

Emergency Plan of Action operation update

Haiti: Hurricane Matthew

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| Emergency appeal no. MDRHT013 Operations Update no. 4 | GLIDE no. TC-2016-000106 |
| Date of issue: 18 April 2017 | Timeframe covered by this update: 06 February 2016 to 31 March 2017. |
| Operation start date: 6 October 2016 | Operation timeframe: 18 months; and end date: 6 April 2018 |
| Overall operation budget: 28,236,416 Swiss Francs | DREF amount initially allocated: 565,000 Swiss francs |
| No. of people affected: 2.1 million people | No. of people being assisted: 147,500 people (29,500 households) |
| Red Cross Red Crescent Movement partners currently actively involved in the operation: The International Committee of the Red Cross (ICRC), American Red Cross, Canadian Red Cross Society, Dominican Red Cross, French Red Cross, German Red Cross, Italian Red Cross, Japanese Red Cross Society, the Netherlands Red Cross, Spanish Red Cross and Swiss Red Cross; and the International Federation of Red Cross and Red Crescent Societies (IFRC). | |
| Other partner organizations actively involved in the operation: The Haitian Department for Civil Protection (DPC). | |

<Click [here](#) for the interim financial report. Click [here](#) for the contact information >

A. Situation analysis

Description of the disaster

Hurricane Matthew struck Haiti on 4 October 2016 as a Category 4 hurricane, causing massive destruction mainly in the departments of Grand-Anse, Sud, Nippes, and Nord-Ouest and to a lesser extent in Sud-Ouest and Ouest departments. The government reported 546 deaths and 439 injuries because of the hurricane. About 2.1 million people were affected, including 806,000 people in need of urgent food assistance¹.

In the first three months following the disaster (October to December 2016), the HRCS, with support from its Movement partners, promptly responded by distributing highly needed emergency items to about 42 470 families². Operations update 1, 2 and 3³ provided further details on Red Cross Red Crescent (RC/RC) Movement achievements during the emergency phase of the operation.



Photo 1: HRCS volunteers conducted hygiene promotion activities to help prevent water-borne diseases in Anse d'Hainaut. Source: IFRC

The recovery phase of the operation, which was expected to begin on 1st January 2017, was delayed due to the enormous challenges registered during the emergency phase. Some of those challenges included recruiting the

¹ OCHA [Situation Report No. 10](#) and [Situation report No. 17](#)

² The Dashboard showing RCRC Movement achievements during the emergency phase of Hurricane Matthew can be viewed by clicking [here](#).

³ Kindly follow this [link](#) to view Operations update 1, 2 and 3.

appropriate staff for the rolling out of the recovery phase, finalising contracts with service providers for cash transfer distributions before the 2017 planting season in Haiti, the security constraints posed by the socio-political situation in intervention areas, and the need to prioritise activities taking into consideration available funding as the appeal coverage has remained very low.

This Operations update No 4 is highlighting the progress made by the RC/RC Movement in Haiti in Response to Matthew Operation from February to March 2017. The salient achievement during this reporting period was in water, sanitation and hygiene promotion (WASH). Hurricane Matthew destroyed water distribution systems in affected localities, leaving available water sources contaminated. The WASH team pursued the distribution of water purification tablets, restored water distribution systems in parts of Grand-Anse Department, mainly in Anse d’Hainault and les Irois, in close collaboration with local Government authorities as illustrated by these letters acknowledging the work done by the Red Cross.

Currently, the international appeal has received approximately 7,851,498 Swiss francs in hard and soft pledges. Approximately 1,231,446 Swiss francs in bilateral contributions have also been registered (including ERU). To date, the appeal has received financial or in-kind contributions from: American Red Cross, British Red Cross/ British government, Canadian Red Cross Society/Canadian government, Credit Suisse Foundation, Danish Red Cross (from Ole Kirk’s Fond), the United Kingdom’s Department for International Development (DFID), the Directorate-General for European Civil Protection and Humanitarian Aid Operations (DG ECHO), French Red Cross, Finnish Red Cross, the Red Cross Society of China’s Hong Kong branch, private donors in Great Britain, the Italian government’s bilateral emergency fund, Japanese Red Cross Society/Japanese government, private donors in Luxembourg, Liechtenstein Red Cross; private donors in the Netherlands, the Netherlands Red Cross, Monaco Red Cross/Monaco government, the Republic of Korea government and the Republic of Korea National Red Cross, Qatar Red Crescent Society, Singapore Red Cross Society, Spanish Red Cross, private donors in Spain, Swedish Red Cross, Swiss Red Cross/Swiss government, Iranian Red Cross, New Zealand Red Cross, Barbados Red Cross, Mexico Red Cross, private donors in Switzerland, the United Nation’s Development Programme from Chilean government, UL LLC Underwriters Laboratories, UNDP - United Nations Development Programme (from Chile Government), private donors in the United Arab Emirates, private donors in the United States of America, Voluntary Emergency Relief Fund (VERF)/WHO, private donors in Kenia. The International Red Cross and Red Crescent Movement on behalf of the HRCS thank all donors and partners for their support.

Summary of current response

Overview of Host National Society

HRCS is guiding the operation, which is being supported by Red Cross and Red Crescent partners working in Haiti and coordinated by the Directorate of Civil Protection (DPC) at the national and local level.

Red Cross volunteers and National Society staff in affected localities, namely Sud, Grand-Anse, Nippes, Sud-est, Ouest and Nord-Ouest departments, have been mobilized to work in close collaboration with Movement partners to assist the most vulnerable people. The information on achievements by Movement partners are centralized on an online-based smart sheet where they are validated by the Haitian Red Cross prior to being used for reports and other publications.

Overview of Red Cross Red Crescent Movement in country

The Participating National Societies (PNS) active in country are: American Red Cross, the Canadian Red Cross Society, Dominican Red Cross, French Red Cross, German Red Cross, Italian Red Cross, Japanese Red Cross Society, Netherlands Red Cross, Spanish Red Cross and Swiss Red Cross, which support the HRSC on programmes throughout the country; they have been actively involved from the beginning of the operation either through assessments activities, sensitization, logistical support, distributions, financial and in-kind resources and now through coordination efforts in operationalizing a Movement-wide plan of action to respond to the affected population’s immense needs. The following table indicates the localities of intervention and the Movement member supporting the Haitian Red Cross in aiding affected people during the recovery phase that began in January 2017:

Table 1: Movement members involved in the recovery phase of the response to Hurricane Matthew

| Affected Departments | Movement members | | | | | |
|----------------------|---|--------------------|-----------------------|-------------------|-----------------|---------------------|
| | IFRC | American Red Cross | Netherlands Red Cross | Italian Red Cross | Swiss Red Cross | Dominican Red Cross |
| Grand-Anse | Health, WASH, Livelihoods, Shelter, Community Engagement and Accountability (CEA), Disaster | | | | Shelter | WASH |

| | Risk Reduction (DRR) | | | | | |
|-------------------|----------------------|---|------|---------------------|------|--|
| Nippes | | WASH, Livelihoods, Shelter, Community Engagement and Accountability (CEA) | | | | |
| Nord-ouest | | WASH, Livelihoods, Shelter, Restoration of Family Links (RFL), Safer Access | | | | |
| Ouest | | WASH, Livelihoods, Shelter | | Health, Livelihoods | WASH | |
| Sud | | Health, WASH, Livelihoods, Shelter | WASH | | | |
| Sud-est | | | | | | |

Needs analysis and scenario planning

The HRCS has been working in collaboration with the government to prioritize intervention areas. The **Sud, Grand-Anse, Nippes, Sud-est, Ouest** and **Nord-ouest departments** have been designated as most affected by hurricane Matthew. In addition, market assessment has been conducted and confirmed the feasibility of cash transfer programming as part of livelihood recovery and shelter interventions.

Risk Analysis

Since 6 January 2017, humanitarian operations in Grand-Anse and Sud were either temporally suspended or limited in relation with the arrest of senator-elect Guy Philippe and the demonstrations and road blocks that followed. The week beginning 16 January 2017, activities have fully resumed in Sud and slowly in Grand-Anse.

Additionally, since 1 January, three cases of looting or attempted looting have been reported against humanitarian convoys in the Sud region. In some instances, it was reported to OCHA that humanitarian actors may be directly targeted by looters who explicitly ask drivers whether the goods transported belong to a private company or an NGO before looting them⁴.

B. Operational strategy and plan

Overall Objective

The overall objective of this operation is to ensure that people affected by Hurricane Matthew in the Sud, Grand-Anse, Nippes, Sud-Est, Ouest and Nord-Ouest departments receive appropriate assistance in a timely, effective, and efficient manner; and that they are provided with the necessary support to recover with increased disaster resilience.

The response is focusing on health; water, sanitation and hygiene promotion; shelter (including household non-food items); livelihoods, food security; disaster risk reduction and restoring family links. The response also includes components of community engagement and accountability and safer access.

Proposed strategy

Continuous assessment during the emergency phase enabled the Movement team to rethink the operation. The new findings led to the revision of the Emergency Plan of Action in December 2016. The sectors of intervention that have been retained for the recovery phase of the operation (Health, WASH, Shelter, and Livelihoods) are planned and will be implemented in an integrated manner. However, the operation team has identified the top priority activities that are

⁴ [OCHA, Situation Report No 32](#)

currently being implemented. This was based on the funding available. All planned activities will be implemented when funding will be available.

Operational support services

Human resources

In the initial stage of the operation, the surge capacity was deployed through the Global surge capacity desk in Geneva and Panama. The normal recruitment procedures, through IFRC HR services, began after the identification of the operation's needs. Most positions identified for the recovery phase have already been filled. The WASH delegate who was recruited since January 2017 finally arrived in Port Au Prince on 28 March 2017. His deployment had been delayed by domestic reasons relating to passport and visa. Nevertheless, IFRC maintained an RDRT WASH delegate in country until mid-March 2017 to cover for this gap. The selection of national staff involved in the operation was done jointly by the Haiti Red Cross Society and Haiti Cluster office. The daily workers and the Red Cross volunteers are managed per the Haitian Labour Law and the volunteers' policy of the Haitian Red Cross Society.

Logistics and supply chain

During this reporting period, the IFRC Logistics team in Haiti downsized the logistics structure and the vehicle fleet for the operation to adjust cost to the limited budget. The Haiti Logistics Cluster (WFP) ended services of armed convoys, 4x4 trucking and temporary warehousing services provision in the field on the 28/02/2017. UNHAS ended passenger flights to Les Cayes and Jérémie on the 14th of February 2017.

Main logistics activities were focused on dispatching the last health items from Diquini warehouse to Jérémie, opening the new IFRC office in Jérémie, solving issues of tax exemption requests not signed by the Ministry of Health, follow up of the Cash Transfer Program tender, the preparation of IFRC SG visit (11-14 March), follow up of the project "HRC Base Camp cleaning", and follow up of local procurement, fleet management, local air and road transport (pax). The first 2 VRP vehicles shipped from Panama for the operation in October 2016 were cleared and registered on the 24th of February: these vehicles are now operational in Grand-Anse. Logistics participated in the Shelter Coordination meeting with other PNS to better understand the needs and provide solutions to logistics constraints.

Challenges:

- **Cash Transfer Programme (Livelihoods and Shelter Programmes)**
Unitransfer took the decision to stop their participation to the CTP tender due to what they referred to as "unacceptable terms and conditions from the IFRC". After risk and finance analysis, it was decided to try to get Unitransfer back to the tender. After a meeting with the Log Coordinator, Unitransfer accepted to start again the negotiation for the Cash Transfer Programme and a second working meeting was held on the 20th of February. The contract is expected to be signed before the end of March 2017.
- **32 vehicles to be cleared (6 for the operation)**
End of February, the letters for tax exemption of the vehicles were finally signed by the Minister of Health, 13 weeks after having received the request through the Haitian Red Cross. It is expected that the vehicles should be cleared from Customs and registered by the end of March 2017.
- **The "Cleaning of the Haitian RC Base Camp" project**
The objective is to reach an agreement with the Haitian Red Cross for the setup and the launch of the disposal of old vehicles and other assets. Inventory was made during the month of February and a MoU related to the sale by public tender is in preparation.

Information technologies (IT)

Before Hurricane Matthew hit Haiti, the IT unit in Haiti was already involved in preparedness activities. Several mobile handsets and satellite phones were deployed for IFRC and National society staff to support the advanced team in place prior to the hurricane.

Immediately after the hurricane hit, increased support was provided to the FACT team that was deployed to Haiti to kick-start the operation. The support included preparation and deployment of Laptops, ODK kits, satellite devices, and remote support. A higher bandwidth was negotiated with internet service providers to support the traffic generated by the large amount of staff arriving.

Fast solutions were implemented to provide mobile internet, print capacity and enough computers for newly hired staff. A dedicated 1 MB was provided to the shared IFRC and HRC area to allow emergency team to work effectively. For Jérémie, some effort has been deployed to have a proper internet connection at the main office and the branch office at Anse-d'hainault, and the IT unit is providing support to make communication easier for staffs, more than 50 Users have been added to the CUG communication system to reduce communication cost. A security alert system has been proposed by security and implemented by the IT unit to notify quickly and effectively all Federation and operation staff in Haiti in the event of security issues.

The challenges are to keep the old computers alive. Most of the laptops and desktops have reached their end of life and cannot achieve good performance, spare parts are no longer available locally. Printers in place are too old and toner get discontinued quickly.

Information Management

The HRCS set up an online platform for information management with support from the IFRC Information Management (IM) Team. This platform is built from a backend database (Smartsheet®) and frontend dashboards for information and documents dissemination: public ([Operation: Hurricane Matthew Dashboard](#)) and private. Initially dedicated to common vulnerability analysis, monitoring process and evaluation for all members of the RCRCM, the platform evolved to serve operational and coordination purposes. The backend tool also helped defining budget and human resources (stored job descriptions) for each sector.

To consolidate all information of the RCRC Movement members involved in the response, the IM team created different matrixes in the online tool Smartsheet, which can be fed easily from the field, from any part of the country, and even from the HQ of any RCRCM member. The distribution matrix has been adopted by other agencies to consolidate different partner's interventions.

Planned and performed distributions, as well as planned and performed activities within all sectors are gathered through the forms, and further disseminated through all RCRCM members and the external stakeholders through the requested formats, after being processed and validated by the NS. Gathered data is processed and displayed real-time in numbers, graphs, maps and tables within the Hurricane Matthew Dashboard after validation by the HRCS.

Activities are reported as aligned with the [Revised Emergency Plan of Action \(REPoA\)](#) and will contribute to reporting on the REPoA and the Movement-wide response.

Communications

During this reporting period, the communications team produced a brochure summarizing the emergency phase, pictures, and a film on the operations summarizing the emergency and the transit to the recovery phase. The team also put in place a stand for the Haitian Red Cross meeting on cooperation agenda. More communication deliverables will be made available when the remaining activities of the operation will be implemented.

Security

The social and political context is monitored on a weekly basis by IFRC Security Unit, UN, ICRC and HRCS and the security regulations are in place and followed. During this reporting period, there were some socio-political events associated with the general elections in the country, which hampered the smooth implementation of activities planned. In Grand-Anse Department particularly where IFRC-supported activities are planned, a newly elected senator was arrested and that created a wave of violence in the department, leading to the disruption of activities for at least one month. Thus, mitigation measures such as travel restrictions, contingency and relocation plans, and ongoing security risk assessments were applied.

The HRCS's President has the ultimate responsibility for the safety of staff and volunteers during the implementation of the plan of action. Clearly established security regulations and protocols for this operation are in place and strictly adhered to. In this regard, the National Society has put restrictions on the use of National Road #1 due to tensions in Arcahaie. The populations in that commune are angry with a presidential decree that transformed the area of Montrouis into a commune. While negotiations with the population has started to solve this issue, the HRCS recommends vigilance.

On 15 March 2017, angry security workers at the Toussaint Louverture International Airport went on strike demanding better working conditions. This caused delays and cancelation of several flights. Although the strike was lifted following an agreement reached between the strikers and officials of the National Airport Authority (AAN), these are signs that security remains volatile in the country and needs close monitoring.

Planning, monitoring, evaluation, & reporting (PMER)

The Real-Time Evaluation (RTE) of the operation was conducted in February 2017. While the results are yet to be known, some major findings are already being used to improve the operation's implementation.

The Information Management and PMER teams worked in close collaboration and came up with an updated version of the reporting format which is now being used to collect data through the Operation's Smart sheet. The changes were made to ensure that all activities reported through the Smart sheet are aligned with the Revised Emergency Plan of Action (REPoA) for the operation. All the Movement partners involved in the operation have been informed properly about the changes made in the smart sheet reporting form. They have also been given the opportunity to provide feedback and suggestions for improving the form as it is a dynamic tool. The PMER delegate for the Operation travelled to Jérémie and Anse d'Hainault and trained field staff on how to properly collect data and how to feed it into the smart

sheet. Because of this effort, the Community Engagement and Accountability (CEA) officer has started adding reports on CEA activities in the system from Jérémie.

Efforts to finalise the log frame and indicator tracking table (ITT) for the operation have started, but the process is being delayed by some coordination issues, which are currently being considered. The team is closely monitoring reports deadlines, and could submit in time the one pledge-based report that was expected during this reporting period.

Administration and Finance

During the first months of the operation, the major task was to discuss with the various project managers their budgets and agree on prioritization of funds available as compared to the appeal budget. A budget in line with the available funding was agreed upon with the various sectors leads and implementation started with the agreed planning.

The funding stands now at around 55% of appeal budget, which makes it quite difficult to reach all set objectives and activities in the Plan of Action. Several trade-offs were necessary to remain within the available funding, which may impact final delivery and certainly impact number of targets.

Despite a few delays at program start, most of the staff had joined by end of January. We are still awaiting final decision on the WASH position as activities pertaining to that sector have been almost finalized in accordance to available funding.

It has proven challenging to set up the offices in Jérémie and Anse d'Hainault due to lack of infrastructure in the selected areas. The team could identify a place where the office may be based but must make a lot of repairs to make it work for the operation and can accommodate the office and the delegates. The office forecasted initially in "Les Irois" was cancelled due to lack of funding.

Discussions have started with the various Participating National Societies to be able to integrate the movement wide financial reports into one, with all National Societies, the Secretariat and the ICRC reporting through the same framework.

C. Detailed Operational Plan

Health & Care

| Health & care | | | |
|---|---|--------|-----------------------|
| Outcome 1. The immediate risks to the health of affected populations are reduced. | Outputs | | % of achievement |
| | Output 1.1 Target population is provided with first aid services | | 80% |
| | Output 1.2: Psychosocial first aid and psychosocial support activities are provided to people affected by the impact of Hurricane Matthew | | 68% |
| | Output 1.3 Epidemic prevention measures carried out in areas affected by Hurricane Matthew | | 61% |
| | Output 1.4: Increased access to healthcare services and prevention of maternal/new-born mortality through the use of mobile clinics | | 83% |
| Activities | Is implementation on time? | | % progress (estimate) |
| | Yes (x) | No (x) | |
| 1.1.1 Procurement and deployment of first aid kits | X | | 100% |
| 1.1.2 Procurement and deployment of personal protection equipment to the volunteers | | X | 75% |
| 1.1.3 Support the training of HRCS volunteers in the provision of first aid | X | | 100% |

| | | | |
|---|-----------------|-----------------|------|
| 1.1.4 Provision of first aid to beneficiaries | X | | 50% |
| 1.1.5 Design and reproduction of messages on which actions to take during situations of immediate health risk, to be disseminated in affected communities or collective centres. | X | | 75% |
| 1.1.6 If needed, implement CBHFA approach | | | % |
| 1.2.1 Reproduction and printing of information on stress management and coping mechanisms | X | | 25% |
| 1.2.2 Training of Trainers (ToT) on psychosocial support (PSS) activities for HRCS volunteers. | | X | 100% |
| 1.2.3 Provision of psychological first aid to communities during mobile clinics based on HRCS standards | X | | 100% |
| 1.2.4 Implementation of psychosocial support activities (managing stress, strengthening coping mechanisms, preventing violence in collective centres) during mobile clinics and in target communities | X | | 100% |
| 1.2.5 Provision of psychosocial support to volunteers | | X ⁵ | 40% |
| 1.2.6 Support the health and well-being of staff and volunteers including PSS. | X | | 40% |
| 1.3.1 Reprinting of Information Education Communication (IEC) materials on cholera, vector borne diseases and STIs (with Wash) | X | | 100% |
| 1.3.2 Support the HRCS in implementing its existing community mobilization strategy to decrease the risk of vector- and waterborne diseases transmission | | X ⁶ | 35% |
| 1.3.3 Active case finding and surveillance for cholera as part of mobile clinics | X | | 100% |
| 1.3.4 Assessment of need of Surveillance in Grand-Anse | | X ⁷ | % |
| 1.3.5 Support the HRCS in implementing the community based epidemiological surveillance (SEBAC) of infectious diseases transmission (Cholera, Zika, Chikungunya, Malaria and other disease immune-controllable) | | X ⁸ | % |
| 1.3.6 Develop an integrated WASH/health program addressing communicable disease including waterborne- and vector borne diseases and STIs. | X | | 50% |
| 1.3.7 Awareness campaign on cholera prevention | | X ⁹ | % |
| 1.3.8 Engagement in emergency OCV immunization campaigns led by MSPP, primarily through community sensitization and mobilization based on HRCS standards ¹⁰ | X | | % |
| 1.3.9 Distribution of 25,000 mosquito nets units (10,000 households) | X ¹¹ | | 30% |
| 1.3.10 Procurement and provision of condoms (100.000) ¹² | X | | 50% |
| 1.3.11 Implement existing programs of prevention of cholera transmission. | | | % |
| 1.4.1 Set up a mobile primary health care clinic program. | X | | 100% |
| 1.4.2 Clinical management of primary health care in mobile clinics | X | | 100% |
| 1.4.3 Targeted immunization | | X ¹³ | % |
| 1.4.4 Data collection and regular reporting as per MSPP requirements | X | | 100% |
| 1.4.5 Management of medicines and medical consumable supply chain supporting mobile clinic. | X | | 100% |

⁵ This training will come after the ToT training on PSS. Hopefully in february 2017

⁶ This is a joint Health-Wash activity to be carried out after the Epidemic Control for Volunteers (ECV) training

⁷ After discussions with HRC and IFRC, we all agreed to drop this activity as it is already covered by Ministry of Health.

⁸ After discussions with HRC and IFRC, we all agreed to drop this activity as it is already covered by Ministry of Health.


⁹ Cholera awareness campaign is already planned by Ministry of Health. This activity is not prioritised now to avoid duplication

¹⁰ 2nd round planned for February 2017 with MSPP

¹¹ This activity is planned for February to March 2017

¹² 3000 available in Jeremy warehouse for ECV and PSS activities

¹³ ERU mobile clinic doesn't include this activity, but population received vaccination through the Ministry of Health regular immunization program (EPI) supported by Unicef and WHO

| | | | |
|---|---|--|------|
| 1.4.6 Ongoing assessment and repair/support of functionality of damaged health facilities in targeted areas | X | | 100% |
| Progress towards outcomes | | | |
| <p>Haitian Red Cross with IFRC support</p> <p>During this reporting period, the Haitian Red Cross Society (HRCS) supported by IFRC organized simultaneous training sessions on basic first aid in 7 Communes of Grand-Anse Department. The training sessions that took place from 20 to 24 February 2017 was attended by 166 HRCS volunteers (69 women and 97 men) from the 7 communes targeted, on the basis of 25 (10 women and 15 men) from Anse d'Hainault, 25 (11 women and 14 men) from Les Irois, 25 (16 women and 9 men) from Moron, 24 (8 women and 16 men) from Chambellan, 24 (7 women and 17 men) from Roseaux, 25 (11 women and 14 men) from Beaumont and 18 (6 women and 12 men) from Pestel. The sessions were organized at the HRCS training center with 14 facilitators (First Aid monitors & instructors).</p> |  <p data-bbox="671 817 1182 846">First aid training session in Jérémie. Source IFRC</p> | | |
| <p>During the carnival period in Haiti (from 26 to 28 February 2017), HRCS volunteers with psychosocial support (PSS) experience paraded the streets of the major cities popularizing PSS messages, using condoms distribution as entry activity to draw people attention. 3 000 people received HIV prevention message in Grand-Anse during the carnival. 6 912 male condoms were distributed during the same occasion. HRCS volunteers also distributed messages on safe blood donation.</p> | | | |
| <p>As part of the preparation for the above-mentioned training on first aid, IFRC supported HRCS in printing 200 albums on cholera and malaria prevention. These tools were distributed to 166 HRCS volunteers who attended the first aid training in Grand-Anse Department.</p> | | | |
| <p>The 150 first aid kits provided by Qatar Red Crescent were received in Jeremie by the IFRC team, and distributed in 7 communes of Grand-Anse Department, namely Anse d'Hainault, Les Irois, Moron, Chambellan, Roseaux, Beaumont and Pestel.</p> | | | |
| <p>From 14 to 17 March 2017, IFRC & HRCS conducted a Training of Trainers (ToT) in Jérémie for 23 HRCS volunteers from 6 communes.</p> | | | |
| <p>Haitian Red Cross (HRCS) with Italian Red Cross (ItRC) support</p> <p>Although activities around blood donation have not been targeted in the Revised EPoA, the ItRC supported the HRCS with activities in this area. The activities implemented during this reporting period, which are all aligned with Outcome 1 of the REPoA, included the collection of blood bags and the training of matrons on safe child delivery techniques. Thanks to this support, 111 blood bags were collected respectively in the communes of Croix-des-Bouquets (41 blood bags), Tabarre (28 blood bags), Carrefour (35 blood bags) and Pétion-Ville (7 blood bags), all in Ouest Department (Port-au-Prince).</p> | | | |
| <p>In addition, ItRC also supported the training of 16 matrons who then received certificates from the Ministry of Public Health. On the graduation occasion, the trainees also received child delivery kits.</p> | | | |
| <p>Challenges:</p> <p>Considering how difficult it was to get the electronic copy of the tools, which had been developed during Earthquake and Sandy operations, the IFRC and HRCS marked it as a lesson learned to always keep an electronic copy of tools developed for future use or reference. For this activity to be complete, IFRC had to resource to the external service provider who had printed the documents in the past, and whom luckily had kept an electronic copy. If not, it would have been more expensive and time consuming to start the development of the tools from scratch.</p> <p>Moreover, organizing training sessions in 7 communes at the same time turned out to be very challenging in a context with limited logistics resources, compounded by sociopolitical unrest associated with the arrest of a Senator from Grand-Anse Department. In future, it will be best to involve Logistics, Finance, Administration and Security departments in such activities earlier enough to ensure smooth unfolding.</p> | | | |

Water, sanitation, and hygiene promotion

| Water, sanitation, and hygiene promotion | | | |
|--|---|--------|-----------------------|
| Outcome 2 Immediate reduction in risk of waterborne and water related diseases in targeted communities for 11,000 households | Outputs | | % of achievement |
| | Output 2.1 Continuous assessment of water, sanitation and hygiene situation is carried out in targeted communities | | 70% |
| | Output 2.2 Distribution of Water and sanitation emergency items which meet Sphere standards to at least 11,000 households in areas affected by Hurricane Matthew | | 98% |
| Activities | Is implementation on time? | | % progress (estimate) |
| | Yes (x) | No (x) | |
| 2.1.1 Training of HRCS HP volunteers and trainers in targeted communities | | X | 100% |
| 2.1.2 Assessment of the water, sanitation and hygiene situation in targeted communities using RAMP technology | X | | 50% |
| 2.1.3 Production, printing and distribution of IEC materials | X | | 50% |
| 2.1.4 Continuous monitoring of the water, sanitation and hygiene situation in targeted communities | X | | 50% |
| 2.1.5 Coordination with other WASH actors and respective authorities on target group needs and appropriate response | X | | 100% |
| 2.2.1 Procurement of 11,000 buckets | X | | 100% |
| 2.2.2 Procurement and prepositioning of 11,000 hygiene kits | X | | 100% |
| 2.2.3 Procurement of 22,000 jerry cans (2 per family) | X | | 100% |
| 2.2.4 Procurement and prepositioning of water purification tablets for 11,000 households | X | | 100% |
| 2.2.5 Provide safe water to the affected community | X | | 100% |
| 2.2.6 Distribution of WASH emergency non-food items to affected communities | X | | 100% |
| 2.2.7 Provide information to the population of targeted communities on safe use of water treatment products and safe water storage | X | | 100% |
| 2.2.8 Monitor treatment and storage of water through household surveys (post distribution monitoring) | X | | 100% |
| 2.2.9 HP activities around use of WASH NFIs provided to the target communities | X | | 100% |
| 2.2.10 Disseminate hygiene promotion messages through radio programs | X | | 75% |
| Progress towards outcomes | | | |



Photo 2: Haitian Red Cross volunteer being trained on hygiene promotion in Jérémie. Source: IFRC.

Haitian Red Cross with IFRC support

20 HRCS volunteers were trained on home-based water quality assessment in 7 communes of Grand-Anse, namely Anse d'Hainault, Les Irois, Moron, Chambellan, Roseaux, Beaumont and Pestel. In addition, HRCS volunteers assessed the water, sanitation and hygiene situation in Anse d'Hainault and Les Irois.

Trained water chlorination agents and WASH technicians are active in Anse d'Hainault conducting water quantity and quality checks. During the distribution of WASH items, the populations were briefed on how to keep their water safe at home.

IFRC also supported the rehabilitation of the water chlorination system for the two water tanks of Anse d'Hainault.

From December to March 2017, IFRC attended all weekly WASH and Hygiene promotion (HP) coordination meetings that are presided over by DINEPA (Direction Nationale de l'Eau Potable et de l'Assainissement) and DSGA (Direction Sanitaire de la Grand-Anse) on Mondays and Tuesdays.

| Outcome 3 Sustainable reduction in risk of waterborne and water related diseases in targeted communities | Outputs | | % of achievement |
|--|--|--------|-----------------------|
| | Output 3.1 The target communities have access to sustainable WASH services | | 59% |
| | Output 3.2 Hygiene promotion and community mobilization activities | | 42% |
| Activities | Is implementation on time? | | % progress (estimate) |
| | Yes (x) | No (x) | |
| 3.1.1 Identification of WASH technical staff and Hygiene Promotors | X | | 100% |
| 3.1.2 Recruitment of WASH technical staff and Hygiene Promotors | X | | 100% |
| 3.1.3 Training of WASH technical staff and Hygiene Promotors | X | | 100% |
| 3.1.4 Identification of beneficiaries according to priorities as outlined in the EPoA using VCA technology | X | | 50% |
| 3.1.5 Coordination with other WASH actors and respective authorities on target group needs and appropriate response | X | | 100% |
| 3.1.6 Identify best option water treatment device for 2,200 households including beneficiaries of the shelter program | X | | 25% |
| 3.1.7 Procure and distribute water treatment devices and additional NFI to 2,200 households including beneficiaries of the shelter program | X | | 25% |
| 3.1.8 Procure water quality monitoring devices | X | | 100% |
| 3.1.9 Identification of additional NFI requirements in targeted community | X | | 25% |
| 3.1.10 Implementation of sustainable WASH techniques (including training) aligned with the shelter programme | X | | 10% |
| 3.1.11 Implementation of rainwater harvesting and sanitation technologies as required for 800 | X | | 10% |

| | | | |
|---|---|---|------|
| reconstructed houses aligned with the shelter program | | | |
| 3.1.12 Implementation of rainwater harvesting technology and sanitation technologies for 300 new houses aligned with the shelter program | X | | 10% |
| 3.1.13 Rehabilitate rural distribution networks | X | | 100% |
| 3.1.14 Prepositioning of WASH related NFIs and water treatment tablets/sachets together with Health material for Cholera preparedness in target departments according to activity | X | | 75% |
| 3.2.1 Study to develop a long-term WASH/Cholera project | X | | 25% |
| 3.2.2 Assess the possibility of integrated project Health/WASH "Prevention of communicable diseases and early treatment of Cholera" (waterborne, vector borne, STI's) | X | | 50% |
| 3.2.3 Training of HRCS volunteers for Cholera response teams | X | | 10% |
| 3.2.4 Assessment of the water, sanitation and hygiene situation in targeted communities using RAMP technology through HRCS volunteers cont. | X | | 50% |
| 3.2.5 Monitoring of the water, sanitation and hygiene situation in targeted communities using RAMP technology through HRCS volunteers cont. | X | | 25% |
| 3.2.6 Production, printing and distribution of IEC materials cont. | X | | 25% |
| 3.2.7 Monitor treatment and storage of water through household surveys and household water quality tests through HRCS volunteers | X | | 75% |
| 3.2.8 HP activities addressing the target communities through HRCS volunteers cont. | X | | 75% |
| 3.2.9 Disseminate hygiene promotion messages through radio programs cont. ¹⁴ | | X | % |

Progress towards outcomes



Local communities in Anse d'Hainault and Les Irois communes participated in the rehabilitation of rural water distribution networks in their localities. Source: IFRC

Haitian Red Cross with IFRC support

Hygiene Promotion (HP) specialists with Training of trainers (ToT) background were engaged to train HP volunteers in 7 Communes of Grand-Anse Department. HP messaging was done during relief distributions, and furthermore a 2-week hygiene promotion campaign was organised in Anse D'Hainault, Les Irois, Dame Marie and Roseaux, aimed not only at reaching beneficiaries with HP messaging, but also at allowing the recently trained HP volunteers to practice and get real time coaching from ERU MSM HP experts.

At least 25,480 people have so far been assisted; 9,150 people reached by hygiene promotion during relief distributions, and 16,330 during the 2-week HP campaign in Anse D'Hainault, Les Irois, Dame Marie and Roseaux.

HRCS now have a volunteer resource of 162 trained HP volunteers and 25 trainers available for future HP

activities.

¹⁴ Radio communications were disrupted by the Hurricane in Grand-Anse Department and has not yet been repaired.

A questionnaire was developed to collect information about the HP volunteers and build a data bank to ensure this important information is not lost. Useful information such as names, contact information, trainings, RCRC experience and profession is stored in the data base for the benefit of HRCS' continued work.

A Pool tester and del agua kits have been put at the disposal of HRCS volunteers and CAEPA¹⁵ technicians for HP and water purification activities.

12,000 persons received hygiene promotion messages (hand washing, cholera prevention) - During the carnival in Jeremie (26-28 February 2015) HRC branch deployed 54 volunteers (6 hygiene promoters, 12 volunteers on HIV-AIDS, 30 volunteers trained on first aid and 6 PSS volunteers).

4 rural water distribution networks have been rehabilitated in Anse d'Hainault (2) and Les Irois (2), with communities contributing to digging the ground for burying pipes, and CAEPA plumbers connecting the newly installed pipes to the distribution network.

PUR sachets have been prepositioned in Dupond, Cap à four and Carcasse localities for subsequent WASH activities.

Haitian Red Cross with support from the Netherlands Red Cross

During this reporting period, HRCS volunteers supported by the Netherlands Red Cross distributed standard cholera kits to some families, and donated jerry cans to other families for the storage of safe drinking water as a measure to prevent cholera and other water borne diseases in Les Anglais (200 cholera kits for 200 families and 600 jerry cans for 600 families), Chardonnière (200 cholera kits for 200 families and 600 jerry cans for 600 families), and Port-à-piment (200 cholera kits for 200 families and 600 jerry cans for 600 families).

As a contribution to the fight against cholera, the Netherlands Red Cross supported the training of 20 HRCS volunteers in Chardonnières commune on cholera epidemiology, knowing the concepts of cholera and disinfection, water treatment and safer storage of water, hygiene promotion, sensitisation to cholera prevention (water treatment, preparation of OAR, hand washing, and the use of latrines).

Moreover, the Netherlands Red Cross supported to rehabilitation of rural water distribution systems in in the Sud Department, precisely in the Communes of Les Coteaux (2 SAEP16 systems), Chardonnières (1 SAEP system) and Les Anglais (2 SAEP systems). These works are now in their final phase and the teams are at this moment connecting and rehabilitating the many water points/kiosks, providing an estimated 40 000 beneficiaries in those localities with safe drinking water.



HRCS volunteers worked hand in gloves with community members in Les Coteaux to rehabilitate the Water distribution system. Source: Netherlands Red Cross

Shelter (including household non-food items)

Population to be assisted:

| Target departments | Full house construction | House repairs | Location |
|--------------------|-------------------------|---------------|--|
| IFRC | 150 | 0 | Grand-Anse Department (Communes of Anse d'Hainault & Les Irois) |
| American RC | 0 | 500 | Sud Department (Commune of Les Cayes) |
| Swiss RC | 0 | 640 | Grand-Anse Department (Commune of Corail) |
| Total | 150 | 1140 | |

¹⁵ Comité d'Approvisionnement en Eau Potable et d'Assainissement

¹⁶ "Système d'approvisionnement en eau potable" or Potable water distribution system

| Shelter (including household non-food items) | | | |
|--|--|---------------|------------------------------|
| Outcome 4 The immediate shelter and settlement needs of the target population are met | Outputs | | % of achievement |
| | Output 4.1 Essential non-food items are provided to the target population | | 100% |
| | Output 4.2: Target population is provided with emergency shelter assistance | | 75% |
| Activities | Is implementation on time? | | % progress (estimate) |
| | Yes (x) | No (x) | |
| 4.1.1 Mobilize volunteers and provide orientation on distribution protocols (Mega V and Open Data Kit [ODK]) | x | | 100% |
| 4.1.2 Identification, registration, verification and mobilization of beneficiaries for relief | x | | 100% |
| 4.1.3 Distribution of non-food items to 11,000 households | x | | 100% |
| 4.1.4 Monitoring and reporting on distributions. | x | | 100% |
| 4.2.1 Identify and mobilize volunteers and staff to support the operation and provide orientation on revalidation process and distribution protocols (Mega V and ODK) and the shelter preliminary survey | x | | 100% |
| 4.2.2 Distribution of emergency shelter Kit to 11,000 households | x | | 100% |
| 4.2.3 Selection and registration of beneficiary households that will receive shelter assistance, including a first quick evaluation of the beneficiaries houses conditions with ODK system | x | | 100% |
| 4.2.4 Preparation and dissemination of beneficiary and stakeholder communication (including feedback and response mechanism) | x | | 25% |
| 4.2.5 Contextualization of technical guidelines for the construction of emergency shelter | x | | 25% |
| 4.2.6 Provision of technical orientations for volunteers and beneficiaries in the construction of emergency shelters | x | | 50% |
| 4.2.7 Conduct community sensitization through the HRCS's volunteers trained in the recommended safe use of the shelter kit | x | | 100% |
| 4.2.8 Monitoring and reporting on distributions and evaluation of assistance | x | | 100% |
| Progress towards outcomes | | | |
| The activities planned under this outcome were completed during the emergency phase of the operation from October to December 2016, and were reported on in Operations update 1, 2 and 3. | | | |
| Outcome 5 The target population has durable and sustainable shelter | Outputs | | % of achievement |
| | Output 5.1 Durable shelter that meets agreed standards is provided to households | | 58% |
| | Output 5.2: Orientation/awareness raising sessions on safer shelter provided to target communities | | 0% |
| | Output 5.3: Ensure support to overcome regulatory barriers in an environment with complicated tenure and land issues, and rebuild regulations and recovery politics | | 0% |
| Activities | Is implementation on time? | | % progress (estimate) |
| | Yes (x) | No (x) | |
| 5.1.1 Identification of communities and specific beneficiaries in coordination with local government authorities | | x | 50% |

| | | | |
|---|--|---|-----|
| 5.1.2 Identification of households that will receive shelter repair and rebuilding assistance, revalidate their eligibility, and register them as beneficiaries | | X | 50% |
| 5.1.3 Identification and support package to host and displaced families, including rent and housing assistance | | X | % |
| 5.1.4 Providing selected households with orientation on the programme, the distribution process, and guidance on building back better and safer principles | | X | % |
| 5.1.5 Hiring of technical experts and support staff | | X | 75% |
| 5.1.6 Construction of model houses in selected localities to demonstrate safer construction techniques and to provide beneficiaries with visual demonstration on how to build back better and safer. | | X | % |
| 5.1.7 Provision of training to the local labour force on safer construction | | X | % |
| 5.1.8 Provision of 3,110 households with shelter rebuilding materials, technical guidance and labour support (cash transfer programming will be considered depending on the results of the market assessments), and to build one latrine, one safe storages and one improved kitchen per house | | X | % |
| 5.1.9 Regular monitoring to ensure that households receiving support to repair or retrofit their houses and households that receive support to rebuild have completed construction using building back safer principles, and that cash instalments are in accordance with the conditions specified in the beneficiary pledge agreement | | X | % |
| 5.1.10 Conduct evaluations | | X | % |
| 5.2.1 Training for volunteers and staff so that they can better support and monitor implementation of shelter activities in communities | | X | % |
| 5.2.2 Participatory Approach for. Safe Shelter Awareness (PASSA) training for volunteers and roll out in communities | | X | % |
| 5.2.3 Training on Building Back Better (volunteer and rolling out in communities) | | X | % |
| 5.2.4 Training on disability inclusion shelter (volunteer and rolling out in communities) | | X | % |
| 5.2.5 Using IEC materials developed by the shelter cluster, raise awareness of how households targeted by shelter interventions can improve their houses to be safer against future disasters | | X | % |
| 5.3.1 Training on Housing Land and Property (HLP) rights for judges, prosecutors and civic lawyers | | X | % |
| 5.3.2 Assistance in the process of regularization of tenure by assisting affected households to obtain formal legal status of their housing, land and property | | X | % |
| 5.3.3 Strengthening of local government capacity to manage the process of regularization | | X | % |
| Progress towards outcomes | | | |
| <p>During this reporting period, effort was concentrated on reviewing the plan of action to match available resources as the appeal coverage has remained very low. After discussions with the Movement partners involved in the Shelter sector, an agreement was reached to build 150 new houses (by IFRC in Grand-Anse Department, precisely in Anse d'Hainault and Les Irois communes), and repair 1 140 damaged houses (500 by American Red Cross in Sud Department, precisely in Les Cayes commune; and 640 by the Swiss Red Cross in Grand-Anse Department, precisely in Corail commune).</p> <p>After this planning effort, the staff for the recovery phase of the operation have been recruited by IFRC and are now preparing to launch the building of new shelters. Moreover, the beneficiaries of the shelter sector have been pre-selected, and the lists are presently being reviewed to complete the final selection of beneficiaries.</p> <p>The process to purchase shelter items needed for the construction of new shelters has already started, and the first houses built will be available in the coming weeks.</p> <p>The Movement Shelter team has been attending UN coordination meetings to discuss new developments and align views.</p> | | | |

IFRC has already coordinated 3 Shelter Technical Committee (STC) meetings with PNSs in 2017, two in Port-au-Prince and 1 in Corail. The goal of the STC is to coordinate Movement actions relating to Shelter, monitor the quality of the Operation and share information with the view of improving efficiency.

Livelihoods, Nutrition and Food security

| Livelihoods, Nutrition and Food security | | | |
|--|---|--------|-----------------------|
| Outcome 6 Economic security is ensured for the targeted households in the affected area | Outputs | | % of achievement |
| | Output 6.1 Beneficiary households have access to basic items for their food security | | |
| Output 6.2: Target population can cover their basic needs through the implementation of a cash transfer programme | | | 88% for output 6.2 |
| Activities | Is implementation on time? | | % progress (estimate) |
| | Yes (x) | No (x) | |
| 6.1.1 Identification of communities for intervention and beneficiaries targeting | X | | 100% |
| 6.1.2 Distribution of dry food kits to targeted families | X | | 100% |
| 6.1.3 Monitoring and reporting on distributions | X | | 100% |
| 6.2.1 Cash transfer programme feasibility study | X | | 100% |
| 6.2.2 IFRC/HRCS to contract the transfer service | | X | 75% |
| 6.2.3 Distribution of unconditional multipurpose CTP to families | | X | % |
| Progress towards outcomes | | | |
| <p>A cash feasibility study was conducted, concluding that markets were functioning and cash would be a feasible response option.</p> <p>However, it was decided to provide in-kind support for immediate needs (Output 6.2) instead of CTP during the relief phase, as it would take time to go through the tender process and signing a contract with a service provider. The Food kits and NFIs distributed are mentioned in Operations update 1, 2 and 3.</p> <p>The tender process and selection of Financial Service Provider was approved on 18 January. The remittance company, Unitransfer, was selected for the distribution of cash to the beneficiaries, both for livelihoods purposes and for the shelter programme. However, some last minutes' misunderstandings pushed Unitransfer to step out of the process. Since then, negotiations have taken place with the service provider, and there are hopes that the contract will be signed by the end of March 2017, to enable the distribution of cash to the beneficiaries that have already been preselected.</p> | | | |
| Outcome 7 Restore and strengthen livelihoods for 3,300 households through support for restarting activities, capacity building and livelihoods protection promotion | Outputs | | % of achievement |
| | Output 7.1 Targeted households dedicated to agriculture and livestock have the seeds and tools they need to resume their income activities | | 0% for output 7.1 |
| Output 7.2: Fishermen in the affected area have basic items needed to perform their activity | | | 30% for output 7.2 |
| Output 7.3: Households livelihoods have been strengthened through capacity building for beneficiaries on better agricultural practices and marketing | | | 0% for output 7.3 |

| | Output 7.4: Livelihoods are protected through the implementation of basic household infrastructure for safe storage and community safe shelters for livestock and through promotion of productions techniques minimizing losses | | | 0% for output 7.4 |
|--|--|--------|-----------------------|-------------------|
| | Output 7.5: 300 households have adopted new income generating activities that diversify their income sources | | | 0% for output 7.5 |
| Activities | Is implementation on time? | | % progress (estimate) | |
| | Yes (x) | No (x) | | |
| 7.1.1 Conditional CTP distribution to households to buy inputs for the planting season | | | % | |
| 7.1.2 Distribution of seeds for family gardens | | | % | |
| 7.1.3 Support and technical accompaniment | | | % | |
| 7.2.1 Identification, registration, verification and mobilization of beneficiaries | X | | 90% | |
| 7.2.2 Identification and contract with local suppliers | | | % | |
| 7.2.3 Conditional CTP- vouchers- distribution to buy small items they need | | | % | |
| 7.3.1 Selection of training modules and training plan design | | | % | |
| 7.3.2 Implementation of trainings | | | % | |
| 7.3.3 Support and accompaniment in the field during application of new knowledge | | | % | |
| 7.4.1 Creation of safe storage places for households, beneficiaries of the shelter programme (linked with Output 5.1) | | | % | |
| 7.4.2 Campaign on reducing food loss and waste | | | % | |
| 7.4.3 Building of emergency community shelter for livestock | | | % | |
| 7.5.1 Identification of new small scale income generation activities | | | % | |
| 7.5.2 Capacity building for new activities | | | % | |
| 7.5.3 Items distribution for the new activities | | | % | |
| 7.5.4 Support and accompaniment for the implementation of the new activities | | | % | |
| Accountability and complaint mechanisms implementation, including project committees | | | % | |
| Monitoring and evaluation (M&E) activities | | | % | |
| Exit strategy design and implementation | | | % | |
| Progress towards outcomes | | | | |
| <p>Close to 2,000 vulnerable households have been registered using Open Data Kit (ODK). The lists are now in process of being validated in the communities to ensure that the most vulnerable households have been selected. Community Engagement and Accountability (CEA) officers are supporting this feed-back process, and an additional 200 vulnerable households fulfilling the targeted criteria can be included in the programme through this process. We hope to be able to start cash distributions to beneficiaries when the contract is finally signed with UNITRANSFER.</p> | | | | |

Disaster Risk Reduction

| Disaster risk reduction | | | |
|---|---|--------|-----------------------|
| Outcome 8 Disaster Preparedness and early warning actions are implemented for response at the community and institutional level for disasters | Outputs | | % of achievement |
| | Output 8.1: At least 5,000 households at risk of floods and landslides in at-risks areas and people that have been evacuated to collective centres are prepared and on alert | | 0% |
| | Output 8.2: The risk of flash floods and landslides is reduced | | 0% |
| | Output 8.3: The HRCS has increased its capacity in preparedness for emergency situations | | 0% |
| Activities | Is implementation on time? | | % progress (estimate) |
| | Yes (x) | No (x) | |
| 8.1.1 Assessment of the community early warning systems (CEWS) | x ¹⁷ | | 0% |
| 8.1.2 Training of regional committee volunteers and partners on the CEWS toolkit | | | 0% |
| 8.1.3 Printing of sensitization materials | | | 0% |
| 8.1.4 Linking CEWS/EWS | | | 0% |
| 8.1.5 Public Awareness and Public Education (PAPE)/Mass media information campaigns (KDV) in communities and schools (<i>The Male</i>) | | | 0% |
| 8.1.6 Implement CEWS in three vulnerable communities | | | 0% |
| 8.1.7 Upgrade eight schools for shelter, evacuation routes | | | 0% |
| 8.2.1 Building check dams | | | 0% |
| 8.2.2 Prevention of erosion by reforestation, planting vegetation | | | 0% |
| 8.2.3 Environmental Impact Monitoring | | | 0% |
| 8.3.1 Strengthen the HRCS Regional Committee emergency response capacity in two departments | | | 0% |
| 8.3.2 Emergency Operation Centre (EOC) strengthening | | | 0% |
| 8.3.3 Training for National Interventions Teams (NITs) on Damage Analysis and Needs Assessment (DANA), relief distributions (use of Mega V) | | | 0% |
| Progress towards outcomes | | | |
| This area is planned for future phases of the response; consequently, no actions have been taken to date. | | | |

¹⁷ The activities are planned, but cannot be implemented now as very limited funding has been received for DRR so far.

Restoring Family Links (RFL)

| RFL | | | |
|---|----------------------------|--|-----------------------|
| Outcome 9 Restoring Family Links (RFL) service is enhanced within the National Society to respond to RFL needs of victims and their families | Outputs | | % of achievement |
| | | Output 9.1: Family links are restored whenever people are separated from, or without news of, their loved ones as a result of the hurricane Matthew | |
| Activities | Is implementation on time? | | % progress (estimate) |
| | Yes (x) | No (x) | |
| 9.1.1 RFL teams will facilitate communication for people in affected areas to re-establish contact with their households | X | | 100% |
| 9.1.2 Active tracing in support to persons who have not succeeded in re-establishing contact with loved ones in or outside Haiti | X | | 100% |
| 9.1.3 HRCS volunteers disseminate the website www.familylinks.icrc.org so people can register as “sound and safe” or register missing family members | X | | 100% |
| Progress towards outcomes | | | |
| <p>Together with the HRC, the ICRC set up RFL antennas in les Cayes, Jérémie and Dame-Marie, which were heavily affected by Hurricane Matthew. The antennas are operated by HRCS volunteers and allow people to search for or reconnect with family members after Hurricane Matthew. They can register as “safe and sound” or put out search requests for people who went missing. Given that not all of the affected families have the means to travel to one of the antenna locations, a forth antenna was recently set-up and integrated into the FACT structure, allowing people whose families reside in remote areas to reach out to them, thereby offering a more comprehensive Movement response to people affected by Hurricane Matthew. Once the program ends, the antenna infrastructure and knowhow will remain with the HRCS, allowing it to intervene autonomously in a future emergency situation.</p> <p>So far, the HRCS has received 83 search requests, of which 63 were resolved. A total of 257 phone calls were facilitated, which enabled families to reconnect after Hurricane Matthew. Moreover, the antennas allowed for the dissemination of 22 Red Cross family messages to family members of detainees who were worried about the faith of their loved ones after Hurricane Matthew.</p> | | | |

Quality programming / Areas common to all sectors

| Quality programming / Areas common to all sectors | | | |
|---|----------------------------|--|-----------------------|
| Outcome 10 Continuous and detailed assessment and analysis is used to inform the design and implementation of the operation | Outputs | | % of achievement |
| | | Output 10.1: Assessment and analysis activities undertaken to inform the design and implementation of the operation | |
| Activities | Is implementation on time? | | % progress (estimate) |
| | Yes (x) | No (x) | |
| 10.1.1 Damage and needs assessments in affected areas including a market assessment | X | | 100% |
| 10.1.2 Deployment of RIT members as required by the operation | X | | 100% |
| 10.1.3 Deployment of Head of Emergency Operations | X | | 100% |
| 10.1.4 Deployment of Field Assessment Coordination Team | X | | 100% |

| | | | |
|---|---|---------------|------------------------------|
| 10.1.5 Development and use of a Monitoring and Evaluation (M&E) system to support monitoring of the operation progress and cash transfer mechanism | | X | 75% |
| 10.1.6 Monitoring visits by the HRCS and IFRC | X | | 75% |
| 10.1.7 Real-time evaluation (RTE) is conducted | X | | 100% |
| 10.1.8 Enable humanitarian access through Disaster Law advocacy | | X | 25% |
| 10.1.9 Conduct detailed livelihoods assessments to establish needs and strategy | X | | 100% |
| Progress towards outcomes | | | |
| <p>During this reporting period, the Information Management and PMER team worked in close collaboration to update the system for collecting and reporting data on the operation. HRCS volunteers as well as Movement partners involved in the operation are using the platform that has been put in place to that effect (The Smartsheet) to report on achievement against the REPoA. The Head of the Country Cluster Support team travelled to Jérémie to monitor the implementation of the operation and encourage the staff and volunteers who are working under very difficult conditions in the field. In addition, IFRC Secretary General visited Haiti and seized the opportunity to talk with Government authorities as part of Disaster Law Advocacy effort. The RTE was conducted in February 2017 as planned.</p> | | | |
| Outcome 11 Effective communication with all stakeholders | Outputs | | % of achievement |
| | Output 11.1: Establishment of communication/public relations functions | | 99% |
| Activities | Is implementation on time? | | % progress (estimate) |
| | Yes (x) | No (x) | |
| 11.1.1 Ensure that the situation regarding Hurricane Matthew and the work of the National Society is well documented and shared with media channels to profile the RCRC effectively | X | | 100% |
| 11.1.2 Develop human interest stories and information on the reality of the situation on the ground | X | | 100% |
| 11.1.3 Monitoring and collation of key facts and figures from the affected communities, to produce concise and visually appealing documents that are regularly updated | X | | 100% |
| 11.1.4 Coordination with the National Society to ensure that all funding opportunities are leveraged | X | | 100% |
| 11.1.5 Development of a Movement communications strategy linking with national communications plan | X | | 100% |
| 11.1.6 Development of six videos | X | | 95% |
| 11.1.7 Development of visual material (posters, infographics, brochure) | X | | 100% |
| 11.1.8 Dissemination of content on operations consistently on social media channels and implement a social media campaign | X | | 100% |
| Progress towards outcomes | | | |
| <p>From the onset, the communications team has been actively integrated with the operational team on the ground, documenting the response of Haiti Red Cross and its Movement partners to bring visibility to activities, position the Red Cross as a key responder and support the emergency appeal. With support from global communications team in Port-au-Prince, Panama and Geneva, initially 4 communications delegates were positioned in the affected areas. However, since December there is not communication team working on the ground. On agreement with the Head of the Operation and the Country Cluster Coordinator, starting in February, the Communication Officer of the cluster will be taking the role of coordinate the public communication for the Operation.</p> <p>It is important to highlight that the communication activities will be continuing during the recovery phase of the operation.</p> <p>For details on communication materials produced on the operation, see Operations Update No 2.</p> | | | |
| Outcome 12: Target people and communities access | Output 12.1: Define community engagement framework | | 62% |

| timely, accurate and trusted information that enable them to take action about their safety, health and wellbeing and engage with the Red Cross to influence and guide decisions, enabling them to adapt, withstand and recover from external and internal shocks | Output 12.2: Adequate communication with the communities | 40% | |
|---|--|--------|-----------------------|
| | Output 12.3: Dialogue and community engagement: working with communities on two-way communication campaigns to provide accurate information | 35% | |
| | Output 12.4: Data collection and analysis for programmatic decisions: Utilise systems of data and information management to inform communication with communities and revise programmes regularly | 35% | |
| Activities | Is implementation on time? | | % progress (estimate) |
| | Yes (x) | No (x) | |
| 12.1.1 Development of Community engagement and accountability (CEA) strategy, plan and tools for Haiti Red Cross to implement | X | | 85% |
| 12.1.2 Translation of texts into Haitian Creole | X | | 100% |
| 12.1.3 CEA training for the National Society headquarters and branch staff and volunteers | | X | 0% |
| 12.2.1 Develop CEA guidelines to be shared among the RCRC Movement in Haiti | | X | 0% |
| 12.2.2 Re-ignite the hotline and gather partners support | X | | 50% |
| 12.2.3 Carry out communication and engagement activities, including feedback mechanisms through community volunteers at field level and communities | X | | 70% |
| 12.3.1 Development and dissemination of targeted messages in Haitian Creole for media, volunteers, local and traditional leaders, churches, schools and other stakeholders to inform community debates | X | | 70% |
| 12.3.2 Establishment of dialogue platforms and feedback systems (call-in radio programmes that cover Port-au-Prince and the affected areas, messaging systems and on-line interactive spaces) | | X | 0% |
| 12.3.3 Liaise with local and international stakeholders to coordinate and support to the functioning of a CEA/Communication with Communities working group | X | | 70% |
| 12.3.4 Define a feedback data collection system (in coordination with PMER/IM) and perform perceptions surveys regularly | | X | 0% |
| 12.4.1 Establishment of a national system for data collection and analysis from all CEA activities to inform communication approaches | | X | 0% |
| 12.4.2 Baseline assessment of information needs and trusted sources of information and channels | X | | 70% |
| Progress towards outcomes | | | |
| <p>During the 2010 response to the earthquake and cholera crisis in Haiti, important human and financial resources were invested in setting up a community engagement and accountability system. The various mechanisms used across programmes included, but were not limited to, a weekly national call-in radio programme (Radyo Kwa Wouj), an Interactive Voice Response phone line (Telefon Kwa Wouj), Short Message Service (SMS) messages, a call centre (Noula), print media (posters and leaflets) and face-to-face communication through HRCS volunteers. The strategy proved effective since it enabled the National Society to listen better to and communicate more effectively with affected populations. While many lessons were identified, the experience received overwhelming positive feedback from multiple types of stakeholders (e.g. end users and others in affected communities, Red Cross and Red Crescent program staff, local authorities, donors, other humanitarian actors). For more detailed reports of these experiences, please consult the following links: An Kite Yo Pale ; We Are Here; Haiti Beneficiary Communications Review 2013 – IFRC.</p> <p>With a view to looking at reactivating the sustainable use of these mechanisms, a RIT delegate was deployed mid-October, 2016. This was followed by a CEA consultant from November to December, 2016. The aim of the consultant was to use CEA - Community Engagement and Accountability - to support Livelihoods, Shelter, Cash, Wash and Health program interventions in the field. In other words, make sure communities are informed and invited to feedback in partnership with IFRC programmes.</p> | | | |

A CEA Senior Officer has been recruited to support the rolling out of the CEA strategy, monitor the CEA field support, and work with HRC staff to develop key sustainable CEA mechanisms such as radio programming.

The consultant has facilitated the deployment of an experienced Haitian national CEA Manager from American Red Cross to lead the operational CEA field work. The CEA officer travelled immediately to the field, assisting IFRC operations to obtain local community support for programmes on the ground. The CEA consultant has taken part in the integration with plans and HR structures along with the different IFRC Sectors, resulting in a range of planning tools and plans for the appeal, and assisted in getting budgetary support to hire an initial two CEA field officers to support the CEA Manager in one of each of the two field locations where IFRC-supported interventions will take place, in Les Irois, and in Anse d'Hainault.

The CEA Consultant developed an initial CEA strategy together with Haitian Red Cross (HRC), working with the HRC CEA department to identify opportunities for integrating CEA into the immediate response and the relief phase. The preliminary activities are integrated in the strategy helping to define how CEA activities may be embedded into the National Society's programmes and capacity-building, and attempt to capitalize on the widespread ownership of mobile phones in Haiti and the high radio listenership among the affected communities prior to the disaster; however, this initiative will not be without its challenges as communication with some of the hard to reach areas targeted by the Red Cross Movement is poor, physical access for visits and distributions is complex, and internet connectivity, cell phone towers and radio stations have been damaged, making continuous communication with the affected areas a challenge.

These impediments have been partially addressed by collecting information from beneficiaries at distribution sites; moreover, when in the field, concrete CEA input was used to adjust current relief distributions (e.g. developing pointers for HRCS volunteers to engage more effectively with the communities, instilling greater communication regarding the readjustment of plans and tools to increase information sharing in the local language). The Next steps will include gaining a more nuanced understanding of how women and men use these tools and repairing the communication infrastructure.

While undergoing this process, the National Society seeks to ensure coherence with external communications activities and operations to mitigate reputational risks related to the community's perception and understanding of Red Cross actions.

Together with national and international partners, in Port-au-Prince, discussions on information-sharing and collaborative spaces were held with external stakeholders (e.g. OCHA, Internews). Learning from recent emergencies, there is a growing emphasis and investment on CEA among partners and donors. Some partners, with DIFID support, are considering establishing feedback mechanisms in country. As the Red Cross and Red Crescent Movement has a strong CEA element in place in Haiti via its extensive network of volunteers, the movement has decided for the moment to remain in an observer's role, trying to learn as much as possible from this mechanism as it evolves, and assisting it whenever possible. There is the possibility along these lines to develop a program of community journalism with training offered to Red Cross community volunteers by partners, and broadcast on local community radio station frequencies with information to the local communities.

| | | |
|--|---|------------------------------|
| Outcome 13: Safer Access Framework (SAF) is integrated into the HRCS programming and implementation of activities for Hurricane Matthew operation | Output 13.1: Safer Access framework (SAF) awareness workshops on the risks incurred when deployed are conducted for staff and volunteers | 90% |
| Activities | Is implementation on time? | % progress (estimate) |
| | Yes (x) | No (x) |
| 13.1.1 Safer Access Framework (SAF) workshops for HRCS staff and volunteers in local branches in areas affected by the disaster. | | |
| Progress towards outcomes | | 90% |

Safer Access Framework (SAF) is an ICRC security management methodology applied worldwide in ICRC operations. It also aims at offering National Societies an effective methodology and technical tools to facilitate safe and secure management of field operations in hostile environments.

Given the increasingly volatile security environment and rise of the number of security incidents targeting humanitarian organizations in the region affected by hurricane Matthew, the Movement needs an efficient methodology to manage field security in an effective way. Through the dissemination and training of Red Cross volunteers and staff, security management will be improved and risk exposure reduced to minima.

To promote safer access and integrate elements into operations, team leaders and other RC staff of the South Branch, 3 safer access workshops were facilitated by the HRC and the ICRC. The workshops were combined with a mini risk assessment led by the regional board. As an outcome, additional security rules were developed and will be submitted to the regional board for approval and implementation. More than 60 HRC volunteers and staff of the American Red Cross attended the workshops.

So far, 150 first aid kits were distributed to HRC field structures to replace the material used during and after hurricane Matthew. nine SAF workshops will be conducted in Nippes, Sud, Grande-Anse and Nord-Ouest over the next five weeks. 180 volunteers and staff will benefit at regional and local levels of HRC structures of the workshops. Moreover 425 first aid kits will be prepositioned in the field together with 110 stretchers and 200 body bags, allowing HRC structures to respond immediately and autonomously to future emergencies.

D. Budget

[Click here to view the interim financial report](#)

Reference documents



Click here for:
Previous
[Appeals and updates](#)
[Emergency Plan of Action \(EPoA\)](#)

Contact Information

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

In the Haitian Red Cross Society:

- Dr. Marie Marcelle Cauvin, General Director of Haiti Red Cross Society (HRCS); email: mm.cauvin@croixrouge.ht

In the IFRC Country Cluster Support Team for the Latin Caribbean:

- Ines Brill; head of country cluster office; email: ines.brill@ifrc.org
- Martine Dery, head of operations; email: martine.dery@ifrc.org

In the IFRC regional office for the Americas:

- Iñigo Barrena, Head of the Disaster and Crisis department; email: ci.barrena@ifrc.org
- Diana Medina, Communications unit manager for the Americas, phone: +507 6780-5395; email: diana.medina@ifrc.org

For Resource Mobilization and Pledges:

- Alejandra Van Hensbergen, senior partnership and resource development officer, phone: +507 6674-1584; email: alejandra.vanhensbergen@ifrc.org

In Geneva:

- Cristina Estrada, response and recovery lead; +41 22 730 45 29; cristina.estrada@ifrc.org

For In-Kind donations and Mobilization table:

- Stephany Murillo, Regional Logistics senior officer, mobile: +507 6679-9674, email: stephany.murillo@ifrc.org

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

- Priscila Gonzalez; planning, monitoring and reporting team coordinator; phone: +507 317-3050 email: priscila.gonzalez@ifrc.org

How we work

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

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



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



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



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

Disaster Response Financial Report

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Interim Report

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| | | | |
|-------------------------|----------------|-----------|----------|
| Reporting Timeframe | 2016/10-2017/2 | Programme | MDRHT013 |
| Budget Timeframe | 2016/10-2017/3 | Budget | APPROVED |
| Split by funding source | Y | Project | * |
| Subsector: | * | | |

All figures are in Swiss Francs (CHF)

I. Funding

| | Raise humanitarian standards | Grow RC/RC services for vulnerable people | Strengthen RC/RC contribution to development | Heighten influence and support for RC/RC work | Joint working and accountability | TOTAL | Deferred Income |
|--|------------------------------|---|--|---|----------------------------------|------------------|-----------------|
| A. Budget | | 6,037,403 | 4,121,393 | 221,263 | 12,093 | 10,392,152 | |
| B. Opening Balance | | 30,326 | | | | 30,326 | |
| Income | | | | | | | |
| Cash contributions | | | | | | | |
| American Red Cross | | 39,753 | 214,104 | | | 253,857 | |
| British Red Cross | | 1,014,972 | 8,295 | | | 1,023,267 | |
| British Red Cross (from British Government*) | | 854,226 | | | | 854,226 | |
| China Red Cross, Hong Kong branch | | | 10,019 | | | 10,019 | |
| Credit Suisse Foundation | | 20,000 | | | | 20,000 | |
| Danish Red Cross (from Ole Kirk's Fond*) | | | 138,172 | | | 138,172 | |
| European Commission - DG ECHO | | | 275,082 | | | 275,082 | |
| Finnish Red Cross | | 53,568 | | | | 53,568 | |
| French Red Cross | | | 4,537 | | | 4,537 | |
| Great Britain - Private Donors | | | 60 | | | 60 | |
| IFRC at the UN Inc | | | 1,693 | | | 1,693 | |
| Italian Government Bilateral Emergency Fund | | 438,144 | | | | 438,144 | |
| Japanese Government | | | 131,039 | | | 131,039 | 374,281 |
| Japanese Red Cross Society | | 87,398 | | | | 87,398 | |
| Japanese Red Cross Society (from Japanese Government*) | | 349,592 | | | | 349,592 | |
| Kenya - Private Donors | | | 200 | | | 200 | |
| Liechtenstein Red Cross | | 139,078 | | | | 139,078 | |
| Luxembourg - Private Donors | | 548 | | | | 548 | |
| Monaco Government | | 59,304 | | | | 59,304 | |
| Netherlands - Private Donors | | 22 | | | | 22 | |
| On Line donations | | | 28,232 | | | 28,232 | |
| Qatar Red Crescent Society | | | 15,844 | | | 15,844 | |
| Red Crescent Society of the Islamic Republic of Iran | | | 10,000 | | | 10,000 | |
| Red Cross of Monaco | | | | 60,605 | | 60,605 | |
| Republic of Korea Government | | 49,229 | 49,229 | 49,229 | | 147,687 | |
| Spain - Private Donors | | | 54 | | | 54 | |
| Spanish Red Cross | | | 4,121 | | | 4,121 | |
| Swedish Red Cross | | 646,084 | 17,338 | | | 663,422 | |
| Swiss Red Cross | | 211,184 | | | | 211,184 | |
| Swiss Red Cross (from Swiss Government*) | | 300,000 | | | | 300,000 | |
| Switzerland - Private Donors | | | 5,000 | | | 5,000 | |
| The Canadian Red Cross Society (from Canadian Government*) | | 216,784 | | | | 216,784 | |
| The Netherlands Red Cross (from Netherlands Government*) | | 323,940 | | | | 323,940 | |
| The Republic of Korea National Red Cross | | 521,440 | 50,000 | | | 571,440 | |
| UL LLC -Underwriters Laboratories,LLC | | | 4,879 | | | 4,879 | |
| UNDP - United Nations Development Programme (from Chile Government*) | | 49,460 | | | | 49,460 | |
| United Arab Emirates - Private Donors | | 242 | | | | 242 | |
| United States - Private Donors | | | 152 | | | 152 | |
| VERF/WHO Voluntary Emergency Relief | | | | 2,000 | | 2,000 | |
| C1. Cash contributions | | 5,374,968 | 968,049 | 111,834 | | 6,454,850 | 374,281 |
| Inkind Goods & Transport | | | | | | | |
| American Red Cross | | | 86,606 | | | 86,606 | |
| British Red Cross | | | 199,120 | | | 199,120 | |
| China Red Cross, Hong Kong branch | | | 200,634 | | | 200,634 | |
| French Red Cross | | | 72,808 | | | 72,808 | |
| Qatar Red Crescent Society | | | 259,750 | | | 259,750 | |
| Spanish Red Cross | | | 68,811 | | | 68,811 | |
| C2. Inkind Goods & Transport | | | 887,730 | | | 887,730 | |

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| Split by funding source | Y | Project | * |
| Subsector: | * | | |

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Inkind Personnel

| | | | | | |
|--------------------------------------|------------------|------------------|----------------|------------------|----------------|
| <i>Danish Red Cross</i> | 14,710 | | | 14,710 | |
| C3. Inkind Personnel | 14,710 | | | 14,710 | |
| C. Total Income = SUM(C1..C4) | 5,389,678 | 1,855,778 | 111,834 | 7,357,290 | 374,281 |
| D. Total Funding = B + C | 5,420,003 | 1,855,778 | 111,834 | 7,387,616 | 374,281 |

* Funding source data based on information provided by the donor

II. Movement of Funds

| | Raise humanitarian standards | Grow RC/RC services for vulnerable people | Strengthen RC/RC contribution to development | Heighten influence and support for RC/RC work | Joint working and accountability | TOTAL | Deferred Income |
|---|------------------------------|---|--|---|----------------------------------|------------|-----------------|
| B. Opening Balance | | 30,326 | | | | 30,326 | |
| C. Income | | 5,389,678 | 1,855,778 | 111,834 | | 7,357,290 | 374,281 |
| E. Expenditure | | -2,279,720 | -1,576,514 | -58,807 | | -3,915,041 | |
| F. Closing Balance = (B + C + E) | | 3,140,283 | 279,264 | 53,027 | | 3,472,575 | 374,281 |

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| Budget Timeframe | 2016/10-2017/3 | Budget | APPROVED |
| Split by funding source | Y | Project | * |
| Subsector: | * | | |

All figures are in Swiss Francs (CHF)

III. Expenditure

| Account Groups | Budget | Expenditure | | | | | TOTAL | Variance |
|--|------------------|------------------------------|---|--|---|----------------------------------|-------------------|------------------|
| | | Raise humanitarian standards | Grow RC/RC services for vulnerable people | Strengthen RC/RC contribution to development | Heighten influence and support for RC/RC work | Joint working and accountability | | |
| A | | | | | | B | A - B | |
| BUDGET (C) | | | 6,037,403 | 4,121,393 | 221,263 | 12,093 | 10,392,152 | |
| Relief items, Construction, Supplies | | | | | | | | |
| Shelter - Relief | 269,778 | | 235,717 | 326,410 | | | 562,128 | -292,350 |
| Construction - Housing | 1,152,096 | | | | | | | 1,152,096 |
| Construction - Facilities | 61,221 | | | | | | | 61,221 |
| Construction Materials | 36,927 | | | | | | | 36,927 |
| Clothing & Textiles | 81,878 | | 30 | 132,823 | | | 132,854 | -50,975 |
| Food | 113,912 | | 37,694 | | | | 37,694 | 76,218 |
| Seeds & Plants | 99,884 | | | | | | | 99,884 |
| Water, Sanitation & Hygiene | 1,094,229 | | 587 | 330,469 | | | 331,056 | 763,173 |
| Medical & First Aid | 231,138 | | 256 | 2,348 | | | 2,604 | 228,534 |
| Teaching Materials | 535,970 | | 717 | 27,787 | | | 28,504 | 507,466 |
| Utensils & Tools | 238,461 | | 83,897 | 222,835 | | | 306,732 | -68,271 |
| Other Supplies & Services | 10,458 | | 11,477 | 10 | | | 11,487 | -1,029 |
| Cash Disbursement | 83,669 | | | | | | | 83,669 |
| Total Relief items, Construction, Sup | 4,009,621 | | 370,375 | 1,042,683 | | | 1,413,058 | 2,596,563 |
| Land, vehicles & equipment | | | | | | | | |
| Land & Buildings | 2,186 | | | | | | | 2,186 |
| Vehicles | 145,452 | | | | | | | 145,452 |
| Computers & Telecom | 51,121 | | 16,220 | | | | 16,220 | 34,901 |
| Others Machinery & Equipment | 54,662 | | | | | | | 54,662 |
| Total Land, vehicles & equipment | 253,421 | | 16,220 | | | | 16,220 | 237,201 |
| Logistics, Transport & Storage | | | | | | | | |
| Storage | 50,204 | | 64,307 | 1,027 | | | 65,334 | -15,130 |
| Distribution & Monitoring | 130,700 | | 30,663 | 213,179 | | | 243,842 | -113,142 |
| Transport & Vehicles Costs | 733,383 | | 273,354 | 11,450 | | | 284,804 | 448,579 |
| Logistics Services | 69,358 | | 24,677 | 72,863 | | | 97,540 | -28,183 |
| Total Logistics, Transport & Storage | 983,645 | | 393,002 | 298,519 | | | 691,521 | 292,124 |
| Personnel | | | | | | | | |
| International Staff | 1,306,065 | | 474,031 | 25,643 | | | 499,674 | 806,390 |
| National Staff | 632,589 | | 328,005 | 42,571 | 5,160 | | 375,736 | 256,853 |
| National Society Staff | 498,489 | | 58,581 | 2,310 | | | 60,891 | 437,598 |
| Volunteers | 77,430 | | 12,823 | 6,071 | | | 18,894 | 58,537 |
| Other Staff Benefits | | | 8 | | | | 8 | -8 |
| Total Personnel | 2,514,572 | | 873,448 | 76,595 | 5,160 | | 955,203 | 1,559,370 |
| Consultants & Professional Fees | | | | | | | | |
| Consultants | 40,957 | | 9,348 | | 40,245 | | 49,593 | -8,636 |
| Professional Fees | 0 | | 893 | | | | 893 | -893 |
| Total Consultants & Professional Fees | 40,957 | | 10,241 | | 40,245 | | 50,486 | -9,529 |
| Workshops & Training | | | | | | | | |
| Workshops & Training | 351,213 | | 3,534 | 7,948 | | | 11,482 | 339,730 |
| Total Workshops & Training | 351,213 | | 3,534 | 7,948 | | | 11,482 | 339,730 |
| General Expenditure | | | | | | | | |
| Travel | 65,212 | | 137,446 | 24,294 | 3,877 | | 165,617 | -100,405 |
| Information & Public Relations | 188,341 | | 7,481 | 220 | 2,582 | | 10,283 | 178,058 |
| Office Costs | 220,009 | | 54,088 | 5,118 | 67 | | 59,273 | 160,736 |
| Communications | 53,619 | | 20,044 | 673 | | | 20,717 | 32,902 |
| Financial Charges | 51,999 | | -12,482 | -212 | -167 | | -12,861 | 64,859 |
| Other General Expenses | 3,744 | | 2,266 | 75 | | | 2,341 | 1,403 |

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| | | | |
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| Budget Timeframe | 2016/10-2017/3 | Budget | APPROVED |
| Split by funding source | Y | Project | * |
| Subsector: | * | | |

All figures are in Swiss Francs (CHF)

III. Expenditure

| Account Groups | Budget | Expenditure | | | | | TOTAL | Variance |
|--|-------------------|------------------------------|---|--|---|----------------------------------|-------------------|------------------|
| | | Raise humanitarian standards | Grow RC/RC services for vulnerable people | Strengthen RC/RC contribution to development | Heighten influence and support for RC/RC work | Joint working and accountability | | |
| | A | | | | | B | A - B | |
| BUDGET (C) | | | 6,037,403 | 4,121,393 | 221,263 | 12,093 | 10,392,152 | |
| Shared Office and Services Costs | 122,351 | | 185,628 | 28,833 | 3,453 | | 217,913 | -95,563 |
| Total General Expenditure | 705,276 | | 394,472 | 59,000 | 9,813 | | 463,285 | 241,991 |
| Contributions & Transfers | | | | | | | | |
| Cash Transfers National Societies | 899,185 | | | | | | | 899,185 |
| Total Contributions & Transfers | 899,185 | | | | | | | 899,185 |
| Operational Provisions | | | | | | | | |
| Operational Provisions | | | 63,795 | 373 | | | 64,168 | -64,168 |
| Total Operational Provisions | | | 63,795 | 373 | | | 64,168 | -64,168 |
| Indirect Costs | | | | | | | | |
| Programme & Services Support Recove | 634,263 | | 137,175 | 87,049 | 3,589 | | 227,812 | 406,450 |
| Total Indirect Costs | 634,263 | | 137,175 | 87,049 | 3,589 | | 227,812 | 406,450 |
| Pledge Specific Costs | | | | | | | | |
| Pledge Earmarking Fee | | | 16,058 | 4,348 | | | 20,405 | -20,405 |
| Pledge Reporting Fees | | | 1,400 | | | | 1,400 | -1,400 |
| Total Pledge Specific Costs | | | 17,458 | 4,348 | | | 21,805 | -21,805 |
| TOTAL EXPENDITURE (D) | 10,392,152 | | 2,279,720 | 1,576,514 | 58,807 | | 3,915,041 | 6,477,111 |
| VARIANCE (C - D) | | | 3,757,683 | 2,544,879 | 162,457 | 12,093 | 6,477,111 | |

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| Budget Timeframe | 2016/10-2017/3 | Budget | APPROVED |
| Split by funding source | Y | Project | * |
| Subsector: | * | | |

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IV. Breakdown by subsector

| Business Line / Sub-sector | Budget | Opening Balance | Income | Funding | Expenditure | Closing Balance | Deferred Income |
|--|-------------------|-----------------|------------------|------------------|------------------|------------------|-----------------|
| BL2 - Grow RC/RC services for vulnerable people | | | | | | | |
| Disaster management | 2,366,352 | 30,326 | 2,224,928 | 2,255,253 | 1,593,804 | 661,449 | |
| Food security | 901,498 | | 1,245,257 | 1,245,257 | 126,957 | 1,118,300 | |
| Shelter | 2,769,552 | | 1,919,493 | 1,919,493 | 558,959 | 1,360,534 | |
| Subtotal BL2 | 6,037,403 | 30,326 | 5,389,678 | 5,420,003 | 2,279,720 | 3,140,283 | |
| BL3 - Strengthen RC/RC contribution to development | | | | | | | |
| Disaster risk reduction | 417,611 | | 55,269 | 55,269 | 13,006 | 42,263 | |
| Health | 1,516,936 | | 1,161,987 | 1,161,987 | 1,139,486 | 22,502 | 374,281 |
| Water and sanitation | 2,186,847 | | 638,522 | 638,522 | 424,022 | 214,500 | |
| Subtotal BL3 | 4,121,393 | | 1,855,778 | 1,855,778 | 1,576,514 | 279,264 | 374,281 |
| BL4 - Heighten influence and support for RC/RC work | | | | | | | |
| International relations | 221,263 | | 111,834 | 111,834 | 58,807 | 53,027 | |
| Subtotal BL4 | 221,263 | | 111,834 | 111,834 | 58,807 | 53,027 | |
| BL5 - Joint working and accountability | | | | | | | |
| Cooperation and coordination | 12,093 | | | | | | |
| Subtotal BL5 | 12,093 | | | | | | |
| GRAND TOTAL | 10,392,152 | 30,326 | 7,357,290 | 7,387,616 | 3,915,041 | 3,472,575 | 374,281 |