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Operations Update no. 1

Albania: Earthquake

 International Federation
of Red Cross and Red Crescent Societies

Emergency appeal n° MDRAL008	GLIDE n° EQ-2019-000157-ALB
Operation update n° 1; Date of issue: 30 December 2019	Timeframe covered by this update: 29 November 2019 – 20 December 2019
Operation start date: 29 November 2019	Operation timeframe: 12 months, ending 29 November 2020
Funding requirements (CHF): 3 million	DREF amount initially allocated: CHF 250,000
N° of people being assisted: 10,000 people (2,000 households) directly, and up to 50,000 people through community-based activities	
Red Cross Red Crescent Movement partners currently actively involved in the operation: The Albanian Red Cross (ARC) has received support from the International Federation of Red Cross and Red Crescent Societies (IFRC), the International Committee of the Red Cross (ICRC) as well as National Societies in the region and beyond, including Austrian Red Cross; British Red Cross; Bulgarian Red Cross; Croatian Red Cross; Danish Red Cross; Hellenic Red Cross; German Red Cross; Italian Red Cross; Red Cross of Montenegro; Red Cross Society of The Republic of North Macedonia; Red Cross of Serbia; Slovenian Red Cross; The Netherlands Red Cross; Turkish Red Crescent and Red Crescent Society of United Arab Emirates.	
Other partner organizations actively involved in the operation: The Government of Albania (GoA) activated the European Union Civil Protection Mechanism (UCPM) on 26 November. The Urban Search and Rescue (USAR) teams from Greece, Italy and Romania were deployed to Albania, with the USAR operation closing on 29 November. An EU Civil Protection team, including the United Nations Disaster Assessment and Coordination (UNDAC) members, deployed to Albania on 28 November with presence until 20 December 2019; UNDAC has extended presence until January 2020. The GoA accepted the UCPM-coordinated in-kind assistance from 10 UCPM member states and bilateral assistance from another 9 member states. Damage assessment teams from several countries cooperate with Albanian experts on the ground. Active agencies include Swiss Development Cooperation/Swiss Humanitarian Aid, USAID; UN Development Programme (UNDP), UN Refugee Agency (UNHCR), UN Children's Fund (UNICEF), UN Women, WHO; Caritas Europe, Save the Children (SC), World Vision International (WVI), national and local NGOs.	

A. SITUATION ANALYSIS

Description of the disaster

Since the earthquake struck on 26 November, resulting in 51 deaths and up to 750 people injured, the Albanian Red Cross have been continuing to respond to the needs of the people affected. Aftershocks have decreased in magnitude but are still ongoing. As of 14 December, up to 12,181 people were reported to be living in temporary accommodation (excluding those hosted by relatives or friends): 7,383 in tents (a majority of them in spotted tents in rural areas, close to their individual houses), 4,149 in hotels, 395 in community centres and 254 in gymnasiums. As of 17 December, all tent camps have been closed. The most affected administrative regions are Durrës, Krujë, Tiranë and Lezhë. A structural damage assessment by Albanian experts, supported by international capacities, is expected to be completed by 31 December.

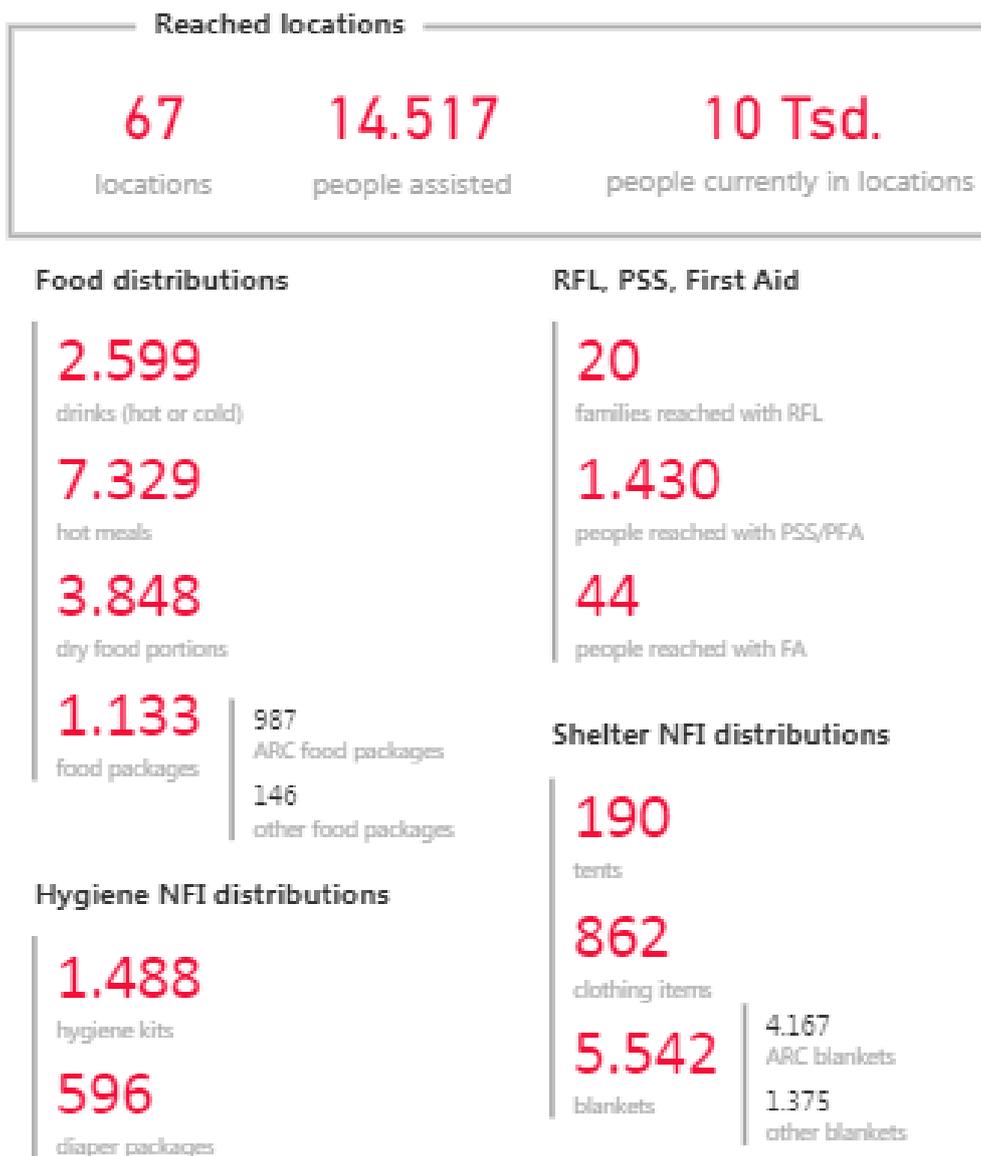
Summary of current response

Overview of Host National Society

Albanian Red Cross (ARC) was established in 1921 and is active in community-based disaster awareness, preparedness and response activities, with a focus on first aid, assessments, community outreach, health and hygiene promotion activities.

Volunteers from the ARC arrived immediately to the disaster site after the earthquake to provide support to the affected population. The ARC has been responding in the areas of First Aid, food support, psychosocial support, water and sanitation, shelter (household items) and Restoring Family Links (RFL).

The National Society is currently continuing its response with a total of 350 volunteers and staff, with a focus on relief distributions (shelter items, food, hygiene material) and psychosocial support (PSS). Primary regions of activity are the prefectures of Durrës (Durrës city, Shijak), Tirana (Vorë), Lezhë (Laç, Shëngjin), and Kruja (Thumane). As of 19 December, ARC is actively present in 58 different locations spread all over the affected area (9 previously active locations have been closed). Ten branches are actively involved in response operations. ARC is distributing items from its own stock and incoming in-kind assistance.¹ ARC response as of 19 December is indicated in the figure below:



ARC has also been providing support in temporary camps set up in affected areas, in collective shelters such as gyms and community centres as well as hotels where people were evacuated to. In addition, ARC volunteers are also reaching out to people who did not leave their damaged houses or stay in tents close to their property, especially in rural areas.

Overview of Red Cross Red Crescent Movement in country

The IFRC, via its Regional Office for Europe (ROE) based in Budapest, has been in regular contact with the Albanian Red Cross, both at the senior management and operational level, since the start of the disaster and immediately deployed health, communications and planning, monitoring, evaluations and reporting (PMER) specialists to support the National Society response. The Deputy Regional Director a.i. visited also the ARC on 16-18 December, participated

¹ Updated figures are provided on the response dashboard on IFRC GO: <https://go.ifrc.org/emergencies/3887#additional-info>

in the PSS training and met the representatives of the Ministry of Foreign Affairs and Ministry of Justice, USAID, and other international organisations. The IFRC has a valid diplomatic status agreement in the country since 1994, but was not present in-country in recent years, prior to the earthquake since under normal circumstances the ARC is supported through the Budapest based Country Cluster for Central and South-Eastern Europe with regular communication and visits

ICRC is supporting ARC directly in RFL activities from its regional office based in Belgrade, and IFRC maintains close contact with the ICRC's office in Belgrade. In addition, multiple technical specialists from IFRC and partner national societies, including Austrian Red Cross, British Red Cross, Croatian Red Cross, Danish Red Cross, German Red Cross and the Netherlands Red Cross were deployed or are supporting remotely as surge support to ARC².

Bilateral Assistance (in-kind):

- **Croatian Red Cross** has provided a large truckload of humanitarian goods, including blankets and quilts.
- **Hellenic Red Cross** has assisted with three shipments of various relief goods (10 trucks).
- **Italian Red Cross** (deployment with Italian CP) ended their mission, but is considering a medium-term bilateral support in PSS capacity building.
- **Red Cross of The Republic of North Macedonia** provided miscellaneous household items, food and hygiene parcels.
- **Montenegro Red Cross** assisted with relief goods (clothing).
- **Turkish Red Crescent** provided and distributed a variety of humanitarian goods, making some available to ARC for use in distributions, gradually demobilizing their in-country personnel since week 2 after the earthquake.
- **Red Cross Society of United Arab Emirates** has provided tents and other relief goods to Albanian Government authority requests.

Overview of non-RCRC actors in country

The Albanian government activated the European Union civil protection mechanism (UCPM) on 26 November. The Urban Search and Rescue (USAR) teams from Greece, Italy and Romania deployed to Albania, with USAR operation closing on 29 November. An EU Civil Protection (EUCP) team, including two United Nations Disaster Assessment and Coordination (UNDAC) members, were deployed to Albania on 28 November with an expected presence until 20 December 2019. The GoA accepted the UCPM-coordinated in-kind assistance from Austria, Belgium, Croatia, Germany, Greece, Italy, Romania, Slovak Republic, Sweden and the United Kingdom and bilateral assistance from Croatia, France, Israel, Montenegro, North Macedonia, Serbia, Switzerland and Turkey and/or in kind assistance on bilateral basis.

Albanian authorities are in charge of coordination, with a crisis response and relief structure led by the Minister of Agriculture and Rural Development as the Government Special Envoy, and several Deputy Ministers in charge of specific areas of response (e.g. the Deputy Minister of Justice in charge of volunteer / NGO / humanitarian actor coordination). Some sectoral coordination mechanisms have been established with limited capacities, with efforts made to facilitate coordination with the joint EUCP/UNDAC team, international and national agencies on the ground. Damage assessments led by the GoA, supported by international experts, are ongoing. A GoA crisis management structure is in place and led by a special envoy for crisis response and relief, covering affected prefectures on different thematic/technical functions including accommodation, humanitarian aid coordination, etc. In the second week after the disaster, the government has started to support families with "rent bonus" program, supplementing with monthly cash for rent assistance.

A number of national and local NGOs have been active on the ground, many of these with limited capacities and working in the initial phase of response only. International actors present include a joint UCPM/UNDAC, damage assessment teams (several countries), Swiss Development Cooperation/Swiss Humanitarian Aid, USAID, UNDP, UNHCR, UNICEF, UN Women, WHO, Caritas Europe, Save the Children, and World Vision International. UNDAC was requested by the GoA to assist the coordination of NGOs/INGOs and UN.

At present, several coordination mechanisms / meetings with the participation of government representatives and respective engaged organizations have been created or discussed. ARC and IFRC are actively participating in the established coordination mechanisms as outlined below, co-chairing the Cash working group. A shelter / NFI coordination group is currently being discussed (and potentially co-chaired by ARC/IFRC), yet not established. UNICEF has initialized activation of the education working group, but still not established.

Health and psychosocial support working group has been established and is chaired by the Ministry of Health and Social Protection. The working group is mainly focused on providing psychosocial support and protection of children and coordination of systematic response in terms of coverage of all affected areas. With exception of the Order of psychologists, there are no organizations providing psychosocial support to adults and specific vulnerable groups (e.g. older people). WHO will deploy a mental health delegate to support the MoHSP in coordination and implementation of psychosocial support activities. Organizations active in the working group are as follows: ARC, UNICEF, Save the Children, Terre des Hommes, World Vision International, Albanian Order of Psychologists and some local NGOs.

² For the full list of profiles, please refer to HR section on page 11 below.

Needs analysis and scenario planning

Needs analysis

Current urgent needs, based on data shared by the GoA, own assessments and observations by ARC branches, and confirmed by other organizations present in country, are in the areas of shelter and shelter-related basic household items, food and PSS. These may change as the situation develops.

For a detailed analysis on needs, please refer to the EPoA issued [here](#).

There was a delay in the collection on demographic data about the people affected by the EQ which is expected from the GoA. However, assessments have recently gained momentum, as the UNDP supports the GoA in this assessment, which should be completed by 23 December. IFRC has asked for permission to access the data source, which shall facilitate demographic analysis.

Scenario	Humanitarian consequence	Potential response
Displacement figures rising up to 30,000 persons, with an initial variety of temporary shelter modalities, gradually shifting towards fixed shelters. (likely)	Diverse assistance priorities for target population in different shelter setups.	Diversified in-kind response based on types of shelter and according needs (e.g. food parcels [host families] and hot meals [collective centres]). Timely shift to CVA assistance.
Prolonged poor shelter conditions (tents, collective centres) (probable)	Adverse impact on health, increased need for shelter assistance with a focus on winterization.	Operational shift towards shelter assistance and health programming, continuation of CVA approach unrestricted (with an expectation of increased use for rents).
Delayed recovery process (probable)	Prolonged need for humanitarian assistance (shelter, livelihoods)	Extension of unrestricted CVA programming.

Operation Risk Assessment

One of the key risks identified include prolonged need for in-kind and/or cash or voucher assistance depending on possible delays in the government-led recovery process. Worsening weather conditions may exacerbate the situation for people in poor shelter conditions (i.e. tents without heating system). To mitigate this, ARC, supported by IFRC, have plans to continue in-kind assistance, replenishing ARC's stocks utilized in this response while continuously assessing the duration of CVA programming before operational implementation. ARC and IFRC are advocating with the authorities to timely implement shelter commitments towards non-tented temporary shelters.

[Please click here](#) for the details operations risk assessment, outlined in the EPoA.

B. OPERATIONAL STRATEGY

Proposed strategy

This emergency appeal operation aims to meet the immediate needs and support the early recovery of the most vulnerable population affected by the earthquake in Albania (with focus on the population of the most affected prefectures of Durrës (Durrës city, Shijak), Tirana (Vorë), Lezhë (Laç, Shëngjin), and Kruja (Thumane).

Based on preliminary assessment and information collected from partners and authorities, targeted groups include people whose homes were damaged (collapsed, severely damaged or lightly damaged) and are vulnerable due to having lost a family member, low level of income, and household composition (disability, single female heads of household, older people, pregnant women).

A total of 10,000 people will be supported with health/PSS, WASH (hygiene kits), livelihoods and basic needs (unrestricted multi-purpose cash grants), and shelter (household items) activities. An estimated 50,000 people are planned to be reached with community based DRR, PSS and health activities through awareness programming. The operation thereby takes an integrated approach for activities in the sectors of WASH, health/PSS and PGI (including RFL) through multifunctional mobile teams.

Out of activities planned under the appeal, food parcel, household item, and hygiene item distributions are ongoing in several locations (see related sections below). Volunteers are providing PSS and recreational activities for children and older people in several locations through outreach activities. For details, please refer to Areas of Focus below.

IFRC is supporting ARC in responding to the needs of affected communities through the Areas of Focus identified, complementing the capacity and experience of ARC in this comparatively large-scale disaster by national standards. IFRC is shoring up its technical support through surge deployments where ARC has limited experience in or have identified as areas to further develop and improve, such as CVA and psychosocial support. The EPoA outlines actions that not only seek to support the communities affected, but also strengthen the National Society's capacity and preparedness for future disaster response.

ARC branches are collecting information through household and community level assessments, thereby complementing the currently limited availability of demographic, damage, and need assessment data.

C. DETAILED OPERATIONAL PLAN

 <p>Shelter People reached: 5,542 Male: 2,494³ Female: 3,048</p>		
Outcome 1: Communities in disaster and crisis affected areas restore and strengthen their safety, well-being and longer-term recovery through shelter and settlement solutions		
Indicators:	Target	Actual
# households provided with emergency shelter and settlement assistance	2,000	987
Output 1.1: Shelter and settlements and basic household items assistance is provided to the affected families.		
Indicators:	Target	Actual
# of people reached with household items	10,000	5,542
Progress towards outcomes		
<p>Since the beginning of response activities, ARC has distributed 190 tents provided by PNSs, 862 clothing items from various sources, and 5,542 blankets (4,167 through RCRC partners, 1,375 provided through national donations). 100% of requested MobTable items have been mobilized (apart from mattresses being re-prioritized as non-immediate items for distributions).</p> <p>The distribution of household items has been carried out based on lists of affected and vulnerable people received from municipalities, and on rapid assessment conducted on local level by ARC branches.</p>		

 <p>Livelihoods and basic needs People reached: 5,665 Male: 2,549 Female: 3,112</p>		
Outcome 1: Communities, especially in disaster and crisis affected areas, restore and strengthen their livelihoods		
Indicators:	Target	Actual
# of people reached with food assistance or cash for basic needs	10,000	5,665
Output 1.2: Basic needs assistance for livelihoods security including food is provided to the most affected communities		
Indicators:	Target	Actual
# of people reached with food assistance for basic needs	10,000	5,665
Output 1.5: Households are provided with unrestricted/multipurpose cash grants to address their basic needs		
Indicators:	Target	Actual

³ Sex disaggregation numbers in all sectors are currently based on estimates, accuracy of people reached data expected to improve with IM support provided remotely and on the ground.

# of households supported with cash or vouchers for basic needs	700	0
Progress towards outcomes		
<p>Since the disaster, ARC has distributed 2,600 hot or cold drinks, 7,329 hot meal and 3,848 dry food portions from own stocks and donations. 987 standard (family) food parcels were distributed (40.5kg of food items each) Standard food parcels are procured from the local market.</p> <p>The distribution of food items has been carried out based on lists of affected and vulnerable people received from municipalities, and based on rapid assessment conducted on local level by ARC branches.</p> <p>Preparation of the CVA intervention is ongoing with assessment of finance supplier, identification of modalities for cash transfer mechanism and development of a plan of action. IFRC/ARC is co-chairing the Cash Working Group with UNICEF.</p>		

	<p>Health</p> <p>People reached: 1,430</p> <p>Male: 640</p> <p>Female: 790</p>	
Outcome 1: The immediate risks to the health of affected populations are reduced		
Output 1.1: The health situation and immediate risks are assessed using agreed guidelines		
Indicators:	Target	Actual
# of assessments conducted	4	0
Outcome 2: The immediate risks to the health of the affected populations are reduced through improved access to medical treatment		
Indicators:	Target	Actual
# of people reached with community-based disease prevention and health promotion programming	10,000	0
Output 2.1: Improved access to health care and emergency health care for the targeted population and communities.		
Indicators:	Target	Actual
# of people reached with home visits	2,000	0
# of people trained in FA/CBHFA	140	0
Outcome 6: The psychosocial impacts of the emergency are lessened		
Indicators:	Target	Actual
# of people reached with psychosocial support	10,000	1,430
Output 6.1: Psychosocial support provided to the target population as well as to RCRC volunteers and staff		
Indicators:	Target	Actual
# of RC staff and volunteers reached with PSS sessions	140	53
<p>Parts of the affected people live in tents, close to their houses / premises; most of them attached to their livelihood and stocks, and therefore not wanting to leave their area. According to field reports, many of them are older people with a variety of needs to be addressed. A majority of organizations is focussing on hotels, leaving this specific population at risk with low levels of support. ARC has been actively working on providing support via mobile teams to reach and provide psychosocial and practical support to them and hence enabling access to those most vulnerable. In addition, PSS has been provided through recreational activities with children and PSS sessions with older people. In the first month of program implementation 3 one-day basic PFA training have been organized for staff and volunteers (who should be part of mobile teams) from 5 RC branches involved in the operation: Durrës, Kruja, Lezhe, Shkoder and Tirana. A total 53 staff and volunteers participated on training for mobile teams.</p>		



Photo: training of the ARC Tirana branch staff & volunteers



Water, sanitation and hygiene

People reached: 7,440

Male: 3,348

Female: 4,092

Outcome 1: Immediate reduction in risk of waterborne and water related diseases in targeted communities

Indicators:	Target	Actual
# households reached with key messages to promote personal and community hygiene	10,000	0
Output 1.4: Hygiene promotion activities which meet Sphere standards in terms of the identification and use of hygiene items provided to target population		
Indicators:	Target	Actual
# of people reached by hygiene promotion activities	10,000	0
Output 1.5: 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
# of people provided with hygiene kits	10,000	7,440

The WASH needs in temporary camps (regularly set up utilizing the WASH installations of public infrastructure, such as schools) are widely met. The number of persons in camps is decreasing. With a broader view, persons sheltering in spotted tents in rural areas (on/close to their premises) report on insufficient water for all household needs (38% of HHs interviewed in a WV survey); authorities are responding through water distributions. Priority needs described are basic hygiene items (23%) and water storage containers (18%). ARC is responding with hygiene kits, female

hygiene kits and baby hygiene kits. Hygiene Promotion activities targeting these rural areas are planned. The potential need to increase shelter (household items to support households for their winterization) - and WASH-related in-kind assistance is currently being assessed.

Based on the focus group discussion with women from affected community, a women hygiene kit (menstrual hygiene) has been defined. With support of German Red Cross, 2,000 parcels have been procured and will be distributed to women during the upcoming month. Same goes for 500 baby hygiene kits (in various sizes).

Since the beginning of the operation, ARC distributed 1,488 family hygiene kits. In the beginning of the operation, the provision of hygiene items has been focusing on people in hotels, social centres/gymnasiums and in tents. Procurement of additional family, women and baby hygiene kits is ongoing, with expected arrival of all items in last week of December.



Protection, Gender and Inclusion

People reached: 380

Male: 171

Female: 209

Outcome 1: Communities become more peaceful, safe and inclusive through meeting the needs and rights of the most vulnerable.

Indicators:	Target	Actual
# of people reached with PGI services	1,000	380

Output 1.1: : Programmes and operations ensure safe and equitable provision of basic services, considering different needs based on gender and other diversity factors.

Indicators:	Target	Actual
# of people trained in RFL	5	53

Progress towards outcomes

Since the beginning of the operation, ARC is providing RFI services to connect and maintain communication between family members in and outside of the affected areas. Volunteers were present on evacuation points, and a hotline was set up in the HQ. A total of 20 families (approx. 80 people) have been supported with RFL so far, and approximately 300 people have been supported with information about the health status and whereabouts of their relatives in hospitals.

PGI components are integral part of all PSS trainings, and 'RFL in emergencies' has been integrated into the agenda of PSS trainings as well (see Health section for details on completed trainings).



Disaster Risk Reduction

People reached: 0

Male: 0

Female: 0

Outcome 1: Communities in high risk areas are prepared for and able to respond to disaster

Indicators:	Target	Actual
# people reached with public awareness and education campaigns using harmonized messages to reduce, mitigate and respond to identified risks	50,000	0

Output 1.1: Communities take active steps to strengthen their preparedness for timely and effective response to disasters.

Indicators:	Target	Actual
# of people reached through DRR activities in communities and schools	50,000	0

Progress towards outcomes

A revision of DRR activities, widely foreseen in the longer run of the operation, is considered in an upcoming revision of the EA (potentially in January), aligned to wider DRR programming in country as part of the recovery efforts.

The establishment of an Emergency Operations Centre (EOC) is foreseen within the EA timeframe, complementing an existing “Building communication and coordination capacities for efficient preparedness and response in South Eastern Europe”. The EA supports the establishment of the EOC with space and equipment.

Strengthen National Society

Outcome 1: Strengthen National Society capacities and ensure sustained and relevant Red Cross and Red Crescent presence in communities

Indicators:	Target	Actual
NS contingency plan has been updated and revised	1	0

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

Indicators:	Target	Actual
# of volunteers benefitting from learning and educational activities throughout the operation	200	53

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

Indicators:	Target	Actual
An EOC is in place by the end of the appeal implementation	1	0

Progress towards outcomes

PSS trainings (with RFL and PGI elements integrated) for volunteers have started (see Health section), with three trainings conducted in the reporting period jointly by the ARC PSS focal point and the Surge PSS delegate. Remote SIMS support has been complemented with on-the-job excel training, and establishment of basic data management tools by IFRC ROE PMER.

Further improvements of data management and mobile data collection continue with the support of the Surge CVA trainee (also ERU ITT member), until the arrival of the IM surge delegate in early January. Surge Logistics and Relief delegates are working closely with NS counterparts to ensure effective procurement and warehousing. The IFRC via its Regional Office for Europe (IFRC ROE) based in Budapest has been in regular contact with the Albanian Red Cross since the start of the disaster and deployed health, communications and planning, monitoring, evaluations and reporting (PMER) specialists to support the National Society response.

International Disaster Response

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

Indicators:	Target	Actual
% of coordination meetings where IFRC is present along with ARC representative	100	100

Output 2.1.1:: Effective and respected surge capacity mechanism is maintained.

Indicators:	Target	Actual
% of Surge requests with positive response	80	100

Output 2.1.3: NS compliance with Principles and Rules for Humanitarian Assistance is improved

Indicators:	Target	Actual
Community feedback mechanism is established	1	0

Output S2.1.4: Supply chain and fleet services meet recognized quality and accountability standards

Indicators:	Target	Actual
% of vehicles properly serviced and maintained by the end of the operation	100	N/A

Progress towards outcomes

ARC and IFRC representatives regularly attend coordination meetings since the beginning of the operation. ARC and IFRC are actively participating in the established coordination mechanisms in the areas of Health, PSS, , and general inter-agency coordination,, co-chairing the Cash WG, and will be part of an upcoming DRR in education

working group. A shelter / NFI coordination group is currently being discussed with relevant actors, yet not established.

In the reporting period all surge requests received positive response, with a total of six delegates (Operations Manager, Logistics, Relief / Logistics, CVA, CVA trainee and PSS / Health), and remote SIMS, supporting the NS. The current Operation Manager and PSS / health have extended their missions until the end of January.

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.

Indicators:	Target	Actual
# of ARC staff trained in Comms	1	0

Output S3.1.1: IFRC and NS are visible, trusted and effective advocates on humanitarian issues

Indicators:	Target	Actual
# of international press releases	5	3

Output S3.1.2: IFRC produces high-quality research and evaluation that informs advocacy, resource mobilization and programming.

Indicators:	Target	Actual
# of final evaluation	1	0

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

Indicators:	Target	Actual
# of ROE PMER missions	3	2

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

Indicators:	Target	Actual
# of NS staff trained in PMER	5	3

Progress towards outcomes

Technical assistance by IFRC ROE has been provided by the deployment of Communications Manager in the first two weeks of the disaster.

IFRC ROE PMER provided support in two missions in the drafting of the Emergency Appeal and the EPoA and provided PMER briefing to 3 staff of ARC.

Effective, credible and accountable IFRC

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

Output S4.1.2: IFRC staff shows good level of engagement and performance

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

Indicators:	Target	Actual
# of NS person dealing with finances	2	2
# of audit carried out	2	0

Output S4.1.4: Staff security is prioritised in all IFRC activities

Progress towards outcomes

Technical assistance from IFRC ROE was provided since the beginning of the implementation of the emergency appeal on operational management, information management, communications, PSS, health, planning, monitoring, evaluation and reporting, logistics and procurement during technical staffs' mission to country. Two staff has been appointed in ARC to fulfil the HR and finance needs of the operation.

Reference documents



Click here for:

- [Albania - Earthquake \(MDRAL008\) - Emergency Appeal](#)
- [Albania - Earthquake \(MDRAL008\) - Emergency Plan of Action](#)

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How we work

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

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



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



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



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