



EGYPT
RAPID RESPONSE
REFUGEES
2023

23-RR-EGY-59027

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PART I – ALLOCATION OVERVIEW

Reporting Process and Consultation Summary:

Please indicate when the After-Action Review (AAR) was conducted and who participated. N/A

Due to logistical difficulties and scheduling conflicts, it was not possible to organize an in-person AAR. Agencies were consulted individually throughout the reporting period and requested to share narratives on overall results and impact, people reached figures and added value of the CERF-funded assistance.

Please confirm that the report on the use of CERF funds was discussed with the Humanitarian and/or UN Country Team (HCT/UNCT). The report was discussed among concerned agencies Yes No

Please confirm that the final version of this report was shared for review with in-country stakeholders (i.e. the CERF recipient agencies and their implementing partners, cluster/sector coordinators and members and relevant government counterparts)? Yes No

1. STRATEGIC PRIORITIZATION

Statement by the Resident/Humanitarian Coordinator:

The magnitude of displacement within Sudan and into neighbouring countries continues to increase since the devastating conflict broke out in mid-April 2023. As the conflict has continued to evolve, the Sudan situation has become one of the largest and most acute protection crises in the world. By April 2024, more than 8.6 million people had been forcibly displaced; including over 6.6 million within Sudan, 1.8 million to neighbouring countries, and over 506,000 to Egypt.

The primary strategic objectives for the CERF allocation in Egypt were met; the sector was able to rapidly respond to the most urgent needs in terms of WASH, protection, multipurpose cash, health, GBV and SRH, while enhancing the capacity of localized interventions and using this operational momentum to raise additional donor money. Aside from the urgent need of relief assistance, provisions for the immediate identification of persons at heightened protection risks were critical, and the CERF fund enabled an immediate increase of registration capacities to identify protection needs, access to new arrivals in need of critical GBV services, enhanced food security and protection, lifesaving cash assistance to the most vulnerable, strengthened health services, and essential WASH services.

Overall the fund has strategically supported the humanitarian response capacity in Egypt and enhanced inter-agency preparedness, coordination of response and recovery efforts.

CERF's Added Value:

The contribution of CERF was crucial in supporting UNHCR to expand its registration capacity, upgrade the Infoline service, and provide emergency cash assistance (ECA) for newly arrived Sudanese. With thanks to CERF and other donors, UNHCR was able to increase its registration staff and expand the reception infrastructure to the benefit of all those approaching UNHCR seeking international protection in Egypt. Key findings from surveys concluded an improvement in the overall food security levels of the beneficiaries compared to July baseline results after receiving WFP cash assistance for at least 3 months. Further, the provision of cash assistance is expected to have a positive impact on local economies and the development of national markets, as it will contribute in activating the economy through expenditure and financial exchanges. Through the CERF funds, UNICEF ensured timely interventions to support populations coming from Sudan, reaching more than 250,000 individuals and around 100,000 members from the host community, and securing immediate access to safe and clean water. UNFPA and GBV partners reached 9,300 Sudanese new arrivals who were seeking

support for comprehensive GBV and reproductive health services. WHO catalysed a second-tier response that supported health services capacity of local authorities.

Did CERF funds lead to a fast delivery of assistance to people in need?

Yes Partially No

CERF funds were immediately applied for food, emergency cash assistance, and cases of health emergencies. This modality directly improved food security levels and health access of the targeted beneficiaries.

Did CERF funds help respond to time-critical needs?

Yes Partially No

CERF funds responded to time critical needs efficiently.

Did CERF improve coordination amongst the humanitarian community?

Yes Partially No

While CERF partially contributed to the overall Sudan RRP interventions and improved coordination among partners due to the rapid disbursement of funds, RRP partners also gratefully acknowledge government donors, private donors, charities, and other organizations for the majority of contributions to the response.

Did CERF funds help improve resource mobilization from other sources?

Yes Partially No

The CERF funding allowed the UN to address life-saving needs, and, in addition to CERF, the UN and Sudan RRP partners managed to mobilize US\$ 57,937,943 in 2023 for Egypt. The results achieved with CERF funding strengthened the case made to the respective donors, and therefore contributed to catalysing additional funding.

Considerations of the ERC's Underfunded Priority Areas¹:

With regards to the ERC's Underfunded Priority Areas, CERF funds helped the UNCT kick-start an emergency response, bolster under-resourced crises, and implement programmes to their full extent. The projects successfully enhanced the provision of Minimum Initial Services Package (MISP) for SRH in crisis with a focus on providing integrated GBV-SRH service for persons affected by Sudan crisis. It also enabled specialized protection and assistance services to affected populations, namely registration and cash assistance. The UNCT ensured that all vulnerable persons with disabilities were able to access all the services and activities listed in these projects. All identified persons with disabilities for cash distributions received priority access at the distribution sites.

Table 1: Allocation Overview (US\$)

Total amount required for the humanitarian response	114,000,000
CERF	5,000,105
Country-Based Pooled Fund (if applicable)	N/A
Other (bilateral/multilateral)	57,937,943
Total funding received for the humanitarian response (by source above)	62,938,048

¹ In January 2019, the Emergency Relief Coordinator identified four priority areas as often underfunded and lacking appropriate consideration and visibility when funding is allocated to humanitarian action. The ERC therefore recommended an increased focus on these four areas to ensure that they be given due consideration by RC/HCs and HCTs/UNCTs when prioritizing life-saving needs for inclusion in CERF requests. These areas are: (1) support for women and girls, including tackling gender-based violence, reproductive health and empowerment; (2) programmes targeting disabled people; (3) education in protracted crises; and (4) other aspects of protection. While CERF remains needs based, the ERC will be looking for country teams to prioritize projects and mainstreamed activities that systematically and effectively address to these four historically underfunded areas. Please see the questions and answers on the ERC four priority areas [here](#).

Table 2: CERF Emergency Funding by Project and Sector/Cluster (US\$)

Agency	Project Code	Sector/Cluster	Amount
UNFPA	23-RR-FPA-024	Protection - Gender-Based Violence	373,981
UNFPA	23-RR-FPA-024	Health - Sexual and Reproductive Health	76,598
UNHCR	23-RR-HCR-019	Protection	1,100,000
UNHCR	23-RR-HCR-019	Multi-Purpose Cash	400,000
UNICEF	23-RR-CEF-032	Water, Sanitation and Hygiene	599,526
WFP	23-RR-WFP-025	Multi-Purpose Cash	1,700,000
WHO	23-RR-WHO-024	Health	750,000
Total			5,000,105

Table 3: Breakdown of CERF Funds by Type of Implementation Modality (US\$)

Total funds implemented directly by UN agencies including procurement of relief goods	4,298,096
Funds sub-granted to government partners*	283,889
Funds sub-granted to international NGO partners*	0
Funds sub-granted to national NGO partners*	229,830
Funds sub-granted to Red Cross/Red Crescent partners*	188,290
Total funds transferred to implementing partners (IP)*	702,009
Total	5,000,105

* Figures reported in table 3 are based on the project reports (part II, sections 1) and should be consistent with the sub-grants overview in the annex.

2. OPERATIONAL PRIORITIZATION:

Overview of the Humanitarian Situation:

Hostilities erupted in Sudan on 15 April 2023, forcing people to flee in search of safety, in addition to 3.7 million who had already been displaced within the country. Many are also fleeing across the border, with most seeking refuge in neighboring Egypt and Chad. The number of casualties inside Sudan is increasing. Those arriving in Egypt are seeking basic services such as food and shelter and many are surviving on gifts and donations. They face great protection risks and an increased likelihood of resorting to negative coping strategies. Due to the collapse of the Sudan's banking system, new arrivals report having no access to cash rendering them helpless at the border and unable to pay for transportation and basic needs, which adds to their vulnerability, and cash support has been identified as a critical need by refugees as most Sudanese arrive in Egypt having exhausted their resources. Cash assistance was determined to be the most suitable modality for people in urban and peri-urban settings as well as those on the move. This allows people to make their own choices about their priority needs. Moreover, registration of new arrivals also facilitates access to much needed humanitarian assistance and protection services.

Operational Use of the CERF Allocation and Results:

This CERF allocation helps agencies address the immediate needs of the most vulnerable over six months. The country team provides a multi-sectoral response directly targeting around 320,000 people, including refugees and host communities. Covering multisectoral needs for cash spanning protection, gender-based violence (GBV), food security, housing, and other areas, WFP works with community leaders and community-based organisations to provide cash assistance for food and nutritional needs. Both WHO and UNFPA are enhancing the provision of the Minimum Initial Services Package (MISP) for Sexual and Reproductive Health (SRH) in crisis with a focus on providing integrated GBV and SRH service provision for persons fleeing from the Sudan conflict to Egypt and host communities, through the existing network of public health facilities and the safe spaces respectively. UNHCR offers registration of new arrivals to facilitate access to humanitarian assistance and protection services. This includes the registration of around 66,000 new arrivals from Sudan, including Sudanese and third country nationals.

People Directly Reached:

The highest figure reported for achieved targets within the refugee population was verified by the WASH sector based on reports of official entries from Sudan, amounting to 253,781 refugees. Additionally, host communities reached by WHO and UNFPA projects totalled 74,511, which when added to the refugee population reached, amount to 328,292 people directly assisted with CERF funding. While there may have been some overlap between the host population served by WHO and UNFPA, specifically those accessing vaccination and basic health care services in PHC and hospitals, mental health, psycho-social support, sexual & reproductive health and NCD medical care; and women- and girl-friendly safe spaces and/or centres respectively, they were counted separately due to their different geographic locations and the distinct services they were provided that likely targeted separate communities. Therefore, overlap is assumed to be minimal. WFP reached more than 14,000 people with multipurpose cash assistance for urgent food and other needs.

People Indirectly Reached:

An estimate of 2,013,000 people have or will indirectly benefit from the CERF allocation. As UNFPA's project has reached more than 1,000 women through CVA, assuming each beneficiary has an average of 2-3 children or family members, it would have indirectly benefited around 2,000 - 3,000 children or family members, protecting them from potential risks. With thanks to CERF and other donors, UNHCR was able to increase its registration staff and expand the reception infrastructure to the benefit of all those approaching UNHCR seeking international protection in Egypt. As a result of these enhancements, in 2023 UNHCR Egypt was able to significantly upscale and newly register 200,015 refugees and asylum-seekers. The community of Aswan city as well as in Karkar Valley Village in addition to the communities of Qustel and Arqeen have benefited from the WASH interventions introduced by UNICEF. Finally, the governorate of Aswan has an estimated population density of 1,632,000 million people expected to indirectly benefit from an enhancement of health services for communicable and non-communicable diseases, increases referral services capacities, in addition to increased capacities in mental and psychological healthcare services. In addition to an estimated 1,78,000 under 5 children that benefit from the enforcement of vaccination coverage.

Table 4: Number of People Directly Assisted with CERF Funding by Sector/Cluster*

Sector/Cluster	Planned					Reached				
	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Health	79,231	48,095	31,210	30,986	189,522	92,336	46,759	32,750	22,28	193,533
Health - Sexual and Reproductive Health	1,600	0	400	0	2,000	3,723	13	130	1	3,867
Multi-Purpose Cash	9,744	5,489	5,891	5,969	27,093	10,873	5,114	7,234	4,171	27,391
Protection	20,040	20,925	12,057	12,906	65,928	21,968	17,078	13,297	13,657	66,000
Protection - Gender-Based Violence	7,470	0	400	130	8,000	28,057	107	2,361	40	30,565
Water, Sanitation and Hygiene	90,585	57,915	61,915	39,585	250,000	91,955	58,791	62,851	40,184	253,781

* Figures represent best estimates of people directly supported through CERF funding. Disaggregation by sex and age represents women and men ≥18, girls and boys <18.

Table 5: Total Number of People Directly Assisted with CERF Funding by Category*

Category	Planned	Reached
Refugees	250,000	253,781
Returnees	0	0
Internally displaced people	0	0
Host communities	70,000	74,511
Other affected people	0	0
Total	320,000	328,292

Table 6: Total Number of People Directly Assisted with CERF Funding*

Sex & Age	Planned	Reached	Number of people with disabilities (PwD) out of the total	
			Planned	Reached
Women	119,705	126,624	13,587	14,491
Men	84,459	83,889	8,688	9,448
Girls	69,195	71,059	9,287	9,708
Boys	46,641	46,720	5,938	6,359
Total	320,000	328,292	37,500	40,006

PART II – PROJECT OVERVIEW

2. PROJECT REPORTS

3.1 Project Report 23-RR-FPA-024

1. Project Information			
Agency:	UNFPA	Country:	Egypt
Sector/cluster:	Protection - Gender-Based Violence	CERF project code:	23-RR-FPA-024
	Health - Sexual and Reproductive Health		
Project title:	Provision of life saving gender-based violence and sexual and reproductive health services for Sudanese new arrivals in Egypt and host communities affected by the Sudan crisis through Women and Girls Safe Spaces in Aswan and Greater Cairo		
Start date:	01/06/2023	End date:	30/11/2023
Project revisions:	No-cost extension <input checked="" type="checkbox"/>	Redeployment of funds <input type="checkbox"/>	Reprogramming <input type="checkbox"/>
Funding	Total requirement for agency's sector response to current emergency:	US\$ 6,645,000	
	Total funding received for agency's sector response to current emergency:	US\$ 445,000	
	Amount received from CERF:	US\$ 450,579	
	Total CERF funds sub-granted to implementing partners:	US\$ 263,922	
	Government Partners	US\$ 0	
	International NGOs	US\$ 0	
National NGOs	US\$ 263,922		
Red Cross/Crescent Organisation	US\$ 0		

2. Project Results Summary/Overall Performance

Through this project funded by CERF, UNFPA and its partners enhanced the provision of comprehensive GBV-SRH services for refugees and host community members affected by the Sudan crisis, especially women and girls. The project reached 19,511 people to have access to 10 of the UNFPA-supported Women and Girls Safe Spaces (WGSS) located in Greater Cairo (4), Aswan (2), Sharkia (3), Qalyubia (1), including one new WGSS established in Maadi through this project. The WGSS functioned as a hub for the delivery of and referral to GBV-SRH services in coordination with other protection and health partners. In total, 9,961 were reached with comprehensive GBV case management services and MHPSS services. With the project fund, the availability of services was widely expanded by increasing the number of caseworkers and psychologists, and the quality of services was ensured by providing capacity-building training for all WGSS staff. 1,067 women received unconditional emergency cash assistance under GBV case management, especially aiming to address the need for temporary accommodation for GBV survivors and to prevent any protection risks.

The project also achieved in enhancing the integration of SRH and GBV services through the newly established model of having a medical counseling room in the WGSS to provide basic SRH counseling for women and girls. 5 medical counseling rooms were furnished, and 5 medical service providers (general practitioners) were hired, reaching 3,605 women and girls through SRH consultations, and supporting

206 women in need of emergency referrals to hospitals and clinics. Posters containing life-saving information on GBV-SRH-SEA services and referral mechanisms were designed, printed, and shared with all WGSS. As the sole provider of Post Rape Kits in Egypt, UNFPA procured and distributed 3 Post Rape kits to GBV partners, reaching 56 survivors with the provision of clinical management of rape (CMR) services.

Through this CERF project, new initiatives such as the CVA under GBV case management and RH medical counseling rooms in the WGSS were successfully launched, reaching a large number of refugee women and girls. UNFPA aims to maintain these services in the following years to continue effectively supporting the vulnerable refugee population in Egypt.

3. Changes and Amendments

During the project implementation cycle, the number of Sudanese refugees crossing the borders continued to increase, and the number of governorates where Sudanese refugees are located also increased. This led to the expansion of this project service provision to the WGSS located in such governorates (i.e. Sharkia, Qalyubia), which also led to largely over-achieving many of the planned targets.

One of the major modifications to the project was to request a no-cost extension until the end of February 2024, which was required to successfully launch and implement the CVA program, as well as to establish the medical counseling rooms in the WGSS. Both activities were completely new initiatives that were made available through the support of CERF. Although it required more time than expected to initiate the process (namely, due to the delayed HQ approval of UNFPA-WFP and the recruitment of qualified physicians), the project was able to successfully reach the planned target by the end of the project period with the no-cost extension approved.

With a slight reallocation of budget per activity, all the project funds directly disbursed by UNFPA and sub-granted to OUDA are fully spent. However, there is a small amount of unspent funds from what was sub-granted to Etijah-MoYS, which is around 1% of the total budget. This unspent fund of USD 4,915 will be returned to CERF.

4. Number of People Directly Assisted with CERF Funding*

Sector/cluster	Protection - Gender-Based Violence									
Category	Planned					Reached				
	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Refugees	7,090	0	380	130	7,600	25,643	14	2,049	7	27,713
Returnees	0	0	0	0	0	0	0	0	0	0
Internally displaced people	0	0	0	0	0	0	0	0	0	0
Host communities	380	0	20	0	400	2,414	93	312	33	2,852
Other affected people	0	0	0	0	0	0	0	0	0	0
Total	7,470	0	400	130	8,000	28,057	107	2,361	40	30,565
People with disabilities (PwD) out of the total										
	1,120	0	60	20	1,200	28	1	0	0	29
Sector/cluster	Health - Sexual and Reproductive Health									
Category	Planned					Reached				
	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Refugees	1,520	0	380	0	1,900	3,723	13	130	1	3,867
Returnees	0	0	0	0	0	0	0	0	0	0
Internally displaced people	0	0	0	0	0	0	0	0	0	0
Host communities	80	0	20	0	100	0	0	0	0	0
Other affected people	0	0	0	0	0	0	0	0	0	0
Total	1,600	0	400	0	2,000	3,723	13	130	1	3,867
People with disabilities (PwD) out of the total										
	240	0	60	0	300	4	0	0	0	4

5. People Indirectly Targeted by the Project

As the project has reached more than 1,000 women through CVA, assuming each beneficiary has an average of 2-3 children or family members, it would have indirectly benefited around 2,000 - 3,000 children or family members, protecting them from potential risks. Through the expansion of GBV-RH services in the WGSS, especially in Aswan, the project largely contributed to enhancing the coordination among GBV partners to improve the efficiency of humanitarian assistance to affected populations, especially women and girls.

6. CERF Results Framework

Project objective	Women and girls affected by the Sudan crisis have an increased access to quality and integrated gender-based violence (GBV) and sexual and reproductive health (SRH) services.			
Output 1	Increased availability of coordinated life-saving GBV response services provided in Women and Girls Safe Spaces with focus on GBV case management.			
Was the planned output changed through a reprogramming after the application stage? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>				
Sector/cluster	Protection - Gender-Based Violence			
Indicators	Description	Target	Achieved	Source of verification
Indicator 1.1	PS.1a Number of people accessing women- and girl-friendly safe spaces and/or centres	8,000	19,511	IP progress report, WGSS records
Indicator 1.2	PS.1b Number of women- and girl-friendly safe spaces and/or centres constructed, rehabilitated and/or supported	6	10	IP progress report, WGSS records
Indicator 1.3	PS.2 Number of people receiving GBV psycho-social support and/or GBV case management	4,300	9,961	IP progress report, WGSS records
Indicator 1.4	Cash.2a Number of people receiving sector-specific unconditional cash transfers	300	1,067	IP progress report, WGSS records, WFP report
Indicator 1.5	Cash.2b Total value of sector-specific unconditional cash transfers distributed in USD	150,000	150,000	IP progress report, WGSS records, WFP report
Indicator 1.6	CC.1 Number of implementing partner staff receiving training to support programme implementation (GBV case management, Psychological First Aid)	35	26	IP progress report, WGSS records
Explanation of output and indicators variance:		In general, the target was largely over-achieved as the number of newly arriving Sudanese refugees continued to increase throughout the year. The number of governorates where Sudanese refugees are largely populated also increased, leading to the expansion of this project service provision to the WGSS located in such governorates. The CVA activity could reach more beneficiaries as the average amount of cash required for each beneficiary was less than expected. The targeted number of IP (WGSS) staff to be trained was not fully met, as it took longer than expected to recruit qualified caseworkers and psychologists in response to the Sudan crisis and the expansion of WGSS services. 26 of them received the capacity-building training,		

		while the remaining staff were trained through other donor's funding or will be trained in 2024.
Activities	Description	Implemented by
Activity 1.1	Establish 1 new Women and Girls Safe Space (WGSS) in Greater Cairo	Etijah-MoYS
Activity 1.2	Provide GBV case management services through 6 WGSSs	Etijah-MoYS
Activity 1.3	Provide MHPSS services in 6 WGSSs	Etijah-MoYS
Activity 1.4	Provide Cash Assistance under GBV case management	Etijah-MoYS through UNFPA coordination with WFP
Activity 1.5	Provide advanced refresher training for GBV case workers on psychological first aid	Etijah-MoYS

Output 2	Increased availability of quality integrated and gender responsive sexual reproductive health services and referrals.			
Was the planned output changed through a reprogramming after the application stage? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>				
Sector/cluster	Health - Sexual and Reproductive Health			
Indicators	Description	Target	Achieved	Source of verification
Indicator 2.1	Number of women and girls supported with SRH consultation through hired female medical service providers in the WGSS	2,000	3,605	IP progress report, WGSS records
Indicator 2.2	Number of women supported with emergency referrals for BEmONC / CEmONC services including C-Section	200	206	IP progress report, WGSS records
Indicator 2.3	SP.4 Number of people receiving clinical management of rape services	120	56	IP progress reports, Post Rape Kits utilization reports
Indicator 2.4	SP.2a Number of inter-agency emergency reproductive health kits delivered	3	3	Shipment / Delivery document
Explanation of output and indicators variance:		<p>Most of the planned targets were reached, and the project was able to reach more refugee women and girls through the SRH consultation in the medical counseling room newly established in the WGSS, as it gained more attention than expected. However, it was noted that the SRH services were sought only by refugees and not the host communities, as there are already existing national health services provided for them.</p> <p>The planned number of IARH kits (3 Post rape kits) were successfully procured and distributed. The target number of people receiving CMR was planned under the assumption that the distributed kits would be fully utilized by the end of the project duration. However, the kits still have a remaining shelf life, and partners will continue to provide CMR support to the affected population in 2024, which will eventually reach the planned target number. The possible reasons for the under-achievement of the target may include 1) lack of awareness among refugee communities of the CMR services and 2) the stigma and fear of reporting that delays and refrains survivors from seeking support.</p>		

Activities	Description	Implemented by
Activity 2.1	Provide SRH consultations and emergency referrals for SRH services (BEmONC / CEmONC including C-section) through female medical service providers based in WGSS	Etijah-MoYS
Activity 2.2	Share life-saving information on GBV-RH-PSEA services targeting women and girls	Etijah-MoYS
Activity 2.3	Procure and distribute Post Rape treatment kits in WGSSs and partners in need	UNFPA (Delivered 1 kit to Caritas Cairo, and 2 kits to Refugee Egypt)

7. Effective Programming

CERF expects partners to integrate and give due consideration to cross-cutting issues such as Accountability to Affected People (AAP), Protection from Sexual Exploitation and Abuse (PSEA), People with disabilities (PwD), Centrality of Protection as well as Gender and Age. In addition, the Emergency Relief Coordinator (ERC) has identified four underfunded priority areas² often lacking appropriate consideration and visibility: women and girls, people with disabilities, education and protection. **The following sections demonstrate how cross-cutting issues and the ERC's four underfunded priority areas have been addressed through project activities and should highlight the achieved impact wherever possible.**

a. Accountability to Affected People (AAP) 3:

Prior to developing this project plan, UNFPA and its IPs conducted brief Focus Group Discussions at the beginning of the crisis to understand the detailed needs of crisis-affected people, especially women with protection risks. An online survey was conducted through the Sudanese refugee community's WhatsApp group to collect information on the most urgent needs. The Women and Girls Safe Spaces staff have continuously and closely consulted the refugee community, and their feedback was shared with UNFPA through the weekly IP update meetings. The feedback received from these groups led to several adaptations in the project design. For instance, based on their input, the project expanded its reach to include more Sudanese refugees in different governorates that were initially unexpected. The involvement of crisis-affected people throughout the project cycle ensured that the project remained responsive to their needs and contributed to building a sense of ownership and sustainability.

b. AAP Feedback and Complaint Mechanisms:

During project implementation, a robust feedback and complaint mechanism was in place to ensure the voices of targeted groups were heard and addressed. UNFPA incorporated various modalities, including suggestion boxes in the WGSSs, sex, and age-disaggregated focus group discussions, and online polls through Google survey tools, given the active usage of WhatsApp group chats among the refugee communities. Post-distribution monitoring (PDM) was conducted to collect feedback from affected populations regarding the dignity kits distributed. Another PDM will be conducted in April-May 2024 to collect feedback on CVA. Furthermore, our IPs continued operating a telephone hotline where beneficiaries could reach out to share their feedback. Confidentiality was strictly maintained throughout the process. Suggestion and complaint boxes were emptied regularly by authorized personnel, and online submissions were made anonymous. The telephone hotline was operated by trained staff who upheld strict confidentiality protocols.

c. Prevention of Sexual Exploitation and Abuse (PSEA):

² These areas include: support for women and girls, including tackling gender-based violence, sexual and reproductive health and empowerment; programmes targeting people with disabilities; education in protracted crises; and other aspects of protection. The ERC recommended an increased focus on these four areas to ensure that they be given due consideration by RC/HCs and UNCTs/HCTs when prioritizing life-saving needs for inclusion in CERF requests. While CERF remains needs-based, the ERC will be looking for country teams to prioritize projects and mainstreamed activities that systematically and effectively address to these four historically underfunded areas. Please see the Questions and Answers on the ERC four priority areas [here](#).

³ AAP and PSEA are part and parcel of IASC commitments, and therefore mandatory for compliance for all UN agencies and partners. Agencies do not necessarily need to establish new AAP and PSEA mechanisms for CERF projects if functioning ones are already in place. For more information please refer to the [IASC AAP commitments](#).

UNFPA has a clear code of conduct and reporting mechanism for SEA, including the existing feedback mechanism above; furthermore, GBV partners have been supported to ensure SEA survivors receive appropriate and confidential support. UNFPA continued emphasizing the need for all partners to ensure that volunteers are trained on PSEA, and support partners to disseminate information on reporting channels and available services. UNFPA developed and printed PSEA posters and distributed them to all of the UNFPA-supported Women and Girls Safe Spaces. During the project implementation period, there were no cases of SEA-related complaints reported.

d. Focus on women, girls and sexual and gender minorities, including gender-based violence:

The main objective of this program was to ensure protection, safety, and good health for women and girls through the provision of comprehensive GBV-MHPSS-SRH services in the Women and Girls Safe Spaces. Adding to the pre-existing gender inequality and discrimination, the vulnerabilities of women and girls get further exacerbated in humanitarian settings. However, the WGSS functions as an effective model to reach out to a large number of refugee women and girls in Egypt, including GBV survivors, pregnant women, and adolescent girls. The GBV-MHPSS-SRH services provided in the WGSS are open to all women and girls, as well as sexual and gender minorities, to ensure their protection and promote empowerment.

e. People with disabilities (PwD):

UNFPA ensured accessibility and inclusion of PwD to the WGSS in different ways, for example, by holding activities in a space that is accessible to people with physical disabilities, openly announcing and sending clear messages that the WGSS is open to all PwD, and providing specialized technical support if needed, such as having a sign language translator. Despite the continued efforts, UNFPA acknowledges that the project's reach to PwD has been limited. Understanding how PwD are posed with additional vulnerability and risk of GBV, UNFPA will further commit to improving efforts in this area. Plans include expanding reach by partnering with organizations specific to PwD, and investing in capacity building for WGSS staff and GBV partners. IPs will be encouraged once again to develop a concrete action plan, including how PwD can be further identified and how the GBV-RH services will be better tailored.

f. Protection:

The project was designed to respond to the protection risks identified among the refugees in Egypt. One of the project's outputs specifically addressed the protection issues faced by women and girls, including GBV and their RH needs. Furthermore, UNFPA, along with the GBV Sub-Working Group co-chaired with UNHCR, worked closely with the refugee communities and refugee/women-led organizations to identify and address protection risks by conducting monthly refugee community engagement meetings with the purpose of increasing awareness of protection and GBV risks among affected communities, improving access to protection-GBV services, and strengthening the community-based protection mechanisms.

g. Education:

Not Applicable for this project.

8. Cash and Voucher Assistance (CVA)

Use of Cash and Voucher Assistance (CVA)?

Planned	Achieved	Total number of people receiving cash assistance:
Yes, CVA is a component of the CERF project	Yes, CVA is a component of the CERF project	1,067

If **no**, please describe why CVA was not considered. Where feasible, CVA should be considered as a default response option, and multi-purpose cash (MPC) should be utilised wherever possible.

If **yes**, briefly note how CVA is being used, highlighting the use of MPC, and if any linkages to existing social protection systems have been explored.

The CVA component of this project has played one of the most important roles in supporting the Sudanese refugees in Egypt, especially the women and girls at risk of violence and the survivors of GBV. The unconditional emergency cash assistance under GBV case management is known to be one of the most efficient ways of mitigating the immediate risk of GBV, and it also offers women and GBV survivors with empowerment and decision-making opportunities to cover their critical needs, allowing them to escape cycles of violence. Among the various CVA programs of different agencies and organizations, this CVA component of UNFPA funded by CERF was the only unconditional emergency cash assistance program targeting refugee women and girls at risk of GBV and the survivors of GBV. The program was successfully launched for the first time with the technical support of WFP, along with the intensive training of the WGSS case workers. It is worth noting that based on the discussion with the refugee communities and the IPs, the amount of cash to be distributed per person was adjusted to reflect the high inflation rate and the devaluation of the currency in Egypt. A follow-up PDM will be conducted in April-May 2024 to further assess and measure the effectiveness of the CVA program as well as to collect feedback that can be reflected in the next program.

Parameters of the used CVA modality:

Specified CVA activity (incl. activity # from results framework above)	Number of people receiving CVA	Value of cash (US\$)	Sector/cluster	Restriction
Activity 1.4. Provide Cash Assistance under GBV case management	1,067	US\$ 150,000	Protection - Gender-Based Violence	Unrestricted

9. Visibility of CERF-funded Activities

Title	Weblink
Website article: CERF allocates \$450 for UNFPA Egypt's response to Sudan crisis	CERF allocates \$450 for UNFPA Egypt's response to Sudan crisis
Facebook posts: World Humanitarian Day in Damietta	World Humanitarian Day in Damietta
Facebook posts: Inauguration of new Safe Space in Maadi	Inauguration of new Safe Space in Maadi
Facebook posts: Invest to Prevent	Invest to Prevent
Facebook posts: 16 Days in Badr Safe Space	16 Days in Badr Safe Space
Twitter posts: 16 Days at Aswan Safe Space	16 Days at Aswan Safe Space
Twitter posts: Medical counseling rooms	Medical counseling rooms
Twitter posts: Invest to Prevent	Invest to Prevent
Instagram posts: Invest to Prevent	Invest to Prevent
Instagram posts: 16 Days at Sheikh Zayed Safe Space	16 Days at Sheikh Zayed Safe Space
Instagram posts: 16 Days at Aswan Safe Space	16 Days at Aswan Safe Space
Instagram posts: Humanitarian Day	Humanitarian Day
Instagram posts: World Humanitarian Day in Damietta	World Humanitarian Day in Damietta

3.2 Project Report 23-RR-HCR-019

1. Project Information			
Agency:	UNHCR	Country:	Egypt
Sector/cluster:	Protection Multi-Purpose Cash	CERF project code:	23-RR-HCR-019
Project title:	Multi-sectoral response for Sudanese refugees in Egypt		
Start date:	30/06/2023	End date:	29/12/2023
Project revisions:	No-cost extension <input type="checkbox"/>	Redeployment of funds <input type="checkbox"/>	Reprogramming <input type="checkbox"/>
Funding	Total requirement for agency's sector response to current emergency:		US\$ 25,200,000
	Total funding received for agency's sector response to current emergency:		US\$ 2,000,000
	Amount received from CERF:		US\$ 1,500,000
	Total CERF funds sub-granted to implementing partners:		US\$ 0
	Government Partners		US\$ 0
	International NGOs		US\$ 0
	National NGOs		US\$ 0
Red Cross/Crescent Organisation		US\$ 0	

2. Project Results Summary/Overall Performance

Through this project, UNHCR Egypt was able to provide 66,000 newly arrived individuals with Registration, and some 13,153 refugees emergency and multipurpose cash assistance.

From the start of hostilities in Sudan on 15 April to 31 December 2023, some 219,000 new arrivals from Sudan approached UNHCR for registration, in person and/or through the Infoline. Out of this total, 63% (138,116 persons) have been registered, including some 66,000 new arrivals, with thanks to the support received from CERF. By the end of 2023, around 91% of the total registered population were Sudanese nationals. Those who approached in person were provided registration appointment slips. Once registered, all new arrivals from Sudan are issued with UNHCR documentation, recognized by the government, which provides lifesaving protection against arbitrary detention and deportation.

By end of December 2023, UNHCR finalized the recruitment for 90 registration and Infoline staff and 5 interpreters who joined on a rolling basis. In August, UNHCR onboarded 28 new registration staff to replace the support staff deployed from internal units. By the end of the reporting period, all registration staff received training on registration protocols on several different occasions, including with regards to UNHCR registration protocols, learning UNHCR's database, code of conduct, integrity, and civilian character of asylum screening, registration SOPs and capturing of biometrics. With the ongoing emergency, UNHCR has taken various steps to improve access to registration. These include enhancing registration services in the Alexandria Field Office and, together with national authorities, reviewing the possibility to expand registration services across the country, in particular in the Aswan area. UNHCR has also carried out structural

changes in the 6 October Office to expand the interview and waiting space and improve reception conditions and is currently identifying a new registration centre.

In response to the crisis, UNHCR decided to revamp the Infoline capacity by increasing the number of Infoline operators and Infoline channels. Between July to December 2023, UNHCR hired 18 new staff in Alexandria and increased the number of Infoline channels to 90 from 30. UNHCR is also working on the automatization of several services provide by the Infoline. Finally, and starting in mid-August, the Infoline extended its working hours to meet the increased demand.

Thanks to the CERF funding, UNHCR successfully provided one-off emergency cash assistance (ECA) to 13,153 individuals, including 4,304 families, with an average transfer value of USD 90 for a family size of three. This assistance was aimed at meeting the immediate needs of newly arrived Sudanese individuals, both registered and unregistered, in Cairo, Aswan, and Alexandria. The emergency assistance focused on addressing the immediate needs of the affected population, mitigating potential protection risks, and discouraging the adoption of negative coping strategies. Rapid needs assessments were conducted with unregistered new arrivals by UNHCR's partner Caritas, with assessments continuing exclusively in Aswan since mid-October. Vulnerable cases in Cairo and Alexandria were referred for fast-tracked registration to receive emergency cash assistance through the Egypt Post Office (EPO). Registered new arrivals' eligibility was determined following the same criteria developed for rapid needs assessments through data collected at registration phase. The collaboration with the EPO has facilitated the disbursement of cash assistance to both registered and unregistered eligible beneficiaries, ensuring effective support to those in need.

3. Changes and Amendments

No changes to report.

4. Number of People Directly Assisted with CERF Funding*

Sector/cluster	Protection									
Category	Planned					Reached				
	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Refugees	20,040	20,925	12,057	12,906	65,928	21,968	17,078	13,297	13,657	66,000
Returnees	0	0	0	0	0	0	0	0	0	0
Internally displaced people	0	0	0	0	0	0	0	0	0	0
Host communities	0	0	0	0	0	0	0	0	0	0
Other affected people	0	0	0	0	0	0	0	0	0	0
Total	20,040	20,925	12,057	12,906	65,928	21,968	17,078	13,297	13,657	66,000
People with disabilities (PwD) out of the total										
	599	627	366	385	1,977	218	170	133	135	656

Sector/cluster	Multi-Purpose Cash									
Category	Planned					Reached				
	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Refugees	3,895	4,075	2,378	2,507	12,855	4,039	2,266	4,386	2,462	13,153
Returnees	0	0	0	0	0	0	0	0	0	0
Internally displaced people	0	0	0	0	0	0	0	0	0	0
Host communities	0	0	0	0	0	0	0	0	0	0
Other affected people	0	0	0	0	0	0	0	0	0	0
Total	3,895	4,075	2,378	2,507	12,855	4,039	2,266	4,386	2,462	13,153
People with disabilities (PwD) out of the total										
	337	225	311	207	1,080	369	423	113	175	1,080

* Figures represent best estimates of people directly supported through CERF funding. Disaggregation by sex and age represents women and men ≥18, girls and boys <18.

5. People Indirectly Targeted by the Project

In the wake of eruption of hostilities in Sudan in mid-April 2023, there was a significant increase in demand for critical UNHCR registration services, and assistance provisions for those who fled the conflict to Egypt in pursue of safety. The contribution of CERF was crucial in supporting the Office to expand its registration capacity, upgrade the Infoline service, and provide emergency cash assistance (ECA) for newly arrived Sudanese. With thanks to CERF and other donors, UNHCR was able to increase its registration staff and expand the reception infrastructure to the benefit of all those approaching UNHCR seeking international protection in Egypt. As a result of these enhancements, in 2023 UNHCR Egypt was able to significantly upscale and newly register 200,015 refugees and asylum-seekers – a four-fold increase from 2022 – and provide continuous registration services to 118,185 individuals, for a total of 318,200 persons. In doing so, the Office fully achieved the planned targets of 66,000 newly registered individuals under the Registration component of the CERF contribution.

Similarly, the support by CERF for the provision of Emergency Cash Assistance (ECA) for newly arrived Sudanese, enabled the Office to provide a one-off lifesaving unconditional grant for immediate needs such as food, rent, travels etc., an activity that was not planned nor budgeted for at the start of the year. The provision of cash assistance are expected to have a positive impact on local economies and the development of national markets, as it will contribute in activating the economy through expenditure and financial exchanges.

6. CERF Results Framework

Project objective	Strengthened protection and assistance services for Sudanese new arrivals.			
Output 1	Provision of refugee documentation to Sudanese new arrivals			
Was the planned output changed through a reprogramming after the application stage? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>				
Sector/cluster	Protection			
Indicators	Description	Target	Achieved	Source of verification
Indicator 1.1	# of Sudanese new arrivals registered with UNHCR	66,000 individuals	66,000	UNHCR Database
Explanation of output and indicators variance:		n/a		
Activities	Description	Implemented by		
Activity 1.1	Registration and Infoline staff will be newly recruited and new equipment will be purchased to increase the team's capacity to respond to current registration demands.	UNHCR		
Activity 1.2	Infoline channels will be expanded to accommodate a larger number of calls from Sudanese new arrivals seeking registration appointment	UNHCR		
Activity 1.3	Interactive Voice Response mechanism will be adapted to ensure Sudanese new arrivals are prioritised with expedited registration appointments	UNHCR		
Output 2	Provision of cash assistance to newly Sudanese arrivals			
Was the planned output changed through a reprogramming after the application stage? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>				
Sector/cluster	Multi-Purpose Cash			
Indicators	Description	Target	Achieved	Source of verification

Indicator 2.1	Cash. 1a Number of people receiving multi-purpose cash	12,855	13,153	UNHCR data
Indicator 2.2	Cash. 1b Total value of multi-purpose cash distributed in USD	400,000	400,000	UNHCR and EPO data
Explanation of output and indicators variance:		The number of individuals exceeded the planned target primarily due to the larger family sizes of new arrivals.		
Activities	Description	Implemented by		
Activity 2.1	Distribution of emergency cash assistance for new arrivals	UNHCR		
Activity 2.2	Post-distribution monitoring activities	Sagaci		

7. Effective Programming

CERF expects partners to integrate and give due consideration to cross-cutting issues such as Accountability to Affected People (AAP), Protection from Sexual Exploitation and Abuse (PSEA), People with disabilities (PwD), Centrality of Protection as well as Gender and Age. In addition, the Emergency Relief Coordinator (ERC) has identified four underfunded priority areas⁴ often lacking appropriate consideration and visibility: women and girls, people with disabilities, education and protection. **The following sections demonstrate how cross-cutting issues and the ERC's four underfunded priority areas have been addressed through project activities and should highlight the achieved impact wherever possible.**

a. Accountability to Affected People (AAP)⁵:

In 2023, UNHCR Egypt conducted two participatory assessments as part of its commitment to realizing the AGD approach by ensuring that the unique needs, priorities, and strengths of forcibly displaced persons are considered in decision making processes. Given the Sudan emergency, the second exercise was conducted to ensure that the voices of new arrivals were also included to inform the operational management cycle. Data and information collected from 89 dialogues with 589 participants was disaggregated by age, sex, disability, and other diversity considerations. Participants included unaccompanied and separated children, women, men, youth, older persons, persons with disabilities and LGBTIQ+ persons and represented eight nationalities, of which 51% were males and 49% were females.

b. AAP Feedback and Complaint Mechanisms:

As part of its protection mandate and its commitments to AAP, UNHCR continued to implement measures to ensure that refugees concerns, needs and priorities are placed at the heart of operational planning and response. The goal is to make it safe, simple, and easy for refugees and asylum-seekers to provide feedback on any issues they face, but also to ensure that timely and appropriate responses are provided. In 2023, UNHCR continued to maintain multi-channel feedback and response mechanisms, including in-person community meeting and awareness raising sessions, through suggestion and complaint boxes, face to face counselling, phone hotlines, WhatsApp group and functional emails. Complaints can also be received by UNHCR or partners staff and are responded to in confidence. Specifically of cash assistance, UNHCR's partner Caritas conducts counselling calls to inform recipients about cash assistance and address any issues. UNHCR ensures that all feedback and complaints are collected, documented, analysed, and responded to promptly, maintaining confidentiality and respecting the privacy of individuals. Follow-up actions are taken to address concerns effectively and ensure that beneficiaries receive appropriate support and resolution to their feedback or complaints.

⁴ These areas include: support for women and girls, including tackling gender-based violence, sexual and reproductive health and empowerment; programmes targeting people with disabilities; education in protracted crises; and other aspects of protection. The ERC recommended an increased focus on these four areas to ensure that they be given due consideration by RC/HCs and UNCTs/HCTs when prioritizing life-saving needs for inclusion in CERF requests. While CERF remains needs-based, the ERC will be looking for country teams to prioritize projects and mainstreamed activities that systematically and effectively address to these four historically underfunded areas. Please see the Questions and Answers on the ERC four priority areas [here](#).

⁵ AAP and PSEA are part and parcel of IASC commitments, and therefore mandatory for compliance for all UN agencies and partners. Agencies do not necessarily need to establish new AAP and PSEA mechanisms for CERF projects if functioning ones are already in place. For more information please refer to the [IASC AAP commitments](#).

c. Prevention of Sexual Exploitation and Abuse (PSEA):

UNHCR co-chairs the PSEA Network in Egypt. UNHCR partners, staff and volunteers involved in the distributions and/or in direct contact with beneficiaries are trained on PSEA and are required to sign the Code of Conduct upon being hired. Effective confidential community-based complaint and feedback mechanisms and handling of SEA complaints are ensured through established mechanisms in Egypt. Information on how to use such channels is shared with refugees and asylum seekers through community meetings, UNHCR Help website, printed material, as well as during interviews, among others.

UNHCR Egypt designated 18 PSEA Focal Points for Cairo, Alexandria and Aswan. In 2023, all the Focal Points received a one-day training to be able to perform their role, and in turn, carried out various training sessions for frontline workers such as registration staff, interpreters, and security guards. Besides the official mailbox, SEA complaints can be reported to any of the 18 PSEA Focal Points, or face to face during any interaction/interview with refugees and UNHCR personnel, as it has received training on how to handle SEA disclosures. There are also complaint boxes in key spots at the Office. Refugees can always decide to directly report to the IGO if they prefer so. The main national PSEA Focal Point is in charge of reporting received allegations to the IGO for investigations and provides support in such processes should this be required.

d. Focus on women, girls and sexual and gender minorities, including gender-based violence:

UNHCR and partners conducted capacity building activities to address physical, social, and structural barriers faced by vulnerable groups with UNHCR staff, partners, and refugee communities to support stronger AGD inclusive programming. For instance, at Registration stage, persons with specific needs and/or at heightened protection risk such as unaccompanied and separated children (UASC), are systematically identified and prioritized for registration pursuant to SOPs. Additionally, for the provisions of emergency cash assistance, monitoring and vulnerability assessments will enhance timely identification and referral of persons with specific needs and will inform eligibility for assistance – including emergency cash assistance - with due attention to specific needs and vulnerabilities. Eligibility for emergency cash assistance is based on vulnerability criteria that prioritize single parents, large families, individuals with disabilities, the elderly without family support, unaccompanied and separated children, single women without family support, lactating or pregnant women, and other vulnerable cases identified by the Protection Unit. These measures contribute to gender equality, empowerment, and the protection of women, girls, and sexual and gender minorities within the project's scope.

e. People with disabilities (PwD):

UNHCR adopts the approach to disability enshrined in the UN Convention on the Rights of Persons with Disabilities (CPRD). The project ensured accessibility and inclusion for People with Disabilities (PwD) by incorporating measures to meet their essential needs and ensure their participation. This included providing accessible facilities, materials, and services tailored to the diverse needs of PwD. Moreover, the project addressed specific risks faced by PwD, particularly women and girls, by implementing targeted protection measures. This involved raising awareness about their rights, providing specialized support services, and fostering an environment of safety and dignity. Through the project UNHCR collaborated closely with PwD communities and relevant stakeholders to identify and mitigate barriers to their inclusion, ensuring their active participation and empowerment within the project's activities.

f. Protection:

UNHCR takes into consideration the protection of all persons affected and at-risk across all sectors and throughout the programme management cycle. The guiding principles of AGD approach, community based, and right based approaches will be used to gather specific protection risks from different categories of persons of concern through systematic discussions with men, women, boys, and girls.

g. Education:

Through access to newly arrived forcibly displaced persons at registration/appointment stage, and/or at enrolment stage for ECA, UNHCR systematically shares information regarding access to education, the procedures and documentation needed for enrolment.

8. Cash and Voucher Assistance (CVA)

Use of Cash and Voucher Assistance (CVA)?

Planned	Achieved	Total number of people receiving cash assistance:
Yes, CVA is a component of the CERF project	Yes, CVA is a component of the CERF project	13,153

If **no**, please describe why CVA was not considered. Where feasible, CVA should be considered as a default response option, and multi-purpose cash (MPC) should be utilised wherever possible.

If **yes**, briefly note how CVA is being used, highlighting the use of MPC, and if any linkages to existing social protection systems have been explored.

Cash and Voucher Assistance (CVA) is being utilized primarily through one-time Multipurpose Cash (MPC), providing flexibility for beneficiaries to address their most pressing needs. Through partnerships with local entities such as the Egypt Post Office (EPO), UNHCR ensures the efficient delivery of cash assistance to beneficiaries, leveraging existing infrastructure for accessibility and convenience.

Parameters of the used CVA modality:

Specified CVA activity (incl. activity # from results framework above)	Number of people receiving CVA	Value of cash (US\$)	Sector/cluster	Restriction
1a Number of people receiving multi-purpose cash	13,153	US\$ 400,000	Multi-Purpose Cash	Unrestricted

9. Visibility of CERF-funded Activities

Title	Weblink
Christine Beshay on Twitter: "Germany is one of @UNHCREgypt's key donors. In addition to supporting the refugee population of 300K already in #Egypt, @GermanEmbCairo is also the biggest donor to the @UNCERF which has recently allocated \$5M to #Egypt to support UNHCR & others to respond to	#Sudan emergency." / X
UNHCR Government Partners on Twitter: "Thanks to the support from @UNCERF, UNHCR is responding in and outside Sudan, including in very hard to reach areas at the borders with Sudan where people are fleeing for safety	https://twitter.com/UNHCRgov/status/1667162618807590912?s=20
German Embassy Cairo on Twitter: " تدعم ألمانيا • إجمالي مبلغ 6.7 مليون يورو • ألمانيا هي EG في مصر @UNHCREgypt و@WFP أكبر مانح لصندوق المركزي لمواجهة الطوارئ والذي يوفر 22 مليون @UNCERF دولار لدعم البلدان المجاورة للسودان ومنها #مصر #تشاد #جمهورية أفريقيا الوسطى #جنوب السودان	https://twitter.com/GermanEmbCairo/status/1661682502019305478?s=20
UNHCR Egypt on X: "People forced to flee conflicts need critical assistance and protection. Support from donors including @UNCERF is allowing UNHCR to expand its material and protection assistance to new arrivals from #Sudan. #InvestInHumanity	https://twitter.com/UNHCREgypt/status/1694673985160527991?s=20
يبدل الزملاء، بمن فيهم مها من فريق البرامج، قصارى جهدهم خلف الكواليس لتوفير الخدمات للاجئين المقيمين في مصر و يبلغ عددهم حوالي 330 ألف من 56 جنسية شكرا لكل الدعم الذي تتلقاه المفوضية من الجهات المانحة بما فيهم @UNCERF لدعم اللاجئين #مهما كان 🇪🇬 #اليوم_العالمي_للعمل_الإنساني	https://x.com/unhcregypt/status/1696159314145153189?s=46&t=Tixe34KntVB64AyWTrULHg
UNRC @elenapanovaUN visited @UNHCREgypt registration centre today, met w/refugees & learnt abt their needs. She was informed about UNHCR's	https://x.com/unhcregypt/status/1732489431255253418?s=46&t=Tixe34KntVB64AyWTrULHg

<p>registration procedures. With thx to funding from @UNCERF & others, our registration capacity increased by 900%.</p>	
<p>Germany is one of @UNHCREgypt's key donors. In addition to supporting the refugee population of 300K already in #Egypt, @GermanEmbCairo is also the biggest donor to the @UNCERF which has recently allocated \$5M to #Egypt to support UNHCR & others to respond to #Sudan emergency.</p>	<p>https://x.com/cbeshay/status/1661962547371687939?s=46&t=Tixe34KntVB64AyWTrULHg</p>
<p>People forced to flee conflicts need critical assistance and protection. Support from donors including @UNCERF is allowing UNHCR to expand its material and protection assistance to new arrivals from #Sudan. #InvestInHumanity</p>	<p>https://x.com/unhcregypt/status/1694673985160527991?s=46&t=Tixe34KntVB64AyWTrULHg</p>
<p>بيذل الزملاء، بمن فيهم مها من فريق البرامج، قصارى جهدهم خلف الكواليس لتوفير الخدمات للاجئين المقيمين في مصر ويبلغ عددهم حوالي 330 ألف من 56 جنسية.</p> <p>شكرا لكل الدعم الذي تتلقاه المفوضية من الجهات المانحة بما فيهم @UNCERF لدعم اللاجئين</p> <p>#مهما كان #اليوم العالمي للعمل الإنساني</p>	<p>https://www.instagram.com/p/CwfaqjEM-iF/?fbclid=IwAR3y_QqN6mXb9sUb1bU1x5zRLrYnfppHg07HHx1kAXki3kaT7ult6So62TE</p> <p>https://www.facebook.com/UNHCREgypt/posts/pfbid02cZKXVv8MbXxjoNkPmJSZ95K7oriyHMHdyLvDpGrz2bAjR9SUTESgQZi7gFQBzr3ml</p>
<p>People forced to flee conflicts need critical assistance and protection. Support from donors including UN Emergency Fund (UNCERF) is allowing UNHCR to expand its material and protection assistance to new arrivals from #Sudan. #InvestInHumanity</p>	<p>https://www.instagram.com/p/CwU2z6XMYFr/?utm_source=ig_web_copy_link</p> <p>https://www.facebook.com/UNHCREgypt/posts/pfbid02vGmYvcg3hNcULm3i7ZytQP5iGaQCL6B2kYcF9svpmZCATfTysnp7uBtQqhXnh7wnl</p>

3.3 Project Report 23-RR-CEF-032

1. Project Information

Agency:	UNICEF	Country:	Egypt
Sector/cluster:	Water, Sanitation and Hygiene	CERF project code:	23-RR-CEF-032
Project title:	Support providing clean water and safe sanitation, and hygiene services		
Start date:	01/05/2023	End date:	31/10/2023
Project revisions:	No-cost extension <input type="checkbox"/>	Redeployment of funds <input type="checkbox"/>	Reprogramming <input type="checkbox"/>

Funding	Total requirement for agency's sector response to current emergency:	US\$ 1,000,000
	Total funding received for agency's sector response to current emergency:	US\$ 0
	Amount received from CERF:	US\$ 599,526
	Total CERF funds sub-granted to implementing partners:	US\$ [257,002]
	Government Partners	US\$ [140,712]
	International NGOs	US\$ [0]
	National NGOs	US\$ [0]
Egyptian Red Crescent Society	US\$ [116,290]	

2. Project Results Summary/Overall Performance

UNICEF utilized the CERF funding to support the waste management systems to effectively collect and dispose of waste, reducing environmental contamination and minimizing the risk of infection disease transmission in the areas of the two border crossings (Qostul and Argeen) as well as the international bus stop of Karkar. This included support to the water waste collection, separation, storage, transport, treatment, and final disposal of wastewater. UNICEF supported availability of clean and adequate toilets or latrines, availability of desludging trucks and provided materials and equipment for toilets cleaning. The funding was utilized for 6 months to benefit an estimated 253,781 refugees, and an estimated 100,000 host community members with WASH engagement. A total of 16 fixed toilets have been rehabilitated in Karkar international bus station. Out of these 16 toilets, 2 (one for male and one for female) were prepared for people with disabilities. Additionally, 14 toilets were improved in Aswan Railway Station. A total of 72 toilets (half of them for males and half for females) in 12 blocks of mobile toilets have been installed in the two borders and in the international bus station. UNICEF supported, through the agreement with ERC, the waste management systems with the equipment and manpower to effectively collect and dispose of waste, reducing environmental contamination and minimizing the risk of disease transmission. In collaboration with Aswan Water Company, UNICEF provided clean water to the two border crossings and the international bus station through water trucking. Furthermore, UNICEF provided the services of sewage water evacuation from septic tanks of the mobile toilets. This was achieved by renting the sewage truck for multiple times.

3. Changes and Amendments

One of the main challenges was the changes in the government decisions regarding which border crossing to be used for receiving the Sudanese arriving in Egypt. There was a shift in the approach, which affected the planning of response activities and required continuous modification of the planned activities and their locations. Also, it was very challenging to expect the number of arrivals as this was very much subject to the regulations and procedures that were put in place by the Egyptian authorities.

UNICEF was planning a partnership with Save the Children International, but due to delays in getting the approvals/clearances from SCI's HQ, UNICEF made an agreement with ERC to conduct some of the activities that were planned under SCI, while other activities were completed through other partners NGO.

4. Number of People Directly Assisted with CERF Funding*

Sector/cluster	Water, Sanitation and Hygiene									
Category	Planned					Reached				
	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Refugees	90,585	57,915	61,915	39,585	250,000	91,955	58,791	62,851	40,184	253,781
Returnees	0	0	0	0	0	0	0	0	0	0
Internally displaced people	0	0	0	0	0	0	0	0	0	0
Host communities	0	0	0	0	0	0	0	0	0	0
Other affected people	0	0	0	0	0	0	0	0	0	0
Total	90,585	57,915	61,915	39,585	250,000	91,955	58,791	62,851	40,184	253,781
People with disabilities (PwD) out of the total										
	13,587	8,688	9,287	5,938	37,500	13,793	8,819	9,428	6,028	38,067

* Figures represent best estimates of people directly supported through CERF funding. Disaggregation by sex and age represents women and men ≥18, girls and boys <18.

5. People Indirectly Targeted by the Project

Community of Aswan city as well as in Karkar Valley Village in addition to the communities of Qustel and Arqeen have benefited from the

WASH interventions introduced by UNICEF. The WASH response included the availability of clean and adequate toilets or latrines, the availability of desludging trucks and providing materials and equipment for toilet cleaning. UNICEF supported, through the agreement with ERC, the waste management systems with the equipment and manpower to effectively collect and dispose of waste, reducing environmental contamination and minimizing the risk of disease transmission.

6. CERF Results Framework

Project objective	To provide safe water, sanitation, hygiene and solid waste management services to the displaced Sudanese families arriving to Aswan
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Output 1	People in targeted community benefiting from essential WASH material and equipment
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Was the planned output changed through a reprogramming after the application stage?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
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Sector/cluster	Water, Sanitation and Hygiene			
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Indicators	Description	Target	Achieved	Source of verification
Indicator 1.1	WS.16a Number of WASH/hygiene kits distributed	50,000	50,000	UNICEF Supply documents

Explanation of output and indicators variance:				
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Activities	Description	Implemented by
Activity 1.1	Procurement of cleaning materials and equipment to support Solid Waste management and enhancing IPC and infectious waste management in HCFs	Procured by UNICEF and activities conducted by ERC
Activity 1.2	Procurement of drinking water testing to assist local authorities with mobile water testing kits in border crossing points.	Procured by UNICEF and activities coordinated by UNICEF and WHO
Activity 1.3	Procurement of personal hygiene kits	Procured by UNICEF and kits distributed by ERC in boarders and Caritas in family clubs
Activity 1.4	Procurement of drinking water filters	Procured by UNICEF and activities coordinated by UNICEF and WHO

Output 2	The most vulnerable Sudanese families (specially women and children) benefit from sanitation services through enhancement of WASH infrastructure.
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Was the planned output changed through a reprogramming after the application stage?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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Sector/cluster	Water, Sanitation and Hygiene			
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Indicators	Description	Target	Achieved	Source of verification
Indicator 2.1	WS.6 Number of people accessing sufficient and safe water for	250,000	253,781	Reports of official entries from Sudan

	drinking, cooking and/or personal hygiene use as per agreed sector standard			
Explanation of output and indicators variance:				
Activities	Description	Implemented by		
Activity 2.1	Rehabilitate and improve fixed toilets	Aswan Water company		
Activity 2.2	Install mobile toilets	Aswan Water company		

7. Effective Programming

CERF expects partners to integrate and give due consideration to cross-cutting issues such as Accountability to Affected People (AAP), Protection from Sexual Exploitation and Abuse (PSEA), People with disabilities (PwD), Centrality of Protection as well as Gender and Age. In addition, the Emergency Relief Coordinator (ERC) has identified four underfunded priority areas⁶ often lacking appropriate consideration and visibility: women and girls, people with disabilities, education and protection. **The following sections demonstrate how cross-cutting issues and the ERC's four underfunded priority areas have been addressed through project activities and should highlight the achieved impact wherever possible.**

a. Accountability to Affected People (AAP)⁷:

During all phases of the response, UNICEF ensured the involvement of affected population, including vulnerable and marginalized groups, in the design, implementation, and monitoring of the project through several modalities. This included conducting focus group discussions with beneficiaries, engaging in direct conversations with them during monitoring visits, and utilizing UNICEF Rapid Pro data collection tool for rapid assessments, monitoring, and feedback gathering in emergency and development contexts. Through the family clubs' activities organized by Child Protection team with displaced families, all issues facing targeted families were discussed. One of the main findings of the discussion with targeted families was the needs and availability of WASH services in all locations.

b. AAP Feedback and Complaint Mechanisms:

During the project implementation period, a feedback and complaint mechanism was available to ensure targeted groups had accessible channels to voice their concerns or provide feedback. This mechanism has maintained confidentiality by safeguarding the identity and personal information of individuals who submit complaints. It ensured accessibility through suggested various channels such as dedicated hotlines, email addresses, or physical suggestion boxes. UNICEF, in partnership with the Ministry of Planning, has also set up a community engagement channel called Rapid Pro, which utilizes SMS through the hotline 15335. Prompt follow-up is emphasized to address the received feedback or complaints effectively, with designated personnel responsible for investigation and resolution. Transparent communication and regular updates are provided to the complainants to ensure their voices are heard and that appropriate actions are taken to address their concerns.

c. Prevention of Sexual Exploitation and Abuse (PSEA):

During the project implementation, UNICEF ensured that the mechanism for recording and handling Sexual Exploitation and Abuse (SEA)-related complaints maintained confidentiality, accessibility, and follow-up. This mechanism involved establishing multiple reporting channels, such as hotlines and email addresses, ensuring clear guidelines for reporting, for example in cooperation with

⁶ These areas include: support for women and girls, including tackling gender-based violence, sexual and reproductive health and empowerment; programmes targeting people with disabilities; education in protracted crises; and other aspects of protection. The ERC recommended an increased focus on these four areas to ensure that they be given due consideration by RC/HCs and UNCTs/HCTs when prioritizing life-saving needs for inclusion in CERF requests. While CERF remains needs-based, the ERC will be looking for country teams to prioritize projects and mainstreamed activities that systematically and effectively address to these four historically underfunded areas. Please see the Questions and Answers on the ERC four priority areas [here](#).

⁷ AAP and PSEA are part and parcel of IASC commitments, and therefore mandatory for compliance for all UN agencies and partners. Agencies do not necessarily need to establish new AAP and PSEA mechanisms for CERF projects if functioning ones are already in place. For more information please refer to the [IASC AAP commitments](#).

the national authorities' child helpline 16000 and National Council for Women (NCW) hotline 15115 conducting initial assessments by trained personnel in UNICEF and partners furthermore if needed, launching formal investigations. Confidentiality was maintained by restricting access to authorized individuals only. Accessibility was ensured through widely publicized reporting channels. Follow-up included appropriate actions based on investigation outcomes, such as disciplinary measures, support for victims, and implementing preventive measures to mitigate future occurrences.

d. Focus on women, girls and sexual and gender minorities, including gender-based violence:

Planning of WASH interventions during emergencies always prioritizes the focus on women, girls, and sexual and gender minorities. The WASH activities under this project were aimed at promoting gender equality and ensuring the protection of women, girls, and sexual and gender minorities, with a particular emphasis on addressing gender-based violence. In the context of WASH, the activities prioritized the provision of gender-responsive, safe, and inclusive facilities and services. This included the establishment of private and gender-separated sanitation, washing, and menstrual hygiene management (MHM) facilities for girls. By addressing the specific needs and vulnerabilities of women, girls, and sexual and gender minorities, such as through the inclusion of dignity kits in the distributed hygiene kits, the activities aimed to enhance their access to clean water, sanitation facilities, and hygiene resources

e. People with disabilities (PwD):

During the designing and implementation of the response, the WASH Activities aimed to meet the essential needs of persons with disabilities (PwD) by ensuring accessibility and inclusion within the WASH context. It addressed specific risks faced by PwD, particularly women and girls, by providing accessible facilities, services, and resources. This includes ramps, grab bars, and tactile signage for individuals with mobility impairments, as well as gender-sensitive approaches to address the unique challenges faced by women and girls with disabilities.

f. Protection:

The project design for WASH activities has taken into consideration the protection of all individuals who may be affected or at-risk. For instance, in the WASH sector, toilets have been designed with closed doors to ensure privacy and security. Sufficient lighting has been provided to ensure visibility and safety. Additionally, male, and female facilities have been separated to respect and protect the dignity and safety of all individuals. These measures aimed to create a safe and inclusive environment for all persons involved in the project.

g. Education:

NA

8. Cash and Voucher Assistance (CVA)

Use of Cash and Voucher Assistance (CVA)?

Planned	Achieved	Total number of people receiving cash assistance:
No	No	N/A

If **no**, please describe why CVA was not considered. Where feasible, CVA should be considered as a default response option, and multi-purpose cash (MPC) should be utilised wherever possible.

If **yes**, briefly note how CVA is being used, highlighting the use of MPC, and if any linkages to existing social protection systems have been explored.

Cash was not the best delivery modality for this project, which focused on physical implements in the WASH sector.

Parameters of the used CVA modality:

Specified CVA activity (incl. activity # from results framework above)	Number of people receiving CVA	Value of cash (US\$)	Sector/cluster	Restriction
[Fill in]	[Fill in]	US\$ [insert amount]	Choose an item.	Choose an item.
[Fill in]	[Fill in]	US\$ [insert amount]	Choose an item.	Choose an item.
[Fill in]	[Fill in]	US\$ [insert amount]	Choose an item.	Choose an item.

9. Visibility of CERF-funded Activities

Title	Weblink
UNICEF's Emergency Aid Efforts supported by CERF	Link
World Humanitarian Day	Link
Facebook post on UNCERF funded interventions	Link
WASH facilities	Link
Hygiene Kits	Link
Clean Water	Link

3.4 Project Report 23-RR-WFP-025

1. Project Information			
Agency:	WFP	Country:	Egypt
Sector/cluster:	Multi-Purpose Cash	CERF project code:	23-RR-WFP-025
Project title:	WFP Emergency Multi-Purpose Cash Assistance for Sudan Crisis		
Start date:	16/05/2023	End date:	15/11/2023
Project revisions:	No-cost extension <input type="checkbox"/>	Redeployment of funds <input type="checkbox"/>	Reprogramming <input type="checkbox"/>

Funding	Total requirement for agency's sector response to current emergency:	US\$ 16,570,000
	Total funding received for agency's sector response to current emergency:	US\$ 500,000
	Amount received from CERF:	US\$ 1,700,000
	Total CERF funds sub-granted to implementing partners:	US\$ [0]
	Government Partners	US\$ [0]
	International NGOs	US\$ [0]
National NGOs	US\$ [0]	
Red Cross/Crescent Organisation	US\$ [0]	

2. Project Results Summary/Overall Performance

As of November 2023, WFP provided multi-purpose cash assistance to 79,870 crisis-affected individuals of which 14,238 were supported from the CERF grant. The assisted Sudanese received 450 EGP (equivalent to 14.6 USD) cash assistance in the form of e-cards and redeemed their entitlements at over 140,000 points of sales to meet their urgent essential needs for food and nutrition. In the beginning of the project, WFP identified key community-based organisations (CBOs) and closely liaised with community leaders across Egypt, to effectively outreach to the affected populations and engage them in the programme design, including the selection of targeting criteria. In collaboration with the Sohag Community Development Association for Women and Children's Situations Improvement, WFP's long-standing partner Community Based Organization, WFP enrolled and distributed e-cards to Sudanese individuals using WFP's cash-based transfer and enrolment tool developed during the emergency response. The innovative tool is a flexible model capable of hosting different transfer values and distribution models, providing a single integrated process for registration, de-duplication and distribution within three minutes, which facilitates beneficiaries to receive cash in hand at credible speed. WFP cash delivery platform is available to partners to reach crisis-affected Sudanese during the crisis.

To ensure regular monitoring of the WFP interventions, WFP prepared a dedicated monitoring and evaluation plan. In July 2023, a baseline was conducted with a representative sample of newly arrived Sudanese that aimed to assess their food security level at the time of their arrival to Egypt and to understand the impact of war on their food consumption, reliance on coping strategies, and other challenges. In December 2023, a post-monitoring distribution survey (PDMs) was conducted 6 months after the response to the Sudan crisis with 350 Sudanese beneficiaries benefiting from WFP programme that aimed to assess the food security status of the beneficiaries in comparison to their status upon their arrival in Egypt. Key findings include that there was an improvement in the overall

food security levels of the beneficiaries compared to July baseline results after receiving WFP cash assistance for at least 3 months. Results indicated an increase in the acceptable food consumption score by 13% to reach 86.6% compared to 74% in July 2023.

3. Changes and Amendments

There were no major changes or amendments during the implementation of this project. Overall, the project was implemented smoothly without any delays and successfully achieved all target indicators.

4. Number of People Directly Assisted with CERF Funding*

Sector/cluster	Multi-Purpose Cash									
Category	Planned					Reached				
	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Refugees	5,849	1,414	3,513	3,462	14,238	6,834	2,848	2,848	1,709	14,238
Returnees	0	0	0	0	0					
Internally displaced people	0	0	0	0	0					
Host communities	0	0	0	0	0					
Other affected people	0	0	0	0	0					
Total	5,849	1,414	3,513	3,462	14,238	6,834	2,848	2,848	1,709	14,238
People with disabilities (PWD) out of the total										
	877	212	527	519	2,135	83	35	34	21	173

* Figures represent best estimates of people directly supported through CERF funding. Disaggregation by sex and age represents women and men ≥18, girls and boys <18.

5. People Indirectly Targeted by the Project

Given the urgency of the crisis and the enormous scale of the Sudanese influx in Egypt, WFP adopted individual support approach rather than household targeting. Such approach ensured that each and every crisis-affected individual receive their assistance regardless of their age and household size.

6. CERF Results Framework

Project objective	Provision of life-saving support to the most vulnerable new arrivals from Sudan with cash-based assistance			
Output 1	Food insecure displaced Sudanese populations in Egypt have access to adequate food			
Was the planned output changed through a reprogramming after the application stage? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>				
Sector/cluster	Multi-Purpose Cash			
Indicators	Description	Target	Achieved	Source of verification
Indicator 1.1	Cash.1a Number of people receiving multi-purpose cash	14,238	14,238	WFP report
Indicator 1.2	Cash.1b Total value of multi-purpose cash distributed in USD	1,247,249	1,247,249	WFP report
Explanation of output and indicators variance:		N/A		
Activities	Description	Implemented by		
Activity 1.1	Identification of CBOs	WFP		
Activity 1.2	Identification of Distribution sites	WFP		
Activity 1.3	Enrolment of Sudanese individuals	WFP & Sohag Community Development Association for Women and Children's Situations Improvement		
Activity 1.4	Distribution of e-cards for Sudanese individuals	WFP & Sohag Community Development Association for Women and Children's Situations Improvement		
Activity 1.5	Monitoring of activities using PDM	WFP		
Activity 1.6	Reporting on monitoring results	WFP		

7. Effective Programming

CERF expects partners to integrate and give due consideration to cross-cutting issues such as Accountability to Affected People (AAP), Protection from Sexual Exploitation and Abuse (PSEA), People with disabilities (PwD), Centrality of Protection as well as Gender and Age. In addition, the Emergency Relief Coordinator (ERC) has identified four underfunded priority areas⁸ often lacking appropriate consideration and visibility: women and girls, people with disabilities, education and protection. **The following sections demonstrate how cross-cutting issues and the ERC's four underfunded priority areas have been addressed through project activities and should highlight the achieved impact wherever possible.**

⁸ These areas include: support for women and girls, including tackling gender-based violence, sexual and reproductive health and empowerment; programmes targeting people with disabilities; education in protracted crises; and other aspects of protection. The ERC recommended an increased focus on these four areas to ensure that they be given due consideration by RC/HCs and UNCTs/HCTs when prioritizing life-saving needs for inclusion in CERF requests. While CERF remains needs-based, the ERC will be looking for country teams to prioritize projects and mainstreamed activities that systematically and effectively address to these four historically underfunded areas. Please see the Questions and Answers on the ERC four priority areas [here](#).

a. Accountability to Affected People (AAP) ⁹:

To uphold accountability to affected people, WFP ensured that the affected populations were included in the process of programme design. WFP conducted a participatory context analysis in consultation with affected populations, community leaders, CBOs and NGOs to identify the most vulnerable populations. WFP leveraged its extensive network with the existing Sudanese community to identify Sudanese newcomers. WFP conducted several monitoring and evaluation assessments, including the baseline assessment and targeting validation exercise by conducting FGDs and KII. During the PDMs data collection process, AAP measures were taken into consideration, including ensuring safety and protection measures were in place, accessibility to WFP interventions and the awareness of beneficiaries of their entitlements. The WFP's post-distribution monitoring survey results showed that almost all of the beneficiaries reported being treated respectfully by WFP staff and the majority of the beneficiaries had not reported security and safety challenges while receiving their assistance. However, a limited number of beneficiaries reported being exposed to bullying on their way to and/or returning from the financial service providers (FSP) POS and reported via WFP complaint and feedback mechanisms. Accordingly, WFP reached out to those reported cases and ensured proper measures were in place.

b. AAP Feedback and Complaint Mechanisms:

WFP made dedicated complaint and feedback mechanisms available for the crisis-affected populations. WFP's two-way communication channels in place included WFP hotline, social media (Facebook and WhatsApp), email, on-site complaint and feedback mechanisms (help desk and feedback box) and others. Any card-related issues were directed to the FSP hotline. Community leaders and CBOs which are one of the strongest communication channels were leveraged to deliver key information and receive not only feedback and complaints from the affected populations but also referrals for WFP's assistance programme. Furthermore, WFP used SMS to share key information, especially for cash redemption dates or any other updates or important information.

c. Prevention of Sexual Exploitation and Abuse (PSEA):

WFP developed prevention of sexual exploitation and abuse (PSEA) messages and shared them with the people we serve at the distribution sites. PSEA messages were also recorded on the WFP hotline to increase awareness among the community, and hotline operators and frontline workers received refresher training on protection/PSEA at the beginning of the crisis response. WFP also ensured that the focal point was in place to record and handle PSEA-related complaints.

d. Focus on women, girls and sexual and gender minorities, including gender-based violence:

WFP conducted baseline assessments as well as FGD and KII to identify the most vulnerable populations and ensure their engagement in programme design, implementation and monitoring phases. Findings were disaggregated by age, gender and other vulnerabilities, ensuring that intersectionality was fully considered. Key findings from the assessments informed vulnerability criteria. Accordingly, WFP's emergency cash assistance programme focused on the most vulnerable individuals identified, including women and girls. The assistance eligibility criteria specifically targeted pregnant and breastfeeding women, single women with children under 18, unaccompanied or separated children, and people with disabilities.

e. People with disabilities (PwD):

⁹ AAP and PSEA are part and parcel of IASC commitments, and therefore mandatory for compliance for all UN agencies and partners. Agencies do not necessarily need to establish new AAP and PSEA mechanisms for CERF projects if functioning ones are already in place. For more information please refer to the [IASC AAP commitments](#).

Persons with disabilities were one of the eligibility criteria for WFP's emergency cash assistance, regardless of their age – adults and children. During the crisis response, WFP established a new partnership with Humanitarian Inclusion (HI) to create a referral pathway. In collaboration with HI, WFP frontline staff were also trained on disability inclusion, enabling them to identify disability cases through standard questions.

f. Protection:

WFP has actively participated in Inter-agency PSEA Network, established in response to the Sudan crisis. WFP developed protection-related communication materials to be shared with the people we serve. Protection and PSEA-related messages were not only shared with beneficiaries through hotline operators, but also the frontline staff were trained on this topic.

g. Education:

N/A

8. Cash and Voucher Assistance (CVA)

Use of Cash and Voucher Assistance (CVA)?

Planned	Achieved	Total number of people receiving cash assistance:
Yes, CVA is the sole intervention in the CERF project	Yes, CVA is the sole intervention in the CERF project	14,238

If **no**, please describe why CVA was not considered. Where feasible, CVA should be considered as a default response option, and multi-purpose cash (MPC) should be utilised wherever possible.

If **yes**, briefly note how CVA is being used, highlighting the use of MPC, and if any linkages to existing social protection systems have been explored.

WFP's multi-purpose cash assistance was unrestricted yet used mainly for essential basic needs of the crisis-affected Sudanese. WFP's assessment found that the WFP assistance has highly contributed to the food needs of the households. Almost 9 out of 10 households reported spending WFP cash assistance on food.

Parameters of the used CVA modality:




Specified CVA activity (incl. activity # from results framework above)	Number of people receiving CVA	Value of cash (US\$)	Sector/cluster	Restriction
Activity 1	14,238	US\$ 1,247,249	Multi-Purpose Cash	Unrestricted

9. Visibility of CERF-funded Activities

Title	Weblink
05.03 WFP Rep – X post – Food assistance (in EN)	https://x.com/Agrowal P K/status/1653738121412898817?s=20
05.10 WFP Global – X post video – WFP food assistance on regional level	https://x.com/WFP/status/1667173454250999808?s=20

05.11 WFP MENA – Instagram post -	https://www.instagram.com/p/CsGHCTqoU6X/?utm_source=ig_web_copy_link&igsh=MzRIODBiNWFIZA==
05.13 WFP MENA – Instagram video – food assistance	https://www.instagram.com/reel/CsLcA3WlvTu/?utm_source=ig_web_copy_link&igsh=MzRIODBiNWFIZA==
05.15 Launch of CBT assistance - press release – WFP website	https://www.wfp.org/news/wfp-egypt-provides-critical-assistance-people-fleeing-violence-sudan?&utm_source=twitter&utm_medium=organicpost&utm_campaign=newsrelease&utm_content=squarevideo
05.15 WFP MENA – Instagram video – one month into crisis	https://www.instagram.com/reel/CsQsWSNouZ7/?utm_source=ig_web_copy_link&igsh=MzRIODBiNWFIZA==
05.16 WFP Global – X post video – Sudan crisis onset	https://x.com/WFP/status/1658351578091323394?s=20
05.16 WFP Rep – X post – launch of CBT assistance press release	https://x.com/Agrawal_P_K/status/1658509118150258689?s=20
05.17 WFP MENA – X post – Distribution of food at border areas (in EN)	https://twitter.com/WFP_MENA/status/1658776392866181121
05.17 WFP AR – X post – Distribution of food at border areas (in AR)	https://twitter.com/WFP_Arabic/status/1658781672819638272
05.18 WFP MENA – Instagram – Distribution of food at border areas (in EN)	https://www.instagram.com/p/CsYrrb-oLJJ/
05.18 WFP MENA – Facebook – Distribution of food at border areas (in AR)	https://www.facebook.com/WFPMENA/posts/pfbid0PMPcW9uumzwxPt9GcEX6uNPYuNZhtq74dSE_Sbu982zgz96evLkYHrMMs44LFkXul
05.18 WFP Global – Facebook – Distribution of food at border areas (in AR)	https://www.facebook.com/WorldFoodProgramme.Arabic/posts/pfbid0HRhBiYk4V7UFwrpEjC19ASE_VafrNv2UnhQbt2Ackc3ieprxBisqsTV6hm8xzwW5il
05.18 WFP MENA - X post video - Distribution of food at border areas (in EN)	https://twitter.com/WFP_MENA/status/1659121833797464067
05.18 WFP MENA - X post video – interview with Regional Director for Eastern Africa (in EN)	https://twitter.com/WFP_MENA/status/1659152189258973187
05.19 WFP MENA – X post video - WFP assistance one month into the crisis (in EN)	https://twitter.com/WFP_MENA/status/1659484048765472769
05.19	https://twitter.com/WFP_Arabic/status/1659484038229536774

WFP AR – X post video - WFP assistance one month into the crisis (in AR)	
05.21 WFP Global – X post – beneficiary focus (in EN)	https://x.com/WFP/status/1660163577066430465?s=20
05.21 WFP Global – X post – video of 6-month into the crisis (in EN)	https://x.com/WFP/status/1660163577066430465?s=20
05.21 WFP Rep – X post – launch of CBT assistance with UNICEF	https://x.com/Agrawal_P_K/status/1660255402628378624?s=20
05.24 WFP MENA – X post video - with WFP and UNICEF Rep interviews – announcing launch of cash assistance (in EN)	https://twitter.com/WFP_MENA/status/1661319372122595328
05.24 WFP AR – X post video - with WFP and UNICEF Rep interviews – announcing launch of cash assistance (in AR)	https://twitter.com/WFP_Arabic/status/1661363726560161794
05.24 WFP MENA – X post video – cash assistance explainer (in EN)	https://twitter.com/WFP_MENA/status/1661319372122595328
05.24 WFP AR – X post video – cash assistance explainer (in AR)	https://twitter.com/WFP_Arabic/status/1661363726560161794
05.30 WFP MENA – X post – update on the situation (in EN)	https://twitter.com/WFP_MENA/status/1663455525726482432
05.30 WFP AR – X post – update on the situation (in AR)	https://twitter.com/WFP_MENA/status/1663455525726482432
06.01 WFP website – article on CBT assistance (in EN)	https://www.wfp.org/stories/egypt-how-wfp-signs-refugees-sudan-cash-grants-three-minutes?utm_source=twitter&utm_medium=organicpost&utm_campaign=webstory&utm_content=linkcard
06.03 WFP Global – X post – article on CBT assistance (in EN)	https://x.com/WFP/status/1664935052726108163?s=20
06.09 WFP Global – X post video – Sudan crisis response - regional with mention of Egypt	https://x.com/WFP/status/1656282943676100609?s=20
08.21 OCHROMENA – X post – WFP staff support for Sudan	
10.10	https://www.wfp.org/publications/6-months-overview-sudan-crisis-response-egypt

6 -months overview brief	
Popup with CERF and WFP logo (in AR)	
Poster with CERF logo (in AR)	
Flyer with CERF and WFP logo (in AR)	

3.5 Project Report 23-RR-WHO-024

1. Project Information			
Agency:	WHO	Country:	Egypt
Sector/cluster:	Health	CERF project code:	23-RR-WHO-024
Project title:	Supporting Emergency Health Response to Sudan Crisis in Egypt		
Start date:	01/06/2023	End date:	30/11/2023
Project revisions:	No-cost extension <input type="checkbox"/>	Redeployment of funds <input type="checkbox"/>	Reprogramming <input type="checkbox"/>

Funding	Total requirement for agency's sector response to current emergency:	US\$ 5,000,000
	Total funding received for agency's sector response to current emergency:	US\$ 300,000
	Amount received from CERF:	US\$ 750,000
	Total CERF funds sub-granted to implementing partners:	US\$ 0
	Government Partners	US\$ 0
	International NGOs	US\$ 0
National NGOs	US\$ 0	
Red Cross/Crescent Organisation	US\$ 0	

2. Project Results Summary/Overall Performance

Through the CERF Grant WHO and its partners provided lifesaving medical services to 623 Sudanese patients (included 18 dialysis patients) free of charge in 10 hospitals around Aswan governorate, a total of 278 Sudanese living with HIV, 738 TB cases and 39 confirmed cases of Malaria were identified and linked to care, and approximately 50,000 Sudanese and host communities benefited mental health and GBV services. Moreover, for the protection of both the Sudanese and the host communities a total of 24,994 doses of polio vaccines and 12,318 MMR vaccines were administered at PoE.

On the other hand, more than 40 metric tons of essential medical supplies (NCD kits- surgical supplies- etc.) were procured to serve 40,000 beneficiaries in 6 directorates, 5000 RDT cholera kits to serve 5000 beneficiaries, 90 PED-SAM medicines to serve 4300 beneficiaries, NCD kits and insulin cold chain to serve 40,000 beneficiaries, and 25,400 PPEs for civil society organizations working to serve the Sudanese refugees.

Also 2 caravans were prepared to serve in outreach activities, one at Quostol crossing to host HCWs tending to those displaced, and another at New elSadaka neighbourhood to serve as a NCD and Mental health clinic.

Moreover, in cooperation with UNICEF a WASH assessment was conducted of HCFs and accordingly 100 waste containers, two 1000L water tanks, 6 latrines, 500 standard hygiene kits, and IPC supplies & water quality testing devices for 19 HCFs were procured to address identified gaps.

As for training and capacity building, a series of trainings were conducted in different relevant areas including surveillance measures with emphasis on polio surveillance, vector surveillance, case management of communicable and non-communicable diseases, WASH IPC trainings, RCCE, Responding to GBV, and clinical management of rape.

3. Changes and Amendments

N/A

4. Number of People Directly Assisted with CERF Funding*

Sector/cluster	Health									
Category	Planned					Reached				
	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Refugees	50,111	21,551	23,930	23,930	119,522	60,081	21,157	24,854	15,785	121,874
Returnees	0	0	0	0	0	0	0	0	0	0
Internally displaced people	0	0	0	0	0	0	0	0	0	0
Host communities	29,120	26,544	7,280	7,056	70,000	32,255	25,005	7,896	6,503	71,659
Other affected people	0	0	0	0	0	0	0	0	0	0
Total	79,231	48,095	31,210	30,986	189,522	92,336	46,759	32,750	22,28	193,533
People with disabilities (PwD) out of the total										
	7,516	3,232	3,590	3,590	17,928	0	0	0	0	0

* Figures represent best estimates of people directly supported through CERF funding. Disaggregation by sex and age represents women and men ≥18, girls and boys <18.

5. People Indirectly Targeted by the Project

The governorate of Aswan has an estimated population density of 1,632,171 million people, almost equally divided between both sexes which are expected to indirectly benefit from the in enhancement of health services for communicable and non-communicable diseases, increases referral services capacities, in addition to increased capacities in mental and psychological healthcare services. In addition to an estimated 178539 under 5 children that benefit from the enforcement of vaccination coverage.

6. CERF Results Framework

Project objective Promoting health and well-being and reduction of morbidity and mortality of the refugee population and the host communities by supporting the prevention, preparedness and response to diseases including communicable diseases, non-communicable diseases, psychological diseases and emergency medical conditions as trauma.

Output 1 Enhance emergency and routine vaccination campaigns for measles, polio, and other vaccine-preventable diseases.

Was the planned output changed through a reprogramming after the application stage? Yes No

Sector/cluster	Health			
Indicators	Description	Target	Achieved	Source of verification
Indicator 1.1	H.4 Number of people vaccinated.	50,000	37,312	MOHP records
Explanation of output and indicators variance:		WHO after delegations with the MOHP and consultation with the regional advisors only procured 2500 vial of Hib vaccine and 15,000 rabies vials		
Activities	Description	Implemented by		
Activity 1.1	Procurement of yellow fever, MR and HBV vaccines.	Amended		
Activity 1.2	Development and distribution of IEC materials that promote vaccination campaign.	WHO – MOHP – civil societies (Intilaqa Committee)		
Activity 1.3	Vaccination of all refugee population at POE.	MOHP		

Output 2 Enhanced early detection and response to communicable diseases with potential outbreaks.

Was the planned output changed through a reprogramming after the application stage? Yes No

Sector/cluster	Health			
Indicators	Description	Target	Achieved	Source of verification
Indicator 2.1	H.5 Percentage of public health alerts generated through community-based and/or health-facility-based surveillance or alert systems investigated within 24 hours.	100	100	MOHP internal records
Explanation of output and indicators variance:		none		
Activities	Description	Implemented by		
Activity 2.1	Quick refresher training for multi-disciplinary Rapid Response Team in emergency operating centres.	MOHP – EHA _ WHO		
Activity 2.2	Procurement of RDT CHOLERA.	WHO Dubai hub		

Activity 2.3	Procurement of communications tools and laptops to support public health threats information collection and reporting at POEs.	WHO
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Output 3	Provision of lifesaving medical services including trauma care and SAM inpatient services.			
Was the planned output changed through a reprogramming after the application stage? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>				
Sector/cluster	Health			
Indicators	Description	Target	Achieved	Source of verification
Indicator 3.1	H.1a Number of emergency health kits delivered to healthcare facilities.	50	710	MOHP- EHA- Aswan university hospital – WHO records
Indicator 3.2	H.2 Number of people receiving surgical procedures for trauma	300	582	MOHP-EHA- Aswan university hospital- WHO records
Explanation of output and indicators variance:		An increase in the procurement of emergency kits was warranted upon the request of the MOHP		
Activities	Description	Implemented by		
Activity 3.1	Contract with secondary and tertiary hospitals to provide Life-Saving procedures for victims of trauma, and other medical emergencies.	MOHP-EHA- Aswan university hospital		
Activity 3.2	Procurement of essential drugs, medical diagnostic, supplies and kits for management of medical emergencies.	WHO		

Output 4	Access to basic health care services in PHC and hospitals and provision of mental health, psycho-social support, sexual & reproductive health and NCD medical care.			
Was the planned output changed through a reprogramming after the application stage? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>				
Sector/cluster	Health			
Indicators	Description	Target	Achieved	Source of verification
Indicator 4.1	H.7 Number of functional health facilities supported.	10	10	MOHP – EHA – WHO records
Indicator 4.2	H.8 Number of primary healthcare consultations provided.	10,000	12,376	MOHP – EHA records
Indicator 4.3	H.9 Number of people provided with mental health and/or psycho-social support services.	5,000	5000	MOHP internal records
Explanation of output and indicators variance:		N/A		
Activities	Description	Implemented by		
Activity 4.1	Quick refresher trainings of PHC and Hospital staff in Aswan on sexual and reproductive health, patient safety and IPC practices.	MOHP-EHA- Aswan university hospital		

Activity 4.2	Operational Support the ERC mobile clinics that provide mental health & psychosocial support to refugees.	MOHP-EHA- Aswan university hospital
Activity 4.3	Procurement of essential drugs for NCD and examination gloves.	WHO

7. Effective Programming

CERF expects partners to integrate and give due consideration to cross-cutting issues such as Accountability to Affected People (AAP), Protection from Sexual Exploitation and Abuse (PSEA), People with disabilities (PwD), Centrality of Protection as well as Gender and Age. In addition, the Emergency Relief Coordinator (ERC) has identified four underfunded priority areas¹⁰ often lacking appropriate consideration and visibility: women and girls, people with disabilities, education and protection. **The following sections demonstrate how cross-cutting issues and the ERC's four underfunded priority areas have been addressed through project activities and should highlight the achieved impact wherever possible.**

a. Accountability to Affected People (AAP)¹¹:

Each of the implemented activity theme was preceded by an assessment visit by WHO staff in cooperation with other implementing partners involved in each specific activity to identify the present gaps and align them with the available resources as directed by the agreement and with the guidance of the regional advisors from the WHO EMRO office.

This allowed the amendment of some activities such vaccine procurement, and the upscaling of much needed ones such as surgical interventions for a group of Sudanese patients and increase in the number of procured emergency kits.

b. AAP Feedback and Complaint Mechanisms:

Complaints and feedback were sent through the following mechanisms.

- Emailing nichp@mohp.gov.eg or calling a hotline at 27957689
- Sending a letter to the health care facility level GRC (the existing Shura council at each facility level)
- Sending a letter directly to the provincial health authority/ and provincial contracted NGO for health services
- Through complaint boxes at the healthcare where a complaint is registered in the grievance logbook of the healthcare facility.

Once a complaint is received it is recorded in the complaints logbook or grievance excel sheet database for registration and categorization.

Level 1: Grievance discussed with the focal point at the community level

Level 2: Grievance shared with the respective health facility staff, health facility manager and/or health shura counsellor

Level 3: Grievance raised to higher level stakeholder under the chair of provincial health director

Level 4: Appeal to the National MOHP experts

c. Prevention of Sexual Exploitation and Abuse (PSEA):

WHO applies victim/survivor-centric focus to the human rights-based approach to preventing and responding to sexual exploitation and abuse .In its interactions with victims/survivors of sexual misconduct, WHO prioritizes listening to victims/survivors, avoiding re-

¹⁰ These areas include: support for women and girls, including tackling gender-based violence, sexual and reproductive health and empowerment; programmes targeting people with disabilities; education in protracted crises; and other aspects of protection. The ERC recommended an increased focus on these four areas to ensure that they be given due consideration by RC/HCs and UNCTs/HCTs when prioritizing life-saving needs for inclusion in CERF requests. While CERF remains needs-based, the ERC will be looking for country teams to prioritize projects and mainstreamed activities that systematically and effectively address to these four historically underfunded areas. Please see the Questions and Answers on the ERC four priority areas [here](#).

¹¹ AAP and PSEA are part and parcel of IASC commitments, and therefore mandatory for compliance for all UN agencies and partners. Agencies do not necessarily need to establish new AAP and PSEA mechanisms for CERF projects if functioning ones are already in place. For more information please refer to the [IASC AAP commitments](#).

traumatization, and systemically focusing on their safety, rights, wellbeing, expressed needs and choices, thereby giving back as much control as feasible and focussing on an empathetic and sensitive delivery of services and accompaniment in a non-judgmental manner. WHO ensures that the rights, needs, safety, dignity and well-being of victims/survivors of sexual misconduct remain central to the responsibilities of the Organization, its staff and collaborators, and embedded all actions, processes and efforts to prevent and address sexual misconduct. The principles of do no harm, confidentiality, transparency, accountability, and duty to report [to IOS (investigation@who.int) or WHO Integrity Hotline], prevention, non-discrimination and equal application shall guide WHO's approach to preventing and addressing sexual misconduct.

d. Focus on women, girls and sexual and gender minorities, including gender-based violence:

The WHO 13th General Programme of Work (GPW) includes violence against women as part of its contribution to Sustainable Development Goal (SDG) 5 on gender equality and women's empowerment (specifically, SDG 5.2 on the elimination of violence against women and girls. Through the project activities were set specifically to survivors of GBV activities such as rape physically and mentally, through capacity building and mobile caravan clinic to ensure a reachable and dignified service to those in need.

e. People with disabilities (PwD):

The project provided 2 prosthetic limbs and covered 1 hip replacement surgery for Sudanese patients in addition to the donation of 12 wheelchairs to facilitate the transportation of PwD. On the other hand during the assessment visits and while setting up the caravan mobile clinic accessibility options were considered by team members and adjusted if any problems were detected.

f. Protection:

N/A

g. Education:

N/A

8. Cash and Voucher Assistance (CVA)

Use of Cash and Voucher Assistance (CVA)?

Planned	Achieved	Total number of people receiving cash assistance:
No	Choose an item.	[Fill in]

If **no**, please describe why CVA was not considered. Where feasible, CVA should be considered as a default response option, and multi-purpose cash (MPC) should be utilised wherever possible.

If **yes**, briefly note how CVA is being used, highlighting the use of MPC, and if any linkages to existing social protection systems have been explored.

[Fill in]

Parameters of the used CVA modality:

Specified CVA activity (incl. activity # from results framework above)	Number of people receiving CVA	Value of cash (US\$)	Sector/cluster	Restriction
n/a	n/a	n/a	n/a	Choose an item.

9. Visibility of CERF-funded Activities	
Title	Weblink
Social media posts	<ul style="list-style-type: none"> • https://web.facebook.com/WHOEgypt/posts/pfbid02paBCqXQNhw6G1VuASdADnqWUeLCTjthRvBhYofmTPKuqU3yJDBHT7JJEg7aUG3sLl • https://web.facebook.com/WHOEgypt/posts/pfbid0SJDgaBnh7WARvXD5TQhp257M46y3SzcwBZjecmSZnGDKcMkJMGo4WvLgJqbpVcHl • https://web.facebook.com/WHOEgypt/posts/pfbid02zsfY1KZMQNK9iSpvEAG5zk7QF9YiBae4qddMMocDqZnHCpDhrrvGvLrbiGBqNWvWI • https://web.facebook.com/WHOEgypt/posts/pfbid0337xF8Lbang5trPJ25jZDGpBhv2JAFBpQnmUsjLtRBrDNTBRYrPrPVhxqpGZ38QLNI • https://web.facebook.com/WHOEgypt/posts/pfbid02IP7EfhbLYecEzQPAni4RyNTh6mXvoJU8rN9hfo2m4zPpjsCYVa6tbTKQrCC3Zhurl • https://web.facebook.com/WHOEgypt/posts/pfbid027zbr3jsxiB5Epnj4hzYFNuTAsbUtrzMKYzskHG85HPrWEy74oKkk82XfUyXLsd5NI • https://web.facebook.com/WHOEgypt/posts/pfbid02iWeB4HKXRP9hyURGkEKVW7DVtqVWvVf71MNM9rFSumpDbMhCmq6NslyncuulMxhXI • https://web.facebook.com/watch/?v=290410800627022
External situation reports on EMRO website – Egypt’s landing page	<ul style="list-style-type: none"> • https://www.emro.who.int/egy/egypt-infocus/situation-reports-on-whos-response-to-sudan-emergency.html • https://www.emro.who.int/images/stories/sudan/WHO-Egypt-Sudan-Situation-Report-3.pdf?ua=1 • https://www.emro.who.int/images/stories/sudan/WHO-Egypt-Sudan-Situation-Report-4.pdf?ua=1
External situation reports on Relief Web (OCHA global website):	<ul style="list-style-type: none"> • https://reliefweb.int/report/egypt/who-egypt-response-sudan-emergency-external-situation-report-2-issued-16-june-2023

ANNEX: CERF FUNDS DISBURSED TO IMPLEMENTING PARTNERS

Project Code	Sector	Agency	Partner Type	Amount
23-RR-FPA-024	Sexual and Reproductive Health	UNFPA	GOV	\$29,177
23-RR-FPA-024	Protection	UNFPA	NNGO	\$229,830
23-RR-CEF-032	Water, Sanitation and Hygiene	UNICEF	RedC	\$116,290
23-RR-CEF-032	Water, Sanitation and Hygiene	UNICEF	GOV	\$140,712
23-RR-WFP-025	Multi-Purpose Cash	WFP		
23-RR-WHO-024	Health	WHO	RedC	\$72,000
23-RR-WHO-024	Health	WHO	GOV	\$50,000
23-RR-WHO-024	Health	WHO	GOV	\$64,000