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# Emergency appeal operation update

## Haiti: Earthquake Recovery

 International Federation  
of Red Cross and Red Crescent Societies

**Emergency appeal n° MDRHT008**  
**GLIDE n° EQ-2010-000009-HTI**  
**Operation update n° 32**  
**14 December 2012**

**Period covered by this Operations Update:** April 2012 to June 2012.

**Appeal target (current):** The overall budget has been revised and stands at 274,947,516 Swiss francs. The current appeal target, not including the value of the ERUs, is 247,279,611 Swiss francs.

**Appeal coverage:** 86% as of June 2012 (based on funding received at that date)

<Click [here](#) view the donor response list, [here](#) to view the interim financial statement to June 2012 or [here](#) to link to the contact details>

*A volunteer from the Haiti Red Cross Society facilitated a literacy session for adults at a camp for internally displaced persons in Port-au-Prince. IFRC*



## Appeal History

Date	Activity
January 2010	Disaster Relief Emergency Fund (DREF): 500,000 Swiss francs were initially allocated from the Federation's DREF to support the Haiti Red Cross Society (HRCS) to respond to the earthquake.
13 January 2010	A <a href="#">preliminary emergency appeal</a> for 10.1 million Swiss francs was launched to support the HRCS to immediately deliver life-saving assistance to some 20,000 families for nine months.
16 January 2010	A <a href="#">revised preliminary emergency appeal</a> with a revised budget of 105.7 million Swiss francs was issued to assist up to 60,000 families for three years.
9 February 2010	<a href="#">Operations Update n° 5</a> was published, reflecting revised objectives for the six-month relief phase of the operation under the plan of action, as well as a revised budget of 218.4 million Swiss francs, of which 2.07 million Swiss francs were designated to support the IFRC's inter-agency coordination for the Shelter and Non-food items (NFI) Cluster.

- 5 October 2010** A [summary of the revised plan of action](#) was issued with a total budget of 314,329,971 Swiss francs.
- March 2011** The Federation-Wide Strategic Framework was published.
- 29 December 2011** A [revised summary plan of action](#) was issued to reflect the transition from the emergency relief to the recovery phase of the operation, covering the period July 2011 to December 2012.
- 14 December 2012** A [revised summary plan of action](#) was published relating to the recovery operation from camp to community; this plan of action covers the period July 2011 to December 2013. As a result, the budget for the recovery operation has also been revised and is reflected in the interim financial statement attached below.

**Summary:** The 7.0 earthquake that hit Haiti on 12 January 2010 caused major human and material damage in the country. More than two and half years later, humanitarian actors including the Red Cross Red Crescent in collaboration with the Haitian authorities continue to assist the affected population in their recovery. This update covering the April to June 2012 period focuses on the progress made by the IFRC secretariat in the recovery and long-term development phase of its intervention in Haiti.

The Integrated Neighbourhood Approach (INA) activities of the secretariat are achieving complete integration of services for the INA sites 1 and 2 with additional human resources in water and sanitation and in livelihoods. The INA team intensified coordination with other actors including UN-Habitat and municipal authorities in Carrefour Feuilles and Delmas 30 in an effort to align the community approach. The INA team held meetings with target communities in both sites to present the neighbourhood approach packages including livelihoods, reconstruction of houses and infrastructure, and the available alternative shelter solutions such as rental and relocation options. INA is collaborating with the communications team to enhance information dissemination through the development of messaging tools such as leaflets for neighbourhoods. The INA team identified 14 households living in houses at risk in Delmas 30 and started discussions with the affected families about relocation options. Apart from the technical assessment of houses at risk, the construction team has intensified work on retaining walls and ravine protection. The team has also identified four schools for rehabilitation in Delmas 30. By the end of June, 2,204 plots were surveyed in both sites. The IFRC has completed 316 m<sup>3</sup> retaining wall in Carrefour Feuilles and 150 m<sup>2</sup> drainage installation in Delmas 19, a 27 m<sup>2</sup> footpath in Delmas and 49 streetlights in Carrefour Feuilles, Delmas 30 and Delmas 19. In addition, the INA programme has integrated the IFRC violence prevention's *safer communities* as one of the key INA objectives.

The secretariat continued to provide technical and funding support based on requests and availability to Partner National Societies (PNS) participating in neighbourhood development. The French Red Cross (FRC) has repaired a cumulative total of 101 yellow houses, cleared 24 plots of red houses and removed 7,683 m<sup>3</sup> of rubble as of the end of June 2012. Livelihoods, disaster risk reduction and community empowerment continue to be FRC's core activities in the INA programme. The British Red Cross continued to implement INA activities in Delmas 19.

In Léogâne, the IFRC water and sanitation programme trained 225 community facilitators in participatory hygiene and sanitation transformation (PHAST), of which 27 were trained during the second quarter. Additionally, 473 community facilitators were trained in community-based health and first aid (CBHFA) to scale up community-based health activities in the target communities. In supporting the Spanish Red Cross activities in 14 communities in Léogâne, the IFRC water and sanitation programme in Léogâne built 1,569 ventilated pit latrines in collaboration with the beneficiary communities. The programme distributed 933 metallic garbage bins and installed 1,011 hand-washing facilities near latrines. The team continued raise community awareness, including in schools, of good hygiene and sanitation practices. The IFRC health team continued to promote the CBHFA approach in its target areas. Home visits, awareness-raising sessions on mother and child health, HIV and AIDS as well as malaria prevention activities were implemented during this reporting period. The team has referred 720 suspected cases of malaria, diarrhoea and ill health related to mother and child to health facilities between May and June. The team also supported the Ministry of Public Health and Population (MSPP) in the national vaccination campaigns.

In non-INA activities, the secretariat continued to support displaced families in camps with alternative shelter solutions, as the provision transitional shelter programme ended during the second quarter of the year. Five T

shelters were constructed. The IFRC has provided rental and relocation support to 1,064 families during this reporting quarter and bringing the total cumulative of beneficiary households of rental and relocation programme to 6,200. In addition, 6,040 households have benefitted from the livelihoods support programme with 1,951 of them reached between April and June 2012.

Collaboration with DINEPA was reinforced during the second quarter. The construction work, in collaboration with UNOPS, at the Morne a Cabris excreta treatment plant was completed and handed over to DINEPA. As part of the support to strengthen DINEPA's capacities, the IFRC is finalizing procurement procedures and monitoring for the agency. DINEPA completed the plan to construct 29 new water kiosks and identified 13 others for rehabilitation and connection to the main water network. By the end of June, the building of 29 water kiosks and rehabilitation of 13 others was near finalization.

The hygiene promotion programme that was integrated into the health department, though still reported under the stand-alone water and sanitation, held sensitization activities on good hygiene practices that reached 35,773 people (69 per cent of the target population in 21 IDP camps). The HRCS health and care department with technical support from the secretariat team in Haiti, intensified activities in its four core areas: emergency health, community-based health, psychosocial support, and HIV and AIDS. The HRCS actively participated in the national immunization campaigns in April and May. HRCS volunteers visited 256,235 households and mobilized 435,991 children for vaccination. The emergency health programme now has 607 volunteers trained in epidemic control for volunteers (ECV). The health team collaborated with PNSs to scale up CBHFA training and ensure coordination through the CBHFA technical committee. The IFRC/HRCS health team has finalized the Red Cross cholera contingency plan and launched an advocacy report/press release on the increase in cholera epidemic, and call for action to curtail the situation while the team increased sensitization on cholera. The psychosocial support (PS) programme, which is based on an integrated coordination process with six Movement partners, continued to support HRCS capacity building in PS. The PS programme reached 28,519 beneficiaries during the second quarter of 2012. The HIV and AIDS team has facilitated the setting up of a working group on HIV and AIDS, with the responsibility of coordinating the Red Cross intervention in HIV and AIDS. The team has reached 41,246 individuals with HIV prevention messages as of June 2012.

The IFRC supported the HRCS disaster risk management (DRM) department in preparedness and response capacity strengthening during the reporting quarter. The draft of the Red Cross Movement contingency plan for the 2012 hurricane season was created and the opinion of Movement partners was requested. The HRCS Training Centre organized and facilitated trainings in different aspects of disaster management to 482 people during this reporting period.

The secretariat team in Haiti organized the Haiti Learning Conference in April with over 100 participants. The conference reflected on what the RCRC Movement is learning from and for Haiti.

The IFRC continued to ensure coordination through the Movement Operations Meetings (MOC), which are held twice monthly, while other regional meetings continued to be held as the situation requires. A new steering committee comprised of Movement partners was created to replace the Movement platform. The IFRC secretariat collaborated with government agencies and other international organizations operating in the country on better and improved coordination in humanitarian activities. The IFRC and the HRCS leadership participated in a high-level meeting with the Government of Haiti (GoH), during which the two presented its activities to the government and received its assurance on the presentation of a draft bill of law on IFRC legal status to the Haiti Parliament.

***A revised plan of action together with a revised budget*** to reflect the current direction of the long-term recovery and development programmes in the Haiti operation was completed and covers the period July 2011 until December 2013. The revised plan sets out clear indicators and keys results in all sectors. The secretariat's INA and non-INA programming in Léogâne were condensed into one programme, as the IFRC continues to support and complement the activities of the Spanish Red Cross with water, sanitation, hygiene promotion and health activities in 14 Spanish Red Cross operational localities.

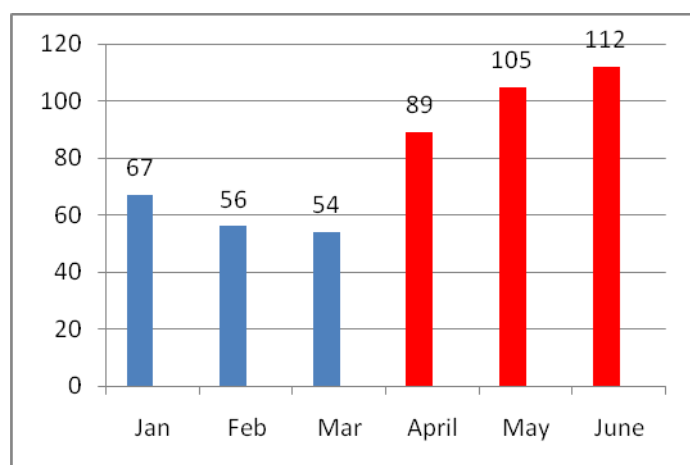
## The situation

The devastating 7.0 earthquake that caused huge human and material loss in Haiti on 12 January 2010 continued to receive the attention of international and national humanitarian actors including the Red Cross and Red Crescent Societies. According to the Government of Haiti, the earthquake and the subsequent aftershocks that occurred during the weeks following the initial impact left some 300,000 people dead and 2.3 million people displaced. At the same time, 300,000 people were reportedly injured. The outbreak of cholera that claimed the lives of more than 7,000 people in the country, ten months later compounded the devastating effect of the earthquake.

Two and half years after the disaster and with ongoing humanitarian assistance, the number of individuals still sheltered in camps has decreased. From an initial 1.5 million in July 2010, there were 97,913 internally displaced person (IDP) households (390,276 individuals) remaining in 575 camps as of June 2012. This is 7 per cent decrease compared to the April 2012 data and 75 per cent decrease compared to the situation in July 2010, according to the 20 June edition of the Displacement Tracking Matrix (DTM)<sup>1</sup>. The various return projects, including relocation and reconstruction activities of the government and humanitarian actors including the Red Cross in the country, contributed to this decrease.

Although the fatality rate of cholera dropped to 1.3 per cent in February 2012 versus the 2.4 per cent recorded in November 2011, rainfall during towards the end of the first quarter and beginning of the second quarter of 2012 generated a net increase in new cholera cases, especially in the North, South and South-East departments. An analysis carried out showed that lack of residual chlorine in water sources and poor maintenance of sanitation facilities are some of the causes. Government authorities supported by health partners have been administering oral rehydration salts to the cholera patients, distributing water chlorination products and disinfecting living areas, according to the United Nations' Office for the Coordination of Humanitarian Affairs (OCHA).<sup>2</sup> The IFRC alerted the public of the high possibility that this cholera outbreak could turn into a major emergency in the next few months as resources for curtailing the situation are considerably reduced. The IFRC and the HRCS have begun the development of a Movement-wide cholera strategy based on the recommendations of the IFRC Hispaniola cholera evaluation of January 2012.

### A graphic illustration of homicide cases in Port-au-Prince from Jan-June 2012



Violent crimes such as homicides increased during the second quarter. An average of 102 homicide cases were reported in the second quarter versus the 52 reported in the first quarter (representing 73 per cent increase) especially in Port-au-Prince. The number of petty thefts such as pick-pocketing has increased especially around restaurants and other public places during the evening in the capital. Some cases of violent confrontation among armed gang groups and civil protests on social issues were also reported in May and June. Although kidnapping decreased during the second quarter, with the beginning of the summer festivities, there may be an increase in abduction cases.

<sup>1</sup> The Displacement Tracking Matrix (DTM) is a monitoring tool designed to track internally displaced persons (IDP), population movement and provide updated information on the basic conditions in camps and camp-like settlements in support of the Emergency Shelter and Camp Coordination and Camp Management (E-Shelter/CCCM) Cluster and other humanitarian and recovery actors in Haiti. The International Organization for Migration (IOM) implements the DTM, in partnership with the Haitian government through the Haiti Department of Civil Protection (DPC).

<sup>2</sup> <http://haiti.humanitarianresponse.info/>

## Coordination and partnerships

The IFRC secretariat facilitates coordination within the Movement and with external partners including governmental authorities, UN agencies, international and national non-governmental bodies. The Movement partners adhere to and work within the framework of all coordination mechanisms as stated in the Movement Coordination Framework signed in April 2010 between the HRCS, the International Committee of the Red Cross (ICRC) and the IFRC along with 22 PNSs who signed the Annex to the MOU. The Movement Operations Committee (MOC) meetings are held twice a month, while technical committees and regional based meetings to manage and coordinate programme implementation based on the Plan of Action of the Haiti operation are held monthly. In lieu of the Movement Platform, there Steering Committee composed of all the Movement partners in Haiti meets once every month.

The IFRC-Haiti humanitarian diplomacy (HD) unit with other departments participated in a series of meetings with government agencies and international humanitarian actors, to improve coordination and enhance RCRC activities in Haiti. The unit facilitated a high level meeting between the leadership of the HRCS, IFRC team in Haiti and the Government of Haiti led by the Prime Minister, during which the two institutions presented the Federation-wide post-earthquake recovery and development programme to the government. The government team assured the IFRC on expediting work and its intent to submit a draft bill of law on the legal status of the IFRC to the Haiti Parliament. The HD collaborated with the UN in Humanitarian Country Team (HCT) meetings for the initiation of a consultancy on the creation of a contingency plan to strengthen the Haitian institutions (both governmental and non-governmental). The approach aims to empower Haiti's national institutions to take the lead in any future disaster. The IFRC participated in other meetings such as the meeting on the reactivation of the OCHA-led EJOINT (Emergency Joint Operation Centre). EJOINT is composed of international organizations in Haiti, to collaborate with the government on disaster preparedness and response, the meeting with the Ministry of Public Health and Population on the development of a national contingency plan against cholera upsurge, and along with the HRCS, participated in the preparation of the Haiti seismic contingency planning. In the shelter sector, the HRCS and the secretariat attended a working group meeting of donors to the settlements and shelter programmes in Haiti coordinated by the World Bank. The IFRC participated in the assessment of the housing and public building construction policy organized by the Haiti authority in charge of the construction of houses and public buildings (*Unité de Construction de Logements et de Batiments Publics- UCLBP*) where the Red Cross shared its view on solutions to the sensitive and challenging land property and tenancy issue.

**National Society Capacity Building:** IFRC delegates who were embedded within the Haiti Red Cross Society structure continued to work with the National Society to strengthen its capacity in critical management and technical functions. This ongoing exercise is based on needs as stated in the IFRC Earthquake Recovery Operation Plan of Action, with emphasis on National Society capacity building and development. The capacity of the HRCS' staff and volunteers is enhanced through trainings and workshops organized by programmatic sectors. The capacity of HRCS local branches is being strengthened by the operation's activities. The IFRC and the HRCS leadership are collaborating on the best way of developing the Base Camp.

## Red Cross and Red Crescent action

### Overview

The secretariat has finalized the revised plan of action for the Haiti earthquake operation taking into account the recovery and development activities via the integrated neighbourhood approach (INA). The IFRC INA team builds up community mobilization and communication in the target neighbourhood and support to PNS involved in the programme. The collaboration is contributing to the scaling up of activities in some of the target neighbourhoods. The IFRC team continues to support the camp decongestion programme of the government through the 16/6 strategy. The secretariat is increasing their support to the National Society development with a focus on the HRCS's core programme areas of health and care, disaster preparedness and disaster risk management (DP/DRM), and organizational development. The International Movement's contingency plan for the hurricane season 2012 was shared in June with Movement partners by the secretariat for inputs before finalization and

validation prior to the start of the season. The shelter and settlement programme completed its integration process into INA. The Director of the Korean Red Cross inaugurated the HRCS blood services on 29 May 2012 at the Digicel Building in Port-au-Prince. The secretariat provides support services to the HRCS members to enable them to meet their objectives in the neighbourhoods where they are providing an integrated package of services. The secretariat works with other International Movement partners to coordinate and focus the recovery operation to generate greater impact.

## Progress towards outcomes

### 1. Integrated Neighbourhood Approach

**Goal: To increase access to sustained basic services and improved infrastructure through proven participatory techniques<sup>3</sup> designed to increase community ownership**

#### Pillar One: Earthquake Operation

#### **Objective 1: Shelter, water, sanitation and infrastructure support**

- **Objective 1.1:** Increase access to safe shelter through a multi-pronged approach involving owner-driven, donor driven and alternative shelter solutions.
- **Objective 1.2:** Increase availability of and access to safe water in INA neighbourhoods.
- **Objective 1.3:** Increase access to basic sanitation at both household and community levels in INA neighbourhoods.

**Objective 2: Livelihoods:** Support targeted shelter solution beneficiaries to become more economically self-reliant through increased access to support packages, skill-building and economic opportunities.

#### **Objective 3: Community-based support: Mobilization, health, hygiene promotion and risk-reduction:**

- **Objective 3.1:** Mobilize community engagement and participation in community-based assessments and activities.
- **Objective 3.2:** Improve capacity of target communities to prevent and manage common health problems.
- **Objective 3.3:** Hygiene knowledge and behaviour is improved in INA neighbourhoods benefiting from IFRC water and sanitation inputs, through provision of hygiene promotion.
- **Objective 3.4:** Improve capacity of target community to identify and mitigate risks and improve overall safety in the neighbourhoods (DRM).

<sup>3</sup> Proven participatory techniques include Participatory Approach for Safe Shelter Awareness (PASSA) and Vulnerability Capacity Assessment (VCA).

## Progress

### IFRC direct implementation

The Integrated Neighbourhood Approach team now has completed its comprehensive team; construction and community development project managers were appointed for both secretariat's INA sites of Delmas 30 and Carrefour Feuilles. Additional human resources in water, sanitation and livelihoods were hired to achieve the full integration of services that the secretariat will provide in the neighbourhoods. The increase in the human resources capacity of INA will speed up the drawing up of a comprehensive plan for the entire target neighbourhoods.

Throughout this quarter, the INA team has focused on expanding its area of work from the two pilot zones in both Carrefour Feuilles and Delmas 30 to encompass a larger part of the community, organize and strengthen community platforms, and implement the technical and knowledge assessments in the community and neighbourhoods.

#### INA Site 1 – CARREFOUR FEUILLES

**Commune: Port-au-Prince**

**Quartier: Carrefour Feuilles**

**# of households (catchment area): 200**

*Est. # of beneficiaries: 1,000*

### Community and construction activities

To better understand which actors are working in Carrefour Feuilles neighbourhood, their roles and responsibilities, the IFRC has carried out a mapping of existent community based organizations (CBO), notable personalities and committees in the four blocks composing the Sanatorium area in Carrefour Feuilles. The IFRC is also coordinates closely with UN-Habitat in an effort to align IFRC's approach of community engagement, and the establishment of community platforms with that of UN-Habitat model, which has been agreed upon with the Government of Haiti and the government-established Unit for Housing and Public Building Construction (UCLBP).

The INA team has also established contact with other major stakeholders operating in Carrefour Feuilles, including PADF, CIAT, Emergency Architects (FAU), IOM, Entrepreneurs du Monde (EDM), Oxfam, DINEPA and Axxium.

To ensure coordination and available information for both the authorities and other stakeholders, the IFRC has held an introductory meeting with the Carrefour Feuilles mayor to present the secretariat's INA programme. The meeting led to other introductory meetings with the community to explain INA and how the IFRC would be working with the platform and community to ensure their participation in the decision making process.

The IFRC construction team continued to conduct technical assessments for the housing stock within the selected zone, and plan to assess and evaluate 500 houses this year. As part of the ongoing assessment, the IFRC will identify families that remain in unsafe or unsecure shelter conditions, and will offer them the return and relocation package available in the INA camp decongestion programme.

The IFRC team had meetings with community groups to discuss potential livelihood activities, and visited artisans including tailors, bag makers, shoemakers, food sellers and other entrepreneurial models that are proving to be successful. The mapping process of these entrepreneurs' location is underway. It will provide the team with a document to understand the available opportunities for the IFRC to help stimulate job creation opportunities using the community's existing resources and skills.

The IFRC has facilitated extensive group work on consolidation of existing internal information such as SME in the area, livelihood initiatives and housing issues (land owners, house owners, renters, squatters, etc). A detailed report

on this action including thorough analysis of KAP survey and database will be available during the third quarter of 2012.

To promote communication and accountability, the IFRC has installed nine new notice boards for INA posters developed in collaboration with the beneficiary communications department. This will support the flow of information for the community so that they are aware of the IFRC work undertaken and the activities planned and implemented. In addition, the operation is studying the possibilities of establishing a field office in the area to provide office space and room for community meetings, exhibitions, and an information gathering point for residents, CBOs and NGOs.

The INA construction team continued infrastructural works in Carrefour Feuilles with the building of additional retaining walls and ravine protection facilities. As mentioned above, the team is also involved in the technical assessment of houses in Carrefour Feuilles to determine the condition of the housing stock and number of houses that are in need of retrofitting and those where this option is not feasible. The team has held meetings with the mayor's representatives to discuss priorities and activities coordination with other actors in the area, as well as with the office of the Prime Minister to discuss road repairs in the area.

#### **INA Site 2 – DELMAS 30 (Creekside) – Phase 1**

**Commune: Delmas**

**Quartier: Delmas 30**

**# of households: 400**

**# of beneficiaries: 2,000**

#### **Community and construction activities**

The IFRC held an introductory INA/Community Mobilization Training and Team building session to ensure that the INA team could move ahead with joint activities, obtain comprehensive knowledge of past activities, and be a participant in future planning. A stakeholders' analysis was conducted by mapping of CBOs, the already existing committees in the community and the identification of notable personalities and leaders in the community in the current INA area of intervention (Hollywood) and extended area of Delmas 30 (Delmas 30). This has helped to provide the IFRC with a clearer understanding of neighbourhood dynamics, its potential and challenges to address when working with this community.

The INA team has deepened its relationships with UN-Habitat, IOM, Emergency Architects and other key actors to avoid duplication of activities in areas of intervention.

The IFRC has organized introductory community meetings with representatives of Hollywood and Delmas 30, and thoroughly prepared beneficiary community messaging to ensure clear and understandable messages to avoid conflict within the community.

The operation has carried out the mapping of shelters at high risk for the potential relocation of occupants as it was discovered that if the erosion continues at the present rate, some of the houses were too close to the ravine and in danger of falling into the ravine during the next rainy season. The IFRC has carried out introductory and follow-up activities for the relocation of 14 families living in houses at high risk of flooding and or landslides, with the objective to move these families out of the danger zones before the beginning of the next rainy season.

To ensure that key messages are understood and opportunities are taken advantage of in the existing support available to the programme, the INA team in collaboration with the IFRC/HRCS beneficiary communications team, organized a training on beneficiary communications (for community and technical teams) during this reporting period. The operation followed up the training with the creation of an INA leaflet/logo to be shared with the community for a more comprehensive understanding of Federation work in the target neighbourhoods.

The team has been involved in the organization of eight community meetings with the representatives of CBOs in Hollywood and Delmas 30 in an effort to establish a representative community platform. These meetings were supported by personalized visits to advocate for the respect of IFRC principles and a term of reference on how the platform would function including its roles and responsibilities. This effort has led to a detailed analysis of the

community dynamics and a proposal of the new community engagement structure, which will take into consideration the multiple points of view on offer.

The INA community sensitization campaign was initiated, which included procuring notice boards with suggestion boxes in an effort to improve communication with the community, support beneficiary accountability, and ensure that information reach all sectors and that people have another outlet for giving ideas or voicing their concerns.

On 8 May 2012, INA organized an event for World RCRC Day in Delmas 30 and Hollywood. The event focused on the history of the RCRC, and explained the principles and work that the Red Cross is carrying out in the neighbourhood. The event also provided an opportunity for the INA team to test the type of activities that could be undertaken as community engagement activities on special occasions.

The construction team has been involved with the technical assessment of houses in Delmas 30 to establish the condition of the housing stock and number of houses that are in need of retrofitting, and those that where this option is not feasible.

The team has held meetings with the representatives of the Delmas Mayor and with Haitian Ministry of Public Works (MTPTC) to discuss the ravine mitigation works. The IFRC has agreed to provide a hydrological report before the start of any work. Architectes de l'Urgence - Mission Haiti (Emergency Architect-Haiti Mission) will do this work, which is programmed to begin in November 2012. The IFRC is expected to begin temporary mitigation works on the ravine to protect a particularly vulnerable stretch of the ravine in August 2012.

The community team with the Delmas 30 community have identified four schools for rehabilitation during summer when pupils would be on vacation. The technical team will carry out a technical evaluation to determine if rehabilitation works are feasible based on the condition of the current buildings.

#### IFRC construction activities as of 30 June 2012

Type of Activity <sup>4</sup>		Carrefour Feuilles	Delmas 30	Delmas 19	Delmas 9	Total
Plots surveyed	item	373	518	1,050	263	2,204
Retaining wall	m <sup>3</sup>	316	0	0	0	316
Footpath	m <sup>2</sup>	0	27	0	0	27
Street lighting	item	17	13	19	0	49
Drainage works	m <sup>2</sup>	0	0	150	0	150

#### Challenges

Community leaders initially did not understand the IFRC's active participatory approach and showed signs of discontent, as they did not receive clear project promises before the community planning exercise. The community team constantly works to disseminate key messages and make efforts to activate community participation. The key message focuses on changing the community vision from "Red Cross project" to "community project" and ensuring community ownership for its sustainability.

In the construction sector in Delmas 30, historic internal conflicts within the community delayed decisions, affecting the time it takes to implement programmes. The conflicts are also affecting the IFRC relationships with the

<sup>4</sup> House repairs and new housing construction are other activities planned for these sites. Future updates will report on the progress of these activities.

community. The IFRC is working with the Municipality of Delmas and community leaders to overcome some of the community frustrations.

In Carrefour Feuilles, the complete demographic data, based on an IOM study completed in 2011-2012, of the area was not made available to IFRC. This resulted in duplication of efforts with a substantial time delay for the programme. The IFRC will continue to move forward with obtaining its own information and will look for ways to minimize the challenges to the overall project cycle.

The large number of members in the community platform, mainly in Carrefour Feuilles (the original 20 CBOs in the UN-Habitat/FAU community consultation have since doubled), make consultation a challenging process. To resolve the issue, additional meetings were held to identify 20 members/representatives for all zones. The group will be responsible for the continuation of work already developed by other agencies and will be accountable to the wider platform and community.

### French Red Cross/IFRC partnership

#### INA Site 3 – DELMAS 33

**Commune: Delmas**  
**Quartier: Delmas 33 – Bethanie and Place Cazeau**  
**# of households: 1,354**  
**Est. # of beneficiaries: 6,770**

The IFRC and the French Red Cross are currently not carrying out any activity in Delmas 33 due to funding constraints.

### IFRC direct Implementation

#### A Site 4 – MAÏS GATÉ

**Commune: Port-au-Prince**  
**Quartier: Maïs Gaté camps and targeted neighbourhoods**  
**# of households: 2,067**  
**Est. # of beneficiaries: 6,483**

The IFRC is not carrying out any activity in Maïs Gaté due to a lack of funding.

### French Red Cross implementation / IFRC funding and support

#### NA Site 5, – Delmas 9, 17, 30 and Croix des Bouquets<sup>5</sup>

**Commune: Remain to be defined**  
**Quartier: Remain to be defined**  
**# of households: 1,816**  
**Est. # of beneficiaries: 9,080**

The French Red Cross (FRC) intensified activities to improve the housing condition of target population in Delmas 9 neighbourhood. To achieve this, the FRC continued to carry out the identification of households living in damaged houses or houses with poor sanitary conditions. The FRC extended assessment of 194 yellow houses and red houses in Delmas 9, and began repair work on structural parts of 131 of these yellow houses, while negotiation with owners of red houses marked for demolition continued. In addition to the improvement work underway on 19 buildings with no structural damage, and repair works on latrine facilities in the neighbourhood, the FRC continued to train masons or skilled workers in repair and construction techniques. As demolition activities

<sup>5</sup> From 2012, INA site 5 will be comprised of Delmas 7, 9, 11, 17, 30 and Croix des Bouquets as part of the IFRC funding and partnership agreement with the French Red Cross.

were ongoing with the support of the Voluntary Community Groups (VCG), the FRC ensured the clearing and removal of rubble at the sites.

Indicators	Observed value before the project	Targeted value (reference to the term of the project)	Progress as of 30 June 2012
# of yellow houses that have been repaired	0	100	101
% of households able to maintain their improved housing	0	122	35
# of plots safely cleared from red houses	0	29	24
# of m3 of rubble removed from the extended neighbourhood	0	8,233	7,683
# of small scale community work implemented	0	1	0

With the support of the VCGs, the FRC carried out disaster preparedness activities in the Delmas 9 neighbourhood prior to the approaching hurricane and rainy season. The FRC with the HRCS and the VCGs identified all the drainage canals and started cleaning 550 linear meters of drainage and ravine. The FRC has contracted an engineering consulting firm to do a feasibility and technical survey for drainage system in the neighbourhood. In addition, with the support of the Haiti Red Cross Society volunteers, a plan is underway to set up a community intervention team in the neighbourhood. The FRC sensitized residents of the neighbourhood on disaster risk management.

Indicators	Value observed before the project (initial reference)	Targeted value (reference to the term of the project)	Progress as of 30 June 2012
One community intervention team is operational in the neighbourhood	0	1	0
% of the community with improved knowledge on disaster risk management (DRM)	0	80	12.6
Recommendations for ravine and drainage rehabilitation available	0	1	0

In enhancing the self-sustainability and improving the livelihoods of the most vulnerable people in the neighbourhood, the Red Cross is carrying out the socio-economic profile of households, and the economic mapping including market assessment through 15 focus groups.

Indicators	Value observed before the project (initial reference)	Targeted value (reference to the term of the project)	Progress as of 30 June 2012
Mapping of economic activities and recommendations to develop economic revival	0	1	1

activities available			
Number of households benefiting from access to microcredit and income generating activities (IGA)	0	30	0
Number of workers employed in construction activities	0	250	368

For better coordination of the Red Cross intervention in the neighbourhood, the FRC continued to identify stakeholders, and organized meetings with community groups through their representatives. The FRC has also facilitated the creation and recognition of Voluntary Community Group (VCG) in Delmas 9 neighbourhood. Furthermore, the Red Cross is providing methodology to create and reinforce VCG and empower the community.

Indicators	Value observed before the project	Targeted value (reference to the term of the project)	Progress as of 30 June 2012
# of meetings of the community group	0	18	60
Average # of group representatives present at each meeting	0	10	11
# of group representatives active for 13 months	0	10	11
VCG officially recognized by the legal authorities	0	1	1

### IFRC Support to British Red Cross (BRC)

#### INA Site 6 – DELMAS 19

**Commune: Remain to be defined**  
**Quartier: Remain to be defined**  
**# of households: Remain to be defined**  
**Est. # of beneficiaries: Remain to be defined**

The IFRC continued to provide, as requested, technical and material support to the British Red Cross, which is funding and implementing activities in Delmas 19. The secretariat INA team will be installing additional 17 solar-powered streetlights as part of its violence prevention activities supported through INA.

### IFRC support to Spanish Red Cross

#### INA Site 7 – LÉOGÂNE 3

**Commune: Remain to be defined**  
**Quartier: Remain to be defined**  
**# of households: 4,400**  
**Est. # of beneficiaries: 22,000**

The IFRC increased its promotion of good hygiene habits to sustain newly constructed and rehabilitated water and sanitation facilities in target communities in Léogâne. It organized a PHAST training for 27 community facilitators during this reporting quarter. By June 2012, 255 (INA 205 and non INA 50) community facilitators have been trained in PHAST and have been supporting hygiene promotion in their respective communities.

The hygiene promotion team organized promotion sessions focused on vector control, waste management and hand washing with schoolchildren in two public primary schools in Deslandes. One thousand pupils aged between 6 and 12 years old participated in these activities designed especially for young people. Since the beginning of the project, seven schools have benefitted from hygiene promotion, four during the emergency phase and three during the recovery phase. From May 2012, the team carried out monitoring visits in the schools and intended to continue during the second half of 2012 when the schools re-opened after the summer vacation. In June 2012, 15 monitoring visits were completed in order to measure the impact of activities after 7 months of sensitization activities in schools.

The water and sanitation team facilitated the establishment of 32 water committees (23 in INA and 9 in non INA areas). As recommended by DINEPA, the committees were established to oversee the management of water facilities in their respective communities. The IFRC signed the contract for borehole drilling and works are expected to begin soon in the target communities.

As part of the support provided to the Spanish Red Cross intervention in Deslandes, Mapou Buissonnière, Nan Basin, Nan Chateay, Macombre and Beauséjour, the IFRC with the participation of beneficiary communities built 1,569 ventilated pit latrines as of June 2012. The beneficiary communities participated by digging the pits. The Léogâne operation has distributed 933 metallic garbage bins and 1,011 hand-washing facilities to be installed close to the new latrines to improve good sanitation practices. The IFRC community mobilizers continued to carry out mobilization activities and monitored the sanitation activities in INA operational areas.

The IFRC collaboration with the Spanish Red Cross in the implementation of INA activities continued in 14 communities in Léogâne. The IFRC health team in Léogâne continued to organize CBHFA training for community facilitators in 14 communities in the Spanish Red Cross operational areas. Following training, the beneficiaries have implemented community-based sensitization activities in these communities and in non INA target communities. Since its inception, the training has reached 473 beneficiaries. Other health programme activities are reported below in the stand-alone section.

**Challenges:** The non-adherence to the existing coordination mechanism by other humanitarian actors has affected the IFRC water and sanitation programme. This challenge and the slow process in obtaining drilling permits to work in target borehole locations led to loss of these locations to other actors and a revision of planned activities. In addition, sporadic civil unrest often affects the general security situation, and restricts the movement to operational areas.

CBHFA community facilitators are overwhelmed with multiple activities that they are carrying out not only for the IFRC secretariat but also for other PNS and humanitarian actors in the field. In addition, IFRC programme teams face a shortage of active community facilitators as some of them have relocated to other communities.

## 2. Stand-alone Recovery Projects

### 2.a Shelter and Settlement Solutions

**Goal: Facilitate the transition to a safer and healthier environment for households displaced by the earthquake**

**Objective 1: Shelter solutions: Increase access to safe shelter through the provision of transitional shelters.**

**Key Activities**

- Integrated programme communications strategy to targeted camp population.
- Beneficiary needs assessment, selection and verification.
- Management of day labourers/employees for T-shelter construction.
- Skill building and training of workers for yellow-house repairs.
- Enumeration process for land security; coordination with local authorities to ensure alignment with emerging urban plans.
- Modification of T-shelter designs according to beneficiary feedback and preferences.
- Provision of T-shelter supply to PNS partners.
- Provision of sanitation solutions with T-shelters.
- Distribution of hygiene kits and cleaning kits along with sanitation solutions in T-shelters.
- Increased access to water in neighbourhoods targeted by T-shelters.

**Progress:** The shelter team worked with water and sanitation staff, to identify the remaining transitional shelters that had not received a latrine. Teams were organized, and the remaining six latrines have now been constructed, ensuring that all households that received an IFRC constructed T-shelter also have received an IFRC constructed latrine.

With the completion of community activities in the transitional camps of Annexe de la Marie and La Piste, the IFRC has begun to withdraw from these locations and will not be providing any further support.

The IFRC did not build any transitional shelters during this quarter, as all constructions related to the programme were completed.

The table below highlights the key results achieved in objective 1 during this reporting period:

Key Results	Life of project	2011 Total result	2012 Result Q1 total	2012 Result April	2012 Result May	2012 Result June	2012 Result Q2 Total	Total
# of T-shelters provided	4,500	4,107	364					4,471
# of households receiving a hygiene kit	1,500	1,805						1,805
# of T-shelters with a sanitation solution	1,500	1,183	24	-	-	5	5	1,212*
# of T-shelter HHs with access to an improved water source	1,500	698						698
# of households receiving a settlement grant	1,500	1,183	24					1,212**

\* These are T-shelters directly handed over to beneficiary households by the IFRC.

\*\* Please note this number has been reduced as the shelter team identified an error in the figures. The team only provided settlement grants to those households that received transitional shelter.

**Objective 2: Alternative shelter solutions:** Increase access to safe shelter through the provision of rental and relocation support.

**Key Activities**

- Beneficiary communication, assessment, selection and validation.
- Rental house assessments.
- Beneficiary support for ID cards, bank accounts etc.
- Follow-up support and monitoring.

**Progress:** The IFRC intensified its contribution to the camp decongestion and relocation, with the identification and registration of two new camps. The IFRC resettlement and relocation team registered 194 families in Mesiane and another 156 in Parc Sainte Claire during the month of June.

The team has carried out follow-up visits to households receiving relocation support in the provinces to monitor and assess the impact of the grants on beneficiaries. The follow-up visits allow the programme database to be updated. The team continued to monitor beneficiary households who have relocated within Port-au-Prince for a period longer than 12 months.

**Objective 3: Livelihoods:** Support targeted shelter solution beneficiaries to become more economically self-reliant through increased access to support packages, skill-building and economic opportunities.

**Key Activities**

- Community mobilization, sensitization, beneficiary assessments and validation.
- Grants disbursements: disbursement of livelihood grants following training and business plan development.
- Vocational and technical training: mapping and selection of skill-building service providers.
- Training of beneficiaries in targeted vocation and technical trades.
- Microfinance support: mapping and selection of microfinance providers; establish links between providers and beneficiaries; support targeted capacity of service providers to improve services to the poor; support beneficiaries to access microfinance services.

**Progress:** The livelihood team continued to follow up with the beneficiary selection process for cosmetology training. The team created a training list of local staff (as life skill) and beneficiaries that the microfinance institution *fonkoze* will select. The operation has revised the National Council of Popular Financing (KNFP) terms and conditions to respond to the need of training for Small and Medium Entrepreneurs (SME) at neighbourhood level and at IFRC team level.

The livelihood programme is working with the communication's department to recycle programme leaflets in Carrefour Feuilles, Cabaret and Delmas 30, under the INA livelihoods.

The table below highlights the key results achieved in objectives 2 and 3 during this reporting period:

Key Results	Life of project	2011 Total result	2012 Result Q1	2012 Result April	2012 Result May	2012 Result June	2012 Result Q2 Total	Total
# of households receiving rental/ relocation grants	9,000	4,414	722	0	801	263	1,064	6,200
# of HHs that have received a livelihood	5,000	1,500	2,589	765	987	199	1,951	6,040

support grant (or other form of financial support) <sup>6</sup>								
# of households remaining in improved shelter conditions after 12 months	2,200	30	137	-	-	237	237	404
# of people trained	500	222	-	-	-		201	423
# of people trained reporting employment								N/A

### Challenges

The return and relocation programme is challenged to ensure that selected households use the cash grants to rent or find an alternative and safer shelter. The IFRC shelter team has established a tracking mechanism that follows all beneficiary households to their new residence for the initial site visit. Two further follow up visits will be carried out during the first 6 months of their rental agreement, with a final visit at the 12-month mark. This intensive monitoring has been established to help minimize the number of beneficiaries that relocate into other camps, which then creates further burden on the already overstretched resources in the Port-au-Prince camps.

The return and relocation programme needs to continue to find safe and secure rental housing for the intended beneficiaries. The actions of other agencies and the GoH have an impact on the return and relocation programming, quite possibly increasing the demand for available lower-cost rental accommodations. While the IFRC cannot solve this issue alone, it is actively advocating for further investment in home construction and is taking on some of the responsibility with the house repair programme in Port-au-Prince neighbourhoods.

## 2.b Emergency Water and Sanitation

**Goal: Facilitate a responsible scale-down of non-sustainable water and sanitation services (while trying to ensure access through capacity building, small-scale rehabilitation and comprehensive beneficiary communication approaches).**

**Objective 1:** Transition from emergency water provision while increasing awareness of and access to safe water.

### Key Activities

- Work with DINEPA to take-over water trucking in targeted camps.
- Work with DINEPA to construct and rehabilitate water kiosks in targeted neighbourhoods surrounding key camps.
- Facilitate water and sanitation solutions among neighbourhood community members and private water providers.
- Develop and implement a 2-way beneficiary communication strategy ensuring camp residents are aware of water delivery conclusion and where nearest safe water sources are located, and have an opportunity to comment or ask questions.

<sup>6</sup> The IFRC will monitor livelihood grants directly related to the rental grant as part of the decongestion programme. The key expected results have been changed to align the quarterly operations update figure with that of the Federation-wide report. The change results from the difference in families that have received one of the two livelihood grants. Total figure now only includes households that have received both grants, totalling \$500.

**Progress:** The IFRC supported emergency water trucking to the IFRC camp and handed over this responsibility to DINEPA in Henfrasa neighbourhoods. The water trucking operation was established following reported cases of cholera in this camp. DINEPA, upon request from IFRC, agreed to provide three weeks of support in this camp to help assist the new water committee.

The Morne à Cabris excreta treatment station where most of the desludging trucks servicing the camps in Port-au-Prince discharge their waste continues to receive water-trucking support from DINEPA for their operational needs. The water management authority provided water during major public events including festivals during the second quarter of 2012.

DINEPA has identified, designed and planned for the construction of 29 new water kiosks, rehabilitation of 13 others and the connection or the extension of 30 new ones in Port-au-Prince. The authority has finalized the technical documents for tender. The IFRC in collaboration with DINEPA is in the process of finalizing the procurement procedures and monitoring tools based on the IFRC standards.

The construction work at the Morne à Cabris excreta treatment station has been finalized with UNOPS and handed over to DINEPA. As the first excreta treatment plant in Haiti, the facilities will contribute to improve the sanitation conditions in Port-au-Prince.

The IFRC facilitated collaboration between camp committees and the private operator JEDCO, which manages desludging activities for DINEPA with UNICEF funding. This collaboration, which includes the integration of camp residents in the monitoring and execution of the desludging activities, has significantly improved the quality of the services provided in the IFRC managed camps that were handed over to DINEPA. The private operator has extended the collaboration to camps under its direct responsibilities with support from DINEPA and UNICEF.

Key Results	Life of project	2012 Annual target	2011 Total result	2012 Result Q1	2012 Result April	2012 Result May	2012 Result June	2012 Result Q2 total	Total
# of camps where IFRC has ended water service*	66	-	66						66
# of water points serviced by IFRC*	132	-	66						66
# of camps whereby DINEPA has taken-over water-trucking	15	0	18						18
# of water kiosks constructed by DINEPA	32	22	-	29 kiosks are planned for construction and are ready for tender and finalization of procurement procedures.					
# of water kiosks rehabilitated by DINEPA	51	36	-	-	13 kiosks are identified for rehabilitation and ready for tender and finalization of procurement procedures.				
# of beneficiaries reached via the communication campaign	10,000	0	332,752	By the end of 2011, this result was achieved and surpassed. No further implementation was planned for 2012.					

\*IFRC ended these activities during the last quarter of 2011

**Objective 2:** Transition from emergency sanitation service provision while increasing awareness of and access to sanitation solutions

#### Key Activities

- Decommission emergency latrines.
- Work with DINEPA to take-over latrine desludging in targeted camps.
- Assess sustainable sanitation options.
- Provision of neighbourhood sanitation solutions in targeted neighbourhoods surrounding camps.

**Progress:** The IFRC intensified its coordination with DINEPA in the desludging activities at the IFRC T-shelter camps of La Piste and Annexe la Mairie, as well as five other smaller camps in Port-au-Prince. The services were carried out with the desludging trucks that the IFRC had handed over to DINEPA.

The IFRC team also facilitated the collaboration between JEDCO and camp committee to integrate the camps residents in the monitoring and execution of desludging operations in the seven remaining camps that the IFRC handed over to DINEPA, and which have been transferred to the DINEPA-UNICEF-JEDCO desludging programme. The following table details the results of these actions:

Key Results	Life of project	2012 Annual Target	2011 Total result	2012 Result Q1	2012 Result April	2012 Result May	2012 Result June	2012 Result Q2 total	Total
# of camps where IFRC has ended sanitation service	32	-	66	-	-	-		0	66
# of emergency latrines that have been decommissioned or serviced by DINEPA*	778	381	721	407	-	-		392	392
# of beneficiaries reached by the communication campaign	10,000	5,000	37,295	1,175	-	-		-	38,470

\* The figures are not cumulative.

**Objective 3:** Hygiene knowledge and behaviour is improved in camps and targeted surrounding neighbourhoods.

#### Key Activities

- Hygiene promotion campaigns are conducted repeatedly in all IFRC water and sanitation camps.
- Hygiene promotion campaigns are conducted in neighbourhoods surrounding camps where some water and sanitation services are improved.
- Support and training is provided in targeted neighbourhoods surrounding camps to create neighbourhood water and sanitation management structures.
- Support and training is given to hygiene promoters and community groups involved in Community-Based Health and First Aid (CBHFA) in collaboration with the HRCS health department.

**Progress:** During the second quarter, the IFRC increased the number of hygiene promoters to 41 and expanded the area of intervention to 21 IDP camps, with a population of over 52,204. The team has sensitized 35,773 people (69 per cent of the target population) on the importance of good hygiene practices. The hygiene promotion team has organized 31 mass sanitation campaigns in the 21 IDP camps and distributed hygiene and sanitation kits to vulnerable households in these camps during the second quarter. Items distributed include 13,937 bars of soap,

180,040 aqua tabs and 3,705 oral rehydration salts, 1,351 mosquito nets, 30,000 cholera flyers, 7 drums of HTH, and protective materials for the teams that carry out disinfection activities in camps and neighbourhoods.

The hygiene promoters with the support of 157 community volunteers (*relais communautaires*) continued to disseminate key messages on prevention of diseases including cholera, diarrhoea, measles and malaria among the population. The community volunteers are enhancing the participation of the beneficiaries in hygiene promotion activities like distribution, sensitization during immunization campaign, monitoring of water, sanitation and hygiene facilities, and water and sanitation activities with children.

The hygiene promotion team emphasized epidemic control during the second quarter of 2012 and referred 40 cholera cases to the nearest health facilities. Nineteen suspected malaria cases were also referred to health facilities during this period. As the team increased awareness sensitization on cholera, monitoring activities carried out by the hygiene promoters showed a reduction in suspected cases in camps located in Charboniere, Maïs Gaté 12 and Henfrasa as of 30 June 2012.

The team focused on children in the promotion of good hygiene habits in camps and target communities. A total of 330 trained children have actively participated in awareness activities in their communities through the Child Hygiene and Sanitation Training (CHAST) programme.

Key Results	Life of project	2012 annual target	2011 total result	2012 Result Q1	2012 result April	2012 result May	2012 result June	2012 result Q2 total	Total
# of Water and sanitation and hygiene promotion management committees formed during emergency operations	66	-	3						3
# of beneficiaries reached by more than one HP activity	250,000	250,000	136,202	2,128	29,530	35,773	35,773	35,773	174,103

**Objective 4:** Strengthen HRCS capacity in water, sanitation and hygiene promotion (not included in results table; progress reported quarterly only in narrative section).

#### Key Programme Activities

- Water and sanitation technical workshops conducted with key HRCS staff and volunteers (attempts to ensure a gender balance in workshops).
- Joint management of the DINEPA agreement.
- HRCS key staff participate in water and sanitation assessments and hygiene promotion activities.
- HRCS participates in the recruitment of water and sanitation staff.

**Progress:** With the support of the operation, the Haiti Red Cross Society has prepared the formal paper work for the donation of 15 water trucks, 3 vacuum trucks, 1 backhoe loader, 1 Nissan pick-up vehicle and 1 bobcat to complete the transfer process to DINEPA. In addition, the IFRC team has prepared the third amendment to the Memo of Understanding (MoU) with DINEPA, and by the end of June 2012 the signing was pending for the amended document. The procurement procedures document will also be attached as annex to the MoU after it is signed.

**Challenges:** Some of the challenges of the emergency response phase persisted in the recovery phase. These challenges include lack of land space to construct semi-permanent latrines, to replace the mobile and emergency latrines, high ground water level making it difficult to construct higher volume pit latrines and lack of willingness to pay for the cost of desludging latrines in some of the camps. The issue of land ownership and difficulty in getting authorization from private landowners and public officials continued to affect the construction of permanent

sanitation facilities in target areas.

## 2.c Water, Sanitation and Health in Léogâne

**Goal:** Contribute to improvement of the health status of 20,000 people in three target sections of Léogâne through improving access to safe water, sanitation and hygiene knowledge by end December 2012.

### Water and Sanitation

**Objective 1:** Increase access to safe water supply for 20,000 beneficiaries at household and community level by October 2012.

#### **Key Activities**

- Construction and rehabilitation of 46 water facilities, including:
  - Construction of 20 water points/bore holes
  - Rehabilitation of existing 20 water points
  - Construction of six distribution networks

**Progress:** By the end of June 2012, the IFRC team in Léogâne continued to construct water distribution networks and water points, and completed one of the networks with an original fountainhead was available with enough water flow during this reporting period. One additional water point was rehabilitated as of end of June bringing the total to 33 water points. Fourteen of them are from artesian sources and 19 from sources equipped with hand pumps. A total of 12,344 households in the beneficiary communities now have increased access to potable water from the IFRC water related intervention. The IFRC community mobilization teams continued the identification of potential water points for rehabilitation, while the technical team carried out the assessment.

The increase in the total of key results achieved was due to an increment of activities after the modifications made to the Léogâne plan in February 2012 as reported in the first quarter update.

Key Results	Life of project	2012 annual target	Total result 2011	2012 total result Q1	2012 result April	2012 result May	2012 result June	2012 total result Q2	Total
# of water points/bore holes constructed	20	9	21	27	29	31	31	4	31
# of existing water points rehabilitated	20	15	24	32	32	32	33	1	33
# of distribution networks constructed	6	-	6	7	8	8	8	1	8

**Objective 2:** Increase access to sanitation facilities for 6,300 beneficiaries at household and community level by May 2013.

#### **Key Activities**

- Construction of 1,260 household latrines
- Construction of 1,260 hand-washing facilities
- Provision of 1,260 metallic garbage bins for households

**Progress:** The IFRC water and sanitation team in Léogâne has completed eight additional latrines, and continued construction work in five other target communities. The new latrines were built in IFRC non-INA operational area. The *Ecosan* project is facing some challenges with the start of the rainy season, and the increase in ground water. The IFRC has distributed materials for 10 *Ecosan* toilets, and assessed potential solutions to overcome the current challenges. In addition, sanitation activities carried out during this period continue to focus exclusively in INA areas.

Key Results	Life of project	2012 Annual target	2011 Total result	2012 Result Q1	2012 result April	2012 result May	2012 result June	2012 Total result Q2	Total
# of household latrines constructed*	1,260	1,000	51	59	61	75	80	21	80
# of hand-washing facilities constructed*	1,260	1,000	29						29
# of metallic garbage bins distributed*	1,260	1,000	-						

\*Results are reported in the INA section above.

### Objective 3: Enhance community participation in water and sanitation related activities to ensure sustainability by October 2012.

#### Key Activities

- Mobilize and facilitate communication between 77 water points and sanitation areas stakeholders (beneficiaries, CASEC, DINEPA).
- Formation of 77 water committees as per DINEPA regulations.
- Training of 231 water committee members in water point management.
- Conduct water quality analysis and feedback to 77 water point communities after constructing or rehabilitating the water point.

**Progress:** As shown in the table below, the community participation in water and sanitation activities has made progress during this reporting period:

Key Results	Life of project	2012 Annual target	2011 Total result	2012 Result Q1	2012 Result April	2012 Result May	2012 Result June	2012 result Q2 total	Total
Mobilize/facilitate communication between water points/sanitation areas stakeholders (beneficiaries, CASEC, DINEPA)	77	29	19	36	55	55	55	19	55
# of water committees formed as per DINEPA regulations.	77	29	28	28	28	28	32	4	32
Training of 231 water committee members in water point management	231	231		52	116	116	116	64	116

### Objective 4: Improve community knowledge, attitude and practice on safe water, sanitation and hygiene by May 2013. Key Activities

- Select and train 60 hygiene promotion community facilitators.
- Develop and distribute hygiene promotion implementation tools.
- Implement hygiene promotion in the community and schools following PHAST/CBHFA methodology.
- Distribute 231 cleaning tool kits.
- Conduct endline survey.

**Progress:** The hygiene promotion team in Léogâne scaled up its sensitization activities with focus on hand washing practice, malaria and cholera prevention including the distribution of aqua tablets in cholera-affected communities. The hygiene promotion team has distributed 69 cleaning kits for regular cleaning activities to 29 community groups where IFRC had constructed or rehabilitated water points. In addition, 562,150 aqua tabs tablets and 2,394 posters were distributed in locations where cholera cases had been reported. Some 3,208 people participated in the cholera sensitization activities of the IFRC during this period.

## Health

**Objective:** Implementation - Improved knowledge of health and disease prevention, and increased and sustained health seeking behaviours in targeted communities.

### Key Activities

- Select and train 60 hygiene promotion community facilitators.
- Develop and distribute hygiene promotion implementation tools.
- Implement hygiene promotion in the community and schools following PHAST/CBHFA methodology.
- Distribute 231 cleaning tool kits.
- Conduct endline survey.

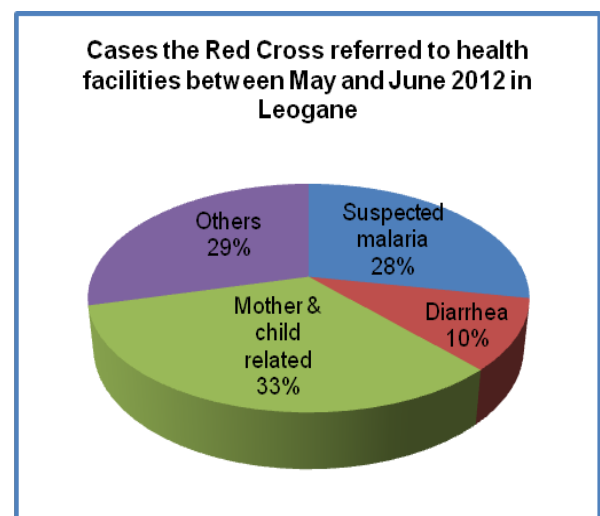
**Progress:** The Léogâne health team, supported by the team in Port-au-Prince, participated in the first round of national vaccination campaign from 21 April to 4 May 2012 in Léogâne. The team also supported the vaccination exercises carried out from 5 to 9 June and 20 to 21 June 2012. The Red Cross carried out a mass sensitization exercise including the distribution of posters and flyers during the campaigns as part of the mother and child health activities of the CBHFA. The IFRC health team conducted training on sensitizing the population on the importance of vaccination for IFRC hygiene promotion team, the Spanish, Netherlands, Norwegian and German Red Cross Societies. Eighty-five non-medical personnel benefitted from the training while the mobilization intervention of the Red Cross reached 3,038 people through 1,623 home visits and 234 group awareness sessions.

The health team intensified its malaria prevention activities in target communities by scaling up community sensitization on the importance and proper use of mosquito treated bed-nets, as it was discovered during home visits that only 59 per cent of the 152 beneficiary households visited were properly using the nets. The Léogâne health programme has distributed 9,619 mosquito nets to 4,495 households (19,049 beneficiaries) in 7 urbanizations (Macombre, Deslandes, Grand Savanne, Mercery C, Mapou Buissoniere, Chateau, and Nan Bassin) from January through June 2012.

The health team carried out a cumulative 1,428 home visits and 244 group activities to raise awareness about mother and child health from January to June 2012 and reached 6,709 beneficiaries with messages on healthy motherhood, child care, breast feeding and family planning.

Through 1,603 home visits and 225 group activities to raise awareness on sexually transmitted infections and HIV/AIDS, community facilitators supported by the health team distributed 37,556 condoms provided by the Ministry of Public and Population office in Léogâne. In addition, The IFRC supported the Spanish Red Cross with 28,800 condoms distributed during the April carnival festivals in Léogâne.

Since May 2012, the IFRC health programme has referred 720 health cases to health facilities and continued to do follow-up on those cases.



The increase in the total of some of the key results achieved is due to an increment in activities after the modifications.

made to the Léogâne plan in February 2012, as reported in the previous update.

Key Results	Life of project	2012 annual target	2011 total result	2012 result Q1	2012 result April	2012 result May	2012 result June	2012 Total Result Q2	Total
# of communities mobilized by health programme	17	17	10	2	-	-		2	12
# of people reached with tailored health interventions	35,000	35,000	12,417	15,873	8,529	18,205	30,177	30,177	58,467
# of community health facilitators trained	650	300	340	0	25	156	185	185	525
# of home visit carried out by community facilitator	-	2,000	4,273	3,713	1,559	2,920	4,864	8,397	16,383
# of group awareness carried out by community facilitators	-	1,500	496	495	199	435	823	1,318	2,309
# of cases identified to be referred to health facilities	-	-	128	305	153	315	415	720	1,153

**Objective 1:** Increase access to emergency shelter for households in need of replacement tarpaulins.

**Objective 2:** Maintain preparedness to respond to emerging and unmet needs.

**Progress:** Relief activities ended during the third quarter of 2011, with the IFRC achieving and surpassing the two key results set for relief programme as shown in the table below.

Key Results	Life of project	2011 Annual Target	Result as of June 2011	2011 Result Q3 Total	Total as of end 2011
# of families receiving tarpaulins		103,000	214,544	41,534	256,078
# of tarpaulins distributed		240,000	429,528	83,068	512,596

## 2.d Violence Prevention

**Goal: Improve community resilience to violence by identifying vulnerable groups and strengthening their protection within programmes. This will be achieved through coordinated implementation of IFRC violence prevention strategies, situational analysis and documentation of reported violence affecting beneficiary communities, as well as development of common response practices for Movement activities in Haiti.**

Objective 1: Implement violence prevention strategies and policies of the IFRC across the Movement's programmes, with particular focus on INA and with the wider aim of improving institutional learning on violence prevention within the IFRC.

Objective 2: Monitor and analyse both perceived and real violence in communities.

Objective 3: Develop and implement into programmes common matters, protection practices in response to reported violence (both real and perceived).

Objective 4: Strengthen representation and voice of the IFRC on issues pertaining to violence mitigation, prevention and response by advocating government and UN agencies, deliver a more timely and comprehensive response to violence in communities.

### Progress against objectives 1 and 3

In collaboration with the disaster risk management, communications, INA and health teams, the following activities were carried out for objectives 1 and 3 during this reporting period:

- Disaster Risk Management: Developed best practices when assessing violence in camps and communities post-disaster, package of accountability and violence-sensitive questions for the Emergency Response Team training. Twelve members were trained.
- Beneficiary Accountability Outcome: Ensured the development of minimum standards for IFRC programming included Violence Prevention Mitigation and Response (VPMR).
- Communications: Contribution to World Disasters Report 2012 on the protection space in Haiti.
- INA: After a period of programme planning, *safer communities* is now the second key objective of the three objectives of the INA programme. This integrates violence prevention into the construction work with techniques of violence prevention through environmental design. In approaches to livelihoods, actions were taken to address the risks and mitigate conflicts between communities when income generation is created for the few in urban areas of great need. The Red Cross teams work in a manner that promotes cultures of non-violence and peace.
- Health: (response and National Society capacity building) Haiti Red Cross Society capacity building on violence prevention, mitigation and response became a priority over the period with the training and mentorship of the newly recruited Gender-Based Violence Officer in the health department. This included joint development of gender-based violence training module and two-day training on violence prevention, mitigation and response of 67 volunteers of the Haiti Red Cross Society working in areas of Port-au-Prince that are highly affected by urban violence. Support and technical advisory was also given for the development of a Haiti Red Cross Society protection programme for those most vulnerable to violence in Port-au-Prince (i.e. residents of camps and disadvantaged neighbourhoods). After a period of internal comments, the Head of the HRCS health department approved the project. A total of 36 advisory sessions with the officer and her colleagues were given, covering topics such as violence prevention approaches and assessments, project management, the development of PMER frameworks, project proposal design, and effective reporting. This mentorship is a continuous process.

### Assessments (All sectors):

- Completion of Safe Spaces report on violence and security through community interviews with 80 residents of INA sites of Carrefour Feuilles and Delmas 30, risk factors and programming advice were developed for INA IFRC secretariat team.

- The violence prevention delegate participated in a review of the VCA and its effectiveness on assessing protection concerns in urban settings of insecurity.

### **Progress against objective 2**

The violence prevention team developed an analysis of real and perceived violence as linked to disaster risk response, and published it in an IFRC Issues Brief entitled *Violence Prevention and Practice*. This presented previously un-reported data from 222 IFRC personnel of the 2010 emergency response. It revealed more 'hidden forms' of violence in the community which were traditionally left unnoticed by IFRC emergency response assessments. This advocacy is proving a key catalyst both in Haiti and beyond, behind the integration of sensitive violence prevention and protection questions into existing assessments from household surveys to emergency response team assessments.

The violence prevention programme organized violence prevention support sessions for 21 protection focal points from 18 Port-au-Prince camps. These focal points are now being incorporated into a Haiti Red Cross Society support programme.

Advisory assistance provided to the Government of Haiti: The IFRC secretariat in collaboration with IOM developed a common Government-approved tenancy agreement to ensure the security of accommodation for those relocated from camps into communities and presented it to the Ministry of Social Affairs. The secretariat also supported the Ministry of the Interior in the development of a protection chapter within the National Contingency Plans for Disaster Risk Response.

### **Progress against objective 4:**

The IFRC Learning Conference became a key platform for action on raising the spectre of the IFRC's largely unrecognized efforts on and plans for violence prevention, mitigation and response integration programming. The conference brought together senior management from the secretariat, the ICRC and PNS (Spanish, French, Canadian and British Red Cross Societies) that had been active before and since the earthquake on violence prevention programming, as well as the Haiti Red Cross Society, interested PNS globally and representatives from the regional secretariat. A two-hour session identified key learning, strengths and weaknesses of efforts to date. Consequently, the outcome document records that greater investment in and funding of core personnel is required in future mega-operations, and particularly complex urban settings. It was agreed that violence prevention, mitigation and response efforts should be integrated into all our programmes in disaster response, beginning primarily with effective assessments that address hidden forms of violence.

Over the period, technical advisory meetings were held with six ministries of the government of Haiti, 15 PNS, two PNS headquarters delegations, twice with ICRC and held 36 meetings with the HRCS.

### **Challenges**

Capacity building and resource mobilization remains a priority across the IFRC and particularly within the HRCS. Violence and crime persist and affect, often devastatingly both the operation and the beneficiaries. After many evidence-based assessments and advocacy, the violence prevention unit continues to develop more programmes, but the resources of the Movement to support them remain severely limited.

## **Pillar Two: National Society Development**

### **A. Support to Haiti Red Cross Society Strategy 2010 – 2015**

**Goal: To ensure that Haiti Red Cross Society (HRCS) is a strong and reliable civil sector partner to the government and the people of Haiti, while scaling up and sustaining key services in the sectors of**

**disaster management, health and blood to beneficiaries by strengthening the financial, technical and human resource base within the HRCS.**

**Objective 1:** Support the Haiti Red Cross Society in implementing their Strategy 2010 – 2015.

Key Activities:

- Finalize work plans, log frames and budgets for the HRCS Strategy 2010-2015.
- Establish and support the National Society working group and its sub groups.
- Build management capacities on a national and decentralized branch level.
- Human Resources reinforcement (integrated delegates).
- Build volunteer management systems for adequate local service delivery.
- Build project level technical and operational management capacity.
- Strengthen human resources, communications and advocacy functions.
- Strengthen resource mobilization capacities.

**Objective 2:** Support development of financial resources for core services and assets of the Haiti Red Cross Society.

Key Activities:

- Establish and manage a trust fund or capacity building fund for HRCS.
- Continue to build the infrastructure of HRCS including the newly acquired base camp. A feasibility study to maximize the development of the compound is commissioned.

**Progress:** The HRCS has validated and rolled out its volunteer policy, which clarifies the definition of volunteer work and the roles and responsibilities of these pillars of the Red Cross work in Haiti. The HRCS had since April carried out a participatory process in validating the new volunteer policy with HRCS staff, branches and other actors including PNSs, the ICRC and IFRC. In April, the National Society organized a consulting seminar about the content and formulation of the policy for the 13 HRCS branch presidents. The policy has a clear definition of volunteer work as to the roles and responsibilities of volunteers, as well as their rights. An implementation guideline is in the process of elaboration and will be published in December 2012. The volunteer management system has been started with a package of documents for the registration of volunteers, which has been printed and will be sent to all the branches, in order to start a standard registration process with which it will be easier to keep track of volunteers and maintain contact.

The HRCS health department has started the recruitment process of a planning and reporting focal point. Technical input from the secretariat's PMER team in Haiti is supporting the recruitment process.

IFRC embedded delegates continued to work with their counterparts in the National Society in programming and strengthening of their capacities in technical and management areas. The recruitment of a delegate for a National Society Development is in progress. When recruited s/he is expected to increase secretariat support to the development of the HRCS in a comprehensive organizational development (OD) driven change management process over several years with support from other Movement partners. The strategy is to both develop an OD change process to strengthen the institutional systems and structure to deliver services and concurrently support sector level project capacities.

Moreover, the IFRC continued to collaborate with the HRCS in the development of the Base Camp.

## **B. Programme Focus Areas and Key Results for 2011 – 2012**

### **Health and Care**

**Goal: To significantly strengthen the capacity of target communities to prevent and manage injuries and common health problems in emergency and non-emergency situations.**

**Objective 1:** Capacity building - Haiti Red Cross Society (HRCS) capacity to respond to health needs at the community level with harmonized tools and methodologies is enhanced.

- At least 1,500 Haiti Red Cross Society volunteers will be trained in health topics by the end of 2012. Both women and men will have equal access to volunteering opportunities.
- At least six technical counterparts at the branch level will be in place and facilitating health programmes by the end of 2012.

**Objective 2:** Tool development - Haiti Red Cross Society has standard tools to implement health programmes that are developed, tested and standardized.

- In pursuance of a harmonized Red Cross Red Crescent health training programme, all RCRC members undertaking health training in Haiti will use HRCS approved methodologies and approaches in the four thematic areas by end 2012.
- Methodologies and approaches in the four thematic areas are shared and validated by MSPP.

**Objective 3:** Coordination - A well functioning coordination mechanism with Movement and external partners is established in support of the Haiti Red Cross Society's health programme.

- By the end of 2011, at least 50 per cent, and by the end of 2012, 100 per cent of RCRC members are participating in monthly technical working groups and other specific meetings in four thematic areas.

**Objective 4:** Implementation - Improved knowledge of health and disease prevention, and increased and sustained health seeking behaviours in targeted communities.

- By end 2012, at least four communities are mobilized in health programming.

#### **Key Activities**

Based on needs analysis undertaken, health and care activities will focus on the following four recommended components of the health programme:

- Community health, including maternal, newborn and child health
- Emergency health
- Psychosocial support
- HIV and AIDS

#### **Progress**

The secretariat and the HRCS increased efforts in the capacity strengthening of the health department with focus on the four pillars of emergency health, community health, psychosocial support and HIV and AIDS, as highlighted in the risk reduction plan for vulnerable population by the HRCS. A special emphasis has been put on the development of the national capacity to mobilize community volunteers to generate a positive impact during health emergencies as well as in routine health programmes.

The HRCS emergency health and cholera programme has divided the activities in the draft of the "Strategic Direction for Federation-Wide Cholera Preparedness and Response Activities 2012" into three areas:

- ongoing activities focusing on prevention including water and sanitation, and advocacy
- scaled up assessment and response capacity in event of outbreaks
- scaled up treatment capacity in the event of outbreaks through re-activation of cholera treatment centres (CTC), reinforcement of MSPP facilities and, in the case of a massive outbreak, the deployment or other mechanisms such as FACT and ERU's.

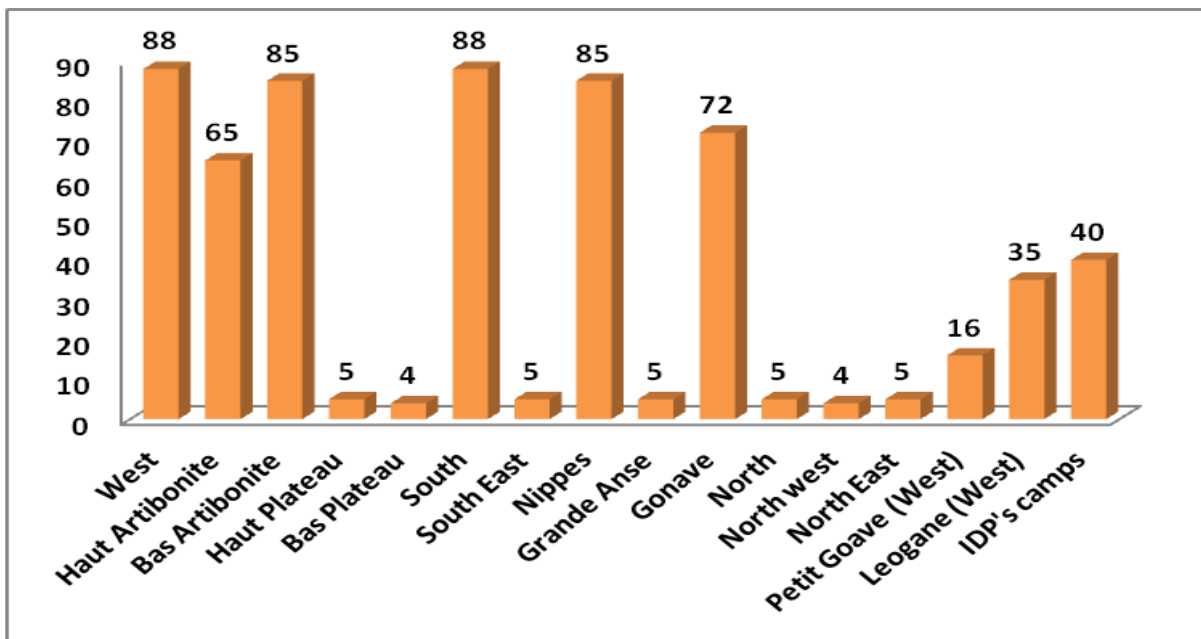
The cholera working group (HRCS, IFRC, PNSs) established in March 2012 held its first meeting on 25 April 2012 during which the Red Cross cholera contingency plan was finalized.

The health department has been raising concerns about the increase in cholera cases and diminishing resources.

On 19 June 2012, the IFRC launched an advocacy report and a press release to address the underlying causes and to make a call for action.

The National Society's emergency health team with support from the secretariat focused on cholera control activities through disease (cholera, malaria and other water-borne) surveillance and prevention. The HRCS has started to reactivate and set up cholera response teams in all its regional branches. During June 2012, the cholera response team of Bas Artibonite was reactivated.

The team has trained 40 Red Cross hygiene promoters in cholera prevention, control and surveillance, during the second quarter of 2012. A total of 607 volunteers have been trained in Epidemic Control for Volunteers (ECV) since 2011.



Number of HRCS volunteers per location trained in ECV from 2011 to June 2012

Malaria control is one of the prioritized activities of the HRCS. The National Society continued to use the “hang up and keep up” strategy to reach the population with prevention and control messages. The health team with the support of the Red Cross has distributed more than 15,000 insecticide treated bed-nets to 27,000 beneficiaries in the IDP camps of La Piste JMV, Henfrazza and Parc Maguana between February and June 2012. Other areas reached with the distribution include the most vulnerable communities in Artibonite, Port-au-Prince and Léogâne.

The HRCS played a prominent role in mobilizing communities during the first round of the nationwide expanded immunization campaign between April and May 2012. The exercise coverage, estimated at 88 per cent of the target, had 2,016 HRCS volunteers involved in the mobilization and included the visit of 256,235 households with Red Cross mobilization messages for the campaign. The Red Cross mobilized 435,991 newborns and children up to 9 years of age who were vaccinated by immunization agents of the Ministry of Public Health and Population (MSPP). With the support of the IFRC/HRCS beneficiary communications department, the health department delivered 497,958 SMS messages advising parents to take their children for vaccination.



Aqua tab (tablets)	191,930	0	404,000	0	0	0	4,200	600,130
Soap	18,928	0	11,520	0	0	0	1,008	31,456
Mosquito bed-nets	0	4,664	5,799	0	0	0	0	10,463
Condoms	0	62,085	0	0	0	0	34,568	96,653
German Red Cross (GRC)		Norwegian Red Cross (NRC)						
Haiti Red Cross Society (HRCS)		Finnish Red Cross (FRC)						
Canadian Red Cross Society (CRCS)		Italian Red Cross (IRC)						

The IFRC/HRCS health department has facilitated the establishment of an HIV and AIDS working group to coordinate all activities related to HIV and AIDS. Members of the group include managers of the PREVSIDA projects and Red Cross Movement partners including ICRC, PNS, HRCS and IFRC. The group held its first meeting in April 2012 with all partners working in the HIV sector including IFRC, ICRC, the Haiti Red Cross Society, American Red Cross, The Netherlands Red Cross and German Red Cross societies.

A working group on HIV and AIDS was formed and will meet monthly from April onward. The first meeting took place on 20 April 2012, and was attended by all the partners that are working in the HIV and AIDS sector, including the IFRC/HRCS health team, the ICRC, PNS (American Red Cross, The Netherlands Red Cross and German Red Cross) and the managers of the PREVSIDA projects. The initial meeting focused on how to better coordinate on HIV and AIDS in order to achieve an improved impact in the country.

The summary of other activities of the RCRC HIV prevention activities appears as follow:

- The HIV and AIDS team have reached 41,246 individuals including youth aged 10 to 24 years old, in and out of schools, with prevention messages. In addition, 548 employees of the HRCS, IFRC and ICRC have been reached with HIV in the workplace prevention activities.
- The team has trained 261 volunteers who are presently carrying out HIV and AIDS sensitization activities in their communities.
- The Netherlands Red Cross and the host National Society have trained more than 700 people living with HIV in epidemic control. The training was complemented with the distribution of 900 mosquito treated bed-nets to the trainees. Both National Societies have also been providing nutritional and psychological assistance to 99 orphans and vulnerable children (OVC) in Haiti.
- The HRCS's plan to assist men who have sex with men (MSM) to build their local network is in progress with the identification of 20 MSM as of the end of the second quarter of 2012.
- The HIV and AIDS team of the IFRC/HRCS has identified technical gaps that will require the introduction of new training tools to meet the need of specific sub groups. The Movement partners have agreed that there is the need to strengthen the coordination mechanism through a monthly IFRC/HRCS led supervision visit to the field.
- The psychosocial support (PS) programme of the HRCS with the technical support of the IFRC is intensifying the capacity building of the National Society in PS services. Following the training of trainers (ToT) session that was organized during the Inter American Conference in March 2012, two additional groups of volunteers (58 in total) received a 3-day session on IFRC youth mobilization methodology, youth as agents of behavioural change (YABC). In the coming month, all PS volunteers will benefit from the same training and will be able to replicate it in their respective communities.

Other capacity strengthening activities carried out during the second quarter of 2012 included:

- Nine PS volunteers continued their training of trainers to recreational activities organized in cooperation with the NGO “Sport Sans Frontières”.
- Six PS volunteers and staff participated in a training on “mobile library and use of books as a psychosocial intervention tool” facilitated by UNICEF and “Librairie Sans Frontières”. This training will be replicated for other PS volunteers and will be included in the activities planned for target beneficiaries.
- HRCS Head of the PS Unit began an advanced continuous training in mental health and psychosocial support organized and facilitated by the University of Human Sciences and the University Teluque in Canada.
- One PS staff participated in “Designing for Behavioural Change” training, which will also be extended to three other staff members during August 2012.

The HRCS PS team has been working actively in adapting and or developing tools in order to carry out guided workshops for children and adolescents as more focus and structured tool of intervention complementary to current activities.

IFRC’s YABC methodology has been selected to create the core of the guided activities for adolescents. YABC workshops initiative seeks to empower youth worldwide to take up a leadership role in positively influencing mindsets, attitudes and behaviours in their local communities towards a culture of respect for diversity, intercultural dialogue, social inclusion, equality and peace. In addition to workshops picked in the YABC methodology, the guided workshops for teenagers will include life skills (communication, self-awareness, personal hygiene and health, safe sex promotion etc). The guided workshops for adolescents, once completed, will be piloted during the summer camps.

The guided workshop for children is built on the IFRC/Save the children “Children Resilience” manual. The guided workshop for adolescents are organized around 16 structured workshops that contribute to strengthening children’s ability to cope with life challenges, including emotional distress and loss. The first training was prepared during the month of June for the first group of volunteers in July and who will pilot the guided workshops during the summer camps.

The translation of the IFRC community-based psychosocial support manual is still in the project, but there are challenges to select a qualified translation company.

The PS programme is based on an integrated coordination process of six Movement Partners (HRCS, ICRC, IFRC, Icelandic Red Cross, Italian Red Cross and Norwegian Red Cross) that are consulted regularly on strategic issues or operational challenges during the reporting period. In addition, the first meeting of the Consortium (which will include, for some sessions, additional partners supporting or participating to the programme outside of the Consortium setting) will be held early in September 2012. The agenda was drafted and approved by the Consortium partners.

Apart from staff meetings, the programme’s internal coordination mechanism is based on the involvement of volunteer focal points that represent and coordinate the volunteer PS teams. The team of the West Department meets at least once a month and up to three times a month during which challenges or operational problems are discussed and resolved.

In addition, during the reporting period, the British Red Cross confirmed 29,000 US dollars pledge to the programme for the current year while the Swedish Red Cross has committed a 212,000 US dollars pledge. Coordination with UNICEF has been continuous, with the participation of several PS staff and volunteers in training sessions coordinated by UNICEF. In addition, UNICEF gave 84,000 US dollars as in-kind donation for the programme during 2012.

Discussions have started with Haiti based on “Centre for Psycho-Trauma” to insure a referral capacity for programme beneficiaries in need of specialized and professional services. The objective is to sign a memorandum of understanding between the two institutions.

Discussions are underway with the Institute for Social Welfare and Research about the possibility of developing cooperation around the institutions, especially the children emergency placement centres, where volunteers could provide psychosocial services.

The PS team, with HRCS being a member of the National Committee on Mental Health, has been represented in all the meetings of the Mental Health and Psychosocial support (MHPSS) working group that the Ministry of Public Health and Population (MSPP) facilitates.



Children in a recreational activity at La Piste IDP camp. IFRC

During the reporting period, HRCS psychosocial volunteers have implemented activities in 11 hospitals, 7 health centres, 3 CTCs, 13 camps, 15 schools, 11 orphanages and 14 public places and community centres (including faith-based community centres).

During the same period, PS volunteers reached 28,519 beneficiaries including 8,260 children, 9,063 adolescents, 5,451 young adults (between 18 and 25), 4,790 adults and 955 elderly.

Activities organized by the PS volunteers included 279 recreational activities sessions, 45 cultural and artistic

expression sessions, 127 recreational sessions, 56 literacy sessions, 170 discussion groups, 51 awareness sessions

and 5,094 individual psychosocial first aid sessions in hospitals, health facilities and cholera treatment centres.

The PS volunteers were deployed for the second time of the year in emergency following floods in Grande Saline (Artibonite). A psychosocial needs assessment was conducted followed by the implementation of PS activities in the affected communities.

The health department will continue to implement activities planned during the third quarter of 2012 with focus on the following:

#### **Psychosocial Support Programme**

- Needs assessment analysis
- Pilot testing of guided workshop for children
- Pilot testing of guided workshop for adolescents
- Additional training in “mobile library” and literacy courses facilitation
- Summer camps

#### **CBHFA**

- Training on Behavioural Change framework
- Sensitization of new zones for the implementation of the CBHFA approach

#### **Emergency Health**

- Preparation for the upcoming second round of the mass vaccination campaign scheduled for September 2012

## 2. Disaster Risk Management

**Goal:** Reduce community-level risks and disaster impacts through enhanced disaster and risk management capacity of Haiti Red Cross Society (HRCS) at local, regional and national levels. HRCS's national role will be further enhanced through political advocacy for mainstreaming disaster risk reduction within national development and institutional policies and strategies and through scaled-up participation in the National Disaster and Risk Management System structure at all levels.

**Objective 1:** Vulnerable communities have increased knowledge, skills and resources to conduct disaster mitigation, preparedness and response activities:

- To set up and equip three community-based response teams by 31 December 2012.
- To reach three camps or communities with mitigation micro-projects by 31 December 2012.

### Key Activities

- In urban and rural environment, reinforcement or establishment of community brigades and provision of technical and practical skills to manage first response and disaster preparedness initiatives.
- Natural hazards awareness raising in general public, community leaders, teachers and students.
- Community-based health and first aid awareness actions for community leaders and school children.
- Conduct vulnerability and capacity assessment, and through this process identify where social micro-projects can be developed.

**Progress:** As the hurricane season approached, the HRCS DRM department intensified its preparedness and community sensitization efforts. During April 2012, the department produced 13 large billboards with disaster risk reduction messages, and installed them in strategic key locations at the entrance of each of the 13 regions. These focused on important measures to adopt before, during and after any storm.

The DRM team worked with the secretariat to prepare a draft of the Red Cross Movement contingency plan for the 2012 hurricane season. The draft document was shared with the Movement partners in June for their inputs before finalization and validation. In addition, during the month of May 2012, the HRCS hosted a meeting on the existing contingency plan against disasters. The meeting, attended by the IFRC, the Spanish, French, Norwegian, Swiss and Netherlands Red Cross Societies, deliberated on the preparedness and response capacities of each of the Movement partners, PNSs and their respective regions, where they planned to intervene and the contact person for each PNS, as well as the need for the Red Cross intervention plan to cover the communes.

The HRCS DRM and health departments had a meeting with the Metropolitan West regional branch, to work on a joint community-based health plan for the commune of Tabarre, in order to contribute to improving the health of the vulnerable population in the commune. Community leaders and volunteers were selected to facilitate the development of the plan.

The HRCS continued to collaborate with government agencies and other humanitarian actors in disaster early warning system. In June, the National Society participated in a meeting attended by the Directorate of Civil Protection (DPC), OCHA and UNDP, and a consultant on the validation of the methodology for the early warning system. The National Society also attended an experience-sharing meeting on community response in an urban context. Other stakeholders at the meeting include Cooperazione Internazionale (COOPI), CONCERN and the French Red Cross.

**Objective 2:** Enhanced institutional Haiti Red Cross Society capacity for risk and disaster management at national and community levels.

- To train 275 volunteers on DRM subjects by 31 December 2012.
- Thirteen (13) HRCS regional branches have strengthened their disaster and risk management capacity by 31 December 2012.

### Key Activities

Conduct nation-wide trainings aimed at building the capacity of HRCS volunteers to initiate and implem community-based risk reduction activities, and enable volunteers to respond to emergencies r efficiently and effectively.

- Strengthen the service delivery capacity of the HRCS National Training Centre.
- Conduct emergency simulation exercises.

### Progress

The HRCS DRM department in collaboration with the HRCS Training Centre organized a training on shelter for 20 participants from the 13 regional branches in April 2012. The training focused on strengthening the knowledge of participants on the use of emergency shelter tool kits and emergency shelter construction techniques.

Staff and volunteers from the department participated in a training session on emergency response teams (ERT) organized by the IFRC with the PNS in May 2012. Participants were able to enhance their knowledge about the mobilization, activation and deployment of ERTs.

The HRCS Training Centre has finalized all arrangement to begin the expansion work at the training, with construction work expected to start during the third quarter. In addition, the centre continued to work toward its decentralization process, which aimed to bring services closer to the communities by setting up offices in some regional branches.

The centre organized and facilitated different training sessions on disaster risk management for internal and external Movement partners during the second quarter as summarized in the table below.

**Table of training sessions carried out by the HRCS Training Centre between April and June 2012**

Month	Module	# of participants	Organization	Location
April 2012	Tè Malè	11	ASB	Petit Goâve
	Community first aid	31	ConCern	Martissant
	Epidemic Control for Volunteers (ECV)	25		Anse-à-Galet
	Community first aid	24	COOPI	Torcel
	ECV	22	ConCern	Martissant
	ECV	6	COOPI	Salon CDF
	Tè Malè	8	CRAI (Nippes)	Camp de base
	Lekol ansekirite	23	Spanish Red Cross	Léogane
	Community first aid	22	French Red Cross	Péguy-Ville
	Emergency shelter management	19	French Red Cross	Deschapelles

May 2012	Early Warning System (EWS)	28	German Red Cross	Léogane
	Emergency shelter management	24	Canadian Red Cross	Jacmel
	Emergency first aid (32 hours module)	23	Caritas Suisse	Pétion-Ville
	Emergency shelter management	17	COOPI	Torcel
	Tè Malè		UNICEF	Pétion-Ville
	Emergency first aid (32 hours module)	25	Canadian Red Cross	Mirebalais
	Emergency first aid (32 hours module)	24	Canadian Red Cross	Jacmel
	First aid (32 hours module)	21	Canadian Red Cross	Le Plaza
	First aid (32 hours module)	25	Canadian Red Cross	Le Plaza
June 2012	First aid (32 hours module)	10	Canadian Red Cross	Cap-Haitien
	First aid (32 hours module)	26	Canadian Red Cross	Aquin (Sud)
	First aid (32 hours module)	24	Canadian Red Cross	Gonaïves
	First aid (32 hours module)	14	Canadian Red Cross	Le Plaza
	Lekol Ansekirite	30	German Red Cross	Petit-Trou

The department also participated in a school simulation exercise with the DPC, fire fighters, and the Ministry of Public Health and Population in April 2012. The Red Cross and other participating agencies displayed their capacities in rescue and evacuation from debris during the exercise. In addition, the HRCS organized a simulation exercise on hurricane at the base camp, and in the South-East and Nippes departments in June. The Focused on information collation from the field, data analysis, logistics, finance and administrative support, and health intervention including psychosocial support and ambulance service, the exercise created an opportunity for the National Society to identify areas that needed improvement before hurricane season.

The DRM team facilitated a training on door-to-door sensitization for environmental risks, organized for 18 participants from the INA programme of the IFRC secretariat. Participants were trained on the best approaches to sensitize the population in risks reductions. Other topics discussed during the 2-day training include door-to-door sensitization method and the early warning system validated by the DPC.

**Objective 3:** Increased HRCS coordination and advocacy for comprehensive disaster and risk management within national policies and institutional framework.

#### Key Activities

- Intensify the participation of the HRCS within the national system structures in the elaboration of policies about the legal framework and the recovery strategy.

#### Progress

The HRCS and the French Red Cross met in early April to deliberate on projects funding. The meeting addressed consultancy for projects and the involvement of the branch disaster committees in funding projects in rural and urban areas including camps. The Red Cross planned to meet with UNDP, OXFAM and DPC regarding this subject.

The State authority responsible for national disaster and risk management (SPGRD) and the HRCS met regarding the community early warning system methodology presented to the thematic committee of the SNGRD in April.

The DRM department presented the report of activities of the *Kouri Di Vwazen'w* (KDV) project for 2011 through mid-year 2012 to its partners including ECHO, UNESCO and PNSs in June 2012. KDV activities reach 140

communes in the country and the National Society plans to increase activities, as funding is available. Learning from 2011 activities, the HRCS local and regional branches plan to work closely with PNSs in 2012. The KDV is an information dissemination strategy where neighbours inform each other on steps to take before, during and following a disaster.

### 3. Ambulance Services

**Goal: To strengthen Haiti Red Cross Society capacity to respond to natural disasters through its national ambulance service.**

**Objective 1: Capacity building:** The Haiti Red Cross Society ambulance service is well staffed with trained personnel, volunteers, equipment and tools.

**Key Programme Activities:**

- First aid training and refresher workshop for ambulance volunteers.
- Training of medical doctors in classification and stabilization of disaster-affected people.

**Objective 2: Tool development:** The Haiti Red Cross Society ambulance service has the necessary tools and equipment for emergency response.

**Key Programme Activities:**

- Acquisition of first aid material and equipment.
- Acquisition of ambulances.
- Construction of simulation site.

**Objective 3: Coordination:** The HRCS ambulance service is well integrated in coordination mechanisms of the Red Cross and Red Crescent and external partners such as the Haitian state, particularly the Ministry of Public Health and the Civil Protection.

**Key Programme Activities**

- Attend/conduct regular meetings among partners.
- Participate in national clusters and other coordination mechanisms

## An Enabling Environment: Support to Programmes

### a. Movement coordination

The Haiti Learning Conference organized by the secretariat team in Haiti brought together over 100 participants from the Red Cross Red Crescent Movement including 12 PNSs, the Haiti Red Cross Society and the secretariat team from the Americas zone office, who represented senior leadership, management and field practitioners. It was a good time to stop and reflect on how well the Movement is learning from Haiti and for Haiti. The work leading up to the event, as well as the constructive and active engagement during the conference contributed to the achievement of the outcomes which include:

- An identification of key learning and areas needing more effort across myriad programme areas and functions such as shelter, relief, Movement coordination, beneficiary communications, violence prevention, health, water and sanitation, urban recovery, organizational development and capacity building, human resources, accountability to beneficiaries and humanitarian diplomacy.

- Development of a solid direction for organizational learning based in part on the strengths, weaknesses, opportunities and threats (SWOT), an evaluation scorecard (assessing RCRC Haiti evaluation reports to date) and other inputs.
- Development of a Haiti evaluation framework; in the coming months, this work will be continued with the membership.
- Development of a Haiti learning strategy and agenda.
- Development of an initial framework for an IFRC global learning strategy and agenda.

#### **b. Beneficiary communications**

**Objective 1:** Provide Haitians with useful, practical information they can use in their everyday lives through regular integrated campaigns, using SMS, radio, posters and sound truck.

##### **Progress**

The two main features of the beneficiary communications work in Haiti from April to June 2012 have been support for the government's vaccination drive and the launch of the *Telefon KwaWouj* interactive information line.

The vaccination campaign, aimed at targeting polio and other childhood diseases, took place in April, with the Red Cross role being to provide support awareness of the campaign. In the build up to the vaccinations more than half a million Red Cross SMS were sent, four radio shows were broadcasted explaining and promoting the vaccination drive, and the sound-truck visited almost 60 sites playing messages to encourage parents to take their children for vaccination.

The *Telefon KwaWouj* launched on 28 May is capable of providing recorded information and capturing the opinions of callers through surveys completed through the telephone keypad. Supported by a promotional campaign including billboard, street-banners, radio and TV advertising alongside promotion through Red Cross channels including SMS, the sound-truck and radio show, the new system also attracted media interest from radio, television and print media. By 30 June, the free 733 number had received more than 187,000 calls including more than 16,500 callers who completed surveys covering shelter, livelihoods and violence prevention.

**Objective 2:** Beneficiary communications will support operational teams to ensure that people know about the Red Cross services and projects that affect them, particularly in relation to the transition of services from camps to communities.

**Progress:** The beneficiary communications department has been working closely with the INA team to help their operational work.

For camp decongestion, reprints and redesigns of the leaflet for families explaining what shelter options the Red Cross can help provide have been distributed, alongside support from the Noula telephone line. The telephone support has enabled families to have access to more information and make decisions on which options they will choose following the Red Cross team's first visit to register camp residents, meaning that on the team's second visit most residents have already chosen which option they wish to take.

The beneficiary communications department has also worked closely with the INA community teams, hosting a workshop to share ideas and increase the understanding of our respective roles, and developing a leaflet and poster to explain the INA concept to communities where the programme will be working.

The New *Telefon KwaWouj* system is also conducting surveys on shelter and livelihoods to establish people's satisfaction with the services they have received.

**Objective 3:** Beneficiary communications will seek to improve 2-way communication and accountability.

**Progress:** The *Telefon KwaWouj* line is now in place and receives thousands of calls daily. This system enables people to access vital health and disaster preparedness information, as well as information on Red Cross services. The system is also able to conduct surveys with callers using the telephone keypad to select answers from a menu of options.

When launched, the system included surveys on shelter, livelihoods and violence prevention; in addition, a fourth survey on caller satisfaction with the telephone system has been added. Feedback from the telephone surveys will be used to inform operational departments of the effectiveness of, and satisfaction with, the services they have been providing. This in turn enables improvements to programme design and delivery.

**Objective 4:** Beneficiary communications will work closely with the Haiti Red Cross Society communications team to develop sustainability plans for key beneficiary communications approaches and tools.

**Progress:** The sustainability plan, which outlines the handover of the beneficiary communications team from IFRC to the Haiti Red Cross Society, has now reached its final draft and is awaiting final approval from senior Haiti Red Cross Society and IFRC representatives.

Regular meetings between the beneficiary communications and Haiti Red Cross Society communications teams continues, and this team work is vital for the continued operation of the twice-a-week radio show, which is jointly hosted by the Haiti Red Cross and the IFRC, including regular volunteers who are being trained in radio presentation and production techniques.

Joint work over the reporting period has also included support for the vaccination campaign, partnership to finalize information on the *Telefon KwaWouj* system, cholera and TB awareness campaigns and celebrations to mark the 80 anniversary of the Haiti Red Cross Society.

#### **Overview of communications beneficiary data**

<b>Beneficiary Communications January 2010 to 30 June 2012</b>	
SMS DELIVERED	85 million
PEOPLE REACHED BY SMS	1.3 million
RADIO HOURS	157 hours
CALLS ANSWERED ON RADIO SHOW (from 1 January 2011)	1,374
CAMPS REACHED BY SOUND-TRUCK	1,178
CALLS TO RED CROSS INFO LINE (discontinued January 2012)	1.1 million
CALLS TO NOULA QUESTIONS & COMPLAINTS LINE	6,344
CALLS TO TELEFON KWAWOUJ INFO LINE (from June 2012)	187,061
SURVEYS COMPLETED ON TELEFON KWAWOUJ	16,599

## c. Support Services

### Communications

During the reporting period, several communication pieces were written and shared with internal and external audiences: decongestion of Mais Gaté and Dadadou camps, a brief on the issue of violence, vaccination campaign, cholera advocacy report and case study at Hinfrasa camp.

On the media side, IFRC received the visit of AP wire service concerning the purchasing of the base-camp site and the future plans for the land. The IFRC country representative in Haiti gave an interview to the reporter.

A cholera advocacy report was launched on 19 June. It had the multiple objectives: to raise awareness of the current situation and of the needs among key stakeholders in Haiti including the government; to highlight the need for more funds; to ensure IFRC is proactive in its communications around the increased risk; is positioned as an organization which takes strong, credible stands on this issue; and listens and responds to the needs of the most vulnerable. French and English press releases on the cholera report were sent from the Panama zone, Geneva and Haiti to media outlets. The health delegate gave an interview to Reuters TV. Key messages and Q&A's were shared with the communications working group.

As part of the Learning Conference, communications produced a power point presentation and finalized the INA/shelter video including scripts, voiceovers and subtitles.

Communications has provided support to the Haiti Red Cross Society executive director for a presentation at Rio +20. It has facilitated the French and English IMPACT media training.

### Finance & supplementary services

The IFRC finance team in Haiti organized finance management training for national staff from 19 to 25 June, with facilitation by two finance analysts from the Americas zone office. In addition, a budget holder training for 20 people was held at the Base Camp from 27 to 29 June 2012.

The finance department has ensured that working advances balances have been further reduced. Programme managers have reduced their balances by 32 per cent and national staff by 59 per cent.

### Logistics

The IFRC logistics department has begun the process of closing down the Woodstock Warehouse, and consolidating all materials storage at Barbancourt Warehouse and Base Camp (which is one of the major logistics activities). The department is setting up the land and rub halls for the transition phase of Woodstock to Base Camp. Some of the items that the IFRC had in Barbancourt have been transferred to Base Camp. However, Barbancourt has continued operations with stock from INA, health, logistics, and disaster preparedness.

The procurement section worked on 83 logistics requisitions (LR) during the reporting period as follows: 30 Administration/Base Camp, 12 Logistics/Fleet, 9 IT Telecom, 8 Water and sanitation, 15 INA, 3 TMC, 2 Security, 2 Health, 1 Shelter, 1 Communication.

General fleet management in this period prepared the logistics budget, met with RMA international marketing manager to clarify workshop major issues in vehicle services, organized the fleet management training, prepared the annual fleet evaluation, conducted the case study for the fleet exit strategy, and met with programmes teams to adjust fleet requirements based on the current ongoing INA, health and DRM programmes.

The IFRC fleet team supported the PNSs and HRCS in the transportation of relief goods and provided continuous support to the DINEPA project, providing technical advice on the final project phase. The team carried out

continuous goods dispatch services for the programmes and PNSs. The secretariat logistics team has also supported the HRCS through technical advice to the HRCS aquatic ambulance planning and conversion of rescue vehicles.

During the reporting period, the light fleet has transported 14,553 passengers to and from various sites in Port-au-Prince and in the countryside. The fleet team has trained 37 drivers (16 in skill and ability evaluation, 2 new drivers for the Canadian Red Cross Society, and 1 driver from the HRCS, and 18 IFRC were trained in off-road driving). The finalization of the interim log base document is planned for July 2012. Plans are ongoing to re-export nine vehicles to Dubai as part of the re-export strategy.

### **Base Camp**

The IFRC is investing in a power grid for the Base Camp, in order to reduce costs on electricity as reported during the first quarter. The Base Camp management has begun discussions with the Haiti Electricity Authority (EDH) on the possibility of connecting the Base Camp to the national grid.

Base Camp management has hired a carpentry teacher in order to provide trainings every Saturday for the carpentry team and some of the general maintenance in Base Camp. Training is scheduled to start for 40 trainees during July 2012.

### **Human resources (HR)**

The IFRC HR department in Haiti organized the fifth and sixth IMPACT courses (French and English) for Haiti, from the 11 to 22 June 2012, with 44 participants in attendance. The department organized two training sessions on the code of conduct and investigation procedures in June, which a senior officer from Geneva facilitated. IFRC national staff HR Policy, as well as all tools and templates for the management of code of conduct for national staff were reviewed. Revised disciplinary procedures for national staff will be shared with all managers.

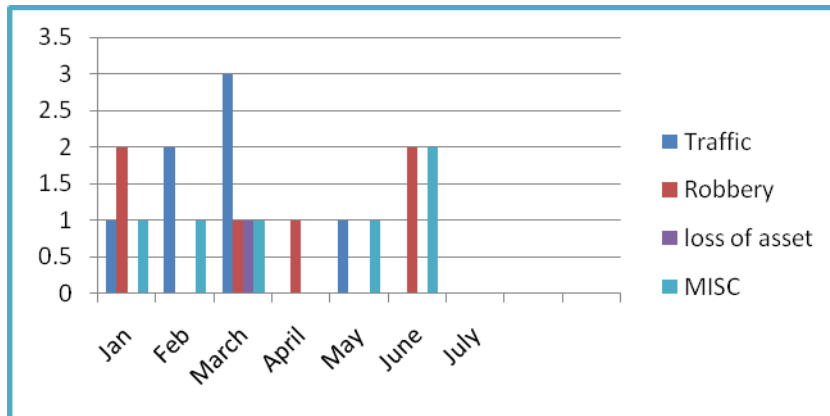
HR has rolled out language classes (French, English and Creole) for delegates and national staff. Provisional occasional workers (formerly daily workers) guidelines were finalized and shared with managers and Red Cross partners. The rest and relaxation policy for international staff has been reviewed and changes will be effective July 2012. Future development plans for the staff health clinic were presented to the HRCS leadership, MOC and the Steering Committee. The IFRC human resources team in Haiti has reviewed the job descriptions and reclassified positions of international staff.

The head of the human resources department in Geneva and the senior officer for remuneration and benefits visited Haiti in May 2012 to familiarize with HR issues in Haiti.

### **Security**

The IFRC security department continued to ensure security of Red Cross personnel and property in Haiti. The team shared weekly security updates with IFRC personnel in country, Red Cross partners, the zone office in Panama and the secretariat office in Geneva. The team continued to send security alerts to delegates and other IFRC personnel through SMS. New delegates to Haiti received security briefings from the department upon arrival. The security team continued to conduct briefing and training sessions for newly recruited international and national staff.

**IFRC reported security incidents from January to June 2012**



## Contact information

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

- **In Haiti**

- Alexandre Claudon, country representative for Haiti; e-mail: [alexandre.claudon@ifrc.org](mailto:alexandre.claudon@ifrc.org)

- **In Panama**

- Lorenzo Violante, Haiti support team coordinator; phone: (507) 380 0250; email: [lorenzo.violante@ifrc.org](mailto:lorenzo.violante@ifrc.org)
- Douglas Baquero, logistics mobilization coordinator phone (507) 316 1001; fax (507) 316 1082; e-mail: [douglas.baquero@ifrc.org](mailto:douglas.baquero@ifrc.org)
- Sandra Lombardo, resource mobilization senior officer; phone: (507) 380 0250; email: [sandra.lombardo@ifrc.org](mailto:sandra.lombardo@ifrc.org)

- **In Geneva**

- Christine South, operations support, phone: +41.22.730.4529, fax: +41.22.733.0395; email: [christine.south@ifrc.org](mailto:christine.south@ifrc.org)

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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 (NGOs) in Disaster Relief and the Humanitarian Charter and Minimum Standards in Disaster 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.

[www.ifrc.org](http://www.ifrc.org)

**Saving lives, changing minds.**



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

1. Save lives, protect livelihoods, and strengthen recovery from disaster and crises.
  2. Enable healthy and safe living.
  3. Promote social inclusion and a culture of non-violence and peace.
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