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DREF Operation Update no. 1

Colombia: Hurricane Iota

 International Federation
of Red Cross and Red Crescent Societies

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| DREF n° MDRCO017 | |
| Operation update n° 1 Date of issue: 26 February 2021 | Timeframe covered by this update: 20 November 2020 to 15 February 2021. |
| Operation start date: 20 November 2020 | Operation end date: 31 March 2021. (One-month extension with this Operation Update). Operation timeframe: 4 months |
| DREF allocated: 490,386 Swiss francs (CHF) | N° of people being assisted: 12,000 people (3,000 families) |
| Presence of the host National Society: The Colombian Red Cross Society (CRCS) has 27,076 volunteers, 1,250 employees and 236 local units (32 branches, 84 municipal units and 120 support groups). | |
| Red Cross Red Crescent Movement partners currently actively involved in the operation: International Federation of Red Cross and Red Crescent Societies (IFRC), International Committee of the Red Cross (ICRC), American Red Cross, Danish Red Cross, German Red Cross and Spanish Red Cross. | |
| Other partner organizations actively involved in the operation: National Unit for Risk and Disaster Management (UNGRD), Firefighters, Colombian Civil Defence, Colombian Armed Forces (Navy and Air Force) and National Police. | |

This operation update is issued in response to the non-cost one-month extension to this operation. The **new end date is 31 March 2021**. The Colombia Red Cross Society (CRCS) extends the implementation time due lengthy procurement processes that have affected the distribution of kits stipulated in the Emergency Plan of Action, as well as the modification of the planned livelihoods and basic needs actions.

With regards to livelihoods and basic needs, the situation in the field had changed. In the initial plan, 800 food kits were to be distributed. On the island of Providencia, the National Unit for Risk and Disaster Management (UNGRD) is coordinating the response and expressly indicated that it would provide in-kind and voucher-based food assistance for the first three months after the hurricane hit. This operation's funds planned for food kits were reallocated to 321 additional Multipurpose Cash Transfers based on vulnerability criteria (reaching a total of 1,221 cash-based intervention for the whole operation). This cash transfer will allow the inhabitants of Providencia to procure local produce and buy from their neighbours and purchase other first necessity goods not covered by the government's assistance.

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

A. SITUATION ANALYSIS

Description of the disaster

In November 2020, two hurricanes (Eta and Iota) evolved into category 4 and 5 storms. They significantly affected the Colombian regions of San Andres, Providencia and Santa Catalina, Bolívar, Guajira, Atlántico, Magdalena and Sucre. The number and strength of hurricanes this year is due to various causes: the absence of an El Niño event, increasing ocean temperatures, changing atmospheric patterns, and another climate change-associated phenomenon. By the end of 2020, 228,000 people claimed to be affected by floods, hurricane-force winds, and landslides in 11 departments of the country.

Only within the island of Providencia, 95 per cent of the population was affected, between 1,900 and 2,000 houses were destroyed, water and sanitation infrastructure were weakened, health and education installations were left unsafe for use, and storehouses and medical equipment were damaged. This created an increasing social and economic impact on the island.

As of February 2021, the inhabitants of San Andrés and Providencia islands still require humanitarian support. Despite the government and donors' response, the lack of storage space is a challenge for food supplies on the island. The historical needs related to formal water and sanitation infrastructure have become evident, and local and national authorities are employing this opportunity to devise sustainable solutions.

Summary of current response

Overview of Host National Society

The Colombian Government activated the National System for Disaster Risk Management (SNGRD, in Spanish), of which the Colombian Red Cross Society (CRCS) is an active member.

During the hurricane season and the rainy season, the Colombian Red Cross Society activated its contingency plan, leaving all its branches on permanent alert. Since Hurricane Iota, the Colombian Red Cross Society established a crisis room, continually monitoring the operation, mobilizing personnel and equipment from the different branches, providing support to San Andres, Providencia, Santa Catalina and Bolívar. The Colombian Red Cross Society is part of the National Response System of Colombia (UNGRD in Spanish), which has implemented response actions of shelter, water, sanitation and hygiene, livelihoods, health and inclusion and protection.

As soon as the storm made landfall, on 16 November 2020, a team of 15 professionals in emergency management, medicine, psychology, nursing, logistics, telecommunications, information, and WASH were mobilized to San Andrés via air and land. A second response team was deployed on 18 November.

In terms of infrastructure, the CRCS established a field hospital and deployed three water purification plants. This has resulted in more than 2,122 people reached with health services (812 health consultations, 248 mental health consultations and 1,062 activities of promotion and prevention of health) and 45,000 liters per day of clean water for the municipal aqueduct and 10,000 liters per day for the field hospital. The CRCS has offered logistical planning services via implementing a communication network for restoring Family Links and installing a Very High-Frequency network in San Andrés.

Finally, the livelihood unit of the CRCS carried a rapid response assessment in Providencia, together with the local authorities for tourism and agriculture. The assessment has been the basis for the planning and implementing cash-and voucher assistance (CVA) throughout January and February 2021.

As of 31 January 2021, the operation has 32 people on the ground, which are distributed as follows: 3 WASH volunteers, 11 in health, 11 for logistics, 1 in telematics, 2 in communications, 2 local coordinators and 1 liaison in San Andres. In the first 60 days of the operation, the following actions have been achieved:

| | | | |
|---|--|---|---|
|  719 Health services |  3 Water treatment plants in operation |  379 Health Promotion and Prevention Interventions |  2 Repeaters installed |
|  163 Psychological Services |  4.396.080 Liters of potable water |  49 Institutional visits 3.059 RFL requests received | 27 VHF portable radios 2 HF Radios 2 Satellite phones 2 Cellular internet modems |

Overview of Red Cross Red Crescent Movement

From 25 November to 31 December 2020, the International Committee of the Red Cross (ICRC) provided support to the RFL, Telecommunications, Logistics, and Health areas.

The American Red Cross, German Red Cross, Spanish Red Cross, and Norwegian Red Cross have been supporting the emergency response and recovery of affected communities in emergency humanitarian assistance, RFL, health, livelihoods, WASH, and communications.

The IFRC, through its program office in Colombia and the cluster for the Andean countries in Peru, provides continual support and coordinates with the National Society for this DREF operation. The technical teams in Colombia from the

IFRC Emergency Appeal operations (Population Movement- MDRCO014 and COVID-19) have been accompanying the CRCS. The current DREF operation complements the IFRC Emergency Appeal operation for the impact of these hurricanes in the region: Eta and Iota ([MDR43007](#)).

Overview of non-RCRC actors

The UNGRD has destined more than 1,300 million Colombian pesos (Approx. 325,443 CHF) to the Islands of San Andrés y Providencia. In December 2020, the UNGRD conducted the damage and needs assessment ([Evaluación de Daños y Necesidades- EDAN](#)).

The United Nations is present through multiple agencies. The Pan-American Health Organization has provided medical assistance, deployed an emergency medical team, and distributed hygiene kits. UN Women has also been active, distributing dignity kits. Finally, UNHCR (UN High Commissioner for Refugees) has provided tents and shelters. International and local non-governmental organisations also are active on the ground. Save the Children has developed actions in safe spaces with children and adolescents in conjunction with the ICBF (Colombian Institute for Family Welfare). Doctors without Borders and the Aerial Patrol of Antioquia, and the San Rafael Boat Hospital have deployed teams on-site to provide health services. Action against Hunger has provided WASH materials as well as COVID-prevention kits. The NGO World Central Kitchen distributed hot meals to the local population of Providencia between November 2020 and February 2021.

Needs analysis and scenario planning

Needs analysis

Shelter

According to the Damage Assessment and Needs Analysis carried out by the National Society's first team to arrive on the island of Providencia, strong winds destroyed approximately 1,200 homes, and about 400 are damaged and are suitable for repair. Community shelters were established, and the UNGRD carried out the distribution of tents. It has been possible to reduce the number of people in habitability conditions in unsuitable spaces thanks to the complementary actions of government actions. For the reconstruction, process priority has been given to rebuilding houses and roofs.

The distribution of humanitarian aid by the different humanitarian actors has made it possible to reduce the needs in terms of habitability, improving living conditions both in the territory of San Andres and Providencia and in Bolívar, which is why it should focus on the distribution of assistance in shelter and complementary elements such as awnings, flashlights, radios and mats.

The UNGRD had provided 4,500 food kits to 2,168 families (total estimated population in Providencia). And it is scheduled to give 400,000 Colombian pesos (approximately 101 Swiss francs) to the same 2,168 families. For these

reasons, there is a technical inclination of the CRCS to adapt its shelter response, transitioning from food kits (30,000 Swiss francs in food kits) to multi-purpose cash transfers (the same 30,000 Swiss francs for 321 families).

Livelihoods

The sudden halt in economic activities is aggravated by the impact of COVID-19 on tourism and commerce. People had very few mechanisms to cope with the economic downturn. The CRCS has identified three critical sectors and areas where livelihoods are especially lacking.

- **Tourism:** The main touristic zone is located in the Agua Dulce area, where the main hotels, native inns, diving centres, and beaches are concentrated.
- **Trade:** Although small shops can be found throughout the island, commerce and services are located to a greater extent in the Central Zone and Pueblo Viejo. There is a strong affectation in two supermarkets, vehicle rentals (motorcycles and buggies), hardware stores, and other businesses.
- **Agriculture:** Plots between ½ to 1 hectare are located throughout the island. According to the Ministry of Agriculture, the valley area between mountains has a high agricultural vocation, with several freshwater aquifers optimal for planting. Due to the closure of roads caused by falling trees, it has not been possible to get there.

Health

The heavy rains led to floods and landslides, with the consequent loss of assets, which increase the populations' vulnerabilities, facilitating the appearance of respiratory diseases, skin diseases, respiratory infections, and acute diarrheal disease. In addition to the Emergency Medical Teams' care, epidemiological monitoring and surveillance are required in the affected areas. The displacement of communities and the generation of temporary shelter could increase respiratory diseases and COVID-19.

The following specific effects and challenges were identified:

- The destruction of the Providencia hospital and the San Andrés hospital's low capacity increase the needs for health care and the continuity of the specific promotion and protection programs for the most vulnerable groups.
- Transition of the operation of the hospital from a private company to a state social company.
- The expansion of COVID-19 continues and the potential risk of the population with chronic diseases.
- Chronic diseases not treated on time are aggravated, deteriorating the health conditions of the affected population. At the time of this update, relevant pathologies include hypertension, diabetes, and obesity.
- The affected population presents symptoms of post-traumatic stress.
- Diseases derived from difficulties in accessing drinking water, the deterioration of basic sanitation, and vectors' appearance.

Water, Sanitation and Hygiene

The island of Providencia has historically been one of the areas of Colombia with the most significant challenges to access drinking water and basic sanitation, and disposal of solid waste. The recent emergency generated by Hurricane Iota left a 98 per cent impact on the Archipelago's infrastructure, which represents a major impact on the municipal equipment systems that the population conventionally used to access essential services. In addition to the damage to home connections and internal piping, structures such as bathrooms, showers, dishwashers, laundries, sinks, and toilets in the homes pose a risk to the island population.

All of the above implies an increase in health risks due to dehydration, problems in the management of excreta, the spread of vectors, difficulty in implementing hygiene habits, and a high possibility of contracting diseases associated with the lack of sanitation and water suitable for human consumption.

In the quest to guarantee access to drinking water to the island community, it is a priority to evaluate the need to prolong the Water and Sanitation actions within the operation framework until local public agencies restore the service.

Operation Risk Assessment

The operation has the following risks:

COVID-19 pandemic: The implementation of the National Society's actions within the framework of this DREF, considers the risks related to the current COVID-19 pandemic and is aligned with the IFRC's global emergency appeal that supports National Societies to provide assistance and support to communities affected or at risk of being affected by the COVID-19 pandemic. This means that the National Society will ensure, even while responding to the Hurricane Iota emergency, that prevention measures against COVID-19 are followed, in line with the regional action plan and its national COVID-19 country plan.

Hurricane season and winter period: The hurricane season ended on 30 November 2020. However, there is a risk of cyclonic formations that could affect the communities impacted by Hurricane Iota and new areas. Likewise, Colombia has been going through the rainy season and winter period, which the La Niña phenomenon could extend.

The banking sector in the Island has collapsed, making cash and voucher assistance (CVA) a further challenge. Moreover, the provision of food and materials to the island is limited. So even when cash is available, the possibility of acquiring all needed inputs to restore living conditions to normality is scarce.

Considering that the Water Treatment Plants' operation suitable for human consumption is located on an island, their mobilization and the various equipment that compose them have been a challenge. The supply of inputs, materials, and spare parts for their operation and maintenance. However, the availability of fresh water on the Island comes from a natural dam that accumulates rainwater. In the dry season, these reserves are affected, and therefore a saving strategy is maintained.

Target population

The Colombian Red Cross Society, with the actions it has been carrying out for the attention of the communities affected by the passage of Hurricane Iota, is implementing this operation to reach at least 3,000 families (12,000 people) who are in the areas affected by the increase in intensity and frequency of rainfall in the departments of Bolívar and San Andrés. The prioritization of communities and households to be reached is being carried out in coordination with the SNGRD management and coordination bodies to generate synergies and complementarity of humanitarian assistance.

| Department | Zone | Families | People |
|------------------------|----------------------------|----------|--------|
| San Andrés Archipelago | San Andrés and Providencia | 1,000 | 4,000 |
| Bolívar | Cartagena | 2,000 | 8,000 |
| Total | | 3,000 | 12,000 |

Criteria in the application of monetary transfers that will go to families affected by Hurricane Iota, prioritizing families that are characterized by:

- Households with children under 5 years of age.
- Households with pregnant women.
- Households with people with disabilities.
- Households with two or more dependents per adult of working age and suitable for work (dependency ratio of 2 or more); those under 18 and over 60 and people with different abilities are dependent
- Households classified in socioeconomic strata 0, 1 and 2
- Homes located in high-risk areas due to natural phenomena other than the generating event
- Households with adults, single heads of household with minors in their care
- Households that are assuming negative survival strategies

B. OPERATIONAL STRATEGY

Proposed strategy

Operational objective

Provide emergency care to 3,000 families (12,000 people) affected by Hurricane Iota in the departments of Bolívar and San Andrés. Through the implementation of humanitarian assistance in the sectors of health, water, sanitation and hygiene, livelihoods, shelter, protection, gender and inclusion and restoring family links. This non-cost extension is based upon a new context assessment, and the operational results achieved so far. This assessment forces the CRCS and IFRC team in Colombia to revisit the operation in the following way:

Shelter

Achievements

- Shelters: 1,200 people have been prioritized to receive a night kit (hammock, tent, cover).
- Household items have been bought and (kitchen sets) are ready to be distributed to 400 families.

New goals

- **The original strategy of delivering food kits to 900 families has been updated to providing multi-purpose cash transfers (321 families in Providencia). This is explained above (page 3).**

Health

Achievements

- Health promotion: 3,000 families are expected to receive information on disease prevention and health care.
- Medical care and first aid: at least 1,600 people will receive medical and first aid care, through the Emergency Medical Team activation. 200 disinfection kits are used.
- Psychological support: 3,000 families expected to receive psychological support. 200 first responders have emotional aid by the support strategy.

Water, Sanitation, and Hygiene

Achievements

- Water: Mobilization of 3 water treatment plants, distribution of twenty (20) 1,200-liter water reservoirs and 1,873 families reached with water solutions in addition to the support of 6 water tanks for sheltered families.
- Hygiene: 3,000 families expected to receive information on the promotion of hygiene and water safety, 1,200 hygiene kits are being distributed to affected families. Additionally, the shelters receive support by receiving 6 hydration points.

Livelihoods

Achievements

- Livelihoods: 900 families have been prioritized to receive the multipurpose cash transfer program in Bolivar.
- Cash feasibility study completed and used to target families.

New goals

- **Increase the multi-purpose cash response to 321 families in Providencia.**

Protection, Gender and Inclusion

Achievements

- Protection: Guidance for assistance and accompaniment of families at risk of violence (including gender-based violence) to 90 people.
- RFL: Connection and contact service for 3,086 people.

Additional considerations

- The Colombian Red Cross Society, with the support of the volunteers mobilized to the islands since the days following the passage of Hurricane Iota, constantly monitor and verify from the different lines of action such as

livelihoods, water, sanitation and hygiene, health and psychosocial care, in order to identify the day-to-day needs that may arise in the population of the island of Providencia, in this way the Colombian Red Cross Society implements the actions according to the needs identified by the staff.

- With the continuous participation in the unified Command Post, the Colombian Red Cross Society in coordination with the SNGRD defined the lines of action. Since the beginning of the emergency, attention includes distribution of safe water, psychosocial care, health promotion and prevention, RFL, reception and dispatch of emergency humanitarian assistance, livelihoods and logistical support to the SNGRD.
- The Colombian Red Cross Society carried out an initial assessment for the implementation of the livelihoods program. This allowed to identify that the greatest degrees of affectation occurred in the Vocación de la Isla, whose economy is based on tourism and the related services.
- The National Society has had permanent participation in actions aimed at building the capacities of the population, by participating in the different working groups led by national and departmental public entities that seek strategies that allow the different communities stability in their economic activities.
- The Colombian Red Cross Society, in monitoring the results and conclusions of the PMUs in coordination with UNGRD and the humanitarian aid management strategy of SNGRD, validates the decision not to mobilize or deliver food aid on the island, this because the aid collections and the kits provided by the government are sufficient to cover the needs of Providencia, therefore it is established that this line to be directed to Cash Transfers or Livelihoods.¹.

C. DETAILED OPERATIONAL PLAN

|  | <p>Shelter</p> <p>People reached: 0</p> | | | | | | | | | |
|---|---|--------|--------|--------|--|-------|---|--|-------|---|
| <p>Shelter Outcome 1: Communities in disaster and crisis affected areas restore and strengthen their safety, well-being and long-term resilience through shelter and settlement solutions</p> | | | | | | | | | | |
| Indicators: | <table border="1" style="width: 100%;"> <thead> <tr> <th style="width: 70%;"></th> <th style="width: 15%;">Target</th> <th style="width: 15%;">Actual</th> </tr> </thead> <tbody> <tr> <td># households provided with emergency shelter and settlement assistance</td> <td style="text-align: center;">1,200</td> <td style="text-align: center;">0</td> </tr> </tbody> </table> | | Target | Actual | # households provided with emergency shelter and settlement assistance | 1,200 | 0 | | | |
| | Target | Actual | | | | | | | | |
| # households provided with emergency shelter and settlement assistance | 1,200 | 0 | | | | | | | | |
| <p>Housing Output 1.1: Affected families are provided with shelter, settlement, or basic household items.</p> | | | | | | | | | | |
| Indicators: | <table border="1" style="width: 100%;"> <thead> <tr> <th style="width: 70%;"></th> <th style="width: 15%;">Target</th> <th style="width: 15%;">Actual</th> </tr> </thead> <tbody> <tr> <td># households provided with household/shelter items (with at least one item).</td> <td style="text-align: center;">300</td> <td style="text-align: center;">0</td> </tr> <tr> <td># of people provided with bedding kits</td> <td style="text-align: center;">1,200</td> <td style="text-align: center;">0</td> </tr> </tbody> </table> | | Target | Actual | # households provided with household/shelter items (with at least one item). | 300 | 0 | # of people provided with bedding kits | 1,200 | 0 |
| | Target | Actual | | | | | | | | |
| # households provided with household/shelter items (with at least one item). | 300 | 0 | | | | | | | | |
| # of people provided with bedding kits | 1,200 | 0 | | | | | | | | |
| <p>Progress towards outcomes</p> | | | | | | | | | | |
| <p>Bedding kits contain the following items:</p> <ul style="list-style-type: none"> • Set of Plain Microfiber Sheets in light colors (Blue, White or Gray) • Cross stitch bath towel 65 x 120 cm 400 grams (white with White-Blue-green) • Long-lasting insecticide nets: for Single Bed 1-meter-wide x 1.90 meters long x 1.50 meters high in Marquisette fabric. • Pillow 45x65 cm medium support • Easy-closing surgical cloth bag that is suitable for all the kit implements. | | | | | | | | | | |

¹ [The modification of the 1200 food kits for 321 economic transfers is due to the high flow of food kits. The UNGRD requested that no more food kits be sent. The cash transfers allow to stimulate the actions of economic stability in the planned target locations.](#)

These kits have not been delivered so far because of delays in the procurement process, as the tenders had to be repeated.



Livelihoods and basic needs

People reached: 0

Livelihoods and basic needs Outcome 1: Communities, especially in disaster and crisis affected areas, restore and strengthen their livelihoods

| Indicators: | Target | Actual |
|---|--------|--------|
| # of families receiving assistance and support: | 1,221 | 0 |

Output 1.2: Life-safety assistance, including food, is provided to the most affected communities

| Indicators: | Target | Actual |
|-----------------------------------|--------|--------|
| # of families receiving food kits | 800 | 0 |

Output 1.5: Households received cash and coupon assistance to meet their basic needs

| Indicators: | Target | Actual |
|--|--------|--------|
| # of families receiving multipurpose transfers | 1,221 | |
| Cash feasibility Study and rapid market assessment | 1 | 1 |

Progress towards outcomes

An evaluation was carried out according to groups and livelihood zones (see page 3) between November 18 and December. 2, 2020. Intervention strategies are being carried away between January 16 and February 28.

In parallel there has been a permanent support to Bolívar and San Andrés branches for the implementation of the Livelihoods and Basic Needs component.

Between 12 and 15 January, a rapid evaluation of markets and financial services was carried out for the feasibility of implementing the Monetary Transfer Program in Bolívar. In this field mission the CMCS worked in coordination with the UNGRD to obtain data bases of people affected and liable to receive multi-purpose cash assistance. In a meeting with community leaders, databases were validated, and 780 families were pre-selected for the CVA program.

A similar targeting effort was advanced in San Andrés, however only 19 families could be pre-selected for the program. These families had been previously targeted by the PGI unit of the CRCS.



Health

People reached: 704

Male: 304

Female: 400

Outcome 1: Immediate health risks to affected populations are reduced through better access to medical treatment

| Indicators: | Target | Actual |
|-------------------------------------|--------|--------|
| # of Medical consultations provided | 1,600 | 761 |

Output 1.1: Better knowledge of public health issues

| Indicators: | Target | Actual |
|---|--------|--------|
| # of people reached with prevention and promotion campaigns | 12,000 | 704 |

Output 3.1: Psychosocial support provided to the target population, as well as to volunteers and staff

| Indicators: | Target | Actual |
|---|--------|--------|
| # of people reached with psychosocial and mental health support | 12,000 | 224 |

Progress towards outcomes

The CRCS has implemented actions to manage the public health risk generated by Hurricane Iota, strengthening response capacities in community health, first aid, vector control, medical care through an Emergency Medical team and psychosocial support and mental health.

Promotion and health prevention:

- Promote protective factors in health and prevention of risk factors, through mechanisms of awareness, care, socialization, achieving self-care and the restoration of health in the population.
- In conjunction with the support of the mayor's office and MINSALUD, vaccination sessions have been held with influenza, tetanus, among others.

Medical care:

- Support is provided in the field hospital with 4 doctors where emergency medical care actions are carried out.
- Extramural activities coordinated with professionals hired by the Mayor's Office where the following activities are carried out:
 - Home medical evaluation
 - Screening for cardiovascular risk and diabetes
 - Minor cures and procedures
 - Medical formulation

Mental health and psychosocial support:

- An evaluation of the mental affectionation has been carried out, as an accompaniment to coping with material and family losses.
- Accompaniment is carried out to the population affected by Hurricane Iota (community, health personnel, people who are members of other organizations), due to exposure to extreme stressors.
- Technical advice for the creation of a listening center in Providencia with Ministry of Health.
- Participation and leadership of the Psychosocial Mental Health and Psychosocial Working Group in the territory.



Water, sanitation and hygiene

People reached: 7,492 people (1,873 families)

Outcome 1: Immediate risk reduction of water-borne and water-related diseases in selected communities

| Indicators: | Target | Actual |
|--|--------|--------|
| # of needs assessments and monitoring missions | 6 | 3 |
| # of families reached with water solutions | 4,800 | 1,873 |

Output 1.1: Target population is provided with daily access to safe water that meets Sphere and WHO standards for quantity and quality

| Indicators: | Target | Actual |
|-------------|--------|--------|
|-------------|--------|--------|

| | | |
|---|---------------|---------------|
| # of families reached with solutions for access to safe water | 1,200 | 1,078 |
| Output 1.4: Hygiene related assets (NFIs) that meet Sphere standards are provided to the target population and training is provided on how to use these assets | | |
| Indicators: | Target | Actual |
| # of needs assessments (WASH related) | 1 | 1 |
| # of families benefited with hygiene promotion activities | 3,000 | 795 |
| Progress towards outcomes | | |
| <p>Since November 2020, four monitoring and assessment missions were deployed. One to assess the physical and mental health conditions of people, another to assess the market conditions available for CVA, a third one to assess water and sanitation remaining capabilities and a fourth one to assess protection risks. All of these assessments underpinned the operational design on course. In addition to these assessments, two monitoring missions have been carried away to supervise the implementation of the WASH solutions.</p> <p>Currently, three water treatment plants suitable for human consumption are operating, with an average delivery of 80,894 litres per day, benefiting 5,392 people on the Island of Providencia. The CRCS guarantees the quality of the water by performing water quality control, with laboratory equipment for daily analysis of the parameters and with the collaboration of the Secretary of Health. As of January 31, 2021, 4,396,080 litres of water have been delivered to the communities and families in the Providencia and Santa Catalina islands.</p> <p>Considering that the geographic location of the island makes it difficult to mobilize the equipment, supplies, and materials necessary for the proper operation of the treatment plants. Our staff managed to adapt quickly to this scenario and optimized the available resources allowing the correct operation of our treatment systems for the delivery of water suitable for human consumption, which currently benefits the Providencia community.</p> <p>Throughout the implementation period and up to 31 January 2021, 1,062 activities in health and hygiene promotion were implemented in the peripheral areas where the field hospital and the water plants have been installed. These activities have reached 795 families.</p> | | |

| | | |
|---|--|---------------|
|  | <h2 style="color: red;">Protection, Gender and Inclusion</h2> <p>People reached: 3,086 people</p> | |
| Outcome 1: Communities become more peaceful, safe and inclusive in meeting the needs and rights of the most vulnerable. | | |
| Indicators: | Target | Actual |
| # of families receiving referral support and attention in restoring rights | 90 | 90 |
| Output 1.1: Family links are restored for people separated from, or without news of, their loved ones as a result of the disaster | | |
| Indicators: | Target | Actual |
| # of people who use the restoring family links service | 1,600 | 3,086 |
| Progress towards outcomes | | |
| <p>The PGI staff was very diligent in the response to the emergency. It was the only humanitarian agency team that was offering assistance by the second day of the emergency. This allowed the rapid installation of the Restoring Family Links service, which in turn is represented in a fulfilment of more than 180 per cent on the target. In the general response, 21 branches activated specific channels for the reception of RFL cases and a national line was</p> | | |

activated from the national headquarters. During the response to the emergency, search requests were received from 12 branches.

The team carried out a rapid assessment of protection risk needs and the characterization of all shelters, focusing on families, most vulnerable groups, exact location by sectors, data of leaders in charge of the shelters, information that was necessary for the Mayor's Office, since only six shelters were registered, and this allowed prioritizing the response.

In the early days of the operation, the PGI team was able to design the institutional and social map, which shows the infrastructural and social capabilities within the island. This mapping included data on social leaders that could cascade specific and critical messages in their settings.

In response to the results achieved in terms of accompaniment in recreational-pedagogical and educational spaces with children and adolescents, the UNICEF Protection and Humanitarian Action are coordinated with the Colombian Red Cross Society to reach a technical agreement and thus strengthen the actions in Providencia. As a result, the Return to Joy Strategy was designed, targeting youth and women leaders with a differential approach. This strategy is being implemented throughout February 2021.

Vulnerable children and women were reached in a coordinated effort with other humanitarian aid providers. Below are the results of this strategic partnerships:

| | |
|---|------------|
| Children and adolescents accompanied in coordination with ICBF, Save the Children and World Vision from protective environments. | 376 |
| Families oriented and accompanied in shelters. | 90 |
| People in shelters accompanied, visited and oriented from a protection approach. | 356 |
| Families with higher risks and protection needs are benefited by Cash Transfer in coordination with livelihoods. | 19 |
| Visits to shelters and refuges | 24 |
| Training in a protection, gender and inclusion approach for community leaders, community mothers, teachers and officials of the Mayor's Office. | 36 |

Strengthen National Society

Outcome S 1.1: The objectives of capacity strengthening and organizational development of National Societies are facilitated to ensure that National Societies have the necessary legal, ethical and financial foundations, systems and structures, competencies and capacities to plan and implement.

| Indicators: | Target | Actual |
|-------------------------|---------------|---------------|
| # of insured volunteers | 1,520 | 79 |

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

| Indicators: | Target | Actual |
|--------------------------------|---------------|---------------|
| # of monitoring visits | 3 | 2 |
| One lesson learned carried out | 1 | 0 |

Progress towards outcomes

Throughout the first two months of this operation 79 volunteers were insured. The original target was 1,520, which was meant to cover volunteers in many different coastal regions affected by the hurricanes. The National Society has decided not to apply the IFRC insurance, as they have already a National insurance for volunteers.

Due to the location of the site where the greatest impact occurred, the mobilization processes of the personnel of the different sectionals that support us in the humanitarian response have presented difficulties due to the costs as well as the restrictions given in the framework of the COVID-19 emergency.

A future document systematizing the lessons learnt from this operation will be the steppingstone for a structural revision of the CRCS capabilities of rapid response in the COVID-19 context. This revision will be addressed with the technical help of all PNS, the IFRC and all other movement partners. The goal is to make forecast-based financing and risk assessments, among other tools, regularly in the organization.

Financial Report

See [Annex](#) attached.

A first transfer of CHF 336,606 was done to the Colombian Red Cross Society to allow implementation of the DREF activities, for which a provision was booked in our accounts as shown in the financial report. The expenditures corresponding to that transferred amount shall be recorded in February/March. Furthermore, a second transfer to the National Society is scheduled, in order to cover the remaining DREF activities being implemented.

Contact information

Reference documents

Click here to access:

- [DREF Plan of Action](#).

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How we work

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

DREF Operation

INTERIM FINANCIAL REPORT

| Selected Parameters | | | |
|---------------------|-----------------|-----------|----------|
| Reporting Timeframe | 2020/10-2021/01 | Operation | MDRCO017 |
| Budget Timeframe | 2020/10-2021/02 | Budget | APPROVED |

Prepared on 26/Feb/2021

All figures are in Swiss Francs (CHF)

MDRCO017 - Colombia - Hurricane Iota

Operating Timeframe: 20 Nov 2020 to 28 Feb 2021

I. Summary

| | |
|---------------------------------|-----------------|
| Opening Balance | 0 |
| Funds & Other Income | 490,386 |
| DREF Allocations | 490,386 |
| Expenditure | -336,606 |
| Closing Balance | 153,780 |

II. Expenditure by area of focus / strategies for implementation

| Description | Budget | Expenditure | Variance |
|---|----------------|----------------|-----------------|
| AOF1 - Disaster risk reduction | | | 0 |
| AOF2 - Shelter | 51,826 | | 51,826 |
| AOF3 - Livelihoods and basic needs | 132,515 | 336,606 | -204,091 |
| AOF4 - Health | 63,680 | | 63,680 |
| AOF5 - Water, sanitation and hygiene | 111,378 | | 111,378 |
| AOF6 - Protection, Gender & Inclusion | 3,610 | | 3,610 |
| AOF7 - Migration | 21,305 | | 21,305 |
| Area of focus Total | 384,315 | 336,606 | 47,709 |
| SFI1 - Strengthen National Societies | 96,551 | | 96,551 |
| SFI2 - Effective international disaster management | 9,520 | | 9,520 |
| SFI3 - Influence others as leading strategic partners | | | 0 |
| SFI4 - Ensure a strong IFRC | | | 0 |
| Strategy for implementation Total | 106,071 | | 106,071 |
| Grand Total | 490,386 | 336,606 | 153,780 |

DREF Operation

INTERIM FINANCIAL REPORT

| Selected Parameters | | | |
|---------------------|-----------------|-----------|----------|
| Reporting Timeframe | 2020/10-2021/01 | Operation | MDRCO017 |
| Budget Timeframe | 2020/10-2021/02 | Budget | APPROVED |

Prepared on 26/Feb/2021

All figures are in Swiss Francs (CHF)

MDRCO017 - Colombia - Hurricane Iota

Operating Timeframe: 20 Nov 2020 to 28 Feb 2021

III. Expenditure by budget category & group

| Description | Budget | Expenditure | Variance |
|---|----------------|----------------|-----------------|
| Relief items, Construction, Supplies | 291,730 | | 291,730 |
| Clothing & Textiles | 30,634 | | 30,634 |
| Food | 30,132 | | 30,132 |
| Water, Sanitation & Hygiene | 78,087 | | 78,087 |
| Medical & First Aid | 17,577 | | 17,577 |
| Teaching Materials | 26,742 | | 26,742 |
| Utensils & Tools | 24,106 | | 24,106 |
| Cash Disbursement | 84,452 | | 84,452 |
| Logistics, Transport & Storage | 29,881 | | 29,881 |
| Storage | 7,031 | | 7,031 |
| Distribution & Monitoring | 10,044 | | 10,044 |
| Transport & Vehicles Costs | 12,806 | | 12,806 |
| Personnel | 109,073 | | 109,073 |
| National Society Staff | 39,280 | | 39,280 |
| Volunteers | 69,793 | | 69,793 |
| Consultants & Professional Fees | 301 | | 301 |
| Professional Fees | 301 | | 301 |
| General Expenditure | 29,471 | | 29,471 |
| Travel | 7,232 | | 7,232 |
| Information & Public Relations | 502 | | 502 |
| Office Costs | 19,247 | | 19,247 |
| Communications | 1,963 | | 1,963 |
| Financial Charges | 527 | | 527 |
| Operational Provisions | | 316,062 | -316,062 |
| Operational Provisions | | 316,062 | -316,062 |
| Indirect Costs | 29,930 | 20,544 | 9,386 |
| Programme & Services Support Recover | 29,930 | 20,544 | 9,386 |
| Grand Total | 490,386 | 336,606 | 153,780 |