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Revised Emergency appeal Bahamas: Hurricane Dorian

 International Federation
of Red Cross and Red Crescent Societies

Revised Appeal n° MDRBS003

Glide n° [TC-2019-000099-BHS](#)

2,000 families (8,000 people) to be
assisted

500,000 Swiss francs DREF allocated

17.3 million Swiss francs Appeal current
funding requirements

Appeal launched 03 September 2019

Revised Appeal Issued:
24 September 2019

Appeal ends 03 March 2021 (18 months'
timeframe)

This revised Emergency Appeal seeks a total of **17.3 million Swiss francs** to enable the International Federation of Red Cross and Red Crescent Societies (IFRC) to support the **Bahamas Red Cross Society (BRCS)** to deliver assistance to and support recovery of 2,000 families (8,000 people¹) with a focus on the following areas of focus and strategy for implementation: **Shelter; Health; Water, Sanitation and Hygiene Promotion (WASH); Livelihood and basic needs; Protection Gender and Inclusion (PGI); Migration; Disaster Risk Reduction (DRR); and National Society Strengthening (Preparedness for Effective Response)** for 18 months. The planned response reflects the situation and information available at this time of the evolving operation and will be adjusted based on further developments and more detailed assessments. Details are available in the Emergency Plan of Action (EPoA) [<click here>](#)

The disaster and the Red Cross Red Crescent response to date

24 August 2019: NOAA informed that a newly formed tropical depression strengthened into Tropical Storm Dorian.²

27 August 2019: IFRC issues an [Information Bulletin no. 1](#) monitoring the development of Tropical Storm Dorian and presenting Red Cross actions.

1 September 2019: Hurricane Dorian moves towards northwestern of the Bahamas. IFRC issues an [Information Bulletin no. 2](#) monitoring the development of Hurricane Dorian.

2 September 2019: IFRC issues a DREF Operation ([MDRBS003](#)) for 247,444 Swiss francs (CHF) to assist 500 families (2,500 people).³

03 September 2019: IFRC issues an Emergency Appeal for 3.2 million Swiss francs to assist 5,000 families (20,000 people).

24 September 2019: IFRC issues the Revised Emergency Appeal for 17.3 million CHF to assist 2,000 families (8,000 people)⁴.



Photo 1: Bahamas Red Cross volunteers providing Emergency Medical Team (EMT) services at Odyssey Airport. Source: IFRC, 12 September 2019.

¹ According to ArcGIS the average household size of the Bahamas is 3.4 people per household. For this Emergency Appeal an average of 4 people per family was considered. [26 June 2019. ArcGIS.](#)

² NOAA. [Hurricane Dorian, 2019](#)

³ For the DREF Operation, an average household size of 5 people was used (standard for the region). However, after consulting [ArcGIS demographic data for The Bahamas](#), the number of people per family was revised to 4 for the Emergency Appeal.

⁴ Based on initial assessments, the total number of families to be assisted during the operation was reduced to 2,000, with a strong focus on Shelter (including distribution of household items); Health; Water, sanitation and hygiene promotion (WASH); Livelihoods and basic needs; Protection Gender and Inclusion, Disaster Risk Reduction, and National Society Capacity Strengthening.

The operational strategy

Overall situation

On 1 September 2019, Hurricane Dorian hit the Northern Bahamas with winds of up to 298 km/h reaching Category 5 on the Saffir-Simpson scale. The storm battered Abaco Island and Grand Bahama for almost two days in what has been described as a stationary hurricane.

The Bahamas is composed of 700 islands distributed over 100,000 square miles of ocean. Hurricane Dorian significantly impacted the north-western Bahamas islands of Abaco and Grand Bahama and the surrounding Keys. Hurricane Dorian surpassed known meteorological records as the strongest Atlantic hurricane documented to directly impact a land mass since records began. Hurricane also affected the north-western Bahamas islands for an approximate total of 68 hours, with the southern eyewall planted over Grand Bahama for about 30 hours.

Abaco Islands are the most severely affected. Initial assessments for Abaco found widespread destruction, with thousands of houses levelled, telecommunications towers destroyed, and water wells and roads damaged. There is very limited or no potable water, electricity or sanitation. Satellite data suggests that in Central Abaco, destroyed buildings are concentrated in the area surrounding Marsh Harbour, the most ravaged, particularly The Pea and The Mudd – both mostly inhabited by vulnerable groups – and Scotland Cay.

In Grand Bahama, the central and eastern parts are the most impacted, with hundreds of homes damaged between Freeport and Deep Water Cay. Satellite data suggests that 76 to 100 per cent of buildings analysed near High Rock (central Grand Bahama), McLeans Town and Deep Water Cay (eastern Grand Bahama) have been destroyed. Oil tanks have also been damaged.

As of 19 September, the National Emergency Management Agency (NEMA) has registered 1,958 evacuees in shelters in New Providence.⁵ Some evacuees sought shelter with relatives and friends across the Bahamas. While the death toll remains at 52; many more are missing, and the death toll is expected to rise.⁶

On 2 September, the Ministry of Foreign Affairs of The Bahamas issued a broad list of needed disaster relief items (including, among other, tents, cots, hygiene kits, potable/purified water, water bladders and containers, first aid items, chain saws, plastic tarpaulins, debris removal tools, blankets). The Ministry of Finance also issued a [Declaration of Exigency](#) which grants, for a period of 30 to 90 days, tax exemptions on the importation of disaster relief items, including medicine and medical supplies, building materials, tents, cots, bedding materials and mosquito nettings, electrical fixtures and materials, plumbing fixtures and materials, household furniture, furnishing and appliances, electrical generators, bottled water, clothing, food for personal consumption and personal hygiene products.

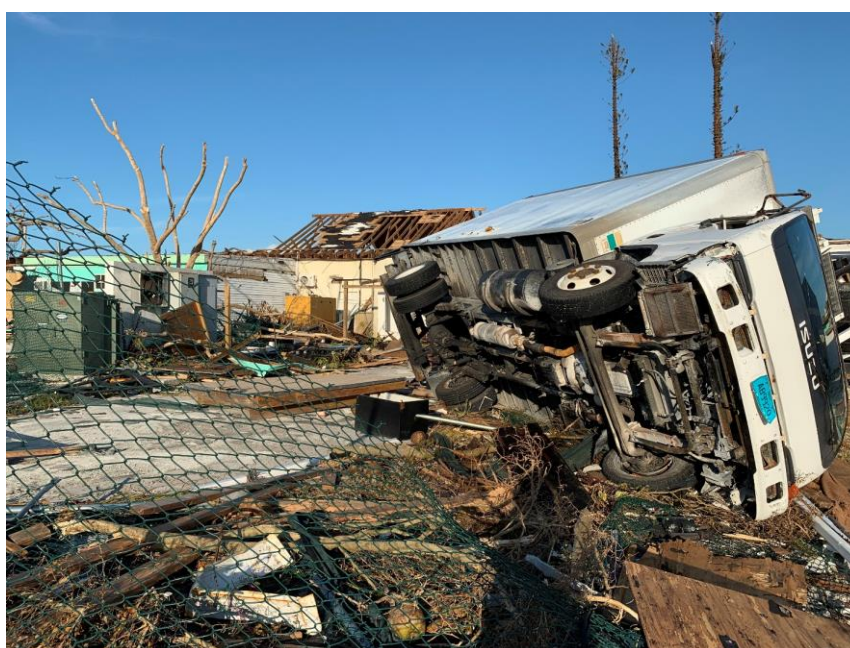


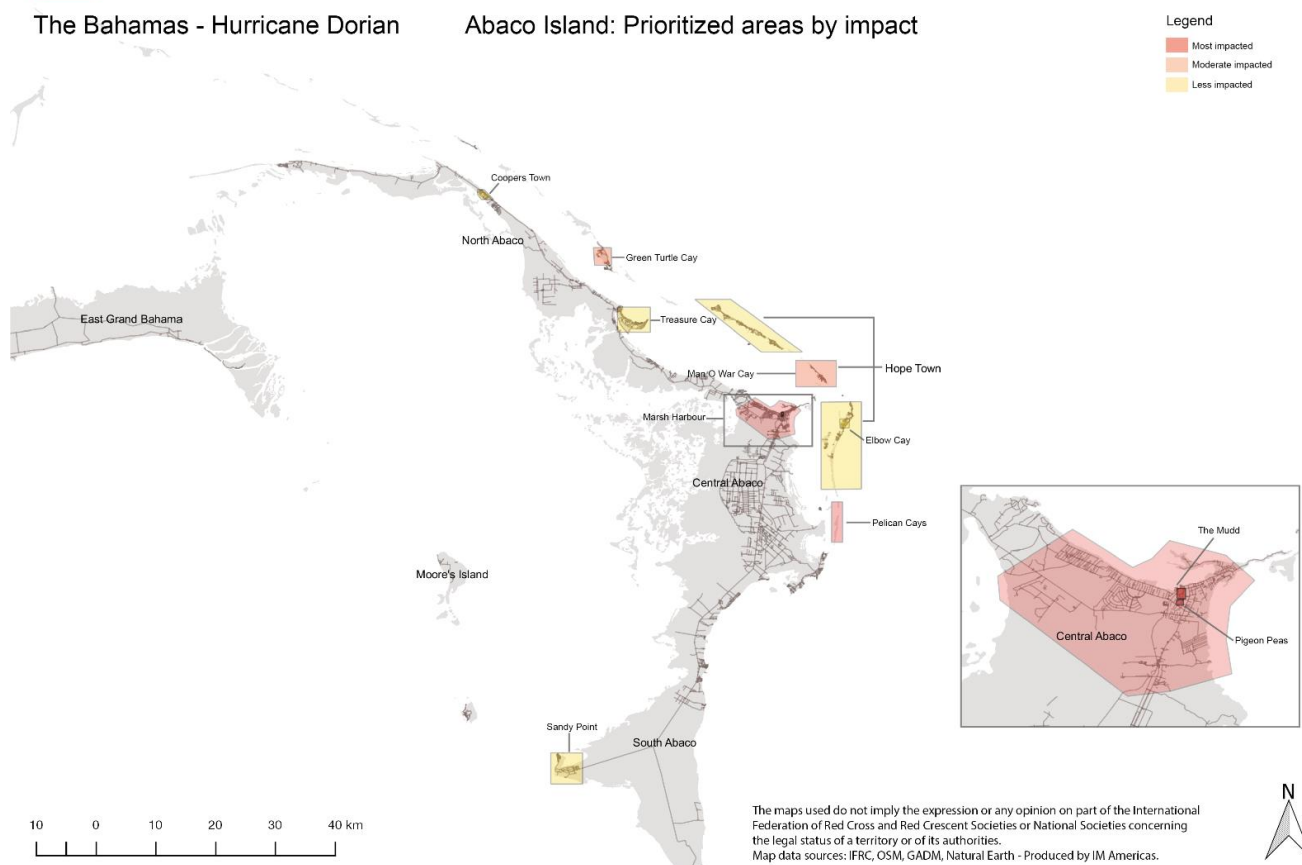
Photo 2: Assessment on the level of destruction and flooding of homes in Abaco after Hurricane Dorian passed through the Bahamas. Source: IFRC September 5, 2019.

⁵ NEMA Updates, September 14.

⁶ Statement of the Commissioner of Police Anthony Ferguson, September 10, 2019. The Tribune 242.

The Bahamas - Hurricane Dorian

Abaco Island: Prioritized areas by impact



Response to date

On 31 August, the IFRC Regional Disaster Management Coordinator arrived in Nassau to provide support to National Society and coordinate initial response. Since the Hurricane cleared, hundreds of volunteers have donated their time to help people in need. Bahamas Red Cross Society (BRCS) volunteers are delivering medical care to evacuees, sorting and distributing relief supplies, and offering comfort to people traumatized by the Hurricane. The BRCS is distributing food vouchers to evacuees to help them cope with the initial days of displacement in addition to other relief items provided at the collective shelters such as water, hygiene items, dried food parcels, and other supplies requested by shelter managers and evacuees.

In the first days following the path of Hurricane Dorian, the BRCS activated its Emergency Medical Team (EMT) - composed of volunteers and staff - to provide emergency transport from Nassau Odyssey airport to affected people. They received evacuees from Abaco and Grand Bahama from the 2nd to the 9th of September (when the ambulance transfer service was shut down). On average, the EMTs attended about 40-60 people per day and coordinated with other EMT teams onsite to ensure transfer to appropriate services where needed (public and private hospitals, clinic and collective shelters). Affected people were provided with different medical assistance: treatment of soft tissue injuries and fractures, administration of missed medication, dialysis, maternity and psychological support services. In the first three days of the response phase the BRCS Ambulance transferred a total of 62 people to health facilities.

As of 18 September, the BRCS has reached 629 households in Nassau, Abaco and Grand Bahama through the distribution of 38 portable stoves, 1349 boxes of water bottles, 143 children/baby supplies, 1390 hygiene items, 1283 mattresses/bedding, 183 shelter kits, 97 kitchen sets, 151 tarpaulins and 194 jerry cans.

Trained psychologists and nurses, in collaboration with the *Bahamas Psychosocial Association*, are providing mental health support to evacuees who have experienced trauma, assisting affected families with psychosocial support services. A Psychosocial Support (PSS) centre is being settled as an entry point in the BRCS headquarters where primary health care and psychosocial support is being provided since September 11 (81 people reached so far). Intake forms are being developed to ensure data protection and confidentiality.

The BRCS, with the support of the International Committee of the Red Cross (ICRC), is currently developing a webpage to provide Restoring Family Links (RFL) services aiming to prevent separation and disappearance, look for missing persons, restore and maintain contact between family members and clarify the fate of persons reported as missing. As

of 19 September, volunteers from the BRCS have reconnected six families. A call centre has also been opened to provide RFL services. On the first day of the service (11 September), 56 people were registered, and 43 attentions were provided. A radio campaign on RFL has also been broadcasted in local radio and local news by the ICRC.

The IFRC, through its Surge response system and with the support of partner National Societies, deployed a total of 55 people to the Bahamas (12 based in Grand Bahamas, 9 based in Abaco and 34 in Nassau, New Providence). These positions are supporting the areas of Coordination, Shelter (for the response operation but also to support the government with the coordination of the response of the shelter sector), WASH, Health, Livelihoods, Cash and Voucher Assistance (CVA), RFL, Basecamp Management, Communications, Administration, Finance, Planning, Monitoring, Evaluation and Reporting (PMER) and Logistics. Furthermore, the field operations coordinator is the liaison between the BRCS's administration, NEMA and other implementing actors. This surge team is involved in the initial assessments and works jointly with the BRCS on the implementation of its programmes.

As part of IFRC Global tools deployment, the following Emergency Response Unit (ERU) were deployed to Bahamas to respond to the impact of Hurricane Dorian: the Finnish RC deployed a Logistics ERU, the Danish RC a Basecamp Management ERU, the American RC together with the Austrian RC deployed an IT & Telecommunication ERU. Additionally, the American RC and French RC have deployed a Relief ERU.

Needs analysis

Shelter: Currently most of the affected families are either being hosted by relatives, friends, staying at the hotels or have been evacuated to collective centres. There are currently about 4,800 registered evacuees⁷ and 2,078 evacuated people⁸ in collective centres in New Providence (Nassau). There is an urgent need to support the most vulnerable families who have no income or have limited savings to prevent them from using negative coping mechanisms.

People sheltered in Abaco in different collective shelters have very basic or insufficient access to clothing, blankets or bedding, since access to the sites where they are staying is challenging due to lack of transportation means and fuel. Food is not available in Abaco Islands; however, WFP has started distribution of ready to eat meals at the collective shelters. Further assessments are needed, particularly in the North of Abaco (Coopers Town) and Grand Bahama Island.

Water, sanitation and hygiene promotion:

Water Supply: Water supply needs remain extensive in the affected areas of Grand Bahama and Abaco, where groundwater is the primary water source and well fields have been impacted by saltwater intrusion and other possible chemical and biological elements. Currently, the populations of Grand Bahama and Abaco have been advised to avoid consuming water from wells or using it for hygiene purposes.

Sanitation and Hygiene: Waste management, cleaning, and purification of water sources are urgently needed. Sanitation systems are still in need of assessment, particularly smaller, household level systems in areas that have been difficult to access since the Hurricane. There is little or no water, electricity or sanitation in Abaco so far. In Treasure Cay (Abaco), a 500,000 USG storage tank was blown away as well as the sewer lift station. Water is being pumped from two wells in Lucaya and Settler's Way areas to supply Freeport, but the supply is restricted due to limited access to electricity. Detailed assessments are ongoing in Grand Bahama and Abaco, in addition to environmental assessments related to oil leaks and hazardous materials. Some affected populations had to resort to open defecation while in transitional collective shelters prior to being evacuated from Abaco, increasing health risks. Sanitation systems in schools and hospitals need assessment and repair. Marsh Harbour Clinic in Abaco and Rand Memorial Hospital in Grand Bahama have not reported any cases of acute watery diarrhoea so far, however risk of water borne diseases is expected to remain high in the upcoming weeks. Lack of sanitation and hygiene is likely to be a driver of these diseases, even if bottled waters are available.

Vector borne diseases: it is estimated that 6-8 weeks following the Hurricane risk for vector-borne diseases will be high. Indeed, such disasters often flush away mosquito breeding sites but then as water recedes and environmental conditions worsen, breeding sites and mosquito populations increase. In addition, the debris and challenges of solid waste disposal in this post-disaster environment create ideal conditions for other vectors such as rats which also carry disease.

Health: Health assessment focused on three key areas: assessment of clinical, psychosocial support and public health needs.

Clinical needs: Assessment of clinical service provision in Abaco and Grand Bahama indicated that health needs would be adequately met. The Marsh Harbour Clinic has returned to normal functional capacity and has adequate medical

⁷ OCHA. BAHAMAS: Hurricane Dorian. Situation Report No. 02. 10 September 2019

⁸ NEMA Updates, September 13.

staff and resources, satisfactory pharmacy, laboratory and radiology capacity. Rand Memorial Hospital emergency department of the Grand Bahama is still functioning, treating approximately 75-150 patients per day. There is one Type 2 Emergency Medical Team – deployed by Samaritans Purse – to support medical services at the Rand Memorial Hospital. According to assessment done no clinical assets from the Red Cross Red Crescent Movement need to be deployed.

Psychosocial Support: The people of Abaco and Grand Bahama have experienced traumatic events and loss and will have significant psychosocial needs. The BRCS has the capacity, interest and partnership links to enable it in order to provide ongoing psychosocial support services to those affected by Dorian.

Public health needs: The primary public health concerns for the affected populations from Abaco and Grand Bahama and those in collective shelters in New Providence are water-borne diseases (including acute watery diarrhoea), vector-borne diseases (including dengue, chikungunya and Zika), acute respiratory infections (especially in children under-five) as well as other infectious diseases. Recovery is likely to take many months and would be benefitted by the BRCS role as conveners of the community to bring about collective community action to prevent infectious diseases.

Livelihoods and basic needs: Field impact and needs assessments are ongoing, but considering the massive destruction, affected households are in need of wide range of goods and services that include but are not limited to food, shelter, clothing, educational support, communication, transportation and debt-repayment. The livelihoods of affected households have been severely disrupted. Both Grand Bahama and Abaco rely heavily on the tourism industry (restaurants, hotels, tours, etc.) – an industry that largely drives the economic development of The Bahamas. Manufacturing and fishing industries are also major labour contributors in Grand Bahama and Abaco respectively. The relatively high poverty rates (12.5 % in Grand Bahama and approximately 17.2% in Abaco) and existing unemployment rates (12% in Grand Bahama and 8% in Abaco) further exacerbate the tenuous situation of the affected households. It is anticipated that productive assets such as fishing boats, engines, fishing traps and nets, business commodities and infrastructure have been lost and/or damaged. Most businesses are closed; therefore, formal employment in the private sector has been severely disrupted. Most of the population of most affected areas have evacuated to New Providence, so the demand for goods and services in affected areas has decreased drastically. The number of casualties has affected the human asset of livelihoods. The remaining physical and financial assets are at risk since families have difficulties to meet immediate basic needs and might be forced to fall into detrimental coping strategies.

Protection, gender and inclusion: During emergencies, women are more exposed to risks related to gender violence, which can occur at any time. Persons with disabilities often have different needs, requirements and vulnerability risks based on their gender, age and disability. Girls and women with disabilities also face multiple and intersecting discrimination based on both gender and disability. This places them at even greater risk for isolation and violence. It is essential in this context to guarantee access to psychological and social assistance provided by public or community services. In July 2013, the Government of The Bahamas launched a National Task Force to oversee the development, implementation and coordination of a national strategic plan to address gender-based violence. This task force has also developed a National Strategy to implement measures to focus on preventions and support to migrants. The Red Cross will ensure close coordination with the government and follow the recommendations of the National Strategy to guarantee that the approaches of gender-based violence prevention and intervention are culturally relevant and effective.

Migration: A vulnerable population of people who had been residing in Abaco in six (6) unregulated housing sites has been particularly affected. The informal settlements called The Pea and The Mudd have sustained catastrophic damage. An assessment conducted by the Ministry of Labour of these areas in [Abaco in April 2018](#) reported an estimated population of around 3,000 people living in these informal settlements (20% of these people living in this town are undocumented migrants). These areas are likely to record significant number of deaths in addition to other damage. People who remained in Abaco after Hurricane Dorian expressed fear of deportation if they accepted evacuation to Nassau. Migrants in The Bahamas are often associated with illegal status, poverty, lack of education and violence. According to informal interviews with members of this community, they expect to return to Abaco when the situation stabilizes. Further assistance will be needed to support the returnees, particularly vulnerable children and families, and to guarantee that they are reached by timely and appropriate social services.

Community Engagement and Accountability (CEA): communities affected by disasters are themselves uniquely positioned to implement prevention and response measures. Experience demonstrates that the efficiency and effectiveness of any emergency operation can be greatly enhanced by pre-positioned or rapidly deployed systems that allow two-way communications and sustained dialogue between those caught up in disasters and those who seek to assist them. In this sense CEA is also an important component of early-warning systems and disaster preparedness.

Disaster Risk Reduction: It is crucial after the impact of such a catastrophic event as Hurricane Dorian, to identify the communities that were affected by the disaster and apply an inclusive resilience programme, that pays special consideration to the affected migrant communities, using a Community based Disaster Risk Reduction (CBDRR) approach. As increasing numbers of migrants settle in a country exposed to several natural hazards, there is a need to ensure that they are better prepared for effective disaster risk response. This will contribute to address recognized

needs for greater integration with communities. In recent years the Caribbean National Societies, including the BRCS, have been exposed to the IFRC tools and methodologies strengthening cross-cutting themes of climate change and gender. The BRCS staff and volunteers have received trainings in some of revised tools and methodologies, further strengthening the capacity of the National Society and it is therefore expected that these can be applied in the recovery and resilience of the affected communities. The application of Nature-Based Solutions measures at community level will also be ensured.

Targeting

The assessments indicate that the level of damage suffered by households is severe. Displaced people (in local community shelters or staying with relatives or neighbours) are the primary target for immediate distribution of relief items.

The community will be engaged in the beneficiary selection through the BRCS volunteers who are assisting in developing distribution and the registration lists. Following criteria of vulnerability will be taken into account:

- Single headed households
- Pregnant women
- Families with children
- Older people
- Persons with disabilities
- Vulnerable groups (with special needs, minority communities)
- Households severely affected by the disaster

According to preliminary needs assessments and consultations with partners and other stakeholders in the country, the IFRC will focus its operation in the two most affected Islands of Abaco and Grand Bahama (including New Providence) as well as other islands receiving evacuees. In-depth evaluations will be carried out to continue assessing the needs, and the corresponding adjustments will be made in future revisions if necessary.

Coordination and partnerships

The IFRC is supporting the Government of the Bahamas through the National Emergency Management Agency (NEMA) which is leading the response with the support of the Caribbean Disaster Emergency Management Agency (CDEMA), and the International Community. The IFRC is working with the government's Emergency Support Functions (ESF), aligning IFRC expertise in Shelter, Health (mental and physical), WASH, Livelihoods and basic needs, Protection Gender and Inclusion, Disaster Management, Logistics, Relief distribution with existing NEMA/CDEMA coordination mechanisms. The IFRC Country Cluster Support Team (CCST), based in Trinidad and Tobago, and the BRCS are regularly participating in the CDEMA and NEMA coordination meetings. In fulfilling its global mandate to support the coordination of the humanitarian shelter sector, the IFRC is providing support to the Government of the Bahamas for *Emergency Support Function 6*, which deals with mass care and shelter service and is led by the Department of Social Services.

More than 40 humanitarian organizations are present in the Bahamas. While most base their operations in Nassau, response efforts focus on central and north Abaco and in Grand Bahama in Freeport. The Pan American Health Organization (PAHO) and the IFRC have launched appeals for critical short-term assistance.

The IFRC is also deploying a support recovery assessment team to develop the strategy and to identify the next steps to be taken during the recovery stage. The team will be composed by one recovery coordinator, one shelter/reconstructions expert, one information analyst, one National Society development and one Preparedness for Effective Response expert.

Coordination with the IFRC CCST and the IFRC Americas Regional Office (ARO) is constant with daily calls and meetings. The IFRC ARO developed a Hurricane Dorian Monitoring [dashboard](#) available on the [IFRC GO platform](#). The IFRC is coordinating with the BRCS and with the Surge Information Management Support (SIMS) network, including the American Red Cross and British Red Cross, sharing data and support with mapping and information management.

Partner National Societies including the Danish Red Cross, Ecuadorian Red Cross, Finnish Red Cross, the Canadian Red Cross Society, Jamaican Red Cross, Spanish Red Cross, Norwegian Red Cross also deployed personnel. Moreover, Norwegian Red Cross and the Canadian Red Cross Society provided 99,431 Swiss francs (CHF) of in-kind donation of humanitarian assistance to be distributed to the affected population. The Finnish RC deployed a Logistics Emergency Response Unit (ERU), the Danish RC a Basecamp Management ERU, the American RC and Austrian RC an IT & Telecommunication ERU. Additionally, the American RC and French RC have deployed a Relief ERU.

Various private sector actors have also contributed to the operation. DHL has provided logistics support in the Bahamas in coordination with the Logistics ERU from Finnish Red Cross. UPS and Airbus have supported the operation with transportation of relief items from the IFRC Regional Logistic Unit in Panama. Additionally, Airbus provided a helicopter for the BRCS for the deployment of personnel, delivery of aid and for the initial assessment of most affected areas in the country.

The ICRC, in coordination with the BRCS, has been supporting the implementation of RFL services to reconnect families separated by the Hurricane.

Proposed Areas for intervention

Overall objective

The overall goal of the operation is to provide **immediate life-saving and longer-term support for recovery to 2,000 households (8,000 people) affected by Hurricane Dorian** focusing on Shelter (including distribution of household items); Health; Water, Sanitation and Hygiene promotion (WASH); Livelihoods and basic needs; Protection Gender and Inclusion, Disaster Risk Reduction, National Society Strengthening and Shelter coordination services in support of the government

Proposed strategy

The response will be carried out in an integral manner, ensuring that all the response and recovery actions have a holistic vision with a focus on ensuring quality and efficiency in all the services provided in coordination with authorities. The overall objective of the response strategy is two-fold: to meet the immediate needs of affected people, as well as to enhance the affected communities' capacity to prepare for and respond to future disasters.

The plan will be constantly improved by in-depth evaluations but will be constructed based in two phases: the **emergency relief phase** and **recovery phase**, ensuring a quick transition between both phases. All actions will be focused on covering urgent needs and planning for the recovery actions to strengthen the resilience of the affected families.

The general response strategy will target the most affected families from vulnerable groups, whose houses have been destroyed or very heavily damaged and not habitable. The displaced population is accommodated in various ways, some in existing collective shelters, many with neighbours or relatives on the island.

Sectoral interventions will be integrated wherever possible, to have a great impact on the worst affected, and streamline implementation. The strategy includes a strong component of strengthen the National Society's capacity to respond to future disasters.

The BRCS has a network of Community Disaster Response Teams (CDRTs) collecting data and registering affected families and vulnerabilities. Through its network, the National Society with the support of the IFRC and the Movement partners will:

- Carry out continuous needs assessments, registration and analysis
- Inform the communities of the relief effort undertaken and receive feedback on its program
- Coordinate with National authorities and other stakeholders present in the country to ensure integrated programming
- Continue developing and sharing key messages, radio announcements and Facebook alerts with communities

Areas of Focus



Shelter

People targeted: 2,000 families (8,000 people)

Male: 4,000

Female: 4,000

Requirements (CHF): 5,730,000

Proposed intervention

Outcome 1: Communities in disaster affected areas restore and strengthen their safety, well-being and longer-term recovery through shelter and settlement solutions.

Output 1.1: Short-term and mid-term shelter and settlement assistance is provided to affected households

- Assessment of immediate and early recovery shelter needs, capacities and gaps, and Mid-Term shelter solutions, including market assessments
- Identification of target families (2,000 households during the emergency phase provided with household items and 750 in the early recovery phase) based on needs assessments and registration, verification of beneficiaries in different target groups and locations (displaced and non-displaced)
- Coordination with government and other stakeholders
- Analysis of security of tenure for those who will be receiving immediate or midterm shelter assistance (rental support or repairing or rebuilding damage shelters)
- Advocacy on security of tenure for those on need of emergency and midterm shelter assistance and provision of technical support to secure it to those who need it
- Purchase and distribution of emergency shelter and household items for 2,000 families
- Provision of Short-term shelter solutions for affected population (rental support / host families support) through cash/voucher (multipurpose) for 750 families
- Monitoring of Short-term shelter solutions for affected population (rental support / host families support) through cash (multipurpose) for 750 families
- Provision of midterm shelter solutions for affected population (rental support / repair support/ T-shelters) through cash/ in kind 500 families
- Monitoring of midterm shelter solutions for affected population (rental support / repair support/ T-shelters) through cash/ in kind 500 families
- Rehabilitation/ upgrading of Bahamas RC branches
- Monitoring of rehabilitation/upgrading of Bahamas RC branches
- Repair of damaged collective centers
- Monitoring of the repair of damaged collective center
- Supporting the operation with Shelter staff (delegate and national staff).

Output 1.2 Technical support, guidance and awareness raising in safe shelter design and settlement planning and improved building techniques are provided to affected households

- Production and distribution of IEC materials
- Orientations on assessments implementation for volunteers
- Orientations to volunteers on the best use of the distributed shelter and household items
- Orientations to affected households on the best use of the distributed shelter and household items
- Orientations for volunteers on the Build Back Safer approach
- Orientations for affected households on the Build Back Safer approach
- Trainings for construction professionals on the Build Back Safer approach
- Training of Trainers on Participatory Approach for Safe Shelter Awareness (PASSA) Youth/Plus
- PASSA Youth/Plus sessions for affected households
- Implementation of PASS Youth/Plus plan of action

**Livelihoods and basic needs**

People targeted: 750 families (3,000 people)

Male: 375 heads of household

Female: 375 heads of household

Requirements (CHF): 4,060,000

Proposed intervention

Outcome 6: Communities, especially in disaster and crisis affected areas, restore and strengthen their livelihoods

Output 6.1: Basic needs assistance for livelihoods security including food is provided to the most affected communities

- Distribution of hot meals and food rations (depending on identified needs) in initial response stage

Output 6.2: Household livelihoods security is enhanced through food production, increased productivity and post-harvest management (small businesses and natural resource-based livelihoods)

- Conduct a livelihood needs assessment to understand the impact of the disaster on economic activities of different livelihoods groups of the affected population and the potential response options to respond to needs
- Define livelihoods restoration, strengthening and protection strategy

- Selection and registration of livelihoods target groups and beneficiaries
- Carry out livelihoods and household economy baseline
- Support 150 affected families to restore their livelihood activities and their livelihoods related-markets (distribution of assets, cash and voucher assistance, etc.) so affected communities can resume their income-generating activities
- Support to 100 affected families to strengthen and protect their livelihood activities (coaching, training, distribution of assets, cash and voucher assistance, etc.) in order to achieve greater economic security and to increase resilience to future disasters
- Monitoring of livelihood restoration, strengthening and protection activities
- Final evidence-based impact evaluation

Output 6.3: Community awareness activities on livelihoods strengthening and protection are carried out with target communities and public actors.

- Livelihoods Programming Course (LPC)
- Emergency and Recovery Livelihoods Assessment (ERLA) course

Output 6.4: 750 households are provided with unconditional/multipurpose cash grants to address their basic needs

- Feasibility analysis, market assessment and monitoring of local Financial Service Provider (FSP) status
- Mobilize volunteers to conduct Cash and Voucher Assistance (CVA)
- Program sensitization with key stakeholders
- Develop and Implement CEA Strategy
- Establish and activate feedback and complaints response mechanism
- Conduct detailed identification to identify eligible beneficiaries based on preset-selection criteria using ODK.
- Registration and Verification of selected beneficiaries using ODK.
- Provide unconditional cash grants of 1,782 USD to 750 selected families and conduct post-distribution card reconciliation.
- Provide unconditional cash grants of 1,028 USD to 750 selected families and conduct post-distribution card reconciliation.
- Provide unconditional cash grants of 810 USD to 750 selected families and conduct post-distribution card reconciliation.
- Monitor card use and complaints response mechanism
- Conduct Post-Distribution Monitoring and Final Card Reconciliation
- CVA Lessons Learned & Evaluation
- Development of a CVA case study
- Conduct CVA training for volunteers
- Support operation with hiring of Livelihoods Staff (CTP delegate and national staff)

Water, sanitation and hygiene

People targeted: 2,000 families (8,000 people)

Male: 4,000

Female: 4,000

Requirements (CHF): 830,000



Proposed intervention

Outcome 2: Immediate reduction in risk of waterborne and water related diseases in targeted communities

Outcome 2.1: Continuous assessment of water, sanitation, and hygiene situation is carried out in targeted communities

- Conduct training for RC volunteers on carrying out water, sanitation and hygiene assessments
- Conduct initial assessment of the water, sanitation and hygiene situation in targeted communities
- Continuously monitor the water, sanitation and hygiene situation in targeted communities
- Coordinate with other WatSan actors on target group needs and appropriate response.

Output 2.2: Daily access to safe water which meets Sphere and WHO standards in terms of quantity and quality is provided to target population

- Provide safe water targeted communities through bottled water distribution for a period of two weeks.
- Setting up five distributions points in Marsh Harbour (procurement of storage tank (2.4 litres), bladders, transport costs)

- Develop solid waste management plan for used plastic bottles
- Distribute household water treatment products (chlorine tablets for 3 months) enough for 90 days, to 2,000 people.
- Distribute jerry cans (2 per family) and buckets with lids (1 per family) for up to 2,000 households.
- Provide key messages and training to targeted communities on safe water storage, and safe use of water treatment products.
- Deploy assessment team to evaluate damage and potential impacts to local groundwater supplies, and provide recommendations for repair/rehabilitation
- Based on assessment findings, implement cleaning and disinfection of boreholes/wells
- Procurement and distribution of water filters (1,500)
- Repair/rehabilitation of 50 household level water supply systems
- Procurement of WatSan kit #2

Output 2.3: Hygiene promotion activities which meet Sphere standards in terms of the identification and use of hygiene items provided to target population

- Conduct needs assessment: define hygiene issues and assess capacity to address the problem.
- Select target groups, key messages, and methods of communicating with beneficiaries (mass media and interpersonal communication).
- Develop a hygiene communication plan and train volunteers to implement activities of the communication plan.
- Design/Print Information, Education and Communication materials
- Deliver key messages, assess progress and evaluate results on the Participatory Hygiene and Sanitation Transformation (PHAST) methodology.
- Engage community on design and acceptability of water and sanitation facilities.

Output 2.4: Hygiene-related goods (NFIs) which meet Sphere standards and training on how to use those goods is provided to the target population

- Determine the needs for hygiene NFIs, including soap, water storage, and menstrual hygiene for each community based on health risks and user preference in targeted communities in coordination with the WASH group or cluster.
- Distribute 6,000 hygiene kits (family), sufficient for 3 month(s) to 2,000 HH people (kit is one-month supply)
- Determine whether additional distributions are required and whether changes should be made (monitoring of distributions and needs)

Outcome 3: Sustainable reduction in risk of waterborne and water related diseases in targeted communities in the recovery phase

Output 3.1: Community managed water sources giving access to safe water is provided to target population

- Rehabilitation of 5 community-based boreholes/wells
- Provide training in management of water supplies and operation and maintenance of infrastructure
- Monitor use of water through household surveys and household water quality tests
- Implement solid waste management plan for recovery of plastic bottles used during emergency phase

Output 3.2: Improved access to and use of adequate sanitation by the target population. is provided to target population

- Select design for toilets based on consultation with targeted communities with considerations for cultural preference, safety, access for children and disabled, anal cleansing practices, national standards, and menstrual hygiene as well as environmental impact and sustainability
- Construct 250 toilettes (for 250 households) in transitional shelter locations to be determined in consultation with shelter team (sanitation needs in excreta disposal are expected to be less than water supply needs, as in some areas sanitation infrastructure was less impacted by the Hurricane)
- Distribute 250 solid waste bins as required and ensure collection is ongoing through recovery period.
- Drum proofing (drum retrofitting) activities to protect against development of breeding sites
- Address any outstanding needs in environmental sanitation identified during the emergency phase.



Health

People targeted: 2,000 families (8,000 people)

Male: 4,000

Female: 4,000

Requirements (CHF): 410,000

Proposed intervention

Outcome 4: The immediate risks to the health of affected populations are reduced

Output 4.1: The health situation and immediate risks are assessed using agreed guidelines

- Health needs assessment conducted by Surge Health in partnership with BRCS of clinical facilities to assess for potential ERU deployment.
- Health needs assessment conducted by Surge Health in partnership with BRCS of clinical facilities to assess for public health needs and PSS.

Output 4.2: Target population is provided with rapid medical management of injuries and diseases

- Red Cross EMT service provision to 400 people from Odyssey airport to preferred hospital.
- First aid trainings in Abaco, Grand Bahama and New Providence

Output 4.3: Epidemic prevention and control measures carried out.

- New Providence: Development and release of key messages targeting 1,600 people aligned with Epidemic Control for Volunteers in collective shelters (focusing on prevention of diarrhoea, acute respiratory infections, and other infectious diseases).
- Abaco: Development and release of key messages targeting 4,000 people aligned with Epidemic Control for Volunteers (using volunteers, radio, social media and other appropriate mediums)
- Grand Bahama: Development and release of key messages aligned with Epidemic Control for Volunteers (using volunteers, radio, social media and other appropriate mediums)
- Procurement and distribution of impregnated mosquito nets (LLITs) for 2,000 families
- Training of 50 volunteers in key public health messages (epidemic prevention and WASH in coordination)
- Supporting the operation with the hiring of Health Staff

Output 4.4: Psychosocial support provided to the target population

- New Providence: Recruit and develop roster of trained volunteers specialising in psychology and counselling.
- New Providence: Psychosocial support services that provide psychoeducation on positive copings skills and grounding techniques are available and provided at the Bahamas Red Cross cottage and in shelters.
- New Providence: Psychosocial support activities for children in the Bahamas Red Cross afterschool centre
- New Providence: Men, Women, Children and Vulnerable Groups are engaged in supportive activities (sporting events) to meet their psychosocial support needs
- New Providence: Construct ramp for access to support cottage to allow for people with mobility issues to access.
- Abaco: Psychosocial support training for 20 volunteers and staff
- Abaco: Psychosocial support services that provide psychoeducation on positive copings skills and grounding techniques are available.
- Abaco: Child friendly places are set up and running
- Grand Bahama: Psychosocial support training for 40 volunteers and staff
- Grand Bahama: Psychosocial support services that provide psychoeducation on positive copings skills and grounding techniques are available.
- Grand Bahama: Child friendly places are set up and running
- Psychosocial support provided to staff and volunteers
- Support the operation with the hiring of PSS staff

Outcome 5: The medium-term risks to the health of affected populations are reduced

Output 5.1: Gaps in medical infrastructure of the affected population filled

- Stock replenishment of Ambulance
- Training in new ambulance equipment of EMT for Bahamas Red Cross
- Procurement of new ambulance

Output 5.2: Community -based disease prevention and health promotion measures provided.

- eCommunity-based Health and First Aid (CBHFA) with integrated PHAST Training of Trainers
- Grand Bahama: eCBHFA trainings with inclusion of behavioural change, communicable diseases, management of NCDs, violence prevention and psychological first aid among other (conducted alongside and integrated with PHAST)
- Abaco: eCBHFA training with inclusion of behavioural change, communicable diseases, management of NCDs, violence prevention and psychological first aid among other (conducted alongside and integrated with PHAST)
- Support to carry out community action plan developed through implementation of eCBHFA
- Distribution of condoms in shelters, PSS centre and at community level



Protection, Gender and Inclusion

People targeted: 250

Male: 125

Female: 125

Requirements (CHF): 160,000

Proposed intervention

Outcome 7: Communities identify the needs of the most vulnerable and particularly disadvantaged and marginalised groups, as a result of inequality, discrimination and other non-respect of their human rights and address their distinct needs

Output 7.1: NS programmes improve equitable access to basic services, considering different needs based on gender and other diversity factors.

- Assess specific needs of the affected population based on criteria selected from the minimum standard commitments on gender and diversity
- Support sectoral teams to include measures to address vulnerabilities specific to gender and diversity factors (including people with disabilities) in their planning
- Support sectoral teams to include measures to address vulnerabilities specific to gender and diversity factors in their planning
- Hold basic ½ day training with IFRC and NS staff and volunteers on the Minimum Standard Commitments (or integrate a session on Minimum Standard Commitments in standard/sectorial trainings).
- Support sectoral teams to ensure collection and analysis of sex-age and disability-disaggregated data (see guidance in (forthcoming) revised MSCs)
- Supporting the National Society with PGI delegate

Output 7.2: Emergency response operations prevent and respond to sexual-and gender-based violence (SGBV) and all forms of violence against children.

- Conduct training on PGI minimum standards
- Use Minimum Standard Commitments as a guide to support sectoral teams to include measures to mitigate the risk of SGBV
- Develop Standard Operating Procedures (SOPs) for Protection/SGBV including mapping of referral pathway (in line with the forthcoming SOP template in the revised Minimum Standard Commitments)
- Include messages on preventing and responding to SGBV in all community outreach activities
- Hold basic ½ day training with IFRC and NS staff and volunteers on addressing SGBV (or integrate a session on addressing SGBV in standard/sectorial trainings)
- Establish a system to ensure IFRC and NS staff and volunteers have signed the Code of Conduct and have received a briefing in this regard
- Map and make accessible information on local referral systems for any child protection concerns
- Provide essential services (including reception facilities, RFL, and access to education, health, shelter, and legal services) to unaccompanied and separated children and other children on their own
- Establish child-friendly spaces and community-based child protection activities, including educational ones
- Translation services for community activities
- Volunteers, staff and contractors sign, are screened for, and are briefed on child protection policy/guidelines



Migration

People targeted: 250

Male: 125

Female: 125

Requirements (CHF): 170,000

Proposed intervention

Outcome 8: Communities support the needs of migrants and their families and those assisting migrants at all stages of migration (origin, transit and destination)

Output 8.1: Awareness raising and advocacy address xenophobia, discrimination and negative perceptions towards migrants are implemented.

- Support National Society enhance the diplomacy in favour of vulnerable migrants
- Enhance the coordination with authorities and stakeholder to advocate for accessing of migrants to humanitarian aid
- Develop Communication Campaign to reduce stigma and xenophobia
- Support the operation with a Mission Migration specialist
- Study Case (evidence-based) to sensitize migrants' vulnerabilities

Output 8.2: Family links are restored for people separated from, or without news of, their loved ones as a result of the disaster

- Frequent visit of all shelters to offer RFL phone calls and to take tracing cases
- Monitor the unaccompanied minors and to endeavor to find their families
- Communicate families through the Call Center, including regular call backs
- Work with the Member Groups on Abaco and Grand Bahama to increase the possibility to search the remaining population in the affected area
- Interaction with Department of Social Services to check names in shelter registers
- Continue to visit the shelters to speak with the occupants and also disseminate the RFL work to the Shelter Management and other NGOs
- Work with other partners to create a National RFL Network adapted to the specific Bahamian context.
- Train Volunteers in RFL Activities and referrals to other services such as PSS
- Creation of Field Teams to visit shelters independently
- Organization of data management to centralize the information gather of missing people, and to issue proper follow-up
- Interview teams to receive families and to follow-up
- Support to National Society with experts from ICRC (1 RFL Delegate, 1 RFL Data Manager, 1 Forensic Specialists)



Disaster Risk Reduction

People targeted: 1,000

Male: 500

Female: 500

Requirements (CHF): 1,120,000

The BRCS will disseminate family disaster plans and community-based Disaster Risk Reduction (DRR) activities to the affected communities.

The strengthening of the BRCS's disaster preparation and response capacities are one of the most important part of this operation to build resilience at community level.

Outcome 9: Communities in high risk areas are prepared for and able to respond to disaster

Output 9.1: Communities take active steps to strengthen their preparedness for timely and effective response to disasters

- Implementation of ToT on the Road Map to community resilience
- Implementation of one VCA Training of Trainers
- Completion of EVCA in six communities
- Implementation of CDRT Training (six trainings)
- Purchase of CDRT equipment
- Development of School Disaster Preparedness Programmes (six schools)
- Printing of Billboards - Evacuation Routes and Signs for communities and schools
- Implementation of Six Workshops Disaster Planning and Identification of Evacuation Route
- Establishment of Early warning system at community level
- Development of the Disaster Preparedness Business Plan for Small and medium-sized enterprises (SMEs)
- Public awareness raising through the dissemination of Public Awareness and Public Education DRR key messages
- Develop the Early Action Protocol for the Forecast-based Action by the DREF

Outcome 10: Communities affected in disaster and crises affected areas adopt climate risk informed and environmentally responsible values and practice

Output 10.1: Contribution to climate change mitigation are made by implementing green solutions

- *Implementation of a Climate Change Plan of Action based on the roadmap to community resilience.*
- *Implementation of Caribbean Climate Change Adaptation Methodology in DRR activities*
- *Volunteer Training on the Climate Change tool Kit*
- *Application of the Communities Adapting with Nature check list at community level and the climate change toolkit*
- *Implementation of the Nature Based Solution measures in the selected communities*
- *Sensitization on Climate Change Campaign*
- *Implementation of Climate Change Workshop*
- *Revision on the natural resource law, (including humanitarian standards such as the Sphere Humanitarian Charter and Minimum Standards in Humanitarian Response)*
- *Development on an Environmental study to provide recommendations for subsequent action to be included in decision- making Proportional environmental impact assessments and subsequent management plans.*
- *Climate change and private sector case study on resilience economies*

Strategies for Implementation**Requirements (CHF): 4,820,000****Strengthening National Society**

Based on the demand for the technical and coordination support required to deliver in this operation, the following programme support functions and operation support will be put in place to ensure an effective and efficient technical coordination: human resources, logistics and supply chain; protection and visibility equipment for the NS; information technology support (IT); communications; social media management; CEA; security; planning, monitoring, evaluation, and reporting (PMER); and finance and administration.

All Red Cross actions are based on volunteer action and the operation will ensure that all personnel and volunteer staff participating in the emergency and recovery phases receive recognition, insurance, security and duty of care. All volunteers participating in this operation will receive the proper trainings, debriefing sessions and participate in the lessons learned workshops.

The Bahamas Red Cross is carrying out a Preparedness for Effective Response (PER) process to enhance their response mechanism with support of OFDA capacity building initiative. This Emergency Appeal will support the BRCS for the implementation of the different phases of the process, providing timely, quality and effective programs and services to affected communities, and accountability to donors and partners in face of disasters and crises.

The strategy includes the identification of the current response capacity of BRCS using the PER mechanism (the 37 components and related benchmarks) to define the critical areas in need of investment to strengthen BRCS:

- in the short term. i.e. within the EPoA if possible
- in the midterm to longer term i.e. in future EA revisions and/or bilateral support to the NS.

The findings from the identified strengths, gaps and defined priorities of the assessment will be used to:

- define immediate areas in need of capacity enhancement efforts within the next 3 months
- define activities within the Strategy for Implementation 1 Strengthen National Society capacities and ensure sustained and relevant Red Cross presence in communities.
- Incorporate any recommendation to refine future surge support priorities
- Share findings with the BRCS to validate and encourage a platform for donors/partners to support the critical technical and financial resource gaps to better coordinate support to the BRCS
- Inform continued longer-term capacity enhancement efforts later in the operation in collaboration with National Society Development and other technical sectors

The NS PER mechanism consists of five inter-related areas (1) Policy, Strategy and Standards, (2) Analysis and Planning, (3) Operational Capacity, (4) Coordination, (5) Operations Support and its thirty-seven components.

ANALYSIS AND PLANNING



COORDINATION



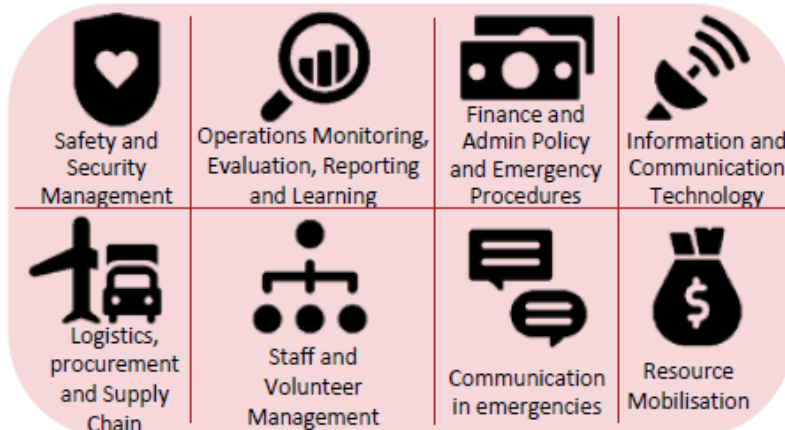
OPERATIONAL CAPACITY



POLICY, STRATEGY AND STANDARDS



OPERATIONS SUPPORT



Ensure Effective International Disaster Management

IFRC will provide support to the National Society to implement the operation during the response and recovery phase, strengthening capacities in coordination with the CCST and the regional office in Panama. Support consists of:

- Deployment of Surge support as needed (Communications; Community, Engagement and Accountability (CEA); Logistics; WASH; Shelter; PMER; Finance; Relief; Emergency Response Unit (ERU); and others)
- Capacity strengthening of the national and branch disaster response teams (training, refreshment, insurance, equipment and performance) in relevant specific sectors or areas of intervention.
- Strengthening/development of the emergency response center, equipment, procedures, information management capacities.
- Information Management support for the operation during preparedness, response and recovery phases, including the activation of the Surge Information Management System (SIMS).
- Monitoring of the operation.

The coordinating role of the IFRC within the international humanitarian system is enhanced:

- Provision of regional shelter coordination support in fulfilling IFRC role as chair of the REDLAC Shelter Working Group and Global Shelter Cluster lead agency for natural disasters.
- Provision of shelter coordination support at the country level in coordination with OCHA, CDEMA and NEMA.

Influence Others as Leading Strategic Partners

IFRC supports BRCS through:

- Strengthening Movement coordination to facilitate informed operational strategies.
- Establishing coordination with government and other humanitarian actors including UN agencies to ensure complementarities in response.
- Management and delivery of the programme will be informed by appropriate monitoring and evaluation.
- Development of Resource Mobilization Strategy and training of volunteers and staff in Resource Mobilization
- Development of a Monitoring and Evaluation (M&E) Plan to enhance the scope and adapt the activities and needs by designing a technical guidance to ensure the performance of the operation is well documented through the proposed indicators, ensuring all the data collected in the areas of intervention is completely aligned with the measurement criteria established to facilitate the reporting process. This will be done in close coordination with the Information Management team.
- PMER capacities will be reinforced in the National Society to strengthen its capacities in monitoring and evaluation as well as data collection.
- A final evaluation and a lesson learned workshop will be carry about at the end of the operation to assess the relevance, coverage, effectiveness and efficiency
- A Real Time Evaluation of the operation that informs advocacy to increase reach and improve quality of programming.
- Establish Civil and Military Relations and Coordination that complements regional and international response operations and that effectively provide CMR advice to Head of Operations and to Movement Components engaged in disaster preparedness and response.
- The development of an International Disaster Response Law (IDRL) case study to assess the legal and institutional framework of The Bahamas relating to incoming international disaster relief items, in light of the management of the international response to “Dorian” and against the benchmarking of the *IDRL Guidelines*. This activity will complement an ongoing “Capacity Building Initiative” OFDA Project which identifies a Disaster Law component to support English-speaking Caribbean National Societies to develop policy advocacy strategies and sensitize governments and CDEMA to the need to adopt and implement climate-smart policy frameworks. The activity will contribute to identify and advocate for recommendations to improve the legislation related to the regulation and facilitation of the entry of international humanitarian aid and assistance in case of large-scale disasters
- A capacity building training to support TNRCS to design an advocacy strategy in Disaster Law and other topics of relevance (e.g. protection of vulnerable groups in situations of disaster, migration, DRR), using the *IFRC Legislative Advocacy Toolkit*. This activity will contribute to strengthen the capacities of the National Society in Humanitarian Diplomacy
- The human resources capacities of the National Society will be reinforced in Humanitarian Diplomacy to support and sustain on the long-term the advocacy efforts in Disaster Law and other topics of relevance as well as to implement the advocacy strategy that will be designed (one full time senior officer in Humanitarian Diplomacy who will report to the President of BRCS)
- One to two national workshops to sensitize the government to the auxiliary role of the National Society and discuss the findings and recommendations that will stem from the IDRL study

Ensure a strong IFRC

IFRC will put in place the necessary mechanisms for timely and effective needs assessment, planning, monitoring, evaluation, reporting, accountability and quality assurance, including carrying out an Audit towards the end of the operation.

Funding requirements

International Federation of Red Cross and Red Crescent Societies

EMERGENCY APPEAL

MDRBS003 - BAHAMAS- HURRICANE DORIAN

Funding requirements - summary

SHELTER	5.730.000
LIVELIHOODS AND BASIC NEEDS	4.060,000
DISASTER RISK REDUCTION	1.120,000
WATER, SANITATION AND HYGIENE	830.000
HEALTH	410.000
MIGRATION	170.000
PROTECTION, GENDER AND INCLUSION	160.000
STRENGTHEN NATIONAL SOCIETY CAPACITIES	2.070.000
ENSURE EFFECTIVE INTER'L DISASTER MANAGEMENT	2.290.000
INFLUENCE OTHERS AS LEADING STRATEGIC PARTNERS	370.000
ENSURE A STRONG IFRC	90.000
TOTAL FUNDING REQUIREMENTS	17.300.000

all amounts in Swiss Francs (CHF)

Elhadj As Sy
Secretary General

Reference documents



Click here for:

- [Previous DREF Operation, and Information Bulletins.](#)

Contact information

For further information, specifically related to this operation please contact:

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For Performance and Accountability (planning, monitoring, evaluation and reporting enquiries)

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How we work

All IFRC assistance seeks to adhere to the **Code of Conduct** for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGO's) in Disaster Relief and the **Humanitarian Charter and Minimum Standards in Humanitarian Response (Sphere)** in delivering assistance to the most vulnerable. The IFRC's vision is to inspire, **encourage, facilitate and promote at all times all forms of humanitarian activities** by National Societies, with a view to **preventing and alleviating human suffering**, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.

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



Save lives,
protect livelihoods,
and strengthen recovery
from disaster and crises.



Enable **healthy**
and **safe** living.



Promote social inclusion
and a culture of
non-violence and **peace.**