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## Emergency Plan of Action (EPoA)

### Colombia: Mudslide

 International Federation  
of Red Cross and Red Crescent Societies

<b>DREF Operation n° 1 MDRCO012</b>	<b>Glide n°</b> <a href="#">MS-2017-000033-COL</a>
<b>Date issued:</b> 7 April 2017	<b>Date of disaster:</b> 31 March 2017
<b>Operation manager (responsible for this EPoA):</b> Pabel Angeles, Regional Disaster Management Coordinator – South America – IFRC.	<b>Point of contact:</b> Cesar Augusto Urueña Pulido – General Director for National Relief – Colombian Red Cross Society (CRCS)
<b>Operation start date:</b> 6 April 2017	<b>Expected timeframe:</b> 3 months (operation end date is 6 July 2017)
<b>Overall operation budget:</b> 114,534 Swiss Francs (CHF)	
<b>Number of people affected:</b> 45,000 people <sup>1</sup> affected	<b>Number of people to be assisted:</b> 1,500 people (300 families)
<b>Host National Society presence (n° of volunteers, staff, branches):</b> The National Society has been responding to this emergency with 118 volunteers and staff (headquarters and the Cundinamarca, Boyacá, Tolima, Nariño and Putumayo branches)	
<b>Red Cross Red Crescent Movement partners actively involved in this operation:</b> International Committee of the Red Cross (ICRC), International Federation of Red Cross and Red Crescent Societies (IFRC), American Red Cross, German Red Cross, Norwegian Red Cross and Spanish Red Cross.	
<b>Other partner organizations actively involved in this operation:</b> National Disaster Risk Management Unit (UNGRD), Civil Defence, Army, Police, Fire Brigade, Putumayo Governorate, Mocoa Town Hall, National Navy, Attorney General of the Republic, Forensic Medicine, Air Force and <i>Corpoamazonia</i> .	

<Click [here](#) for the DREF budget. Click [here](#) for the contact information and [here](#) for the map of the affected areas>

## A. Situation Analysis

### Description of Disaster

On the night of 31 March 2017, increased rainfall caused the Mocoa, Sangoyaco and Mulata Rivers to overflow, which in turn generated a mudslide in the municipality of Mocoa, capital of the department of Putumayo. UNGRD reported that the affected area received 33 per cent of its monthly total of rainfall (130 mm of the 400-mm monthly average) on the night of the disaster. Per reports, 273 people perished and 262 are injured; injured residents have been treated, and the most serious cases have been transferred to medical centres in Neiva, Popayan and Bogota<sup>2</sup>. There have been 399 Restoration of Family Links (RFL) requests, 25 homes have been destroyed and more than 300 families have been affected. According to the latest official report from the UNGRD-coordinated national crisis room, 17



**Damage to homes in the municipality of Mocoa in the department of Putumayo. Source: CRCS**

<sup>1</sup> The number of affected people is increasing; search and rescue efforts continue, and humanitarian assistance is being provided to the affected population. The official number of people affected by the emergency will be provided after the damage assessments and Single Registry of Victims (RUD) are consolidated.

<sup>2</sup> National Disaster Risk Management Unit 3 April 2017

neighbourhoods were affected (29 blocks), with the greatest devastation seen in the districts of San Fernando, San Miguel, Independencia, Chaparros, San Agustín, Naranjito, Pablo VI, Avenida 17 de Julio, Miraflores and Progreso; the hospital network has collapsed, and 85 per cent of the department was left without electricity, which has since been partially restored. Three aqueducts and the sewage system are affected, 10 roads are damaged, 2 bridges collapsed and 5 are being rehabilitated.

Below are the figures for the damages suffered up to 3 April 2017:

<b>DAMAGES</b>		
<b>Description</b>	<b>Number</b>	<b>Observation</b>
<b>People dead</b>	273	
<b>People injured</b>	262	
<b>Affected families</b>	300	
<b>Overall affected population</b>	45,000	
<b>Affected districts</b>	17	Most affected: San Fernando, San Miguel, Independencia, Chaparros, San Agustín, Naranjito, Pablo VI, Avenida 17 de Julio, Miraflores and Progreso.
<b>Affected housing</b>	25	
<b>Sewage system</b>	Totally affected	
<b>Electric power</b>	Total damage to power substation	
<b>Affected aqueducts</b>	Completely affected	
<b>Hospital network</b>	Collapsed	
<b>Affected bridges</b>	7	2 completely collapsed; 5 are being rehabilitated
<b>Affected roads</b>	10	9 in urban areas; 1 departmental road: Pitalito – Mocoa, with restricted passage for heavy vehicles

Source: Colombian Red Cross Society

The number of affected people could increase once the information from damage assessments is consolidated. Because of the magnitude of the emergency, the government of the department of Putumayo declared a state of disaster, through which aid from the national government and other agencies is being mobilized to the affected areas.

Following an extraordinary meeting of the Cabinet at Nariño House, the Colombian government has assessed the catastrophe and the need to provide humanitarian assistance to the affected people and infrastructure investments to rebuild Mocoa and decided to declare an economic and social emergency.

A total of 714 people are being housed in temporary collective centres in locations prepared for that purpose:

- Putumayo Technical Institute Coliseum
- El Jardín
- Organización Zonal Indígena (OZIP)
- América

In total, 200 tents with the capacity to house 1,000 people were set up at the Mocoa Sports Unit; however, many of the affected families are staying with relatives and friends, which makes it difficult for them to access humanitarian aid.

The Departmental Crisis Room reports that the most affected areas are in Mocoa's urban areas, whose residents are mostly displaced populations that engage in informal economic activities.

A mass burial took place on the afternoon of 3 April 2017, and Colombian Red Cross Society staff specializing in psychosocial support (PSS) was there to accompany the community. The United Nations Office for Humanitarian Affairs (UN-OCHA)'s Humanitarian Country Team has identified gaps in the humanitarian response for families not being housed in collective centres, as well as the need to include rights protection, childcare, gender and action-without-harm approach issues in humanitarian aid actions.



**Map 1: Map of the city of Mocoa and its river system. Source: CRCS**



**Map 2: Affected department in Colombia and its geographical distance from Bogotá. Source: CRCS**



**Map 3: More detailed map of the affected department of Putumayo. Source: CRCS**

### Summary of current response

The Colombian Red Cross Society has 152 volunteers and staff in the affected zones, who are carrying out first-response phase actions with support from branches in Cundinamarca, Boyacá, Tolima, Nariño and Putumayo. Another 32 CRC branches are ready to support the subsequent phases of the operation.

The Colombian Red Cross Society's emergency operations centre (EOC) is active 24/7 to coordinate the operation, and the CRCS is participating in UNGRD's national EOC. At the local level, Municipal and Departmental EOCs are active at the police command headquarters.

In terms of health, an emergency medical team with the capacity for pre-hospital and emergency care has been deployed, as well as a psychosocial support team to provide mental health care, PSS and psychological first aid to the population in the collective centres and to Town Hall, governorate and hospital staffs. One tonne of hospital supplies and medicine has been sent to support the hospital system in the area.

Pre-hospital care teams are helping to receive, treat and transport the injured in the area and on medical airlifts between Mocoa - Villa Garzón - Neiva and Villa Garzón - Popayán. In coordination with SNGRD, 20 patients were received in the city of Popayán and 48 in the city of Neiva, which were referred to various hospitals in the city. In the city of Mocoa, a Mobile Health Unit (UMS) is operating at the collective centre in Putumayo's Technical Institute (ITP), in conjunction with the local hospital.

As for search and rescue, teams composed of 10 volunteers and 3 dog-and-aid worker teams (K-SAR) are still looking for missing people around a 3-km radius along the banks of the Mocoa River.

Water and sanitation teams have been deployed to the area with water treatment plants to provide water suitable for human consumption:

- ✓ Nariño branch (1) with capacity to produce 30,000 litres per day.
- ✓ Huila branch (1) with capacity to produce 30,000 litres per day.
- ✓ Headquarters (1) with capacity to produce 178,000 litres per day.

In addition, the CRC - Postobon "Litres that Help" Agreement has been activated to deliver drinking water to the area in five-litre plastic jugs.

A collective centre has been set up in CRCS facilities in the city of Mocoa, which is currently housing 100 people.

The CRCS is conducting a Damage Assessment and Needs Analysis team (DANA) to prioritize the actions for the next emergency phase.

The Colombian Red Cross Society has activated its RFL Network through the establishment of two national lines to receive requests and the deployment of specialized equipment to the affected area. So far, 399 RFL requests have been received from relatives, of which 319 remain open and 80 have been closed. The CRCS operates the national RFL line in coordination with the Colombian Institute for Family Welfare (ICBF for its acronym in Spanish), forensic medicine, departmental and municipal hospitals and city hall.

The logistics team deployed by CRCS includes:

- ✓ Telecommunications: A radio communications system with a repeater antenna has been set up to cover the operation, and the Mobile Telecommunications Unit has been deployed.
- ✓ Transportation: One vehicle has been provided by the Putumayo branch, 2 by the Nariño branch, 1 by the Huila branch, 2 by National Relief and 3 by ICRC.
- ✓ Administrative Support: There is an administrative team to support the operational actions carried out in the field.
- ✓ Communications and press: One journalist and one photographer are in the area to record the operations and to act as liaisons with the media present in the area. The CRCS's headquarters has two media liaisons that are handling national and international media requests.

### **Overview of the Red Cross and Red Crescent Movement in the country**

The Colombian Red Cross Society issues daily situation reports to keep Partner National Societies (PNSs) such as the American Red Cross, German Red Cross, Norwegian Red Cross and Spanish Red Cross, the ICRC and the IFRC informed; The International Committee of the Red Cross is providing support through staff and three vehicles in the area, German Red Cross has provided support through medical supplies and medicines and the Norwegian Red Cross, American Red Cross and Spanish Red Cross have expressed their interest in supporting the operation. The IFRC has been providing support to the operation through its disaster management coordinator for South America and country representative.

The Colombian Red Cross Society is maintaining constant communication with the IFRC.

Since 1 April 2017, the CRCS has posted reports on the Disaster Manager Information System (DMIS) to keep Movement actors informed. The CRCS's EOC has been active since 31 March, and it is coordinating the operations in the field and with Movement actors to support the response around the clock.

### **Overview of non-RCRC actors in the country**

All operational actions are carried out in a coordinated manner with the National Disaster Risk Management System (SNGRD), and UNGRD's national EOC has been active since the beginning of the emergency. Currently, efforts are moving forward to reactivate operations at the Unified Command Post along search and rescue lines with more than 300 members from operating National Risk Management System entities; to develop the operation, the National Risk Management System has a 1,300-person team from SNGRD that includes members from the army, police, air force, navy, civil defence, fire brigade, Colombian Red Cross Society, UNGRD, the governorate, city hall, the Technical Investigation Team (CTI for its acronym in Spanish), forensic medicine and Corpoamazonia.

There are 10 helicopters, 6 airplanes, 7 boats for river support and 63 vehicles for land support. The Colombian Air Force conducted a flyover to observe rivers and streams, and it found no indications of dammed-up water. The government provided ten tanker trucks to distribute water in the area. Drinking water is being distributed and stored in 5,000 and 10,000-litre tanks to provide access to communities. From Bogotá, UNGRD is loading another 40 tonnes of Emergency Humanitarian Assistance, including 2,000 food kits and 1,000 igloo-type tents to be used as temporary shelters. Five collective centres have been set up in Putumayo's Technological Institute, America and Jardín Sports Arenas, *Organización Indígena* and Red Cross facilities.

Efforts to clean up and remove debris and mud continue to restore communications to the affected areas in the municipality of Mocoa. Today, the Forensic Medicine Institute and the Office of the Attorney General will begin releasing the identified bodies from other affected zones to relatives for proper burial; the Colombian government will cover the funeral costs.

A shelter will be set up in Mocoa for pets, where people will be able to report missing animals; additionally, the CRCS's agreement with the World Society for the Protection of Animals (WSPA) will enable WSPA personnel in the area to provide care to the animals. The Colombian president toured the area on 4 April 2017 to ensure the maximum care in the shortest possible time, as well as to respond to the needs of the affected population.

Finally, the humanitarian organization Action Against Hunger has extensive knowledge in water, sanitation and hygiene promotion (WASH), the distribution of cash and vouchers, familiarity with the local market and agreements with local providers.

### **Needs analysis, beneficiary selection, risk assessment and scenario planning**

Based on a joint analysis by CRCS and humanitarian actors present in the emergency area, the following humanitarian needs have been identified:

- a. **Search and rescue:** Together with other institutions, the Colombian Red Cross Society is part of two 33-person teams in Via Puerto Guzmán to Puerto Limón and Via de la Y to Esmeralda. Much of the search and rescue

actions have been hampered by the danger posed by further landslides due to the area's geological instability, which is why the work days that relief agencies are devoting to search and rescue efforts have been extended. Work by heavy machinery has started, and tasks continue in the field.

- b. **Medical care and first aid:** Given the damage to local health services and the medical and first aid treatment needs of the injured, a type-1 emergency medical team has been deployed to the area, which is working 24/7 at the ITP collective centre (the collective centre with the greatest needs). Seven medical professionals and 8 nursing professionals and volunteers with emergency health training are conducting health care actions for affected people at the Mocoa Hospital and in affected communities.

Seventy-four patients have been treated at the ITP, 59 of which have been treated for trauma and soft tissue injuries, 15 for general illnesses and 16 with individual psychosocial support interventions. Among the main needs identified is care and coverage in collective centres.

- c. **Temporary collective centres:** Currently, UNGRD is coordinating the five official collective centres set up by the national government; however, the country's Humanitarian System has knowledge of a total of 12 operating collective centres, some of which lack humanitarian aid coverage

The Colombian Red Cross Society is providing technical advice on water and sanitation, health care, and support through Psychosocial Support Groups (GAPS); moreover, the CRCS is considering violence prevention and culture of peace actions in its collective centre activities, particularly community-based health and first aid (CBHFA) module 9 as the CRCS is a leading organization in this area. There are currently no reconstruction or rehabilitation processes in the area because of the search and rescue actions underway.

- d. **Psychosocial support:** Many people lost their relatives or were injured by and/or directly suffered the effects of the mudslide. The population is extremely affected by this situation, and even more so due to the rumours of another mudslide. This is an important issue to prioritize, not only among the directly affected population, but also among families, neighbours and response teams.

The Colombian Red Cross Society is leading the psychosocial support line through a team of ten psychologists, who are conducting PSS actions in collective centres, affected communities and the Mocoa Cemetery. Collective PSS actions have been carried out with town hall, governorate, collective centre and hospital staffs. Currently, CRCS's priority is supporting the people affected by this tragedy.

- e. **Restoring Family Links:** Because of the problems with the electrical supply and telecommunications networks, the damage to affected families' mobile phones and the people reported missing, the Colombian Red Cross Society has activated its RFL network to receive requests from people interested in contacting their relatives. Three posts have been set up to receive requests: CRC Putumayo branch facilities, ITP and the Cemetery; nonetheless, it will be necessary to set up two additional posts due to the large number of requests.

- f. **Livelihoods:** Local markets have been affected, and all crops along the riverside have been completely or partially destroyed. Furthermore, a significant percentage of residents are being housed by friends or relatives, which makes it necessary to develop actions to restore the municipality's economy and commercial activities. The National Society has considered providing unconditional cash transfers to families who are not being housed in collective shelters and who are not receiving assistance from the national government.

- g. **Food security:** The UNGRD, which is currently loading 40 tonnes of emergency humanitarian assistance that includes 2,000 food kits and 1,000 igloo-type tents to use as temporary shelter, has covered the affected population's food needs. To date, the Colombian Red Cross Society has received a total of eight tonnes of non-perishable food and two tonnes of non-food items (toiletries, blankets, mats and various items), which are being shipped to the area.

- h. **Water and sanitation:** The mudslide affected water and sewage services. The following water purification plants are in operation in Vereda Rumbayaco: 2 type A plants with the capacity to produce 30,000 litres and 1 type Z plant with the capacity to produce 178,000 litres; this water is being distributed via 28 tanker trucks. Approximately 40,000 people are currently without access to water services, particularly people in the municipality of Mocoa.

The CRCS – the Postobón company “Litres that Help” campaign has been activated. To date, the CRCS has received 162,000 litres of bottled water donated by other Colombians and Postobón.

## Risk assessment

The main risks identified include:

- Occurrence of new mudslides in the area or flooding from increased rainfall
- Social demonstrations or protests during humanitarian actions
- Possible contamination from explosive devices and anti-personnel mines dislodged by the mudslide.

Based on the above, a plan will be designed to manage the risks identified and those that may arise during the emergency response, and these plans will be shared with the organizations present in the sector to facilitate coordination during response.

## B. Operational Plan and Strategy

### Proposed Strategy

The plan of action is being coordinated with SNGRD at the national, departmental and municipal levels to ensure adequate coordination of actions, coverage of community needs and participation by the national volunteer network and national technical intervention teams. The National Society has begun the search and rescue phase in coordination with relief agencies, and some first phase operational expenses will be covered through this Disaster Relief Emergency Fund (DREF).

The project seeks to respond to the main needs of the affected population over a three-month period; the project will be divided into 2 response phases and 9 lines of intervention:

#### Phase 1- SEARCH, RESCUE AND PRE-HOSPITAL CARE:

- Search and Rescue: Through the deployment of K-SAR teams, rescuers and specialized volunteers in the first 72 hours following the emergency in the assigned area, they will work as members of the SNGRD system.
- Damage Assessment and Needs Analysis: A DANA team will be deployed to identify the main specific needs during the first response phase.
- Pre-Hospital Care: Deployment of emergency medical teams to treat the injured and refer patients to health networks in nearby departments.

#### Phase 2- STABILIZATION:

Following the first 72 hours for search and rescue, these lines of intervention will be considered for the humanitarian assistance process in the first 3 months after the emergency:

##### Primary Health Care:

- One-day Mobile Health Units (MHUs) in collective centres to provide care to affected families and hard to reach rural areas; the MHUs will consist of 2 medical professionals, 4 nursing staff and more than 120 volunteers.
- Delivery of repellents to people housed in collective centres; since the National Society is providing and distributing, it has not been included in the DREF budget.
- Provide 5 first aid kits in the collective centres

Psychosocial Support: In coordination with SNGRD, the Colombian Red Cross Society has been designated to respond to psychosocial support demands:

- Individual interventions in the affected area.
- Deactivation of relief personnel returning from the search for missing persons.
- Psychosocial interventions in the collective centres
- Psychosocial assistance for mass burials.
- Psychosocial support coupled with therapy.

Taking the above into account, 3 teams made up of 3 psychologists, 1 social worker and 1 volunteer Psychosocial Support Group member will be deployed; the CRCS will provide psychosocial support kits to deployed teams. The psychosocial kits have the following contents:

Item	Quantity
Plastic boxes	4
Stationery kit (cardboard, markers, among other items)	1
Crafts kit (clay, paint, paint brushes, among other items)	1
Children's games kit	1

(balls, bingo, rope, among other items)	
Puppet kit	1

#### Water, Basic Sanitation and Hygiene:

- Operation of water treatment plants.
- Hygiene and water management awareness seminars
- Delivery of containers for water transport and storage
- Delivery of household cleaning kits
- Delivery of family hygiene kits.

#### Restoration of Family Links:

- Setting up of five public service points in the municipality
- Coordination actions with Forensic Medicine and ICBF
- Restoring family links
- Setting up of two hotlines in the area

#### Cash Transfer:

- Assessment to determine feasibility study for using cash transfers as a tool to respond to needs identified during the assessment.
- Support through unconditional cash to 75 affected families who are being housed by relatives or friends and who have not received support from the government or subsidies, and assistance from the collective centres.

### **Overall Objective**

Provide humanitarian assistance for 3 months to 300 affected families (1,500 people) in the municipality of Mocoa, Putumayo through search and rescue, cash transfer, primary health care, psychosocial support, water, sanitation and hygiene promotion, and restoration of family links actions.

### **Operational Support Services**

Within the planned programme, specific work teams will be created to identify these needs. Continuous monitoring of the affected families is established to identify their current situation in order to come up with diverse solutions tailored to each situation. In addition, it should be considered that the families' housing situation can suddenly change; therefore, the CRCS must be vigilant about monitoring the situation to be able to adapt responses to the changing context.

### **Human resources**

All volunteer staff, employed staff, and directors implementing humanitarian action have their documents in order (national identification card, military identification for men, current CRCS institutional identification, health insurance and driver's license).

CRCS volunteers are covered against accidents, death by any cause, complete and permanent disability, dismemberment and fees (funeral, medical, AIDS treatment, organ transplant) through an insurance policy assigned through the National Emergency Fund to relief institutions that belong to the National Disaster Risk Management System; this insurance will be in effect for the volunteers following the CRCS's volunteer director's approval of their deployment.

The operation will be supported through the following resources:

- 1 operations coordinator (3 months)
- 1 logistics and financial administrator (3 months)
- 1 doctor (1 month)
- 1 nurse (1 month)
- 1 nursing technician (1 month)
- 2 psychologists (2 months)
- More than 120 volunteers

Based on the emergency and CRCS's branches' local capacity, two National Intervention Team (NIT) members have been deployed to support this operation; Although both specialized NIT members are from branches that are far from Colombia's border regions, they have the acquired shelter and health skills to effectively contribute to this operation.

### **Logistics and supply chain**

The procurement of items and services will fulfil the required conditions according to the needs of the affected population and/or operational areas to guarantee an appropriate level of supplies and optimal performance; all purchases will be made in-country, and the purchase process is conducted using all CRCS procedures, regulations and guidelines, which follow the IFRC's DREF procedures.

Colombia's border with Ecuador is four hours away from the municipality of Mocoa (the San Miguel International Bridge connects Colombia's department of Putumayo to Ecuador), and since the department of Putumaya generally lacks roads to the interior of the country, it might be worth checking to see if the local markets in Ecuador can offer competitive prices on goods that cannot be procured locally in Putumayo.

Finally, as a part of the DREF, a slight increase in operational expenditures has been authorized to cover the cost of the mobilization of the food kits and personnel since the National Society has assumed the responsibilities of preparing the food kits and the potabilization and supply of water to the affected communities.

### **Information Technology (IT)**

The National Society has an installed telecommunications system at the national and branch level through which communication will be maintained with personnel in the field, and IT equipment will support the restoration of family links actions for the affected population.

Because of conditions on the ground and the magnitude of the damages, the National Society is considering purchasing 2 RFL kits composed of computers, office furniture and 6 cell lines. In addition, deliveries and assistance will be recorded via the Mega V system, and beneficiary information will be collected using the Open Data Kit (ODK) system; the CRCS's national headquarters will provide this equipment. To optimize delivery and information gathering times, rapid training sessions will be held to teach volunteer staff how to use this set of tools.

### **Communications and Information**

The Colombian Red Cross Society will establish a platform that makes information available regarding the evolution of the situation, the operation's unmet needs, changes achieved through the actions implemented and the recovery process. International Red Cross Movement components present in Colombia and in the region (the IFRC's regional office for the Americas [ARO]) will have access to information and materials that help the operation advance and show accountability in terms of proper resource use. The CRCS will issue communiqués and press releases disseminated through various mechanisms the National Society uses to provide information on the progress of the operation and beneficiaries' stories. Given the emergency's characteristics, another important aspect is the CRCS's dissemination workshops with actors in the field (authorities, institutions and organizations present in the area) to facilitate the Red Cross' actions.

Finally, a mechanism will be established to monitor beneficiary satisfaction, which will be applied during monitoring visits conducted by CRCS staff in the last phase of emergency response. Various communication and feedback channels will be made available to beneficiaries such as boxes for suggestions, positive comments or complaints; these will be managed by CRCS staff in the targeted areas. Constant communication and feedback with the teams will make it possible to identify the aspects for improvement communicated by beneficiaries directly to CRCS staff.

### **Security**

According to the analysis of the context and of the dynamics of armed conflict and other situations of violence and public order in the country and in the border area, the CRCS currently believes it is necessary to consider the International Movement's Safer Access framework, as well as compliance with the provisions of the CRCS Safety Manual; these are applied by all Movement components in Colombia and in the region, as well as by directors, staff and volunteers from all CRCS branches, prioritizing branches deployed to respond to the emergency.

To strengthen the perception and acceptance of the institution and of its people and increase the visibility of its actions, all branches in the front lines are asked to reinforce operational dissemination actions with local authorities, public forces, social leaders and the media based on the Red Cross's principles of neutrality and independence

The strategy established in Colombian Red Cross Society's Contamination by Weapons (CpA for its acronym in Spanish) programme will be activated in all actions established as a security measure for people, families and relief personnel developing actions in the area.

The Colombian Red Cross Society will draw up a security plan to manage properly the risks in targeted areas. Some of the foreseen risks include the Contamination by Weapons caused by anti-personnel mines and unexploded ordnance unearthed by the mudslide in conflict zones near the municipality.

Lastly, the department of Putumayo, mainly in the municipality of Mocoa, has a large population of people displaced by the ongoing armed conflict in Colombia.

### Planning, monitoring, evaluation and reporting (PMER)

The CRCS's National Relief General Directorate, in coordination with other National Society directorates, is responsible for implementing this plan and providing the appropriate monitoring. A report will be issued 30 days after the start of the operation and another at the end of the operation. Throughout the plan's implementation, the National Society will ensure compliance with established monitoring procedures.

The actions under this plan will be in accordance with the CRCS's internal and external emergency response plan and decentralized branch and municipal unit plans.

The IFRC disaster management coordinator for South America will continue providing technical support, guidance, and monitoring to this operation.

### Administration and Finance

Administrative and finance procedures are framed within CRCS's quality process and support all the National Society's humanitarian mission actions, thereby ensuring operational transparency and accountability.

## C. DETAILED OPERATIONAL PLAN

### Health and Care

**Needs analysis:** To date, 273 people are dead, 262 have been injured and an unknown number of people are still missing; there are also many people with lacerations and bruises that have required first aid services from volunteers in the area.

**Population to be assisted:** People housed in official (government-recognized) and unofficial collective centres, affected people who are not receiving assistance from the national government and people living in hard to reach areas due to damage to roads. Approximately 1,500 people require pre-hospital or psychosocial care.

OBJECTIVES	INDICATORS																
<b>Outcome 1. At least 1,500 affected people housed in collective centres and in hard to reach areas receive pre-hospital care, health promotion and psychosocial support</b>	<b># of people in targeted areas who have access to health services provided by CRCS (SADD<sup>3</sup>).</b>																
<b>Output 1.1</b> At least 300 affected families and first responders receive psychosocial support.	# of PSS consultations conducted # of oral hygiene kits delivered # of repellent units delivered																
<b>Output 1.2</b> Affected families receive pre-hospital care through the Mobile Health Unit	# of people benefitting from psychosocial support activities																
<b>Output 1.3</b> At least 300 affected families receive health promotion information	# of families who receive hygiene promotion																
<b>Activities</b>	<b>Weeks</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>	<b>8</b>	<b>9</b>	<b>10</b>	<b>11</b>	<b>12</b>	<b>13</b>	<b>14</b>	<b>15</b>	<b>16</b>
Deployment of emergency medical teams for pre-hospital care and patient triaging.		x															
Treatment by Mobile Health Units		x	x	x	x	x	x	x	x								
Provision of first aid training and care to the population housed in the collective centres						x	x	x	x	x	x	x	x				
Psychosocial interventions in the collective centres		x	x	x	x	x	x	x	x	x	x	x	x				
Development of health promotion and prevention sessions				x	x	x	x	x	x	x	x	x	x				
Distribution of health promotion informative materials		x	x	x	x	x	x	x	x	x	x	x	x				
Purchase and distribution of PSS kits			x	x	x	x	x	x	x	x							

<sup>3</sup> Sex- and age-disaggregated data

## Water and Sanitation

**Needs analysis:** Approximately 40,000 people are affected by the lack of water supply services, 510 damaged water pipelines and 773 damaged sewer systems. Support is currently being requested for city hospitals.

**Population to be assisted:** Local treatment plants have capacity to assist at least 300 families per day during the emergency phase.

OBJECTIVES	INDICATORS												
<b>Outcome 2. At least 300 families with affected water supplies have safe water suitable for human consumption and hygiene promotion.</b>	<b># of people who receive safe water.</b> <b># of people who receive personal care awareness messages</b>												
<b>Output 2.1</b> Treatment and distribution of safe water to the affected population	# of litres of safe water distributed												
<b>Output 2.2</b> Provide basic sanitation and conduct hygiene promotion actions for the affected population	# of families who receive a personal hygiene kit												
Activities	Weeks	1	2	3	4	5	6	7	8	9	10	11	12
Assessment and definition of actions points for putting water treatment plants into operation		x											
Adaptation and installation of three water treatment plants		x											
Delivery of safe water to families and people in affected areas and collective centres		x	x	x	x								
Purchase and delivery of 600 20-litre buckets		x	x	x									
Hygiene and water management awareness seminars		x	x	x	x								
Delivery of containers for water transport and storage		x											
Delivery of cleaning kits		x	x	x	x								
Delivery of basic family and/or personal hygiene kits.		x	x	x	x								

The Colombian Red Cross Society has activated its water purification and distribution agreement with the National Disaster Risk Management Unit. At the operational level, this activity is included within the plan of action for visibility; however, it is not included in the budget.

The contents of the **family hygiene kits** are as follows:

Item	Amount
<b>Toothbrush - adults</b>	2
<b>Toothbrush - children</b>	2
<b>Toothpaste x 150cc</b>	1
<b>Bath soap</b>	2
<b>Deodorant cream</b>	2
<b>Package of sanitary napkins</b>	2
<b>Razor</b>	2
<b>Laundry soap</b>	2
<b>Cotton towels</b>	2
<b>Rolls of toilet paper</b>	2
<b>Pack of six cloth diapers</b>	1
<b>Diaper pin</b>	1
<b>Glycerine alcohol</b>	1

The contents of the **cleaning kits** are as follows:

Item	Amount
Plastic bucket	1
Broom	1
Mop	1
Dust pan	1
Powdered soap	2
Bleach	2
Thick bristle brush	1

### Restoration of Family Links

**Needs analysis:** After the emergency, thousands of worried citizens eager to know the fate of their relatives have sent more than 1,500 emails requesting information about them, most of which contained incomplete information and imprecise data. Protocols require that the National Society respond to every email and request the required information to be able to move forward with the search. The CRCS is currently the only institution in the country that has an RFL programme; therefore, it receives requests regarding missing people or people whose relatives have been unable to contact after the emergency. Searches are conducted with the official data provided by Forensic Medicine, ICBF, the Public Prosecutor's Office, collective centres, hospitals, and official and private institutions affiliated with the UNGRD-led National Disaster System.

The remaining 319 RFL cases and other requests are still undergoing the process to clarify the information and data of the people being searched for and looking through the lists of the wounded and deceased. It is necessary to consider that the Forensic Medicine Department has officially identified only 125 out of the 273 deceased people to date.

The number of requests continues to increase every day, and quick searches are difficult because of the damage suffered by communications, public services and road infrastructure. The branch has few available volunteers trained in this regard, which makes it necessary to have NIT members with RFL training brought in from other branches, as well as staff trained in Dead Body Management.

**Population to be assisted:** Considering the number of missing people and the increase in emails from people, families and institutions requesting information about their family and friends at both the national and international level, the National Society believes that approximately 1,500 people will benefit from RFL.

OBJECTIVES		INDICATORS											
<b>Outcome 3: Contact restored between family members through reception, handling and response to requests received</b>		<b># of RFL cases received, processed and closed (SADD).</b>											
<b>Output 3.1:</b> Identification and provision of information to families regarding people with whom they have lost contact.		% of people served through the restoration of family links programme											
Activities	Weeks	1	2	3	4	5	6	7	8	9	10	11	12
Setting up of public service points in the municipality		x	x	x	x	x	x	x	x	x	x	x	x
Coordination actions with Forensic Medicine and ICBF		x	x	x	x	x	x	x	x	x	x	x	x
Strengthening of RFL-related advocacy and inter-agency coordination, networking with local authorities, institutions and organizations in the area		x	x	x	x	x	x	x	x	x	x	x	x
Reception and sending of family messages and support in telephone communications		x	x	x	x	x	x	x	x	x	x	x	x
Purchase of equipment for 2 RFL kits		x											
Reception of national and international requests by Red Cross branches and National Directorate		x	x	x	x	x	x	x	x	x	x	x	x

These activities are being led by Colombian Red Cross Society. To develop such activities, the plan provides for the purchase of two RFL kits that include computers for online recording of requests at the ICRC's web page <https://familylinks.icrc.org/> to facilitate communication for the affected people.

## Food Security

### Needs analysis:

The mudslide's partial or complete destruction of small and medium-sized businesses is one of the most significant impacts to the municipality's and the region's socio-productive development and management; this has affected neighbourhoods by displacing a high percentage of vulnerable families that engaged in informal activities such as selling data plans and cellular phones, small grocery and candy stores, street sales, among others.

**Population to be assisted:** At least 300 affected families, who are not being assisted by national government, through the provision of food kits.

OBJECTIVES		INDICATORS											
<b>Outcome 4: At least 300 affected families meet their food needs</b>		<b># of families served</b>											
<b>Output 4.1:</b> At least 300 affected families have food rations		<b># of food kits distributed</b>											
Activities	Weeks	1	2	3	4	5	6	7	8	9	10	11	12
Food collection campaign		x	x	x									
Food transport		x	x	x	x	x	x	x	x	x	x	x	x
Food distribution		x	x	x	x	x	x	x	x	x	x	x	x

The Colombian Red Cross Society has been conducting a food collection campaign, which it is using to assemble food rations to last for one month. The operation will help to cover transportation and distribution costs.

### Quality programming / Areas common to all sectors

OBJECTIVES		INDICATORS											
<b>Outcome 5. CRCS implements needs-based monitoring mechanisms.</b>		<b>One monitoring and evaluation plan implemented</b>											
<b>Output 5.1</b> A monitoring and reporting for the plan of action is developed and implemented		<b># of monitoring visit reports</b> <b># of people surveyed</b>											
Planned activities	Weeks	1	2	3	4	5	6	7	8	9	10	11	12
Damage Assessment and Needs Analysis development		x											
Monitoring by the National Society		x	x	x	x	x	x	x	x	x	x	x	x
Preparation and submission of project monitoring reports		x	x	x	x	x	x	x	x	x	x	x	x
Staff recruitment		x	x										
Monitoring by the IFRC		x	x	x	x	x	x	x	x	x	x	x	x
Beneficiary satisfaction survey												x	x
Monitoring, follow-up and attention to beneficiary complaints		x	x	x	x	x	x	x	x	x	x	x	x
<b>Output 5.2</b> 75 prioritized families receive financial support through the unconditional cash transfer programme (CTP) to meet their most pressing needs		<b># of monitoring visit reports</b> <b># of families benefited</b> <b># of cash transfers delivered</b>											
Planned activities	Weeks	1	2	3	4	5	6	7	8	9	10	11	12
Market study		x											
Beneficiary selection		x	x	x	x	x	x	x	x	x	x	x	x
Talks on CTP use/objectives provided to beneficiary families		x	x	x	x		x	x	x	x	x	x	x
Cash transfer delivery for USD 300		x	x	x	x	x	x	x	x	x	x	x	x

The National Society has experience implementing cash transfer programmes in development projects, and it will provide qualified personnel for this purpose.

The CTP will cover the affected families' basic humanitarian needs; the amount was calculated based on the minimum salary in Colombia.

## Contact information

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

#### In Colombian Red Cross Society:

- Fernando José Cárdenas Guerrero, president; phone + 571 437 6300; email: [presidencia@cruzrojacolombiana.org](mailto:presidencia@cruzrojacolombiana.org)
- César Augusto Ureño Pulido, general director for relief; phone: 571 437 5300 ext. 6659; email: [cesar.urena@cruzrojacolombiana.org](mailto:cesar.urena@cruzrojacolombiana.org)

#### In IFRC Regional Office for the Americas:

- Inigo Barrera, disaster response and crisis and early recovery coordinator; phone: +507 317 3050; email: [ci.barrera@ifrc.org](mailto:ci.barrera@ifrc.org).
- Stephany Murrilo, Regional Senior Logistics & Mobilization Officer, Phone: +507 317 3050; email: [Stephany.murillo@ifrc.org](mailto:Stephany.murillo@ifrc.org)
- Diana Medina, communications manager for the Americas, phone: +507 6780-5395; email: [diana.medina@ifrc.org](mailto:diana.medina@ifrc.org)

#### In Geneva:

- Cristina Estrada, response and recovery lead, phone: +41.22.730.4529, email: [cristina.estrada@ifrc.org](mailto:cristina.estrada@ifrc.org)

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

- Priscila Gonzalez, planning, monitoring and reporting coordinator; phone: +507 317 3050; email: [priscila.gonzalez@ifrc.org](mailto:priscila.gonzalez@ifrc.org)

### For Resource Mobilization and Pledges:

- Marion Andrivet, emergency appeals and marketing officer, phone: +507 317 3050; email: [marion.andrivet@ifrc.org](mailto:marion.andrivet@ifrc.org)

# DREF OPERATION

MDRCO012 - Colombia Mudslide

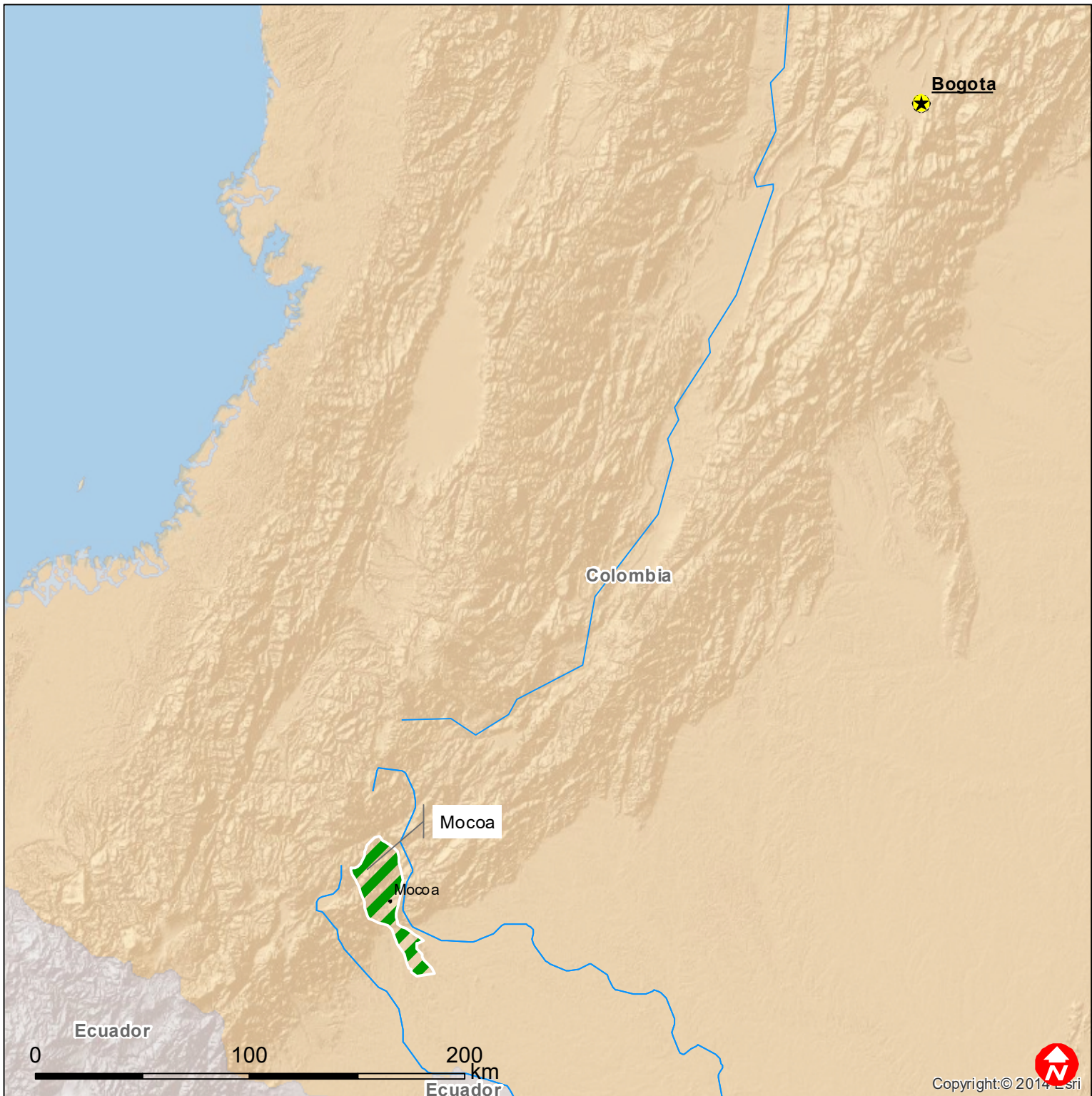
07/04/2017

Budget Group	DREF Budget CHF
Shelter - Relief	0
Shelter - Transitional	0
Construction - Housing	0
Construction - Facilities	0
Construction - Materials	0
Clothing & Textiles	0
Food	0
Seeds & Plants	0
Water, Sanitation & Hygiene	9,018
Medical & First Aid	7,515
Teaching Materials	12,825
Ustensils & Tools	12,024
Other Supplies & Services	0
Cash Disbursements	22,545
<b>Total RELIEF ITEMS, CONSTRUCTION AND SUPPLIES</b>	<b>63,927</b>
Land & Buildings	0
Vehicles	0
Computer & Telecom Equipment	0
Office/Household Furniture & Equipment	0
Medical Equipment	0
Other Machinery & Equipment	0
<b>Total LAND, VEHICLES AND EQUIPMENT</b>	<b>0</b>
Storage, Warehousing	0
Distribution & Monitoring	5,010
Transport & Vehicle Costs	3,006
Logistics Services	0
<b>Total LOGISTICS, TRANSPORT AND STORAGE</b>	<b>8,016</b>
International Staff	0
National Staff	0
National Society Staff	20,841
Volunteers	5,711
Other Staff Benefits	0
<b>Total PERSONNEL</b>	<b>26,553</b>
Consultants	0
Professional Fees	0
<b>Total CONSULTANTS &amp; PROFESSIONAL FEES</b>	<b>0</b>
Workshops & Training	0
<b>Total WORKSHOP &amp; TRAINING</b>	<b>0</b>
Travel	1,503
Information & Public Relations	3,156
Office Costs	2,525
Communications	1,563
Financial Charges	301
Other General Expenses	0
Shared Office and Services Costs	0
<b>Total GENERAL EXPENDITURES</b>	<b>9,048</b>

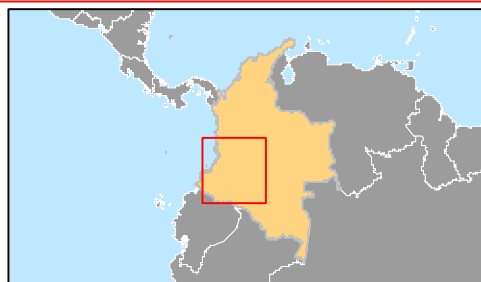
Partner National Societies	0
Other Partners (NGOs, UN, other)	0
<b>Total TRANSFER TO PARTNERS</b>	
Programme and Supplementary Services Recovery	6,990
<b>Total INDIRECT COSTS</b>	<b>6,990</b>
<b>TOTAL BUDGET</b>	<b>114,534</b>




# Colombia: Mudslide



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 Affected Municipality