

## TECHNICAL ANNEX GREATER HORN OF AFRICA

### FINANCIAL, ADMINISTRATIVE AND OPERATIONAL INFORMATION

The provisions of the financing decision ECHO/WWD/BUD/2023/01000 and the General Conditions of the Agreement with the European Commission shall take precedence over the provisions in this document.

The activities proposed hereafter are subject to any terms and conditions that may be included in the related Humanitarian Implementation Plan (HIP).

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## 2. FINANCIAL INFO

Indicative Allocation<sup>2</sup>: **EUR 246 500 000**<sup>3</sup> of which an indicative amount of **EUR 31 000 000** for Education in Emergencies.

In line with DG ECHO's commitment under the Grand Bargain initiative, pilot Programmatic Partnerships have been launched in 2020, 2021 and 2022 with a limited number of partners. An indicative amount of **EUR 18 500 000** will be dedicated to these Programmatic Partnerships in 2023. In addition, new Programmatic Partnerships could be

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<sup>2</sup> The Commission reserves the right not to award all or part of the funds made or to be made available under the HIP to which this Annex relates, or to allocate part of the funding to interventions with a regional or multi-country approach.

<sup>3</sup> Total amount of the HIP

signed in 2023<sup>4</sup>. Part of the allocation of this HIP could, therefore, also be attributed to these new Programmatic Partnerships.

Indicative breakdown per Actions as per Worldwide Decision (in euros):

Countries	Action (a) Man-made crises and natural hazards	Action (b) Initial emergency response/small- scale/epidemics	Action (c) Disaster Preparedness	Actions (d) to (f) Transport / Complement ary activities	TOTAL
Djibouti	500 000				500 000
Ethiopia	60 500 000				60 500 000
Kenya	11 000 000		1 500 000		12 500 000
Somalia	55 500 000		1 500 000		57 000 000
South Sudan	40 000 000		2 000 000		42 000 000
Sudan	44 000 000				44 000 000
Uganda	27 000 000		3 000 000		30 000 000
Regional					
<b>Total HIP amount</b>	<b>238 500 000</b>		<b>8 000 000</b>		<b>246 500 000</b>

### 3. PROPOSAL ASSESSMENT

#### a) Co-financing:

Under the EU Financial Regulation, grants must involve co-financing; as a result, the resources necessary to carry out the action must not be provided entirely by the grant. An action may only be financed in full by the grant where this is essential for it to be carried out. In such a case, justification must be provided in the Single Form (section 10.4).

#### b) Financial support to third parties (implementing partners)

Pursuant to Art. 204 FR, for the implementation of actions under this HIP, partners may provide financial support to third parties, e.g. implementing partners. This financial support can only exceed EUR 60 000 if the objectives of the action would otherwise be impossible or excessively difficult to achieve. Such situations can occur in cases where only a limited number of non-profit non-governmental

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<sup>4</sup> More information can be found in the ‘Guidance to Partners – DG ECHO Programmatic partnerships 2023’ <https://www.dgecho-partners-helpdesk.eu/ngo/humanitarian-partnership-2021-2027/programmatic-partnership>

organisations have the capacity, skills or expertise to contribute to the implementation of the action or are established in the country of operation or in the region(s) where the action takes place.

Ensuring broad geographical/worldwide coverage while minimising costs and avoiding duplications concerning, in particular, presence in country, prompted many humanitarian organisations to network, e.g. through families or confederations. In such a context, the situations referred to above would imply that the partner would rely on other members of the network. In such cases, justification must be provided in the Single Form.

c) Alternative arrangements

In case of country or crisis-specific issues or unforeseeable circumstances, which arise during the implementation of the action, the Commission (DG ECHO) may issue specific ad-hoc instructions which partners must follow. Partners may also introduce via the Single Form duly justified requests for alternative arrangements to be agreed by the Commission (DG ECHO) in accordance with Annex 5 to the Grant Agreement.

d) Field office costs

Costs for use of the field office during the action are eligible and may be declared as unit cost according to usual cost accounting practices, if they fulfil the general eligibility conditions for such unit costs and the amount per unit is calculated:

- i. using the actual costs for the field office recorded in the beneficiary's accounts, attributed at the rate of office use and excluding any cost which are ineligible or already included in other budget categories; the actual costs may be adjusted on the basis of budgeted or estimated elements, if they are relevant for calculating the costs, reasonable and correspond to objective and verifiable information

and

- ii. according to usual cost accounting practices which are applied in a consistent manner, based on objective criteria, regardless of the source of funding.

e) Actions embedded in multiannual strategies

Funding under this HIP may be used to finance actions implemented in the framework of multiannual strategies, as and when provided for in the HIP.

f) Regional and multi-country actions

Regional/multi-country actions can be supported under this HIP (and where relevant in conjunction with other HIPs<sup>5</sup>), where they are proven more suitable/effective than country-based interventions to respond to identified needs, taking into account the operating context, the strategy and the priorities set out in the HIP (or respective HIPs), the operational guidelines provided in section 4.1.2. of this Annex, as well as the applicant organisation's capacities. The proposals should specify the breakdown between the different country allocations.

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<sup>5</sup> For multi country actions falling under more than one HIP, partners are requested to submit only one proposal in APPEL. The single form should refer to the HIP that covers the majority of targeted countries.

#### 4. ADMINISTRATIVE INFO

##### Allocation round 1

- a) Indicative amount: up to **EUR 246 500 000**.
- b) Description of the humanitarian aid interventions relating to this assessment round *if it does not cover all the funding*.
- c) Costs will be eligible from 01/01/2023<sup>6</sup>
- d) The initial duration for the Action may be up to 24 months or more<sup>7</sup> provided that the added value of a multi-annual duration is demonstrated by the partner. Follow-up actions, which continue/extend ongoing operations financed under the 2021-2027 Multi annual Financial Framework, can be submitted as modification requests for the ongoing action with a time extension of up to 24 months or more and a total duration of the modified action of up to 48 months (actions that had already been extended with contributions from HIPs of 2 different years should preferably be submitted as a new action).

Education in Emergencies and Disaster Preparedness actions should have an initial duration of at least 24 months, unless there is a needs- or context-based justification for a shorter duration. The same approach may also be used to the extent appropriate in furtherance of any multiannual strategies provided for by the HIP (see point 3e)<sup>8</sup>.

- e) Potential partners<sup>9</sup>: All DG ECHO Partners
- f) Information to be provided: Single Form or Modifications requests of ongoing actions<sup>10</sup>
- g) Indicative date for receipt of the above requested information<sup>11</sup>:
  - DJIBOUTI: 10 January 2023
  - ETHIOPIA: 23 January 2023
  - KENYA: 10 January 2023
  - SOMALIA: 10 January 2023
  - SOUTH SUDAN: 17 January 2023
  - SUDAN: 30 January 2023
  - UGANDA: 11 January 2023

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<sup>6</sup> The eligibility date of the Action is not linked to the date of receipt of the Single Form. It is either the eligibility date set in the Single form or the eligibility date of the HIP, whatever occurs latest. In case of amendments to existing agreements, the eligible date will however be the eligible date set in the initial agreement.

<sup>7</sup> Maximum duration of an action is 48 months

<sup>8</sup> Additional guidance may be issued by DG ECHO in this respect, as appropriate.

<sup>9</sup> Unless otherwise specified potential NGO partners refer to certified partner organisations.

<sup>10</sup> Single Forms will be submitted to DG ECHO using APPEL.

<sup>11</sup> The Commission reserves the right to consider Single Forms transmitted after this date, especially in case certain needs/ priorities are not covered by the received Single Forms.

#### **4.1. Operational requirements:**

##### *4.1.1. Assessment criteria:*

- 1) Relevance
  - How relevant is the proposed intervention; is it compliant with the objectives of the HIP?
  - Has a joint needs assessment been used for the proposed intervention (if existing)? Have other recent and comprehensive needs assessments been used?
  - Has the proposed intervention been coordinated with other humanitarian actors?
- 2) Capacity and expertise
  - Does the partner, with its implementing partners, have sufficient expertise (country / region and / or technical)?
  - How does the partner contribute to developing/strengthening local capacity?
- 3) Methodology and feasibility
  - Quality of the proposed response strategy, including intervention logic / logframe, output & outcome indicators, risks and challenges.
  - Feasibility, including security and access constraints.
  - Quality of the monitoring arrangements.
- 4) Coordination and relevant post-intervention elements
  - Extent to which the proposed intervention is to be implemented in coordination with other humanitarian actors and actions (including, where relevant, the use of single interoperable registries of beneficiaries).
  - Extent to which the proposed intervention contribute to resilience and sustainability.
- 5) Cost-effectiveness/efficiency/transparency
  - Does the proposed intervention display an appropriate relationship between the resources to employed, the activities to be undertaken and the objectives to be achieved?
  - Is the breakdown of costs sufficiently documented/explained?<sup>12</sup>

In case of actions ongoing in the field, where DG ECHO is requested to fund the continuation thereof, a field visit may be conducted by DG ECHO field expert (TA) to determine the feasibility and quality of the follow-up action proposed.

No award will be made to NGO partner organisations which have not complied with their obligations concerning the submission of audited financial statements (i.e. which would not have submitted those in due time to the Commission without a proper justification) or

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<sup>12</sup> In accordance with the relevant section of the Single Form guidelines (section10)

which would appear not to offer sufficient guarantee as to their financial capacity to implement the proposed actions (in light of their liquidity and independency ratios as appearing from their latest available annual statutory accounts certified by an approved external auditor).

#### 4.1.2. *Specific operational guidelines and operational assessment criteria:*

This section outlines the specific operational guidelines that DG ECHO partners need to take into account in the design of humanitarian operations supported by DG ECHO. It also lists and explains the assessment criteria – based on those outlined in section 4.1.1 - that DG ECHO will apply in the specific context of the HIP to which this Technical Annex relates when assessing proposals submitted in response to the related HIP.

Regarding **logistics (meaning the entire supply chain)**, DG ECHO will support strategic solutions, such as shared and/or common services, joint procurement, etc. if their cost-efficiency and benefit in increasing effectiveness and timeliness of the response is demonstrated, in line with DG ECHO's Humanitarian Logistics Policy. DG ECHO also encourages the application of the Humanitarian Logistics Policy more widely, in particular, the key considerations set out in Annex 1: Framework for Operations.

For **Education in Emergencies actions**, priority will be given to funding projects which target at least 50% girls, unless there is a context-based justification for different targeting. For cash in education projects, attention should be paid to sustainability of the interventions and, when possible, linkages to longer-term livelihood solutions.

#### **Transfer modalities**

Modality choice should be informed by a needs-based response and risk analysis, incorporating joint and timely market analysis, operational and environmental analyses. The use of cash should systematically be considered, across the variety of response mechanisms (anticipatory action, rapid response mechanisms, emergency responses, crisis modifiers, and shock-responsive social protection) funded by DG ECHO. All cash interventions should comply with [DG ECHO's cash thematic policy](#), including the sector-specific considerations in Annexe 3 of that document. In addition, programmes above EUR 10 million should comply with the large-scale cash guidance note. DG ECHO promotes a common system and/or coordinated programming approaches to reduce fragmentation and avoid duplication and parallel ways of working. This includes better operational coordination, coordinated approaches to vulnerability-based targeting, data interoperability (which respects data protection requirements) to facilitate deduplication and referrals, a common payment mechanism, a common feedback mechanism and a common results framework. DG ECHO will systematically assess the cost-efficiency of different modalities, using the Total Cost to Transfer Ratio (TCTR), alongside the analysis of effectiveness.

DG ECHO promotes, wherever appropriate, a single multipurpose cash (MPC) payment to meet recurrent basic needs, through a common payment mechanism, and timely referral pathways to meet specific multi-sectoral outcomes based on a solid analysis. The value of cash assistance should be adequate to cover or contribute to emergency basic needs and should be complemented by other relevant sectoral interventions which cannot be met through cash. Cash assistance should be risk informed and targeted based on socio-economic vulnerability, and the protection concerns of individuals and groups.

The sectoral and multisectoral outcomes of cash programmes should be monitored against defined objectives in a consistent way. The monitoring of MPC interventions should

comply with the cross-cutting and sector-specific Grand Bargain MPC outcome indicators. Multi-sectoral market analysis and monitoring should be ensured, in real time, to inform and adapt assistance, irrespective of the modality. In contexts of high inflation and currency depreciation, partners should put in place sound trigger mechanisms to adapt assistance based on market monitoring data, and design programmes from the outset to anticipate potential inflationary shocks. DG ECHO maintains its commitment to providing cash, even in contexts of high inflation, provided that programming can be adequately adapted, in line with the [Good Practice Review on cash in inflation/depreciation](#). Whenever duly justified, to cope with market price volatility, partners are encouraged to include contingencies to adapt the transfer value, increase coverage, and/or change to an alternative modality to preserve household purchasing power capacity.

DG ECHO expects Cash Working Groups, under the leadership of the inter-sector/inter-cluster, and in collaboration with relevant sectoral working groups, to provide leadership on the above.

### **Climate change adaptation and environmental considerations**

Adapting responses to climate change as well as reducing environmental degradation are highly relevant in partners' interventions. Such actions also contribute to the European Commission's overall implementation of the European Green Deal<sup>13</sup>.

All partners are expected to include context-specific measures to reduce the environmental footprint of the proposed actions, while preserving their effectiveness, in compliance with the minimum environmental requirements set out in the DG ECHO Environmental Guidance for humanitarian projects<sup>14</sup>.

The minimum environmental requirements should be applied through a 'mainstreaming' approach with environmental impacts mitigated across sectors, projects and programs and therefore not implemented as stand-alone or parallel actions to the response activities with the aim to consider the environment holistically when designing and implementing actions. The requirements will apply to all sectors with special attention on mitigating the negative environmental impacts in protracted, chronic situations; responses linked to humanitarian settlements or sites and activities that cause natural resource depletion, including deforestation; exploitation of water sources; air/water/land pollution (e.g., uncontrolled waste disposal linked to humanitarian settlements/sites as well as to communal facilities such as schools, health centres and distribution centres). Water, Sanitation and Hygiene (WASH) and Shelter & Settlements programming carry one of the highest risks of negative environmental impacts among humanitarian activities, while at the same time representing an opportunity to minimise potential environmental impacts, (which should be mitigated from the onset) by thorough assessments/screenings and robust environmental management.

The **HIP Policy Annex** should be consulted in parallel.

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<sup>13</sup> [https://ec.europa.eu/info/strategy/priorities-2019-2024/european-green-deal\\_en](https://ec.europa.eu/info/strategy/priorities-2019-2024/european-green-deal_en)

<sup>14</sup> [add ref. when published]



#### **4.1.2.1. Sector-Specific Priorities**

### **STRENGTHENING EARLY RESPONSE CAPACITY**

#### *(1) Emergency/Rapid Response Mechanisms (ERM/RRM) as standalone actions*

Emergency/Rapid Response Mechanisms (ERMs/RRMs) are stand-alone actions pooling capacities of different partners for improved and more coordinated preparedness and early response, guided by early warning and contingency plans. ERMs/RRMs are designed to provide initial lifesaving multi-sectoral assistance when other response mechanisms are not yet in place, especially in hard-to-reach areas or areas with low partner presence. ERMs/RRMs are mostly used for rapid-onset crisis.

#### *(2) Flexibility embedded into the actions*

Partners should introduce flexibility to mobilise resources from ongoing actions and swiftly respond to and/or act in advance of any new emerging shocks occurring and/or forecasted in areas where they have capacities to respond. Flexibility measures, such as Crisis Modifiers, can be triggered to provide initial lifesaving multipurpose response in the aftermath of a rapid onset crisis, as well as to act in advance/anticipation of an imminent shock; the three main scenarios are: i) to fill the time gap while waiting for additional resources; ii) to respond to small-scale humanitarian needs which would otherwise remain unattended; iii) to provide assistance in advance of an imminent shock to prevent or reduce its acute humanitarian impact, according to a pre-agreed plan with defined triggers and actions.

The application of flexibility measures should be based on a multi-risk analysis, the development of preparedness plans with worst and most likely scenarios including triggers. Partners should develop a detailed plan considering elements like cash preparedness, possible prepositioning of stocks, and surge staff.

ERM/RRM and flexibility measures are complementary and do not exclude each other; flexibility measures enable to act in advance and to bridge the time gap between the shock and the time needed to mobilise ad-hoc resources through the ERM/RRM or additional funding. Timeliness of response is a key element for the effectiveness of both flexibility measures and ERM/RRM. Partners should adopt indicators to measure the efficiency/time required to deliver the first assistance (e.g. lifesaving response for xxx persons; lifesaving response within xx days from alert/crisis, and/or need assessment within xxx days from the displacement/disaster/alert/exceeded triggers). Partners will be expected to conduct direct or joint protection risk analysis prior to any response.

#### *(3) European Humanitarian Response Capacity (EHRC):*

The EHRC aims at supporting the delivery of humanitarian assistance in a gap-filling approach. Through the EHRC, the Commission has several tools that can be activated. Such tools include a series of Common Logistics Services (including air operations, warehousing services, last-mile ground transportation, etc.) and a stockpile of emergency WASH and shelter items that can be pre-positioned in regional warehouses worldwide.

DG ECHO might propose directly to one or more partners to manage some of the Common Logistics Services, or to be in charge of distributing emergency relief items. The choice of the partner will be made on the basis of a set of criteria, such as presence in the affected area, experience and available expertise. Since the EHRC is an emergency response capacity, activation decisions will be taken in a consultative yet rapid way. In order to manage the Common Logistics services and/or distribute emergency relief items,

partners might make use of the flexibility envelope embedded into the actions (section 2 above).

## **PROTECTION**

Considering existing conflict dynamics coupled with recurrent natural shocks/disasters in the Greater HoA, all proposed interventions should ensure conflict sensitivity and be driven by a thorough gender-informed conflict risk analysis, looking at specific protection risks in specific areas and for specific populations.

Gender-Based Violence (GBV) concerns in the region should be looked at in detail, proposing sustainable responses. Considerations between GBV and environmental issues should be included in the analysis and response.

In addition, child protection responses within regional crises need to be strengthened, including on children in armed conflict.

The regional dimension of specific crises (e.g. South Sudan or Ethiopia crises, migration crisis, etc.) should be taken into account when designing protection responses, for example through monitoring cross-border movements. Focus on principled responses to protection crises, including on responses to durable solutions (including returns of IDPs and refugees), should be strongly considered.

Integration of protection (including GBV and conflict prevention considerations) into other sectors – particularly looking at Education in Emergencies, nutrition, health and Camp Coordination and Camp Management (CCCM) is paramount for all responses.

## **FOOD SECURITY AND LIVELIHOODS**

Food assistance will be supported to save lives responding to food insecurity due to natural hazard induced and/or man-made disasters. While prioritising newly affected populations, such as the recently displaced or recent shock-affected populations, the food assistance design should be based on thorough integrated food security assessments and analysis as part of the wider basic needs approach. Principled beneficiary targeting and verification mechanisms should be in place. Food assistance for protracted displacements and/or crisis should be based on clear needs-based vulnerability criteria and livelihoods capacities going beyond the mere status and categorical-based approach giving first priority to the identified humanitarian needs. A vulnerability-based assessment/targeting process should be launched as early on as possible into the crisis to ensure the most efficient use of resources is made, based on actual needs and that avoids aid dependence.

As needs are multiple, food assistance shall be part of a wider basic needs approach, integrated within an adequate, comprehensive and harmonised response package (nutrition, non-food items, Education in Emergencies, WASH, shelter, protection etc.) and preferably delivered through unconditional<sup>15</sup> MPC transfers within a common delivery mechanism, and enhancing multi-sectoral effective referral pathways (whenever conditions are met). Emergency livelihoods support linked to a specific shock may be considered where basic needs are already addressed. In line with the Minimum Expenditure Basket (MEB), partners must specify and justify the frequency and adequacy

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<sup>15</sup> Any conditionality should be fully justified and adapted to the vulnerabilities of the targeted group (for example, women with young children) or in consideration of the agricultural season.

of the response, as well as transfer amounts/values provided, in coordination with other actors, and in accordance with Food Security Cluster and Cash Working Group recommendations. One-off assistance responses will not be favoured. Preference will be given to Humanitarian Food Assistance actions demonstrating adequate cost efficiency (Total Cost Transfer Ratio (TCTR)) alongside other quality programming aspects (refer to the cash policy for more information).

Joint market monitoring and joint analysis should be ensured to inform and adapt the assistance, irrespective of the modality. Partners must ensure the adoption of the main Food Security outcome indicators (FCS, LCSi) for targeting and monitoring, in accordance with DG ECHO's Key Objective Indicators (KOI) and the Grand Bargain Multi-Purpose Cash Outcome Indicators' guideline.

Solutions to enhance digitalised and interoperable solutions will be preferred. Digitalisation of registration and monitoring procedures should be promoted to enhance effective multi-sectoral referral pathways (nutrition/protection/health/EiE) aiming at providing a comprehensive package facilitating the access to multiple basic needs and services and promoting linkages with existing Safety Nets / Social Protection where relevant.

In this sense, developing sound strategies encouraging linkages with more sustainable and locally led solutions is key in line with DG ECHO's 2021 commitment in the Humanitarian Aid Communication to expand support for cash-based, shock-responsive social safety nets, linkages with development-funded transfer schemes need to be systematically established by partners involved in direct transfers at scale (any modality), whilst respecting protection and humanitarian principles. This requires shared initial technical assessments to explore feasible linkages at policy, coordination, programme design or delivery chain levels, and response planning accordingly. It also requires support and systematic reporting to a coordination mechanism tracking all contributions, with a view to ensure an appropriate response to urgent needs with regards to adequacy, coverage, comprehensiveness of the assistance package provided, by mobilising all available funding streams available during the peak of a crisis in a holistic perspective. It also requires joint investment by partners in evidence-building, showcasing and advocacy.

## **NUTRITION**

Nutrition programming will be supported where emergency needs are demonstrated and aggravated by low response capacities and significant caseload. Supporting data must be included in the needs assessment.

The treatment of wasting through the continuum of care (Severe Acute Malnutrition with and without medical complications, and Moderate Acute Malnutrition) for children and Pregnant and Lactating Women will be prioritised. Partial support to the nutrition programme will not be accepted unless duly justified. Treatment must be provided free of charge for the beneficiaries and their caretakers (transport and board for in-patient treatment). Partners are encouraged to include growth monitoring for children under 6 months in their response.

Partners will be requested to ensure the availability of a quality minimum health package in the sites targeted for nutrition activities (referral inclusion minimum requirement). Access to drinking water and adequate sanitation must also be taken into consideration. The needs and response analysis should clearly appear in the assessment and proposed activities for support.

Proposed nutrition actions must be compliant with the national policy in place in each country. However, innovative approaches (i.e. simplified protocol, Family MUAC, ICCM+, CMAM surge) are strongly encouraged when demonstrated as safe for beneficiaries and approved by national institutions.

Lastly, nutrition programming should be used to inform on needs and their evolution, to create linkages between services and maximise impact on affected populations. DG ECHO partners are encouraged to elaborate on their intention to participate actively in coordination meetings, help generate reliable data and collaborate closely with other stakeholders to create referral mechanisms (i.e. toward services such as protection, food assistance, etc.) and facilitate timely provision of support to the most vulnerable.

## **HEALTH**

Evidence-based health interventions having the highest potential of reducing high morbidity burdens, permanent disability and /or preventable mortality targeting the most vulnerable will be prioritised.

Support to multi-sectoral interventions (health, nutrition and WASH) is expected from partners.

Facilities supported need to guarantee a minimal level of quality and basic implementation of universal precautions, to prevent transmission of communicable diseases (IPC).

Free access to a package of basic health services must be ensured in any crisis, including quality primary and secondary health care, Mental Health & Psychosocial Support Network, integration of nutritional programmes, war surgery, and basic and comprehensive emergency obstetrics and neonatal care. Whenever possible, prevention and early diagnosis/treatment of cervical cancer is expected from partners. Timely (<72 hours), confidential, safe and comprehensive medical support to survivors of GBV must be provided in all primary health care (PHC).

Health interventions should include lifesaving referral support. Partners will be accountable for follow-up and will report on referral cases.

Support to community health activities is recommended in all health interventions:

Temporary/provisional outreach PHC services will be supported, but mobile clinics should be implemented only where they support specific outbreak control activities, in extremely hard-to-reach areas, in displacement contexts without access to PHC services or in the delivery of mass public health intervention packages.

Financial incentives for Ministry of Health seconded staff are discouraged. If proposed, this should be duly justified and accompanied with an exit strategy.

Capacity-building and training components should focus on the main health priorities, address critical capacity gaps with preference for on-the-job training and supportive supervision.

All health projects should include activities that actively contribute to early warning, preparedness, surveillance, prevention and response (EWARS) to potential outbreaks.

Drug procurement, storage and distribution should be properly anticipated so as to ensure adherence to DG ECHO's quality assurance standards as outlined in annex III of DG ECHO's Model Grant Agreement.

## **WASH / SHELTER-NFIs**

Most of the WASH and Shelter and Settlements (S&S) proposed interventions should be within an emergency response in conflict- and/or natural disaster-affected areas and the post-emergency support to conflict- affected populations in camps or informal type of settlements. Sustainability of services should be considered from the outset and should ensure, in particular, that interventions are not causing uncontrolled solid waste/sewage disposal and water resources depletion. Water supply interventions in communities affected by conflict and/or natural disasters should focus on the restoration (repairs mainly) of existing services damaged during conflicts or on the improvement of the affordability of sustainable WASH services. No upgrading of those services/new constructions is foreseen unless communities are hosting a high number of IDPs or refugees whose presence is likely to overwhelm their initial capacity and/or generate a public/environmental health-related hazard. WASH in protracted refugee situations should focus on long-term integration into local institutions/development plans or community-led management for sustainability of the services, building self-reliance and mitigation of environmental degradations. Water trucking is to be considered only as a last resort with a clear exit strategy.

Water quality standards assurance and monitoring is a must. When applicable, particular attention shall be given to water supplied through water trucking by vendors, which are often found to be inadequate. The partial distribution of non-food items is not recommended unless to fill a clearly identified gap. Quality assurance is a must for all WASH and Shelter interventions. Monitoring capacity to ensure safe quality delivery should be demonstrated. Routine capacity-building and hygiene promotion measures are only accepted if needs-based.

Flood mitigation measures should be linked to long-term development projects in order to get long-lasting solutions.

## **EDUCATION IN EMERGENCIES (EiE)**

Education in Emergencies (EiE) actions will focus on providing access to safe, quality and accredited primary and secondary education to boys and girls, particularly adolescents. EiE interventions should target out-of-school and drop-out boys and girls, over-age children, through formal and non-formal education opportunities, including AEP's (Accelerated Education Programmes) and catch-up programmes where needed. Non-formal education activities<sup>16</sup> should be to the extent possible aligned with the formal system, providing children with opportunities to enter (or re-enter) the system.

The proposed actions should tackle context-specific barriers to education for girls and boys. Proposals should aim at increasing both enrolment and learning outcomes and be aligned with the school academic year to avoid any further disruptions. Retention and transition of children to the next school year and cycle should be measured. The proposed activities can include the provision of ad hoc support for enrolment amongst the most vulnerable groups (cash-transfer modality envisaged).

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<sup>16</sup> please refer to the definitions, tools and guidance developed by the AEWG (Accelerated Education Working Group): <https://inee.org/collections/accelerated-education>

Teachers and other education personnel should be supported with relevant and tailored professional development opportunities and interventions that will also contribute to increased motivation and a decreased staff turnover.

The provision of psychosocial support to students and teachers, especially those recently affected by conflict and/or displacement, will also be considered as of critical importance, together with equipping education staff with referral skills.

Child safe-guarding mechanisms must be established to ensure that children are not at risk when attending school, and that child-protection-related issues are timely and effectively responded to by professional actors (either directly or through referrals). In this regard, integrated EiE and child protection actions are strongly encouraged: school-based protection activities must be built on a sound risk analysis and should address the most life-threatening protection risks. Moreover, proposed actions should promote the protection of schools from attacks and support the implementation of the *Guidelines for Protecting Schools and Universities from Military Use during Armed Conflict*.<sup>17</sup>

Where relevant to the context, partners are expected to provide or complement initiatives in other sectors, such as school-based WASH, to ensure an adequate learning space for children.

EiE actions integrated into multi-sectoral rapid response mechanisms with established exit strategies will also be considered for funding.

Proposals should demonstrate sound coordination with other education initiatives and development actors, be in line with existing government-led education response plans and prepare where necessary the transition of programmes to education authorities and communities.

## **DISASTER PREPAREDNESS**

Proposed disaster preparedness (DP) approaches should address all prevailing hazards and risks – including slow-onset, secondary and compounding risks such as conflicts, displacement, epidemics etc., and clearly demonstrate the linkage based on the context. In addition to preparedness in conflict and fragile settings, there is a clear need for preparedness for conflict and other situations of violence. All interventions should, as much as possible, aim at integrating anticipatory/early actions, based on forecasts from recognised authorities/sources and backed up by a comprehensive risk analysis (that do not only predominantly focus on hazard but take into perspective the analysis of vulnerability, capacity and exposure to risks) and, preferably, are conducted in collaboration with other stakeholders.

Anticipatory action and enhanced predictability of response can only be achieved if local preparedness and response capacities are in place. Preparedness actions, therefore, must strengthen first responders' capacity to act as locally and as early as possible. National approaches, for the purpose of coherence of country interventions, should be coordinated with the National Disaster Management Authorities. A system-wide approach is encouraged to ensure linkages and simultaneous capacity-building at community and governmental level, whenever possible, whilst respecting the do-no-harm principle, and other humanitarian principles.

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<sup>17</sup> <http://www.protectingeducation.org/safeschoolsdeclaration>

In line with DG ECHO's commitment to expand support for shock-responsive social safety nets, the feasibility of linkages with, and technical support to national social protection and disaster management systems is to be explored systematically by partners during risk assessments, and response planning to be ensured accordingly.

Besides, regional approaches and strategies are encouraged where relevant.

Taking into perspective the increasing volatility/conflicts in some areas due to shrinking resources as a result of the ongoing drought, conflict-sensitive programming is a must. Gender perspectives and cultural diversity, including the local local/indigenous knowledge should be taken on board to ensure no population at risk is left behind.

Multi Hazard Early Warnings Systems (MHEWS) play a crucial role in promoting DP: actions proposing EWS strengthening should be succinate, on the interlinkage of the four components of EWS.

Coordination with developmental actors to promote, advocate for the institutionalisation of DP strategies notably around disaster risk financing including adaptive/shock-responsive social protection systems that could be activated by pre-agreed, well-defined risk triggers will be crucial. Simulation and drill exercises that are coordinated with the people at risk are crucial in ensuring an effective preparedness.

Lesson learning and documentation of good practices remain a key aspect of all the DP interventions.

For the GHoA region, Kenya, Somalia, South Sudan and Uganda will be funded for targeted disaster preparedness actions. Specific details for each country are detailed in the country sections.

The environment and disasters are inherently linked. Integrating environmental considerations in the disaster risk reduction and preparedness frameworks and response tools at local and regional levels should be considered to improve their efficacy. The aim is to minimise hazards and increase the resilience of the local communities. Environmental degradation affects natural processes, increases vulnerability, lessens overall resilience, and challenges traditional coping strategies. The DP trainings, workshops and other tools should, therefore, integrate environmental screenings, risk-mitigation exercises and/or environmental aspects relevant for the specific context and needs, especially the ones that directly aggravate disaster risk aspects (e.g., deforestation of slopes leading to an increased landslide hazard, removal of mangroves increasing the damage caused by storm surges, solid waste accumulation in drainage systems increasing flooding risks, etc.).

#### **4.1.2.2. Country-Specific Priorities**

##### **a) DJIBOUTI:**

DG ECHO will continue to support the **humanitarian needs of vulnerable migrants** on the “Eastern Route” into and from the Arabian Peninsula, with a focus on operations in Obock, Tadjourah, and the southern regions of Djibouti (Dikhil, Ali Sabieh), and with a strong emphasis on **protection**. Priority will be given to monitoring of movements, protection services (CP and GBV), and **life-saving** and shock-responsive assistance (health, food and nutrition, WASH, S/NFIs, etc) along the route.

Action design should include the needs of host communities located alongside those routes. Close monitoring of the effective availability and access to the services provided is

required. Funding requests should pay particular attention to extremely vulnerable cases, such as unaccompanied minors, survivors of GBV and other vulnerable groups.

**Principled and vulnerability targeting criteria** and verification mechanisms will need to be in place.

**b) ETHIOPIA:**

**All proposals** should prioritise urgent life-saving needs and demonstrate capacity to provide rapid/early response to crises. Special attention will be given to proposals clearly demonstrating cross-sectoral integration. Partners must include in their proposals an in-depth gender-informed conflict and protection analysis identifying the conflict dynamics and proposing ways to mitigate them.

Partners will have to demonstrate a **clear prioritisation of the crises and of the targeted areas based on the urgency, scale, and severity of the needs**. Partners are expected to conduct independent direct or joint assessments, participate actively in coordination fora and describe precisely their capacity to respond in a timely and integrated manner, whenever pertinent. Complementarity with other donor projects should be demonstrated,. In addition, projects will also need to explain the targeting and verification mechanism (at household/individual level), demonstrating neutrality, impartiality, and independence in the process.

Partners are encouraged to present coordinated responses to the extent possible and to streamline their proposals (cf: HIP document).

**Strategic priorities and modalities**

**Internal conflicts:** priority to ensuring rapid life-saving humanitarian response to acute needs resulting from conflict situations across the country (through diverse, innovative and flexible approaches). Particular attention will be given to a) populations unable to access assistance in hard-to-reach areas; b) newly displaced populations; c) secondary displacement and populations whose return is putting them at higher risk and/or vulnerability due to non-adequate security, protection or material conditions. As the latter could qualify as forced return, Partners will be expected to assess very carefully the situation in order for assistance not to be seen as a pull factor or accompanying measure for return. Attention to host populations in both places of displacement and return is paramount. It is expected that partners incorporate do-no-harm and conflict sensitivity approaches in all aspects of their responses and proposals.

**Natural shocks including drought, floods, epidemic outbreaks and pests:** DG ECHO will prioritise its response to natural and climatic shocks to the most urgent and critical needs (supporting the early response to natural shocks to mitigate their impact and prevent further deterioration). Particular attention will be given to populations unable to access assistance in hard-to-reach areas. Complementarity with long-term sustainable support and resilience-building strategies should be promoted whenever conducive.

**Strengthening Emergency Preparedness and Early Response** in the fluid context of Ethiopia will be covered by two mechanisms: a) Crisis Modifiers (CM) - which should be considered in any response - and/or b) Emergency Response Mechanism (ERM)/Rapid Response Mechanism (RRM). Partners proposing ERM/RRM should have the capacity to



implement or support/enhance four core functions<sup>18</sup>. Responses must include multisector life-saving interventions. Despite the short-term nature of ERM/RRMs interventions, conflict and protection analyses remain mandatory and should be ensured prior to any implementation.

**Refugees and asylum-seekers:** where feasible, specific attention will be put on acute needs of new arrivals, as well as the most vulnerable individuals/households in protracted situations. Focus will be on access to quality primary services, legal counselling, legal case management, protection monitoring (including cross-border) and improved access to reception and documentation services for new arrivals, including timely identification of vulnerabilities and advocacy. It is expected that, context allowing, partners provide responses integrated with development actors promoting beneficiaries' integration and that link up to interventions with durable longer-term solutions for refugees.

**Coordination and Advocacy** are key elements to DG ECHO-funded interventions in Ethiopia across the board. Coordination is to be conducted through the cluster coordination system (in particular through strengthening the inter-cluster coordination, ensuring synergies among interventions at field level and with other coordination structures such as ECC, EOC, Hubs, area-based coordination, etc.), with a particular attention to comprehensive data collection and analysis. Strategic advocacy plans are to be developed accordingly based on robust risk assessments and responses.

**Multi-purpose, unconditional and unrestricted cash** transfers will be the preferred modalities for addressing the basic needs of the most vulnerable populations (ensuring full participation in the Ethiopia Cash Working Group (ECWG)).

### **Sectoral priorities**

**Protection:** Expected tangible humanitarian protection outcomes should be protection monitoring, coordination, case management, direct assistance, legal support and integration with other sectors such as health and education. Proposed interventions will include actions aimed at supporting child protection, GBV and mine actions, among others. All actions should follow principled and risk informed approaches.

**Food assistance and livelihood:** DG ECHO will support food assistance responses that demonstrate alignment with sectoral standards as specified in the Technical Annexes and the Food Security and Livelihoods (FSL) section. Prioritisation in this sector is to IPC4+ (or similar) areas. DG ECHO's support will also be targeted at support services to food assistance, including coordination, surveys, surveillance and logistics.

**Health:** Priority to epidemic outbreaks (cholera, measles and malaria in particular) including support to vaccination campaigns. Ensuring availability of quality medical commodities and consumables in all health responses. For the refugee response, focus on immediate short-term support, and be complementary to long-term initiatives.

**Nutrition:** DG ECHO is prioritising actions in areas with high GAM prevalence. The focus is on nutrition programming at all levels of the health system based on identified gaps. Consortium approaches are recommended to ensure adequate coverage of

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<sup>18</sup> 1/ Coordination, information, Early Warning and advocacy on humanitarian needs and on access; 2/ Preparedness, contingency plans, risk scenarios analysis, including protection risks analysis, stock positioning and stockpiling; 3/ Management, coordination and monitoring of sub-grants; 4/ Management of the grievance mechanisms.

emergency hotspots and strong technical complementarity and coordination amongst partners.

**Water Sanitation & Hygiene (WASH) and NFIs:** Integrated WASH (nutrition, health, education) should be prioritised when necessary. Facility-based (WASH rehabilitation/construction, IPC measures) could be considered.

**Shelter, Settlements and NFIs:** focus on emergency response to population displacement (in line with cluster set standards). Solid needs assessments required to ensure appropriateness of the interventions.

**Education in Emergencies:** focus on children affected by forced displacements and recent returns for quality formal and non-formal education services. Integrated child protection is prioritised, together with partners' capacity and flexibility to adapt to a continually changing context with meaningful responses. Priority activities include the provision of TLS and integrated WASH facilities; and increasing enrolment, retention (focusing on girls) and transition to the next level and to the formal system, including through accelerated programs. Other activities, such as actions supporting households to address barriers to their children's education; the provision of educational and learning materials, psycho-social support (PSS) and emotional and mental health support can be considered. Complementarity is sought with Education Cannot Wait, where it applies.

#### c) **KENYA:**

##### **Strategic priorities and modalities**

DG ECHO will continue to **support the refugee operations** in Dadaab and Kakuma (including asylum seekers, undocumented individuals and possible new caseloads), with a focus on the provision of timely, adequate and appropriate **basic services** to the most vulnerable individuals, including food, health, nutrition, education, and protection. As the refugee crisis continues, DG ECHO recognises the need for **targeting** of assistance to use aid resources more effectively and equitably. Therefore, all proposed interventions shall provide for a mechanism by which the most vulnerable among the refugee population can be identified and prioritised for available assistance. DG ECHO will only consider actions implemented by actors already working in these sectors and present in the camps.

The provision of humanitarian services other than food assistance and protection in Kalobeyei settlement may be considered only in case of a **new emergency and with a clear exit strategy** from the onset. In this case, and when relevant, vulnerability-based targeting could be developed. Actions in the settlement must be well articulated with the longer-term actions funded by other EU instruments and donors, avoiding overlap.

Pilot initiatives related to **durable solutions for refugees** in protracted situations, alternative and/or innovative approaches contributing to building the self-reliance of the displaced population in a nexus perspective (i.e. aimed at increased shared responsibility with development actors) could be supported.

In their response, partners should aim at **expanding the use of Multi-Purpose Cash (MPC)** as part of a comprehensive approach to responding to basic needs (whenever services are available). In addition, DG ECHO might consider supporting actions that can contribute to inform and enable the environment towards establishing safety net schemes in refugee settings, in coordination with other donors.

Given the ongoing deterioration of the situation in the ASALs, DG ECHO shall consider funding actions in **response to the drought** under this HIP. A potential DG ECHO response would focus on areas with severe food needs (IPC3 and above) prioritising the most vulnerable population and supporting a coordinated and well harmonised response.

### **Sectoral specificities**

**Protection:** DG ECHO will support protection standalone activities, with emphasis on undocumented asylum seekers. Activities aimed at prevention and response to violence can be considered. Activities relating to population movements – including border monitoring, or intentions surveys can be supported. Advocacy activities that help highlight issues in relation to compliance with Refugee Law, refoulement or other risks can be considered if part of a detailed advocacy plan.

**Education in Emergencies:** In the refugee settlements, DG ECHO will continue to prioritise activities that support access to protective learning environments for vulnerable refugee children and adolescents to enter, re-enter or be retained in formal education.

In the ASALs, a potential DG ECHO response would focus in areas with severe food needs (IPC3 and above) prioritising the most vulnerable population. A cash for education program can be considered when complementing the MEB and its design takes into account related ongoing qualitative responses/services to establish the gap and inform the transfer amounts.

**Water Sanitation and Hygiene (WASH), Shelter & Settlement (S&S):** Interventions will be limited to emergency response in case of unforeseen newly affected population as part of a multi-sector response to address unforeseen.

**Disaster Preparedness:** DG ECHO will prioritise its response to natural and climatic shocks to the most urgent and critical needs. DG ECHO's comparative advantage will be mainly in supporting the anticipatory action response to these natural shocks to mitigate their impact on the affected populations and prevent further deterioration of the situation. Proposed interventions shall focus on strengthening a timely and more effective humanitarian system response by shifting from reactive to anticipatory/early response.

#### **d) SOMALIA:**

**For 2023, DG ECHO operational guidelines for Somalia are structured around three main priorities:**

**i. Populations most affected by acute malnutrition/food insecurity and epidemic outbreaks**

DG ECHO supported actions should use an integrated approach aimed at reducing compounded risk of famine-like conditions, prioritising locations where mortality/acute malnutrition/food insecurity indicators surpass emergency thresholds. Partners should demonstrate direct and/or coordinated interventions in WASH, Health, Nutrition and Food Security including joint assessments, monitoring and intervention tools/strategies. Integrated actions are to include inter-operability or data sharing agreements. Interventions are to incorporate epidemic outbreak response capacities.

- Assistance and protection at most affected/priority IDP sites

- o CCCM actions (fixed or mobile) to provide basic site level coordination, monitoring and reporting of emergency needs and community/humanitarian actors'

- mobilisation. Integration of protection and housing, land and property is to be pursued, as well as joint sectoral delivery. MPCA targeting most vulnerable households and enabling transitions towards sustained assistance (safety nets, food assistance, etc.).
- o Compliance with basic service standards, consideration for required upgrading of community level infrastructure, comprehensive WASH services and NFI. Community participation and ownership shall be fostered across actions.
  - o EiE actions should focus on integrating children into the formal system (including non-formal education options with a clear pathway to formal education), supporting children's PSS and child protection needs. Support tailored to improve/increase the absorption capacity of existing formal schools can be considered.
  - o Support to primary, secondary health facilities and referral pathways providing lifesaving health and nutrition services in locations hosting displaced population (following a catchment area or area-based approach). Integration of GBV services into Health.
- Assistance and protection in priority drought response, famine prevention districts – including hard to reach
- o Data collection and analysis to inform local drivers of acute malnutrition, food insecurity and epidemic outbreaks - accounting for assessed barriers to access health care in health facilities (facility bias). Focus on the functional, reliable and quality countrywide pipelines of essential commodities (health, nutrition). Regular assessment of quality of care provided (including Infection Prevention and Control).
  - o Integration of protection into health and nutrition, providing continuity of care across sectors and referral of protection cases. Child protection included in treatment of malnutrition/epidemic outbreak response.
  - o Emergency lifesaving health and nutrition interventions to include service mapping and rationalisation of efforts in catchment area. Epidemic outbreak response should include surveillance and analysis, early warning and rapid response activities. Acute malnutrition responses are to define quality improvement plans based on analysed bottlenecks for CMAM programming.
  - o Enhanced inter-sectoral coordination (Nutrition, Food Security, WASH, Health and Cash Working Group) to maximise coverage of integrated outcomes. Targeted support to tackle severe levels of household food insecurity, measured by main outcome indicators (FCS, CSI<sup>19</sup>), using appropriate modalities, while securing sectoral referral systems. MPCA is to be considered from the outset.
  - o Development of early warning and response mechanisms at community level (e.g. community level screening, referral support networks, etc.).
  - o In hard-to-reach locations, interventions must be guided by access strategies, maximising community level negotiations and demonstrating criticality of programming. Actions must include localised risk and threat analysis – for targeted population and for humanitarian programmes. Adapted programming could include MPCA to cover basic needs, emergency health and nutrition services at community

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<sup>19</sup> Food Consumption Index, Coping Strategies Index

level and small-scale water source repairs to enable services at emergency response standards.

**ii. Newly displaced populations, due to conflict or extreme climatic events (drought/floods)**

DG ECHO will prioritise integrated emergency life-saving interventions providing immediate relief and protection to most vulnerable populations in the acute phase of displacement (within 3 months, also considering multiple displacements). Responses should generate information on needs, gaps, household registration, and set the foundations (e.g. access, networking, community mobilisation) for follow up assistance and protection. Provision of information to affected populations, identification, and referral of those in need of specialised assistance and/or protection services shall be mainstreamed.

Attention should be given to inclusion and exclusion factors. Conflict sensitive programming is particularly relevant, with emphasis on dynamics between displaced populations and host communities. A risk and threat analysis by location should be generated to inform programming, including mitigation of exclusion errors.

Priority actions include:

- o Emergency assistance at first point of access to newly displaced populations (even if multiple). Identification of multi-sectoral needs, response providers and referral systems. In IDP sites, Camp Management and Camp Coordination (CCCM) shall also activate the accountable transition towards sectoral needs-based assistance such as inclusion/redirection of food assistance, eligibility for emergency multipurpose cash assistance (MPCA), or identification of protection needs. Protection data collection should be conducted where specialised protection services are also available.
- o Education in Emergencies (EiE) actions may include temporary learning spaces and need to integrate the provision of child protection services. Inclusion of education into multi-sector rapid response mechanisms can be considered. EiE actions should facilitate enrolment in host community schools.
- o Information sharing to guide individuals and families, including activities preserving family unity. Protection partners should consider co-locating with partners complementing other activities (e.g. providing protection services during distributions).
- o Nutritional screening and referral to treatment facilities and follow up of referrals. Primary and secondary health care facilities supported shall cater for additional inpatient and outpatient caseload and consider outreach services.
- o Emergency MPCA within rapid response mechanisms, targeting most vulnerable households and enabling transitions towards sustained assistance (safety nets, food assistance, etc.)
- o Emergency WASH/Shelter to be provided in IDP sites with involvement of affected communities. Consideration of up-grading emergency solutions and coverage of WASH needs within a public health targeted approach.

**iii. Targeted Disaster Preparedness**

Building upon previous Disaster Preparedness interventions; the action should aim at expanding the work for climate risks adaptation, supporting local first-line response actors, including affected communities, Local Government Authorities (LGAs), local NGOs (LNGOs) and Red Crescent volunteers) to: i) enhance preparedness capacities in the most

affected riverine or other relevant disaster prone locations, ii) improve the response through better preparedness and mitigation measures, and, iii) better integrating climate adaptation, preparedness and response to mitigate the interconnected risks of drought, floods, and epidemics. All actions should aim at documenting the lessons Learnt and best practices.

#### e) **SOUTH SUDAN**

DG ECHO will prioritise lifesaving interventions via emergency and preparedness responses (to shocks, be man-made or natural disasters) targeting the most vulnerable people in the most severely affected areas of South Sudan. DG ECHO will aim at:

1. Reducing excess mortality and morbidity in country, addressing in particular severe food insecurity, acute malnutrition, mother and child health, and epidemics, water and sanitation crises;
2. Providing protection assistance to communities affected by violence, displacement and/or climate change, including by integrating protection and education;
3. Contributing to advocacy efforts towards protection of civilians (including humanitarian workers), respect of IHL and accountability;
4. Supporting targeted multi-hazard disaster preparedness actions aiming at strengthening Early Warning Systems; developing local contingency and preparedness plans for effective response focused on natural hazard induced and man-made disasters;
5. Supporting the humanitarian community's activities in coordination, logistics, safety and security, context analysis, data collection, monitoring and conflict sensitivity.

Mobile response and coordinated area-based approaches should be expanded. DG ECHO will favour needs-based multi-sector integrated programming and localisation (including solid capacity development) to expand outreach and efficiency. Cash modality is increasingly promoted when market, security and technical conditions are met.

#### **Sectoral specificities**

**Emergency / Rapid Response Mechanisms:** DG ECHO encourages E/RRM partners to combine their various initiatives into a common E/RRM modality, building on their complementarity in terms of field presence, capacity, geographic coverage and sectors of intervention, and developing joint advocacy, communication, contingency plans, multi-sectoral assessments, rules of engagement/scenarios and logistics services. E/RRM partners are encouraged to promote localisation through capacity building of local actors.

**Protection:** Priority will be given to direct response and delivery of protection services to GBV survivors, children at risk and PSNs, while support to systematic protection data collection and analysis, to inform humanitarian response and advocacy will be considered.

**Humanitarian Food Assistance:** with preference to use of Multi-Purpose Cash Transfers where markets are functional and security allows, lifesaving, food assistance will prioritise areas and households with most severe vulnerabilities to food insecurity, mainly in the hotspot areas (in IPC 4 & 5) and those affected by new shocks.

**Water Sanitation and Hygiene (WASH) - Shelter & Settlement:** WASH and Shelter/Settlement interventions will mainly be carried out as part of an integrated multi-sectoral mobile emergency response. Small WASH rehabilitation/repairs of infrastructures

could be envisaged only in densely populated IDP/refugee settlements to respond and / or prevent water borne epidemics, or in health, nutrition, education facilities.

**Education in Emergencies:** Actions should focus on providing access to integrated, safe and qualitative primary education to conflict/disaster affected children (formal and non-formal), with an aim to addressing clearly identified education barriers in hard-to-reach, under-served and crisis impacted locations.

**Disaster Preparedness:** Priority will be on support to multi-hazard and risk analysis, preparedness and capacity building informed by multi-hazard/coordinated Early Warning Systems (EWS) with linkage at community, state and county level, and to some extent national level.

#### **f) SUDAN:**

For 2023, DG ECHO will build on previous years and focus on the following priorities:

1. Addressing critical needs by delivering **emergency lifesaving basic services and protection** assistance to populations affected by conflict, displacement, natural disasters, epidemics outbreaks, including through Rapid Response Mechanisms and crisis modifiers.
2. Providing an appropriate response to health, nutrition and food security crises to **prevent and/or reduce excess mortality and morbidity**, while also reinforcing the humanitarian-development-peace nexus.
3. Providing innovative, multi-sectoral, conflict-sensitive and safe access to quality formal and non-formal primary **education** of children, while addressing child protection and psychosocial needs, promoting social cohesion and resilience, and increasing community participation. Complementarity and alignment with longer-term funding is key.
4. Supporting **principled coordination**, context analysis, **logistics, safety and security**.

DG ECHO will **prioritise populations affected by conflict and natural disasters** as well as their host communities. Resident populations will only be considered for support in IPC 3+ areas.

Geographical priorities are the five Darfur states, South and West Kordofan, Blue and White Nile and Gedaref states.

DG ECHO will **prioritise new crises**, including outside of the above geographical priorities, where critical humanitarian needs have been identified. Partners should proactively engage with all other resilience, recovery and development actors and programmes, and ensure sustainable approaches and exit strategies are integrated in the actions at proposal stage.

Considering the increased humanitarian needs, other sources of funding should focus on resilience and durable solutions.

Strong participation in the relevant clusters and information sharing on important gaps, findings, capacity, funding streams and challenges are paramount to ensure effective complementarities and contribute to improved coordination.

## **Sectoral specificities**

**Protection:** DG ECHO could support independent principled protection monitoring and advocacy activities, as well as provide direct protection assistance with a particular focus on victims of violence (including GBV and intercommunal violence). Protection activities will only be funded if the complementary and proactive interaction with other sectoral interventions (such as health, nutrition or food security) can be demonstrated with.

For refugees and asylum seekers, actions focusing on adequate reception, registration, documentation of new arrivals and timely identification of vulnerabilities will be considered.

**Humanitarian Food Assistance** should be prioritised to **areas and households with higher vulnerability to food insecurity**, due to the combined impact of new displacement, lean season, loss of livelihoods, economic crisis, and lack of access to basic services.

Mainly targeting rural population, flexible food assistance actions should ensure needs-based frequency and quantity of food assistance covering the lean season. The exception will be newly displaced populations. Food assistance actions should be shock-adaptive and nutrition-sensitive (e.g. children 6-24m and pregnant and lactating women).

Partners should factor in inflation in their proposals and ensure adequate coordination with resilience-building and livelihood initiatives funded under other instruments and donors.

Improved and well-coordinated food security information collection and analysis (market monitoring, PDM's) should be part of the response and shared amongst partners to avoid overlap. PDM results after the first distribution should be guiding the next distribution round.

**Health and Nutrition:** Development of a surge capacity to ensure consistent quality of care during peak periods, as well as implementation of mass screenings by community health workers and community members (i.e. Family MUAC) ahead of expected peaks for timely referral of cases, are also recommended. Well-coordinated multi-sectoral approach and scaling-up engagement with development actors must be developed in the proposal and will be prioritised.

Secondary healthcare will be considered in priority states and with prioritisation of paediatric (including integrated stabilisation centres) and maternity wards. Psychological support at community level and treatment of GBV will also be considered in priority states.

**Water Sanitation & Hygiene (WASH) - Shelter & Settlements (S&S):** For new IDPs sites, floods, and more generally, for response to new emerging crisis, WASH interventions will mainly focus on emergency response. Post-emergency response can be envisaged in previously non-accessible areas where communities have hosted significant displaced populations, which disrupted the existing WASH services of the communities.

**Education in Emergencies:** Considering the continued closure of schools, partners are required to be capable to adapt to the situation and to submit two plans. Plan A: the situation resumes to “normality” and schools re-open. Plan B: schools are (re)closed.



## **g) UGANDA:**

In Uganda, DG ECHO priorities in 2023 will remain three-fold:

1. **Providing life-saving assistance** to the most vulnerable refugees and their host communities.

Universal access to quality basic services delivery and the provision of household-level assistance to refugees and host communities will be supported through protection, health, integrated nutrition, EiE, WASH and multi-purpose cash, including for food assistance. The assistance will be articulated around a Basic Need Approach designed to maximise the referrals and the impact of assistance and services.

2. **Strengthening local Disaster Preparedness** to address the multiplicity of crises including epidemics, new refugee influxes and natural hazards by ensuring effective linkages between early warning and early action.

DG ECHO will build on the results achieved in the past four years, continuing to support District Contingency Planning in highly vulnerable/exposed Districts, reinforcing local first responders' capacities, pooling Districts' tools and pre-positioned resources and supporting forecast-based financing interventions to improve rapidity and efficiency of anticipatory action and/or emergency responses.

3. **Strengthen the operationalisation of the humanitarian, development, and peace nexus** with all development actors and across sectors to promote the implementation of the Comprehensive Refugee Response Framework.

DG ECHO will support projects in the following geographical areas:

- Areas receiving new influxes of refugees and asylum seekers.
- Settlements where DG ECHO's previous investments in setting up services require additional short-term support for effective transition to development programmes or the Authorities.
- Transit districts and districts exposed to recurrent, multiple, and high-risk hazards (floods, landslides, drought and sudden refugee influxes) as well as epidemics.

DG ECHO strategy in Uganda promotes a holistic people-centred approach designed to contribute to offer a comprehensive package of multi-sectoral assistance and services to each beneficiary. The provision of multi-sectoral assistance at household and community levels should rely on robust referral pathways between the different supported actions. The package of assistance delivered should be captured in the Basic Needs Approach. Specific attention will be paid to the roll out of a **sound targeting mechanism in the food sector**.

Coordination: Partners must ensure compliance in reporting ECHO funding against the Refugee Response Plan (RRP). Partners are requested to enrol in and actively promote the usage of the inter-agency Feedback Referral and Resolution Mechanisms (FRRM) managed by UNHCR. Strategic coordination platforms / initiatives can be supported but only when robust policy influence capacities can be demonstrated and well-documented.

### **Sectoral specificities**

**Protection:** DG ECHO will prioritise actions that contribute to maintaining a safe and protective asylum space: ensuring reception conditions, registration and documentation capacities, ensuring legal protection to refugees and asylum seekers as well as assistance

to victims of violence, including mental health and psychosocial support. The maintenance and update of beneficiary databases elaborated under the Individual Profile Exercise, that can help tailored targeting according to clearly defined vulnerability criteria will be supported. Provision of information related to availability and access to services (rights) will only be considered if impact can be demonstrated. Interventions aimed at preventing/mitigating protection risks will only be supported if tangible outcomes can be achieved within the timeframe of the action. Behavioural change strategies will only be supported if linked to a multi-year development programme.

**Health:** DG ECHO will continue to support the provision of primary healthcare services and reinforce the epidemic response, complementing Disaster Preparedness interventions. Support to service delivery should be compliant with the basic health services package as described in the Health sector integrated refugee response plan of the Ministry of Health. Reinforcement of the dialogue with Development actors should be a priority to secure the transition. Investment in physical infrastructure will not be considered unless justified on life saving needs.

**Water Sanitation and Hygiene (WASH):** Operational Rationale Emergency response must be coherent with the multi-hazard approach and only cover areas with acute gaps mainly generated by newly affected population (new refugees, natural hazard affected populations). Cash should be considered as the privileged modality wherever local suppliers have the capacity to provide the required level of service.

**Education in Emergencies:** Supported interventions must soundly contribute to enhance safe, continued and inclusive access to quality formal and non-formal primary and secondary education, for refugees and host communities' out-of-school children, notably those overaged and/or at risk of dropping out. Actions should address the lack of capacities in alignment with the Education Response Plan for Refugees and Host Communities led by the Ministry of Education and Sports as well as the financial barriers to education through the provision of cash-for-education grants. Integration of child protection – based on specific protection risks – is essential, including the provision of psychosocial support to learners and teachers.

**Disaster Preparedness (DP):** Interventions should promote the development of contingency planning at National and districts levels, reinforce local first responders' capacities and target in priority districts exposed to multiple hazards, including the reception or settlement of refugees. Interventions should adopt a comprehensive multi-hazard approach, considering natural hazards such as floods, landslides and drought, sudden refugee influxes overwhelming existing reception capacities and epidemics, reinforcing the linkages between Early Warning and Early Action. The action should be aligned to the National Disaster Risk Management Plan and can promote activities supporting the approval of the National DRM bill. Comprehensive approaches linked to DP programmes implemented by development agencies should be reinforced to promote the Nexus.

**Focus on epidemics:** Supporting epidemics preparedness and integrating it into multi hazard plans. Reinforcing the community-based epidemics surveillance and referral.