCs in terms of warehousing facilities and fleet, procurement, and overall supply chain management.
4. Support the LRCs to further strengthen its IM functions into comprehensive digitalized information management solutions.
5. Support the LRCs communications department with the relevant communications and IT equipment.
6. Support the LRCs with enhanced information management capabilities, including the creation of a database center.
7. Enhance financial management, reporting, accountability, and transparency through necessary systems and trained personnel.
8. Support human resources (HR) in view of LRCs support services (HR, IM, PMER, finance, and administration) as necessary for the response.
9. Support the LRCs in establishing an HR department as a crucial step in managing and developing the National Society's workforce.

Volunteer management

1. Strengthen the National Society's capacity in volunteer management, especially in emergencies.
2. Standardise the volunteer management system, including reimbursement, online database, and the training of volunteers.

	<ol style="list-style-type: none"> 3. Provide LRCs staff and volunteers with targeted MHPSS services to reduce the risk of negative social and mental health impacts from carrying out the response. 4. Develop well-being approaches to provide ongoing support to frontline personnel and other responders. 5. Ensure the duty of care of volunteers with insurance coverage, the provision of equipment, and protective clothing, and activation and expansion of the volunteer solidarity mechanism. 6. Establish a training center at the HQ level.
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	Coordination and Partnerships	Female > 18:	Female < 18:	188,000
		Male > 18:	Male < 18:	
Objective:	Ensure a well-coordinated emergency operation and availability of funding.			
Priority Actions:	<p>IFRC Membership</p> <ol style="list-style-type: none"> 1. Engage the IFRC membership to ensure a well-coordinated response to the floods. 2. Maintain a Federation-wide approach throughout the planning, implementation, monitoring, reporting, and evaluation of the operation. 3. Capture bilateral and multilateral support for the LRCs. 4. Ensure the funding and implementation of the IFRC appeal and regularly produce information materials, in close collaboration with IFRC regional offices as well as the Geneva headquarters SEP department. 5. Set and maintain membership coordination mechanisms to ensure a coordinated approach and combined effort to maximize both impacts and reach, with an integration of diverse thematic expertise. <p>Movement Coordination</p> <ol style="list-style-type: none"> 1. Strengthen collaborative efforts involving close coordination with the LRCs and ICRC in Libya, ensuring a well-structured approach. <p>Fundraising and Engagement with External Partners</p> <ol style="list-style-type: none"> 1. Mobilize outreach to a wide range of Movement and non-Movement partners, including governments, the private sector, foundations, high net-worth individuals, and the public across MENA and internationally. 2. Disseminate key messages with international partners, media agencies, and IFRC platforms in coordination with the communications surge to promote the Emergency Appeal. <p>Interagency Coordination</p>			

1. Support the existing engagement of the LRCs with country-level coordination structures, including the Humanitarian Country Teams, inter-agency coordination mechanisms, and various clusters/sector working groups that exist to ensure the identification of gaps and facilitation of collaboration at the national level.
2. Engage with coordination structures to guide assessments, gap analysis, and response.

Grants Management:

1. Ensure adherence to donor requirements and conditions.
2. Respond to donor queries and requests for clarification.
3. Ensure quality and timely reporting to donors.
4. Collaborate, through the LRCs, with UN agencies and other international humanitarian actors to identify priorities and establish country-level collaborations.

Humanitarian Diplomacy and Influencing

1. Support the LRCs in developing key humanitarian diplomacy messages containing components to influence, negotiate, communicate, and advocate as an integral part of the daily actions in and out of Libya.
2. Engage at the Brussels, Geneva, and New York levels with diplomatic missions to highlight the needs and concerns and align across the IFRC and with the ICRC to coordinate and support effective humanitarian diplomacy by National Societies with their governments on the Libya crisis.
3. Ensure quality assurance and accountability, including planning, monitoring, evaluation, reporting, information management, risk management, and CEA.
4. Reporting and monitoring of the operation will be carried out under IFRC monitoring and reporting standards. Regular updates will be issued during the operation’s timeframe, including a final report.



IFRC Secretariat Services

Female > 18:	Female < 18:	CHF 2,307,000
Male > 18:	Male < 18:	

Objective:

The IFRC is working as one organization, delivering what it promises to National Societies and volunteers, and leveraging the strength of the communities with whom it works as effectively and efficiently as possible. The Secretariat provides strategic orientation, facilitation, and coordination considering the long-term positioning and further capacity development of the National Society. The IFRC Secretariat will facilitate the channeling of global resources to sustain the localized response and recovery efforts.

Priority Actions:

Human Resources

1. Ensure that staffing needs are met through timely and fast-tracked recruitment, immediate surge support, contract management, and HR support to the delegation and operation.
2. Ensure the safety of IFRC personnel through acceptable and reliable protective measures and enhanced access to affected persons and communities.

Resource Mobilisation

1. Coordinate a resource mobilization strategy to make sure that outreach to Movement and non-Movement partners, as well as the tracking of pledges and development of fundraising materials, is shared effectively and efficiently.

Safety and Security

1. Update, based on LRCs and IFRC security arrangements, and ensure compliance with minimum security requirements and duty of care, including specific security guidelines for select countries as needed. The IFRC implements several measures to address and mitigate the risks and vulnerabilities confronting its staff in Libya. These measures include:
 - Conducting routine security risk assessments to identify and proactively address the hazards faced by its personnel. Comprehensive, MSR-approved strategies are in place for Derna and Benghazi.
 - Maintaining close and active communication with local authorities to remain abreast of the evolving security environment and to effectively coordinate its activities.
 - Fostering strong ties with various humanitarian stakeholders, including the LRCs, ICRC, and UN, is integral to our efforts.
 - Different SOPs in place to increase country delegation preparedness.

Administration and Corporate Services

1. Ensure, together with the LRCs, the effective and efficient provision of administrative and welcome services (transport, accommodation, visas, IT, office facilities, etc).
2. Oversee business continuity at the IFRC Libya Country Delegation and provide advice to the National Society, as needed, including support from the regional office as needed.

Logistics and Supply Chain Management

1. Support, in coordination with the LRCs, the overall coordination and management of the country and regional supply chain activities in line with the Federation's global logistics strategy.
2. Ensure that procurement objectives are met with the aim of optimising service quality and upholding the best value for money principle, making use of the suspension of financial challenges as some are time-limited.

3. Ensure that the procurement of items is done according to best practices which follow procedures and IFRC standards, in close coordination with the IFRC Regional Global Humanitarian Services & Supply Chain Management (GHS & SCM) unit, utilizing if required, IFRC GHS & SCM structures and existing regional and global arrangements.
4. Support rapid light fleet deployment for IFRC/National Society operations to facilitate the movement of operational staff through the provision of IFRC VRP services or provision of locally rented vehicles.

Communications

1. Develop a communications and visibility action plan that aligns with the priorities identified in this Operational Strategy, including key messages that showcase the work of the LRCs and the Red Cross Red Crescent Movement.
2. Enhance the capacity of the LRCs communications team at HQ and branch levels through capacity building (digital storytelling, media relations, strategic communications, etc.), and provide them with the necessary equipment and means.

Quality Assurance and Accountability, including Planning Monitoring, Evaluation, Reporting, Information Management, and Risk Management (RM)

1. Share reports with relevant partners and donors promptly and disseminate them among appropriate stakeholders for revisions, approvals, and communication with donors and partners.
2. Mainstream data collection, capture knowledge and thoroughly document and communicate the lessons learned.
3. Capture evidence-based good practices across several thematic areas and undertake real-time evaluations to guide adjustments to the response strategy.
4. Create a risk management matrix and register and update them regularly for the disaster.
5. Create a comprehensive digitalized monitoring system that links CEA, information management, and PMER with the use of data collection applications and analysis platforms to provide accurate and timely analyses to guide decision-making.

Risk management

The IFRC took proactive steps to strengthen its assurance model throughout the operation. These steps include enhancing its second line function through the addition of risk management expertise. Informed by the Global Risk Management Policy, the IFRC has designed a risk management plan for the operation which guides the IFRC approach to identifying, assessing, managing, and monitoring the risk landscape.

Threats	Situation	Risk	Mitigation
Direct or indirect violent attacks	Although the hazards and risks are lower compared to previous years, in the flood operations area, there are no or limited direct threats.	Low	Access and acceptance of the LRCs is strong. Area-specific security risk assessments are undertaken, and risk mitigation measures are put in place. Security regulations and procedures will be strictly followed.
Pandemic/ outbreak	Derna remains at high risk from the COVID-19 pandemic and acute watery diarrhea (AWD), with a large amount of its population in temporary and/or crowded accommodations.	Moderate	Apply the necessary health and hygiene practices, and consume safe food and water (bottled water, well-cooked meals), with the use of personal protective equipment, including sanitization fluids and face masks, available for staff and volunteers. All deployed staff are required to be fully vaccinated against COVID-19 and have up-to-date routine immunizations.
Stress	Libya can be a moderate to high-pressure and complex operating environment, and this can take a toll on members of the deployed personnel in the country.	Moderate	Ensure that all staff are aware of the availability of the psychological support programme (stress counselors) for them and adhere to rest and relaxation, and annual leave regulations.
Institutional risks	The LRCs is going through leadership and organizational changes, that may influence the availability of information, and sharing of data and may raise questions and concerns by partners and donors to which IFRC will have to respond.	High	Continue to maintain key messages that address the questions and reaffirm the humanitarian mandate of the LRCs. Investigate reported cases and explain the advantages of the role of the LRCs as the focal point between humanitarian actors and government bodies.
Lack of access	International staff may have limited or no access to visit Libya or some field locations of the response activities due to the impact of extreme weather and other factors affecting the routes.	Moderate	The Government of Libya is expediting security clearance for international staff following the floods. Planning for field visits will take into account the risks. Ensure that donors are aware of possible challenges to access and, therefore, to reporting on field projects.

Safeguarding (Child Safeguarding and PSEA)	<p>Forms of abuse, particularly sexual abuse and exploitation are heightened in the presence of power imbalances. Emergencies cause a breakdown in the protective social mechanisms and norms that govern behaviors, threaten basic livelihoods, and increase food insecurity, causing existing power inequalities (around gender, race, age, sexuality, and ethnicity) to be reinforced, with children and women being particularly vulnerable. The control of resources, services, information, and opportunities (which humanitarian workers often have or are perceived to have) is also a form of power and is open to abuse by humanitarian workers, especially those who make decisions about who can access aid or services, when they can access them, and how often.</p>	Moderate	<p>The LRCs has recently adopted PSEA and child safeguarding policies and is currently working with different partners to strengthen safeguarding systems, including handling sensitive complaints through the complaints and feedback mechanism, investigations, and survivor support. IFRC policies, including a confidential Integrity Line, provide the mechanism for reporting and follow-up.</p>
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Safety and Security

The IFRC’s security plans will apply to all IFRC staff throughout the operation. A zone-specific security risk assessment will be conducted for any operational area should any IFRC personnel deploy there, and risk mitigation measures will be identified and implemented. All IFRC personnel must, and Red Cross Red Crescent (RCRC) staff and volunteers are encouraged, to complete the IFRC Stay Safe e-learning courses, i.e., Stay Safe 2.0 Global Edition Level 1-3.

Approved Minimum Security Requirements (MSR) are established for Derna

Approved minimum security requirements (MSR) are in place for Derna and Benghazi. A security coordinator and national security officer are present in the region, as well as the Head of the IFRC Delegation, who holds primary responsibility for security in the country.

A security framework was set up with the LRCs with a dedicated security staff to monitor the situation and ensure the safety and security of members’ personnel, as well as business continuity, including communications, accessibility, and risk management. Independent means of communication, such as SAT phones, a VSAT system, and additional communications equipment are on their way to Libya. An adequate fleet of vehicles is ready and available to transport all staff to the relocation points should the need arise. Additionally, comprehensive check-in protocols are established for all staff members, ensuring their safety and well-being.

Quality and Accountability

As part of the IFRC’s mandate to ensure quality and accountability, measures are in place at the National Society level; and with the rise of emergencies in the MENA region, the IFRC globally, regionally, and at the country level, has tailored its structure and strategy into more valuable and accountability-focused approaches by creating a coherent, complementary, and context-relevant system as a fundamental and critical requirement for National Societies. Within this context, several priorities surfaced in Libya’s Daniel Storm response:

Performance and Quality Assurance

Will be mainstreamed throughout all operations. Complementarity between information management, results monitoring, evaluation, reporting, risk management and community engagement will be ensured to achieve quality programming and accountability towards communities.

1. Creating an Efficient Monitoring System

The IFRC and its partners will support the LRCs in creating an efficient, effective, and practical monitoring system to make sure that practical indicators are identified, appropriately verified, documented, and communicated to relevant LRCs units and partners, as well as the public, when relevant.

2. A Federation-wide Approach in Coordination with the ICRC

This Emergency Appeal is an opportunity to reaffirm the need for a collective vision of the Federation and the contributions of its members in response to the acute crisis and the need to regularly have coherent, consistent, and quality data on the agreed indicators.

The Federation-wide approach will be coordinated in assessments, planning, monitoring, and data management among all Federation partners for better planning, decision-making and resource mobilization. With and through the LRCs, the Federation partners will reinforce knowledge creation, documentation of good practices, and corrective actions and strategies, where appropriate.

This Federation-wide approach, in coordination with the ICRC, will provide a comprehensive overview of the Red Pillar's collective response to the Storm Daniel operation with a general objective of serving as a positioning tool where all non-confidential activities of the RCRC Movement in Libya will be well described while presenting the collective response of the RCRC Movement. Therefore, the mechanism aims to enhance coordinated strategic decision-making for strong advocacy with other humanitarian actors while bringing more resources to the ongoing work of National Societies across the region.

3. LRCS Capacities Strengthened

Federation partners will ensure that the LRCs has the relevant resources and capacities to adhere to data management and reporting requirements, as well as the ability to generate knowledge and create a monitoring and evaluation framework.

4. PGI and Safeguarding

The LRCs has developed policies on PSEA, child safeguarding and protection, and whistleblower protection, and have in place a code of conduct that is signed by staff. The IFRC deployed surge personnel and working staff to conduct mandatory training to ensure adherence to the relevant policies.

5. Federation-wide Monitoring and Reporting

Federation-wide monitoring and reporting have been launched and will be adopted across all countries and Federation partners, with a harmonized list of indicators, regularly collected and reported to provide a complete picture of the IFRC's network solidarity and response efforts. Regular internal reporting will be maintained while adhering to IFRC standards in external reporting. The IFRC PMER and IM teams will engage with all operating National Societies, for consultation and support in establishing/maintaining the necessary systems and practices for regular monitoring. Evaluation and learning will be secured by conducting a cross-country final evaluation per country, and if feasible, Federation-wide, cross-country lessons-learned workshops.

The Federation-wide list of indicators, defined for the initial phase of the operation, is as follows (the list has been updated and will include new indicators as the operation evolves):

Sector/Area	Federation-wide Indicators	Target
Health	Number of LRCs Derna branches with clinical and prehospital care rehabilitated	300,000
	Number households assessed through MSNA	
	Number of individuals reached through the LRCs polyclinic operation and two mobile health teams (segregated by source of service)	
	Number of emergency clinical care units equipped and strengthened	
	Number of volunteers trained in PFA and other MHPSS trainings	
	Number of individuals who received mental health and psychosocial services from the LRCs	
	Number of polyclinics and outreach mobile health teams equipped	
	Number of people reached with health promotion activities related to CD, NCD management, and safe motherhood in emergencies	
	Number of staff and volunteers trained on community awareness and community engagement approaches	
WASH	Number of households assisted with access to lifesaving and secured safe drinking water, sanitation, hygiene, and waste management (segregated by service)	300,000
	Number of people reached with hygiene promotion and awareness sessions	
	Number of households receiving essential WASH items (segregated by item)	
	Number of facilities (Schools, Healthcare, community centres, etc.) supported with improved and rehabilitated WASH services and waste management	
	Number of LRCs staff and volunteers who have received training and capacity building on emergency WASH topics	
Shelter, Housing, and Settlements	Number of relief items distributed (thermal blankets, kitchen sets, stoves/heaters, bedding units/mattresses) segregated by item.	80,000
	Number of relief items replenished (thermal blankets, kitchen sets, stoves/heaters, bedding units/mattresses) segregated by item.	
	Number of people reached with rental assistance	
	Percentage of people assisted reported receiving relevant assistance in a dignified and safe manner	
Livelihoods and Food Security	Number of food parcels distributed (bulk baskets and food parcels)	300,000
	Number of LRCs volunteers and staff trained on livelihoods programming	
	Number of cash instalments distributed to people affected taking part in CFW	
Multi-Purpose Cash	Number of individuals and households benefitting from MPCA assistance	32,000
	Number of LRCs volunteers and staff trained on CVA and RAM	

Protection, Gender, and Inclusion	Number of staff, and volunteers trained on PGI, safeguarding (including tools, mechanisms, and reporting channels focused on PSEAH and safeguarding)	250,000
	Number of referrals to specialised protection services by National Societies	
	Percentage of activities with PGI mainstreamed minimum standards considered	
Migration	Number of Humanitarian Service Points established and operated effectively	
	Number of people reached through Humanitarian Service Points (migrants and displaced people)	
	Percentage of IDPs and returnees registered with the support of the LRCs	
	Number of assessments conducted to identify migrant and displaced population-specific needs	
Community Engagement and Accountability	Number of feedback comments collected, disaggregated by sex, age, and disability	300,000
	Percentage of project activities that have successfully integrated and implemented safe and accessible feedback and complaints mechanisms	
	Percentage of staff, volunteers, and leadership, trained on CEA (disaggregated by staff, volunteers, and sex)	
	Number of activities/interventions that are followed by satisfaction surveys	
	Number of developed functional, and accessible feedback and complaints mechanisms	
Risk Reduction, Climate Adaptation and Recovery	Number of individuals trained on disaster risk reduction-related areas (vulnerability and capacity assessment or climate change adaptation, first aid, contingency planning, or emergency response)	250,000
	Number of early warning systems and early action mechanisms developed	
National Society Strengthening	Number of volunteers and staff trained on disaster management and response capacities to enable immediate service delivery	
	Number of volunteers and staff trained in terms of HR, CEA, PMER, Finance, and IM	
	Number of branches implementing a Branch Plan of Action based on the PER assessment	
	Percentage of the rehabilitation of the Derna branch achieved	
	Number of branches and HQ equipped with communications equipment, logistics capacity strengthening, DM needs, and IT (segregated by service/support)	

VM	Number of volunteers recruited and trained with induction or in-depth sectoral training	
	Number of volunteers insured and equipped	
	Number of volunteers and staff who benefitted from MHPSS services	
Coordination and Partnerships	Number of Movement coordination meetings organised and/or attended where updates are provided to Movement partners	
	Number of external partners coordination meetings organised and/or attended	

FUNDING REQUIREMENT

Federation-wide funding requirement*

<p>Federation Wide Funding Requirement including the National Society domestic target, IFRC Secretariat and the Partner National Society funding requirement</p> <p>25 million CHF</p>	<p>IFRC Secretarian Funding Requirement in support of the Federation Wide funding ask</p> <p>20 million CHF</p>
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Breakdown of the IFRC secretariat funding requirement

**For more information on the Federation-wide funding requirement, refer to the section: Federation-wide Approach*



OPERATIONAL STRATEGY

MDRLY005 - Libya
Libya Storm Daniel

FUNDING REQUIREMENTS

Planned Operations	13,485,000
Shelter and Basic Household Items	1,066,000
Livelihoods	1,685,000
Multi-purpose Cash	4,260,000
Health	3,046,000
Water, Sanitation & Hygiene	1,598,000
Protection, Gender and Inclusion	162,000
Education	0
Migration	0
Risk Reduction, Climate Adaptation and Recovery	1,348,000
Community Engagement and Accountability	320,000
Environmental Sustainability	0
Enabling Approaches	6,516,000
Coordination and Partnerships	188,000
Secretariat Services	2,307,000
National Society Strengthening	4,021,000
TOTAL FUNDING REQUIREMENTS	20,001,000

all amounts in Swiss Francs (CHF)

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Reference



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