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Emergency appeal operation update

Haiti: Hurricane Sandy

 International Federation
of Red Cross and Red Crescent Societies

Emergency appeal n° MDRHT010
GLIDE n° TC-2012-000180-HTI
Operation update n°2
22 April 2013

Period covered by this Ops Update:

1 December to 31 December 2012

Appeal target (current): CHF 7,511,993;

Appeal coverage: Current coverage of the Appeal stands at 40 per cent. Although the coverage is expected to reach approximately 53 per cent upon confirmation of some pledges, further contributions are urgently required to meet the needs of affected families.

[<click here to go directly to the contact details and here to access the donor response table >](#)

Appeal history:

- **31 October 2012:** 150,000 Swiss francs were allocated from the International Federation of Red Cross and Red Crescent Societies' (IFRC) Disaster Relief Emergency Fund (DREF) to support the Haiti Red Cross Society (HRCS) to respond to the emergency caused by Hurricane Sandy.
- **1 November 2012:** A Preliminary Emergency Appeal for 2,162,206 Swiss francs in cash, kind, or services was issued to support HRCS to assist 8,000 families (40,000 beneficiaries) for nine months.
- **12 November 2012:** An Emergency Appeal was launched reflecting a revised budget for 7,511,993 Swiss francs in cash, kind or services to support HRCS to assist 8,000 families (40,000 beneficiaries) for 12 months. The budget revision was based on needs identified from the assessments conducted in the affected regions.
- **7 December 2012:** Emergency Appeal operation update no 1 highlighting preliminary intervention and relief assistance was issued.
 - This operation will be completed by the end of October 2013.



The Red Cross immediate relief assistance targeted the most vulnerable among the affected population. Source:IFRC.

Summary:

The Sandy emergency operation team continued with the distributions of relief items during the month of December 2012 though to a lesser extent, with focus on reducing the impact of cholera outbreaks which were reported mainly in Grand'Anse, Sud, Nord-est, Haut Artibonite departments as well as La Gonave in the Ouest department. The team carried out sensitization awareness activities and distributed cholera prevention items. Since the start of the operation, the IFRC/HRCS has distributed 971,210 aquatabs, 2,163 bars of soap, 4,490 sachets of oral rehydration salts (ORS), 521 buckets and 4,016 hygiene kits in communities targeted by the appeal and others not targeted but where cases of cholera were reported after heavy rainfall in November 2012. The operation has also distributed a cumulative 2,287 kitchen kits and 4,072 blankets.

The IFRC/HRCS shelter team has identified and registered 765 households whose houses were either completely destroyed or partially damaged in four communities in Grand'Anse department. The operation is finalizing cash transfer assistance to the registered households to support them in meeting their immediate needs. The team has also finalized a plan for the identification and registration of target beneficiary households in two other communities in the department.

The IFRC/HRCS has also signed a memorandum of understanding with the German Red Cross (GRC) for the implementation of the livelihoods/food security component of the operation. The German Red Cross has commenced the recruitment process of national staff to support in the implementation. GRC has also started the process of procuring agricultural tools including seeds to be distributed to target beneficiaries ahead of the forthcoming planting season.

A second Field Assessment Coordination Team (FACT) was deployed during this reporting. The team supported the finalization of the revised plan of action of the operation and coordinated implementation of other planned activities. In addition, a water and sanitation Mass Sanitation Module-Emergency Response Unit (MSM-ERU) was deployed in Grand'Anse to implement the water, sanitation and hygiene promotion component of the response specifically, assessment of the cholera treatment centres (CTCs) and cholera treatment units (CTUs). A recruitment process is also underway to put in place an operational team, which will be on ground by end of January 2013.

The situation

Hurricane Sandy, which hit Haiti during the last week of October 2012, caused devastating impact in many parts of the country, particularly in the Ouest, Nippes, Sud, Grand'Anse and Sud-Est departments, as well as in the coastal areas of Artibonite and the North West part of country. According to the Haiti's Department of Civil Protection (DPC), Hurricane Sandy claimed 54 lives with 21 persons declared missing and 20 others injured. Around 20,000 persons were evacuated to 136 temporary shelters as a preventive measure. The Haitian Government's impact assessments indicated that 6,666 houses were destroyed, 24,348 were damaged and 9,352 were inundated. This was mainly in the Grand'Anse, Nippes, Sud, Ouest and Sud-Est departments. The heavy rains of 8 and 9 November 2012 in the North and Nippes worsened the situation with 14 reported deaths and damages to property including houses and crops. The impact of the disaster also caused outbreaks of cholera in the affected areas. The Government of Haiti declared a national state of emergency until the end of November 2012, which was later extended to 5 January 2013.



The FACT team carried out water and sanitation assessments in Grand'Anse. **Source:IFRC**

In December 2012, sectoral in-depth assessments carried out confirmed considerable impact on infrastructure and agricultural production, which could worsen the food insecurity as well as health and sanitation situation in the country in 2013. Most vulnerable households have depleted their food stocks and it is feared that increased dependence on food imports with rising food prices might lead to incidents of civil unrest and increased political instability. According to the National Commission for Food Security (CNSA), 92% of the country's 140 communes now face a situation of severe food insecurity for an estimated 2.1 million people compared to 800,000 in 2011. Of these, 500,000 are considered as extremely vulnerable. OCHA reports that 81,600 children under five are acutely malnourished and 20,000 of them suffer from acute malnutrition.

As of 27 November 2012, the Ministry of Public Health and Population has reported 621,660 cases of cholera and 7,759 deaths since October 2010 when the first case of cholera was registered in Haiti. Although an overall decrease of cases of cholera has been registered over the last year, localized outbreaks are on the rise in remote areas particularly since the passing of Hurricane Sandy and the heavy rains of November.

Coordination and partnerships

At national level, the Haiti Red Cross Society is part of the National Emergency Operation Centre (COUN) and its equivalent at the departmental and commune levels. The National Society works closely on the ground with the Department of Civil Protection to coordinate and respond in emergency situations. Collaboration with the government and international humanitarian actors including the UN system in country takes place through various coordination mechanisms such as the International Community Support Group (GACI).

IFRC provides support through various International Federation mechanisms and tools and maintains constant communication and coordination with the National Society through the Haiti country representation and through the Americas zone office in Panama. The Haiti Red Cross Society receives support from 13 in-country Red Cross Red Crescent partners. The United Nations Development Programme (UNDP) and other UN agencies, as well as international non-governmental organizations working directly with communities and civil organizations acting within this project's areas of intervention make up some of the other stakeholders and partners with which the HRCS works.

The National Society, with the support of the IFRC leads in the implementation of the Sandy operation in which the HRCS Disaster Risk Management team at national, regional and local levels are actively participating. The HRCS Directorate for branches and volunteering complements the support to the regional and local branches of the National Society as part of this operation. The IFRC/HRCS has signed a Memorandum of Understanding (MoU) with the German Red Cross who will be responsible for the implementation of the livelihoods/food security component of the operation. Coordination meetings are also held with the Norwegian Red Cross and the Dominican Red Cross to harmonize the water, sanitation and hygiene promotion component in the Red Cross geographical areas of intervention and also to share activities (at the moment joint volunteers trainings are planned) and good practices whenever possible.

National Society Capacity Building:

The IFRC is a long-term partner to the Haiti Red Cross Society. The main objectives of the current Disaster Risk Management programme is to strengthen the National Society's capacities within the national system and reinforce institutional skills in Disaster Risk Management of its local, regional and national level components. Following the 2010 earthquake and to this end, the Haiti Red Cross Society, with support from several Red Cross Red Crescent partners, established Community-Based Disaster and Risk Management (CBDRM) programmes. With these programmes, the International Federation and HRCS share the objective of empowering the vulnerable communities to conduct community-based disaster risk reduction, preparedness and response activities. The programmes also aim at enhancing the institutional capacity for disaster risk management at national and community levels as well as the communication and coordination mechanism between national, regional and local branches (a National Society's strength lies mainly in the strength of its regional branches and local units).

Disaster Risk Management and CBDRM are crosscutting issues in the response strategy to Hurricane Sandy. This operation offers a good opportunity to assess the capacity building needs of regional and local institutions and volunteers and work with them on the identified weaknesses and strengths. The National Society will build on its existing capacities through work with counterparts and organizing training of trainers for staff and volunteers during the operation. A particular emphasis will be given for improvement of coordination mechanisms within institutions.

Red Cross and Red Crescent action

Overview

At the onset of the storm in October, HRCS promptly opened its emergency operation centre and launched its contingency plan, in collaboration with the Government of Haiti, IFRC, partner national Societies and volunteers in all its 13 regional branches. During Hurricane Sandy, activities primarily focused on response and immediate relief. Volunteers were deployed in all departments to help with needed evacuations while Emergency Response Teams (ERTs) conducted situation assessments. Relief distributions of non-food items (mosquito nets, blankets, kitchen kits, family kits, hygiene kits, shelter kits, buckets, jerry cans, water bladders and Aqua tabs) were organized and cholera awareness and intervention activities conducted as needed. All the partner national societies (PNS) were active in their respective interventions in collaboration with HRCS throughout the assessments and initial distribution phases. There was also good collaboration in the area of logistical support amongst the Red Cross actors.

IFRC deployed its disaster response tools to further support HRCS. A Disaster Relief Emergency Fund (DREF) followed by an Emergency Appeal, based on preliminary field assessments was rapidly launched to raise funds in

support of the HRCS intervention. Two Fields Assessment and Coordination Teams (FACT) were also deployed. The first FACT with experts in water, sanitation and hygiene promotion, livelihoods, logistics and shelter was deployed during the second week of November 2012 for one month to further assess the field situation and support the HRCS and IFRC team in designing a targeted and appropriate recovery and rehabilitation response plan. The Americas Zone office deployed a reporting Regional Intervention Team (RIT) member for two months, as well as a senior relief delegate and a water and sanitation delegate for three weeks in support to the operation. From 13 to 27 November, the FACT team with HRCS staff and volunteers conducted field assessments in Nippes, Sud and Grand'Anse departments and a Plan of Action (PoA) was developed in collaboration with national and regional authorities as well as governmental services based on the assessments.

The second FACT was deployed in December 2012 with similar expertise to finalize the revised plan of action and support the Haiti Red Cross Society with the settlement and implementation of planned activities. During that period, an MoU was signed with the German Red Cross, which now has the responsibility of implementing the livelihoods/food security component of the programme in Nippes and Grand'Anse. Shelter activities were also launched in Grand'Anse with the identification and registration of beneficiaries and preparation of a relief cash grant transfer initiative to be carried out in January 2013. Furthermore, a MSM-ERU was requested to implement the water and sanitation component in Grand'Anse. The urgent response in water, sanitation and hygiene promotion is imperative in order to prepare infrastructure and sensitize the population before the next rainy season in March when cholera outbreaks are most likely to re-occur. The IFRC/HRCS team held coordination meetings with the Norwegian Red Cross and the Dominican Red Cross who are also implementing water, sanitation and hygiene promotion activities in some communities in the Sud department to develop a harmonized and more efficient overall response in water and sanitation. The ERU deployed in the field since 19 December 2012 has carried out activities which include the assessment of Cholera Treatment Centres (CTCs) and Cholera Treatment Units (CTUs) in the affected communities.

With the completion of the mission of the second FACT, recruitment of the operation team was started. The team will be in place by January 2013.

Progress towards outcomes

The Haiti Red Cross Society, with support from the IFRC, continued to respond to the immediate needs of some of households affected by the disaster. The progress made thus far was based on the initial plan of action developed after the preliminary assessments in the affected areas. However, findings from subsequent comprehensive assessments carried out within the operation led to the revision of the initial plan of action for a more efficient response. The finalized revised plan contains activities within the appeal but more integrated and coherent with the reality in the field in terms of needs and resources. Once validated, the next operation update report will be based on the revised plan of action.

The following sections thus detail the response of the National Society, with support from PNS from 1 December to 31 December 2012. The majority of the operation's activities were implemented in the Ouest, Sud, Grand'Anse, Nippes and Sud-Est departments. The operation has also carried out relief distributions outside these target departments due to the heavy rains that were experienced in November and affected beneficiary communities not targeted by the appeal.

Relief distributions (food and basic non-food items)	
Outcome: Affected families in Ouest, Sud, Grand'Anse, Nippes and Sud-est department benefit from the distribution of non-food items (kitchen sets) to help them recover from the effects of the hurricane.	
Outputs (expected results)	Activities planned
4,000 families (20,000 people) are reached with kitchen sets.	<ul style="list-style-type: none"> • Conduct rapid impact and needs assessment. • Target and register the most vulnerable families in the most affected areas of Haiti. • Distribute kitchen sets with volunteers and local authorities. • Monitor the relief activities and provide timely and accurate reporting on the relief distributions. • Training of Haiti Red Cross Society in Mega V (beneficiary electronic data base and distribution system). • Implementation of Mega V for beneficiary registrations and distributions.

	<ul style="list-style-type: none"> • Manage the beneficiary targeting strategy and registration.
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Progress:

To date, 1,766 kitchen kits and 2,984 blankets have been distributed in the targeted areas in addition to 521 kitchen kits and 1,088 blankets in the Nord department, as part of the response to severe flooding. No additional relief items were distributed for the period covered by this report. Kitchen kits were initially distributed within an immediate response framework. The HRCS will distribute remaining kits to targeted households based on the more integrated development perspective established in the Plan of Action. The following table summarizes the relief distribution carried out since the beginning of the operation:

Department	Kitchen Kits	Blankets
Nord-Ouest	149	298
Nord-Est	372	790
Ouest	1,001	2,800
Sud	-	144
Grand'Anse	-	40
Nippes	765	-
TOTAL	2,287	4,072

Challenges:

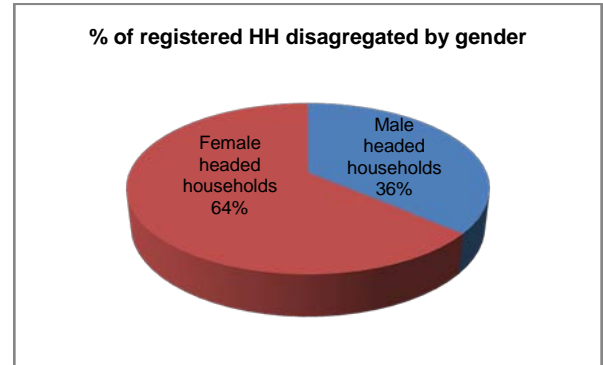
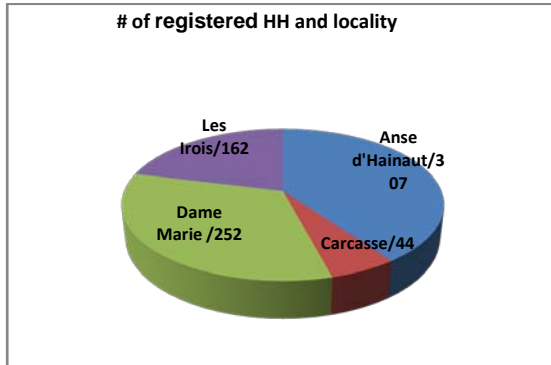
The HRCS needs to overcome the challenge of providing more accurate and timely reporting on relief distribution. The National Society, with the support of IFRC will test new distribution technologies and more effective use of selection criteria which are expected improve the National Society's reporting on relief distribution.

Shelter	
Outcome: 1,000 families in the Sud, Grand'Anse, Ouest, Sud-est, Nippes departments are supported with the repair and reconstruction of their damaged homes	
Outputs	Activities planned
Shelter kits, cleaning kits, hurricane straps and lighter construction materials are distributed to 1,000 affected families.	<ul style="list-style-type: none"> • Identification of communities and specific beneficiaries in coordination with local government authorities • Identification of targeted families based on needs assessments and registration • Hiring of technical experts and support staff • Distribution of shelter tool kits, cleaning kits and tarpaulins to affected families • Procurement and distribution of material for the repair or reconstruction of damaged homes • 10 Community trainings on construction techniques according to PASSA methodology (1 per each community) • Supervision of the repair and reconstruction of 1,000 damaged houses

Progress

The HRCS distributed 1,780 shelter toolkits and 8,312 tarpaulins during the initial emergency relief response in October and November. No new distribution was carried out by the National Society during December.

From 11 to 16 December, the operation, in collaboration with the DPC and Haitian Red Cross regional branch, deployed a shelter relief team in Grand'Anse to conduct assessment of houses, beneficiary identification and registration in communes affected and where potential beneficiaries had been previously identified by the first FACT. The team led by the IFRC Shelter Delegate in Haiti with support of 2 technical supervisors, regional and local coordinators of the HRCS mobilized and deployed 20 local volunteers in les Irois, 28 volunteers in Anse d'Hainault and 30 volunteers in Dame-Marie localities for the exercise. The team has registered 765 beneficiary families from 4 communities whose houses were either completely destroyed or severely damaged as well as their host families where applicable using the International Federation's and other recognized criteria including gender as shown in the graphic illustrations below:



The selection and registration process is not completed yet as there are still beneficiary households to be identified and registered in Jeremie and Roseaux in the second phase planned for early January 2013. All along the process, volunteers have been receiving training and monitoring to improve their beneficiary selection and registration skills.

In Port-au-Prince, data entry for the first group of beneficiaries was completed before the end of the year by a team of one relief coordinator, two supervisors, eight data entry assistants and one IT assistant. The database will also serve in other programmes (livelihood/food security, water and sanitation) as some activities are integrated between programmes for more impact on beneficiary families. The operation has signed a contract agreement with UNIBANK (UNI transfers) for the cash grant relief activities to support households selected and registered. The cash transfer will help households to meet their most critical needs. Beneficiary households will, in the months to come, also benefit from early recovery and recovery activities.

Challenges:

As of end December 2012, a FACT shelter member was overseeing the implementation of the shelter programme. However, with the end of the FACT mission, the IFRC Haiti Earthquake team will ensure follow up on implementation until the arrival of the shelter delegate by end of January 2013. Efficient and diligent transitioning is important to ensure successful implementation of activities in January.

Livelihoods

Outcome: Contribute to the early recovery of 4,000 families in Sud, Grand'Anse, Ouest, Sud-est, Nippes and Artibonite whose livelihoods have been severely affected as a result of the hurricane.

Outputs (expected results)

4,000 families received support through in-kind and/or cash to cover their basic needs to restore their livelihoods

1,000 families in the coastal areas of the 5 departments receive equipment to restore their fishing livelihoods

1,000 families receive training/skills and some

Activities planned

- Selection of 4,000 poor and vulnerable beneficiaries for food and cash distributions (see criteria below),
- Distribute food basket to the 4,000 vulnerable households
- Complete detailed needs and market assessment.
- Analyze the security situation.
- Identify cash transfer delivery mechanism.
- Distribution of cash items.
- Monitoring of delivery and use of funds by beneficiaries. Conduct post distribution monitoring for food and cash distribution.
- Capacity building of 1,000 fishing households on record keeping, marketing and value chain.
- Distribution of small boats, fishing nets, diesel pumps, storage equipment to 1,000 identified households
- Training on equipment maintenance and proper use.
- Monitor the proper usage of equipment
- Measure the benefits of the intervention using cost benefit analysis.
- Complete detailed needs assessment for skills and businesses.
- Analyze the skills and local market demand situation.

<p>monetary assistance to establish livelihoods through cash for work or business development for the families and ensure food security.</p>	<ul style="list-style-type: none"> • Identify different potential business within the area. • Selection of 1,000 targeted beneficiaries (see criteria below). • Restoration of supportive infrastructure for livelihood through cash for work programme. • Restore livelihood through business creation activities. • Provide technical training for business and livelihood work and distribution of monetary support to implement activities. • On the job training and skills up grading • Marketing information and support to beneficiaries • Monitoring of established newly business and its impact, and use of provided funds by beneficiaries.
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Progress

The 765 beneficiary households registered for the shelter programme (mentioned above) are to receive cash grant transfers to meet their immediate needs in January 2013. To this effect, the operation has put in place a database and an agreement was concluded with UNI transfer for cash transfer process.

The operation team signed a Memorandum of Understanding with the German Red Cross on 21 December 2012 for the implementation of the livelihoods/food security component including cash-for-work activities in Grand'Anse and Nippes. The German Red Cross had been supporting HRCS in the implementation food security and regional branch capacity development in disaster management programmes in the two departments.

With the completion of an assessment on local availabilities of seeds by the German Red cross (yams, peas, corn) and tools, the operation team immediately commenced the procurement process in order to be ready for the planting season (end of January to mid-March depending on location). Quotations for procurements will be received at the beginning of January. The personnel recruitment was on going with the recruitment of a food security officer and cash-for-work officer being completed in December while the positions of six technicians have been advertised on the websites. All the recruited staff will start work in January 2013. In addition, the German Red Cross will start receiving quotations for procurements at the beginning of January. Identification and registration of beneficiaries and design of cash-for-work activities are planned for the beginning of January with the distribution of seeds and tools from end of January to March 2013.

Challenges

The recruitment of a food security delegate could not be undertaken before January due to the end of the year holidays. However, the German Red Cross Coordinator with the national staff already on site who will be joined later by the incoming Operation Coordinator for Sandy will ensure that activities kick-start without delay before the arrival of the food security delegate in February 2013.

Water, sanitation, and hygiene promotion

<p>Outcome: The risk of waterborne and water related diseases is reduced through the provision of water and sanitation services and facilities, as well as hygiene promotion within the population of the Sud, Grand'Anse, Ouest, Sud-Est and Nippes affected by Hurricane Sandy.</p>	
<p>Outputs (expected results)</p>	<p>Activities planned</p>
<p>The health hazards are appraised and reduced amongst households (HHs)s affected by Hurricane Sandy</p>	<ul style="list-style-type: none"> • Carry out continuous assessments of water, sanitation, and hygiene situation, and conduct surveillance for water borne disease incidence and prevalence in 30 communes affected by Hurricane Sandy. • Distribute hygiene kits, water buckets, aqua tabs, chlorine and soap to 4,000 families. • Conduct hygiene promotion campaign, activities and provide information on the safe use of water treatment products.
<p>500 households located in particularly flood prone areas are made more resilient regarding drinking water access</p>	<ul style="list-style-type: none"> • 500 HHs are supported for the acquisition of locally made ceramic water purifiers. • Campaign sensitization for the proper use and maintenance of these Community Water Points is implemented. • Monitoring, follow up and documentation of lessons learned and best practices.

The access to water and sanitation is restored in 50 schools and 30 health centres	<ul style="list-style-type: none"> • Joint assessment DINEPA/HRCS of the water and sanitation situation in 50 schools and 30 health centres. • Cleaning of water points and sanitation in these facilities. • Disinfection of water points and sanitation in these facilities. • Fumigation campaign.
Water and sanitation facilities are made disaster friendly in the most flood prone schools and health centres	<ul style="list-style-type: none"> • Upgrading of water and sanitation facilities in 10 schools and 10 health centres. • Design, construction/ rehabilitation of water and sanitation facilities.
The pupils and the health centre staff are sensitized to the hygiene issue	<ul style="list-style-type: none"> • Hygiene promotion campaign in 50 schools and 30 health centres
The emergency capacity of the water and sanitation service of HRCS is reinforced	<ul style="list-style-type: none"> • Upgrading, and reorganizing the water and sanitation stock of the National Society, to make it operational and deployable in Haiti and Latin Caribbean countries. • Setting up of a water and sanitation brigade training of HRCS volunteers. • Water and sanitation training of 10 potential regional focal points. • Based on the training outcome, hire 5 regional water and sanitation focal points. • Training of 60 communal water and sanitation volunteers. • Donation of three sprayers with High Test Hypochlorite (HTH) stock in each commune for disinfection purpose.
The emergency capacity and operability of two regional branches is improved through the provision of water and sanitation facilities	<ul style="list-style-type: none"> • Two regional branches of HRCS are equipped with water point and sanitation facilities.

Progress

In December, many cases of cholera were registered mainly in Grand'Anse, Ouest, Artibonite, Sud and Nord-est. HRCS volunteers in the affected branches were mobilized and deployed in the affected communities to support in referral and evacuation to health facilities. They also supported in disinfection of houses, distribution of ORS (Oral Rehydration Salt), and sensitization in the affected communities. Since the beginning of December, the operation has distributed 222,250 Aqua tabs, 400 sachets of ORS, 840 bars of soap and 15 buckets to the population in the areas targeted by the Appeal. The operation has disinfected 9 houses. An additional 15 hygiene kits, 7,000 Aqua tabs, 240 ORS, 3,000 bars of soap were distributed in other regions affected by the heavy rains in November. The table below provides a breakdown of the distributions done including the cumulative figures since the start of the operation:

Department		Hygiene kits	Aqua tabs	ORS	Buckets	Bars of soap	Jerry cans	# of houses disinfected
Areas covered outside the Appeal target	Nord	100	600,000	-	-	-	-	112
	Nord Ouest	149	3,150	-	149	315	-	-
	Nord-Est	372	-	-	357	-	403	-
	Haut-Artibonite	38	6,650	-	-	1,076	38	-
	Haut-Artibonite: CTC de Marmelade	15	2,000	240	-	2,000	-	-
	Sub-total	674	611,800	240	506	3,391	441	112
Areas covered by the Appeal target	Ouest	2,500	20,000	450	-	-	1,154	-
	Nippes	765	97,400	800	-	216	491	3
	Nippes: Ste-Therese Hospital in Miragoane	-	20,000	600	-	-	-	-
	Sud: Ile de la Vache and Maniche	77	12,000	1,200	15	840	77	-
	Grand'Anse	-	200,000	-	-	-	-	6
	Grand'Anse: Cholera prevention clinic in Jeremie	-	10,000	1,200	-	360	-	-
	Sub-total	3,342	359,400	4,250	15	1,416	1,722	9

	TOTAL	4,016	971,200	4,490	521	4,807	2,163	121
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Planning for the early recovery and recovery phases commenced with identification of beneficiaries. Some of the beneficiary households include those targeted by the shelter component of the operation. Among the target households for shelter assistance, those in need of latrine facilities will be identified and selected by both the shelter and, water and sanitation teams of the operation. Other target beneficiaries for water, sanitation and hygiene promotion assistance include Cholera Treatment Centres (CTCs), Cholera Treatment Units (CTUs), schools, health centres and the population in the affected areas and will be reached with training and/or awareness activities.

A MSM-ERU is being deployed for three months to work in 5 communes of Grand'Anse with focus on repair and improvement of sanitation facilities and increased hygiene promotion around the 26 CTUs. The first team arrived in Jeremie on 19 December 2012. The rapid assessment of 26 CTUs (two teams visiting an average of three CTUs per team per day) was completed on 28 December. So far, findings indicate that nearly all the CTUs in the target area need improvement. The operation shall give priority to the CTUs with the biggest caseloads. A detailed assessment was made in Abricots, where there have been 97 cases of cholera since 1 December 2013. All procedures were carried out in close collaboration with regional authorities and governmental services. CTCs/CTUs assessed can be located geographically. Click [here](#) to view their locations.

The Sandy operation has procured and successfully tested a basic incinerator prototype procured locally from Leogane at the beginning of December. The test was carried out in Grand'Anse with the support of local staff that had been trained on its use. With the success recorded, the operation has therefore placed order for the procurement of an additional 20 incinerators from local blacksmiths/welders. A WATA electrolysis device for producing chlorine on site is also currently on a test trial and feasibility analysis. A report will be made at the end of the first ERU mission. In the coming weeks, the MSM-ERU will continue with the rehabilitation of CTUs and first disinfection training has been planned for HRCS volunteers and MSPP brigadiers. This will be followed by Training of Trainers (ToT) for hygiene promoters.

To ensure a good territorial coverage and to complement activities of their respective water and sanitation programmes, the IFRC/HRCS team held coordination meetings with the Norwegian Red Cross, working with its own funds in the Sud and Ouest departments, as well as the Dominican Red Cross who will carry out similar activities in some other communities in the Sud department. The meetings focus on information sharing on the intervention area, presentation of each actor's respective plan of action for harmonization, best practices and joint implementation of activities including training of volunteers. The teams agreed to continue the collaboration and consultation through the life of the operation.

Challenges

Although distance between communities in Grand'Anse is short, the deplorable condition of roads often leads to spending more time on the roads before reaching target communities.

Emergency Health

Outcome: The health risks of the emergency on the affected population of the Sud, Grand'Anse, Ouest, Sud-Est and Nippes departments are reduced by preventive measures and awareness-raising in the communities.

Outputs (expected results)	Activities planned
Cholera, and other water and vector borne diseases are prevented and reduced.	<ul style="list-style-type: none"> • Epidemic Control trainings for 600 volunteers (20 training sessions for 30 volunteers each). The training will include ECV with specific module (5) of CBHFA approach and Hygiene promotion. • Activation of epidemic response teams in affected areas -3 regional teams: Grand'Anse, Sud, and Ouest for cholera surveillance and health promotion in communities. • Awareness-raising campaigns in water and vector borne diseases (cholera, malaria).
Community resilience is strengthened through improved health awareness, knowledge and behaviour.	<ul style="list-style-type: none"> • Dissemination of messages on cholera by community radio. • Distribution of mosquito nets to 4,000 target families. • Reinforcement of cholera stock and logistic capacities in the 3 regional branches.
Activities to prevent	

interpersonal violence and excess HIV transmission are implemented in targeted communities	<ul style="list-style-type: none"> • Provision of information to target groups on available voluntary counselling and testing services. • Provision of information to target group on available prevention of mother to child transmission services. • Promotion of skills for personal protection. • Production of awareness-raising materials (flyers, posters). • Volunteer training in violence prevention. • Promotion of key messages with volunteer peer educators. • Production of reference and awareness-raising materials. • Dissemination of key messages through the media. • Violence prevention campaigns implemented in targeted groups through HRCS volunteers.
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Progress:

As part of the emergency health actions to respond to Hurricane Sandy and the heavy rains, the National Society has distributed 2,594 mosquito nets in the areas targeted by the Appeal and 1,054 additional mosquito nets in other areas since the beginning of the operation. No additional mosquito nets were distributed during this reporting period. In November 2012, HRCS donated 4 truck-loads of cholera treatment materials to the regional office of the Ministry of Health in Grand'Anse. The items included 17 tents, 100 clinical gloves, 2 cholera beds, 155 pairs of boots, and 8 water tanks with a capacity of 530 gallons per tank.

The IFRC logistic team carried out inventories of stocks in the HRCS branches in Grand'Anse and Nippes to ensure replenishment of cholera stocks. Procurement is currently underway. Additional efforts are being made towards cholera prevention and treatment with the arrival of ERU-MSM to carry out activities in rehabilitation, disinfection, sensitization, training of trainers, refurbishment of cholera treatment infrastructures and pre-positioning of disaster response Kit 2 in Grand'Anse and Nippes in the months to come. Partnership mentioned above with the Norwegian Red Cross and Dominican Red Cross will help to strengthen the capacities of the Sud regional branch's water and sanitation programme.

Challenges

One of the major challenges faced in the health sector is the fact that a lot of the MSSP personnel are not being paid thus there is a reduced presence of qualified health personnel in the Cholera Treatment Centres the situation is made worse by a lack of medical supplies in the CTCs. Medecins du Monde an important actor in emergency health has also stopped its Cholera programs in these areas.

Disaster Preparedness and Risk Reduction

Outcome: Regional and local Red Cross committees in carry out preparations for future disasters in the Sud, Grand'Anse, Ouest, Sud-est and Nippes departments.	
Expected results	Activities planned
Communities in at least two (2) municipalities per department with extreme vulnerability to natural hazards have established better preparedness for the annual threat of hurricanes and tropical storms.	<ul style="list-style-type: none"> • Undertake at least two climate change adaptation campaigns in communities. For a total of at least 20 campaigns. • Undertake one climate change adaptation training for HRCS volunteers. • Conduct at least two awareness-raising campaigns on disaster risk management in communities. For a total of at least 20 campaigns. • Set up of at least 10 community early warning systems and safe areas. • Establish at least 10 community and 10 family contingency plans • Establish at least 10 Community Intervention Teams according to the methodology put in place by HRCS and the Haitian Civil Protection. • Equip each Community Intervention Team with community intervention kits. • Carry out one SPHERE training for volunteers. The training will involve volunteers from the regional branches of the HRCS in the 5 most affected Departments. • Carry out one Stay Safe training for volunteers. The training will involve volunteers from the regional branches of the HRCS in the 5 most affected Departments. • Carry out one volunteer training in PSP. The training will involve volunteers from the regional branches of the HRCS in the five most

	<p>affected Departments.</p> <ul style="list-style-type: none"> • Carry out at least 2 simulation exercises at community level for each community. For a total of at least 20 simulation exercises. • 30 mitigation works to protect agricultural infrastructures (10), water systems (10) and health centres infrastructures (10) damaged by the Hurricane Sandy but not destroyed.
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Progress:

Activities planned in this component have not started yet. Disaster preparedness and risk reduction are crosscutting activities for the National Society and are part of an ongoing process to strengthen the HRCS, with support from IFRC and Red Cross Red Crescent partners. Disaster risk reduction activities will also be incorporated in each component of the new plan of action as crosscutting activities for all the sectors.

Logistics

Outcome: The local logistics capacity of the Haiti Red Cross Society to respond with relief items is strengthened with the support of standardized items prepositioned in the IFRC's zone Logistics Unit in Panama as well as enhanced with technical support to ensure effective supply chain management from arrival of relief items to forwarding to distribution.

Outputs (expected results)	Activities planned
Enhanced logistics capacity and technical support to facilitate the distribution of relief items to 4,000 families and other related activities.	<ul style="list-style-type: none"> • Preparation of the logistics mobilization table. • Management of the logistics mobilization of the appeal and maintenance of relations with donors. • Procurement of transport services through the ZLU transport network. • International procurement. • Pipeline management of in-kind goods. • Carry out reception of relief goods and arrange transportation to distributions points • Liaise and coordinate with other key actors to ensure best uses of all information. • Monitor activities and provide reporting

Progress

In December, the logistics team closely worked with all departments and sectors to identify material requirements, sourcing/replenishment options and prioritization for the programme. The [mobilization table](#) was updated on 28 February 2012. In parallel, a local procurement process was launched as most of the required materials such as construction materials, tools and seeds are available locally and special efforts will be made to ensure that they are locally procured and contribute to enhancing local economy.

The establishment of a field operation sub-delegation in Jeremie and preparation for the incoming MSM-ERU in Jeremie have also been a priority for the logistic team. During December, the IFRC's security unit in Port-au-Prince deployed a team in Grand'Anse and Nippes for security assessments. A logistic team was deployed in Grand'Anse to identify potential premises for residential and office accommodation for the Sandy operation team. The team carried out a survey of the transportation and warehousing services in the department. It also assessed the local market for availability of materials that would be needed for the operation. Some of the team's findings showed that the Haitian Red Cross in Grand'Anse owns eight containers of 20 feet long for warehousing. The HRCS local volunteers have repaired and reorganized containers for more efficiency. Two containers were emptied to create space for WASH items to be used by MSM-ERU team during its 3-month mission in the region. Since 19 December, the operation has transported all the water, sanitation and hygiene promotion items to be used for good hygiene promotion activities and cholera treatment to Jeremie. The IFRC fleet unit in Haiti availed five trucks to transport needed items to the various target regions as shown in the table below:

Water sanitation items	Quantity
Bucket (plastic, 14L)	3,484 pieces
Jerry can (10L)	3,400 pieces
Tarpaulins (woven plastic, 4x60m, roll)	2 rolls
Hygiene Promotion Box A (promotion items)	1 unit
Chlorine, 20mg, for 5L water, 1 tablet	685,000 tablets
Pool Tester + accessories	2 testers
(pool test) Tablet DPD3 for dosing total chlorine	500 tablets

(pool test) Tablet DPD1 for dosing free chlorine	500 tablets
Squatting plates, polypropylene, 1.2x8m	46 pieces
Shelter toll kit, tools and fixings	26 pieces
Chlorine(HTH), 60 to 70%, 40 kg drum	14 pieces
Incinerator	1 piece
Sprayer, manual, back pack, 20l	78 pieces
Set, protective, clothes, for person spraying chemicals	78 sets

The arrival of the logistics delegate for the operation during the first week of January 2013 will scale up implementation of activities planned in logistics.

Challenges:

Access to Jeremie at the beginning of December was made impossible due to protests over the long delay in the completion of construction work on the road linking Grand'Anse to the Sud. Similar protests are likely to occur in the coming weeks as construction work seems far from completion. In addition, occasional fuel scarcity in Jeremie sometimes poses a challenge to implementation of activities.

There is need to expediate action on procurement of seeds and other agricultural products as there is limited time before the planting season.

Communications – Advocacy and Public Information

Communication activities have been ongoing before, during, and after the passing of Hurricane Sandy. The department has been providing vital information to people on how to prepare and stay safe from the storm, and also giving guidance on dangers after the storm, particularly the threat of cholera.

More than 1.3 million SMS were sent to people living in areas at risk including alert messages on the coming storm. The messages urged the population to listen to the media for updates during and after the storm had passed and advise the population against drinking floodwater. The Red Cross sound truck was dispatched to areas in Port-au-Prince identified as being particularly vulnerable, disseminating preparedness and cholera prevention messages in 28 sites around the capital. Radyo Kwa Wouj featured hurricane preparedness on its phone-in-show, while the Telefon Kwa Wouj information line, which was updated to provide hurricane preparedness and cholera prevention information as a priority, received almost 40,000 calls in ten days after 22 October 2012.

For external media, the Communications Coordinator produced press releases, Key Messages (KM) as well as Question and Answers (Q&A) covering the impact of Sandy and the work of the Red Cross Red Crescent Movement in English and French, as well as web stories for the IFRC and HRCS websites. The Communications Coordinator also responded enquiries from, and conducted interviews with international media including Reuters, BBC, CBC, Radio Canada TV, radio stations and the New York Times.

Contact information

For further information specifically related to this operation please contact:

In Haiti

- Dr Michaèle Amédée Gédéon, HRCS President, phone :(509) 3 492 5492 Email: m.amedee-gedeon@croixrouge.ht
- Alexandre Claudon de Vernisy, country representative for Haiti; phone (509) 31707809 e-mail: alexandre.claudon@ifrc.org

In Panama

- Benoit Porte, acting coordinator for the disaster & crisis response and early recovery unit: IFRC Americas Zone: phone +507 317 3050; Benoit.Porte@ifrc.org
- Lorenzo Violante, Haiti support team coordinator; phone: (507) 380 0250; email: lorenzo.violante@ifrc.org
- Douglas Baquero, Americas Zone logistics coordinator; phone (+507) 316.1001; fax (507) 316 1082; e-mail: douglas.baquero@ifrc.org

In Geneva

- Cristina Estrada, quality assurance senior officer, phone: +41.22.730.4260, fax: +41.22.733.0395; email: cristina.estrada@ifrc.org

For Resource Mobilization and Pledges:

- Sandra Lombardo, senior resource mobilization officer: Sandra.Lombardo@ifrc.org

Click [here](#) to return to the title page

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 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.



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.

MDRHT010 - Haiti - Hurricane Sandy

Appeal Launch Date: 31 oct 12

Appeal Timeframe: 31 oct 12 to 31 oct 13

Interim Report

Selected Parameters	
Reporting Timeframe	2012/10-2012/12
Budget Timeframe	2012/10-2013/10
Appeal	MDRHT010
Budget	APPROVED

All figures are in Swiss Francs (CHF)

I. Funding

	Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination	TOTAL	Deferred Income
A. Budget	7,511,993					7,511,993	
B. Opening Balance	0					0	
Income							
Cash contributions							
<i>American Red Cross</i>	91,483					91,483	
<i>British Red Cross</i>	1,321,350					1,321,350	
<i>China Red Cross, Hong Kong branch</i>	23,581					23,581	
<i>Danish Red Cross</i>	32,289					32,289	
<i>Finnish Red Cross</i>	242,043					242,043	
<i>Japanese Red Cross Society</i>	224,730					224,730	
<i>New Zealand Red Cross</i>	15,200					15,200	
<i>On Line donations</i>	553					553	
<i>Red Cross of Monaco</i>	12,077					12,077	
<i>Swedish Red Cross</i>	416,774					416,774	
<i>Swiss Red Cross</i>	247,459					247,459	
<i>The Canadian Red Cross Society</i>	210,118					210,118	
<i>The Netherlands Red Cross</i>	164,266					164,266	
<i>The Trinidad and Tobago Red Cross Society</i>	18,315					18,315	
<i>VERF/WHO Voluntary Emergency Relief</i>	1,000					1,000	
C1. Cash contributions	3,021,238					3,021,238	
C. Total Income = SUM(C1..C4)	3,021,238					3,021,238	
D. Total Funding = B + C	3,021,238					3,021,238	
Coverage = D/A	40%					40%	

II. Movement of Funds

	Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination	TOTAL	Deferred Income
B. Opening Balance	0					0	
C. Income	3,021,238					3,021,238	
E. Expenditure	-783,990					-783,990	
F. Closing Balance = (B + C + E)	2,237,248					2,237,248	

Selected Parameters	
Reporting Timeframe	2012/10-2012/12
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III. Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance
		Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination		
A							B	A - B
BUDGET (C)		7,511,993					7,511,993	
Relief items, Construction, Supplies								
Shelter - Relief	533,606						533,606	
Shelter - Transitional		4				4	-4	
Construction - Facilities	280,845						280,845	
Construction Materials		11				11	-11	
Clothing & Textiles	59,914						59,914	
Food	1,123,380						1,123,380	
Water, Sanitation & Hygiene	239,935						239,935	
Teaching Materials	200,125	710				710	199,415	
Utensils & Tools	187,230						187,230	
Other Supplies & Services	28,085	183				183	27,901	
Cash Disbursement	1,118,699	72,294				72,294	1,046,405	
Total Relief items, Construction, Supplies	3,771,819	73,202				73,202	3,698,616	
Logistics, Transport & Storage								
Storage		3,166				3,166	-3,166	
Distribution & Monitoring	138,391						138,391	
Transport & Vehicles Costs	724,393	18,671				18,671	705,722	
Logistics Services	46,668						46,668	
Total Logistics, Transport & Storage	909,452	21,837				21,837	887,615	
Personnel								
International Staff	722,708	8,408				8,408	714,300	
National Staff		21,908				21,908	-21,908	
National Society Staff	669,418	7,245				7,245	662,173	
Volunteers	297,190	3,873				3,873	293,317	
Total Personnel	1,689,316	41,435				41,435	1,647,881	
Consultants & Professional Fees								
Consultants	18,723						18,723	
Professional Fees	14,042	921				921	13,121	
Total Consultants & Professional Fees	32,765	921				921	31,844	
Workshops & Training								
Workshops & Training	329,525						329,525	
Total Workshops & Training	329,525						329,525	
General Expenditure								
Travel	8,425	5,276				5,276	3,149	
Information & Public Relations	9,830	168				168	9,661	
Office Costs	7,957	728				728	7,229	
Communications	4,213	858				858	3,354	
Financial Charges	28,178	0				0	28,178	
Other General Expenses		-4				-4	4	
Shared Office and Services Costs	262,034						262,034	
Total General Expenditure	320,637	7,027				7,027	313,610	
Contributions & Transfers								
Cash Transfers National Societies		583,850				583,850	-583,850	
Total Contributions & Transfers		583,850				583,850	-583,850	
Operational Provisions								
Operational Provisions		7,837				7,837	-7,837	
Total Operational Provisions		7,837				7,837	-7,837	
Indirect Costs								
Programme & Services Support Recov	458,478	47,847				47,847	410,631	

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III. Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance
		Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination		
A							B	A - B
BUDGET (C)		7,511,993					7,511,993	
Total Indirect Costs	458,478	47,847				47,847	410,631	
Pledge Specific Costs								
Pledge Earmarking Fee		33				33	-33	
Total Pledge Specific Costs		33				33	-33	
TOTAL EXPENDITURE (D)	7,511,993	783,990				783,990	6,728,003	
VARIANCE (C - D)		6,728,003				6,728,003		