



A Haiti Red Cross Society (HRCS) volunteer teaches a child how to wash hands properly during a hygiene promotion activity run by HRCS and IFRC, in Park Larco, Les Cayes, one of the areas in the south of Haiti that was most affected by the earthquake on 14 August 2021.

(Revised) Appeal №: MDRHT018	To be assisted: 35,000 people (7,000 families)	Appeal launched: 15 August 2021 Issued: 15 August 2021
	DREF allocated: CHF 750,000	Revision n° 1 issued: 29 October 2021
Glide №: <a href="#">EQ-2021-000116-HTI</a>	Funding requirements: CHF 19.2 million Funding gap: CHF 7.5 million Click here for the <a href="#">Donor Response</a>	Appeal ends: 28 February 2023 (18 months' timeframe)

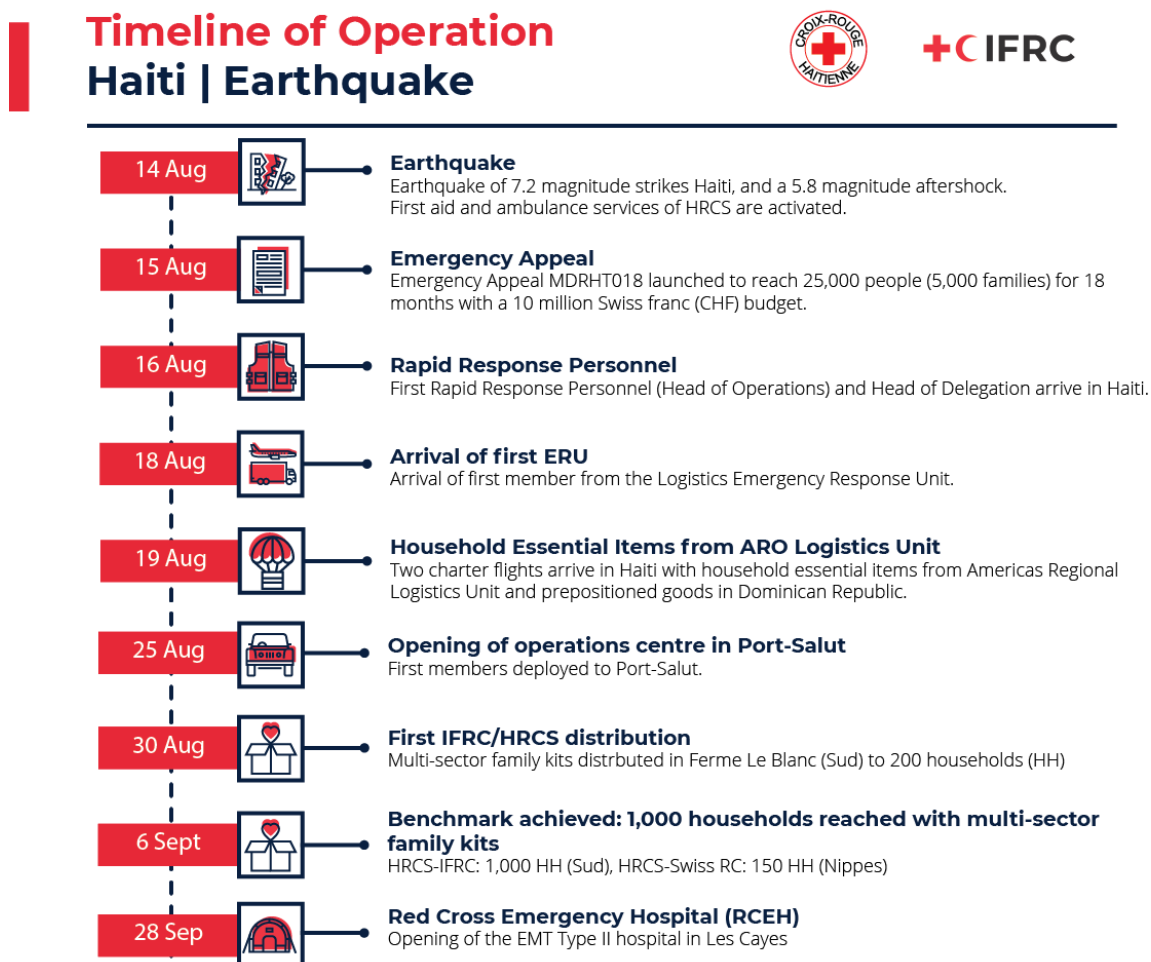
This revised Emergency Appeal seeks a total of **7.5 million Swiss francs** (funding gap) to support the Haiti Red Cross Society (HRCS) in assisting the people affected by the 14 August 2021 earthquake in Haiti. With a total budget of 19.2 million Swiss francs, the International Federation of Red Cross and Red Crescent Societies (IFRC) will continue to support the Haiti Red Cross Society (HRCS) to provide emergency assistance and recovery for **35,000 people for 18 months**. Additional needs are addressed and considered with the aim of a Federation-wide approach. This revised Emergency Appeal will have a **geographic focus in the Sud and Grand'Anse departments**, while coordinating with Partner National Societies (PNS) and supporting HRCS in **Les Nippes**.

The operation focuses on the following areas: **Shelter, Livelihoods & Basic Needs; Health, Water, Sanitation and Hygiene (WASH); Protection, Gender & Inclusion (PGI); Migration; and Disaster Risk Reduction (DRR)**. These areas

are supported and enhanced by the following enabling actions: **Strengthening National Societies, Influencing others as strategic partners, and Ensuring Accountability.**

Details on all revisions and modifications included in this revised Emergency Appeal can be found below under each sector for intervention.

## A. EVENTS TO DATE



## Situation overview

On 14 August 2021, a 7.2 magnitude earthquake struck Haiti, causing 2,248 deaths, 12,763 injuries, and 329 people who remain missing. 52,953 houses have been reported destroyed and 77,006 damaged.<sup>1</sup> On a total area of 500 km<sup>2</sup>, at least 800,000 people were directly affected. Out of 159 health facilities assessed, 28 were severely damaged and 60 slightly damaged, with 456 impacted schools and 64 schools destroyed<sup>2</sup>. The economic damage and losses suffered by the country are estimated at USD 1.6 billion, about 10% of the gross domestic product.<sup>3</sup>

The earthquake struck during a current political crisis since the assassination of the president on 7 July 2021. In addition, Tropical Depression Grace made landfall in Haiti on 17 August 2021, leading to flash and urban flooding. The consequences of the earthquake compounded by political instability, organized crime, food insecurity, and the COVID-19 pandemic, are exacerbating vulnerabilities and hampering humanitarian efforts in the country ranking 170 out of 189 on the 2020 Human Development Index.

<sup>1</sup> Tremblement de terre Samedi 14 août 2021 – Péninsule Sud. Rapport d'étape du Centre d'opérations d'urgence national, 4/09/2021, DGPC.

<sup>2</sup> Haiti earthquake situation report 7, 4/09/2021, PAHO/WHO

<sup>3</sup> Estimating the Potential Economic Impact of Haiti's 2021 Earthquake, 28/09/2021, IDB.

Two months after the devastating earthquake, humanitarian assistance had begun to reach those most in need faster, facilitated by enhanced Government-led coordination and efforts to negotiate increased humanitarian access into hard-to reach areas. As the operation is transitioning from immediate response to recovery and reconstruction, critical needs continue to exist. The affected population requires lifesaving assistance, with additional donor support needed to expand the reach of the humanitarian aid and kick-start recovery and reconstruction, with early recovery and restoration of livelihoods being a priority particularly in hard-to-reach communities.


However, the operation continues to run under the constraints of a volatile security environment, with a high number of daily kidnappings, roadblocks and fuel shortages, resulting in the temporary slowdown of activities on a regular basis. As such, all programs are developing detailed workplans that can be adapted to different scenarios and respond more efficiently to changes in the operating environment.

## Summary of Red Cross Red Crescent response to date

**Red Cross Red Crescent Network Support Haiti | Earthquake**

119 Rapid Response and ERU personnel deployed until now

60 Rapid Response and ERU personnel in country on 11/10/21

 **+ ICRC**

Red Cross Red Crescent National Societies and the secretariat are supporting the Haiti Red Cross Society (HRCS) with its earthquake response efforts. Sectors/areas of contribution are shown below.

	Unearmarked Contributions	Admin & Basecamp	CEA	Communications	Coordination	CVA	Finance	Forensics	Health	HR	IM
<b>Deployed Delegates</b>		Swedish RC Danish RC	IFRC	Canadian RC Italian RC Netherlands RC	IFRC Italian RC Swiss RC	IFRC	IFRC Swedish RC	ICRC	Canadian RC German RC Finnish RC French RC Icelandic RC IFRC Swiss RC	IFRC	American RC British RC Canadian RC Netherlands RC
<b>Financial Support</b>	Canadian RC Italian RC Japanese RC Korean RC Monegasque RC Netherlands RC Swiss RC			Spanish RC					British RC Hong Kong RC Mexican RC		
	IT/Tel	Logistics	PGI	PMER	PRD	PSS	Relief	RFL	Security	Shelter	WASH
<b>Deployed Delegates</b>	Austrian RC Finnish RC IFRC	British RC Spanish RC Swiss RC	Canadian RC Swedish RC	IFRC	IFRC	Lebanese RC	Belgium RC French RC Netherlands RC Luxembourg RC	ICRC	IFRC	German RC	French RC Norwegian RC Swedish RC
<b>Financial Support</b>	American RC	Finnish RC					American RC German RC Swiss RC			British RC Canadian RC French RC Hong Kong RC Spanish RC	American RC Canadian RC Mexican RC Netherlands RC Swiss RC

Haiti Earthquake | Movement Picture Updated: 15 October 2021 Page 5

The Haiti Red Cross Society (HRCS) is leading a multi-sectoral and multi-location response effort supported by the IFRC, Partner National Societies (PNS) and the International Committee of the Red Cross (ICRC). Search and rescue teams were deployed to the South, Les Nippes and Grand'Anse departments, ambulances transported victims from the airport to referral hospitals and deployed mobile water treatment modules. As of 14 October, HRCS has reached 8,207 families with water, food and essential household items, 3,845 people with hygiene promotion activities, and 2,666 with health care. More than 500 HRCS volunteers were mobilized in the immediate aftermath of the earthquake, out of whom 157 remain active. A cash feasibility study for the shelter component has been conducted to determine the use of Cash and Voucher Assistance (CVA) in the early recovery phase and beyond. Efforts have started to launch a Federation-Wide planning and implementation process.

Prepositioned stock from the **American Red Cross** and the **French Red Cross** PIRAC Platform were available in the immediate aftermath of the earthquake. The Government of Haiti opened a humanitarian corridor, allowing movement for aid shipments. The Airbus Foundation donated helicopter airtime for the movement of personnel. **IFRC** and **Finnish Red Cross** deployed a type 2 Emergency Response Unit (ERU) hospital in Les Cayes, which opened on 21 September, operated by **Canadian Red Cross, Finnish Red Cross, French Red Cross, German Red Cross, and Swiss Red Cross**. The IFRC, ICRC and 14 PNS have deployed 119 Rapid Response and ERU personnel in support of the HRCS. As of 15 October, 60 staff remain in-country.

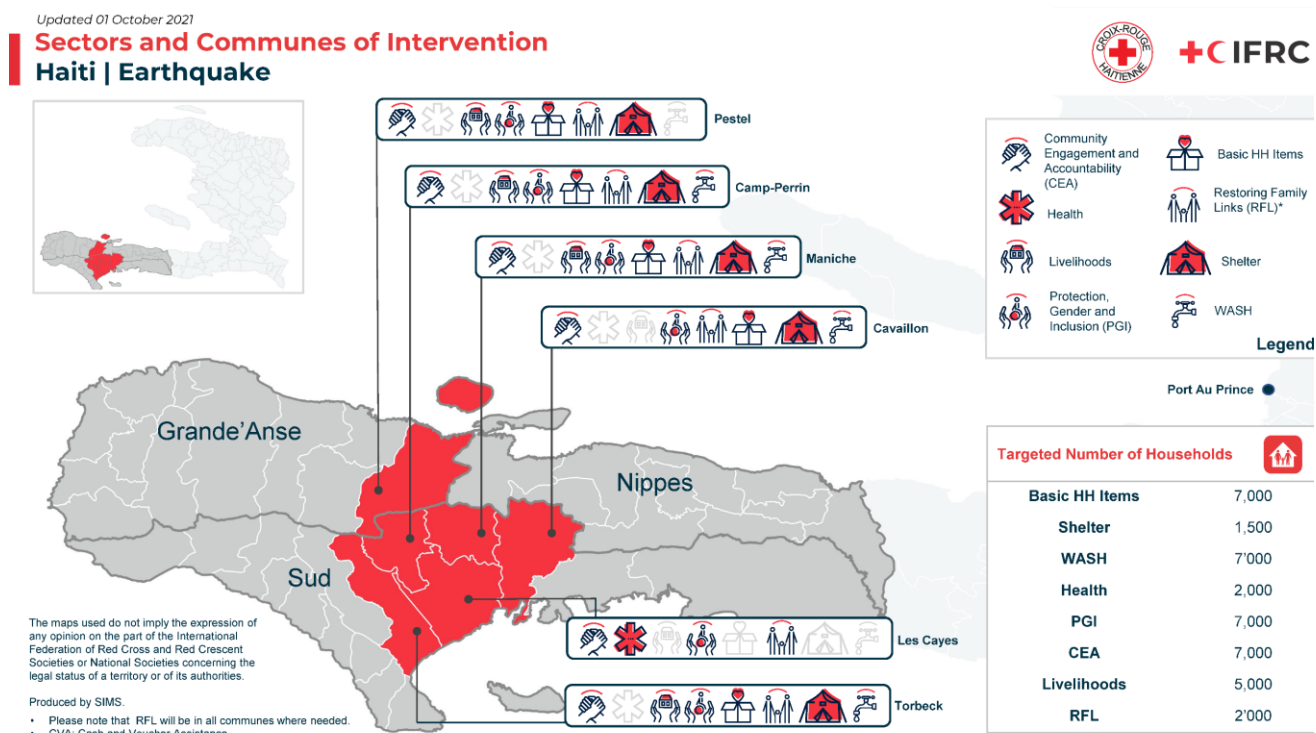
The **ICRC** is currently supporting the National Society in activities that improve access, acceptance, and security of the operation (Safer Access Framework) and as included in the Emergency Appeal, supporting with Restoring Family Links (RFL) and Management of the Dead activities. The progression towards recovery programming is also being coordinated among IFRC members, with the **Canadian Red Cross** working on rehabilitation of health centers in Les Nippes and Grand'Anse and **Spanish Red Cross** rehabilitating water systems at the same place. Potential collaboration with the **Netherlands Red Cross** is being discussed to support HRCS with the distribution of hygiene kits and the rehabilitation of drinking water supply systems. IFRC is coordinating with the **Swiss Red Cross** and the **Netherlands Red Cross** to provide multi-purpose cash to vulnerable population.

## THE OPERATIONAL STRATEGY

This revised Emergency Appeal adjusts the operational strategy as a result of more detailed needs assessments and a progressive transition from immediate response towards recovery and reconstruction. The revised operational strategy expands the scope of the intervention by increasing coverage of additional needs and promoting a continuum from relief to recovery to resilience building through an enhanced focus on early recovery and reconstruction activities.

## Needs assessment and targeting

Multi-sectoral rapid assessments identified a number of outstanding needs leading to the revision of the Emergency Appeal. **Access to safe water, sanitation services, hygiene promotion activities and epidemic prevention and community-based surveillance** all require reinforcement to avoid possible water-borne and vector-borne disease outbreaks. A significant need for **Mental Health and Psychosocial Support (MHPSS)** has been underlined from the sectorial clusters and local authorities. Institutional data demonstrates significant outstanding needs for **essential household items** in the Sud and Grand'Anse areas (40% and 50% respectively). Damage assessments indicate that there is a significant need for **shelter reconstruction** to facilitate a rapid transition to safe and dignified shelter solutions for the affected population. Needs assessment details can be found in the Strategic Sectors of Intervention section.



Sectors and communes of intervention in the affected departments as of 1 October 2021.

Community Engagement and Accountability (CEA), and Protection, Gender and Inclusion (PGI) approaches will continue to be integrated throughout the response areas. A *Do No Harm* approach will also be integrated into all aspects of needs assessments and programming, to avoid unintended negative consequences on our target communities, staff and volunteers, maximize impact, ensure access and better consider the deteriorating security situation in response planning and implementation.

## Coordination and partnerships

### Membership Coordination

HRCS leads the overall response, with the support of IFRC, PNSs and ICRC. The IFRC has deployed a number of membership coordination disaster response tools, aimed at strengthening membership resource mobilization efforts and operational response. These include the approval of a start-up Disaster Relief Emergency Fund (DREF) allocation of CHF 750,000 and the development of an Emergency Appeal and Emergency Plan of Action, as well as the mobilization of Rapid Response personnel and ERUs in a wide array of operations support and technical areas. The surge personnel are linking with the PNS who are actively supporting HRCS in coordinating response actions with local branches, providing technical expertise, and engaging in resource mobilization efforts. There are ongoing preparations to launch a Federation-Wide planning and implementation process, to ensure that the HRCS is at the center of the operation, with all bilateral and multilateral resources available implemented in the most effective and efficient manner. As part of the planning for a Federation-wide process, a Membership Coordinator Officer profile has been deployed.

### Movement Cooperation

HRCS convenes Movement Coordination meetings on a regular basis where all partners discuss priorities and actions. The ICRC is currently supporting the National Society in activities that improve access, acceptance, and security of the operation (Safer Access Framework) and as included in the Emergency Appeal, supporting with Restoring Family Links (RFL) and Management of the Dead activities.

### Partnerships and external coordination

The Humanitarian Country Team (HCT) provides a platform for the coordination of humanitarian action in Haiti. The implementation of the existing Humanitarian Response Plan is coordinated through the HCT and various sectoral Working Groups at national and departmental level, in which representatives of HRCS, IFRC and PNS participate. The earthquake triggered the launch of a Flash Appeal to respond to the additional humanitarian needs.

The HRCS works in close collaboration for a coordinated response with local, provincial, and national authorities and other humanitarian organizations. HRCS is a member of the National Disaster and Risk Management System (NGRD) and the National Emergency Operations Centre (COUN), coordinating with its branch network for the ongoing response. The UN Office for the Coordination of Humanitarian Affairs (OCHA) has been supporting the Haitian Government to coordinate actions through a sector-based system.

## Capacity analysis of the National Society in the country, risk analysis and scenario planning

The Haiti Red Cross Society has been a member of the IFRC since 1935 and acts as an auxiliary to the public authorities in the humanitarian field. It provides a range of services, particularly in health, social services, disaster relief, and assistance to people affected by conflict. It has 13 regional branches, 92 local committees, and around 10,000 volunteers.<sup>4</sup> In the area of operations, 3 HRCS regional branches are present, based in Les Cayes, Jeremie and Miragoane, coordinating 38 local branches at the municipal level (18 in the Sud Department, 10 in Grand'Anse and 10 in Nippes). These branches ensure the operational capacity of HRCS at the local level and can mobilize up to 1,000 volunteers throughout the area of operation according to the specific needs and skills.

---

<sup>4</sup> For more information, please see the [official site of HRCS](#).

HRCS has completed two rounds of the Preparedness for Effective Response (PER) process. These exercises as well as the lessons learned from the 2010 earthquake operation will allow HRCS and partners to gather evidence, identify critical areas of improvement and need for support to enhance capacities for an effective response.

### Risk assessment

The security situation in Haiti is orange as per IFRC Security standards. The security situation remains highly unpredictable due to the increase in criminality, with gang activity in several areas of the country. The IFRC security plans will apply to all IFRC staff throughout the operation. Area-specific Security Risk Assessment is conducted for any operational intervention, with risk mitigation measures identified and implemented.

Due to the insecurity of the context, protection of the most vulnerable groups could further deteriorate, with access to humanitarian aid being diverted. Following the earthquake, fewer services are available including for Sexual and gender-based violence (SGBV) and Child Protection, which needs to be considered when establishing referral pathways.

The deteriorating security situation could lead to delays or temporary suspension of activities, including possible repatriation of international staff, resulting in low level of implementation. This could raise the dissatisfaction of affected communities with the level of assistance received and erode the trust and relationships established with key stakeholders. This could in turn hinder access to the communities, increase insecurity and lead to further delays, potentially entering into a self-reinforcing dynamic of insecurity, mistrust, lack of access and low levels of assistance.

### COVID-19 Pandemic

The pandemic affects the implementation by increasing the risk of transmission among non-vaccinated national teams, as well as the risk of breakthrough cases when working in this context. Prevention methods are in place but can cause delays to emergency interventions. Response to COVID-19 is supported through the [IFRC Global Appeal](#), facilitating critical service provision while adapting to COVID-19. For more information, please consult the [COVID-19 operation page on the IFRC Go platform](#). The earthquake response can capitalize on previous trainings and existing knowledge among the volunteers to ensure that all actions are safe, and that COVID-19 prevention and awareness activities continue.

## B. PROPOSED AREAS OF INTERVENTION

### STRATEGIC SECTORS OF INTERVENTION



#### Shelter and essential household items

**People targeted: 35,000 people (7,000 families)**

Male: 17,500

Female: 17,500

**Requirements (CHF): 4,720,000**

#### Proposed intervention

**Needs analysis and population to be assisted:** Most houses in the affected areas have been severely damaged (75-90%) and some collapsed, very few reported minor damages. There are no proper collective centers, rather improvised shelters, and affected people tend to remain near their destroyed or damaged homes. The affected people, mostly in the rural areas require support for essential household items and shelter tools, temporary solutions for emergency shelter, construction materials or cash support for repair along with technical assistance during the process of rehabilitation or reconstruction. This is followed by strong actions on 'build back better'. The first response phase is focused on supporting HRCS to provide primary assistance to 7,000 affected families, an increase of 2,000 families over the previous Emergency Appeal, by distributing shelter and household items such as kitchen sets, blankets, tarpaulins and shelter tool kits to allow minor repairs or to set up an emergency

shelter. This revised Emergency Appeal includes an additional second line of response, aiming to support 1,500 households with the rehabilitation of the houses with minor damages and the reconstruction of the severely damaged houses. IFRC, HRCS and PNS response is under continuous coordination with all relevant Government authorities at the national and local level.

**This Emergency Appeal revision introduces the following changes:**

- An increase from 5,000 to 7,000 families in the target population for emergency shelter and essential household items.
- The inclusion of rehabilitation and reconstruction support for 1,500 families.

**Ongoing and planned activities:**

**Shelter assistance for short-term needs and essential household items**

- Deployment of Rapid Response Personnel specialized in Shelter and Relief.
- Provide emergency assistance to cover shelter and basic household needs of 7,000 families, consisting of in-kind distribution of blankets, tarpaulins, kitchen sets, hygiene kits and shelter tool kits.
- Orientations to volunteers and the affected households on the appropriate use of the provided shelter items.
- Coordination and consultation with Government at national and departmental levels, as well as with the Shelter Working Group.

**Shelter assistance for mid- and long-term needs**

- 1,500 families to be provided with Shelter assistance, 1,000 with Shelter rehabilitation/ retrofitting and 500 households with reconstruction.
- Structural assessment to analyse the level of damages and identify the feasible assistance (rehabilitation or reconstruction).
- Providing specialized training on build back better technique vs certified shelter design.
- Orientation of target families and their communities on good construction practices, regular and seasonal maintenance.
- Conduct market assessment on availability of construction materials and feasibility study on Cash and Voucher Assistance (CVA).
- Participatory Approach for Safe Shelter Awareness – PASSA to be rolled out as part of the multi-hazard shelter preparedness activities, building local capacities for Risk and Disaster Management.



## Livelihoods and basic needs

**People targeted: 10,000 people (5,000 families)**

Male: 5,000

Female: 5,000

**Requirements (CHF): 1,520,000**

### Proposed intervention

**Needs analysis and population to be assisted:** About 980,000 people (45% of the population) in the affected departments are estimated to be severely food insecure, IPC Phase 3 (Crisis) and above between September 2021 and February 2022, compared to 820,000 people between August 2020 and February 2021.<sup>5</sup> Destruction of productive assets and infrastructure severely affected livelihoods, aggravating an already alarming food insecurity situation. A multipurpose Cash and Voucher intervention will allow targeted communities to cover basic needs and restart their income generating activities, to minimise the effects on their livelihoods. Based on the REACH and consortium of organizations' market assessment for the minimum expenditure basket, the agreed transfer value within the Cash WG is USD 125/transfer. IFRC's transfer value is USD 250, and includes replacement of working tools in addition. There are 3 instalments planned. This approach will follow the initial

<sup>5</sup> [WFP Integrated Food Security Phase Classification \(IPC\) analysis](#)

emergency response of distribution of household items and some food items donated bilaterally to the HRCS. Field assessments are to be carried out to identify the most vulnerable groups and those requiring immediate assistance with greater precision. A Protection, Gender and Inclusion (PGI) mainstreaming approach will be considered to incorporate marginalised groups or at greater risk of violence.

**This Emergency Appeal revision introduces the following changes:**

- An increase from 2,000 to 5,000 families in the target population.
- Further definition of the CVA program.

**Ongoing and planned activities:**

- Rapid livelihood needs assessment.
- Conduct a Cash and Voucher Assistance (CVA) feasibility study with:
  - Financial Service Providers mapping to explore potential mechanisms.
  - A rapid market assessment to define if markets are functional and can supply the required commodities.
  - A risk analysis of the different modalities.
- Supporting the distribution of food (bilateral donations to HRCS).
- Multipurpose cash grants for basic needs and for replacement of working assets.
- Community engagement and accountability (CEA) activities to support the distribution of humanitarian assistance (in-kind or CVA) and livelihoods activities.
- Generate protection and recovery of livelihoods activities.
- Explore entry points for market-based programming.
- Post-distribution monitoring including market/price monitoring and evaluation.



## Health

**People targeted: 10,000 people (2,000 families)**

Male: 5,000

Female: 5,000

**Requirements (CHF): 6,390,000 (including Red Cross Emergency Hospital (RCEH) deployment)**

### Proposed intervention

**Needs analysis and population to be assisted:** Following the earthquake, multiple hospitals in the affected departments were quickly overwhelmed with the number of patients requiring immediate care. User fees and transportation are significant barriers to access to health care, and hospitals have limited capacity, dealing with an influx of patients. As of October, health facilities have experienced a decrease in acuity of care among earthquake-affected populations, thus non-event health concerns have come to the forefront of care. Pediatrics and malnutrition care as well as maternity care remain a considerable gap. Post-earthquake measures for prevention of disease transmission and control of possible epidemics are crucial. Organizations currently operating mobile clinics across the affected departments are identifying diseases linked to a limited access to water, sanitation, hygiene and shelter. With displaced people gathering in temporary shelter and some people living in or near damaged houses, introducing community-based surveillance (CBS) and an early warning system needs to be explored to help detect and control potential outbreaks early. Cases of sexual violence suggest an increased need to ensure access to care for survivors. Activities will be coordinated with PGI to ensure adequate prevention and response mechanisms are provided. Mental Health and Psychosocial Support (MHPSS) are critical aspects of the intervention as people have been highly impacted by the earthquake.

**This Emergency Appeal revision introduces the following changes:**

- Inclusion of the Red Cross Emergency Hospital deployment.
- Strengthening of epidemic prevention and community-based surveillance.

- Stronger focus on MHPSS.

### **Ongoing and planned activities:**

#### ***Immediate aftermath***

Search and rescue activities, provision of First Aid, and transportation of patients from Port-au-Prince airport to referral hospitals were conducted in the early stages of the response.

#### ***Emergency secondary and primary health care***

- Deployment of Rapid Response personnel; conducting rapid health needs assessment.
- Red Cross Emergency Hospital, with referral pathways and ambulance services.
- Provision of medical and mental health care to survivors of Sexual Violence, awareness-raising in the community on the importance of seeking care.
- Gap analysis on services and capacity of hospitals in the three affected departments.

#### ***Public Health***

- IFRC Epidemic Control training of HRCS volunteers and Ministry of Health (MoH) staff.
- Support MoH on community-based surveillance and existing surveillance systems.
- Provide health messages and prevention actions to reduce transmission and morbidity on diseases of high epidemic potential.
- Communication on COVID-19 integrated into CEA activities.
- Engagement with community groups such as the Women's, Elders and Youth Associations.
- Exit surveys with RCEH discharged patients and follow up interviews in the community to assemble feedback.

#### ***Mental Health and Psychosocial Support***

- Rapid needs assessment on mental health and psychosocial needs of affected population.
- Establish MHPSS referral pathways for RCEH and for MHPSS community activities.
- Establishing PSS support spaces in shelters (with a focus on children), organizing peer-to-peer groups for youth and women.
- Provide trainings for HRCS volunteers on Psychosocial First Aid (PFA) and establish MHPSS support systems for volunteers and staff.
- Link with Restoring Family Links (RFL) services for individuals seeking missing relatives.



## **Water, sanitation and hygiene**

**People targeted: 35,000 people (7,000 families)**

Male: 17,500

Female: 17,500

**Requirements (CHF): 1,900,000**

### **Proposed intervention**

**Needs analysis and population to be assisted:** Rehabilitation of drinking water systems, household water treatment, hygiene promotion, rehabilitation of institutional WASH including in schools and healthcare facilities constitute acute needs along with menstrual hygiene management support for affected women and girls. Critical need for safe and sufficient water supply continues being a priority for the recovery phase, with efforts to rehabilitate and improve damaged water supply systems. Household water treatment and storage appears to be a viable solution for many households reliant on handpumps and/or natural springs for their drinking water supply. With high levels of open defecation and unsafe and low coverage of sanitation, hygiene promotion interventions that break the chain of transmission and contamination become increasingly important. The main sanitation intervention will target reconstruction of sanitation facilities at house level as an integrated activity with the shelter program, while solid waste management will be ensured at displaced people's sites.

### **This Emergency Appeal revision introduces the following changes:**

- An increase from 2,000 to 7,000 families in the target population.

- The inclusion of rehabilitation and reconstruction activities to promote recovery of basic services.

#### **Ongoing and planned activities:**

- Assessment of WASH needs, capacities, and gaps in coordination with government and other stakeholders.
- Provide WASH supplies, hygiene and cleaning kits, supported with adequate Hygiene Promotion messaging to 7,000 families (35,000 people).
- Temporary WASH support in terms of water provision and waste management reaching 2,500 people.
- Rehabilitation of drinking water pipelines (and community water systems).
- Household water treatment and storage support to 1,200 families (6,000 people).
- Hygiene promotion at community level to break the chain of infection covering 7,000 families.
- Development of a menstrual hygiene management (MHM) strategy including the provision of MHM kits reaching 2,500 women and adolescents.
- Rehabilitation of institutional WASH in schools and healthcare centres.
- Reconstruction/rehabilitation of latrines and set up of rain harvesting systems reaching 300 families.



## **Additional Areas of Focus: Protection, gender and inclusion; Migration; Disaster risk reduction**

**People targeted (PGI): 35,000 people (7,000 families)**

**People targeted (Migration): 10,000 people (2,000 families)**

**People targeted (DRR): 3,000 people (600 families)**

**Requirements (CHF): 716,000**



### **Proposed intervention**

#### **Protection, Gender and Inclusion (PGI)**

**Needs analysis and population to be assisted:** Women, girls, people with disability, older people are the groups in the highest level of vulnerability in Haiti. These groups are the most at risk of sexual and gender-based violence. Reports have been mentioning the increase in SGBV over the past few months due to gang violence and a fragile general context, which could become more serious following the earthquake.

Adopting a *Do No Harm* approach across all activities to mitigate external risk factors such as the worsening security situation, prolonged delivery of humanitarian assistance and growing mistrust in our target communities will be the key focus for PGI support. Strong linkages with community engagement and engagement with key stakeholders such as local authorities will be essential to ensure that the operation respects said approach and prevents the unfolding of unintended negative consequences of our intervention. In addition, mitigating the risks of SGBV, Prevention of Sexual Exploitation, Abuse and Harassment (PSEA) and child protection in the Red Cross intervention is a priority. To do so, all IFRC and HRCS staff and volunteers should receive appropriate briefings and trainings. Referral pathways will be established through mapping of services in coordination with other actors and will be disseminated amongst staff and volunteers so that appropriate assistance can be provided to survivors. PSEA institutional support to develop a Red Cross national strategy and case management internal mechanism will be included as part of the operation.

#### **This Emergency Appeal revision introduces the following changes:**

- An increase from 5,000 to 7,000 families in the target population.

#### **Ongoing and planned activities:**

- Deployment of a PGI Rapid Response for 3 months, and recruitment of national IFRC and HRCS PGI Officer.
- Ensure IFRC and National Society staff and volunteers have been briefing on the Code of Conduct, PSEA and child safeguarding
- Conducting a Rapid PGI Assessment.

- Support sectoral teams to include measures to address vulnerabilities specific to gender and diversity factors (including people with disabilities) in their planning, and with collection and analysis of sex, age and disability disaggregated data.
- Rollout and implementation of HRCS Gender, Diversity and Social Inclusion Policy and Plan of Action.
- Develop SGBV and child protection mapping/referral pathways for all 5 communes of intervention.
- Training of IFRC and National Society staff and volunteers on PGI in emergencies including on addressing child protection and preventing/responding to SGBV.
- Network of 12 Focal Points in Sud department for service mapping, case identification and referrals.
- Support development of PSEA Policy and plan of action for RCRCM, training of HRCS staff in PSEA.
- Develop and include messages on preventing and responding to SGBV in all community outreach activities.

### **Migration:**

**Needs analysis and population to be assisted:** The number of Internally Displaced Persons (IDPs) was registered at the end of 2020 at 34,000 people in Haiti,<sup>6</sup> with the upswing in gang violence causing a threefold increase in the number of new displacements, a situation that has been exacerbated since the earthquake of 14 August. Out of the 14,000–16,000 migrants who arrived to the US-Mexico border between 19 and 29 September, approximately 4,600 have been deported to Port-au-Prince and Cap-Hatien, with this number expected to increase.<sup>7</sup> After the earthquake, Restoring Family Links (RFL) is required with a national and international component. The HRCS has an active RFL system activated, and further RFL actions are needed to expand services to support connectivity between separated family members. Together with the IFRC and the ICRC, the Haiti Red Cross Society will continue to assess the needs and develop the RFL response. Tracing Requests will be collected by the Family Links Network around the world (192 National Societies and 100 ICRC delegations).

### **This Emergency Appeal revision introduces the following changes:**

- An increase from 1,000 to 2,000 families in the target population.
- Further definition of activities.

### **Ongoing and planned activities:**

- Monitoring the internal and cross-border displacement based on scenario building.
- Coordination with HRCS to provide reliable information about the migratory and international protection issues.
- Advocacy with local and national authorities to support the internal displaced population and RFL activities.
- Provide Restoring Family Links services in coordination with ICRC and National Societies in the region.
- Training on tracing requests and registration of Unaccompanied Asylum Seeking Children (UASC).
- Conducting a training on RFL data management to reinforce HRCS data management skills and capacities.
- Consolidate HRCS volunteers' information regarding deceased persons and burial sites concerning the August 2021 earthquake, collected from families and other reliable sources.
- Strengthen Management of the Dead (MotD) capacities after disasters at local level and provide basic equipment to first responders.

### **Disaster Risk Reduction:**

**Needs analysis and population to be assisted:** High levels of socioeconomic issues and political instability have left Haitians extremely vulnerable to natural phenomena. Hurricanes and tropical storms regularly hit Haiti, causing massive floods and deadly landslides. The compounding effects of these natural events overlap with the ongoing COVID-19 pandemic. Constant monitoring of upcoming hydrometeorological events, and pre-emptive multi-hazard preparedness measures are necessary, and volunteers and personnel need to strengthen and expand their multi-hazard preparedness capacities. Capacity-building on multi-hazard preparedness, Early Warning/ Early Action, community/ family preparedness are essential, as well as continuous alignment with key

<sup>6</sup> [Global Report on Internal Displacement 2021, Internal Displacement Monitoring Centre.](#)

<sup>7</sup> [CrisisInSight, 22/09/2021, ACAPS.](#)

stakeholders to operate the Humanitarian Corridor. It is essential that response efforts are undertaken with minimum damage to the already fragile environment. Response and recovery efforts must consider environmental considerations and carry ecological assessments.

**This Emergency Appeal revision introduces the following changes:**

- Inclusion of hurricane contingency plan and business continuity plan for the earthquake operation.

**Ongoing and planned activities:**

- Monitoring of potential hazards and ongoing crises.
- Coordination with Regional Cluster Delegation and National Society about potential new threats.
- Development of Hurricane Contingency and Business Continuity Plan for the earthquake operation.
- Dissemination of multi-hazard preparedness messaging based on Public Awareness and Public Education (PAPE), including preparation to Hurricanes, Floods and COVID-19.
- Build local capacity by supporting Communal and Local Committees for Risk and Disaster Management:
  - Ensure COVID-19-safe DRR activities are in line with the “Climate-smart DRM programming during the COVID-19 pandemic”<sup>8</sup> by providing support and the necessary equipment to local committees, volunteers, as well as affected schools to support reopening.
  - Conduct multi-hazard disaster preparedness activities in communities and schools using PASSA,<sup>9</sup> including training volunteers in emergency first aid, creating evacuation routes and plans, providing equipment.
  - Support the development of community contingency planning and simulation drills.
  - Form and train disaster response teams.
- Assessment of current early warning systems, supporting the creation of new ones when appropriate.
- Support DRR activities to recover basic infrastructure in communities.
- Conduct Environmental Assessment (NEAT+) of disaster risk to evaluate the extent of the damage.

## ENABLING ACTIONS

### Strengthening National Societies

Requirements (CHF): 1,200,000

HRCS is supported to build capacities in emergency response and disaster preparedness. A volunteer management system is rolled out to facilitate knowledge management and guarantee the sustainability of the actions after this operation. Volunteers are trained in cross-cutting sectors such as CEA and PGI. All actions aim at reinforcing **organizational development** (equipment, training, support for planning), **volunteering development** and **duty of care** (including insurance, support for volunteers affected by the emergency, PSS, rotation of personnel and PPE). The **media and public communication reach** is enhanced through human resources and capacity building strategies to position the National Society in the humanitarian sector.

Emphasis is also put on **long-term development, logistics and transportation, sustainability of activities**, staff and volunteer capacity to understand and prepare for contextual hazards and risks, scenario planning, revision of contingency plans, and strengthening business continuity plans. The **operational capacities** of HRCS are enhanced in emergency needs assessment and emergency operations centre management. A **resource mobilization strategy** based on income generation activities underpins both the endeavour of the Haiti Red Cross and the sustainability of its plans and support the **National Society Development Plan**.

### Influencing others as strategic partners

Requirements (CHF): 570,000

<sup>8</sup> [Climate Smart Disaster Risk Management during the COVID-19 Pandemic, 15/02/2021, Global Disaster Preparedness Center.](#)

<sup>9</sup> [IFRC Participatory Approach for Safe Shelter Awareness.](#)

### ***Coordination with the authorities and humanitarian actors***

IFRC, as Shelter Cluster co-lead and REDLAC Shelter Working Group lead, is coordinating with OCHA and key shelter and settlements actors to ensure coordination of the shelter and settlements response. IFRC is providing information management capacity to support the coordination of the overall humanitarian sector shelter and settlements response. IFRC is engaging with diplomatic missions and key donor agencies to promote a shared understanding of the earthquake response. It is partaking in the Humanitarian Country Team and other coordination platforms. The IFRC is supporting HRCS with resource mobilization. Regular information and fundraising resources related to this emergency have been shared with partners and potential donors. Four Red Cross Red Crescent partner calls and two external partners calls were held with governmental agencies, UN agencies, and the private sector in attendance, and another one will be held after the revision of the Emergency Plan of Action (EPoA).

## **Ensuring accountability**

### **Requirements (CHF): 2,260,000 (Including ERU deployments)**

#### ***Community Engagement and Accountability (CEA)***

A CEA approach will promote participation and feedback from affected communities, based on an analysis of the communities' needs and information channels to support the strengthening of their response capacities to the earthquake. The feedback mechanism will rely on regular reports and briefs from volunteers on captured feedback as well as prompted feedback in community meetings, and possibly quantitative surveys during implementation of specific activities. CEA training for volunteers will set up ticketing systems for complaints and requests on activities. HRCS is planning to set up a phone line to receive questions and feedback on all activities. The CEA approach will focus on providing capacity through training and mentoring for volunteers to engage in participatory ways in all targeted areas to inform and discuss with the communities the planning and delivery of activities, as well as providing specific CEA-tailored support and messaging to sectors. Establishing trusted channels of communication with our target communities is critical to ensure that sensitive feedback such as those related to Sexual Exploitation and Abuse (SEA) can be reported and followed upon by our trained team of staff and volunteers. As such, linkages between CEA and PSEA will be strengthened through briefings for all staff and volunteers and awareness raising efforts amongst the communities we aim to assist. Further information on PSEA activities can be found under PGI activities, in the Additional Areas of Focus section above.

#### ***Security***

Emphasis must be placed on the safety of Red Cross activities, staff, and volunteers. There is a strong need for an active security footprint that can activate mitigation protocols, monitor humanitarian response work, coordinate with security forces, and ensure all social media, news, and communication networks are monitored. Civil-military relations support will also be needed to help coordinate all civil-military actions from partnering countries. To support this, ARO security structure monitors the situation, liaises with the National Society, and shares information as it becomes available. The operation will be hiring additional capacities to have security support at both Port-au-Prince and the southern departments. The Movement has also implemented security contingency measures to protect staff and assets. Mitigation plans have been developed and are constantly updated.

#### ***Logistics and Supply Chain***

The Swiss Red Cross logistics team continues to support packaging, warehousing, transportation of humanitarian assistance. The team is working closely with the BENELUX Relief ERU, assisting the needs of HRCS and helping to increase their capacity to give continuity to the logistics operations in the future, with the preparation of 3 stores as a warehouse at the headquarters of HRCS. The procurement plan for the recovery phase is being developed to support the implementation of the different programs.

#### ***Communications and advocacy***

An active communication approach is ongoing to support journalists requesting stories, technical information, photographs and videos from the Movement. Proactive and reactive communication plans will be developed together with the HRCS, and support will be provided to the National Society to increase its media outreach

and advocacy, including the strengthening of capacities at the branch level. Additional communications staff will be activated during the hurricane season or other overlapping emergencies.

#### **Planning, Monitoring, Evaluation, and Reporting (PMER)**

HRCS, with IFRC support, will oversee all operational, implementation, monitoring, evaluation, and reporting activities of the current operation. IFRC, through Rapid Response personnel, will provide technical support in operational and program management to ensure the operation's overall objective is met. The IFRC will support the National Society in establishing optimal monitoring and evaluation plans to ensure appropriate accountability, transparency, and financial management of the operation.

#### **Information Management (IM)**

The Information Management team has created a GO page dedicated to the emergency that can be accessed [here](#). The initial strategy will cover the Information Management role with Surge support and activation of the Surge Information Management Support (SIMS) IFRC network to ensure proper Information Management support to HRCS. IM support to HRCS will focus on collecting, managing, and analysing secondary data, data management support to delegates in-country, and survey design to understand affected population aid preferences and intentions. Spatial data and satellite imagery analysis to estimate the severity of impacts and ensure targeting and development of visual information products to support decision-making and reporting purposes.

#### **Information technology support (IT)**

Communications in the affected areas is being restored. Given the security context of the operation, there is need to strengthen the ICT and VHF infrastructure both at the field and at HRCS basecamp in Port au Prince. The current ICT infrastructure was updated at Base Camp to extend Wi-Fi Coverage and extra equipment for people being deployed and for future operational staff. The IT/Tel ERU deployed is supporting the field team in the South with internet connectivity through the installation of VSAT and with VHF repeaters, with additional hand-held radios procured to ensure radio coverage every time there is movement of personnel.

## **FUNDING REQUIREMENTS**

### **EMERGENCY APPEAL**

#### ***MDRHT018 – Haiti Earthquake***

##### ***Funding requirements – summary***

<b>Area of Intervention</b>	<b>Needs in CHF</b>
SHELTER	4,720,000
LIVELIHOODS AND BASIC NEEDS	1,520,000
HEALTH	6,390,000
WATER, SANITATION AND HYGIENE	1,900,000
OTHER AREAS OF FOCUS	716,000
STRENGTHENING NATIONAL SOCIETIES	1,200,000
INFLUENCE OTHERS AS STRATEGIC PARTNERS	570,000
ENSURING ACCOUNTABILITY	2,260,000
<b>TOTAL FUNDING REQUIREMENTS</b>	<b>19,276,000</b>

## Contact information

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

### **In the Haitian Red Cross Society (HRCS)**

- President of Haitian Red Cross Society; Guiteau Jean-Pierre; E-mail: [president@croixrouge.ht](mailto:president@croixrouge.ht)
- Deputy Executive Director; Guetson Lamour; E-mail: [g.lamour@croixrouge.ht](mailto:g.lamour@croixrouge.ht)

### **In the IFRC Americas Regional Office**

- Head of the Disaster & Climate Crisis, Prevention, Response, and Recovery (DCPRR) Department; Roger Alonso Morgui; E-mail: [roger.morgui@ifrc.org](mailto:roger.morgui@ifrc.org)
- Continental Operations Manager; Felipe Delcid; E-mail: [felipe.delcid@ifrc.org](mailto:felipe.delcid@ifrc.org)
- Communications Manager for the Americas; Susana Arroyo; E-mail: [susana.arroyo@ifrc.org](mailto:susana.arroyo@ifrc.org)
- Security and Civil Military Relations Coordinator for the Americas; Jorge E. Zequeira; E-mail: [jorge.zequeira@ifrc.org](mailto:jorge.zequeira@ifrc.org).
- Planning, Evaluation, Monitoring and Reporting (PMER) Manager, Maria Larios, email: [maria.larios@ifrc.org](mailto:maria.larios@ifrc.org).

### **For IFRC Latin Caribbean Cluster Delegation (CCD):**

- Head of CCD; Elias Ghanem; Email: [elias.ghanem@ifrc.org](mailto:elias.ghanem@ifrc.org)
- Deputy Head of Delegation; Chantal-Sylvie Imbeault; Email: [chantale.imbeault@ifrc.org](mailto:chantale.imbeault@ifrc.org)
- Regional Security Officer, Peter Finlay; Email: [peter.finlay@ifrc.org](mailto:peter.finlay@ifrc.org)

### **For IFRC Resource Mobilization and Pledges support:**

- Head of Partnerships and Resource Mobilisation (PRD) Americas Region; Sandra Romero; E-mail: [sandra.romero@ifrc.org](mailto:sandra.romero@ifrc.org)

### **For In-Kind donations and Mobilization table support:**

- Head of Regional Logistics Unit Americas Region; Mauricio Bustamante; E-mail: [mauricio.bustamante@ifrc.org](mailto:mauricio.bustamante@ifrc.org)

### **In the IFRC Geneva Headquarters:**

- DREF Senior Officer; Eszter Matyeka; E-mail: [eszter.matyeka@ifrc.org](mailto:eszter.matyeka@ifrc.org)
- Operations Coordination Senior Officer; Antoine Belair; E-mail: [antoine.belair@ifrc.org](mailto:antoine.belair@ifrc.org)

## How we work

All IFRC assistance seeks to adhere the **Code of Conduct** for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGO's) in Disaster Relief, the **Humanitarian Charter and Minimum Standards in Humanitarian Response (Sphere)** in delivering assistance to the most vulnerable, to **Principles of Humanitarian Action** and **IFRC policies and procedures**. 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.

**Jagan Chapagain**  
Secretary General

---