

Operation Update Report Fiji/Pacific: Tropical Cyclone Yasa

DREF n° MDRFJ005	GLIDE n° TC-2020-000238-FIJI
Operation update n° 1; Date of issue: 23/12/2020	Timeframe covered by this update: 16/12/2020 – 22/12/2020
Operation start date: 16/12/2020	Operation timeframe: 6 months End date: 30/06/2021
Funding requirements (CHF): 399,107	DREF amount initially allocated: CHF 86,035
N° of people being assisted: 12,531	
<p>Red Cross Red Crescent Movement partners currently actively involved in the operation: The Fiji Red Cross Society (FRCS) activated its branches and mobilised its volunteers in the affected provinces of Bua, Macuata and Cakaudrove. A team from the FRCS headquarters travelled to Bua province on December 20 to assist volunteers conducting initial assessments. The IFRC office also sent four technical staff in WASH, Shelter, Cash Based Intervention (CBI) and Health to assist FRCS staff and volunteers. The CCST Pacific office continued to provide technical support in Operations Management, Logistics, Human Resource, WASH, Shelter, Health and PMER (Planning, Monitoring, Evaluation and Reporting). The ICRC sub-regional office provided communications support to the FRCS office and Restoring Family Links (RFL) equipment and personnel support in the affected areas.</p> <p>The New Zealand Red Cross (NZRC) have been providing remote Information Management (IM) and Logistics support while the Australian Red Cross (ARC) have been providing Communications and WASH support to the Country Cluster Support Team (CCST) Suva Office.</p>	
<p>Other partner organizations actively involved in the operation: National Disaster Management Office (NDMO) and the cluster system, Ministry of Health and Medical Services and other major government actors. Medical Services Pacific for counselling. Other partners involved in the response include the UN Office for the Coordination of Humanitarian Affairs (OCHA), World Food Programme (WFP), United Nations Children's Emergency Funds (UNICEF), Australian Department of Foreign Affairs and Trade (DFAT), New Zealand Ministry of Foreign Affairs and Trade (MFAT), Oxfam, Pacific Rotary Association.</p>	

Summary of major revisions made to emergency plan of action:

The Tropical Cyclone Yasa was initially projected to pass between the two main islands of Viti Levu and Vanua Levu but eventually made landfall over Bua province in the Vanua Levu Island causing extensive damages in Bua and parts of Macuata and Cakaudrove provinces.

This Operation Update is issued to inform stakeholders of revisions made to the DREF Operation and request a second allocation of CHF 313,072 making a total budget of CHF 399,107. This is based on current immediate humanitarian needs and priorities identified in coordination with government and cluster members, including findings from FRCS rapid needs assessments that are still ongoing in the areas affected by Severe Tropical Cyclone Yasa Category 5.

An imminent DREF approved on 16 December was intended to place resources (personnel, stocks, etc.) in projected track path of TC Yasa and impacted areas prior to the landfall. The timeframe was for one month aiming to support the immediate response of the first month after the event, including conducting initial assessment and relief items distribution. As the situation and scale of impact were made clear following the assessment result, a revision to operational strategy and timeframe is defined in this operation update. This comprises the following changes:

- The target beneficiaries under this DREF operation is revised from 17,698 to 12,531 people (2,506 households) focusing in the Provinces of Bua, Macuata and Cakaudrove, Lau and the districts of Koro in Lomaiviti province and Yasawa in Ba Province.*

- Replenishment of required tarpaulins, shelter toolkits, build back safer kits, blankets, kitchen sets, jerry cans, dignity and hygiene kits, solar lanterns and black packs will be undertaken, considering the in-kind donations already received.
- Shelter: reduction in number of households targeted but an increase in hardware materials and technical support.
- Water, sanitation and hygiene (WASH): rehabilitation of Households (HH) water supply system and communal water storage for rainwater harvesting and gravity-feed system, toilet repair and WASH awareness.
- Health: a greater focus will be put on psychosocial support due to an identified need, mosquito net distribution and public health messaging.
- PGI: focus is on the provision of dignity, baby, and disability kits to those identified in need.

Additional in-kind technical support in operations management, logistics, WASH, information management and communications will be provided by Australian Red Cross and New Zealand Red Cross. Complementary funding is being sought to support additional reach of the response plan and IFRC will support FRCS to develop and implement a 'one plan' response strategy.

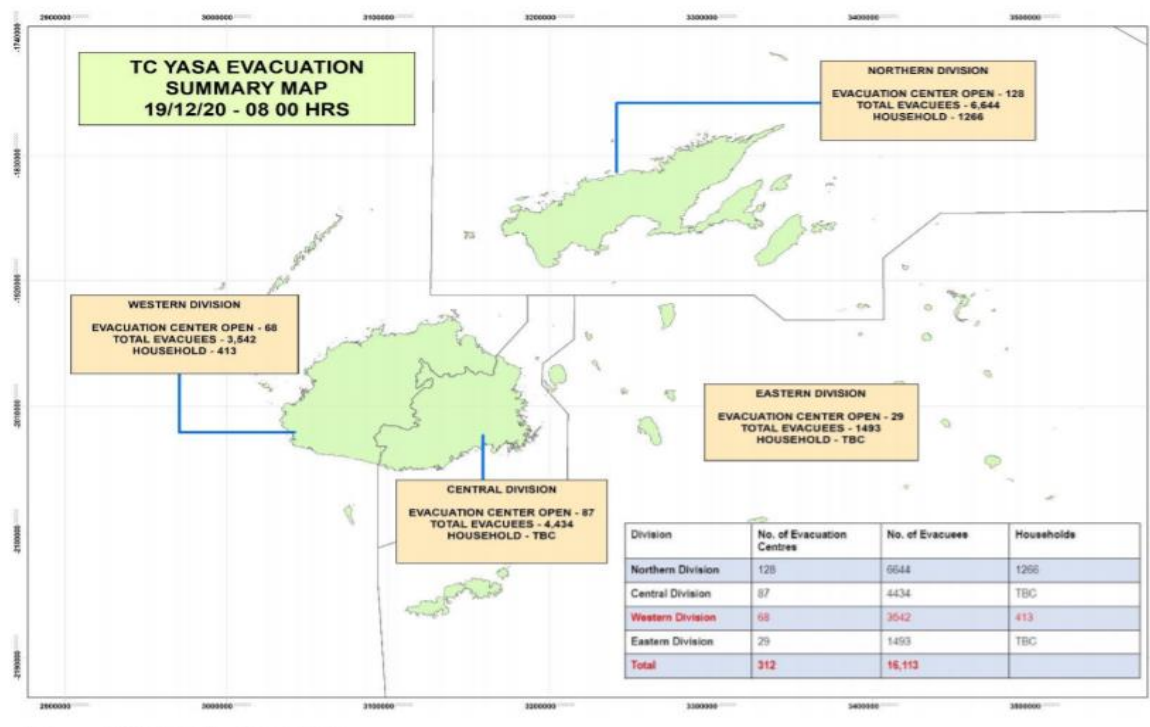
A. SITUATION ANALYSIS

Description of the disaster

On 16 December 2020, Tropical Cyclone (TC) Yasa was located about 440 kilometers west-northwest of Yasawa-I-Rara, about 500 kilometers northwest of Nadi and 395 kilometers southwest of Rotuma. Citizens of Fiji were advised to evacuate the low-lying areas in anticipation of a Category 5 Tropical Cyclone arriving late in the evening of 17 December 2020. Tropical cyclone warnings and flash flood alerts were issued for Viti Levu, Vanua Levu, the Yasawa and Mamanuca groups and smaller surrounding islands.

As of midnight, Fiji standard time on 17 December 2020, the Joint Typhoon Warning Center reported sustained winds of 140 knots (260 kilometers/160 miles per hour). The center of the Category 5 cyclone was about 400 kilometers (240 miles) northwest of Suva. The cyclone's eye was projected to pass between the islands of Viti Levu and Vanua Levu but eventually moved eastwards and made landfall over Bua province late Thursday, 17 December. Click [here](#) to see the map of affected areas.

On the 19 December 2020, the Fiji National Disaster Management Office (NDMO) confirmed four death tolls for Tropical Cyclone Yasa and approximately 16,133 Fijians were in 128 evacuation centres across Fiji¹.



An aerial assessment was done on the 20 December 2020 by NDMO that confirmed the severity of damages in the Bua province and estimated around 70 per cent of its total population being directly affected by TC Yasa. A total of 54

¹ National Emergency Operations Centre Severe Tropical Cyclone Yasa Situation Report No. 9 as at 0000hrs – 0800hrs, 19 December 2020

volunteers and six staff from the Fiji Red Cross have been deployed to the Northern Division (*Vanua Levu Island*) on 21 December to assess and distribute relief items. This FRCS assessment team is supported by the IFRC CCST technical focal points in WASH, shelter, psychosocial support services (PSS) and Cash and Voucher Assistance (CVA).

Summary of current response

Overview of host National Society response action

The National Society has been very active to monitor the track forecast and disseminate early warning within its network to community and mobilised its branches through the Division Managers (DMs) to prepare communities. Below are the actions that have been taken since 15 December 2020 prior to the landfall:

- Activated the National Emergency Operation Centre – as of 3.00 PM, 15 December 2020.
- Organized passes for vehicles and drivers, and temporary accommodation for stand-by staff.
- Held online (Zoom) meetings with Divisional Managers on preparation of branches, volunteers and the role of the Fiji Red Cross Divisional Centres, including:
 - Dissemination of health messaging.
 - Ensure readiness of Community Emergency Response Team (CERT) volunteers to respond.
 - Development and dissemination of Sitreps and updating field report ([GO Platform](#)).
 - Preparing divisional EOC and branches for response (water, generator, fuel, food, etc.).
- Planned for the initial assessment (using D1 form), volunteer deployment and in-depth assessment (using D2 form) which have been recently revised and distributed to all 16 branches.
- Planned the movement of necessary stocks to four of the high-risk branches.
- Utilized social media to ensure accurate communications on the situation and potential impacts.
- Attended various coordination meetings (including Shelter Cluster).

In response to the impact of TC Yasa, FRCS has focused its efforts on:

- Community Emergency Response Teams (CERT) conducting rapid assessments with village headman, village nurse, Advisory Councils (Indo- Fijian population) and community-based volunteers in their own communities. This House-to-house assessment and distribution of immediate relief items was possible due to the early activation of the CERTs and the funding from the imminent DREF.
- Health in emergency disaster assessment and messaging.
- Providing psychosocial support through a training to the HQ staff and deployment of a PSS staff to the Bua branch.
- Supporting Restoring Family Links (RFL) with support from ICRC for affected families. An RFL hotline was established and is managed by FRCS GESI Officer. An ICRC/FRC team has deployed to Bua to help identify and resolve RFL cases. As of 21 December 2020, there were 105 cases reported and 65 have been resolved.
- Volunteer induction process – there has been an influx of people wanting to volunteer (over 1,300 registered through the new online volunteer system).
- FRCS headquarters has organised NFI transportation to Labasa, Bua and Savusavu branches for distribution to the most affected households.
- The following staff and volunteers have been deployed as part of the emergency response as of 21 December:

Total Volunteers deployed			
Division	# of staff	# of volunteers	Total by Division
Central	11	18	29
Eastern	2	0	2
Western	2	6	8
Northern	6	54	60
Total	21	78	99

Overview of Red Cross Red Crescent Movement in country

IFRC has provided technical support to the FRCS National Office Emergency Operations in developing their response plan and budget based on the foreseen needs for immediate response, supporting the ongoing needs assessment with four technical advisors – WASH, health, shelter and cash, and in capacity building FRCS focal points across the respective technical areas of work. IFRC has also been supporting FRCS in logistical support to receive the in-kind international relief items, and to scale-up FRCS volunteer induction and management. IFRC also supported organizational development and coordination between Movement partners and governmental disaster management authorities. IFRC has been active in the Pacific Humanitarian Team Principals and Coordinator’s meetings and within Shelter Cluster Coordination as one of the co-leads of the national cluster. IFRC is actively coordinating with ICRC on support for Restoring Family Links (RFL) and Dead Body Management if needed. ICRC has provided support to a joint ICRC-FRCS RFL mission to the Northern division, and surge communications support to FRCS headquarters for two weeks. Ongoing discussions continue to take place with Red Cross movement partners and local partner organisations. Support from New Zealand Red Cross and Australian Red Cross is being provided through in-kind donations of relief stocks, and additional remote technical support.

Overview of other actors in country

On 18 December 2020, the Fiji Government declared [state of disaster](#) for the 30 days and placed curfew hours for Vanua Levu from 5pm to 6am (Fiji local time) and the rest of Fiji from 8.00 PM to 4.00 AM (local time)². This was to restrict movement in the affected areas and was later reviewed after two days and reverted to the normal COVID curfew hours from 11.00 PM to 4.00 AM. The Government continues to update the public through a regular situational report on the activities and progress of work carried out within all divisions in Fiji. More than 100 government and Royal Fiji Military Force (RFMF) personnel have been deployed to Bua with 10,000 food rations. The following additional forces are still in place around the most affected areas:

- Schools are temporarily closed, shipping services stopped, 41 roads are being closed at the Northern Division, 16 roads at the Western Division and 23 roads at the Central Division respectively.
- Evacuation centres are still open to cater for people whose shelter have been destroyed.
- Relevant authorities are working in restoring electricity and water supply to affected areas in the Northern Division.
- Quarantine facilities are being monitored to ensure safety.

Due to dead livestock and lack of water in the Northern Division, Leptospirosis, Typhoid, Diarrhoea and Dengue (LTDD) are high risk in affected areas, Ministry of Health continues to advocate the good hygiene practices of handwashing before handling food and water and after using the toilet. Public advises that water is to be boiled and food stored well and to avoid eating spoiled food.

Coordination with the authorities

Ongoing planning is underway at the National EOC with movement partners of the Red Cross including FRCS, IFRC, ICRC, as well as local partner agencies. All FRCS branch EOCs have also been activated and are being manned by trained community-based volunteers in each location. Coordination between the EOCs is ongoing. The National EOC will continue to monitor the situation whilst maintaining communication with Divisional and Branch EOCs. Ongoing discussions and response plans are taking place with Divisional Commissioners and Provincial Administrators and District level authorities, which includes the Ministry of Health & Medical Services through the Disaster Management Committees and the Disaster Preparedness Committees, FRCS and other NGOs will be informed to contribute to the coordination of national plans. NDMO will provide regular situation reports to all its partners. Disaster Services Liaison³ (DSLO) have been activated and have conducted meetings on 15 December 2020. Cluster leads have met with their respective clusters to coordinate their response. FRCS is a member of four national clusters – WASH, Health & Nutrition, Shelter and Safety & Protection. Coordination is ongoing with ADRA and CARE on shelter, cash assistance and protection; with Habitat for Humanity for shelter; with OXFAM on protection, and with Save the Children on Cash.

Needs analysis and scenario planning

Needs analysis

TC Yasa impacted Viti Levu with destruction of crops, flooding, landslides and flooded crossings. The majority of the damage is in Vanua Levu, with reports of significant infrastructural damages to the Bua Province. An estimate of 70 per cent damage in Bua, 40 per cent in Macuata, and 30 per cent in Cakaudrove in the Northern Division; and 40 per cent in Lau and 20 per cent in Lomaiviti in the Eastern division. The below population numbers are based on 2017 census data (OCHA COD data set), with the affectation estimates based on the aerial assessments completed thus far, and cross referenced against samples of the FRCS household assessments in these districts.

In the Northern division, as of 22 December, power is functioning in 4 per cent of Labasa, Seaqaqa, Dreketi, and Savusavu; and 55 per cent in Taveuni. The water in Labasa, Vunumanuca, Sigatoka to Keiyasi is still yet to be restored and is still no information on water restoration from the eastern maritime islands due to poor connectivity. Most health centres are still functioning, with minor to moderate damage, although some are yet to be reached. There is severe damage to WASH infrastructure in both access to clean water and in being able to access safe sanitation. Most parts of Bua and Macuata are without phone and internet connectivity. As such, many families in other parts of Fiji and abroad have not heard from their loved ones. In other parts of Fiji and abroad have not heard from their loved ones.

The number of people in evacuation centres has decreased to 7,104 (as of 22 December 2020) as people in less affected areas have returned to their homes but the number of evacuation centres remains high. Out of the 164 active evacuation centres, 159 are in the Northern division and five in the Eastern division. Psychosocial needs are significant as many people were unprepared for the damage from the cyclone. Protection is also a concern given the large amount of people in evacuation centres. Food Security is also a major concern given the large amount of crop damage; 86 per cent of the agricultural-based households have been affected. The cane belt is one area that has been greatly impacted and in need of livelihood support and reconstruction.

Based on rapid market assessment conducted in Bua province in northern division, local village level markets are still operational. Since the affected area is around two to three hours from the regional market of Labasa where majority of

² Media Release 02 National Disaster Management Office | 17/12/2020.

³ DSLO's are officers of agencies and they are the link between NDMO and their own agencies.

goods come from, village markets tend to have very diverse items ranging from preserved food, basic hardware supplies and hygiene items. Most communities have physical access to these shops. Most villages in Bua have at least one to two shops. Construction materials tend to come directly from Suva due to the proximity to the jetty where ships bring in goods daily. They can resupply within one to two weeks with advanced notice. Some critical items identified by traders were roofing materials, nails and lumber/wood. There are several lumberyards within Bua area. Travelling to Labasa is also an option. As for the financial providers most households use MPaisa⁴ and the Fiji Post Office to send cash. The commercial banks are available in Labasa. A more detailed market assessment will be undertaken in the coming weeks to identify the changes in economic access of affected households. Since most of the livelihoods in Bua are agriculture based, most of these IGAs were partial and completely damaged. Affected livelihoods include kava, vegetable, livestock and coastal fishing. Based on the needs ranking done with several households, most of them mentioned shelter and livelihoods as their priority need.

Targeting

The FRCS planning team are working on an estimated impact of 59,982 people. Slightly lower than the projected 80,000 people in the 'potential population impact maps for TC Yasa' (SPC, 17 December 2020). From this, it is estimated that 59,982 people are affected (12,027 households)⁵ in the highest impact areas. FRCS is intending to reach approximately 20 per cent of the most vulnerable in the areas affected in the immediate distribution phase - which is a total of 12,531 people (2,506 households). The damage estimation is based on the initial household damage assessments by FRCS Community Disaster Response Teams (CDRTs) in the Western and Northern divisions; and triangulated with the aerial assessments completed in Lau and Bua. The remoteness of these areas and the damages to transportation networks and communication systems is making assessment and reporting challenging, but information is starting to become clearer. Damage assessment information is being coordinated with authorities and partner organizations at the national level to ensure broad coordination, but also at the divisional levels to maximize coverage of the affected areas and use the teams in the field efficiently.

Emergency response will focus on WASH and shelter with the most impacted communities within these districts. These communities will be selected based on the detailed needs assessments and gap analysis with the clusters on the most in need.

Province	Division	Male	Female	Total population	% of Damage	# of people affected	# of people affected to be supported by FRCS	# of affected households to be supported by FRCS
Yasawa (Ba)	Western	1165	1061	2,226	30	668	668	134
Bua	Northern	8,028	7,461	15,489	70	10,842	2,168	434
Cakaudrove	Northern	26,309	24,138	50,447	30	15,134	3,027	605
Lau	Eastern	5,117	4,422	9,539	40	3,816	763	153
Lomaiviti	Eastern	8,101	7,556	15,657	20	3,131	626	125
Macuata	Northern	33,182	32,796	65,978	40	26,391	5,278	1,056
Total		81,902	77,434	159,336	n/a	59,982	12,531	2,506

Operation Risk Assessment

The main risks are currently to public safety due to clean-up, lack of infrastructure and the number of evacuees in evacuation centres. The following risks and impacts are possible and will be mitigated by the planned actions.

Hazardous Events	Current Risks and Impacts	Planned Response
Flooding and landslides	<ul style="list-style-type: none"> • People sharing shelter with others potential risk of Sexual Gender Based Violence. • WASH problems leading to health issues. • Possibility of people being swept away by the flood (missing persons). • Rise in theft and criminal activities as people leave behind property. • Waterborne diseases outbreak. (dengue, typhoid and leptospirosis); COVID-19. • Livelihood destroyed (food crops) 	<ul style="list-style-type: none"> • Provision of emergency shelters, blankets, water containers and tarpaulins for affected people. • Messaging to evacuees promoting proper hygiene practices • Messaging on community preparedness planning with Protection, Gender, Diversity and Inclusion principles and action. • Contact search and rescue teams with information on missing persons. • Possible CBI assessment and provision. • RFL to be activated and focal points mobilized with the assistance from ICRC. • Continue monitoring COVID-19 situation.

⁴ MPaisa is a commonly used mobile money medium operated by Vodafone Fiji Limited, one of the 2 main mobile companies operating in Fiji.

⁵ A household includes an estimate of 5 people, which has been verified by the rapid needs assessment info so far.

Structures with roofs blown away/damaged	<ul style="list-style-type: none"> • Injuries and death from flying debris. • People displaced from their homes. • Other homes at risk from flying debris. 	<ul style="list-style-type: none"> • Online Restoring Family Links hotline established to support people in locating loved ones. • Provision of black packs⁶ (i.e., family kits of clothing, sheets, household items), shelter tool kits and tarpaulins and build back safer kits, alongside safe shelter awareness raising. • Identification of clear and safe evacuation routes. • First Aid trained volunteers respond to injuries.
Trees, debris blocking roads and waterways.	<ul style="list-style-type: none"> • Blocked waterways can mean flooded roads & bridges and mosquito breeding places. • Safety risk to communities concerning access to places. 	<ul style="list-style-type: none"> • Contact local authorities like National Fire Authority (NFA) and Fiji Roads Authority (FRA) • Provision of mosquito nets. • Volunteers working in their respective communities assisting affected population.
Power outage and water cuts	<ul style="list-style-type: none"> • Unsafe conditions can lead to a lot of problems and issues. • Break down of communication networks (radio, mobile network etc.) 	<ul style="list-style-type: none"> • Provide solar lamps. • Provide jerry cans • Face-to-face engagement through community networks
Evacuation centers open	<ul style="list-style-type: none"> • Challenges with social distancing (COVID-19). • Possible lack of evacuation centers due to COVID-19 guidelines. • Possible tension over space/food, etc. • Possible SGBV issues. • Overcrowding • Unsafe conditions for the most vulnerable especially women/girls /boys/PWDs, etc. 	<ul style="list-style-type: none"> • Assist Government in possible relocation to other identified evacuation centres. • Online messaging and support on safety, protection, psychosocial support and community and household preparedness. • Distribution of IEC materials on COVID-19 precautionary measures.
Storm Surge	<ul style="list-style-type: none"> • Damaged houses in low-lying coastal areas • Death & injuries • Damage to infrastructure such as roads, water pipes, nursing & health stations, schools, etc. 	<ul style="list-style-type: none"> • Population moved to higher ground. • Provide advice on household emergency kits. • ICRC is ready to provide support to FRCS in dead body management if required.
COVID-19	<ul style="list-style-type: none"> • Risk of COVID-19 community infection (although no community cases in more than 280 days) 	<ul style="list-style-type: none"> • All people entering Fiji complete multiple COVID-19 tests before entering and spend 14 days in quarantine. All COVID-19 cases have been identified during this quarantine period, and the facilities are managed by the Ministry of Health and the military. Business continuity plans are in place for the facilities during cyclone season and were enacted for TC Yasa. • FRCS has sufficient personal protective equipment (PPE) on hand if needed by volunteers in the future. Good hygiene practices and awareness raising on COVID-19 continue.

B. OPERATIONAL STRATEGY

Proposed strategy

The imminent DREF planned to reach 17,698 people, which reflected a reach of 10 per cent of the predicted affected which was estimated to be 176,977 of the total population of 884,887 of Fiji (it was estimated that 20 per cent a population across all four regions would be affected). Since the path of the cyclone changed and crossed Fiji more to the east, it missed the main cities of Fiji and impacted less densely populated areas. The current estimated impact is 60,317 people, and the geographic targeting has decreased from all four divisions to only the North and parts of the Eastern and Western Divisions in line with the decreased geographic impact of the Tropical Cyclone. The targeting of the affected has also decreased as the estimate of overall affected has significantly decreased from the northern, western and eastern (see above targeting).

The operation intends to directly reach 12,531 affected people (2,506 households) in the provinces of Bua, Macuata, Cakaudrove and the Districts of Koro in the Lomaiviti Province and Nacula in the Ba Province over a six-month period. The operation is increasing from CHF 86,035 which was to cover early actions and assessments, to a budget of CHF 399,107 to support relief distribution, replenishment of distributed items and some early recovery actions within WASH and shelter. The DREF funds are being complemented by in-kind relief supplies from the New Zealand Red Cross and Australian Red Cross, and complementary funding. The current situation is deemed to warrant a national response with

⁶ Black pack contains of bedsheets single and double, women underwear (size M and XXL), men underwear (size M and XXL), sulu wraps, bath towel (size L), blanket, children t-shirt and short (3 sets), men shirt and short, women top and skirt and insect repellent.

some international support, similar to the most likely situation of the scenario planning done for the imminent DREF emergency plan of action.

A total of 99 volunteers have been engaged as of 21 December to conduct initial damage assessments supported by FRCS and IFRC staff. Overall, FRCS plans to utilize 250 volunteers within the operation, and is undertaking rapid inductions for new volunteers. The assessments will further inform the specific focus of the different sectors and logistical planning to deliver relief items to the affected areas.

As in previous responses, the FRCS works closely with the NDMO which coordinates assistance provided by different government ministries and other non-government organisations. The response will be focussed on the following sectors:

Shelter

The most severely affected communities will be prioritised to receive emergency shelter and essential household item (EHI) assistance. In the province of Bua, initial estimates suggest that approximately 70% of dwelling places have been severely impacted by the cyclone. The IFRC shelter team continues to support the FRCS at provincial-level with emergency shelter refresher training and safe-shelter awareness, preparing volunteers to help affected households to select safe sites, build temporary accommodation, and carry out basic house repairs using the tarpaulins and shelter tool kits distributed as part of the response. This approach aims to encourage and support communities to 'self-recover' and has been successfully used in the TC Pam and TC Harold responses in Vanuatu and elsewhere in the Pacific region. The very limited supply of tents will be distributed to large households and households that have people with disabilities and will be complemented with shelter toolkits to encourage salvaging of useful construction materials where possible.

The worst affected households in the most impacted communities will also be provided with additional hardware such as cyclone strapping, nails, and roofing nails to complement their available resources, in order to construct emergency/temporary shelter solutions which will be strong enough to survive the rest of the cyclone season. Complementary technical support will also be provided, appropriate to the type of hardware provided.

This revised strategy sees a reduction in number of households targeted due to the eventual cyclone track and intensity, but an increase in hardware and technical support to those worst affected.

Health

It is essential to address potential public health concerns as some community members have been left more susceptible to communicable diseases due to the significant number of shelters, water sources and sanitation facilities that were destroyed and damaged by the TC Yasa.

The mid to long term probable health impacts identified would be the increase in communicable diseases such as those that are water or vector borne. Short and long terms mental health effects are also likely to increase as the full extent of the impact on health is not yet known. This will be followed up in the next health and WASH cluster meeting end of this week.

Health facilities were also affected, and the delivery of basic health services has been disrupted. Basically, the village nurse or health workers are being mobilized without resources to provide immediate treatments to injuries. Direct impacts of TC Yasa on the health of the population in affected areas have been deaths and injuries as a result of building collapse, wind-strewn debris or existing illness. Fiji NDMO has reported four deaths due to TC Yasa to date.

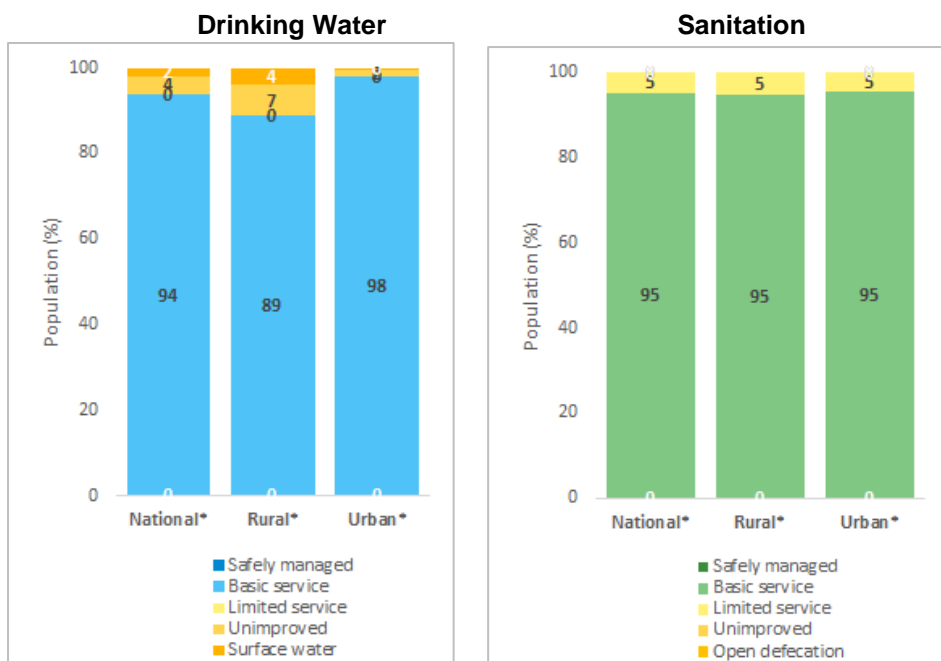
The focus of the health component of the response will be the:

- implementation of communicable disease prevention and health promotion activities in communities in collaboration with health authorities and partners (Leptospirosis, Typhoid, Diarrhoea and Dengue (LTDD) are high risk in affected areas).
- FRCS will undertake awareness raising activities amongst target communities about vector control and will promote community clean up campaigns to reduce breeding sites. FRCS staff and volunteers will be provided with mosquito repellent while they are working in high-risk areas.
- FRCS will continue to advocate and create awareness on COVID-19 and will ensure measures are in place and in line with their Ministry of Health in parallel to the response to TC Yasa.
- Community program will address the psychosocial well-being and coping skills of Red Cross staff and volunteers.
- Identification of further health referral systems needs to be identified and temporary first aid.
- Employing the community-based health and first aid (CBHFA) approach, psychosocial support activities and services will be undertaken and child protection, violence prevention, gender and diversity considerations will be integrated into the design of these interventions.
- FRCS has identified specific need for PSS for cyclone affected communities which will see more volunteers being trained on PSS/PFA and offering support to those showing signs of stress from the effects of the cyclone.

- Volunteers will be trained to identify signs of violence and equipped with skills to provide counselling (and first aid, if needed) to affected people, referring more serious cases to the relevant health centres and authority supporting protection gender and inclusion.

WASH

Early rapid assessments conducted by FRCS, IFRC and integrated survey teams under Provincial Administration coordination indicate widespread destruction of water and sanitation infrastructure in the path of TC Yasa. The assessments teams are also providing WASH Rapid Response support through the provision of Hygiene Kits, Dignity Kits and Jerry cans (and aquatabs where necessary) depending on the hygiene needs of the affected communities. IEC materials translated to the main languages have also been distributed as time limitation will not allow for proper community health and hygiene messaging. WHO and UNICEF Joint Monitoring Program (JMP) data from 2017 indicates that 11 per cent per cent of rural communities in Fiji have either limited or no existing water supply service and 5 per cent have limited access to sanitation. We can expect that existing hygiene behavior practices will vary across the affected communities from the urban centre of Labasa and Savusavu to the rural and remote communities of Vanua Levu and islands in the Lau Group due to the range to income, markets education and water and sanitation infrastructure. The environment to sustain these practices has been significantly impacted, resulting in a high risk of water-borne diseases within the communities. Support for a WASH delegate is underway and will be supported by Australian Red Cross.



Source: JMP data for Fiji

Cash and Voucher Assistance

As part of the need assessment of FRCS, IFRC provided technical support in piloting a market assessment in cyclone affected communities, and in training a FRCS CVA focal point. This will identify the impact of the disaster in the markets and physical and economic access of households to these markets. A further detailed assessment will be conducted to assess basic needs, market system, and financial service providers to determine feasibility of CVA in these communities. FRCS and IFRC will work together with the Fiji Cash Working Group in developing the minimum expenditure basket and the standardization of grant values. Delivery mechanisms will also be explored during the assessment to select the best possible FSP based on the local context of the affected communities. Should cash assistance is deemed feasible, a small pilot will be considered in a revised plan as this is the first time CVA to be implemented by FRCS. A CVA preparedness plan supported by Australian Red Cross is in place for 2021 which will accompany and provide some additional supports to the long-term viability of CVA by FRCS.

PGI

Safety of the affected population is a major PGI concern emanating from the severe damages left behind by TC Yasa. Homes have been affected resulting in families being relocated to evacuation centres and temporary shelters. Ensuring the safety and protection of individuals is crucial in preventing further intersectional harm from happening. Evacuation centres are expected to be open for another two weeks. Fiji Medical officials are monitoring the centres, and FRCS will provide relief items as necessary to support. PGI is focusing on providing key messages around SGBV and child protection. FRCS in tailoring its response to be more inclusive is also considering specialised kits tailored for babies and the elderly bed ridden citizens. Sex, Age and Disaggregated data is being collected to ensure that no one is left behind or left unsafe from FRCS response and interventions. Community engagement is underway through monitoring of social media, two-way communication between the branch and community leaders and members, and through the informal

networks on the appropriateness of the initial distributions. More structured community engagement will be done by FRCS in the coming weeks through monitoring missions to verify coverage, identify remaining gaps and discuss suitability of the services/items received so far.

Security

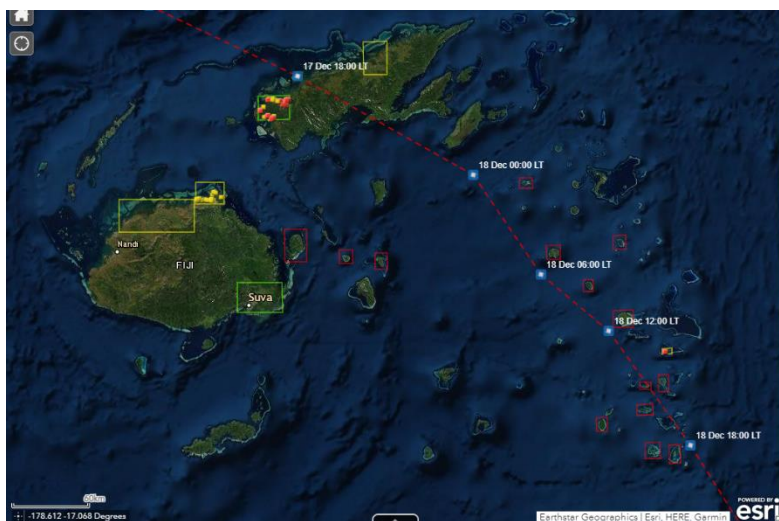
The National Society's security framework will be applicable for the duration of the operation to their staff and volunteers. For personnel under IFRC security's responsibility, including surge support deployed to the area, the existing IFRC country security plan, including security regulations, contingency plans for medical emergencies, relocation and critical incident management will be applicable. All IFRC must, and RC/RC staff and volunteers are encouraged, to complete the IFRC Stay Safe e-learning courses, i.e., Stay Safe Personal Security, Stay Safe Security Management and Stay Safe Volunteer Security online training. Staff and volunteers to be aware of the security situation and briefed on reactions in emergency before deployment in the operational area.

Operations Support

Operations Management support will include surge support from New Zealand Red Cross (NZRC) for an IFRC Operations Manager for six months, remote Communications support for two months and logistics support for two months. Continued remote information management support is also being provided by NZRC during this initial needs assessment phase. Australian Red Cross is supporting a WASH Delegate position for two months. The DREF will support three FRCS staff in Psychosocial Support for four and a half months, an Operations Manager for three months, and a Logistics Officer for three months. Support is also being provided for the 35 staff that are working in the Emergency Operations Centre (EOC) for the first 20 days. The FRCS EOC is set up with units for operations (four people), planning (four people), finance (one person), IM (one person), communications (one person), resource mobilization (one person), volunteer management (one person) plus administration support (one person), logistics (two people), and technical sectoral focal points leads: WASH/Shelter, Health, PSS, RFL, (three people). There are an additional 15 staff managing the relief items and supporting operational tasks on a daily basis. Other complementary funding will provide additional support to FRCS Divisional roles in WASH/Shelter, and a Health officer at National Office. In-kind relief supplies of tarpaulin, shelter kits, blankets, mosquito nets, solar lamps and jerry cans have also been donated by Australian Red Cross and New Zealand Red Cross.

Logistics and NS capacity

Due to the remote nature of some of the affected areas, access to many of the affected communities requires boat transportation – some are small remote islands in the Eastern division (Lau), others are in the Northern division that are difficult to reach by land. FRCS is coordinating with authorities on joint transportation options for cost sharing, and also with private donors for relief goods to be transported free of charge during this immediate phase. This operation will support boat hiring for trips to two main locations - the northern division and the eastern division, for follow-up distributions and to complete WASH and shelter early recovery activities. The decision for this is in direct response to the lessons learned from TC Harold on the limitations in terms of access FRCS to the remote areas and the challenges in timing of assessments and distributions. It will allow FRCS more flexibility to complete assessments and delivering humanitarian needs in timely manner to the 'last mile'.



Tracks for TC Yasa. (Photo: ESRI)

As TC Yasa crossed a remote area, the branches in Bua and Seaqaqa will be two of the main field Emergency Operations Centres (EOCs). Previously these have just been small branch offices. They have not been significantly damaged, but require clean-up, minor fixes to windows, etc. so they can be functional for coming months. It will also require setting them up as EOC's, therefore generator, printer, basic office supplies, etc. required that the operation can be decentralized and the staff can operate adequately out of them.

C. DETAILED OPERATIONAL PLAN



Shelter

People reached: 12,531

Male: 6,440

Female: 6,091

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

Indicators:	Target	Actual
# households provided with emergency shelter and settlement assistance	2,506	100

Output 1.1: Shelter and settlements and basic household items assistance is provided to the affected families

Indicators:	Target	Actual
# of people/HH provided with emergency shelter items, materials and/or tools to have a space that meet the minimum living conditions.	2,506	100

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	2,506	100

Progress towards outcomes

- Needs assessments are almost completed in the worst affected province of Bua and collation and analysis is in progress.
- Emergency shelter and essential household item assistance has been distributed to approximately 100 of the worst affected households. This has been complemented with psychosocial support where required.
- eight key volunteers (two teams) in Bua have received emergency shelter refresher training and ready to provide technical support to affected households, together with in-kind assistance provided.
- Households with severely damaged houses are being prioritised with distribution of available emergency shelter and essential household items. A second sweep will take place once the remaining balance of relief items becomes available.
- Some roads have been impassable, impeding relief distributions. This has now been resolved.
- Collaboration is ongoing with Habitat for Humanity who contributed to 300 shelter kits to FRCS.



Health

People reached: 12,531

Male: 6,440

Female: 6,091

Health Outcome 1: 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	12,531	800

Health Output 1.1: The health situation and immediate risks are assessed using agreed guidelines

Indicators:	Target	Actual
# of assessments conducted based on standard IFRC and / or WHO assessment guidelines	50	Ongoing

Initial assessments and aerial footage confirm extensive damages to dwelling places, sanitation facilities and water sources across all the affected areas. This poses a direct health risk to the affected communities. FRCS assessment teams conducting assessments in the field have at least one trained volunteer or staff trained in First Aid and are also provided with First Aid kits. The teams are expected to provide basic first aid and psychosocial support if needed and facilitate referrals for further medical treatment. The assessment teams will also distribute hygiene kits and jerry cans to mitigate the immediate health risks faced by the affected population. The assessment teams will also collect detailed information on specific household and individual health needs such as existing medical conditions, the number of disabled people, the number of lactating mothers and other special needs. The assessment results will inform further support or shared with other partners.

Health Outcome 4: Transmission of diseases of epidemic potential is reduced

Indicators:	Target	Actual
# of people reached with community-based disease prevention and health promotion programming	2,506	800

Health Output 4.1: Community-based disease control and health promotion is provided to the target population

Indicators:	Target	Actual
# of mosquito nets distributed	2,506	Ongoing

Health Output 4.2: Vector-borne diseases are prevented

# of mosquito nets distributed	2,506	Ongoing
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The extensive damage caused by strong winds, sea water rises and flooding significantly increases the likelihood of communicable diseases. The volunteers engaged during the response have been trained on Leptospirosis, Typhoid, Dengue Fever, and Diarrhoea (LTDD) and are expected to conduct awareness in affected communities. However, the remoteness of most communities and difficulty in travelling due to blocked and damaged roads means that volunteers will not have sufficient time in the communities to conduct awareness during assessment. As such, IEC materials translated into the main languages have been printed to be distributed.

As the risk of mosquito borne diseases such Typhoid increases after such disasters, volunteers will also be distributing mosquito nets to affected population. Mosquito net replenishment is covered outside the DREF operation.

Volunteers will wear necessary safety gear – gloves, boots, etc. but no personal protective equipment (PPE) is required due to the absence of any community cases of COVID-19 Fiji has not recorded a community case of COVID-19 in more than 230 days. While there are currently no COVID-19 travel restrictions in place, FRCS will ensure that volunteers adhere to COVID-19 health and hygiene protocols during the response.

Health Outcome 6: The psychosocial impacts of the emergency are lessened

Indicators:	Target	Actual
# of people reached by PSS	8,000	Ongoing

Health Output 6.1: Psychosocial support provided to the target population as well as to RCRC volunteers and staff

Indicators:	Target	Actual
# of staff/volunteers briefed/trained on PSS	300	Ongoing

A key lesson learnt from previous cyclones, particularly TC Winston, was the need for Psychosocial support (PSS) and psychological FA (PFA). TC Yasa passed directly through the province of Bua and parts of Macuata and Cakaudrove. As majority of people in these areas rely on farming, the reported extensive damage to vegetation and crops means that they have not only lost their homes but also their livelihood. As such, there will be increased need for psychosocial support. People in other districts such as Kia experienced the worst of TC Winston in 2016 would be reliving the experience and therefore need psychosocial support.

An immediate PSS training was done by IFRC health lead for FRCS EOC staff and team leaders going to the field. Through the DREF, the FRCS will engage two counsellors (west mostly covering maritime areas and north) for 6 months to conduct PSS support in the worst affected areas. Some volunteers and staff have been briefed on PSS

before deployment. There is still a greater need for PSS for volunteers responding to disasters. The IFRC will also provide post response PSS sessions for all staff and volunteers involved in the response with FRCS.



Water, sanitation and hygiene

People reached: 12,531

Male: 6,440

Female: 6,091

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

Indicators:	Target	Actual
# of households reached with key messages to promote personal and community hygiene	2,506	Ongoing

Output 1.1: Continuous assessment of water, sanitation, and hygiene situation is carried out in targeted communities

Indicators:	Target	Actual
No. of assessments/monitoring visits undertaken and shared.	50	Ongoing

WASH Output 1.2: 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 families reached with household water treatment and storage awareness using existing IEC material based on IFRC's Household Water Treatment and Storage in Emergencies	2,506	Ongoing
# of families provided with water containers/jerry cans (2 per family)	2,506	100
# of household water supply systems repaired and cleaned	100	0
# of rainwater harvesting and gravity-feed systems installed	5	0

Output 1.3: Adequate sanitation which meets Sphere standards in terms of quantity and quality is provided to the target population

Indicators:	Target	Actual
# of toilets repaired	100	Ongoing

Output 1.4: Hygiene promotion activities which meet Sphere standards in terms of the identification and use of hygiene items provided to target population

Indicators:	Target	Actual
# of people reached by hygiene promotion activities	12,531	Ongoing

Output 1.5: Hygiene-related goods (NFIs) which meet Sphere standards and training on how to use those goods is provided to the target population

Indicators:	Target	Actual
# of households provided with a set of essential hygiene items	2,506	100

Progress towards outcomes

- Coordination with WASH Cluster leads, Fiji Ministry of Health and UNICEF to establish data-sharing mechanism from Red Cross assessments in Bua.
- Coordination meeting scheduled with Bua Supervisor of Water Authority of Fiji to determine the scope of their assessments and repair work in order to identify gaps for Fiji Red Cross interventions.
- Rapid WASH assessments have commenced in Bua Province integrated with IFRC technical assessments to support scope and prioritisation for early recovery.
- 50 households provided with hygiene kits⁷ and 20 litre buckets with lids.
- 100 households provided with water containers/jerry cans.
- 50 households provided with dignity kits⁸ and 20 litre buckets with lids.
- WASH Delegate support to be provided.
- Emergency plumbing repairs for toilets to be completed with complementary funding.

⁷ Each hygiene kit consists of 12 body soap, 1kg laundry soap, 1kg washing powder, 3-piece bath towel, 6 toilet paper rolls, 2 toothpaste tubes, 6 toothbrushes, 1 pack wet wipes, 1 litre bleach, 1 pack garbage bag, 5 disposable razors, 2 solar lamps, 1 coconut oil bottle, 1 gas lighter, 1 mosquito repellent, 1 plastic bucket (20L).

⁸ Each dignity kit consists of 30 sanitary pads, 2 body soaps, 1 toothpaste tube, 1 toothbrush, 2 sulu wraps, 1 bath towel, 1 sulu I ra (women's skirt), 2 t-shirts, 2 combs, 1 torchlight, 1 pack batteries, 2 women underwear, 1 pair flip flop, 1 plastic ziplock, 1 plastic bucket

Staff and volunteers involved in the response have been briefed on basic WASH awareness in emergencies. Due to the limited time in the communities, volunteers will not have enough time to conduct awareness and messaging. IEC materials have been translated to the main languages and printed for distribution. Based on initial assessments, community rainwater harvesting, and storage and gravity-feed systems will be installed for remote communities that rely on community water systems that have been extensively damaged.



Protection, Gender and Inclusion

People reached: 12,531

Male: 6,391

Female: 6,140

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

Indicators:	Target	Actual
Distribution of dignity kits, baby kits and disability kits to those in need	500	Ongoing

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

Indicators:	Target	Actual
Does the operation demonstrate evidence of addressing the specific needs to ensure equitable access to disaster response services?	Yes	Ongoing

Progress towards outcomes

- Initial assessments from national SITREPS and aerial images have indicated several areas of interest for Protection, Gender & Inclusion. In most seriously affected communities, families have lost their homes and livelihoods which may increase risk to social issues thus exposing vulnerable people to further risk. With several evacuation centres still operational, minimizing exposure to risk is crucial to avoid further harm to those already affected. Vulnerable groups such as women experiencing family violence, persons with disabilities, LGBTQI, elderly and children are at risk of facing intersectional and interdimensional risk if protection and inclusion is not effectively integrated throughout the response.
- Fiji Red Cross Society previously trained approximately 40 volunteers from its three main divisions [North, West & Central-Eastern] on PGI mainstreaming during an emergency. Other topics included, Sexual and Gender Based Violence, Child Protection and Prevention of Sexual Exploitation and Abuse.
- In line with the above, FRCS incorporates Sex, Age and Disability Disaggregated Data in its initial assessments to better capture the needs of people affected and tailor their response with the aim of meeting such needs. Collection of data will assist FRCS in identifying vulnerable groups which may need further intervention and protection.
- To assist in safeguarding people, FRCS provided SGBV referral IEC materials in the form of a pocket card containing pertinent information and contact of essential service providers such the legal services, police, medical and counselling.
- In the coming months, FRCS will assess SADDD collected from the field and use it for the purpose of distributing PGI related NFIs such as the Dignity Kit, Baby Kit and Disability Kit.

Strategies for Implementation

Outcome S1.1: National Society capacity building and organizational development objectives are facilitated to ensure that National Societies have the necessary legal, ethical and financial foundations, systems and structures, competences and capacities to plan and perform

Indicators:	Target	Actual
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# of NS volunteers that receive briefing and trainings	250	Ongoing
Output S1.1.4: National Societies have effective and motivated volunteers who are protected		
Indicators:	Target	Actual
# of NS volunteers that are insured	250	Ongoing
Output S2.1.6: Coordinating role of the IFRC within the international humanitarian system is enhanced		
Red Cross actively contributes to shelter coordination	Yes	Ongoing
Outcome S3.1: The IFRC secretariat, together with National Societies uses their unique position to influence decisions at local, national and international levels that affect the most vulnerable.		
Indicators:	Target	Actual
IFRC and NS are visible, trusted and effective advocates on humanitarian issues.	Yes	Ongoing
Output S3.1.1: IFRC and NS are visible, trusted and effective advocates on humanitarian issues		
NS is pro-active on social media	Yes	Yes
Outcome S3.2: The programmatic reach of the National Societies and the IFRC is expanded.		
Indicators	Target	Actual
Programmatic reach is expanded (Target: yes)	Yes	Ongoing
Output S4.1.4: Staff security is prioritised in all IFRC activities		
BCP is activated and actively monitored	Yes	Yes
Progress towards outcomes		
<p>FRCS currently has 228 active and insured volunteers of which 64 are currently engaged in the response. It is anticipated that a total of 250 volunteers will be needed for the response. A volunteer drive conducted after TC Yasa attracted over 1,300 applications. FRCS is currently reviewing applications and will identify people with skills and experience in communications, counselling, Health, Wash, First Aid, Shelter and Logistics. FRCS is providing ongoing Inductions to new volunteers, and IFRC Youth and Volunteer Senior Officer is providing support to FRCS to scale-up their volunteer management supports and systems.</p> <p>As volunteer insurance will expire in December, DREF funds will cover insurance cover for the 250 volunteers from January 2021. The selected volunteers will undergo volunteer induction with the support of the IFRC Senior Youth Officer.</p> <p>The IFRC CCST Suva shelter team continues to support coordination of the Fiji Shelter Cluster, and to represent the Pacific Shelter Cluster as a part of the Pacific Humanitarian Team (PHT). To date two shelter cluster meetings have been held for this response (with IFRC supporting Government Lead Ministry of Housing and Community Development, and joint co-Lead Habitat for Humanity Fiji), and regular contributions have been made to the PHT sitrep and coordination meetings. A webpage has been set up for this response on the Global Shelter Cluster website https://www.sheltercluster.org/response/tc-yasa-2020.</p> <p>FRCS has been contributing to many publications, news outlets, media and interviews to communicate the current situation and what the Red Cross is doing in its response. Social media is being actively updated and tracked. FRCS is actively contributing to national coordination mechanisms and planning.</p> <p>The programmatic reach of the FRCS is being expanded through the CVA assessment currently underway, and through its ongoing improvements to its EOC procedure and capacity building support being provided to the branches on a daily basis.</p> <p>The IFRC BCP was successfully activated from 15 December till 20 December when it returned to white phase with no damage or injuries to IFRC staff or assets.</p>		

D. FINANCIAL REPORT

International Federation of Red Cross and Red Crescent
Societies

*all amounts in
Swiss Francs
(CHF)*

DREF OPERATION

MDRFJ005 - FIJI - TROPICAL CYCLONE YASA

23/12/2020

Budget by Resource

Budget Group	Budget
Shelter - Relief	76,780
Clothing & Textiles	3,717
Water, Sanitation & Hygiene	104,572
Medical & First Aid	2,376
Teaching Materials	3,300
Other Supplies & Services	17,596
Relief items, Construction, Supplies	208,340
Distribution & Monitoring	39,160
Transport & Vehicles Costs	9,020
Logistics Services	8,800
Logistics, Transport & Storage	56,980
National Society Staff	16,808
Volunteers	43,780
Personnel	60,588
Workshops & Training	2,816
Workshops & Training	2,816
Travel	7,480
Information & Public Relations	3,564
Office Costs	5,940
Financial Charges	440
Other General Expenses	28,600
General Expenditure	46,024
DIRECT COSTS	374,748
INDIRECT COSTS	24,359
TOTAL BUDGET	399,107



Click here for:

- [Imminent DREF Operation](#)

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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.



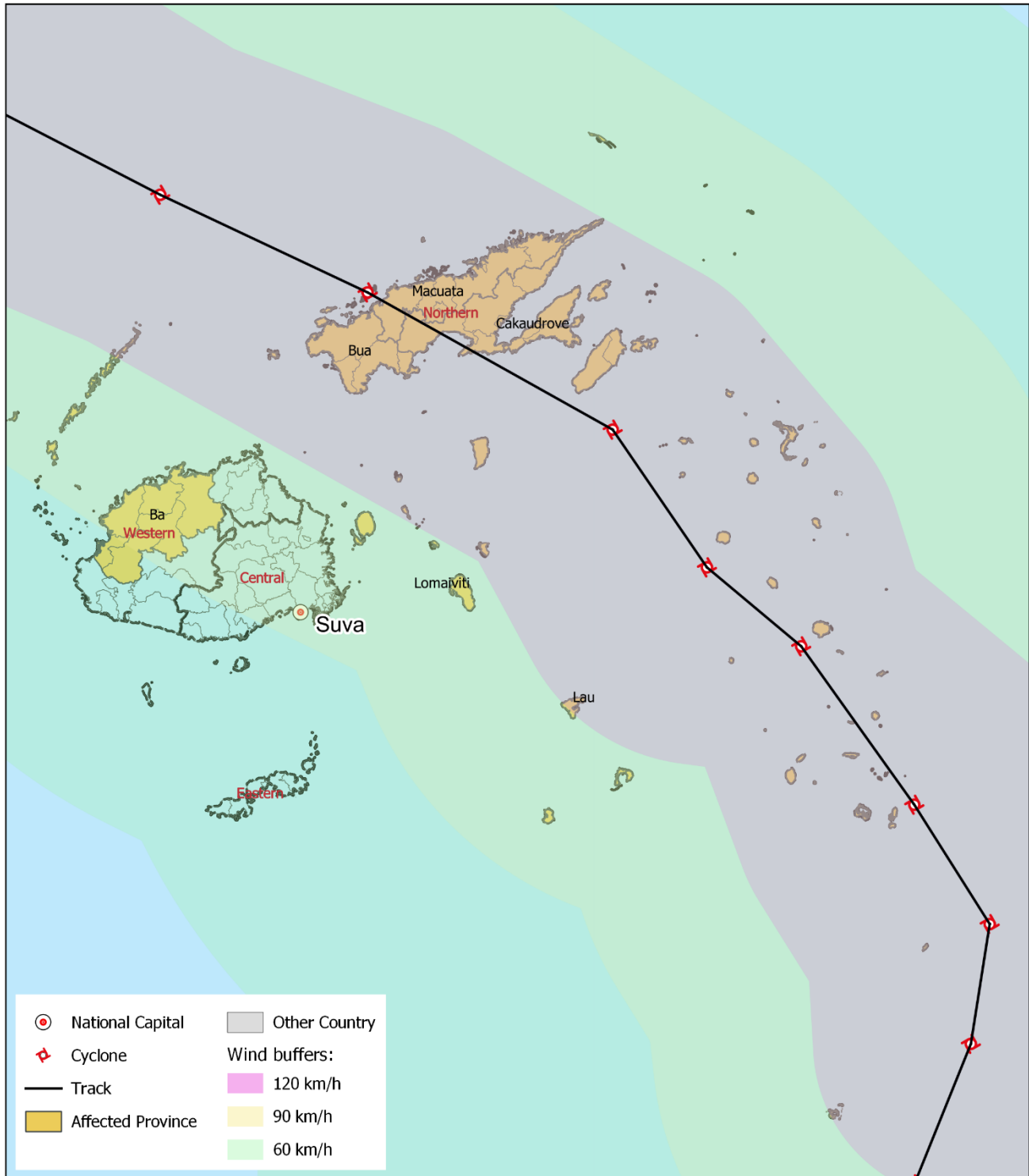
Enable **healthy**
and **safe** living.



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

**Fiji: Tropical Cyclone Yasa
Emergency Plan of Action (EPoA)**

20 December 2020



The maps used do not imply the expression of any opinion on the part of the International Federation of the Red Cross and Red Crescent Societies or National Societies concerning the legal status of territory or its authorities. Map data sources: OCHA, OSM Contributors, ICRC, IFRC, GDACS-JRC (20 Dec 2020)

