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Emergency Plan of Action Operation Update

Tonga: Tropical Cyclone Gita

 International Federation
of Red Cross and Red Crescent Societies

DREF n° MDRT001	Glide n° TC-2018-000102-TON
EPoA update n° 1; 31 March 2018	Timeframe covered by this update: 13 February to 15 March 2018
Operation start date: 13 February 2018	Operation timeframe: 3.5 months Expected end date: 31 May 2018
Overall operation budget: CHF 296, 517	DREF amount initially allocated: CHF 296, 517
N° of people being assisted: 12,000 (revised from 18,000 initially planned)	
Red Cross Red Crescent Movement partners currently actively involved in the operation: The National Society is working with the International Federation of Red Cross and Red Crescent Societies (IFRC), partner National Societies and the International Committee of the Red Cross (ICRC).	
Other partner organizations actively involved in the operation: National Emergency Management Office (NEMO), Ministry of Internal Affairs, Oxfam, CARE through MODI, Caritas, and churches	

Summary of major revisions made to emergency plan of action:

1. Target numbers revised from 3000 households to 2000, 18,000 people to 12000 people as per latest assessment data analysis.
2. Health RDRT cancelled and replaced by a monitoring visit as follow up. Justified by bilateral delegate surge delegate from NZRC who supported TRCS early in the response.
3. WASH activities reduced to cater for only two communities instead of initial target, due to MOH and Tonga Water Board leading and covering assessment, monitoring and distribution of water treatment. Distribution of Jerry cans was very minimal as there was not a need.

A. SITUATION ANALYSIS

Description of the disaster

Tropical Cyclone Gita (TC Gita), a Category 4 system crossed Tonga between 12 and 13 February 2018 with average winds of 110 knots (285km/hour) close to the center, making it one of the worst cyclones to have ever hit the island nation in recorded history, has left a trail of damages to infrastructures and homes in Tongatapu (where the capital of the country Nuku'alofa is situated) and 'Eua.

A State of Emergency was declared by the Government of Tonga at 10.00 am on Monday 12 February 2018 for initially one month. This declaration is now being extended to the 12 April 2018 to allow for all agencies responding to complete all Emergency interventions and transition to early recovery. Upon the initial declaration the Tongan government to New Zealand Ministry of Foreign Affairs and the Division for Foreign Affairs of the Australian government for initial support and non-food items relief supplies.



Rapid assessments conducted in Tongatapu and 'Eua, (Photo: Tonga Red Cross Society)

Government-led assessment teams have been deployed to assess the extent of damage to essential services, power and electricity, agricultural crops and school buildings, where damage was thought to be most severe in Tongatapu and 'Eua. Latest figures released by NEMO indicates 1,991 houses have been damaged and destroyed in Tongatapu,

and 257 in 'Eua, for a total of 2,248 houses damaged or destroyed. Assessments numbers are still being tallied and analyzed with an expected rise to approximately 20 per cent of houses across the affected areas, where up to 2,800 houses could be damaged or destroyed. Approximately 4,500 people sought refuge in evacuations centres. To date, all evacuees who were sheltered in about 108 evacuations centres in Tongatapu have returned to their usual place of residence. However, in 'Eua three evacuation centres remain open housing about nine families as of Situation report 12 from NEMO.

Summary of current response

Overview of Host National Society

Tonga Red Cross Society (TRCS) was established by an Act of Parliament in 1981, making it an auxiliary to the authorities. The National Society has a total of 154 emergency response trained (ERT) volunteers, 17 staff and presence in 80 per cent of the country through its community volunteers and three branches. The National Society has limited experience with managing a DREF operation, however it had recent experience managing emergency response from the 2014 Tropical Cyclone Ian (TC Ian) that devastated mainly the Ha'apai group.

TRCS is liaising closely with the National Emergency Management Office (NEMO) under the Ministry of Meteorology, Energy, Information, Disaster Management, Environment, Climate Change and Communications (MEIDECC).

TRCS cooperates with government departments, particularly in the fields of disaster preparedness, relief and health. TRCS is represented on the National Emergency Management Committee (NEMC) the leading coordinating body for disasters in Tonga. The government national disaster plan recognizes TRCS as a provider of relief and assistance in emergency and recovery.

TRCS has its own disaster plan and an annual plan of action. TRCS has a disaster management unit. The disaster manager will take the lead for the operation, with technical support provided from the IFRC country cluster support team (CCST) and regional office. The disaster management coordinator (DMC) role is to coordinate preparedness and response activities. TRCS has a core group of volunteers who are trained in emergency response supporting the TRCS role in responding to disasters through needs assessments, the delivery of First Aid, psychosocial support and relief distribution to the Tongan community. TRCS provides regular first aid training and disaster awareness throughout the country.

In 2007-2008, TRCS undertook the Preparedness for Climate Change Programme, during which TRCS engaged in vulnerability and capacity assessments (VCA) at the community level for the first time. Following a tsunami in 2009, TRCS developed a community-based project focusing on mangrove planting in Niuatoputapu, and has invested in the development of its branches with support from its partners.

TRCS' territorial coverage is primarily on the islands of Tongatapu. It has limited branch activity in rural areas and outer islands; however, after TC Ian in 2014, with support from the Japanese Red Cross Society, TRCS built its branch in Ha'apai and with ongoing support from Australian Red Cross recruited three Branch Officers in Charge (OIC) in Ha'apai, 'Eua and Vava'u enabling programme activities being undertaken from its headquarters in Nuku'alofa to have a much broader coverage of the country.

The National Society operates a school and services for the disabled and hearing impaired. It has approximately 300 members, primarily youth and about 17 staff, including for its services to the disabled. Since TC Gita, the school premises had been used as a makeshift Emergency Operation Centre (EOC) until the school starts operating again after TC Gita.

TRCS have prepositioned relief supplies in 14 sites across the country – five sites in Tongatapu; five sites in Ha'apai; one site in 'Eua Island; 1 site in Vava'u Island and 2 sites in the far northern Nui islands. At each site, TRCS volunteers have been trained in basic logistics processes to facilitate and track the transport of pre-positioned NFIs to distribution sites. The TRCS pre-positioned stocks could serve the needs of up to 2,000 households across the country, but shipping and transport constraints mean that not all stocks are easily transported between locations. The main inter-island transport routes are from Tongatapu island (where the capital is situated) to other parts of the country via sea and air with regular schedules to most locations twice a week (except only once a month to the far northern Nuias).

Overview of Red Cross Red Crescent Movement in country

National Societies in the Pacific, along with the IFRC country cluster support team (CCST) in Suva and partner National Societies, have been in regular communication and on high alert since this tropical cyclone was sighted by the Fiji Meteorological Service. The IFRC Suva CCST organized several teleconferences for concerned partners, including a partners' teleconference to better coordinate the Movement-wide response. The IFRC CCST continues to closely liaise with TRCS, providing support for information management (including preparation of informal updates) and international relations management.

To date, the IFRC CCST has supported TRCS in posting a DMIS update, an Information Bulletin, and has coordinated extensive social media and media coverage of Red Cross references to Tropical Cyclone Gita in more than 100 international news articles.

CCST Suva is coordinating with partner National Societies and deploying technical support under sectors such as shelter, health and psychosocial support, finance, logistics, PMER, Information management, communications and media to Tonga supporting the efforts of the local volunteers and staff of Tonga Red Cross Society. The operation is supported by the Pacific operations coordinator from the Asia Pacific regional office arriving in Fiji on 13 February 2018 providing coordination support to CCST Suva. An IT&T emergency response unit (ERU) has been prepared on standby to be deployed to restore communications if needed in Nuku'alofa, the capital of Tonga.

IFRC has launched a DREF operation, in support of TRCS, providing immediate funding for initial needs assessment, WASH, Health, Shelter and distribution of prepositioned non-food relief items.

The International Committee of the Red Cross (ICRC) regional delegation in Suva, together with the National Societies promote international humanitarian law (IHL) and raises other humanitarian issues with governments, security forces, academic circles, the media and civil society. The ICRC assists communities affected by conflict and visits detainees. It helps National Societies build their capacity in the fields of communication, dissemination and restoring family links and supports them in keeping their legal base updated.

Overview of non-RCRC actors in country

High commission offices for New Zealand and Australia are present in the capital Nuku'alofa alongside the embassies of China and Japan. The New Zealand Ministry of Foreign Affairs and Trade specifically has a post in Nuku'alofa to assist in mobilising support to the Government of Tonga.

Caritas, Save the Children, Oxfam, Act for Peace, Mainstreaming of Rural Development Initiative (MORDI) (with support from CARE International and CARE Australia), WHO, UNICEF, FAO and UNDP have a local presence with support from their country offices in Suva, Fiji. Habitat for Humanity, IOM, UN Women, UNFPA had been supporting also the efforts of the local entities and line ministries that were leading the operation in all sectors.

Coordinating with the authorities

The Tongan government is leading the emergency response. The National Emergency Management Office (NEMO) is coordinating efforts and has activated the national and district Emergency Operations Centres (EOC). The TRCS coordinates closely with the NDMO and is a participant in the high level National Emergency Management Council (NEMC), which is currently chaired by the Tonga acting Prime Minister. Red Cross volunteers are being mobilized at the request of the NEMO and have supported joint damage assessments according to its mandated role. The NEMO has made radio announcements encouraging communities at risk to cooperate with Red Cross volunteers and NEMO.

The government and the Food Security Cluster is currently meeting food requirements for affected communities, by providing a one-month food distribution. Distribution of food is the government's responsibility. The Health and Water, Sanitation and Hygiene promotion (HNWASH) Cluster is coordinating Health and Hygiene promotion interventions to reduce the risks of Dengue cases and prevent any further outbreak in the aftermath of TC Gita. The Tonga Power and two of the telecommunication service providers have also been mobilised to restore power and communications in both islands. Power is now almost restored across Tongatapu.

Inter-agency coordination

The cluster system has been adopted by the Government of Tonga as their way of coordinating the response but the clusters have not yet been activated as international assistance has not been requested by the Tongan authorities besides bilateral request to the governments of Australia and New Zealand. However, the humanitarian community is supporting the Tonga national sectorial coordination. All coordination activities are led by a government ministry and co-led by a humanitarian agency. These are happening on a daily basis and aims to share information on needs, on gaps and agree common approaches and tools, including protection gender and diversity equality in this response. Several joint sectorial meetings have been held; bringing together key stakeholders in health & WASH, shelter, food security, essential services, protection, gender and inclusion and as well as early recovery.

On the 14 February 2018, the Government of Tonga through the Ministry of Finance and National Planning requested the assistance from the Pacific Humanitarian Team, specifically seeking immediate support for technical and coordination from UNOCHA, and cluster support through the local cluster arrangements.

The Pacific Humanitarian Team (PHT) in Suva Fiji has been mobilized and has coordinated regular meetings for agencies, providing overall coordination of humanitarian actors remotely. This joint approach aims to ensure that sectors are aligned in their approach. In addition, Cluster Leads meet daily with the NEMO to ensure good coordination and information flow. An informal Pacific Humanitarian Team is established and often meets to look at the coordination of international humanitarian assistance and update on what the cluster leads and partners are doing in support to the efforts of the Government of Tonga.

The shelter cluster was activated by the Government of Tonga back in 2014 in response to TC Ian. The government is leading the cluster through the NEMO office. IFRC has been leading the Pacific shelter cluster since its activation in 2012, as a part of the Pacific Humanitarian Team. In its role as convener of the emergency shelter cluster in natural disasters, the IFRC was requested by the Government of Tonga to deploy a shelter coordination team (SCT) to support and advise the cluster lead on humanitarian shelter response. In this case, the SCT was deployed to Tonga independent of the IFRC - National Society operation. The team would be exclusively dedicated to the task of supporting shelter cluster coordination, for the benefit of all actors involved in shelter interventions. A [web page](#) dedicated to the Tonga shelter cluster has been created on the Global Shelter Cluster website.

Needs analysis and scenario planning

Latest figures released by NEMO indicates 1,991 houses have been damaged and destroyed in Tongatapu, and 257 in 'Eua, for a total of 2,248 houses damaged or destroyed. Assessments numbers are still being tallied and analyzed with an expected rise to approximately 20 per cent of houses across the affected areas, where up to 2,800 houses could be damaged or destroyed. Many families have begun repairing their houses. Main needs in the shelter sector include repair and retrofitting of damaged houses and mid-long-term shelter solutions for those with completely destroyed houses.

Individuals who have been displaced and were located in temporary shelters (including evacuation centres and households) report feelings of sadness, fear, discomfort and insecurity. Resources are insufficient, and the needs of vulnerable family members – including people living with disabilities and the elderly – are not being prioritized. The physical set-up of temporary shelters creates significant protection risks. Toilets are not sex-separated, and in many cases lack adequate lighting and cannot be locked, creating risks of sexual assault for women and girls. Most children have been out of school for a week. Some children are reportedly sheltering in evacuation centres away from primary caregivers, increasing their exposure to potential protection risks. Many children are likely to be in need of psychosocial support, as they have experienced the trauma of the destruction of their homes, disruption of routines and lack of normalcy.

An estimated 25,000 students at all levels of education have been directly affected. Preliminary assessments indicated an estimate of 61 primary and secondary schools were affected out of the total of 72. A total of 50 general classrooms and 50 staff quarters were either destroyed or seriously damaged. Schools were temporarily put on a break since 12 February 2018 and was reconvened on the 5th March. The Education Cluster response plan aims to address some of the most immediate needs of 25,000 school aged children including the teachers.

Access to safe water, sanitation, hygiene and essential health services in the areas affected by TC Gita has been compromised in the islands of Tongatapu and 'Eua.

Communities have begun to work together to restore water and sanitation services by procuring additional tanks both at the households and communal level. A total 1,250 houses were either partial or totally damaged, leading to assumptions that sanitation facilities may have been affected too. Sanitation continues to be an issue with the risk of flooded areas being contaminated with sewage from leaking and/or overflowed septic tank systems, more so in low lying areas where flooding and water logging remains an issue, even before the cyclone. Communities have reported foul odor from these areas and the government through the National Emergency Management Office (NEMO) is working to pump the areas free of water.

It is estimated that a total of 79,556 people affected by TC Gita, with an estimated 4,500 people displaced and in evacuation centres, of which at least 45 per cent will need support in water, 25 per cent will need support in sanitation, 100 per cent will require ongoing health and hygiene messaging, as well as continuous health services, from primary to secondary health care.

The damages to fruit trees ranges from 70 to 80 per cent, since the majority of fruit trees had branches broken down, up rooted, defoliated or cut in half as well as de-fruited. Examples of fruit trees are; Breadfruits, Papaya, Tava and etc. Nearly 90 per cent of banana species were either uprooted or blown down, yet, it can recover by cutting the whole tree. Around 30 to 40 per cent of coconuts around Tongatapu and 'Eua where either uprooted or blown down.

The root crops experiences damages that range from 40 to 50 per cent, considering of all root crops. The cassavas were the most vulnerable as the matured tuber were affected by the wind as it caused the tuber to start rotting even though it's still intact. Most Taro species had its leaves torn into pieces but the tubers are still edible. Yams were the least affected in all root crops; especially the cultivar Lose, Ufilei (a type of yam) and Pita since they are the recommended varieties suitable for all weather. The Kahokaho (a type of yam) and most of the Tokamu'a varieties were fortunate as they have reached maturity and harvesting time, however, the ta'u lahi were the unfortunate ones as they were mildly affected.

The fisheries sector also experienced damages in Tongatapu and 'Eua due to the tropical cyclone. Approximately 40% of Fishing Vessels and its engines were damaged by the Cyclone. Subsistence or local fishermen's fish fences were also damaged by the heavy swells and winds.

TC Gita has affected most of the essential services in Tongatapu and 'Eua. Strong winds and heavy rain has damaged electricity lines, communication cables, market facilities, print and electronic media facilities. Widespread electricity outage has also affected other public utilities such as supply of water to institutions and residential homes. Wastes management and disposal of disaster waste is also a major concern with potential to trigger public health concerns. All essential services need to be restored to ensure access to other basic services.

Targeting

The TRCS assessments have completed in 'Eua, and is to be completed in the 6th week (2nd week of March) in Tongatapu in close consultation with the government. There were no reported damages in Vava'u and Ha'apai. The Central Business District (CBD) was allocated to TRCS headquarters by the NEMC to respond to as well as mobilizing its branch in 'Eua. Whereas the rest of Tongatapu (eastern and western) were covered by NEMO and other partners such as MORDI, and Tonga National Youth Council (TNYC).

TRCS is contributing to the overall objectives of the national response according to its role in Tonga's National Disaster Plan. This includes assistance in post disaster damage and needs assessments, provision of emergency shelter and household items. All TRCS assessments are conducted in close consultation with the government-managed Districts and TRCS Branches. Initial damage assessment findings were shared with NEMO to assist with overall response planning.

The initial four days of the response TRCS was addressing Shelter needs only and mobilising three teams based on capacity of personnel and resources available, and later revised its approach to ensure there was an integrated shelter, HNWASH approach to distribution. On top of the assessment and distribution teams, a special team lead by the special school director was mobilised to carry out assessments and immediate response to the needs of the People Living with Disabilities (PLWD), elderly, babies, pregnant and lactating women.

The selection criteria of those who were going to receive the immediate distribution of Non- Food Items developed by the TRCS team with support from the operations surge support teams were dependent of the following;

- Level of damage to house (either partially damaged, major damaged or destroyed).
- Household had PLWD, elderly, babies, pregnant and lactating mothers.
- If level of damage to house is as above and have more than six people living in the house.

Where TRCS cannot assist a referral, a system was in place for other stakeholders to assist especially with cases of assessed households that needed food supplies, medicine and welfare follow-up.

To cater for the beneficiaries who were either not at home when assessment teams undertook assessments and distribution in their areas, referral cards (in English and Tongan) were left on their doorsteps to call in the office or come visit in person. A team of trained PSS volunteers and staff were tasked to set up a referral/ PSS desk as a reception area to deal with those that called back as well as those that had complaints on the distribution by TRCS and other partners.

TRCS volunteers played a key role, working alongside the district/ town officers and other stakeholders to carry out assessments, beneficiaries' selection and response to the disaster under the three main areas of intervention emergency shelter, health and WASH awareness and protection and social inclusion.

As of the fourth week of the response, NEMO had ceased NFI distributions and requested that TRCS covers any gaps from not just the areas TRCS was responsible for but also areas that NEMO was looking after.

Scenario planning

The most likely scenario is that the Tongan government has the capacity to manage the operation with support from its local civil society, non-government organisations and private sector. Also, the Pacific regional based organisations and the humanitarian sectors were mobilised to provide support where appropriate.

The worst-case scenario is that the cyclone season is not yet over and potential risk of another cyclone affecting the island group later in the season is still very high.

Additionally, Tonga is suffering from a dengue fever outbreak. There is a possibility that the aftermath of Tropical Cyclone Gita will exacerbate conditions for the disease. Lack of proper access to health facilities and proper clean water can further deteriorate the situation.

Operation Risk Assessment

Adhering to its Fundamental Principles and to the principle of 'do no harm' are central to how the Red Cross Red Crescent Movement approaches its interventions. Some of these can be planned for and mitigation actions adopted, while others are still evolving. The most prominent part of the 'do no harm' approach is that people are already highly resilient to the impact of the disaster, and as such the level of material support for the recovery should be carefully considered. Recovery support should not undermine communities' ability for future disaster or create dependency on

aid during disaster. It should also not exacerbate existing gender inequalities or other inequalities that exist in society. There will be an emphasis on quality programming and institutional capacity development of National Society branches on the outer islands. All activities will be monitored closely, and a review of any operational risks will be dealt with carefully by the IFRC CCST.

Finally, it is important to note that due to the minimal functioning markets and services in country, no cash programming can be considered for this operation. In addition, TRCS has no trained volunteers to implement this.

B. OPERATIONAL STRATEGY

Overall objective

This operation aims to support the TRCS in responding to the immediate needs of communities (12,000 people) affected by Cyclone Gita and undertaking rapid assessments to inform the development of a detailed action plan. The operation will include provision of assessments, emergency shelter and other relief items, Health and community preparedness and risk reduction.

Proposed strategy

The activities in this emergency plan of actions are expected to be implemented by 31 May 2018, while the OFDA funds will extend up to August 2018. Funding from Department of Foreign Affairs and Trade (DFAT) from Australia will also be utilised for activities for support to shelter cluster coordination and surge IFRC support staff costs, not included under DREF. The proposed operational strategy aims at reaching out to the people affected and providing basic needs. The total number of people targeted is 12,000 (approximately 2000 HH, family size = 6) in Tongatapu, and 'Eua which has been calculated based on the number of people in the affected areas as well as the capacity of the National Society to respond, other stakeholders' response in addition to information provided by the government and other partners.

TRCS was allocated to cater for main activities which include:

- Deployment of trained staff and volunteers within Tongatapu and 'Eua to support with the assessment and relief distribution.
- Volunteers will assist in identifying affected people and preparing beneficiaries list and putting together data and information analysis reports.
- Distribution of existing essential relief items from TRCS existing stocks and subsequent replenishment through local procurement and in-kind donations accompanied with provision of awareness/technical guidance.
- Health (ECV and dengue awareness for affected people and Red Cross members).
- Ongoing monitoring and finance visits.
- Shelter cluster coordination support (as per request by the national shelter cluster lead).
- Logistics management support.
- Given the possibility if increased Dengue fever outbreak, hygiene promotion, epidemic control for volunteers, health awareness and information sharing in community level through social media and other media will be carried out.
- A 'lessons learned workshop' for participating staff and volunteers at the end of the DREF operation.

Emergency relief, shelter and WASH items to distribute per household (HH)

Emergency shelter and household items	
Kitchen sets	1
Blankets	2
Mosquito nets	1
Mosquito coils	1 (box)
Tarpaulins	2
Shelter tool kit	1
Lamps (optional)	1
Emergency WASH ¹	
Hygiene kits	1
Jerry cans 10 L	2

¹ These are standard IFRC hygiene kits procured from KL in stock. They also include some menstrual hygiene items for women.

Operational support services

Human resources

For the TC Gita Operation, TRCS had mobilised 40 staff & volunteers in Tongatapu, and about 20 volunteers in 'Eua Branch under the coordination of the Branch OIC. Volunteers and staff in Tongatapu were allocated to field teams for assessment and distribution, logistics, referral & psychosocial support desk, information management and general support duties for the first four weeks. The operation slowed down and the numbers of volunteers has decreased to half the initial numbers in both islands.

Most of these volunteers are mobilised from the communities around Tongatapu and 'Eua. Each volunteer will be provided with transportation allowance as well as Red Cross visibility. Those involved in the response will be provided with required safety and security equipment prior to deployment and insurance coverage. One Logistics officer, one Communications Dissemination and Media coordinator, three Health and First Aid officers, one Disaster Management coordinator, five teachers from the special needs school, three Finance officers and the secretary general have been providing leadership and coordination of the overall operation.

Together with these local human resource, IFRC Suva CCST and Asia Pacific regional office (APRO) have deployed support through:

- Logistics manager (by existing IFRC staff from CCST Suva).
- Shelter Cluster coordinator (by existing IFRC staff from CCST Suva and Global Shelter Cluster Team).
- PMER (by existing IFRC staff from CCST Suva).
- Operations management (by existing IFRC staff from CCST Suva and APRO).
- Finance Management (by existing IFRC staff from CCST Suva).

Provision to deploy Regional Disaster Response Team (RDRT) mechanism on support in areas of:

- Finance management RDRT deployment (three months).
- Logistics Procurement RDRT (for one month).

IFRC Suva CCST has also coordinated bilateral human resources support in Information Management (IM), Communications and Media, Health Delegate and the Operations Manager for three months from the New Zealand Red Cross.

Deployment of a peer-to-peer exchange for initial two weeks to support with Logistics was also facilitated by CCST Suva, and Vanuatu Red Cross supported this by deploying their Logistics volunteer to Tonga Red Cross for the operation.

Protection, gender and inclusion

The focal person of Tonga Red Cross is an experienced staff in PGI programmes. The volunteer team is expected to be gender balanced. The Shelter and WASH guidelines of the IFRC Minimum Standard Commitments to Gender and Diversity in Emergency Programming will be followed throughout the operation. Measures to address vulnerabilities specific to gender and diversity factors (including people with disabilities) will be included in the planning and implementation of activities.

Logistics and supply chain

Logistics activities have aimed to effectively manage the supply chain, including, procurement, customs clearance, storage and transport to distribution sites in accordance with the operation's requirements and aligned to IFRC's logistics standards, processes and procedures.

TRCS have prepositioned relief supplies in 14 sites across the country – in five sites in different locations. For this operation, the prepositioned NFIs in Tongatapu and 'Eua have been distributed to affected populations (supplemented by family tents and hygiene kits that needed to be accessed from Vava'u and Ha'apai).

The initial estimate that NFIs would be needed for 3,000 households resulted in request to Australian Red Cross and New Zealand Red Cross to donate IFRC standard NFIs to TRCS to meet the gap between TRCS pre-positioned quantities and that needed for 3,000 households. Support was provided by these partner NSs and NFIs delivered via two Australian Defence Force flights and three Air New Zealand airfreight consignments. Due to revision of operational targets to 2,000 households, the donated NFIs can be used to replenish TRCS pre-positioned stocks in line for TRCS storage capacity, stock holding strategy and targets. Replenishment of family tents will be provided through the IFRC Asia-Pacific OLPSCM department in Kuala Lumpur (KL). It is estimated that sea freight from the IFRC OLPSCM warehouse in KL to Tongatapu will take minimum 40-45 days by sea (port to port) and is expected to arrive on mid-May 2018. Replenishment of hygiene kits will be conducted through local procurement. No further replenishment of NFIs is needed for TRCS.

To support operations, a surge warehouse space has been rented by TRCS for 3 months to temporarily store NFIs and relieve pressure on existing cramped storage spaces by allowing some reorganizing of the old stocks and to ensure smooth distribution operation in TRCS HQ to take place. They have fully closed down the surge warehouse

last week, approximately 45 days much earlier than allocated. The usage of Bin Card was re-introduced to TRCS logistics team, target to be in practice from now onwards. TRCS has also engaged local trucks and drivers to support operations.

Technical logistics support has been provided to TRCS through the deployment of the IFRC CCST Pacific Logistics Manager to Tonga for three weeks. This position was replaced by Logistics RDRT position for a further 1-month and logistics peer-to-peer surge support team member from Vanuatu Red Cross for two weeks. The operation has also engaged a locally recruited surge warehouse manager to support TRCS Logistics Officer during the operation for 3 months. IFRC OLPSCM has also provided technical support to TRCS and IFRC CCST as required ensuring alignment with IFRC logistics standards and procedures.

Information technologies (IT)

All volunteers will have access to means of continuous communication while in the field. This will ensure they are contactable and can contact relevant emergency numbers as well as IFRC and TRCS staff for support if needed. Cell phone reception has been confirmed in the affected areas where volunteers will be traveling to.

NZRC has been able to activate six satellite phones to provide backup telecommunications for the operation.

Gaps in IT equipment for the operation was supported through 1 laptop from the CCST office in Suva for IM and Data entry, and a locally procured laptop to be supported through funds available from OFDA.

Communications

Communications and media coverage is essential for maintaining and building public, government and donor support, both locally and internationally – particularly with Tongan diaspora communities around the world.

IFRC has been supporting Tonga Red Cross Society to actively communicate with external audiences on the impact of Cyclone Gita and the Red Cross humanitarian response, with the aim of generating visibility on and support for the ongoing humanitarian needs on the ground and the Red Cross response.

Close collaboration is maintained between the IFRC CCST office and Tonga Red Cross Society to ensure a coherent and coordinated communications approach.

Commonly agreed key messages and talking points will be produced together with written and audio-visual content that could be used for infographics, and relevant social media/ digital products focusing on highlighting the situation and the Red Cross actions on the ground. Communications content will be actively promoted via a variety of channels and IFRC online communications channels and shared widely with interested National Societies.

Security

There are no significant security issues or threats for FRCS and IFRC staff; however, the operation will minimise security concerns within communities by adopting a 'do no harm' approach, in line with IFRC Code of Conduct and Child Protection Policy.

Planning, monitoring, evaluation, & reporting (PMER)

The disaster management coordinator for TRCS with the support of IFRC, will guide and monitor the Plan of Action. Reporting on the emergency plan of action will be carried out according to IFRC minimum requirements. Monitoring visits to the affected communities and interviews with beneficiaries, volunteers and others participating in the response will be conducted to assess progress at regular intervals and guide any required adjustments to the proposed response. At the end of the operation, a lessons-learned workshop will be carried out by TRCS staff, with volunteers and relevant stakeholders. The IFRC CCST Suva PMER officer will be supporting the National Society and if needed PMER surge support will be explored.

Administration and Finance

The IFRC provides the necessary operational support for review, validation of budgets, bank transfers, and technical assistance to National Societies on procedures for justification of expenditures, including the review and validation of invoices. The IFRC will ensure that a full-time finance delegate with the CCST Suva office is in place for the duration of the operation to monitor the finances and ensure the financial reporting of the DREF is utilized according to activities. An RDRT will be deployed to provide financial management of the operation for a period of two months.

C. DETAILED OPERATIONAL PLAN



Shelter

People reached: 12,000 (2000 Households in Tongatapu and 'Eua)

Male: N/A²

Female: N/A

Outcome 1: Communities in disaster and crisis affected areas restore and strengthen their safety, well-being and longer-term recovery through shelter and settlement solutions

Indicators:	Target	Actual
# of targeted people with safe and adequate shelter and settlements	12,000	11,976

Output 1.1: Emergency shelter and settlement assistance is provided to 3,000 affected households within 3 months

Indicators:	Target	Actual
# households provided with emergency shelter and settlement assistance	2,000	1,996

Shelter Output 1.2: Technical support, guidance and awareness raising in safe shelter design and settlement planning and improved building techniques are provided to affected households

Indicators:	Target	Actual
# households provided with technical support and guidance, appropriate to the type of support they receive	2,000	745

Progress towards outcomes

Needs analysis and scenario planning

Latest figures released by NEMO indicates 1,991 houses have been damaged and destroyed in Tongatapu, and 257 in 'Eua, in total 2,248 houses. Assessments numbers are still being tallied and analysed with an expected rise to approx. 20 per cent of houses across the affected areas—up to 2,800 houses could be damaged or destroyed.

A total of 108 evacuation centers shelters were initially established to cater for over 4,500 evacuees of which 1,225 affected families were in Tongatapu, and 264 affected families in 'Eua. The latest Situation Report from NEMO stated that there are 2 remaining evacuation centers still operating in 'Eua catering to 4 families. Families who have been displaced by the cyclone, taking refuge in collective centers, makeshift shelters, or living with host families required various types of material, physical and technical assistance over the relief phase.

The approach from government and its shelter partners insisted that the most vulnerable should be prioritized, such as the elderly, people with disabilities and reduced mobility, single-headed households, lactating women, large families, and the landless. Displaced families are typically more vulnerable than non-displaced.

Tonga Red Cross as one of the major emergency shelter responders in Tonga will take a vital role in this response, coordinating their work closely with the government, shelter partners (including Caritas and Rotary currently have emergency shelter stocks in Tonga), and other key stakeholders in the shelter sector.

Supporting Shelter Coordination

IFRC has been leading the Pacific Shelter Cluster since its activation in 2012, as a part of the Pacific Humanitarian Team. In its role as convener of the Emergency Shelter Cluster in natural disasters, the IFRC may be requested by the Government of Tonga to deploy a Shelter Coordination Team (SCT) to support coordination of the humanitarian shelter response. As the clusters have not been activated, the Shelter Coordination Team is on standby to be deployed if needed. A fully funded Shelter Cluster would in this event be deployed to ensure this role. A [webpage](#) dedicated to the Tonga shelter cluster has been created on the Global Shelter Cluster website.

Population to be assisted:

3,889 houses damages and 819 destroyed has been identified by Government to need emergency shelter and NFI assistance. Under this Plan of Action, up to 2,000 households in the following situations will be assisted:

Displaced households:

- staying in collective centres
- temporarily settled (dispersed, unplanned camps, renting)
- staying with host families – friends and family

² Disaggregated data has been registered by TRCS. However, at the time of this report, the records are still being compiled by the information management officer and were not available on time for this report.

- *Staying in formal camps (if evacuation centres are overcrowded, and essential services are not offered at place of origin).*

Non-displaced households, and returnees with:

- *partially damaged houses*
- *severely damaged houses*
- *completely destroyed houses*

As much as possible, TRCS emergency shelter assistance were offered to families at their place of origin, to encourage their early recovery.

Although the distribution of tents was to be avoided and not encouraged as in the past, this has been directly linked to slowing down the recovery process of affected communities, TRCS and NEMO had distributed tents as desperate requests and advice from Town and District officers for special cases where assessments were highlighting the most vulnerable families with destroyed houses with occupants either elderlies, PLWD and lactating women with new born babies. Upon receiving these the TRCS and NEMO assisted through the provision of family tents and as well as erecting the tents on their behalf.

For up to 2,000 of the most vulnerable families, the maximum emergency shelter and NFI package recommended includes:

- *two tarpaulins, 4m x 6m IFRC standard (one tarpaulin for partially damaged houses) as TRCS supported households with the amount of item based on their assessment and need of each individual household by size of house and number of occupants. Houses with minor damage were provided with one tarpaulin to ensure temporary solution to meet their need until permanent repairs could occur.*
- *one shelter tool kit (for severely damaged and completely destroyed houses). Those households that received shelter tool kits were provided with briefing and instruction on how the kits and items could be utilized.*
- *two blankets, IFRC synthetic medium thermal (for host families, severely damaged and completely destroyed houses)*
- *one kitchen set, IFRC Type A (for host families, severely damaged and completely destroyed houses)*
- *one solar light. TRCS currently has a stock of 3,000 hurricane lamps. This is old technology and should only be distributed where affected households agree to receive it, and have access to fuel, and adequate financial capacity to purchase it over a 3-month period. Provision of solar lamps are highly preferred, particularly for remote locations.*

Programme standards/benchmarks:

Emergency shelter interventions were designed to comply with the Sphere standards.

The main challenge faced by TRCS was to cover gaps of most vulnerable not reached by NEMO. Initially Tongatapu was divided on geographical basis with TRCS covering the CBD area. However once NEMO finished distributions in the East and West of the island, they requested TRCS to fill any gaps. This meant that the most vulnerable may not have been assisted initially. TRCS then took referrals from NEMO and from people who either phoned TRCS or visited HQ to request assistance. In each case TRCS then had to verify the information before conducting an assessment and determining if the household met the TRCS criteria for assistance.

Technical guidance on building back safer through permanent repairs and reconstruction will be provided through NEMO and shelter cluster partner organizations as part of shelter recovery activities.



Health

People reached: N/A³

Male: N/A

Female: N/A

Outcome 2: The immediate risks to the health of affected populations are reduced

Indicators:	Target	Actual
# of people reached by NS with services to reduce relevant health risk factors	12,000	Ongoing
Health Output 2.1: The health situation and immediate risks are assessed using agreed guidelines		
Indicators:	Target	Actual

³ Disaggregated data has been registered by TRCS. However, at the time of this report, the records are still being compiled by the information management officer and were not available on time for this report.

# of high risk communities assessed using guidelines	N/A	2
Health Output 2.2: Target population is provided with rapid medical management of injuries and diseases		
Indicators:	Target	Actual
# of people reached by First Aid services	0	0
Health Output 2.3: Community-based disease prevention and health promotion is provided to the target population		
Indicators:	Target	Actual
18,000 people reached with community-based epidemic prevention and control activities	12,000	Not started
Health Output 2.4: Epidemic prevention and control measures carried out.		
Indicators:	Target	Actual
# volunteers trained by NS in epidemic control	50	Not started
Progress towards outcomes		
<p>Needs analysis: The overall health impact of Cyclone Gita will be determined after the rapid assessments. However, based on the initial reports Cyclone Gita has caused severe damage to many of the structures and caused injuries to the people on the island. Additionally, Tonga is suffering from a dengue fever outbreak. There have been 317 cases since late January of which 40 were hospitalised and two deaths occurred. The rate of occurrence has dropped since beginning of March with only 69 cases total to date. Rates are on the decline and the aftermath of TC Gita has not caused any increase in cases. Psychosocial support interventions have been discussed with the NS and not seen as a priority. It will be dealt on a case basis if the need arises.</p> <p>Population to be assisted: Health intervention will reach 18,000 people in the affected island group (Tongatapu, 'Eua and Ha'apai) through its first aid epidemic prevention and control activities, dengue awareness. Disease prevention and health promotion activities at community level are to be scaled up immediately to prevent Dengue, acute respiratory infections (ARI), diarrhoea and other diseases with outbreak potential in close coordination with the Ministry of Health. Tonga Red Cross will also support injured people through provision of first aid services. Provision of PPE equipment for TRCS volunteers and staff is also included. Awareness will be provided to them as well with the support from a regional disaster response team member with health background for a period of two months.</p> <p>TRCS have coordinated closely with the Ministry of Health (MoH) and been part of the Health and WASH cluster. TRCS first aid services were not required as injuries were not significant. Any injuries were referred to the Vaiola hospital on Tongatapu.</p> <p>The MoH sponsored the Health and WASH cluster and has been proactive in providing health and hygiene messaging through mobile phone text messages and television and radio messaging, focussing particularly on dengue prevention and a clean-up campaign for schools and communities to prevent further outbreaks. TRCS volunteers were placed on standby to assist MoH clean-up activities, however were not required.</p> <p>TRCS has distributed a total of 1,708 mosquito nets and 1,402 mosquito coils to date. Ministry of Health were also provided with 100 mosquito nets from TRCS to provide to pregnant mothers and mothers with new born babies.</p> <p>Due to the decision of NEMO to allocate geographical areas of Tongatapu for NEMO and TRCS to conduct response operations, TRCS were initially allocated the CBD area. This impacted on TRCS meeting the target for distribution of mosquito nets. Only after NEMO completed their distributions in the East and West of Tongatapu were TRCS requested to fill any further gaps in distributions. These factors affected the initial TRCS target of distribution to 3,000 households and the target was reduced to 2000 households. In addition, due to only gaps being filled by TRCS in week 3 and 4 of the operation also reduced the overall number of NFI distributed by TRCS.</p> <p>TRCS will continue with health-related awareness activities in communities and schools focussing on the main dengue affected areas first. Refresher training for 20 volunteers will be conducted on 3 to 4 April 2018. Integrated Health, WASH, DRR awareness activities are being planned to occur over the next two months. Initial planning session with TRCS department heads in progress this week. During distribution activities volunteers already disseminated TRCS pamphlets on dengue prevention (total of 2,512 pamphlets) to the affected population.</p>		



Water, sanitation and hygiene

People reached: 1080

Male: N/A⁴

Female: N/A

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

Indicators:	Target	Actual
# households provided with safe water services that meet agreed standards according to specific operational and programmatic context	2,000	N/A
# households reached with key messages to promote personal and community hygiene	2,000	Not Started

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

Indicators:	Target	Actual
# of community level water sources assessed and assisted	2	2

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

Indicators:	Target	Actual
# of households trained in the use of distributed items	2,000	Not Required

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

Indicators:	Target	Actual
# of people reached by hygiene promotion activities	12,000	Not Started
# of volunteers involved in hygiene promotion activities	TBC	Not Started

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

Indicators:	Target	Actual
# of people provided with a set of essential hygiene items	2,000	1,080
# of people trained in the use of distributed items	2,000	Not Required

Progress towards outcomes

Needs analysis:

In view of the damaging impact of Cyclone Gita, WASH needs continue to increase. The water pipelines are damaged and may take months to ensure proper water supply. There is also flooding in some areas leading to environmental sanitation issues, activities particularly cleaning campaigns and de-clogging of blocked drainages, are necessary. Due to the damage caused by the tropical cyclone sanitation facilities in the affected areas are limited and may be health-hazardous. As flooding is starting to subside it is believed that most people will be able return very soon to their homes and start re-using their own on-site sanitation systems.

Population to be assisted:

WASH intervention will reach 18,000 people in the affected island group (Tongatapu, 'Eua and Ha'apai) through distribution of hygiene kits, jerry cans, and chlorine tablets to the most affected families. Information dissemination regarding use of items from Hygiene kits and Household water treatment and storage will be conducted by TRCS volunteers. Communities and schools will be encouraged to maintain hand washing facilities. Community mobilization will be conducted for solid waste management and hygiene promotion activities with key messages.

Ministry of Health (MoH) have taken the lead on Health and WASH activities particularly around safe water and provision of water treatment. A specialist team from the environmental department of the MoH were responsible for water assessments and treatment of water in communities and schools. Omni Tonga was contracted by MoH to conduct water purification activities in communities and schools. Water distribution has been conducted by Caritas Tonga, Tonga Trust, Tonga National Youth Congress, Digidel and faith based and local NGOs.

⁴ Disaggregated data has been registered by TRCS. However, at the time of this report, the records are still being compiled by the information management officer and were not available on time for this report.

TRCS WASH assessment and assistance was conducted in two communities only, Atata island and Nukunuku Motu island. This included water chlorination at Atata island for 24 households (total population of Atata) and referral to MoH of requirement for water treatment at Nukunuku Motu as well as distribution of water. During week one of the response TRCS also distributed water to PLWD and evacuation centres.

Due to other agencies taking the lead on water supply and treatment TRCS have not had full involvement in WASH activities as initially outlined in the EPoA. TRCS did not distribute chlorine tablets (apart from Atata island) as other agencies were undertaking WASH support to the affected population, however TRCS stocks of chlorine tablets were offered to MoH, and these are on standby if required.

TRCS distributed 476 collapsible water containers and 22 buckets to households as there was not a significant need by the affected population for water containers. In general water supply was either catered for by other agencies or communities returned to normal water supply relatively quickly.

Mass communications messaging for hygiene promotion has occurred by TRCS through a 30-minute television and radio programme hosted by TRCS communications manager.

WASH awareness activities focusing on hygiene promotion have not commenced, however planning is currently underway to conduct integrated awareness activities with communities for WASH, Health and DRR over the next two months. Detailed planning will be completed by the end of this week. WASH refresher training for volunteers will occur in the next 10 days. Hygiene promotion materials will be printed ready for distribution during planned community awareness activities.

TRCS have distributed 1,195 hygiene kits to households during the response operation. The target was to distribute to 2,000 households, however (as stated above) initially the TRCS was allocated a geographical area (CBD) by NEMO for distribution activities this meant that they were unable to focus specifically on most vulnerable. Once NEMO completed their distribution activities in the East and West of Tongatapu, TRCS were requested to fill any gaps. However, by that stage most people had achieved a level of self-recovery and were no longer in a position of need. At this point TRCS focused solely on the most vulnerable – elderly, disabled, single headed households, and pregnant mothers.



Protection, Gender and Inclusion

People reached: 669

Male: N/A⁵

Female: N/A

Outcome 1: Communities identify the needs of the most vulnerable and particularly disadvantaged and marginalised groups, as a result of inequality, discrimination and other non-respect of their human rights and address their distinct needs

Indicators:	Target	Actual
DREFs operation demonstrate evidence of addressing the specific needs to ensure equitable access to disaster response	N/A	Ongoing

Output 1.1: NS programmes improve equitable access to basic services, considering different needs based on gender and other diversity factors.

Indicators:	Target	Actual
# of vulnerable people that received assistance from TRCS	N/A	669

Output 1.2: Emergency response operations prevent and respond to sexual- and gender-based violence and all forms of violence against children.

Indicators:	Target	Actual
#/% of DREFs operations which demonstrate evidence of addressing sexual and gender-based violence		Ongoing

Progress towards outcomes

⁵ Disaggregated data has been registered by TRCS. However, at the time of this report, the records are still being compiled by the information management officer and were not available on time for this report.

Needs analysis:

Following the devastation of people losing homes and their place of identity there is a need to ensure that all interventions are done to promote dignity, access participation and safety of the beneficiaries. Ongoing approach to consult the most vulnerable on what appropriate help they need is crucial throughout the operation.

Population to be assisted:

Children, pregnant women, elderly people, and people who are living with special needs either permanent disabilities or ill and immune-compromised, are particularly vulnerable when a disaster strikes, and take a relatively high share of the disease burden associated with emergencies. With the impact of Cyclone Gita, these vulnerable groups in the worst affected areas will be highly prioritized and included in the interventions to ensure that the actions of TRCS is as inclusive and mainstreamed, using the Minimum Standard commitments for Gender and Diversity as well as IASC standards.

TRCS has aimed to ensure equitable access to basic services, considering different needs based on gender and other diversity factors. This has been achieved through briefings to volunteers to ensure a gender and diversity lens when conducting response operations. Vulnerability criteria were also established to identify those most in need of assistance, in association with level of damage, but not simply assisting affected population based on damage alone.

Refresher training for IFRC, NS and volunteers on the Minimum Standard Commitments will be conducted in the next 10 days as part of the integrated refresher training on WASH, Health and DRR refresher training prior to conducting community consultation and awareness activities.

Throughout the response operation TRCS has participated in Protection cluster and collected disaggregated data on affected population and ensured that most vulnerable are provided with appropriate assistance. TRCS background in operating a school for disabled (OTA) and supporting home care for disabled also has ensured that they have been provided with a high level of assistance.

Development of SOPs will occur over the next two months for Protection/SGBV and mapping of referral pathway.

All IFRC staff, NS staff and volunteers have been briefed and signed the IFRC Code of Conduct and Child Protection Policy.

International Disaster Response

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

Indicators:	Target	Actual
# of coordination internal and external coordination meetings attended	N/A	15

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

Indicators:	Target	Actual
# of Surge capacity roster members deployed	N/A	10

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

Indicators:	Target	Actual
% of international procurement respecting the IFRC procurement procedures	N/A	N/A

Output S2.1.6: Coordinating role of the IFRC within the International Humanitarian system is enhanced

Indicators:	Target	Actual
# of coordination meetings with other stakeholders	10	10

Progress towards outcomes

The deployment of several IFRC surge support staff, RDRT members and IFRC delegates have provided opportunity throughout the response operation to provide coaching and on the job training to TRCS staff and volunteers. Improvement to use of proper processes have been a focus of all those deployed to support TRCS. Focus has been on improving the following:

- Operations - support and coaching by IFRC surge operations managers to the TRCS DMC to conduct structured planning and coordination of all response activities and provide oversight to logistics and finance processes to manage EPoA and budget.

- Finance - Improved internal control through use of processes to manage expenditure in accordance with allocated budgets. Provision of on the job training for finance manager and finance assistant in using proper finance processes.
- Timely support to TRCS from IFRC and bilaterally from NZRC and ARC provided a high level of support to TRCS from early in the response operation. Particularly close support to Operations, Logistics, Finance and IM and Health all contributed to a largely effective response by TRCS.
- Previous training by IFRC of TRCS volunteers in Emergency shelter and as Emergency Response Teams (ERT), as well as TRCS staff participation at IFRC training in WASH, Communications, Health in Emergencies and PGI/GBV also contributed to an effective response meeting the needs of affected population.
- Provision of support to NEMO for shelter cluster coordination assisted in both strengthening IFRC reputation whilst ensuring strong coordination between partner organisations.
- Attendance by IFRC personnel to the informal PHT briefings and inter-cluster meetings to present on behalf of TRCS was also highly appreciated by all the partners.
- Logistics /Procurement – Utilisation of processes for purchases and local procurement. Stock management through use of basic processes such as waybills and bin cards to maintain control over all NFI in stock and allocated for distribution. Replenishment of prepositioned stock in each permanent storage location has also occurred to minimise risk of all stock being at one location.
- Information Management- Introduction of structured data collection and processing to provide collated information that easily show progress of activities and outcomes achieved.
- Refresher training for volunteers on awareness activities and messaging for Protection/SGBV, WASH, Health and DRR will also improve capacity of TRCS volunteers and TRCS response operations.

Through funding from DREF, OFDA and DFAT, ARC and NZRC, several IFRC surge support staff, IFRC delegates and RDRT members have been able to deploy from early in the response operation to provide support to TRCS. Support provided to TRCS has included IFRC surge operations management support. Surge logistics IFRC support. IFRC surge finance support and RDRT finance, Peer to peer logistics support from Vanuatu Red Cross, RDRT health and RDRT IM. Communications support has also been provided remotely and through in country visit. Shelter cluster coordination was provided through IFRC CCST staff and delegates. NZRC IT&T ERU member also provided support in the early stage of the response operation.

ARC and NZRC also provided in-kind donations of NFI for distribution and replenishment of TRCS stocks.

There have been challenges in getting TRCS finance and logistics personnel to consistently use finance and logistics processes, especially in the early stages of the operation. This resulted in several local purchases occurring without proper approvals or using required procurement process. This has improved as the operation has developed and more support has been provided to TRCS by IFRC and continuous support and coaching to TRCS personnel.

IFRC deployed Shelter Cluster Coordination staff to provide support to NEMO and facilitate coordination with the shelter cluster partners. This was funded bilaterally by DFAT through ARC. TRCS has also undertaken coordination with Protection cluster, Health and WASH cluster to share experience and information and be part of a coordinated national response to assist the affected population. TRCS has been proactive in sharing information with NEMO to support the affected population in a coordinated manner.

Influence others as leading strategic partner

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

Indicators:	Target	Actual
# of communication materials produced (Social media, media interview media articles, interviews etc.)	N/A	1000
Output S3.1.1: IFRC and NS are visible, trusted and effective advocated on humanitarian issues		
Indicators:	Target	Actual
# of communication materials produced (Social media, media interview media articles, interviews etc.)	N/A	1000
% of population reached through media TRCS (Social media, media interview media articles, interviews etc.)	N/A	N/A
Output S3.1.2: IFRC produces high quality research and evaluation that informs advocacy resource mobilization and programming		
Indicators:	Target	Actual

# of HH participating beneficiary satisfaction surveyed	400	Progress
# of lessons learned workshop for the DREF carried out	1	Progress
Progress towards outcomes		
<p><i>Communications team in TRCS supported by a NZRC delegate seconded to the IFRC and the IFRC Communications manager has been;</i></p> <ul style="list-style-type: none"> • <i>Coordinating media call and interviews from both local and international news and radio outlets.</i> • <i>Updating TRCS social media sites and responding to request for what assistance TRCS needs.</i> • <i>Responding to personal interest to donate to the TRCS operation.</i> • <i>Sharing key messages on UBDs and cash donation including activities carried out by the teams.</i> <p><i>While there was a huge quantity of media mentions of Red Cross with regards to Cyclone Gita, the quality of the mentions and the strong themes of community preparedness, local responders and resilience shone through. Media monitoring shows that there were more than 650 mentions of Red Cross in online media stories related to Cyclone Gita.</i></p> <p><i>Coverage of Red Cross' preparedness and response to Cyclone Gita was extensive over social media. The IFRC CCST and affected Pacific NS used social media to share important weather and preparedness information with communities, information with media and to tell a story about their preparedness and response activities to their audiences. On Twitter, 330,000 impressions and 8,300 engagements were gained through the Pacific Communication Manager and the IFRC AP Twitter account alone. Further traction was garner on the global IFRC platforms and on the NS Facebook pages.</i></p> <p><i>Beneficiary satisfaction survey is planned and yet to be implemented. A lessons' learnt workshop is also scheduled towards the last month of the operation.</i></p>		

Reference documents



Click here for:

- [DREF operation](#)

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

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How we work

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

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



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



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



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