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# Emergency Appeal Operations Update

## Ecuador: Earthquake



<b>Operations Update no. 2</b>	<b>Operation no. MDREC012; Glide no. <a href="#">EQ-2016-000035-ECU</a></b>
<b>Date of issue:</b> 19 May 2016	<b>Date of disaster:</b> 16 April 2016
<b>Operation manager:</b> Alberto Monguzzi, IFRC Head of Emergency Operations, Email: <a href="mailto:alberto.monguzzi@ifrc.org">alberto.monguzzi@ifrc.org</a>	<b>Point of contact:</b> Paola López, Ecuadorian Red Cross (ERC), National Technical Response Coordinator, Email: <a href="mailto:respuesta@cruzroja.org.ec">respuesta@cruzroja.org.ec</a>
<b>Operation start date:</b> 22 April 2016	<b>Expected timeframe:</b> 12 months
<b>Overall operation budget:</b> 18,350,836 Swiss francs (CHF)	
<b>Number of people affected:</b> Estimated 1.2 million people affected	<b>Number of people to be assisted:</b> 100,000 beneficiaries
<b>Host National Society presence:</b> The Ecuadorian Red Cross (ERC) has a national headquarters in Quito, 24 provincial boards, 110 local branches 200 staff members and for this operation has mobilized 1,567 volunteers.	
<b>Red Cross Red Crescent Movement partners actively involved in the operation:</b> American Red Cross, British Red Cross, Canadian Red Cross Society, Colombian Red Cross Society, Red Crescent Society of the Islamic Republic of Iran, Mexican Red Cross Society, Norwegian Red Cross Society, Salvadoran Red Cross Society Spanish Red Cross, the International Committee of the Red Cross (ICRC) and the International Federation of Red Cross and Red Crescent Societies (IFRC).	
<b>Red Cross Red Crescent Movement partners financially supporting this operation:</b> American Red Cross, British Red Cross, Canadian Red Cross Society, Finnish Red Cross, Honduran Red Cross, China Red Cross Hong Kong branch, Japanese Red Cross Society, Republic of Korea National Red Cross, Macau Red Cross, Netherlands Red Cross (with government of the Netherlands funds), Peruvian Red Cross, Swedish Red Cross (with Swedish government funds) and Swiss Red Cross.	
<b>Red Cross Red Crescent Movement partners supporting the online donation platform (AMMADO):</b> Other National Societies beyond those listed above include Australian Red Cross, French Red Cross, German Red Cross, Hellenic Red Cross, Maldivian Red Crescent, Nepal Red Cross Society, Palestine Red Crescent Society and Philippine Red Cross.	
<b>Other donors:</b> Airbus foundation, Canadian government (through the Canadian Red Cross Society), Dutch government (through the Netherlands Red Cross), Estonian government, Geosyntec, Italian government, iTunes, New Zealand government, OFID (OPEC Funds for International Development), Procter & Gamble, Swedish government (through the Swedish Red Cross), the United States government through the United States Agency for International Development (USAID) and Western Union Foundation.	
<b>Other partner organizations actively involved in the operation:</b> The Ecuadorian Red Cross is coordinating its actions with the National Secretariat for Risk Management (SGR), Ministry of Public Health (MSP), Ministry of Urban Development and Housing (MIDUVI), Ministry of Social and Economic Inclusion (MIES), Armed Forces, National Police and the Public Prosecutor's Office.	

## The disaster and the Red Cross Red Crescent response to date

- 16 April 2016**, a 7.8-magnitude earthquake (Richter scale) strikes off the coast of northern Ecuador at 6:58 pm local time. The epicentre is closest to the area between Cojimies and Pedernales (Manabí province) and near the Muisne canton (Esmeraldas province) in an area 170 kilometres northwest of the country's capital of Quito. The Ecuadorian government declares a state of emergency with a red alert in six provinces: Manabí, Esmeraldas, Santo Domingo, Los Ríos, Santa Elena and Guayas. The area of Pedernales (Manabí province) is declared a disaster zone.
- 18 April 2016:** The IFRC allocates 405,778 Swiss francs from its Disaster Relief Emergency Fund (DREF) to provide humanitarian aid to 40,000 people. The Ecuadorian government expands the State of Exception, which enables all international organizations not registered with the State to deliver humanitarian aid within the country.
- 20 April 2016:** First charter plane set by IFRC with 64 tonnes of humanitarian aid arrives to Ecuador.
- 22 April 2016:** [Emergency Appeal](#) launched for **18,350,836 Swiss francs** to support **100,000 people** for 12 months.
- 10 May 2016:** [Operations update no. 1](#) issued.

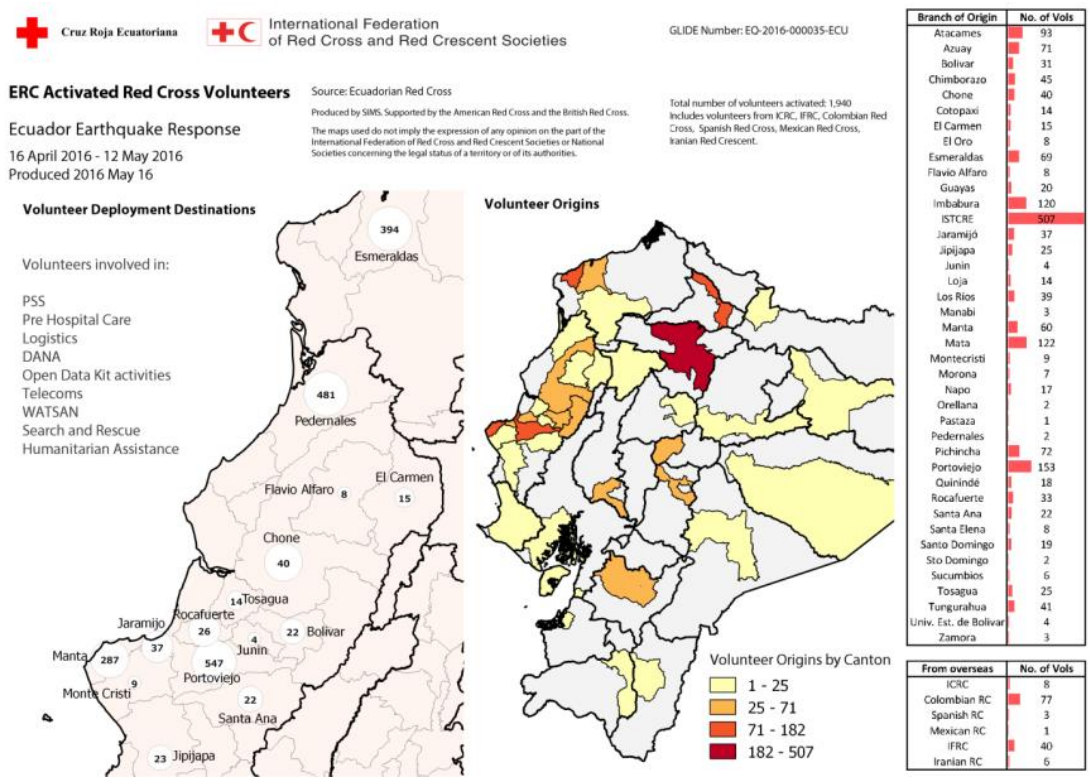
The Ecuadorian Secretariat for Risk Management (SGR) reports that the earthquake caused 660 deaths and 13 people are still missing. The Ministry of Public Health provided emergency health care for 51,376 people, of whom 4,605 were injured. As of 11 May, 7,633 family and 28,911 people were in collective centres and 166 of the 560 schools affected were registered with moderate and serious damage. In the morning of 18 April 2016, a 6.7-magnitude earthquake struck the coastal town of Rosa Zarate in the province of Esmeraldas, and a 6.8-magnitude earthquake was registered in Rosa Zarate that same day at 12:46 pm. The Ecuadorian government has taken efforts to respond to this emergency through its technical working groups that respond to needs for health; water, sanitation and hygiene promotion; infrastructure; comprehensive attention (economic and social inclusion); security; productivity and livelihoods; education and culture; strategic infrastructure (electricity, hydrocarbons, refineries, telecommunications); waste management; and volunteering. According to the information from the Ecuadorian Ministry of Economic and Social Inclusion (MIES), as of 22 April 2016, 37 previously-designated collective centres and temporary collective centres were activated in which 5,896 families (26,091 people) were living; but mentioned before the number of people in centres has increased in May. On 26 May 2016, the Ecuadorian government created a Committee for Reconstruction and Productive Reactivation of Employment in the affected areas to implement State policy and actions in the affected areas.



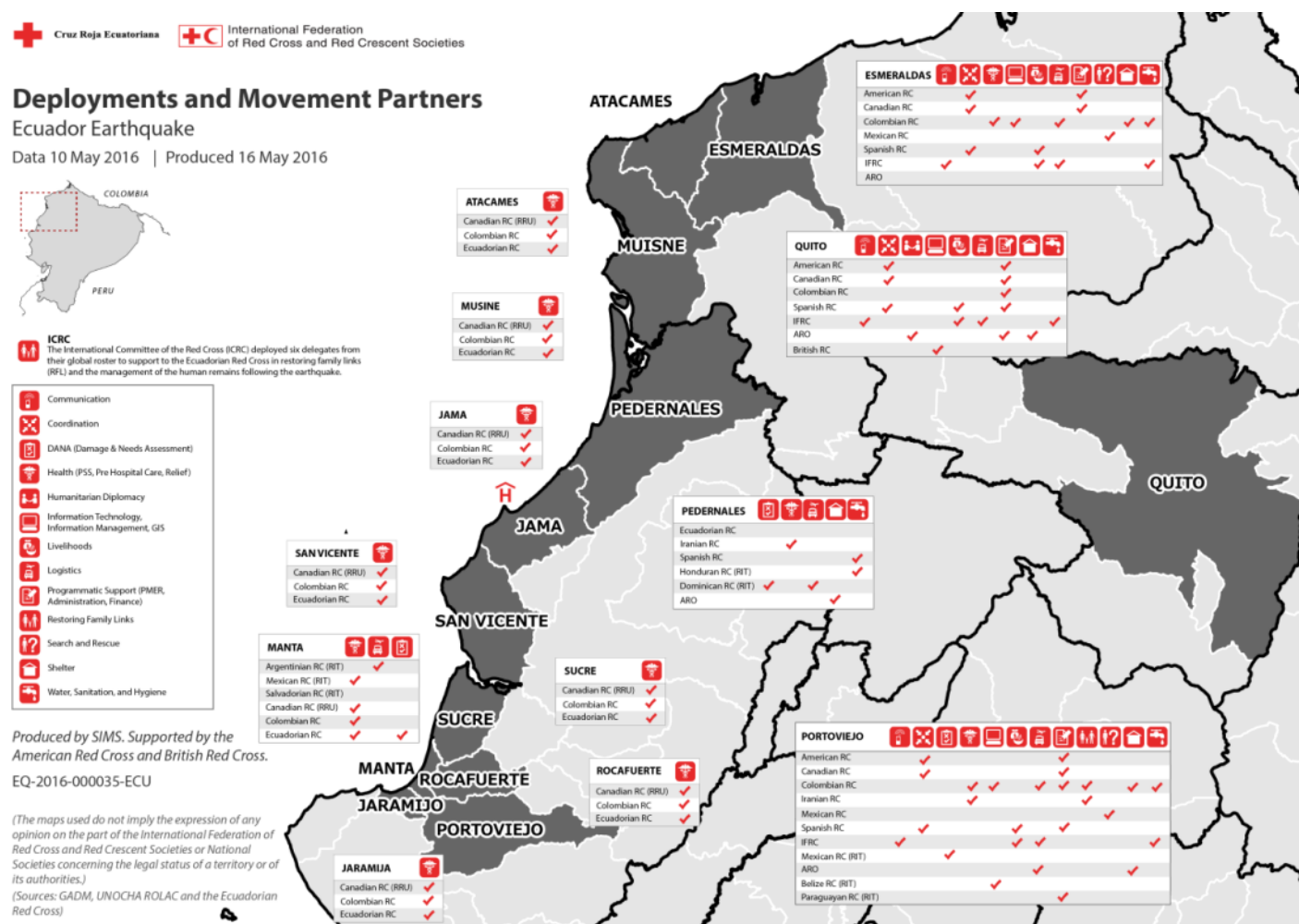
Hygiene promotion during a distribution of humanitarian relief in Coaque, canton of Pedernales, Source: ERC

### Coordination and partnerships

Graphic 1 below visualizes the deployments and the number of ERC volunteers in the provinces of Manabí and Esmeraldas (the map on the left) and the origins of the volunteers broken down by canton and branch (the map on the right) from 16 April to 12 May 2016.



Graphic 2 below shows previous and active Red Cross and Red Crescent Movement deployments and the deployments of non-Red Cross Red Crescent partners that are coordinating with the Movement in the provinces of Manabí and Esmeraldas and the city of Quito from 22 April to 17 May.

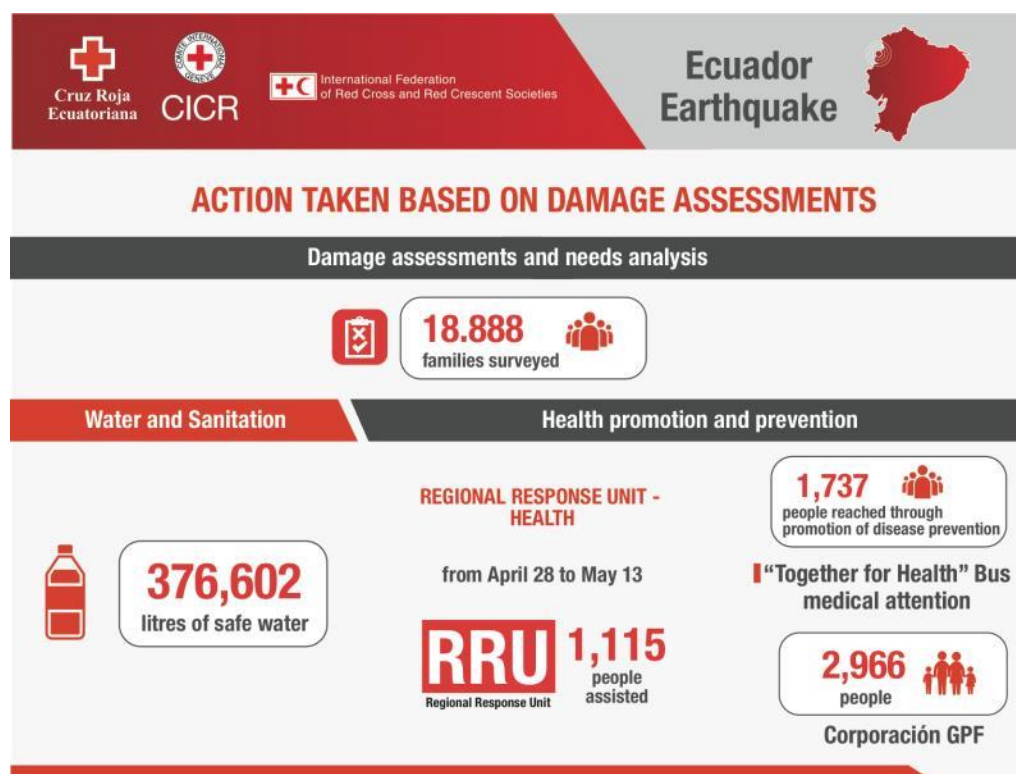


## Operational implementation


The Ecuadorian Red Cross is leading an effective and efficient emergency response operation. With support from national and international Movement components, the National Society has successfully implemented search and rescue operations, provided pre-hospital health care, attended to psychosocial needs, provided clean and safe water, contributed to temporary shelter options, initiated damage and needs assessments (DANA), as well as engaged in coordination with State bodies and the dissemination of concise and pertinent information regarding the actions of the Ecuadorian Red Cross and the International Movement.


During this reporting period (22 April 2016 to 17 May 2016), the Ecuadorian Red Cross, with IFRC support, distributed essential non-food items (NFIs), food kits and baby kits as well as food and water that had been donated in-country. The map in [Annex 1](#), which is from Situation Report No. 12, provides a detailed account of the distributions up to 13 May 2016.

The following graphic provides an overview of various operational actions:



The following section provides details on the development and progress achieved during this reporting period for each of the areas of intervention:

 <b>Search and Rescue</b>			
<b>Outcome 1. Mortality and morbidity are reduced through search and rescue activities</b>			
<b>Output 1.1</b> Search and rescue activities are developed in the emergency area.			
This information has not changed since the last update because these activities were conducted in the first 2 weeks of the operation. Below is a table with the National Societies that assisted with the search and rescue operations.			
National Society	No. of Volunteers	Province	Cases
Ecuadorian Red Cross	68	Manabí/ Esmeraldas	19 cases
Colombian Red Cross Society	73		
Mexican Red Cross	22		
Salvadorean Red Cross Society	3		

 <b>Health and Care</b>	
<b>Outcome 2. The health risks of the emergency on the affected population are reduced through the provision of curative and preventive health services and psychosocial support.</b>	
<b>Output 2.1</b> Adverse effects of the earthquake on the health of a population of 100,000 are limited through the provision of primary and secondary health care.	
<b>Output 2.2</b> Psychosocial support is provided to beneficiaries and staff/volunteers.	
<i>Provide first aid, pre-hospital care, and referral through health in emergency teams</i>	
Volunteers established triage points, emergency referrals and provided transportation when possible to the closest primary or secondary care-level health centre in other locations. The National Society coordinated with the Ministry of	

Public Health (MSP) and shared resources with MSP and fire-fighters and other actors in the field. The Colombian Red Cross Society had pre-hospital specialists in its emergency response team deployed to Manabí province. As explained below, the Canadian Red Cross Society deployed a health regional response unit (RRU).

As detailed in the above table on the ERC fleet of vehicles, the National Society used its ambulances and other vehicles to respond to the immediate health needs of the affected population.

The following table shows the total number of people that received pre-hospital care and the total number of people that were transferred to primary and secondary-level health centres during this reporting period (the box in green) and since the beginning of the operation (the box in orange):

PROVINCE	CANTON	CARE		
		Adults	Children	Transfers
Manabí	Manta	5	-	10
	Portoviejo	7	-	-
	Pedernales	-	1	-
<b>SUBTOTAL OF CARE DURING THE PERIOD (7 to 17 May)</b>		<b>12</b>	<b>1</b>	<b>10</b>
<b>TOTAL CARE GIVEN SINCE THE START OF THE OPERATION IN THE PROVINCES OF ESMERALDAS AND MANABÍ</b>		<b>4,207</b>		<b>173</b>

*Affected health services are supported through Red Cross emergency medical teams*

This information is provided in graphic 2 above in the Coordination and Partnerships section.

*Epidemic prevention and control activities are developed for vector control activities, health and hygiene promotion and to limit the risk of diarrheal diseases, etc.*

The ERC created a health team in Manabí province to engage in epidemic prevention and control activities in the affected regions. Moreover, with the support of the IFRC, the ERC is developing a community training programme for safe water handling, healthy hygiene practices, vector control and preventative health measures in the cantons of Esmeraldas, Muisne, Pedernales and Jama.

*Provide psychosocial first aid*

During this reporting period, more than 200 people from the ERC, the ERC Technical Institute, Colombian Red Cross Society seconded to IFRC and the State University of Bogota provided psychosocial care for 643 adults and 329 children in the cantons of Esmeraldas, Muisne, Quinindé, Atacames, Eloy Alfaro (Esmeraldas province) and in the cantons (or parishes) of Manta, Portoviejo, Pedernales, Jama, San Vicente, Chone, Montecristi, Jaramijó, Sucre and Santo Domingo.

The following table provides details on the communities/ locations where this psychosocial support was provided:

PROVINCE	CANTON	NO. OF CASES	
		Adults	Children
Manabí	Portoviejo	228	73
	Jama	59	9
	Pichincha	21	19
	Manta	53	9
	San Vicente	11	-
	Chone	44	-
	Jipijapa	24	7
	Calceta	25	3
	ERC headquarters	22	-
	Pedernales	85	86
Esmeraldas	Muisne	71	123
<b>SUBTOTAL OF CASES DURING THIS PERIOD (7 to 17 May)</b>		<b>643</b>	<b>329</b>
<b>TOTAL CASES SINCE THE START OF THE OPERATION IN THE PROVINCES OF ESMERALDAS AND MANABÍ</b>		<b>5,475</b>	

*Develop psychosocial activities with focal groups in the communities*

The ERC psychosocial team provided psychological first aid in the immediate aftermath of the earthquake, including

people waiting for search and rescue teams to find their family members, collective centre residents, first responders from humanitarian institutions.

*Provide psychosocial support to the caregivers*

The psychosocial support team provided self-care activities in the base camp and services to other humanitarian actors in the field. These actions will continue, with a particular focus on strengthening ERC volunteers' knowledge and practice of self-care.

*Establish and develop a referral system to special cases*

The ERC psychosocial support team provided referrals for cases requiring specialized attention.



## Water, Sanitation and Hygiene Promotion

**Outcome 3. The risk of waterborne and water-related diseases has been reduced through the provision of safe water and adequate sanitation and hygiene promotion.**

**Output 3.1** 20,000 families receive safe drinking water.

**Output 3.2** 20,000 families participate in hygiene promotion and sanitation activities.

*Deployment of water purification plants and equipment for water distribution in the communities.*

The ERC began distributing water within days of the earthquake with bilateral support from the Spanish Red Cross and through a contribution to this appeal from the Colombian Red Cross Society.

*Initial assessments of the water, sanitation (including sewage systems) and hygiene situation in targeted communities*

ERC volunteers were deployed to the affected regions to conduct initial WASH assessments in May 2016, and they are continuing to conduct assessments as of the writing of this report.

*Continuous monitoring of the water, sanitation and hygiene situation in targeted communities*

ERC volunteers and a WATSAN Regional Intervention Team (RIT) member have been monitoring the water, sanitation and hygiene situation in Manabí.

*Coordinate with other water, sanitation and hygiene (WASH) actors on the needs of target groups and appropriate response.*

During this reporting period, the IFRC RIT alongside ERC volunteers collected data through water, sanitation and hygiene assessments and evaluated the risks in basic water and sanitation in the intervention areas, including vector control and monitoring epidemic risk in coordination with State authorities, other humanitarian actors and community stakeholders.

*Hygiene and sanitation activities with affected communities*

An ERC health team conducted health and hygiene promotion actions in Manabí and Esmeraldas province in May 2016, reaching a total of 72,239 people as of the writing of this report.

*Distribution of jerry cans, hygiene kits and cleaning kits*

Please see the graphic in Output 5.2 for this information.



## Shelter

**Outcome 4. The shelter response of humanitarian actors is strengthened through enhanced leadership, coordination and accountability (Shelter Coordination)**

**Output 4.1** Timely, predictable, and widely accessible shelter coordination services are provided to humanitarian shelter actors

**Output 4.2** Shelter coordination services in Ecuador provide a platform to integrate Disaster Risk reduction into the shelter response of humanitarian actors.

*Support service delivery of humanitarian shelter actors*

The IFRC is co-leading the shelter cluster with the Ecuadorian Ministry for Urban Development and Housing (MIDUVI), the State counterpart in shelter and settlement issues. Twenty-four organizations are currently taking part in the Cluster. The Shelter Cluster team at present consists of a coordinator, deputy coordinator (who will take over coordinator duties at the end of May 2016), technical advisor and an information manager. The team is in the process

of setting up working groups for technical assistance and housing, land and property (HLP).

*Support the development and implementation of the shelter strategy*

Sectorial coordination meetings in shelter at the national level are co-chaired by the vice-minister of MIDUVI; at the field level, meetings are held jointly with the camp coordination and camp management cluster. The cluster is working on a shelter strategy that responds to the needs of the affected population and respects State plans and policy for recovery and reconstruction of these areas.

The State is finalizing its recovery and reconstruction planning. These plans will expedite and assist the shelter sector in

the provision of more substantial shelter options, which will include repairs to housing to allow people to return to their homes, transitional shelters in urban and rural areas, technical support and capacity building for those already rebuilding housing as well as financial cash grants to build temporary shelters and support the rental of housing.

*Monitor and evaluate the humanitarian shelter response*

The IFRC delegate leading the shelter cluster recognizes that the needs and priorities of displaced persons have not yet been fully assessed. The current level of humanitarian assistance can meet some of the needs, end displacement for some of the population and offer temporary solutions to stabilize the situation.

*Support advocacy on behalf of the cluster*

The Shelter Cluster is working together with other national and international institutions and agencies to contribute and strengthen State plans and policy regarding shelter reconstruction. The preliminary State plans indicate that shelter response in urban areas will be implemented in the context of urban planning to avoid the creation of informal settlements without access to basic services, minimize multiple relocations of affected communities and individuals and limit reconstruction on highly hazardous land or land that does not allow for tenure security.

Within this context, the shelter sector advocates in favour of:

- as many people as possible remaining on their own land/property;
- people remaining as close as possible to their means of livelihood (no forced relocations);
- the use of local materials and local suppliers in the provision of shelter to assist the recovery of the local economy;
- the provision of temporary shelter solutions that will last for at least two years;
- temporary shelter solutions that support reconstruction efforts of affected families by ensuring that materials are of good quality, movable and re-usable in permanent housing;
- capacity-building and technical support to be rolled out urgently to assist those families who are already undertaking repairs and reconstruction; and
- mass information campaigns to ensure that affected communities are informed of policies and assistance options and are able to make informed decisions.

This strategic advocacy on behalf of the cluster will continue throughout the remaining emergency phase and into the reconstruction/ recovery phase. For more information, please visit <http://sheltercluster.org/response/ecuador-earthquake-2016>



**A family carts away its relief items from a distribution in Manta. Source: ERC**

**Outcome 5. The immediate shelter and settlement needs of the target population are met (Emergency Phase)**

**Output 5.1** Essential household items are provided to the target population

**Output 5.2.** Target population is provided with emergency shelter assistance

*Identify, register, verify and mobilize beneficiaries for relief distributions*

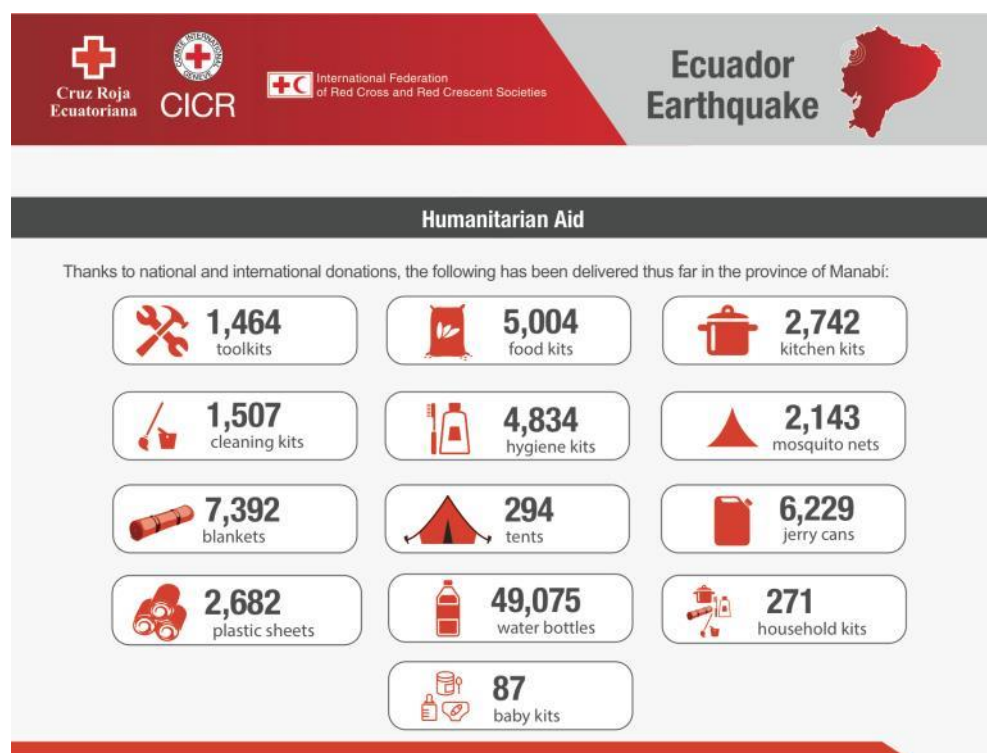
With the support of several RIT members in the Manabí and Esmeraldas provinces, the National Society has registered since late April 2016 more than 18,258 families, of which 9,122 have used the Open Data Kit (ODK), which equivalent

to 50 per cent of the total.

#### *Mobilize volunteers and provide orientation on distribution protocols*

The National Society established a distribution protocol that is based on its assessments and registries in each area of intervention and that prioritizes families that lost their homes or whose homes are irreparably damaged, with particular focus given to female heads of household, people with a disability and elderly people

The following graphic shows the distribution totals for various relief items from 7 May to May 17 in the province of Manabí:



#### *Monitor and report on distributions*

The Ecuadorian Red Cross, with the support of the IFRC RIT in PMER in the field and the IFRC information management specialist, has improved its database to track and report distributions. The distribution reports have been used to calculate the figures cited above, and the ERC and IFRC are also using photos to monitor distributions.

#### *Identify and mobilize volunteers and staff to support the operation and provide orientation on revalidation processes and distribution protocols*

Due to the multiple needs in this emergency phase, many ERC volunteers have been mobilized to support other areas such as distributions, thereby generating a positive situation in which the operation's strategic intervention areas are better integrated and enable a more comprehensive humanitarian response from the National Society and the IFRC. Moreover, the Luxembourg Red Cross is fully funding the IFRC's Shelter Research Unit, which is providing technical support to the shelter operations, updating the IFRC's shelter strategy in order to implement a more holistic approach that includes other sector/activities like Livelihood, Cash Transfer Programme (CTP) and WATSAN, actively participating in the local shelter cluster, coordinating with local and national authorities, and distributing adapted shelter kits in the Coaque community in Pedernales.


#### *Provide technical orientations for volunteers and beneficiaries in the construction of emergency shelter*


During the emergency period, the IFRC shelter delegate in the field assessed shelter needs and researched potential designs that could be used for emergency shelter. With the assistance of a local artisan (who will be hired as a short-term technician by the National Society), ERC volunteers and the IFRC shelter delegate built two prototypes of a domed bamboo structure covered by a tarpaulin that could be used as a safe emergency shelter alternative.

### **Outcome 6 The target population has safe and adequate shelter (Recovery Phase)**

**Output 6.1** Shelter that meets agreed standards is provided to at least 500 families

<b>Output 6.2</b> Orientation/awareness raising sessions on safer shelter provided to target communities
This has not changed since Operation Update No. 1 was issued on 10 May 2016.

 <h2>Livelihoods and Food Security</h2>
<b>Outcome 7 Livelihoods are protected, restored and strengthened and the negative coping strategies among the affected population are reduced</b>
<b>Output 7.1</b> Detailed assessment on the impact on livelihoods
<b>Output 7.2</b> A Cash Transfer Programme is implemented for 5,000 families for 3 months in order to protect the household economic security and livelihoods
<b>Output 7.3</b> Restore and strengthen the livelihoods of 5,000 families affected by the disaster
<p><i>Deploy a livelihoods assessment team to the affected areas</i></p> <p>During the week of 9 May to 13 May 2016, a multi-disciplinary livelihoods team specializing in cash transfer and market analysis was mobilized to the zone affected by the earthquake; this team visited various rural communities and urban centres in order to identify the impact on livelihoods, the feasibility of implementing a CTP and conduct a rapid market evaluation of the <i>guadua</i> cane, which is commonly used to build houses in the affected zone. As part of the evaluation, the team participated in coordination meetings in the cities of Pedernales and Jama as well as meetings with other organizations that are responding to the emergency at the local level such as the United Nations (UN), the Ministry of Agriculture and Livestock and the Adventist Development and Relief Agency (ADRA), with the purpose of identifying implemented or planned actions for the reestablishment of livelihoods or the implementation of CTP.</p>
<b>Outcome 8. Immediate food needs of the disaster-affected population are met</b>
<b>Output 8.1</b> Appropriate food rations are distributed to vulnerable households
<b>Output 8.2</b> Food kits are provided to households to 20,000 families for 2 months
<p><i>Establish food recollection centres in branches</i></p> <p>The ERC organized a donation campaign within the country for food and water for the affected population in Manabí and Esmeraldas provinces. This campaign has been highly successfully allowing the National Society to assemble and distribute food kits that had been collected in ERC branches throughout the country.</p> <p><i>Transportation of food from headquarters to affected areas</i></p> <p>The items received in ERC branches have been progressively transported to the most affected cantons. The National Society is coordinating this transportation, but the transportation itself often is managed directly by the local ERC provincial board and/or canton board.</p> <p><i>Targeting of families using ODK and Mega V</i></p> <p>With the support of several RIT members in the Manabí and Esmeraldas provinces, the National Society has registered since late April 2016 more than 18,258 families, of which 9,122 have used the Open Data Kit (ODK), which equivalent to 50 per cent of the total.</p> <p><i>Distribution of food parcel to the families</i></p> <p>As part of the national-level donation campaign, the Ecuadorian Red Cross distributed food kits in three affected provinces. To date, the ERC has distributed 4,756 food kits to 4,756 families.</p>

 <h2>Restoring Family Links</h2>
<b>Outcome 9. Family links are restored whenever people are separated from or without news of their loved ones as a result of the disaster</b>
<b>Output 9.1</b> Attention in cases of restoring family links.

*Attention in RFL cases for the affected population, particularly children and the elderly, and especially those at risk of being unattended*

The first phase lasted ten days and involved the reception of requests to locate missing family members and the use of satellite and cellular phones to attempt to locate these people, as well as constant communication with the relevant National Police, Public Prosecutor's Office, and relevant ministries. Currently, the ERC is following up on open cases through phone calls, emails and the crosschecking of different lists such as people in collective centres, names of the deceased, among others. The following table provides information up to 17 May 2016 on the work conducted in restoring family links in the aftermath of the earthquake:

Location	Service provided	Cases	
		Received	Resolved
Pedernales, Manta and Portoviejo	RFL	84	15
Pedernales, Manta, Portoviejo and Jama	Telephone calls	58	43
Central Headquarters	RFL	477	51
Colombian Red Cross Society	RFL	415	120
<b>TOTAL</b>		<b>1,034</b>	<b>229</b>

*Production of dissemination materials on RFL for beneficiaries*

The ERC published information on its institutional social networks regarding this programme and actions to be taken to reconnect with loved ones. Additionally, the ICRC delegates in the field supported the National Society to disseminate information not only to beneficiaries but other humanitarian actors in the affected cantons.

## National Society Organizational Capacity Building and Institutional Preparedness

**Outcome 10. National Society's level of preparedness for future disasters and capacity to deliver sustainable programming and services are strengthened.**

**Output 10.1** Having a clear evaluation of the organizational capacity weaknesses and challenges at national and branch level, especially in the affected areas

**Output 10.2** Increased skillsets available for the National Society and its affected branches to respond to current and future disasters and deliver programmes and services.

**Output 10.3** Increased material capacity is available for the National Society to respond to current and future disasters, deliver programmes and services

**Output 10.4** Improved systems and processes in place for the National Society to respond to future disasters and deliver programmes and services

After identifying organizational weaknesses and in accordance with the IFRC's recommendations, the ERC's Planning Department established operational bases in Pedernales, Esmeraldas and Manta for the collection of data and the provision of support for the monitoring and planning processes.

## Disaster response preparedness; Early warning; Risk reduction

**Outcome 11. The affected communities are prepared and resilient enough to respond to earthquake through proper coordination with local authorities.**

**Output 11.1** Families, communities and municipalities at risk of earthquakes have the required level of preparedness to respond to the emergency and reduce their risks.

This area is planned for the early recovery and reconstruction phases.



## Quality programming/ Areas Common to All Sectors

**Outcome 12. Continuous assessment and analysis is used to inform the design and implementation of the operation.**

**Output 12.1** Rapid needs assessments are conducted and there is effective operative management and operational security.

**Output 12.2** Detailed assessment is developed.

**Output 12.3** Planned actions respond to the needs of the beneficiaries.

**Output 12.4** The management of the operation is informed by a comprehensive monitoring and evaluation system

### *Rapid Needs Assessments*

Beyond the volunteers deployed specifically for search and rescue, pre-hospital care, psychosocial support, water and sanitation, and humanitarian distributions, the ERC deployed five assessment teams, composed of staff and volunteers, by 18 April 2016 to the provinces of Manabí and Esmeraldas, which identified urgent needs for physical and mental health care, food, rehabilitation of basic services, rehabilitation of local economies/production, hygiene and sanitation areas, and water points.

### *Initial Plan of action is written*

Based on the preliminary reports from ERC volunteers and staff in the affected areas, information from other humanitarian actors and State institutions, and with support from the IFRC, the National Society created a DREF plan of action, which served as the basis for the subsequent international appeal.

### *Detailed needs assessment*

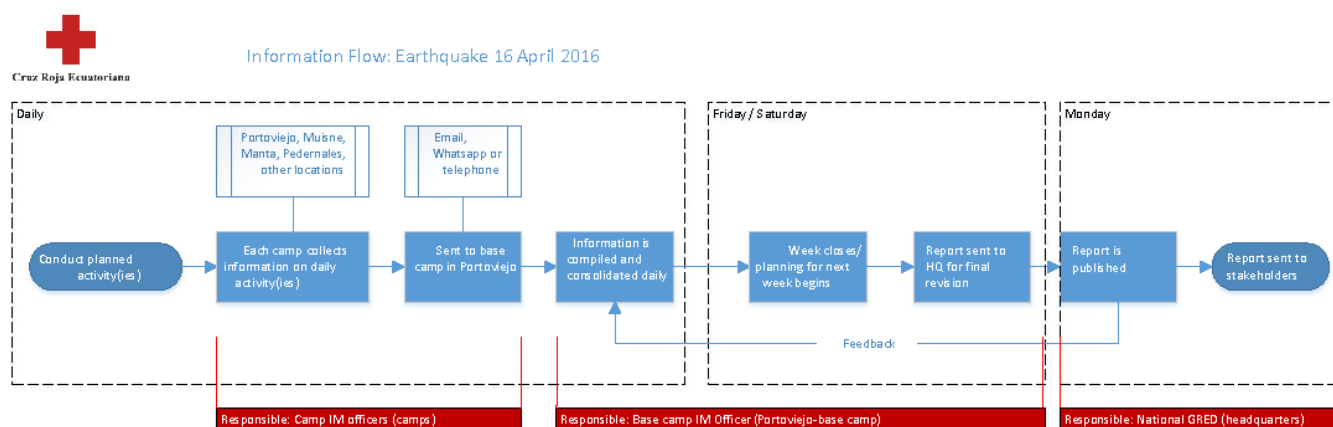
ERC volunteers and staff conducted damage and needs assessments for 18,258 people up until 7 May 2016 May in the cantons of Pedernales, Portoviejo, Manta, Jama, Sucre, San Vicente (Manabí province) and 549 in the cantons of Muisne, Eloy Alfaro and Quinindé (Esmeraldas province).

### *A plan of action to respond to detailed needs assessment*

The Ecuadorian Red Cross and the IFRC are currently working together to draft a revised plan of action that reflects the findings of the needs assessments; the IFRC and the ERC expect to publish the revised plan of action by late May 2016.

*Develop and utilize a comprehensive M&E system to support monitoring of the operation progress (including real time, midterm and final evaluation, training of staff on PMER and lessons learned activities).*

The ERC's Planning Department and the PMER RIT jointly developed the following flow chart to facilitate the flow of information from the field to the ERC's headquarters in Quito:



### *Procure visibility items such as vests, polo shirts and caps*

The Ecuadorian Red Cross has provided visibility items for its volunteers involved in the emergency response efforts. The ERC procurement area will determine and acquire items required in the future, in compliance with National Society procurement standards and procedures.



## Community engagement and accountability

**Outcome 13. Target communities and families have access to life-saving information and the ability to influence and guide decisions, enabling them to adapt to, withstand and recover from external and internal shocks.**

**Output 13.1** Information as aid: Target communities have access to information that helps them improve their well-being and engage in recommended practices.

**Output 13.2** Dialogue and community engagement: Target communities dialogue with aid providers and are able to influence decisions that affect them

**Output 13.3** Data collection and analysis for programmatic decisions: Utilize systems of data and information management to analyze feedback, inform communication with communities approaches and revise programmes regularly

There are no changes in this sector since Operations Update No. 1 because it is geared toward the post-emergency phases of this operation. However, the system illustrated in the flow chart listed above in Output 12.4 will also be used for data collection, which also corresponds to Output 13.3.

## Contact Information

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

### In the Ecuadorian Red Cross:

- Roger Zambrano Cedeño, National Disaster Risk Reduction Director, email: [rzambrano@cruzroja.ec](mailto:rzambrano@cruzroja.ec)
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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.

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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.**

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