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Emergency Plan of Action Operation Update

The Bahamas: Hurricane Dorian

 International Federation
of Red Cross and Red Crescent Societies

Emergency Plan of Action: MDRBS003	Glide n° TC-2019-000099-BHS
Date of issue: 27 September 2019	Expected timeframe: 18 months
Operation start date: 02 September 2019	Expected end date: 02 March 2021
IFRC Category allocated to the of the disaster or crisis:	Orange
DREF allocated: 500,000 Swiss francs (CHF)	Emergency Appeal Budget: 17.3 million CHF
Total number of people affected: 15,000 people	Number of people to be assisted: 2,000 families (8,000 people) ¹
Bahamas Red Cross Society presence: The Bahamas Red Cross Society (BRCS) has a national headquarters, two local centres (Grand Bahama and Abaco branches) and 14 groups (small branches) with approximately 200 active volunteers and 16 staff members.	
Red Cross Red Crescent Movement partners actively involved in the operation: The International Committee of the Red Cross (ICRC), American Red Cross, Canadian Red Cross, Austrian Red Cross, Ecuadorian Red Cross, Jamaica Red Cross, Saint Vincent and The Grenadines Red Cross, Danish Red Cross, Finnish Red Cross, French Red Cross, German Red Cross, Japanese Red Cross, Norwegian Red Cross, Spanish Red Cross and Swiss Red Cross, in addition to the International Federation of Red Cross and Red Crescent Societies (IFRC).	
Other partner organizations actively involved in the operation: United Nations Office for the Coordination of Humanitarian Affairs (OCHA), International Organization for Migration (IOM), Pan American Health Organization (PAHO)/ World Health Organization (WHO), United Nations Population Fund (UNFPA), World Food Programme (WFP), United Nations Development Programme (UNDP), United Nations Children's Fund (UNICEF), United Nations Programme on HIV/AIDS (UNAIDS), Ministry of Environment and Housing, Ministry of Public Works, Ministry of Health, Airbus, Copa Airlines, among others.	
This operations update contains an increase of the target of the multipurpose Cash and Voucher Assistance (CVA) from 750 families to 1,000 families. The budget and plan of action soon will be revised accordingly.	

A. SITUATION ANALYSIS

Description of the disaster

On 1 September 2019, Hurricane Dorian hit Northern Bahamas with winds of up to 185 mph (298 km/h) reaching Category 5 on the Saffir-Simpson scale and equalling the highest ever recorded at landfall. The storm battered Abaco Island and Grand Bahama for almost two days in what has been described as a stationary hurricane.

The Bahamas is comprised 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 Cays. Hurricane Dorian made several historical records



Household items were distributed in Abaco. Source: IFRC, 18 September 2019.

¹ According to ArcGIS, Bahamas has an average of 3.4 people per household. For the Emergency Plan of Action, an average of 4 people per household was considered. [26 June 2019. ArcGIS](#)

as the strongest Atlantic hurricane documented to directly impact a land mass since records began, tying it with the Labour Day Hurricane of 1935. Hurricane Dorian 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.

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.

Abaco Islands are the most severely affected. Initial assessments of Abaco found widespread destruction, with thousands of houses levelled, telecommunications towers down, and water wells and roads damaged. As of 23 of September 2019, the estimated population access to piped water from the National Emergency Management Agency (NEMA) is at 10 per cent; there is still limited access to electricity and sanitation.² Satellite data suggests that in Central Abaco, destroyed buildings are concentrated in the area surrounding Marsh Harbour. In this area, the most ravaged are particularly The Pea and The Mudd, which are mainly inhabited by groups in situation of vulnerability, as well as the area of Scotland Cay.

In Grand Bahama, the central and eastern parts are the most impacted, with several homes damaged between Freeport and Deep-Water Cay. Satellite data suggests that 76-100 per cent of buildings analysed near High Rock (central Grand Bahama) and McLean's Town and Deep-Water Cay (eastern Grand Bahama) were destroyed. Oil tanks also were damaged.³

As of September 25, NEMA has registered 1,589 evacuees in shelters in New Providence.⁴ Some evacuees sought shelter with relatives and friends across The Bahamas. The death toll remains at 53, forty-five (45) from the island of Abaco and eight (8) from Grand Bahama. An estimated 608 people remain missing.⁵

A new tropical depression could pose another threat to the islands of the Bahamas that were hit hard by Hurricane Dorian.⁶

Summary of current response

Overview of Host National Society

The Bahamas Red Cross Society (BRCS) has a national headquarters, two local centres (Grand Bahama and Abaco branches) and fourteen groups (small branches) with approximately 200 active volunteers and 16 staff members. The BRCS began its work in 1939 and offers a wide range of assistance to members of the community who suffer loss as a result of fire, hurricane or any other type of disasters. The BRCS works as an Auxiliary to the Government of The Bahamas.

Before the Hurricane hit, the BRCS had prepositioned stock to support 200 families. The relief items were sent to Abaco and Bahamas to start the humanitarian relief distribution. With support of IFRC, the BRCS received items to support 2,500 families with family kits

Since the Hurricane cleared, hundreds of volunteers have donated their time and talents to help people in need. Red Cross volunteers delivered prehospital care to evacuees and are currently sorting and distributing

² [NEMA Daily Updates, September 25.](#)

³ [OCHA, BAHAMAS: Hurricane Dorian. Situation Report No. 02, 10 September 2019](#)

⁴ [NEMA Daily Updates, September 25.](#)

⁵ Statement of the Commissioner of Police Anthony Ferguson, 10 September 2019. The Tribune 242.

⁶ [NOAA, Tropical Weather Outlook, 12 September 2019.](#)

relief supplies, using their language skills to interpret for evacuees, as well as offering comfort to people traumatized by the storm.

The BRCS is distributing locally received donations and food vouchers in Nassau and Grand Bahama to help the evacuees cope with the initial days of displacement. Red Cross staff and volunteers are distributing relief items to 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 their Emergency Medical Team (EMT) of volunteers and staff to provide emergency transport from the Odyssey airport (Nassau, New Providence) to people affected. They received evacuees from Abaco and Grand Bahama from 2 to 9 September (when the ambulance transfer service was shut down). On average, the EMTs attended about 40 to 60 people per day and coordinated with other EMT teams onsite to ensure transfer to appropriate services as needed (public and private hospitals, clinic and collective shelters) in Nassau, New Providence. This population presented an assortment of medical needs; the majority were soft tissue injuries and fractures. Other services included missed medication, dialysis, maternity and psychological support needs. In the first three days of the response phase, the BRCS Ambulance transferred 62 people (36 males, 23 females, 2 who unidentified).

In collaboration with The Bahamas Psychosocial Association, trained Red Cross's volunteers psychologists and nurses are providing mental health support to evacuees who have experienced trauma and providing assistance to respond to the immediate emotional distress and psychosocial needs. A Psychosocial Support (PSS) centre has been established as an entry point in the BRCS headquarters where primary health care and psychosocial support are being provided since 11 September with 81 people reached. Intake forms are being created to ensure data protection and confidentiality.

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

The BRCS has launched a GoFundMe campaign [Bahamas Red Cross Official Hurricane Relief Fund](#) to raise funds from local and foreign donors to support The Bahamas Red Cross Relief Programme.

BRCS also launched an [Amazon Wish List - Bahamas Red Cross Hurricane Dorian Relief](#) with local transport companies *Nine to Five Imports LTD* and *Post Boxes* and *Amazon* to support the efforts of supplying basic human necessities and items to help with the clean-up and recovery. Two flights arrived on the 16 and 23 of September with relief items and supplies needed to initiate recovery actions.

Individuals and corporations have provided financial support to the Red Cross mission of alleviating human suffering. These donations have come from all over The Bahamas and all around the world.

Overview of Red Cross Red Crescent Movement in country

The IFRC supports the BRCS through the Trinidad and Tobago-based Country Cluster Support Team (CCST) for the English Caribbean. This CCST supports National Societies to ensure that communities are organized and prepared for emergencies, resilient to climate change and can withstand public health challenges. IFRC is providing support on Movement coordination for action related to early response and planning for the long-term recovery.

To support its coordination and response, the IFRC Regional Office for the Americas (ARO) developed a Hurricane Dorian Monitoring [dashboard](#) on the [IFRC GO platform](#). 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 on mapping and information management.

As of 25 September, the BRCS has reached 1,330 households in New Providence, Abaco and Grand Bahama. Relief items distributed include 1,283 mattresses/bedding, 82 portable stove kits, 801 cases of water, 113 children/baby supplies, 926 hygiene items, 104 food parcels, 209 shelter kits, 225 kitchen sets, 517 tarpaulins, 134 mosquito nets and 457 jerry cans.

The Finnish Red Cross has deployed a Logistics Emergency Response Unit (ERU), the Danish Red cross a Basecamp Management ERU, the American Red Cross and Austrian Red cross an IT & Telecommunication ERU. Additionally, the American Red Cross and French Red Cross have deployed a Relief ERU.

The IFRC through the Surge response system and with the support of the Red Cross Movement has a 62-person field team in The Bahamas covering the areas of Shelter; water, sanitation and hygiene (WASH); Health; Livelihoods; Cash and Voucher Assistance (CVA); Restoring Family Links; Basecamp Management; Communications; Administration; Finance; Planning, Monitoring, Evaluation and Reporting (PMER); Information Management; and Logistics for the initial assessments of the situation and to assist in the implementation of the plan of action and working jointly with the BRCS on its programmes. Furthermore, the field operations coordinator serves as liaison between the BRCS's administration, NEMA and other implementing actors. As part of the Global leadership taken by IFRC, Red Cross deployed one delegate based in Nassau before the Hurricane to support the coordination of all the shelter actions in the emergency.

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

Overview of non-RCRC actors in country

The IFRC is supporting the Government of The Bahamas, through the BRCS at the 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, to NEMA/CDEMA coordination mechanisms. The Trinidad and Tobago CCST and the BRCS are participating in the CDEMA and NEMA coordination meetings.

More than 40 humanitarian organizations (UN System, International Organizations and Non-Governmental Organizations) are present in The Bahamas. While most base their operations in Nassau, response efforts focus on central and north Abaco and in Freeport, Grand Bahama.

The Pan American Health Organization (PAHO) and IFRC have launched appeals for critical short-term assistance and supplies.

Several foreign governments, both within and outside the region, have provided, or have pledged to provide, relief contributions: Canada, India, British Virgin Islands, Belize, Dominica, Grenada (Organization of Eastern Caribbean States member state disbursements), Switzerland, Republic of Korea, Trinidad and Tobago, United Kingdom (UK Department for International Development - DFID) and the United States of America.

Copa Airlines contributed with free tickets for four Surge Team members' rapid deployment on the first days of the emergency for the support in the assessments and roll-out of the operation.

Coordination and Partnerships⁷:

⁷ [OCHA. BAHAMAS: Hurricane Dorian. Situation Report No. 02. 10 September 2019](#)

Although the Inter-Agency Standing Committee (IASC) has not been officially activated, coordination has been established between humanitarian partners led by CDEMA, NEMA and OCHA, upon the request of the Government of The Bahamas. NEMA/CDEMA structure has been set in Emergency Support Functions (ESF). IFRC and the BRCS are participating in the coordination meetings for the ESFs coordination and in the sectorial ESFs.

Shelter:

- IFRC together with the International Organization for Migration (IOM) is co-leading the Shelter and Camp Coordination and Camp Management (CCM) sectorial group with the objective of managing the shelter actors in the country to fill the gaps and to assist the government to develop a shelter strategy for the affected areas. On the ongoing coordination meetings, it has been established that:
 - K1 Direct Britannia Foundation will identify possible collective centres on buildings or abandoned infrastructure that comply with the minimum standards of Sphere.
 - Complete Collective Shelter assessment survey will be taking care with Hands for Hunger on Nassau to identify quantities of household items needed for each shelter.
 - IFRC and Global Emergency Relief, Recovery and Reconstruction (GER³) coordinated actions in Grand Bahama to identify families in need.
 - IFRC, ShelterBox and IOM worked jointly on a rapid shelter assessment in the following locations in Abaco: The Mudd, Dundas, Murphy Town and Spring City. Furthermore, ShelterBox, IOM and IFRC discussed possible individual shelters support options.

WASH:

- The WASH sector it is being jointly coordinated by NEMA/Water and Sewer Corp. and the United Nations Children's Fund (UNICEF). Other key government counterparts are the Ministry of Health/PAHO, Ministry of Environment, and Ministry of Public Works. Also, Grand Bahama Water Company is a counterpart on Grand Bahama. (Water and Sewer Corp is in charge in Abaco Island, but they are also playing the role of overall sector lead.)
- Foreign governments have supported with larger-scale reverse osmosis (RO) plants targeting the main ports in Abaco (Marsh Harbour) and Grand Bahama (Freeport), and several humanitarian actors have brought in smaller RO units. UNICEF, IFRC and other sector partners have begun distributing water treatment chemicals, hygiene kits, jerry cans, and bladders into the affected areas. The Bahamas Government, through the Water and Sewer Corporation (Abaco) and Grand Bahama Water Company, with assistance from PAHO and other actors are working to assess the extent of groundwater contamination and damage and to restore the existing water supply infrastructure. Assistance and expert advice are needed to deal with saltwater intrusion of the well fields and impact on groundwater sources. Proper storage and distribution of treated water will be critical as well as provision of household level water treatment.

Health

- PAHO is co-leading the health coordination group with the national health authorities and partners to ensure harmonized health and humanitarian support to the affected population.
- Psychosocial support activities and services are being coordinated by the Bahamas Psychological Association (BPA), Ministry of Health and NEMA. PAHO now has a Mental Health and Psychosocial Support (MHPSS) focal point in the field. BRCS and IFRC coordinate with these groups in Nassau, Abaco and Grand Bahama. The Ministry of Health has provided nursing staff previously trained by BRCS in PSS to support PSS activities in Nassau.

- A Medical Information and Coordination Cell (CICOM) has been set up within the Ministry of Health to coordinate the clinical care response to Hurricane Dorian. Emergency Medical Teams are being provided in the affected areas by Samaritan's Purse, Heart to Heart International, International Medical Corps, Humanity First, and AmeriCares.

Protection

- The IFRC and the BRCS, in coordination with the IOM, have been conducting assessments on the conditions of the collective shelters to guarantee that standards of protection, privacy and dignity of affected people are met. Some unaccompanied minors have been observed in some of the shelters and volunteers from the BRCS are following up the cases with Bahamas Social Services. To complement the actions, the Red Cross is deploying an expert in Community Engagement and Accountability (CEA) and Protection, Gender and Inclusion (PGI) to support the BRCS.
- The Caribbean Public Health Agency sent teams as part of the CDEMA response system to assist with assessments and provide technical support.
- The United Nations Children's Fund (UNICEF) has engaged with authorities to better assess the needs of children arriving from the affected islands to Nassau. Numbers are yet to be confirmed by the Government.
- The United Nations Populations Fund (UNFPA) has deployed a Sexual and Reproductive Health Advisor, a Gender-based Violence (GBV) Specialist, and a coordinator to support the Department of Gender Affairs on GBV prevention and risk-mitigation strategy.

Food Security, Relief and Logistics:

- The World Food Programme (WFP) continues to support NEMA/CDEMA and the humanitarian community in assuring that immediate food needs largely are met daily by private individuals, local organizations, logistics and supply chain coordination.
- Coordination is being conducted for the establishment of a logistics hub, with the support of the WFP to manage the inflow of relief assistance.
- The WFP deployed eight mobile storage facilities on the ground in Abaco: Four of the facilities have been set up at the seaport in Marsh Harbour; two at the airport in Marsh Harbour and two on stand-by on Grand Bahama, if required by the National Emergency Operation Centre.

Early Recovery

- The Ministry of Public Works will start, with the support of UNDP, the first Building Damage Assessment in the affected areas using rapid impact evaluations. Training of inspectors was conducted by UNDP on 9 September and two teams of assessors were deployed to most affected areas on 10 September.
- The Ministry of Environment and Housing, with the support of UNDP, has started the elaboration of debris and waste management strategies for Abaco and Grand Bahama. Clearing work will start as soon as the search and rescue operations permit. Experts from both institutions are working together to define the first estimates on quantities of debris generated by the disaster, identification of storage sites, management strategy and mapping of existing assets and needs. National and international partners interested in debris and waste management are requested to liaise with the Ministry. IFRC is deploying a Recovery Assessment Team to develop the Red Cross Movement strategy and to identify the next steps to be taken during the recovery stage, the team will be composed of one recovery coordinator, one shelter/reconstructions expert, one information management expert, one national society development (NSD) expert and one preparedness for effective response (PER) expert.

Needs analysis and scenario planning

Needs analysis

The impact of Hurricane Dorian on housing throughout the islands has been significant. The storm demolished houses and ripped off roofs and destroyed power systems, water supplies and sanitation.

The most affected infrastructure areas are located on the Abaco and Grand Bahama Islands, which has caused a massive migration flow from the islands to Nassau or to the United States. In Abaco, the Marsh Harbour town has the most damaged infrastructure on The Mudd and The Pea areas. As this population's homes have been destroyed, this community is in a particularly vulnerable situation. The eastern part of Grand Bahama Island has the most damages between Freetown and Deep-Water Cay.

IFRC deployed an assessment team to Abaco and Grand Bahama to identify a location for a base camp and a warehouse and conduct a preliminary assessment of needs in health, wash, shelter and restoring family links.

Shelter

According to the Satellite-Based Preliminary Damage Assessment⁸:

Island Group	District	Largest Town & Cities	Buildings Destroyed	Buildings Damaged	Possibly Damaged	Total Settlements Affected
Abaco	Central Abaco	Marsh Harbour	1,133	2,278	83	3,494
	Hope Town	Hope Town	301	650	103	1,054
		Man-O-War Cay	51	232	143	426
		Great Guana Cay	376	569	98	1,043
	North Abaco	Walker Cay	16	70	26	112
		Banyan Beach (Treasure Cay)	421	503	171	1,095
		Green Turtle Cay	207	263	132	602
Grand Bahama	East Grand Bahama	East Grand Bahama	106	12	0	118
		High Rock	175	44	1	220
New Providence		Lyford Cay	0	4	4	8
TOTAL			2,786	4,621	757	8,164

Currently most of the affected families are either being hosted by relatives, friends, staying at hotels or have been evacuated to collective centre, about 4,800 registered evacuees in New Providence (Nassau), Abaco and Grand Bahama.⁹ There are 1,589 evacuated people in collective centres in New Providence.¹⁰ There is a need to support the most vulnerable families who have no income or have limited savings to prevent them from using negative coping mechanisms.

⁸ [Satellite-Based Preliminary Damage Assessment](#): Abaco & Grand Bahama (as of September 5, 2019)

⁹ [OCHA. BAHAMAS: Hurricane Dorian. Situation Report No. 02. 10 September 2019](#)

¹⁰ [NEMA Updates, September 25.](#)

Sheltered people as of September 25¹¹:

New Providence		Grand Bahama		Abaco	Eleuthera
Shelters	People	Shelters	People	Shelter has been deactivated due to lack of use	1 Shelter: figures not available
7	1,589	2	52		

According to preliminary assessments:

- The typology of the destroyed houses is of concrete and wood structure
- Different qualities of wood structure have been observed. While the structure is good and usable in some cases, others are old and rotten with the structure being very weak or partly damaged or demolished.
- Predominant roofing type: Wooden deck structure covered with plywood and roofing shingles.

Further assessments will be carried out to evaluate immediate and recovery shelter needs, capacities, gaps and midterm shelter solutions including market assessments.

The assessments will be conducted on the following islands:

- **New Providence:** Collect information on the needs in the collective centres with the collaboration of BRCS and Hands for Hunger Organization. Collect information on the capacity of hotels and the amount of displaced population that has being received by hosted families. **Abaco:** Collect information on the collective centres and population affected with the collaboration of BRCS. In addition, a door to door collection of data from households remaining in damaged houses is being conducted in partnership with Social Services, using their “Social Assessment and Property Evaluation Form”. Finally, the identification and assessments of collective centres to be rehabilitated has been planned.
- **Grand Bahama:** Collect the assessments information on the collective centres and population affected with the collaboration of Bahamas Red Cross Volunteers and GER. In addition, a door to door collection of data from households remaining in damaged houses is being conducted in partnership with Social Services, using their “Social Assessment and Property Evaluation Form”. Regarding infrastructures, the BRCS branch and two collective centres, identified by the Government, will be assessed.

Immediate Relief Needs: There is currently no proper provision of clothing, blankets and bedding for the remaining population in Abaco and evacuees. The affected population is using whatever has been left after the disaster. In terms of social considerations, the persons with higher purchasing power have left the island and those who remain have no means to leave the island, no destination, are from minority groups and do not want to be exposed. 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. Ready-to-eat meals and packed food and water is being distributed in Abaco by WFP and other INGOs, both in the collective centres and in the communities still living on the land of their damaged houses.

Early Recovery Response: Further assessments are needed, particularly in the North of Abaco (Coopers Town) where needs have been identified and in the affected areas of Grand Bahama Island.

Options for the mid-term shelter solutions and their feasibility are being explored and will be proposed to the Government. Assessments on the type of shelter support that is most suitable for each community according to their socio-economic and cultural profiles will be undertaken. In addition, each of the options for the shelter support will be defined in detail.

¹¹ [NEMA Daily Update - 25 September 2019](#)

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. Due to the nature of the contamination and lack of freshwater resources, bottled water and desalination/reverse osmosis treatment systems are the primary means of water supply.

The vast majority of the people are connected to the national water service which provides water from aquifers located on Grand Bahama and Abaco. Smaller communities, remote and informal settlement rely on boreholes to provide fresh water.

The following details the estimated population who has access to piped water supply¹² as of September 25:



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. In Grand Bahama the central and eastern parts were the most affected. Water is being pumped from two wells in Lucaya and Settler's Way areas to supply Freeport, but the supply is limited due to limited access to electricity. Contamination of aquifers needs to be further assessed by the National Authority before running water is restored. Debris clearing, and waste management assistance is also a priority. Some affected populations had to resort to open defecation while in transitional collective shelters prior to being evacuated from Abaco and health risks remain. 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 up until the 25 September. However, risk of water borne diseases is expected to remain high in the weeks following the disaster. Lack of sanitation and hygiene is likely to be a driver of these diseases, even when bottled water is available.

Vector-borne diseases: it is estimated that six to eight weeks following the hurricane, the risk for vector-borne diseases will be high. Initially, 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 vectors, such as rats, which also carry disease.

Health

Health assessments have focused on three key areas, assessment of clinical needs, psychosocial support needs 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 staff and resources, satisfactory pharmacy, laboratory and radiology capacity. Rand Memorial Hospital emergency department of the Grand Bahama is still functioning, seeing approximately 75

¹² [NEMA Daily Update - 25 September 2019](#)

to 150 patients per day. Type 2 – 1 EMT deployed by Samaritans Purse – to replace medical services at the Rand Memorial Hospital. 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 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

The Government of The Bahamas currently is assessing the overall loss and damages. Considering the magnitude of the destruction, affected households are in need of a wide range of goods and services that includes but is not limited to food, shelter, clothing, educational support, communication, transportation and debt-repayment.

The BRCS's detailed livelihoods recovery needs assessment is ongoing. Information collected from key informants of the public authorities and local NGOs, and by interviewing evacuees at collective shelters and applicants of BRCS welfare services, have led to the pre-identification of the following livelihoods needs per group:

- Public sectors' and large corporations' (private sector) employees (civil servant) have their basic needs met in most cases, since they are kept in the payrolls. Work-station reallocations, and advance salaries pays schemes are being put in place.
- Private sector's (Small- and Medium-Size Enterprises –MSMEs-) employees are uncertain if they are kept in the payroll and therefore if they will continue receiving a salary. In addition, it appears that most of them are not informed on the process to claim their unemployment benefits and/or are not aware if they are entitled to these since they are not certain if their employers have pay monthly contributions on their behalf to the National Insurance System. A specific concern among this livelihoods group is the undocumented portion of the migrant population since they will not be able to access to national insurance services.
- Most businesses are disrupted since they have lost most of their assets, including business premises, tools, equipment, etc. Most of MSMEs were not insured, and therefore will require large investments to restart their activities and require the rapid restoration of basic services (electricity, water, transportation, etc.) to operate. Informal small businesses of the undocumented migrant population will not be able to access to any recovery measures (tax and custom exemptions, soft loans scheme, etc.) that the Government of The Bahamas is putting in place.
- The fisheries sector is considered one of the main economic activities of the Bahamian population in the affected islands. Most artisan fisherfolks have lost their productive assets (boats, engines, lobster condos, etc.), which were not insured. Therefore, they will require large investments to restart their activities. The current Fisheries Act does not require registration of commercial fishing activities operating with a vessel smaller than 20 feet, therefore smaller artisan fisherfolks could be excluded of any governmental recovery programme.
- Other levels of the market chain have also been disrupted, since stakeholders of the transportation, processing and freezing services have lost their assets, and close their business. Even though most of these stakeholders were insured, they will also require the rapid restoration of basic services (electricity, water, transportation, etc.) to operate.
- Farmers and medium farming ventures rely on the restoration rely on the recovery of their businesses; their needs are considered under Employees of private sector (MSMEs). Main products are avocados, poultry, green peppers and tomatoes. The main avocado farm is reporting that 90 per cent of its crop

is lost. “Back yard farmers” and beekeepers have lost their assets, mainly their tools, equipment, crops and livestock. Currently, debris removal and access to and clearing of farmland are the immediate priorities, followed by fertilizers (and rain) to reduce the effect of the salt intrusion, asset replacement, and restoration of water irrigation facilities. As much as for fisheries sector, the entire market system has been disrupted and consideration is required for different stakeholders when programming recovery efforts. Basic services (electricity, water, transportation, etc.) also are needed for restoring the market chain.

- Craft producers of the “straw market” have lost their productive assets (raw materials, tools and equipment) and in most cases their workshop facilities since they operate and manufacture from their homes. Vendors are requested to obtain a license at the cost of 100 US dollars; therefore, informal small vendors and producers could be excluded of any governmental recovery programme.

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 respectively in Grand Bahama and Abaco.

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. Persons and their wellbeing are the main human assets of any livelihood’s activity. Bread winners that have been injured, dead or are missing have stopped working and generating income for their households. 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. For further reference to the livelihoods assessment, please see [link](#).

Protection, Gender and Inclusion

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 developed a [National Strategy](#) to implement measures to focus on preventions and support to the migrants. Red Cross will follow the recommendations and establish close coordination spaces with the government and the national’s strategy to ensure that approaches to gender-based violence prevention and interventions are culturally relevant and effective for persons with disabilities; lesbian and gay communities; populations from the family islands (also referred to as “out islands”; migrants; children; and the elderly.

Many migrant women are employed as domestic workers or in other minimum wage jobs. This group is identified as vulnerable group to gender-based violence. According to the United Haitian Association in The Bahamas, for Dorian evacuees of Haitian descent services of shelter, water and transportation are not provided.¹³

Many irregular migrants are feared dead, because they may have stayed behind to ride out the storm in their unsafe squatter settlements due to their mistrust of government-run shelters. An entire community of people who already had a contentious history with the Bahamian government is now homeless and, in some cases, in fear of deportation. The number of undocumented Haitian displaced in government shelters is low; the assumption is that those who have made it to Nassau are living in informal settlements and are fearful of accessing assistance as the government has been clear in media that any undocumented migrants identified are liable for deportation.

In an interview with *The New York Times*, the minister of immigration, said the government had suspended deportation roundups in areas affected by the storm, but suggested that the undocumented in the Nassau shelters are particularly at risk if they venture outside.¹⁴ There have also been reports of tensions between

¹³ [Stigma of being Haitian in the Bahamas reignites after Hurricane Dorian. Sun Sentinel. 08 September 2019.](#)

¹⁴ [Without Homes, or a State: In Dorian-Battered Bahamas, Haitians Are Hard Hit. New York Times. 13 September 2019.](#)

undocumented Haitians and Bahamians staying in the shelters. The UN Resident Coordinator requested the need for a translator for the undocumented migrants.

Many Haitians have reported no safety net of relatives, as they also lived in the informal settlements obliterated by the storm.

Haitians in The Bahamas are scorned and associated with illegal status, poverty, lack of education and violence. Since Hurricane Dorian, social media has been fuelling the fires of prejudice and bias with frequent posts denigrating Haitians and blaming them for looting and violence.

Migration

A vulnerable population of people who had been residing in Abaco in six unregulated housing developments (often referred to as shanty towns have 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 lived in these informal settlements and that 20 per cent of these people living in this town are undocumented migrants. People who remained in Abaco after Hurricane Dorian expressed fear of deportation if they accepted evacuation to Nassau. These areas are likely to have sustained a significant loss of life, with field assessments showing catastrophic damage.

According to interviews with members of this community, they are likely unwilling to relocate and expect to return to Abaco when the situation stabilizes. Against this backdrop, further efforts will be needed to ensure conditions for returnees, particularly vulnerable children and families, and to guarantee that they are reached by timely and appropriate social services.

Community Engagement and Accountability

Community Engagement and Accountability recognizes that communities affected by disasters are themselves uniquely positioned to inform prevention and response measures.

The strategy for CEA is to support BRCS to further developed its capacity to engage with and be accountable to communities. CEA will be embedded in sector support and in volunteer engagements. During the response phase focus will be on engaging with people in shelters and train volunteers to engage with affected populations. During the recovery phase the strategy will be to strengthen engagement with and accountability to communities and their leaders in Grand Bahamas and Abaco.

Community engagement will ensure that:

- Affected people are engaged in the design, implementation and monitoring of the Red Cross response to Hurricane Dorian.
- Affected people provide feedback to Red Cross and file complains if experiencing misconduct.
- Affected people receive information which support them to become more resilient and feel informed.
- Red Cross can help affected people advocate for their needs and rights with Government.

With the support of the National Insurance Company, a hotline was established to serve the affected people. Key messages were developed to address questions about RFL, general information of the Red Cross operation, how to support the operation and where to seek help.

An action plan is being developed to cover the following phases of this operation.

Disaster Risk Reduction

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 also contribute to address recognized needs for greater integration with communities.

Operation Risk Assessment

	<i>Risk</i>	<i>Impact</i>
Infrastructure and coordination	Uncertain what strategy the Government will put in place to address the situation of the population who was previously living in non-build areas or illegal settlements.	Potential delay or hinder RC intervention.
	In the case of potential development of displacement camps, the Government could take extended time to find available land	Which would impact in the timeframe or revision of RC activities.
	Several humanitarian actors could be coordinating in the Bahamas and there could be challenges and gaps of information of needs covered.	The need to revise the plan regularly to improve the quality of the intervention
Meteorological	Rainfall and/or depression formations could exacerbate poor conditions and delay the recovery of the affected areas. Forecasts indicates additional formation of depressions in the Atlantic close to the Bahamas.	Communities are exposed again to a traumatic event and the needs increase, which would impact in the timeframe or revision of RC activities.

B. OPERATIONAL STRATEGY

Overall Objective

The overall objective 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; Livelihoods and basic needs; Protection Gender and Inclusion; Disaster Risk Reduction; and National Society Capacity Strengthening.

Proposed strategy

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 Movement partners, is:

- Carrying out continuous needs assessments, registration and analysis including mobile data collection tools to gather information.
- Inform the communities of the relief effort undertaken and receive feedback on its program: working on the feedback mechanisms strategy.
- Coordinating with National authorities and other actors present in the country to ensure integrated programming
- Continue developing and sharing key messages, radio announcements and Facebook alerts with communities.

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 shelters, many with neighbours or relatives on the island.

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

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 capacity to respond to future disasters.

Three operational hubs have been established to coordinate the operation activities and to manage warehouse of the items stocked:

- In Nassau – BRCS headquarters
- In Abaco – Forrest Heights Academy
- In Grand Bahamas – Grand Bahamas RC branch.

C. DETAILED OPERATIONAL PLAN

The following section provides information on the progress made as of the closing date of this operations update. Other actions, as detailed in the Emergency Plan of Action, will be reported in future operations update.

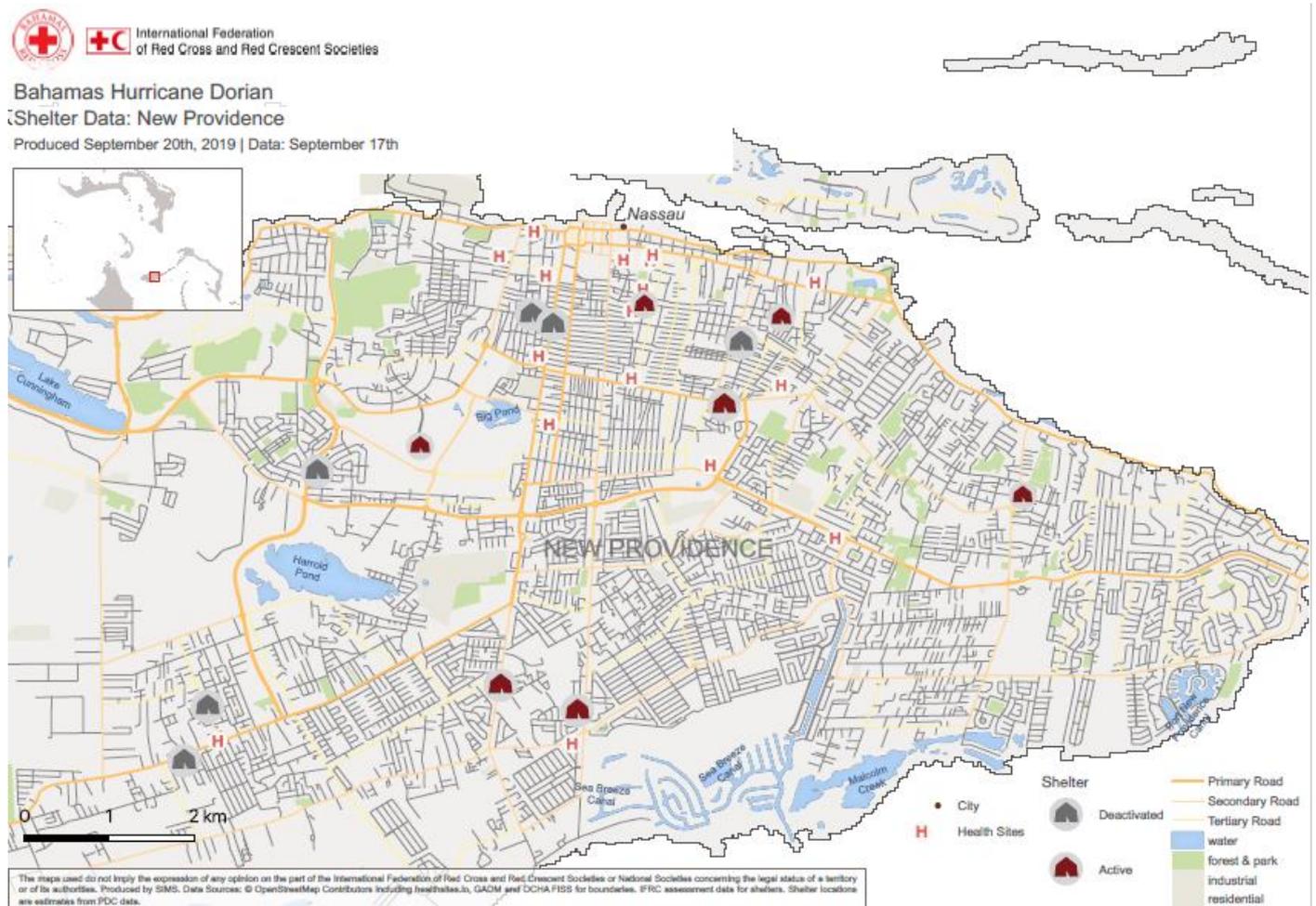
	Shelter People reached: 809 families (3,236 people)	
Outcome 1: Communities in disaster affected areas restore and strengthen their safety, well-being and longer-term recovery through shelter and settlement solutions		
Indicators:	Target	Actual
% of target population living in safe and dignified shelters in secure settlements	80% ¹⁵	To be reported
Output 1.1: Short-term and mid-term shelter and settlement assistance is provided to affected households		
Indicators:	Target	Actual
# households provided with emergency shelter and settlement assistance ¹⁶	2,000 families	809 families
# households provided with mid-term shelter solutions through cash and voucher or in-kind assistance (rental support or repair support) or the construction of Temporary Shelters	1,000	Planned
# of BRCS branches rehabilitated/upgraded	2	Planned
# of collective centres repairs	4	Planned
Progress towards outcomes		
<u>Assessment of immediate and early recovery shelter needs, capacities and gaps, and Mid-Term shelter solutions, including market assessments.</u>		
<p>A multisectoral surge team was deployed (shelter, health, psychosocial support (PSS), water, sanitation and hygiene promotion (WASH), Livelihoods and basic needs, Community, Engagement and Accountability (CEA), Protection, Gender and Inclusion (PGI), from the beginning of the operation to carry out assessments and design the intervention plan of the operation. Various visits had been made to Collective Shelters to evaluate the conditions, estimate the needs and gaps and preliminary damage assessments have been carried out.</p> <p>Also, two multisectoral teams were deployed to the Abaco Islands and to Grand Bahamas to support the assessments and intervention in both islands.</p>		
<p><u>Collective Shelters</u></p> <p>As of 25 September,¹⁷ there are 7 shelters in New Providence (with 1,1,589 people sheltered), 2 shelters in Grand Bahamas (with 52 people sheltered) and 1 shelter in Eleuthera (privately managed, data not available). One shelter was opened in Abaco but was soon deactivated and the people were evacuated to New Providence.</p>		

¹⁵ Focus group discussions; household surveys with at least 5% statistically accurate representative sample.

¹⁶ Shelter toolkits (one kit): tarpaulin, kitchen sets, cleaning sets and blankets.

¹⁷ [NEMA Daily Updates, September 23.](#)

The status of people sheltered is continuously updated by NEMA through their website as figures vary frequently, mostly due to the fact that people register to have access to daily meals but do not permanently stay there and the mobility of people (some people are living the collective shelters looking for medium-term housing solutions).



Visits from the BRCS and the surge team in collective shelters report that all registered collective shelters have a management committee and there is registration intake standardized that includes medical history, mental health issues and current medications. Majority of persons sheltered are from Abaco. Data from persons with special vulnerabilities is gathered but figures varies constantly.

Reports shows low numbers of pregnant women, breastfeeding mothers, people with physical disabilities, people with specific communication challenges (interpretation is required), elderly people, and people with chronic diseases or serious medical conditions. Various cases have been monitored by the BRCS in coordination and referral to Social Services. All registered collective shelters have a management committee, but few have the representation of community leaders.

There was only one case of unaccompanied minors that was referred and followed up with Social Services. There has been so far no reported Sexual and Gender-Based Violence (SGVB) cases. The collective shelters have onsite kitchens, food donated, supported with volunteer cooks. WASH needs (toilets, showers, etc.) are at capacity. The Ministry of Education is registering children for school and plans to integrate them it into local services.

Damage assessments

Abaco Islands

According to the United Nations Office for the Coordination of Humanitarian Affairs (OCHA) Abaco Islands Assessment as of September 19, there is an estimated of 2,184 people in needs in the island of the remaining population of 3,978 people. Needs include power, WASH, food, shelter, fuel, early recovery (houses/bridge repair), telecommunications, debris clearance.

The estimated population from the last census (2010) reported a population of 17,224 people in the islands, that could imply that almost 13,000 people have evacuated.

A rapid interagency shelter assessment was conducted by IOM, IFRC and Shelter Box in the Mudd, Dundas, Murphy's Town and Spring City. Results and recommendations were shared with the Government and implementing organizations.

Grand Bahama

A joint assessment on households' social profile and property evaluation is being conducted by IFRC and the department of Social Services in Grand Bahamas. The assessment has been carried out in two phases, phase one is already complete and the second phase will start late September.

The first preliminary assessment reports:

Major damage	459
Destroyed houses	196
Estimated displaced households	655

Identification of target families (2,000 households during the emergency phase provided with household items and 1000 provided with mid-term shelter solutions in the early recovery phase) based on needs assessments and registration, verification of people targeted in different target groups and locations (displaced and non-displaced) – inclusion factors integrate gender, diversity and disability in the response.

As of 22 September, 809 families have been reached with household items:

- On Abaco: 129 families
- On Grand Bahamas: 148 families
- On New Providence: 532 families (424 families originally from Abaco, 64 families originally from Grand Bahama and 44 families from New Providence).

An ODK survey has been produced between the different sectors to collect data of people affected in shelters and distribution points to register people targeted and establish an intervention strategy for the recovery programmes.

Coordination with government and other stakeholders.

IFRC through the BRCS is coordinating NEMA and national Ministries and is participating in coordination meetings of the Emergency Operations Centre (EOC) in Nassau, Abaco and Grand Bahama and in inter-agency coordination meetings with NEMA & OCHA.

In addition, IFRC is co-leading with IOM the shelter sector coordination group in Nassau, Abaco and Grand Bahama.

Purchase and distribution of emergency shelter and household items for 2,000 families (tarpaulins, light blankets, kitchen sets, toolkits, cleaning kits)

The operation has prepositioned stock for 2,000 households, which is being distributed.

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

Indicators:	Target	Actual
# volunteers and staff trained in Build Back Safer	20	Planned

# community members received orientation on Build Back Safer	TBD	Planned
# construction professionals trained on Build Back Safer	60	Planned
# of communities trained and where the PASSA will be roll-out.	4	Planned
Progress towards outcomes		
<p><u>Production and distribution of (information, education and communication) IEC materials</u> Handouts and Information, Education and Communication materials (IEC) with explanation of the use of the shelter kits are being produced and tested to accompany the distributions. Options are being explored to translate the materials to Creole.</p> <p><u>Supporting operation with Shelter staff (delegate and national staff)</u> A Human Resource (HR) plan is being developed to ensure proper handover of the next rotation of Surge and for the long-term programming.</p>		



Livelihoods and basic needs

People reached: 106 families (424 people)

Outcome 2: Communities, especially in disaster and crisis affected areas, restore and strengthen their livelihoods

Indicators:	Target	Actual
# targeted households have enough food, cash or incomes to meet their survival threshold	750	Planned

Output 2.1: Basic needs assistance for livelihoods security including food is provided to the most affected communities

Indicators:	Target	Actual
# people reached with food assistance or cash for basic needs (1 meal/food ration = 1 person)	1,000	424

Progress towards outcomes

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

Hot meals are being produced by BRCS headquarters to distribute to people waiting for household items. Since the emergency started the BRCS has distributed food parcels to 106 families (424 people).

Output 2.2: Household livelihoods security is enhanced through food production, increased productivity and post-harvest management (small businesses and natural resource-based livelihoods)

Indicators:	Target	Actual
# people supported with in-kind assets or cash or vouchers for recovering or starting / strengthening economic activities	150	Planned

Progress towards outcomes

Define livelihoods restoration, strengthening and protection strategy

Coordination meetings are being held with the Government of Bahamas through NEMA and UNDP to establish Early recovery livelihoods coordination group. The governmental counterparts will be the following Ministries

and Departments: Labour, Fisheries, Agriculture and Forestry, Social Services. So far UNDP and BRCS/IFRC have been identified as key partners for the National livelihood recovery plan, and first unofficial meeting took place last 25 September 2019, following a request for a bilateral meeting between BRC/IFRC and the Department of Fisheries.

Up to date, the livelihoods recovery team of the BRC/IFRC has focused on i) Analysing the context, ii) identifying and disaggregating the population into different livelihood zones and wealth groups, and iii) assessing the impact of the disaster on livelihoods and on the household economic security of the most affected and vulnerable by interviewing with: i) key informants (Dept. Social Services, Dept. Labour, Dept. Fisheries, Dept. Agriculture, Dept. of Statistics), ii) UN and local NGOs (FAO, UNDP, National Fisheries Association, Bahamas Network of Rural Women Producers, National Craft Association, The Nature Conservancy, Urban Youth Development, Bahamas Equality), iii) affected evacuees from different livelihoods groups at Nassau where most affected population have been displaced at collective shelter (government-run and unofficial) and friends and relatives homes. At the time of this update, the livelihoods recovery team of the BRC/IFRC is in the affected areas carrying out focus groups with affected population of the different livelihood groups pre-identified.

A Livelihoods orientation course for BRCS staff and volunteers was held on 23 September, to strengthen the intervention of the operation and to build capacities in the BRCS. Eleven BRC staff and volunteers attended the orientation course, which also included Red Cross Orientation; CEA, PGI and RFL sessions.

Output 2.3: Community awareness activities on livelihoods strengthening and protection are carried out with target communities and public actors.

Indicators:	Target	Actual
# people (staff and volunteers) reached by public awareness and education on sustainable livelihoods	20	Planned

Progress towards outcomes

Actions towards this outcome are planned for a future phase in the operation.

Output 2.4: 1000 households are provided with unconditional/multipurpose cash grants to address their basic needs

Indicators:	Target	Actual
# of families able to meet (Survival) Minimum Expenditure Basket needs (including food items, food-related non-food items) through multipurpose cash transfers	1,000	Planned
% of beneficiaries expressing satisfaction with cash assistance	80% ¹⁸	Planned

Progress towards outcomes

Feasibility analysis, market assessment and monitoring of local Financial Service Provider (FSP) status

- IFRC cash teams assessed cash to be feasible in New Providence Island where most Hurricane Dorian evacuees are currently located. In New Providence, markets and financial institutions continued to operate normally.
- An IFRC pre-paid card was activated and tested in ATMs across Nassau to ensure functionality and ATM liquidity.

Mobilize volunteers to conduct Cash and Voucher Assistance (CVA)

¹⁸ Focus group discussions; household surveys with at least 5% statistically accurate representative sample.

- BRCS volunteers and BRCS's call centre¹⁹ were mobilized to help follow up on beneficiary information in order to review and validate beneficiary lists from BRCS. Creole speaking volunteers have been briefed and mobilized to support with outreach and communication with Haitian beneficiaries in Nassau.

Program sensitization with key stakeholders

- The multipurpose cash grants (MPCG) program was socialized with the Ministry of Social Service who expressed support and emphasized the need to provide swift assistance.

The IFRC has also socialized the program with local grassroots community networks and local organizations who have been supporting evacuated families and have mobilized to support IFRC identify and register the target population.

Develop and implement CEA Strategy

- In preparation for the MPCG distributions, the team has developed informational products in both English and creole. Information products include but are not limited to FAQs, cardholders with key message, communication scripts among others. Discussions will be underway in the next days with cell-phone service provider carriers to explore options for SMS text messaging to provide beneficiaries with information on card withdrawal status and card re-load dates.

Establish and activate feedback and complaints response mechanism

A dedicate phone (hotline) and databased have been activated to monitor and track feedback and complaints. In the coming weeks the IFRC teams will look into options to support BRCS with the establishment of a more robust feedback and complaints response mechanism.

Conduct detailed identification of eligible beneficiaries based on pre-set-selection.

- The team continue working through with trusted partners and data sources, including the Ministry of Social Services, volunteer network, BRCS call centre, and community-based organizations and networks to identify, verify and register affected families who qualify for the cash assistance.

Registration and verification of selected beneficiaries.

- Registration of the target population is underway.



Water, sanitation and hygiene

People reached: 926 households (3,704 people)

Outcome 3: Immediate reduction in risk of waterborne and water related diseases in targeted communities

Indicators:	Target	Actual
# people reached with WASH support during the emergency phase	4,000	Planned

Output 3.1: Continuous assessment of water, sanitation, and hygiene situation is carried out in targeted communities

Indicators:	Target	Actual
# target communities identified	TBC	Planned

Progress towards outcomes

¹⁹ BRCS has temporary agreement with the National Health Insurance (NHI) agency who has loaned its call center staff and services to support Red Cross.

Conduct training for RC volunteers on carrying out water, sanitation and hygiene assessments

Onboarding of 4 new volunteers for hygiene promotion in Grand Bahama

Conduct initial assessment of the water, sanitation and hygiene situation in targeted communities

WASH field visits and assessments were conducted in East Grand Bahama between Sept 16-21. A field report was prepared and will be shared with the team. This assessment work forms part of the EA outputs for WASH.

Continuously monitor the water, sanitation and hygiene situation in targeted communities

This is an ongoing activity.

Output 3.2: Daily access to safe water which meets Sphere and WHO standards in terms of quantity and quality is provided to target population

Indicators:	Target	Actual
# of people provided with safe water during the emergency phase	8,000	134

Progress towards outcomes

Provide safe water targeted communities through bottled water distribution for a period of two weeks.

Bottled water distribution has been done to 134 people at BRCS office in Freeport (each person received either a 5 gal jug, or 4 x 1 gal jugs).

Distribute jerry cans (2 per family) and buckets with lids (1 per family) for up to 2,000 households.

571 Jerry Cans and 567 buckets distributed.

Output 3.3: Hygiene promotion activities which meet Sphere standards in terms of the identification and use of hygiene items provided to target population

Indicators:	Target	Actual
# people reached with hygiene promotion activities during emergency phase	8,000	260

Progress towards outcomes

Actions towards this outcome are planned for a future phase in the operation.

Output 3.4: Hygiene-related goods (NFIs) which meet Sphere standards and training on how to use those goods is provided to the target population

Indicators:	Target	Actual
# household provided with essential hygiene items	2,000	926

Progress towards outcomes

Distribute 6,000 hygiene kits (family), enough for 3 month(s) to 2,000 households (kit is one-month supply)

1607 Hygiene kits distributed across Abaco, Grand Bahama and New Providence.

Outcome 4: Sustainable reduction in risk of waterborne and water related diseases in targeted communities in the recovery phase

Output 4.1: Community managed water sources giving access to safe water is provided to target population

Indicators:	Target	Actual
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# of community-based wells rehabilitated	5 communities	Planned
Progress towards outcomes		
Actions towards this outcome are planned for a future phase in the operation.		
Output 4.2: Improved access to and use of adequate sanitation by the target population is provided to target population		
Indicators:	Target	Actual
# of people with access to an improved sanitation facility	1,000 people (250 households)	Planned
Progress towards outcomes		
Actions towards this outcome are planned for a future phase in the operation.		



Health

People reached: at least 1,465

Outcome 5: The immediate risks to the health of affected populations are reduced		
Indicators:	Target	Actual
# people reached by NS with services to reduce relevant health risk factors	8,000	1,465
Output 5.1: The health situation and immediate risks are assessed using agreed guidelines		
Indicators:	Target	Actual
One joint clinical and public health/PSS needs assessment completed in Abaco, Grand Bahama and New Providence	1	1
Progress towards outcomes		
Health needs assessment was conducted by Surge Health with support from Canadian Red Cross clinical surge assessment team in partnership with Bahamas Red Cross. The assessment focused on three key areas of potential health support within the operation, public health, clinical gaps and need to deploy clinical ERU assets, and psychosocial support needs and structures.		
Output 5.2: Target population is provided with rapid medical management of injuries and diseases		
Indicators:	Target	Actual
# of people trained by NS in first aid	50	0
# people assessed and transferred to appropriate care and support with EMT services at arrival in Nassau from Abaco and Grand Bahama	400	400
Progress towards outcomes		
The Bahamas Red Cross Emergency Medical Team (EMT) was contacted on 2 September and asked to assist with people being evacuated from Abaco and Grand Bahama to Odyssey Aviation, Nassau Bahamas to medical facilities for urgent care. Initially the Bahamas Red Cross personnel at Odyssey Aviation was staffed with 2 Certified Emergency nurses with training in critical care and ophthalmic nursing, and veteran and experienced Certified Emergency Medical Technicians the number of which increased with needs.		

Although other ambulances from Doctor's Hospital and Princess Margaret Hospital were operating at the same triage centre there were often shortages in ambulance services. The BRC ambulance occasionally had to take up to 5 patients to the Emergency Room at one time because there was no other ambulance available. Tour buses for patient transfer were also used due to the overwhelming flow of patients were accompanied by Bahamas Red Cross Emergency Nurses and transported to the hospital with police escort.

The Bahamas Red Cross EMT service with ambulance ceased operating on 11 September. Additional, staffing support was provided at Odyssey on 12 September. Concrete figures are not available for the number of people assessed, assisted and transported by Bahamas Red Cross EMT however, reports from the EMT team, estimated 40 to 60 people per day for 8 days. Data was also available for the first 3 days of BRCS EMT operation, captured in the table below.

Table. Transferred by BRCS EMT services from 2 to 4 September 2019

Age	Male	Female	Unknown Sex
0 to 5	1	3	1
6 to 12	0	1	0
13 to 17	0	0	0
18 to 29	4	6	0
30 to 39	12	5	0
40 to 49	9	2	0
50 to 59	5	3	0
60 to 64	2	3	0
65 to 69	0	0	0
70 to 79	2	0	1
80+	0	0	0
Unknown age	1	1	0
Sub Totals	36	24	2
Total transferred to appropriate care and support with EMT services at arrival in Nassau from Abaco and Grand Bahama from 2 to 4 September 2019			62

No first aid training has been completed to date. Complete first aid kit was provided to the First Aid and EMT Coordinator to replenish ambulance stock.

Output 5.3 Epidemic prevention and control measures carried out.

Indicators:	Target	Actual
# people reached with community-based epidemic prevention and control activities in Grand Bahama	4,000	232
# people reached with community-based epidemic prevention and control activities in Abaco	2,000	488
# people reached with health and hygiene promotion messages relevant in collective shelters	2,000	0
# volunteers trained in key messages on health and hygiene promotion	30	5
# of households provided with mosquito nets	2,000 families (8,000 mosquito nets)	116 families (232 mosquito nets)
Progress towards outcomes		

Key health and hygiene messages were developed using the Epidemic Control for Volunteers (ECV) materials. Priority diseases according to context were selected and then messages were tested with volunteers for appropriateness. Key messages in the first round of messages focused on handwashing, safe drinking water, safe food preparation, taking care in the sun (volunteers' recommendation) and seeking medical care for wound infections and rashes. The messages were aligned with Ministry of Health and PAHO messaging and shared with them and other key partners (including Samaritan's purse). Key messages were reviewed alongside the evolving public health situation in the third week of the operation. Messages were changed to focus on evolving water situation handwashing, safe drinking water, safe food preparation, protection from mosquitos and seeking earlier medical care for any illness. These messages were then developed into social media posts and posted on the Bahamas Red Cross Facebook Page with a paid boost aimed at Abaco and Grand Bahama locations. They are being translated into Creole. Five (5) staff and volunteers have been trained on these messages to support providing these messages during distributions. Messages are provided conversationally, allowing for questions and for community member to raise concerns.

Output 5.4 Psychosocial support provided to the target population

Indicators:	Target	Actual
<i># of PSS recipients receiving information on positive coping strategies and grounding techniques in New Providence.</i>	1,600	198
<i># of PSS recipients receiving information on positive coping strategies and grounding techniques in Abaco.</i>	2,000	7
<i># of PSS recipients receiving information on positive coping strategies and grounding techniques in Grand Bahama.</i>	2,000	365
<i># staff and volunteers trained in PSS</i>	60	0
<i># Child friendly places are set up and running</i>	3	1
<i># of children reached with play, recreational or educational activities (skills building).</i>	20	0

Progress towards outcomes

In the first week of following hurricane Dorian a roster of trained volunteers specializing in psychology and counselling was developed drawing on a pool of 31 nurses previously trained by BRCS in PSS (these people were trained in August 2019). These nurses were released by MOH to us to support the response in Nassau.

In Nassau support is provided by PSS trained nurses and clinical psychologists at the Bahamas Red Cross Support Cottage (at HQ). Volunteers at this cottage have also supported PSS services in shelters in Nassau when requested from MOH and in coordination with Shelter Managers. So far (as of 26 of September) this service has reached a total of 198 people (58 males, 90 females, 45 children, and 5 adolescents). PSS services have included one on one counselling, psychoeducation on coping, normative and referral to other services (those with health or mental health issues are referred to appropriate care facilities in Nassau. A small child friendly space has been set up here and a ramp for improved access is being constructed today.

In Grand Bahama PSS Surge Delegate, is providing PSS services to both Red Cross volunteers and staff as well as those affected. She has provided one to one counselling, PSS in small groups (to normalize reactions, create an understanding of these and to foster engagement between participants) and also provided information and resources to people who are reached through aid distributions. As of 26rd of September 365 people have been reached in this way. Next week she will conduct a training of Social Workers who have expressed a desire to volunteer through the Red Cross to provide PSS services. It will

use the same methodology as was used previously in August (Global PSS Reference Centre methodology).

In Abaco, PSS services have so far been limited (7 people). As people return to Abaco, we are expecting the need for more services. Psychological First Aid Training for all response staff (as per health component of Minimum Standards for Gender and Diversity in Emergencies) will be provided to all front line response staff in Abaco on the 28 of September.

The provision of these services is coordinated with the Bahamas Psychological Association, who have been appointed by MOH to coordinate the MHPSS response across the country.

Additional training of staff and volunteers in PSS will be conducted at the end of the first month of the operation in Grand Bahama using materials developed by the Global PSS Reference Centre.

Outcome 6: The medium-term risks to the health of affected populations are reduced

Indicators:	Target	Actual
<i>% of people transported from or evacuated from Abaco and Grand Bahama are assessed on arrival and transferred to appropriate clinical care or support facilities.</i>	80%	100%

Output 6.1: Gaps in medical infrastructure of the affected population filled

Indicators:	Target	Actual
<i># people trained to operate new ambulance</i>	5	0
<i># of vehicle procured</i>	1	0

Progress towards outcomes

The procurement of one ambulance for the Bahamas Red Cross is underway. See output 5.2 for information on EMT transfer.

Output 6.2: Community-based disease prevention and health promotion measures provided.

Indicators:	Target	Actual
<i># people trained in eCBHFA in Grand Bahama</i>	20	0
<i># people trained in eCBHFA in Abaco Islands</i>	20	0
<i># community action plans developed using the eCBHFA approach</i>	5	0
<i># people reached through activities developed using the eCBHFA approach</i>	8,000	0

Progress towards outcomes

Community Based Health and First Aid (eCBHFA) training is not due to begin until the recovery phase when populations in different locations have stabilized. Two staff at the Bahamas Red Cross are trained as facilitators in eCBHFA and with the support for the Caribbean Disaster Risk Management (CADRIM) reference centre and English-Speaking Caribbean and Suriname Cluster Office peer support to assist with these trainings can be supported using a pool of Caribbean Red Cross trainers.



Protection, Gender and Inclusion

People reached: *incorporated into other Areas of Focus*

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

Indicators:	Target	Actual
# people reached with PGI actions	250	Planned

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

Progress towards outcomes

Assess specific needs of the affected population based on criteria selected from the minimum standard commitments on gender and diversity

A rapid monitoring assessment (direct observation and key informant interviews) conducted in Collective Shelters: Kendal GL Isaacs Gym, Fox Hill Community Centre, All Saints Congregation Hall and Salvation Army Mackey Street (now closed)

Main findings:

- Lack of privacy a concern
- People generally feel safe but some concern about GBV, especially around showers and bathrooms
- People are very worried about the lack of information on what the future will bring

Multiple reports, from other agencies and affected population that many undocumented migrants are residing in community (hosted or in makeshift shelters). Humanitarian agencies seem to have very little access to this population and there is little available information about their needs or any assistance they are accessing

Support sectoral teams to includes measures to address vulnerabilities specific to gender and diversity factors (including people with disabilities) in their planning

Support and advocacy on measures to address vulnerabilities has been encouraged in the team and in sectoral coordination meetings.

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).

The agreed training strategy of the operation has established the inclusion a common module for all trainings on PGI and CEA awareness.

The first PGI awareness training has been included in the Livelihoods training to volunteers.

Support sectoral teams to ensure collection and analysis of sex-age and disability-disaggregated data (SADDD) see guidance in (forthcoming) revised MSCs

A PGI Surge member has been deployed and is working with the team to ensure data collection of SADDD.

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

Indicators:	Target	Actual
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# Child friendly spaces.	3	Planned
Progress towards outcomes		
<u>Conduct training on PGI minimum standards</u> Training package in preparation.		
<u>Use Minimum Standard Commitments as a guide to support sectoral teams to include measures to mitigate the risk of SGBV</u> Technical support to sectoral leads underway.		
<u>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</u> One case of unaccompanied minors was identified, and BRCS referred the case to Social Services and is monitoring the case.		
<u>Translation services for community activities</u> A Creole translation services contact list is being created to support the translation of IEC materials. Volunteers able to be interpreters are being identified and included in the processes when possible.		

 <p>Migration People reached: 99 people</p>		
Outcome 8: Communities support the needs of migrants and their families and those assisting migrants at all stages of migration (origin, transit and destination)		
Indicators:	Target	Actual
# of people reached with services for migration assistance and protection	250	Planned
Output 8.1:		
Progress towards outcomes		
Actions towards this outcome are planned for a future phase in the operation.		
Output 8.2: Family links are restored for people separated from, or without news of, their loved ones as a result of the disaster		
Indicators:	Target	Actual
# RFL cases attended	Dynamic	99
# successful RFL cases	Dynamic	24
Progress towards outcomes		
<u>Frequent visit of all shelters to offer RFL phone calls and to take tracing cases</u> With a growing number of volunteers and the ICRC Rapid Deployment pool member deployed together with RFL Data Manager, several shelters were visited in Nassau. Two unaccompanied minors were encountered in the Ranfurly Home for Children. With the help of the local BRC centre in Abaco one mother was found. Tracing efforts for the other minor is still ongoing.		
<u>Communicate families through the Call Centre, including regular call backs</u> The Call Centre has been up and running but has not received many family tracing cases (only 1). It is not a call centre exclusive for RFL but for livelihood, cash and CEA, as a general community engagement tool. However, Haitians from affected areas do not reach out to the Call Centre. Further outreach to these communities needs to work on.		

Work with the Member Groups on Abaco and Grand Bahama to increase the possibility to search the remaining population in the affected area

After the contact was re-established with the Centres of the Bahamas Red Cross through the donation of telephones, family tracing cases were shared with the Abaco Centre. One volunteer was trained to work on RFL in the Marsh Harbour BRC Centres.

Interaction with Department of Social Services to check names in shelter registers

A meeting was held with the director of shelters of the Department of Social Services to discuss the possibility to cross-check names of tracing cases against their shelter lists.

Continue to visit the shelters to speak with the occupants and also disseminate the RFL work to the general population

So far, volunteers and staff from the BRCS have assisted in reconnecting 24 families through phone calls and opening of tracing request. From the beginning of the operation, 73 people were registered for individual follow-up. The RFL team participated on Three radio and TV programs to promote the Red Cross and the Restoring Family Links services of the BRCS .

Work with other partners to create a National RFL Network adapted to the specific Bahamian context.

The Bahamas Red Cross does follow up on family tracing cases through its Bahamian contacts across the islands, a system typical and adapted to the context.

Evaluation of the need to bring in Forensic expertise in an effort to increase identification of mortal remains

Two forensic experts were deployed in to evaluate a potential advisory role to the families and authorities regarding the identification of human remains.

Train Volunteers in RFL Activities and referrals to other services such are (PSS)

Ten new RFL volunteers were trained on emergency RFL activities, to interview and take cases of family tracing

Creation of Field Teams to visit shelters independently

One team in Nassau and One team in Abaco are independently able to follow up case at Shelters in coordination with the HQ BRCS and ICRC RFL team

Organization of data management to centralize the information gather of missing people, and to issue proper follow-up

All Tracing cases collected during the first phase of the Emergency were organized, cleaned and input into the RFL Tracing cases logbook. A workflow and procedure were developed for the BRCS team to ensure cases are followed up and families contacted regularly. A new Tracing Form was created and translated into Creole. The statistics were re-organized.

Support to National Society with experts from ICRC (1 RFL Delegate, 1 RFL Data Manager, 1 Forensic Specialists)

The team to support RFL activities of the Bahamas Red Cross now is composed of 1 RFL delegate, 1 RFL Data manager, two forensics experts.



Disaster Risk Reduction

People reached: *planned*

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

Indicators:	Target	Actual
# of people reached through RCRC programmes for DRR and community resilience (excluding public awareness and education campaigns)	1,000	Planned

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

Indicators:	Target	Actual
# people reached with public awareness and education campaigns using harmonized messages to reduce, mitigate and respond to identified risks	250	Planned

Progress towards outcomes

Planned

Outcome 10: Communities in high risk areas are prepared for and able to respond to disaster

Indicators:	Target	Actual
# Communities to develop longer terms risk reduction plans to address long – terms adaption needs and unexpected climate related risk		

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

Indicators:	Target	Actual
# people reached by climate change mitigation and environmental sustainability awareness raising campaign		

Progress towards outcomes

Actions towards this outcome are planned for a future phase in the operation.

Strengthen National Society

Outcome S1.1: National Society capacity building and organizational development objectives are facilitated to ensure that National Societies have the necessary legal, ethical and financial foundations, systems and structures, competences and capacities to plan and perform.

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

Progress towards outcomes

Ensure that volunteers are insured

500 hundred volunteers were insured under the operation.

Provide psychosocial support to volunteers

The PSS centre is providing support to people affected and volunteers that have been affected by the disaster. The PSS Surge team deployed is also providing support to volunteers and staff deployed.

Ensure volunteers are properly trained (briefing on volunteers' roles and the risks they face), volunteers' safety and wellbeing, awareness of their rights and responsibilities

New volunteers have joined the BRCS to support the relief actions and support their communities. Briefings are being provided by the BRCS to volunteers and staff and the operation has decided that any technical training offered will have the following structure to reinforce the Red Cross Movement values:

- Red Cross orientation
- Crosscutting themes as CEA and PGI (already being included and coordinated with the Surge focal points).

Ensure volunteers' engagement in decision-making processes of respective projects they implement

Actions are being implemented through the support of dedicated BRCS volunteers in New Providence, Grand Bahamas and Abaco. The strategy and activities are being coordinated by the BRCS on a daily basis with the operation team.

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

Progress towards outcomes

Hiring of NS personnel

Work is underway to hire DM Officer, PMER, Finance, IM, Communications Officer, Field Coordinator Abaco, Field Coordinator Grand Bahama, Office Administrator for Abaco, Office Administrator for Grand Bahama, Communications and RM advisor, RM Officer, two Admin Assistants, Executive Officer for Humanitarian Diplomacy, Fleet Officer, Warehouse officer and 15 daily workers.

A Human Resources plan is being developed for the operation to insure proper handover and long-term support to the BRCS and the intervention strategy of the operation.

Forklift for BRCS

A forklift has been rented to support the transportation of items in the BRCS Warehouse.

Setting up a Warehouse in Nassau, Abaco and Grand Bahama

IFRC Logistics deployed two mobile storage units, one in Grand Bahamas and one in Abaco. Also, in Nassau rented a warehouse of 1,000 m².

Support the NS to review logistics processes and procedures to manages their activities and assets

IFRC is supporting the BRCS operation in Abaco, Grand Bahamas and Nassau with procurement, transport, warehouse management, and import goods. Also strengthen BRC through trainings and joint activities.

To assess and improve the NS fleet according to the needs & setup a proper fleet management system

Support has been provided to improve the assess and improve the fleet management for the operation.

Warehouse Tents

One warehouse tent was sent to Abaco and one warehouse tent was sent to Grand Bahama for the setup of two hubs.

Output S1.1.7: NS capacity to support community-based disaster risk reduction, response and preparedness is strengthened

Progress towards outcomes

Actions towards this outcome are planned for a future phase in the operation.

International Disaster Response

Outcome S2.1: Effective and coordinated international disaster response is ensured

Output S2.1.1: Effective response preparedness and NS surge capacity mechanism is maintained

Progress towards outcomes

Initial operational start up support implemented by IFRC for the host national society and participating national societies and other common services such as operations centre and basecamp costs.

Surge Deployment: Operations Manager, Admin, Livelihoods, Finance, PMER, Shelter, Communications, WASH, PSS, CASH, IM, Logistics, PGI

Output S2.1.3: NS compliance with Principles and Rules for Humanitarian Assistance is improved

Progress towards outcomes

Assessment of communication channels for communicating key messages.

Rapid Assessment of which channels of communication displaced people use now and before the Hurricane:

- Interviews with Shelter Management in Kendal Isaac Gymnasium, and shelter management and pastor from Calvary Haitian Church in Centerville
- Interviews with community members
- Interviews with displaced people living with friend and families at the Red Cross distribution

Findings:

- Most people get information by word of mouth from families and friends, and through WhatsApp and Facebook.
- Radio is a preferred media: Radio ZNS and 104.5, Radio Abago and Radio Cable.
- Preferred TV channels widely used seems to be Cable Bahama and NZNS TV station.
- The impression is that pastors are often community leaders. In urban communities there seems not to be a clear community structure, but some groups are linked to their church and employers
- Pastor Silbert Mills from Abaco was identified as a key informant by a number of people interviewed. He is also the owner of Radio Abaco and the TV station BCN (Bahama Christian network)

Feedback mechanism planned and handed to BRCS for approval. The suggestion includes:

- Information desk at BRCS and a larger shelter (if approved by Department of Social Services)
- Cash hot line with IFRC, for practical questions
- Referral line to IFRC PGI surge for sensitive issues
- FAQs and flyer developed in support of feed-back mechanism

Development of rumours and misinformation logbook.

A rumours logbook is established, a reminder to use it is planned

Training of Staff and Volunteers general induction, CEA and Sphere standards

- A 2.5 hours volunteer induction training of 9 volunteers was undertaken on 23 September. The training included: Red Cross; principles and the emblem; Bahamas Red Cross; Community engagement and good community communication; and protection, gender and inclusion. The training also introduces volunteers to RFL and Livelihood.
- Induction training on Red Cross principles, BRCS, CEA and PGI uploaded on teams as a standard package. HR will include safety for volunteers.

Feed-back mechanism planned, awaiting final approval of BRCS. The suggestion includes:

- Information desk at BRCS and a larger shelter (if approved by Department of Social Services)
- Cash hot line with IFRC, for practical questions

- Referral line to IFRC PGI surge for sensitive issues

Communication Campaign on RCRC Work

The second rotation of extended communication capability is currently underway. A third rotation is being planned that should identify, together with the National Society, a communications focal point and define the medium-term communication strategy.

Both the field team and the regional office continue to respond to requests for media that have decreased in relation to the first days of the emergency and continue working on the content generation for social media.

Output S2.2.5: Shared services in areas such as IT, logistics and information management are provided

Progress towards outcomes

Actions towards this outcome are planned for a future phase in the operation.

Output S2.2.6: Coordinating role of the IFRC within the international humanitarian system is enhanced

Progress towards outcomes

Actions towards this outcome are planned for a future phase in the operation.

Influence others as leading strategic partner

Outcome S3.1: The IFRC secretariat, together with National Societies uses their unique position to influence decisions at local, national and international levels that affect the most vulnerable.

Output 3.1: IFRC and NS are visible, trusted and effective advocates on humanitarian issues

Progress towards outcomes

High level monitoring visit

President of the governing board of IFRC, Francesco Rocca (Italian RC) and vice-president Miguel Villaroel (Venezuela RC) made a visit to the Bahamas, visited collective shelters in Nassau and visited the storm affected communities of Abaco on 19 to 20 September 2019.

Output 3.1: IFRC and NS are visible, trusted and effective advocates on humanitarian issues

Progress towards outcomes

Actions towards this outcome are planned for a future phase in the operation.

Outcome S3.2: The programmatic reach of the National Societies and the IFRC is expanded.

Output S3.2.1: Resource generation and related accountability models are developed and improved

Progress towards outcomes

Actions towards this outcome are planned for a future phase in the operation.

Effective, credible and accountable IFRC

Outcome S4.1: The IFRC enhances its effectiveness, credibility and accountability

Output S4.1.3: Financial resources are safeguarded; quality financial and administrative support is provided contributing to efficient operations and ensuring effective use of assets; timely quality financial reporting to stakeholders

Progress towards outcomes

Actions towards this outcome are planned for a future phase in the operation.

Reference documents

Click here for:

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

Contact information

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

The Bahamas Red Cross Society:

- Caroline Turnquest, Director General, phone: +1 242-424-4201 email: DirectorGeneral@bahamasredcross.org;
- Alicia Pinder, Disaster Manager; phone: +1 242-535-0073; email: lpinder@bahamasredcross.com

In the IFRC Americas Regional Office:

- Stephen McAndrew, Deputy Director and (Acting) Head of the Disaster and Crisis Preparedness, Response and Recovery (DCPRR) department; email: stephen.mcandrew@ifrc.org
- Felipe del Cid, Continental Operations Coordinator; phone: +507 317 3050; email: felipe.delcid@ifrc.org
- Diana Medina, Communications Unit Coordinator for the Americas; email: diana.medina@ifrc.org

For IFRC Resource Mobilization and Pledges support:

- Marion Andrivet, Emergency Appeals and Marketing Senior Officer; email: marion.andrivet@ifrc.org

For In-Kind donations and Mobilization table support:

- Head of Logistics – Mauricio Bustamante, mauricio.bustamante@ifrc.org, cel: +507 6677-9675
- Logistics Manager - Stephany Murillo, stephany.murillo@ifrc.org, cel: +507 6679-9674

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

- Paula Martes; Planning, Monitoring, Evaluation and Reporting (PMER) Coordinator; email: paula.martes@ifrc.org

In IFRC Geneva:

- Antoine Belair, Operations Coordination Senior Officer for Disaster and Crisis (Prevention, Response and Recovery); email: antoine.belair@ifrc.org

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.**