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# Emergency appeal operation update

## Haiti: Earthquake Recovery

 International Federation  
of Red Cross and Red Crescent Societies

### Emergency appeal n° MDRHT008 GLIDE n° EQ-2010-000009-HTI Operation update n°35 30 August 2013

**Period covered by this Ops Update:**  
January to June, 2013

**Appeal target (current):** The overall budget is 294,309,878 Swiss francs including the Emergency Response Units (ERUs) value. The current appeal target without the ERUs value is 259,457,988 Swiss francs.

[<click here to view the attached Revised Emergency Appeal Budget>](#)

**Appeal coverage:** 92%; [<click here to go directly to the updated donor response report, or here to link to contact details >](#)

Children being shown how to wash their hands with soap during a sensitization session conducted by the hygiene promotion team. Photo: IFRC



#### Appeal history

Date	Activity
January 2010	Disaster Relief Emergency Fund (DREF): CHF 500,000 was initially allocated from the Federation's DREF to support the Haiti Red Cross Society (HRCS) to respond
13 January 2010	A <a href="#">preliminary emergency appeal</a> for CHF 10.1m was launched to support the HRCS to immediately deliver life-saving assistance to some 20,000 families for nine months
16 January 2010	A <a href="#">revised preliminary emergency appeal</a> with a revised budget of CHF 105.7m to assist up to 60,000 families for three years was issued
9 February 2010	<a href="#">Operations Update n° 5</a> was published, reflecting revised objectives for the six-month relief phase of the operation under the plan of action, as well as a revised budget of CHF 218.4m
5 October 2010	A <a href="#">summary of the revised plan of action</a> was issued, with a total budget of CHF 314,329,971.
29 December 2011	A <a href="#">revised summary plan of action</a> was issued on 29 December 2011 to reflect the transition from the emergency relief to the recovery phase of the operation.
14 December 2012	A <a href="#">revised summary plan of action</a> for the recovery phase with an adjusted budget of 274,347,516 Swiss francs was issued on 25 February 2013.
13 June 2013	Operations Update No 34 was issued announcing the change from publishing quarterly updates to issuing 6-month updates

**Programme Summary:** The Haiti Red Cross Society in coordination with IFRC and other partners have been implementing initiatives that would enable the Haitian population effectively recover from the devastating effects of the earthquake and become more resilient as well as be prepared for future calamities. These initiatives range from shelter solutions, sanitation, livelihoods as well as creating awareness on issues related to health, hygiene practices and disaster preparedness.

To ensure that urban communities live in safer, healthier and improved habitat, several trainings have been conducted in targeted communities. The trained members have formed working groups that go out and collectively clean the streets as well as gather and dispose of waste so as to reduce risks of water-borne diseases. The community members have also assessed the risks in their environment and developed plans of action on how to address them. Implementation of the action plans is on-going.

To improve livelihoods, IFRC supported Community-based Organizations (CBO's) to run micro-projects that would benefit the communities. The CBOs were trained in various business ventures and some were provided with toolkits to start-up of their businesses. In total, 854 people have been trained so far and/or provided with toolkits for start-up. IFRC also supported entrepreneurs by training them on rubble recycling for use in the manufacture of items such as roof tiles, flower pots, pavements, among others. The Federation has also provided some micro enterprises with loans to grow their businesses. To ensure that communities lived in security, IFRC provided trainings in violence prevention and conflict management. A total of 936 households have been trained during the reporting period.

The repair and retrofit project is working with selected households to repair houses and ensure that the physical living environment is being improved. Seventy four per cent (74%) of the targeted households are now living in repaired/retrofitted or new permanent houses. The addition of toilet and shower facilities has given many a very positive outlook on their living environment being improved and it has been observed that they are keeping these facilities clean.

The French Red Cross (FRC) with funding support from the IFRC secretariat has constructed 160 Ecological Sanitation (ECOSAN) latrines in Croix-des-Bouquets, Ouest Department. In total, 1,371 individuals (263 households living in 200 shelters) have benefited from the latrines within the time frame of this project. In addition, FRC and a local institution called 'ECCSA' are setting up a waste management system, which will provide the community with economic incentives for those that are interested in recycling.

The IFRC, through its shelter solutions programme, continued to contribute to meeting the shelter needs of the affected population in Haiti. IFRC is also supporting beneficiaries of its programme with unconditional grants for families to engage in small business opportunities, develop skills, sustain their habitat and improve their living conditions. As of June 2013, a total of 13,616 households had received resettlement grants. This represents a 105% achievement of the planned target.

For camp mitigation, the hygiene promotion (HP) team was replaced by a smaller "Camp mitigation" team of four staff and has mainly focused on preparing community mobilizers to continue HP activities in view of IFRC phasing out its intervention in camps by June 2013. IFRC continues to facilitate collaboration between camps committees and a private operator called JEDCO that manages desludging activities for DINEPA.

In order to increase community resilience in the face of natural disasters, First Aid, Epidemic Control for Volunteers (ECV) and Disaster Preparedness trainings were conducted for community mobilizers. In addition, vigilance committees were set up and equipped to ensure they are prepared and are quick to respond to the needs of camp residents in case of a disaster.

The Leogane water and sanitation project was completed on 30 June 2013 with most of the targets being 100% achieved. A total of 3,065 latrines were constructed/rehabilitated to which 3,003 hand washing stations and 3,026 garbage bins were provided. The hygiene promotion team completed its support to water and sanitation components and will, in future, continue as part of the Health project. For health and care activities, a total of 597 community facilitators have been registered and 58 of them have completed the CBHFA training. These community facilitators have been conducting sensitization session on Malaria, mother and child health as well as proper hygiene practices reaching a total of 8,928 households (34,060 beneficiaries).

The Health department of the Haiti Red Cross Society (HRCS) has been implementing various activities during the period under review with the aim of strengthening the capacity of target populations in preventing and managing injuries and common health problems in emergency and non-emergency situations. This has been

done through a network of well trained volunteers. From January to June 2013, community volunteers were trained in Community Based Health and First Aid (CBHFA) in action approach. HRCS volunteers trained in ECV have been conducting awareness sessions in the community on prevention of Malaria and Diarrhoea. Through financial support from United Nations Children's Fund (UNICEF), the psychosocial support programme has been able to train its volunteers in psychosocial activities, who in turn conducted various activities in the communities reaching 580 people. With the support of Netherlands Red Cross, HIV activities were conducted in South and South-east departments. The violence prevention unit conducted several activities during the reporting period including awareness raising on violence prevention targeting women and youth, campaigns during key international days as well as dissemination of Information, Education and Communication (IEC) materials. The major challenge for the Health department is that of delayed implementation of planned activities due to the Memorandum of Understanding (MoU) between HRCS and IFRC not being signed.

For the Disaster Risk Management Department, the Red Cross Movement has been supporting HRCS in establishing, equipping and training community intervention teams (EIC<sup>1</sup>), with about 191 EICs formed as of 30 June 2013. This has ensured that the teams are ready to respond to any disasters as well as participate in risk reduction and mitigation activities in their communities. The community intervention team has also enabled the reinforcement of the community early warning system (EWS). This has complemented the pilot project "first responder initiative" where trained communities are prepared to respond to different disasters in their communities. In addition, a great investment has been made in terms of supporting community preparedness with the component of community sensitization on risk knowledge using "KDV – Kuri di Vwazan w". This is done with support from trained community volunteers.

The Technical Movement Coordination Unit continued providing technical, strategic and programmatic inputs to RCRC partners. This was in the areas of Livelihoods, settlement, Disaster Risk Management, Health, Water and sanitation as well as evaluation, accountability and learning.

With the aim of implementing long term programmes, the National Society Knowledge Development (NSKD) unit has been supporting HRCS to develop its long term planning framework (2014-2017) as well as its corresponding 2-year operational plan (2014-2015). In this regard, before the end of 2013 a Revised Emergency Appeal will be published which will revise the budget taking into consideration the programmes which will be henceforth under the long term planning framework.

## The situation

Three and a half years after the devastating earthquake of magnitude 7.0 that caused huge human and material loss in Haiti, the number of individuals still remaining in displaced persons camp sites continues to decrease. From an initial 1.5 million in July 2010, an estimated 278,945 internally displaced people (or about 70,910 households) remain in 352 IDP sites. This is according to latest quarterly Displacement Tracking Matrix (DTM) for Haiti. Compared to 2010, this represents a decrease of about 82% and 80% in overall IDP population and 77% in overall number of camps. Return programmes offering rental subsidies carried out by various partners including HRCS/IFRC are the major intervention contributing to the closure of IDP sites. The Camp Coordination and Camp Management (CCCM)/Shelter Cluster in which IFRC is a member continues to focus on alternative shelter solutions such as rental and relocation options for camp dwellers.

According to an [OCHA](#) press release in March 2013, there had been serious concerns in the country on cases of forced evictions of IDPs from camps by land owners where the camps are situated. Some of the families affected have suffered intimidation, physical violence and destruction of their shelters.. More than 66,000 IDPs in 150 camps have been victims of forced evictions since July 2010 while more than 73,000 people living in 87 camps are facing threats of eviction in 2013. Many of the internally displaced persons (IDPs) who still remain in camps expressed their willingness to relocate to safer shelter and permanent solutions if they could access such opportunities.

The overall trend of cholera cases shows a steady decline in the number of new infections and mortality rate from January to date. According to MSPP<sup>2</sup>, there were 9,261 new cases in January 2013 and 4,713 new cases in June 2013. This shows a 50% decrease. However, the month of June saw a 40% increase of cholera cases as compared to May 2013 (3,357). Experts attribute this resurgence to the beginning of the rainy season in May.

<sup>1</sup> In French: Equipe d'Intervention Communautaire(EIC)

<sup>2</sup> Ministère de la Santé Publique et de la Population (Ministry of Public Health of Haiti)

The Cholera peak season is related to pre-disposed conditions such as poor hygiene and sanitation. This is aggravated by the rainy season. During these times, more and more people frequent health facilities, the numbers being more than the human and material capacity of these facilities. As mentioned earlier, there has been a steady decline of cholera cases in Haiti from what was reported in 2011 and what is being reported in 2013. This can be attributed to the efforts of MSPP and other humanitarian organizations including IFRC/HRCS to control the epidemic. More efforts are under way to further improve the containment of the disease as well as reacting to new cases.

The Hurricane Sandy which hit Haiti in October 2012, caused human and material damages including the death of more than 50 persons and several others injured and missing, and prompted the government to declare a national state of emergency during the period. The impacts of Sandy and Tropical Storm Isaac (24 August 2012) which had earlier made landfall in the country on agricultural production exposed about half of the country's population and mainly the rural population to acute food insecurity. IFRC launched an emergency appeal to support HRCS to assist some 27,250 individuals most affected by the hurricane. [Click here](#) for the revised emergency appeal document or [here](#) for the six-month update.

The security situation in the country remained volatile during the first half of 2013 as cases of murder and abduction were reported in the country especially in Port-au-Prince. The Haiti National Police continued its fight against organized crimes across Haiti.

On the political scene, there had been dissent on the composition of the electoral council to organize municipal and legislative elections due since 2011. The council was finally inaugurated in April 2013 and has commenced preparations for these elections.

## Coordination and partnerships

The IFRC facilitates coordination within the International Red Cross and Red Crescent Movement and with external partners including government authorities, UN agencies, international and national non-governmental bodies. The Movement partners adhere to and work within the framework of all coordination mechanisms as stated in the Movement Coordination Framework signed in April 2010 between the HRCS, the International Committee of the Red Cross (ICRC) and the IFRC along with 22 PNS who signed the Annex to the Memorandum of Understanding (MoU). The Movement Operations Committee (MoC) meetings are held twice a month while technical committees and regional based meetings on managing and coordinating programme implementation based on the plan of action of the Haiti operation continue to be held monthly. The Steering Committee made up of all the Movement partners in Haiti, which replaced the Movement Platform meets once every month to deliberate on support to the National Society.

The Haiti Red Cross Society works closely with the Department of Civil Protection to coordinate and respond during the disaster and with MSPP for health related interventions. Collaboration with the government and international humanitarian actors including the UN system takes place through the various coordination mechanisms such as the International Community Support Group (GACI).

**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 are 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).

The IFRC secretariat intensified its support to the National Society to strengthen its capacity in critical management and technical functions based on needs as stated in the IFRC Earthquake Recovery Operation revised plan of action. The setting up of the National Society Support and Knowledge (NSKD) department is ongoing as well as with the drafting of a 2 year proposal on capacity development initiatives within the Haiti Red Cross Society.

# Red Cross and Red Crescent action

## Progress towards outcomes

### Pillar 1: Port-au-Prince (Urban Programmes)

#### Integrated Neighborhood Approach (INA)-Timeframe: July 2011 - Dec. 2013

**PROGRAMME GOAL:** to build resilient urban communities which are safer, healthier and living in an improved habitat.

**OUTCOME 1.1:** 5,000 Individuals in 3 communities are healthier through increased knowledge on health and the practice of safer health behaviours

**Progress:** During the period under review, more households have had access to improved sanitation facilities. Participatory Hygiene and Sanitation Transformation (PHAST) activities are on-going in the target communities with members being trained on importance of solid waste management, hygiene promotion, appropriate use of sanitation facilities and disposal of human excreta. These trainings have been accompanied by community initiatives whereby they have formed working groups which go out and collectively clean the streets as well as gather and dispose of waste. This will continue through the wet/hurricane season that is approaching to ensure the risks of water-borne diseases are reduced. Hygiene promotion activities also involved going from door to door and working with children in schools to promote hand washing.

CBHFA community facilitators have been trained in the targeted communities and they have followed this with an assessment of needs which has helped them develop their plan of action. The assessment showed that the three major issues of concern are cholera/diarrhoeal diseases, malaria and flu for the coming wet/hurricane season. Activities according to the plans of action are on-going in these areas, where hand washing sessions in particular are being conducted in the communities.

Vegetable gardens consisting of egg plants, tomatoes and pepper have been established where community members were trained on how to build vegetable beds, protect the seedlings from insects and diseases as well as transfer seedlings to the gardens. Fifty per cent (50%) of the targeted households have already had their gardens established.

Key Indicators	Target	Achievement				Cumulative
		July 11-Sept 2012	Oct-Dec 2012	Jan-June 2013	July-Dec 2013	
# of households with access to improved sanitation facilities newly built or rehabilitated, individual or communal.	200	22	5	104		131
# of households with access to a safe water supply.	1,000	-	-	-		-
# of people trained in water treatment at the household level.	1,000	-	-	26		26
# of household gardens established.	100	-	-	50		50

**Challenges:** The challenge with PHAST is to ensure that the community sees the necessity to continue the work after the end of IFRC intervention. Also for this work to be effective, the community has to follow up until the completion of a specific task. For instance, if it involves waste management, the community members in charge of collection and disposal of waste in specific areas need to ensure that the municipal authorities take it away. The authority for solid waste collection has a number of institutional constraints and this combined with the fact that people do not want to pay for services leads to waste not being collected on a regular basis.

**OUTCOME 1.2:** 5,000 Individuals and communities are safer through protected lives and livelihoods.

**Progress:** IFRC started a new approach of building community resilience in 2 of the INA areas, Delmas 30 and Carrefour Feuilles, by giving support to Community-based Organizations (CBOs) to run micro-projects and benefit their community. The CBOs were given a special training on how to develop a project proposal, including writing a log-frame and budget. The first project supported was for the training of 100 street food vendors in food preparation, hygiene and business management. IFRC is also assisting to develop a partnership between the

CBO and a United States Agency for International Development (USAID) funded project to introduce fuel efficient cook stoves in Haiti so as to reduce the use of charcoal and lower carbon emissions. The second CBO was supported in training 25 youth in ironwork and welding. These youth have received a tool kit and business management training to help support them as young entrepreneurs. Many of the trainees have already been commissioned for work and are being paid.

IFRC not only finances the CBOs to run the projects but is developing the skills of its members to build their capacity and obtain future support for community development. Skills such as conducting assessments and evaluations, computer skills and business management training will enable the self-sufficiency of these community organizations well after IFRC has completed the project.



**Left:** Welding trainees receive their business start-up tool kits from IFRC supported micro-project. **Right:** The trainees in action.

IFRC is supporting entrepreneurs through Entrepreneurs du Monde (EdM) to run and develop two rubble recycling workshops in the area of Carrefour Feuilles. The entrepreneurs are trained to manufacture practical and decorative items from rubble, such as roof tiles, pavements and plant pots. The workshops function as business incubators supporting marketing activities, providing the equipment and space to produce the products and providing training in business management as well as identifying institutions and providing loans to create micro-businesses. The entrepreneurs are responsible for acquiring the raw materials (rubble) needed to make the items.

Through Zafen, a division of Fonkoze (a local micro-finance institution), IFRC is supporting 12 small/micro enterprises with a loan to improve and grow their businesses and create jobs for others in the area. The types of businesses include tailoring, dry cleaning shops and raw food warehouses, among others. The loans are interest free and are especially designed to help businesses in the poorest areas and those without capital. Once the businesses successfully pay back the loan they will be able to access other loans and services through Fonkoze.

KNFP (Konsey Nasyonal Finansman Popilè), a local social economic development organization, has conducted business management training for 19 IFRC core livelihoods staff, 80 IFRC national staff and 18 community members from Delmas 30 and Carrefour Feuilles. The training is being rolled out to more community members and members of CBOs being supported in their micro-projects. KNFP has also been contracted to give MuSo training, mutual solidarity is a savings scheme very common in Haiti, which enables group members to save collectively and also access loans.

In Cabaret, a commune north of Port-au-Prince, IFRC is partnering with USAID on community development of a social housing site for former Internally Displaced People (IDPs) who were living in camps. Violence prevention and conflict management trainings were provided to the future residents by the HRCS protection team. The training touches on different types of violence and ways to mitigate them. At the end, a debate based on a case study is held. It highlights the importance of family and community support, very pertinent to stimulate social cohesion in a social housing context. The conflict management training is also conducted by the Haiti Red Cross Society and looks at the broader theme of conflict and conflict mitigation principles and is adapted to a social housing context where residents from various geographic and socio-economic backgrounds come together.

A vulnerability capacity assessment (VCA) had been conducted in both Carrefour Feuille and Delmas 30 sites with a group of 25 community members from each site (a total of 50 people) before the INA programme started.

The assessment helped define the objectives and activities of the INA programme as it outlined the vulnerabilities, risks and capacities as perceived and prioritized by the community. From October to December 2012, the HRCS DRM department trained two teams of 10 people each (one for each site) as Community Intervention Teams (CITs). The CIT members received training in community based disaster risk management (early warning system, emergency response planning, risk mapping etc.) and first aid training. They were also equipped with necessary preparedness and response materials including sirens, megaphones, ropes, wheelbarrows, flags to announce the alert messages, raincoats, among other items.

Key Indicators (Livelihoods in INA)	Target	Achievement				Cumulative
		July 11-Sept 2012	Oct-Dec 2012	Jan-June 2013	July-Dec 2013	
# of people trained and/or provided with equipment to provide relevant services in their communities.	200		466	388		854
# of small and medium enterprises provided with training, equipment or financial support.	10	10	4	12		26
# of households in targeted areas that have participated in protection-themed education activities on violence prevention	250	0	200	936		1,136
Volume of rubble recycled or reused in construction activities (housing, gabion, backfill, mortar sand, plastering sand, pavers)(cubic metres)	25,000	13,360	2,270	1,463		17,093

Key Indicators (Disaster Risk Management in INA)	Target	Achievement				Cumulative
		July 11-Sept 2012	Oct-Dec 2012	Jan-June 2013	July-Dec 2013	
# of communities with a community disaster response plan in place.	3	0	2	-		2
# of community members trained in vulnerability and capacity assessment, or community-based disaster risk management.	20	50	20 <sup>3</sup>	-		70

**Challenges:** Households involved in the trainings sometimes find it difficult to take their knowledge a step further and put it into practice. Thus, there is need to reinforce this by close follow up.

**OUTCOME 1.3:** 1,000 individuals see their living environment as their home, and look after (and/or improve) their living environment.

**Progress:** The repair and retrofit project is working with selected households to repair their houses and surrounding structures to ensure that the physical living environment is being improved. The addition of toilet and shower facilities has given many a very positive outlook on their living environment being improved and it has been observed that they are looking after these spaces with care. The PHAST activities have also seen households cleaning the areas around their homes and they have reported that they feel more proud of their living environment. Households are engaged in painting their homes which further adds to their feeling of ownership and pride.

In Cabaret, selection of families to relocate to the social housing site built by USAID was on-going throughout the reporting period. IFRC, through its return and relocation programme, had already pre-identified 130 former Port-au-Prince camp families, now living in rented houses or T-shelters, and willing to relocate to Cabaret. Based on the development of a beneficiary selection approach and criteria, a survey was then put together to verify that the pre-selected beneficiaries met the social housing eligibility criteria. At the time of reporting, 149 out of 154 families were confirmed for relocation to the social housing site.

Key Indicators	Target	Achievement				Cumulative
		July 11-Sept 2012	Oct-Dec 2012	Jan-June 2013	July-Dec 2013	
# of households living in repaired / retrofitted or new permanent houses.	200	5	9	134		148
# of homeowners participating in and receiving basic safe housing training.	200	5	9	-		14
# of construction workers participating and receiving	50	0	0	-		0

<sup>3</sup> This figure was not available in the last reporting period and the data has been updated accordingly with the information provided.

construction training.						
# of households that received a transitional shelter in the INA areas	102	102	0	-		102
# of block makers trained in improved block making techniques	10	0	0	-		0
Volume of ravine rehabilitated (cubic metres)	3,000	120	360	448		928

**Challenges:** Finding agencies that can provide training for master masons and builders has been delayed and identifying how this would be rolled out has taken time as has the identification of what a training would look like for home owners.

**OUTCOME 1.4:** Urban communities are more resilient through direct collaboration with selected Partner National Societies

**Progress:** An initial urban plan has been carried out for the Delmas 7 in Zone 13. The plan has been used to identify some of the major issues in the neighbourhood and the surrounding areas and will be supported by a more thorough study that will look at specific needs of the targeted neighbourhood.

A decentralized wastewater treatment solutions (DEWATS) study was also carried out through the month of December 2012 by consultants from BORDA (Bremen Overseas Research and Development Association) that investigated the possibilities of implementing DEWATS in the four neighbourhoods of Delmas 9, Delmas 30, Carrefour Feuilles and Campeche where IFRC and other collaborating PNS are currently working. The study is aimed to help guide IFRC and interested PNSs in implementing a DEWATS system. It is also important to note that DINEPA has been included within this process and is fully supportive of organizations looking to put in place improved and workable sanitation solutions. ACF (Action Contre la Faim<sup>4</sup>) has been engaged to carry out a sanitation study of the area and will be using the IFRC DEWATS study as a basis from which it will look for ways to improve sanitation conditions within the neighbourhood.

The French Red Cross (FRC) with funding support from the IFRC secretariat has constructed 160 Ecological Sanitation (ECOSAN) latrines in Croix-des-Bouquets, Ouest Department. In total, 1,371 individuals (263 households living in 200 shelters) have benefited from the latrines within the time frame of this project. This was achieved in collaboration with the beneficiaries who participated in the construction activities. The ECOSAN project also had a component aimed at bolstering the capacity of project participants to use ECOSAN products as fertilizers in their gardens/farms. In this regard, 135 farmers were voluntarily selected to pilot the compost during the 2013 agricultural season. Results of FRC's monitoring showed that 88% of ECOSAN beneficiaries were willing to use urine as fertilizer and 53% stated that they would use the compost once it is ready.

FRC and a local institution called 'ECCSA' came into partnership in order to set up a waste management system, which will provide the community with economic incentives for those that are interested in recycling. To date, a contractor has been selected and is currently gathering land title documents. The mayor's office is also involved in the process so as to ensure sustainability of the project.

Key Indicators	Target	Achievement				Cumulative
		July 11-Sept 2012	Oct-Dec 2012	Jan-June 2013	July-Dec 2013	
# of Community platforms recognized as an official organization, trained on project implementation and implemented small scale community projects	1	0	1	-		1
% of the neighbourhood population of Delmas 9 benefiting from a safer housing solution ( 5,000 target population)	56%	32%	48%	48%		48%
# of community infrastructures repaired	1	0	0	-		0

**Challenges:** Having HRCS to lead in implementation of health related activities has proven to be extremely difficult. However, IFRC is working with the National Society through the provision of additional staff and funding combined with close coordination in an effort to build HRCS capacity in project design, planning and implementation.

<sup>4</sup> In English: Action Against Hunger

Land rights issues are being resolved, especially through the involvement of the owners and the municipalities. Once the housing drawings are completed and validated, the building approvals will be delivered.

DINEPA is currently revising its sanitation policy and this can slow down operations. However, discussions have been held with DINEPA, FRC and ACF, who are partners in the sanitation component, and alternatives are being examined, such as providing trainings to septic tank cleaners (also called “bayakous”), hygiene promotion, construction of water kiosks and equipping of the emergency shelter.

There is lack of a clear and specific strategy in terms of urban planning and land tenure adoption. FRC was eventually successful in obtaining authorities’ commitment (Mayor and MTPTC) regarding using community members’ land during rehabilitation of the road and drainage system. The authorities agreed to deal directly with the community members and determine a compensation system.

Finding an evacuation shelter in the area is proving to be challenging. A suitable school was finally identified and the director of the school is currently assembling the land titles.

Earlier on, EdM had experienced challenges related to limited human resources and applications had been temporarily suspended. This has been resolved and applications process will resume soon.

### Return/Relocation (Port au Prince)-Timeframe: 2011-2013

**PROGRAMME GOAL:** Affected households living in camps have relocated to safer and more secure housing and are supported with economic recovery activities.

**OUTCOME 2.1:** 13,000 households registered at camp sites to relocate to and continue to live in improved housing over the life of the programme

**Progress:** IFRC through its shelter solutions programme continued to contribute to meeting the shelter needs of the affected population in Haiti. The secretariat continued to increase its alternative shelter solutions support to the target population in Haiti reaching 13,616 households as of June 2013. IFRC has provided rental and relocation grants to the population who were sheltered in the Tapis Rouge, Cite Cudor, Lenz Harry 1, Parc la Couronne, Ghiskio, AFCA 1, Camp Tito, Centre de Transfusion Delmas 95 and Laiterie Damien camps.

As part of the monitoring of this programme, IFRC will visit 25% of the households after the completion of the first 12 months rental grant to establish if they are still living in the rental houses and how they are sustaining their livelihoods. The monitoring team has not been able to measure this at the moment as no households have been out of the camp for more than 12 months. However, preliminary data from other camps shows that between 80-85% of the beneficiary households remain outside the camp and in rented accommodation after the first 12 month rental period.

Key Indicators	Target	Achievement				Cumulative
		July 11-Sept 2012	Oct-Dec 2012	Jan-June 2013	July-Dec 2013	
# of households provided with a settlement/relocation grant	13,000	7,010	2,142	4,464		13,616
% of beneficiary households who continue to live in improved housing in Port-au-Prince at least 12 months after receiving the relocation grant.	75%	95%	98% <sup>5</sup>	85%		85%

**Challenges:** During similar relocation projects, challenges were experienced where the target population thought that they had to pay so as to be relocated or had no access to information on options they could choose for relocation. To avoid this, the intervention in targeted camps was organized with key messages to clearly articulate the project aim, processes, and the options available to target beneficiaries. An information and communications strategy was planned and prepared prior to commencing the registration of the camps.

<sup>5</sup> The data received during the reporting period for the final indicator above suggests that 98 per cent of households continue to remain in improved shelter conditions after the 12-month period. After investigation into this figure, IFRC came to realize that the teams monitoring this figure were not able to visit households that they were unable to get in contact with. This resulted in an inflated percentage reached after 12 month.

Accessing some beneficiaries such as the ones living in Mont Carmel has been difficult due to an increase in violent crimes such as homicides during the second quarter. An average of 102 homicide cases were reported compared to 52 during the first quarter (representing a 73 per cent increase) especially in Port-au-Prince. Some cases of violent confrontation among armed gang groups and civil protests on social issues were also reported during the reporting period.

**OUTCOME 2.2:** 13,000 households registered at camp sites to become more financially resilient over the life of the programme

**Progress:** IFRC has been providing unconditional grants for families to engage in small business opportunities, develop their skills and assist them in sustaining their habitat and improve their living conditions. These grants are provided in two instalments of USD 250 each (per family).

Key Indicators <sup>6</sup>	Target	Achievement				Cumulative
		July 11-Sept 2012	Oct-Dec 2012	Jan-June 2013	July-Dec 2013	
% of households that have varied sources of income	75%	0%	0%	Not yet monitored		0%
% of female headed households who report investments in saving programmes	50%	0%	0%	Not yet monitored		0%

### Camp Mitigation (Port-au-Prince)-Timeframe: 2012-2013

**PROGRAMME GOAL:** People living in camps which have yet to be targeted by decongestion initiatives have continued access to basic services and safer living conditions (Mitigation strategy).

**OUTCOME 3.1:** Improvements have been made to 1,500 “Emergency Shelters” to make them safer

**Progress:** Following Isaac and Sandy Tropical storms in 2012, a significant amount of tarpaulins were distributed in the most affected camps. Therefore, the surveys that had been done earlier to identify the most vulnerable shelter structures became redundant as most of them benefited from these Non-Food Items (NFIs) distribution and thus, their needs were covered.

Key Indicators	Target	Achievement				Cumulative
		July 11-Sept 2012	Oct-Dec 2012	Jan-June 2013	July-Dec 2013	
# of occupied shelters that have had mitigation activities carried out.	1,500	0	0	0		0

**OUTCOME 3.2:** More than 40,000 individuals in camps where the Red Cross is working have access to basic sustainable and appropriate sanitation solutions

**Progress:** In 2013, the hygiene promotion (HP) team was replaced by a smaller “Camp mitigation” team of four staff and has mainly focused on preparing community mobilizers to continue HP activities in view of IFRC phasing out its intervention in camps by June 2013. Thirty nine community mobilizers (22 males and 17 females) were trained in chlorination and residual chlorine monitoring. Seventeen pool testers were distributed for water quality monitoring. Water monitoring at household level showed that out of 160 tests, 124 (77.5%) had a satisfying level of residual chlorine.

IFRC continues to facilitate collaboration between camps committees and a private operator called JEDCO (a Haiti-based company which provides sanitation services including septic tank cleaning and disposal, rental portable toilets with daily services, solid waste removal, pest control and fumigation services) that manages desludging activities for DINEPA with UNICEF funding. This collaboration which includes the integration of camp residents in the monitoring and execution of the desludging activities have significantly improved the quality of the services provided in IFRC-managed camps. To ensure that communities live in a clean and hygienic environment, eight cleaning campaigns involving 218 camp residents took place in 5 supported sites.

<sup>6</sup> This will be determined after end of programme

Key Indicators	Target	Achievement				Cumulative
		July 11-Sept 2012	Oct-Dec 2012	Jan-June 2013	July-Dec 2013	
# of water and sanitation committees set up and trained	8	0	8	-		8
# of latrines which are repaired and properly used and maintained.	300	0	253	-		253
% of showers which can be locked from the inside, and are used.	80%	0	85%	-		85%
% of drainage points which are mostly free from garbage, and there is negligible amount/no stagnant water.	80%	0	90%	-		90%

**OUTCOME 3.3:** 10,000 IDP households have improved capacity to identify and mitigate risks, and increased resilience

**Progress:** For this reporting period, the emphasis was to increase, in targeted camps, community resilience in the face of natural disasters through trainings in First Aid (52 community mobilizers trained and provided with First Aid kits and stretchers), Epidemic Control for Volunteers (50 community mobilizers trained and provided with Malaria and Cholera prevention manuals) and Disaster Preparedness. Seven vigilance committees were set up and equipped (megaphones, rain jackets, whistles, among other early warning items) and they were all integrated within the civil protection agency (DPC) of Delmas Town.

Key Indicators	Target	Achievement				Cumulative
		July 11-Sept 2012	Oct-Dec 2012	Jan-June 2013	July-Dec 2013	
# of vigilance committee's trained and established	16	0	0	7		7
# of camps/ communities reached with awareness-raising activities on disaster risks.	16	0	12	7 <sup>7</sup>		12
# of people trained and had First Aid kits distributed to them.	100	0	0	52		52
# of people trained in Disaster Risk Reduction	100	0	75	0		75
# of waterproof DRR tagged plastic sleeves distributed.	10,000	0	550	1,980		2,530

**Challenges:** At the time of writing the plan of action for camp mitigation in August 2012, originally for a 6 months intervention, eighteen camps with 11,642 households or 45,088 beneficiaries were targeted. At the end of the programme in June 2013, seven of these camps with 2,582 households or 9,549 beneficiaries were yet to be relocated. Due to the unavailability of trainers at the HRCS training centre last year, training in Disaster Risk Reduction (DRR) was only provided to community mobilizers in late November 2012. Thus sensitization of camp residents started in January 2013 with a much smaller camp population to cater for. Hence the low achievement as compared to the target (distribution of waterproof DRR tagged plastic sleeves).

**OUTCOME 3.4: HIV/AIDS:** The risk of HIV transmission among 30,000 IDPs is reduced

**Progress:** This programme came to an end in December 2012.

Key Indicators	Target	Achievement				Cumulative
		July 11-Sept 2012	Oct-Dec 2012	Jan-June 2013	July-Dec 2013	
# of IDPs reached through peer education and community outreach activities.	30,000		1,930	-		1,930
# of IDPs referred, who effectively use VCT services.	30,000		727	-		727
# of pregnant women referred for PMTCT services.	680		42	-		42

<sup>7</sup> From the 12 camps reported on during the last period, 5 camps have been closed after the IDPs were relocated by June 2013. Thus, awareness raising was conducted in 7 of the remaining camps

**Challenges:** The HIV/AIDS aspect of camp mitigation activities was only added in September 2012. The HIV/AIDS delegate embedded with HRCS left Haiti in November 2012 and, after his departure HRCS had difficulties with continuing the implementation.

### Rural Programmes: Water, Sanitation and Hygiene promotion (Leogane)

**PROGRAMME GOAL:** Contribute to improving the health status among identified communities in Leogane.

**OUTCOME 4.1:** Provide up to 50,000 people in three (3) target sections of Leogane with access to safe water, sanitation and hygiene knowledge

**Progress:** The water and sanitation programme of the IFRC in Leogane was closed at the end June 2013. The programme drilled the last 10 boreholes in March and completed all related construction works in April 2013. In Bagader, there is an artesian borehole which enabled the water and sanitation team to develop one supplementary network with 3 water points. To ensure the sustainability of the water intervention, IFRC has formed water committees and trained them in water management including the technical aspects. In June, all the water points were handed over to the communities.

The latrine construction is now completed with a total of 3,065 latrines to which 3,003 hand washing stations and 3,026 garbage bins were provided. Challenges related to soil composition, high water table and floods prone areas were addressed through adapted solutions and the project was able to be completed.

The hygiene promotion team completed its support to water and sanitation components and will, in future, continue as part of the Health project. The hygiene promotion team plans to undertake an end line survey to assess the changes in knowledge attitude and practices of the targeted population as a result of the water and sanitation project.

Key Indicators (Water and Sanitation)	Target	Achievement				Cumulative
		July 2011-Sept 2012	Oct-Dec 2012	Jan-June 2013	July-Dec 2013	
# of newly constructed water points/boreholes	60	34	23	12	EOP <sup>8</sup>	69
# of rehabilitated existing water points/boreholes	44	38	7	0	EOP	45
# of latrines constructed	2,900	2,074	360	631	EOP	3,065
# of water committees formed	104	61	26	12	EOP	99
# of water committees trained in water point management	104	34	18	47	EOP	99

Key Indicators (Hygiene Promotion)	Target	Achievement				Cumulative
		July 2011-Sept 2012	Oct-Dec 2012	Jan-June 2013	July-Dec 2013	
# of selected and trained HP community facilitators.	260	284	0	0	EOP	284
# of hygiene promotion community activities.	2,000	814	192	595	EOP	1,601
# of school students reached through HP activities.	3	3	0	0	EOP	3

**Challenges:** Procurement of materials and distribution in the field was not so easy. There were delays in delivery of materials by the supplier. In addition, due to poor state of roads in some areas, the trucks carrying the materials could not pass. As such the team resulted to using hand carts to transport smaller quantities to their destination. The team was determined to finish the planned activities on time despite the delivery delays, and this was achieved.

### Rural programmes: Health and Care (Leogane)

**PROGRAMME GOAL:** Contribute to improving the health status among identified communities in Leogane.

<sup>8</sup> End of Project (EOP)

**OUTCOME 5.1:** To significantly strengthen the capacity of 6,500 families in two (2) sections of Leogane to prevent common health problems/risks in emergency and non-emergency situations by using the CBHFA approach

**Progress:** In addressing challenges caused by the departure of 89 community facilitators since the beginning of the project, additional CBHFA trainings have been conducted for the newly selected community facilitators. At the moment, a total of 597 community facilitators have been registered and 58 of them have completed <sup>9</sup>the CBHFA training.

The first round of CBHFA training for newly selected community facilitators in the last three remaining habitations (Mellier, Bongnotte and Sous-Savane) started from May 2013, and the second round for additional community facilitators is on-going. In addition, training in Epidemic Control for Volunteers (ECV) started from February and First Aid training also started from April in Modosol. Through implementation of CBHFA activities, the community facilitators have reached a total of 8,928 households (34,060 beneficiaries) through sensitizations.

For malaria prevention, the trained community facilitators have continued to sensitize community members on how to protect themselves from malaria and monitoring of mosquito net usage. During the reporting period, 807 households were newly registered (Macombre, MassonB and Bongnotte) and received insecticide bed nets (ITNs). A total of 2,102 ITNs were distributed to 1,209 households, reaching 4,632 beneficiaries by June 2013. The Haiti Red Cross Society field officers conducted 837 spot checks and 82.3% of visited households properly used ITNs between January and June 2013. This is an improvement from when the ITN distributions commenced in 2011.

According to the CBHFA community facilitators' satisfactory survey which was conducted by Spanish Red Cross in April to May 2013, community facilitators reported behaviour changes among pregnant women as they attend pre-natal care at the hospital more than before and understand the importance of breastfeeding. This is as a result of on-going Mother and Child Health (MCH) care activities. Awareness sessions on STIs and HIV were continuously carried out by the community facilitators. Condoms were often demanded from community members as a result of increased HIV/AIDS/STIs awareness. Condom supply was resumed through coordination with Haiti Red Cross Society HIV/AIDS working group and, 36,144 condoms were distributed between April and June 2013. However, due to suspension of condom supply, the community facilitators encouraged community members to buy condoms at their local market.

Key Indicators (CBHFA)	Target	Achievement				Cumulative
		July 2011-Sept 2012	Oct-Dec 2012	Jan-June 2013	July-Dec 2013	
Total # (cumulative) of people reached by community-based health and first-aid services.	36,000	25,032 <sup>10</sup>	5,656 <sup>11</sup>	3,372		34,060
Total # of group awareness sessions organized by CBHFA Facilitators on key health issues (Vector borne diseases, HIV/AIDS, First Aid, Mother and Child Health and PSP).	7,200	3,950	1,532	2,659		8,141
Total # of Home visits conducted by IFRC/HRCS staff and Community Facilitators equipped with the CBHFA standard checklist.	27,000	24,029	6,382	13,192		43,603

Key Indicators (Child and Maternal Health)	Target	Achievement				Cumulative
		July 2011-Sept 2012	Oct-Dec 2012	Jan-June 2013	July-Dec 2013	
# of group awareness sessions about MCH organized by CBHFA community facilitators	2,000	641	466	645		1,752
# of home visits about MCH conducted by IFRC/HRCS staff and Community Facilitators equipped with the CBHFA standard checklist.	10,000	3,740	2,014	3,190		8,944

<sup>9</sup> Completed: This means that they have done all the modules (1-6)

<sup>10</sup> This number was re-calculated based on field data and amended accordingly

<sup>11</sup> Number recalculated and amended

Key Indicators (Vector / Water Borne Diseases)	Target	Achievement				Cumulative
		July 2011-Sept 2012	Oct-Dec 2012	Jan-June 2013	July-Dec 2013	
# of Mosquito nets distributed in households	20,000	13,608	1,536	2,102		17,246
% of households who received a mosquito net and who are using the net.	90%	70.3%	84.5%	82.3%		82.3%
# of group awareness sessions about vector/water borne diseases organized by Haiti Red Cross Society volunteers	3,000	898	544	930		2,372

Key Indicators (STI and HIV/AIDS)	Target	Achievement				Cumulative
		July 2011-Sept 2012	Oct-Dec 2012	Jan-June 2013	July-Dec 2013	
# of group awareness sessions about STI and HIV/AIDS organized by CBHFA community facilitators	4,000	588	522	999		2,109
# of home visits about STI and HIV/AIDS conducted by IFRC/HRCS staff and Community Facilitators equipped with the CBHFA standard checklist	16,000	2,582	2,131	4,579		9,292
# of condom distributed	600,000	154,527	114,206	36,114		304,847

Key Indicators (Fist Aid/Psychosocial Support )	Target	Achievement				Cumulative
		July 2011-Sept 2012	Oct-Dec 2012	Jan-June 2013	July-Dec 2013	
# of community members who have a basic First Aid training	2,500	0	0			0
# of community facilitators who have been trained in First Aid	520	0	42			42
# of community members referred to PSP team in Leogane	12	0	0			0

**Challenges:** The hygiene promotion team from WatSan will be integrated with the CBHFA project from July 2013 in order to improve implementation, ensure integrated monitoring, supervision of community facilitators and efficiently conducting trainings.

To ensure improved capacity of Haiti Red Cross Society field officers, ECV and First Aid training of trainers will be conducted as only 3 of the 9 field officers have been trained.

## PILLAR 2: Support to the Haiti Red Cross Society Strategy 2010 - 2015

### HRCS: Health and Care-2011 -2013

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

**OUTCOME 6.1:** Enable safe and healthy living of 175,000 people in the targeted communities implementing Community Based Health and First Aid (CBHFA) in action approach by reducing vulnerabilities related to injuries and diseases and building resilient communities

**Progress:** During this reporting period, the CBHFA team continued to train supervisors and community volunteers who in turn assisted in scaling up CBHFA activities in the new zones including organization and supervision of activities at community level. Over 800 community volunteers were trained in CBHFA in action, epidemics control as well as data collection. As a result, over 100,000 people have been sensitized by the trained community volunteers on basic hygiene practices, importance of vaccinating children, prevention of HIV/AIDS as well as Maternal and Child Health as (MCH) and prevention of disease such as Cholera and Malaria. Other activities conducted include providing community-based first Aid (Over 2,500 reached). The implementation of CBHFA approach is being conducted by Movement partners including the Canadian Red Cross in the Southeast Branch, the American, French, Norwegian Red Cross and IFRC/HRCS in the Western Branch and the Finnish Red Cross in Plateau Central.

Key Indicators	Target	Achievement				Cumulative
		July 2011- Sept 2012	Oct-Dec 2012	Jan-June 2013	July-Dec 2013	
% of HRCS Volunteers trained in CBHFA approach	80%	99%	0	38% <sup>12</sup>		38%
# of HRCS Branches implementing CBHFA approach.	13	3	3	0		6
# of community volunteers trained in CBHFA approach.	3,500	1,646	201	875		2,722

**Challenges:** The major challenge in the implementation of the CBHFA approach is the Health programme MoU between HRCS and the IFRC not being signed. This situation has delayed the implementation of CBHFA activities in the new operational areas.

**OUTCOME 6.2:** HRCS has improved capacity to implement Emergency Health programmes and activities for 60,000 people

**Progress:** The Haiti Red Cross Society is auxiliary to the public authorities. As such, the MSPP has chosen HRCS to support immunization activities. Thus, during the reporting period, the team delivered promotional materials (flyers, brochures, immunization schedules) in all 13 HRCS branches. The emergency team continued with training of HRCS volunteers in Epidemic Control for Volunteers (ECV). Upon request, 60 volunteers did a refresher training on the same and 35 additional volunteers were newly trained. HRCS volunteers also continued to sensitize the population with messages about preventing malaria and diarrhoea using the ECV approach. The team participated in the festivities of "Rara" at Lower Artibonite where 10 volunteers were mobilized to raise awareness of epidemic diseases such as cholera as well as conduct the hygiene promotion sessions. A total of 630 people took part in these outreach activities.

Key Indicators	Target	Achievement				Cumulative
		July 2011- Sept 2012	Oct-Dec 2012	Jan-June 2013	July-Dec 2013	
# of Haiti Red Cross Society Society volunteers trained in epidemic control for volunteers	3,000	885	240	135		1,260
# of communities' Epidemic response teams active in regions.	13	5	4	0		9
# of the beneficiaries who receive messages about preventing malaria and diarrhoea using the ECV approach.	60,000	30,000	15,000	1,500		46,500

**OUTCOME 6.3:** The psychosocial well-being and resilience of the 24,000 members of the Haitian Community has improved.

**Progress:** The psychosocial programme (PSP) team has been reinforced by 6 new technical trainers. In addition, the United Nations Children's Fund (UNICEF) has been supporting HRCS through the consortium mechanism from February 2013. For the period under review, HRCS was able to reach a total of 580 people from 9 communities in the Ouest Region. The beneficiaries reached by PSP activities are from all age groups, from young children in recreational centres to elderly people in family discussion groups at schools, hospitals and community centres. This was made possible by a network of HRCS volunteers of whom 326 were trained in various PS activities during the period under review. Below is detailed information according to the activities implemented:

Key Indicators	Target	Achievement				Cumulative
		July 2011- Sept 2012	Oct-Dec 2012	Jan-June 2013	July-Dec 2013	
# of guided workshop sessions for children that have been facilitated by HRCS PS volunteers	736	72	33	22		127
#guided workshop sessions for adolescents that have been facilitated by HRCS PS volunteers?	736	0	0	17		17

<sup>12</sup> These are newly identified volunteers

# of summer camps are organised in cooperation with DPDR, and other HRCS Health sectors	20	9	0	0		9
# of victims of violence referred to appropriate medical, legal, and/or psychological services providers by HRCS PS volunteers	92	0	1	0		1
# of beneficiaries with special psychological needs referred to professional practitioners (psychotherapy, therapy) by HRCS PS volunteers	35	0	0	0		0

**Challenges:** Lack of committed and motivated HRCS volunteers mostly in the branches is a big challenge. There is need to come out with a kind of motivation for the PSP volunteers so that they can be more involved in field activities.

**OUTCOME 6.4:** HRCS has improved capacity to implement HIV/AIDS programmes and activities for over 750,000 people

**Progress:** HIV activities are mostly implemented at regional levels where PNSs are conducting various activities. During the reporting period, HIV activities were conducted in South and South-east department with financial support from Netherlands Red Cross. Volunteer Peer Educators and Community volunteers conducted awareness sessions on HIV prevention using different approaches such as “*Ansanm Nou Kapab*<sup>13</sup>” and IEC sessions in the targeted areas and in partnership with community groups and associations working in the field. Awareness sessions on the effective use of condoms and voluntary testing were also given. Interpersonal communication activities were carried out where, a total of 398 sessions were conducted for over 6,000 youth.

On condom distribution, over 55,000 condoms were distributed after demonstrating their proper use during interpersonal communication activities, awareness and mass mobilization. In addition, more than 200,000 were distributed during the Carnival in February.

For people living with HIV (PLHIV) psychosocial support, home visits, food support, medical care and Income Generating Activities (IGA) are conducted. These activities are carried out by volunteers, peer educators (PE) and health workers. In the fight against stigma and discrimination related to HIV, HRCS conducts advocacy and anti-stigma campaigns. The programme has reached over 1,000 people with these activities.

Key Indicators	Target	Achievement				Cumulative
		July 2011-Sept 2012	Oct-Dec 2012	Jan-June 2013	July-Dec 2013	
# of Training of Trainers for 13 HRCS branches and HIV program coordinators organised every year	2	2	0	0		2
% of HRCS volunteers trained in HIV prevention, care and support in every regional branch	25%	1%	1%	5%		5%
% of annual activities of PLHIV networks to address stigma and discrimination supported by HRCS	50%	3%	0%	10%		10%
# of sessions to promote and provide information to target groups on available PMTCP services	2	0	0	0		0

**OUTCOME 6.5:** HRCS Health Department is well equipped to manage and implement standard RC/RC programming

**Progress:** The Haiti Red Cross Society with support of IFRC continues to make an effort in strengthening the capacities of the health and care department for better service delivery to the vulnerable population in the country. The health and care department has organized several training sessions during the reporting period with the aim of increasing the capacity of volunteers and staff in thematic components of the health programme. This includes trainings in Planning, Monitoring, Evaluation, Reporting (PMER), stress management, ECV, psychosocial activities, HIV/AIDS awareness, CBHFA in action, among other trainings. The trained staff and volunteers have used the skills acquired to reach the community with various services geared towards improving their well-being.

Key Indicators	Target	Achievement	Cumulative
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<sup>13</sup> Together we are able

		July 2011- Sept 2012	Oct-Dec 2012	Jan-June 2013	July-Dec 2013	
% of HRCS health volunteers trained in key health topics.	100%	80%	5%	20%		80%
# of active HRCS health volunteers.	3,500	1,500	1,500	1,500 <sup>14</sup>		1,500

**OUTCOME 6.6:** Hygiene Promotion. HRCS plays an active role in contributing to the reduction of cholera related mortality and morbidity for 62,275 individuals in Haiti

**Progress:** Since September 2012, discussions have been on-going between HRCS and IFRC as regards the National Society taking over the hygiene promotion activities after departure of the IFRC Hygiene Promotion Delegate. In the meantime, activities under this outcome are being conducted under community health (CBHFA) as the HRCS is moving towards a more integrated approach in the provision of health services.

Key Indicators	Target	Achievement				Cumulative
		July 2011- Sept 2012	Oct-Dec 2012	Jan-June 2013	July-Dec 2013	
% of households that have access to a safe water supply.	100%	15%	2%	-		15%
% of households that have access to an appropriate sanitation solution and know how to maintain them.	95%	22%	22%	-		22%
% of community members that recognize the five key moments for hand washing, (i.e. <i>before cooking, before eating, after manipulating garbage, after manipulating children's feces, and after using the toilet.</i> )	100%	40%	40%	-		40%

**OUTCOME 6.7:** HRCS has improved capacity to prevent, mitigate and respond to violence in the community, and across its teams

**Progress:** In partnership with community groups, HRCS organized a number of activities to raise awareness on violence prevention targeting women and youth in the targeted areas. In addition, communication campaigns were organized to mark the celebration of key international days in February, March and May 2013. During the carnival period in February 2013, the violence prevention unit developed and disseminated a number of protection messages and several activities were held with community groups in Carrefour Feuilles and Delmas 30 with the aim of promoting a culture of peace and non-violence. Many flyers with protection and violence prevention messages were distributed. Two partnership agreements have already been developed with local associations of Delmas 30 and Carrefour Feuilles and are pending signature by the HRCS Executive Director and President.

Key Indicators	Target	Achievement				Cumulative
		July 2011- Sept 2012	Oct-Dec 2012	Jan-June 2013	July-Dec 2013	
# of individuals participating in protection activities reporting possible behavioral change	2,430	22	301	1,446		2,092
# of police, members of the judiciary, medical services and members of the media participating in an educational activity on VPMR	675	-	-	45		45
# of employees of the HRCS trained in VPMR	40	3	-	32		35
# of volunteers of the HRCS trained in VPMR	1,000	200	19	154		373
# of partnership agreements developed with local association working in protection	2	-	-	2		2

**Challenges:** Lack of staff transportation to the field is a serious challenge. There is only one car where the project implements its activities. There is need of at least one more car.

### HRCS: Disaster Risk Management (DRM)-2011-2013

<sup>14</sup>The number of active volunteers is constant for the reporting periods

**PROGRAMME GOAL: Reduce community-level risks and disaster impacts through enhanced disaster and risk management capacity of Haiti Red Cross Society (HRCS) at local, regional and national levels.**

**OUTCOME 7.1:** Vulnerable communities have increased knowledge, skills and resources to conduct disaster mitigation, preparedness and response activities

**Progress:** During the first half of 2013, the Haiti Red Cross Society (HRCS) Disaster Risk Management (DRM) department has been undertaking a number of initiatives. The HRCS disaster management system has also been tested through a series of simulation exercises using the well prepared national society (WPNS) tool. Strategic cooperations are also being established with different national and international institutions to enhance preparedness and response efficiency of HRCS in case of emergency.

Community preparedness through the establishment of EICs (community intervention teams) remains the main focus that strengthens the resilience of communities and structures put in place in facing recurrent shocks that Haiti has been sustaining on top of the 2010 earthquake.

In collaboration with the Red Cross Movement partners, HRCS has been training the established EICs and equipping the teams with required tools for preparedness and response. This mechanism has been recognized by the national system (SNGRD<sup>15</sup>) and it also reinforces the auxiliary role of the HRCS to its government. These teams are also part of the community early warning system (CEWS).

Continuous support is being given to the Sandy operation in its recovery phase as it focuses in rebuilding a better life for its beneficiaries and enable a resilient community. After the distribution of essential household kits, there have been reinforcement of the livelihood, food security, Disaster Risk Reduction (DRR) and shelter activities. For updated information on the Sandy emergency operation, please [click here](#).

Key Indicators	Target	Achievement				Cumulative
		July 2011-Sept 2012	Oct-Dec 2012	Jan-June 2013	July-Dec 2013	
# of community intervention teams trained and equipped between 2012 and 2015 in 13 regions.	33	3	3	8		14
# of Early Alert Systems installed and working in 13 regions between 2012 and 2015.	33	3	3	6		12
# of schools where "Protected School" Methodology is applied in 13 regions from 2012 to 2015.	29	0	0	0		0

**Challenges:** Despite funding being available for some of the planned trainings, community members as well as volunteers could not attend some of the trainings due to logistical challenges and the delays in holding the trainings caused by the review and selection of the tools to be used and the subsequent purchase of the standardized tools. The training tools are meant to be standard and purchases could not be done on time because of a lack of a certain level of quality from suppliers. Now that SNGRD has endorsed the EIC tool, the methodology, curriculum and certification will be the focus of the Red Cross to lead in putting in the country the standard concept of the tools.

Several actors are undertaking the repair of schools and the government has taken the lead for school infrastructures, hence HRCS has been reviewing the support approach to be used to ensure schools are well protected against hazards. Since the planned activity of school repairs is no longer possible, there is a need to review the plan and focus on the software side that includes risk knowledge, sensitization, development of evacuation plans and first aid training rather than duplicate the repairs efforts being undertaken by other humanitarian actors..

**OUTCOME 7.2:** Enhanced institutional Haiti Red Cross Society capacity for risk and disaster management at national and community levels

**Progress:** HRCS is in the process of reinforcing its capacity as per its strategic plan by putting disaster risk management as the centre of its business. Through the first responders initiative, there have been a possibility of not only training community members in common or traditional skills and knowledge given by the Red Cross but

<sup>15</sup> SNGRD: Système National de Gestion des Risques et des Desastres

also focusing on the existence of other emerging risks especially in urban areas. Therefore, aquatic, building and mountain rescue have been introduced in the country.

Equally, the HRCS Training Centre has been facilitating several trainings including VCA and has recently received financial support from DIPECHO in a consortium to improve its resource mobilization profile. It has also been able to translate and start producing some disaster risk reduction modules with the support of the IFRC Reference Training Centre of Costa-Rica (CRREC).

Key Indicators	Target	Achievement				Cumulative
		July 2011-Sept 2012	Oct-Dec 2012	Jan-June 2013	July-Dec 2013	
# of HRCS volunteers annually trained and equipped until 2015 at national level in fields like aquatic rescuing, basic and advanced first aid, disaster management and Sphere standards	70	18	18	23		59
# of regional branches equipped to respond in emergencies like floods and in aquatic environment	5	3	3	3		3
% of regional branches with their annually revised action and contingency plans.	100%	100%	100%	30%		30%
# of people trained by the HRCS training centre on disaster risk management topics	6,000	922	642	500		2,064

**Challenges:** New concepts require more investment and dissemination of information for not only the volunteers to get on board in subscribing to the trainings but also demonstrating its value addition to the members of the public.

The review process of contingency plans especially at regional level suffered some delays due to some changes in governance of branches and also lack of funding for this year. There is an initiative of encouraging partners to support the process so as to have the plans systematically updated on a yearly basis.

**OUTCOME 7.3:** Coordination mechanisms are ensured and Red Cross advocacy within institutional frameworks and national policies for integrated risk reduction in “safer and more resilient community” approach are intensified

**Progress:** As the country gears up to the 2013 hurricane season, there have been a number of fora in which HRCS has been vocal in bringing the resilience at the centre of discussions. Together with the partners of the Red Cross Movement, HRCS has been part of 4 out of 6 commissions set by SNGRD for the 2013 hurricane season preparedness namely temporary shelter and evacuation, contingency planning, mitigation, public awareness and education, information management and simulation exercise (simex) commissions.

Through the Technical Committee of disaster risk management, the Movement is addressing disaster risk related issues by establishing thematic groups and focal persons. This has also allowed the coordination with external partners at national and regional level to voice the position and contributions of the Red Cross Movement to the existing frameworks such as the Hyogo framework for action (HFA) and the resilience agenda.

Key Indicators	Target	Achievement				Cumulative
		July 2011-Sept 2012	Oct-Dec 2012	Jan-June 2013	July-Dec 2013	
% of national DRM platforms and working groups where HRCS is an active participant	80%	70%	70%	95%		95%
# of workshops organized by 2015 by HRCS upon the most relevant issues in the Haitian DRM environment and will have improved its position as integration leader on such issues.	12	0	0	2		2

**Challenges:** Lessons learned from 2012 hurricane season brought about the reflections around developing some working groups for better preparedness. This has been time consuming for organizing as it's a challenge to ensure all stakeholders participate in the process. This has been addressed through the Technical Committee and sharing of tasks among Movement partners especially with the move of having only one national emergency

operational centre from the government side (Civil protection) and supported by all other humanitarian organizations.

The appointment of new leadership within HRCS has also been another area of focus, where they were oriented and took on their responsibilities within the shortest time possible of taking up of office.

## AN ENABLING ENVIRONMENT: SUPPORT TO PROGRAMMES

### Movement Coordination

**Livelihood:** During the period under review, the Livelihood Technical Movement Coordinator (LTMC) provided technical, strategic and programmatic inputs to RCRC partners. Specifically, support was provided in the development and implementation of sustainable and suitable livelihoods programmes such as plastic recycling, small business development training, grants and tool kits provision as well as finance management training. LTMC continues to provide coordination and technical assistance to RCRC partners. For instance, HRCS and other RCRC partners were supported during the 2013 food crises through coordination with CNSA/Government and UN agencies to deal with the food crises situation. The livelihood coordinator also prepared learning products from Haiti on livelihoods sector to be shared with other humanitarian actors during the upcoming learning conference to be held in September 2013.

**Settlement:** As part of its coordination role, the settlement sector during this period organized the INA technical committee meetings and invited technical experts from partner agencies such as CARE, UN-Habitat, ILO, and Habitat for Humanity International to share their experiences with RC and the lessons learned through their urban recovery and reconstruction efforts. In addition, the settlement sector coordinated with INA PNS for the training of their construction workers through the ILO's training of trainers programmes.

Settlement coordination contributed to the IFRC learning process which is still on-going by establishing thematic focus groups that provided technical inputs and guidance in the production of learning products for the learning conference planned for September 2013. It also provided technical inputs in the finalization of the shelter and settlement toolbox through the review processes.

A camp taskforce was established to conduct a study and develop a road map for RC camp interventions with possible solutions for targeted camps. It was represented by IFRC, French RC, Canadian RC and American RC. The settlement sector was in charge of coordinating this taskforce. The results from this study including recommendations were presented at a workshop that brought together Movement partners, external agencies as well as local and national authorities. Feedback from this workshop including key recommendations have been integrated in the camp strategy (2013-2015 ) which has been finalized. In addition, technical support and advisory services were provided to finalize French RC and IFRC ravine construction feasibility studies in Delmas and also to create steering committees led by MTPTC to supervise the implementation of the ravine projects.

The settlement Movement Coordinator contributed to the development of the Government of Haiti housing policy and MTPTC communication strategy for better and safer construction. Technical support was also provided by reviewing the Humanitarian Implementation Plan (HIP) in collaboration with OCHA, UNOPS, IOM and CARE. Other support provided include inter agency initiatives such as the operational manual on return and relocation, Haiti informal land occupancy handbook, and the community engagement and social mobilization handbook.

**Disaster Risk Management:** Through the Technical Committee of disaster risk management, the Movement is addressing disaster risk related issues by setting thematic groups and focal persons. This has also allowed the coordination with external partners at national and regional level to voice the position and contributions of the Red Cross Movement to the existing frameworks such as the Hyogo framework for action (HFA) and the resilience agenda.

For the current Hurricane season, the DRM coordinator has been providing updates on preparedness mechanisms put in place as well as coordinating with Movement partners on preparedness measures. This includes taking stock of available relief items, updating assessment, distribution and reporting tools as well as organizing Emergency Response Team (ERT) trainings for HRCS, IFRC and PNS staff.

**Evaluation, Accountability and Learning:** Following recommendations from the 2012 Haiti Learning Conference, the Evaluation, Accountability and Learning Movement Coordinator position was filled in January 2013. Key achievements during the reporting period include:

- Elaboration of a learning methodology/process aiming at institutionalizing the lessons learnt during the 3 years of operation and allowing the design and development of more effective and efficient response models.
- Identification/formalization of key lessons learnt (case studies, best practices, guidelines, toolkits, etc.) with the contribution and support from all RCRC Movement actors in Haiti and their headquarters. This was done through online survey monkey, technical committees, coordination meetings, focus groups, individual interviews and field visits.
- The organization of the 2<sup>nd</sup> Learning Conference (to take place in Panama on 18-19 September 2013) is on-going. The conference will allow participants to share the knowledge and experience acquired as well as promote ownership of the lessons learnt and encourage the replication of learning initiatives. This will also be an opportunity to collectively make strong commitments and measures to mainstream, institutionalize and incorporate best practices into the way we work..
- The Performance and Accountability Working Group (PAWG) has been reactivated. A case study on the efficiency of IFRC's beneficiary feedback mechanisms has been conducted by ALNAP and CDA collaborative Learning Projects. Accountability to Beneficiaries minimum standards have been validated by the Steering Committee. The PAWG is working on the development of tools/activities to operationalize these standards.
- The Haiti Evaluation Framework implementation is on-going and new evaluations/studies have been identified to feed into the Learning process.

**Water and Sanitation (WatSan):** The TMC water and sanitation team intensified collaboration between IFRC, HRCS and DINEPA as part of the Memorandum of Understanding (MoU) between the three organizations. During this period, a monthly reporting and planning system was established with DINEPA for the MoU. A second load of hydraulic materials, with a value of approximately USD 250,000 has been procured by IFRC and will be delivered to DINEPA. These hydraulic materials will be used for the repair and extension of the water network in the Port-au-Prince Metropolitan Area (PPMA). The WatSan sector provided technical support to DINEPA for the preparation of technical documents, including construction drawings, for the construction of 28 new water kiosks and the repair of 15 existing water kiosks in the PPMA. After several delays, the tender process was launched in late May 2013. Given the MoU was due to end on the 13 July 2013, DINEPA formally requested an extension of the MoU until the end of January 2014 from IFRC. IFRC and HRCS have been working with the donor to find an appropriate way for the MoU to move forward given the delays that have been experienced during this reporting period.

The WatSan TMC have also co-facilitated, with HRCS, in the cholera taskforce. The objective of the cholera taskforce was to assess the cholera situation and provide a plan for a scale up in the Red Cross response. This included development of a plan of action and budget.

**Health and Care:** The mechanisms of coordination of health activities have been strengthened with the RC Movement partners and external partners with the establishment of several platforms for information sharing, programme implementation as well as programme monitoring and reporting. There are currently four monthly thematic meetings that bring together all Movement partners who are working in the health sector, these include the CBHFA working group, the HIV working group, the PSP monthly consortium meeting and the health coordination meeting. These meetings serve as forums for field activity planning, information sharing on challenges, lessons learnt and best practices. There is currently a linear reporting system in the health department that allows field reports to be sent directly to thematic group focal persons at the HRCS headquarters then get consolidated as a monthly document and a working tool by the reporting officer.

Routine field visits are organized from the HRCS headquarters to all the PNS to familiarize with field activities and give advice as needed. This process has allowed to design the process of launching the CBHFA consortium within the RC Movement in order to deliver community health services in a uniform and harmonized manner.

Collaboration with external partners to the RC Movement has continued with HRCS/IFRC participation in inter-agency meetings with international NGOs, UN and the Ministry of Health. Though the health cluster has not been active for several months, direct collaboration with the Ministry of Health has enabled continued support to the fight against cholera.

### **Communications and Beneficiary Communications**

Beneficiary Communications support during the period focussed supporting to INA and HRCS departments including design support for updated leaflets for the relocation team and responding to thousands of calls from the Noura questions and complaints line by beneficiaries registered for rental support. In addition, the IFRC sound

truck regularly visited targeted camps where the return and relocation project was on-going to relay verbal messages that assisted registered households to decide on sheltering solutions that best suited their families' needs, resources and abilities to sustain their respective options. Below is a summary of activities conducted by the beneficiary communications team:

Fact Box – Beneficiary Communications – as at 30 June 2013	Amount
SMS delivered	100,650,000
People reached by SMS	4,000,000
Radio hours	254 Hours
Calls answered on radio show (from 01 January 2011)	2,257
Camps reached by sound truck	2,111
Calls to Red Cross info line: (Discontinued January 2012)	1,648,814
Calls to Noula questions and complaints line	14,539
Calls to Telefon Kwa Wouj info line (from 28 May 2012)	706,839
Surveys completed on Telefon Kwa Wouj	286,073

### Humanitarian diplomacy

The High Level Focus Group (HLFG) fifth mission to Haiti, took place between 25 February to 1 March 2013. The purpose of the meeting was to discuss on Haiti operation implementation progress including information of key achievements and risks as well as agree on recommendations for further strengthening of the Haitian RC as well as the IFRC's capacity and image in disaster recovery. Also the meeting served to oversee implementation of any Governing Board decisions relevant to the Haiti Earthquake Operation

Based on meetings with the President and the Executive Director of the Haiti Red Cross Society and heads of delegations for IFRC, ICRC and PNSs, the HLFM identified three major issues: the future IFRC strategy in Haiti; the presence of the Movement through Participating National Societies (PNS) and; the evolution of, and prospect for the Haiti Red Cross Society

The HLFM took note of five themes that IFRC is pursuing and gave guidance. These include; support for people still living in camps and their relocation to more appropriate and sustainable housing, food security, Cholera, disaster preparedness and risk reduction and support for the capacity building of the Haiti Red Cross Society. Finally, The HLFM commended the IFRC Secretariat for its diligence in addressing the recommendations from its last mission and highlighted that there are still areas that require attention.

The relationship with the Government was strained during the reporting period because of the postponement of the first meeting of the Aid-efficiency committee –CAED (“Comité de l’efficacité de l’aide -). This meeting, which was to be held in December 2012, was postponed three times and was finally held on 10 May 2013. This postponement was partially due to general political difficulties linked to the search for solution of internal tensions in the Executive power and of complex conflicts between this power as well as the Parliament and the Judiciary related to the formation of a Permanent electoral committee –PEC- (“Comité electoral permanent –CEP-“), which is key for the organization of the elections to the Senate and the municipal councils. The procrastination was also due to conceptual differences between the Government and some major donors, as well as delays in the production of basic documents for the meeting.

Despite this, there has been active participation of RCRC Movement in some joint bodies formed by the Government and the international agencies, such as the sectoral tables on environment and on housing (in which IFRC was represented by the American Red Cross). Also, on invitation by the Ministry of Health, the Haiti Red Cross Society and the IFRC delegation participated in the pre-launch meeting of the national health plan 2013-2023, coordinated by the Director general of that ministry.

The Humanitarian Country Team (HCT) coordination has been on-going with the active participation of IFRC and ICRC delegations. The HCT meeting of 27 March, in which Médecins sans Frontières (MSF) presented the results of a cholera study in Artibonite demonstrating that the disease is not endemic, but only epidemic, has been crucial as the team addressed the possibility to eradicate this disease during the dry season. This needs a renewed effort by the Health ministry and its foreign and international partners. Also discussed was the growing food insecurity in the country. In addition, the IFRC Head of Delegation participated in a meeting on the coalition against Cholera in Washington DC. Issues discussed include the eradication of Cholera in the Hispaniola Island.

Haiti 3 years and beyond meeting was held at HRCS base camp in May 2013. The purpose of the meeting was for Movement partners and representatives from the Haitian government, municipal authorities of the metropolitan area, international organizations and donor agencies to reflect on the critical humanitarian needs with regards to camps and Cholera .



*Haiti three years and beyond meeting (21-22 May 2013). Photo: IFRC*

This forum was an important opportunity for the Haiti Red Cross Society to reaffirm its role as the auxiliary of the Haitian Government and stress its strong intention to continue being a key partner in facing the looming threat of cholera and the challenges of the displaced populations in line with the government plans. As a result of this meeting, a cholera task force was formed and subsequently, an Cholera Appeal and Plan of action (2013-2015) was developed and will be launched in the third quarter of the year.

As regards the Haiti disaster-law project, a Disaster Law delegate was recruited in January 2013. With the support of the Humanitarian Diplomacy delegate, the Disaster Law delegate re-contacted all the governmental, inter-governmental, non-governmental and RCRC specialists and updated the contacts. The result is that joint activities are being prepared to complete and push forward several initiatives on disaster law.

Representatives of the IFRC delegation in Haiti attended the Association of Caribbean States Heads of State and Heads of Government Summit on 26 April 2013. A joint effort from the IFRC Americas Zone Office (AZO) and the IFRC delegation resulted in the adoption of a clause on disaster risk reduction and disaster law in the Pétion Ville declaration. This petition is on green response and urban risk.

### **Disaster Law (DL)**

During the reporting period, the Disaster Law department provided comments to the draft law on medicines focusing on simplifying the import and distribution of medicines after a disaster. Additionally, comments were provided to the draft law on electronic communications ensuring that communications are facilitated for relief operations in line with the requirements of the Tampere Convention.

Together with the Governments of Haiti, Mexico and the Association of Caribbean States (ACS), IFRC co-hosted a high-level event on "Strengthening legal preparedness to international disaster assistance in Association with Caribbean States countries." This was during the 5<sup>th</sup> Summit of Heads of State and/or Government of ACS.

Outreach to government on the importance of the legal preparedness to international disaster law response has been on-going. Some partnerships with international organizations and key government agencies were lined up. The Disaster Law Haiti page was further developed, which includes a new International Disaster Response Law (IDRL) video.

A first report on the legal barriers to emergency and transitional shelter in Haiti is currently being finalized and preparations for a field study are underway.

## **SUPPORT SERVICES**

### **Logistics**

The procurement unit continues to provide support in requisition, procurement and delivery to the programmes and other services to IFRC, HRCS and PNS as well as providing support for implementation of new logistics base

construction project. In addition, three Framework Agreements have been established locally (two for construction materials and one for stationery supplies) so that significant time and resources savings can be achieved. The warehouse unit delivered 840 MT of relief, construction, water and sanitation items in two IFRC/HRCS warehouses located in Barbancourt and Base Camp, Port-au-Prince and dispatched 1,376 MT of items during this reporting period.

The proposal for construction of a new log base for workshop and warehouse facilities in HRCS base camp has been approved both at HRCS and IFRC Americas Zone Office levels. Construction has commenced and the essential part of the log base will be completed by the end of August 2013.

The pipeline unit worked to clear 36 shipments from the customs service while the fleet unit continues to implement activities in its vehicles exit strategic plan with the shipping of 40 cars to Dubai. The unit has also commenced the shipment process of 38 additional vehicles after receiving their re-exportation permit. In addition, a local committee has been established and direct sale has been approved for 9 cars to be disposed in-country. Fifty eight (58) trucks belonging for the Haiti delegation have approved to be sold from Panama (including American Red Cross funded trucks). Request for sale permit has already started with 15 trucks in the pipeline. On 30 June 2013, contracts for 27 Vehicle Rental Programme (VRP) cars used by the Delegation were terminated. A total of 637 vehicles were serviced and repaired. Meetings were held with the RMA Workshop and Service Company as well as other stakeholders on ways to improve workshop services. Support to Movement partners continued and regular monthly meetings were organized to raise fleet challenges and plan with Movement partners. On transport services to staff, over 36,000 travel requests were received and acted upon by the dispatch office.

### **Finance**

In order to cope with the number of transactions and provide better service to other departments, the finance department has been restructured with the creation of 4 sections (accounts, treasury, supplementary services and internal control). The 4 sections are headed by National Staff who had been trained on Federation procedures in the Zone Office in Panama.

### **Information Technology and Telecommunications (IT and Telecom)**

A plan of action as regards to audit recommendations has been implemented. Information and Communication Technology (ICT) capacity building through Digital Divide Initiative (DDI) project is being developed to the benefit the NS as part of the National Society Knowledge Development (NSKD) portfolio projects toward the Haiti Red Cross Society.

Haiti operation workstation computers have been migrated to Windows 7 as part of the global international subscriber dialling (ISD) project to migrate all IFRC computers to this Desktop/Laptop Operating System.

Information Technology and Telecom (ITT) support has been provided to PNS based in Haiti upon request as well as during the Sandy operation in Jeremy.

### **Human Resources (HR)**

The Human Resources (HR) coordination group recommendations to Haiti Red Cross Society and IFRC senior management for consideration and approval of payment of Cost of Living Adjustment to Red Cross National Staff was approved starting in January 2013. IFRC has between the period January - June 2013 ended the contracts of 217 staffers among whom 108 (49.8%) were available to attend an IFRC facilitated out-placement training. In addition, HR department organized and facilitated an IMPACT training with participants from IFRC, HRCS and PNS in April 2013. Finally, selected senior managers of IFRC, HRCS and PNS have started a 6-month Managers course in June 2013.

### **Security**

The current situation dictates YELLOW Phase (some security concerns, heightened security awareness). Much of Port-au-Prince's (PaP) population has now been re-housed in houses inside the capital and in the provinces. However, significant levels of discontent remains among the population regarding the perceived delay in providing timely assistance. Frustration and dissatisfaction is sometimes being expressed through sporadic outbreaks of demonstrations/violence.

Many illegal Haitian immigrants have been deported from the United States since January 2013. When back in Haiti, these deported people have (re)created gangs. Currently, all these armed gangs are very professional, well organized and adequately structured. They are very efficient in break-ins, robberies at gunpoint, petty thefts. In

the Nippes Department, drug smuggling has been on the rise since March 2013. In addition, armed criminal gangs are seeking to establish territorial control in cities and rural areas. The Haiti National Police continued its fight against these organized criminals across Haiti.

There have been several violent protests in towns where RC\RC personnel are based (Leogane) and towns on key transport routes (Gonaives and Grand Goave). Local people are now protesting for lack of food, lack of water or electricity, damaged crops due to heavy rains (Hurricane Sandy and Tropical Storm Isaac in 2012) as well as the high cost of living. As food prices in Haiti are going up, some civil unrests in the coming weeks/months are to be considered.

Following nine years of operations in the Caribbean country, the United Nations Stabilization Mission in Haiti (MINUSTAH) is implementing a Consolidation Plan (2013-2016) to assess, in conjunction with the Government, a gradual withdrawal of troops stationed on Haitian territory. The current situation in Haiti is radically different from the one in 2004 when MINUSTAH began and the country was on the brink of civil war. The plan focuses on the essential tasks of its mandate (electoral capacity, the Rule of Law and Human Rights, and key issues related to governance), which will allow MINUSTAH to gradually reduce its civilian and military staff by 40 per cent.

### Risk Management and Legal

The Risk Management and Legal Department provided legal support to all the departments and programmes in the preparation and revision of different legal documents such as agreements, service contracts, amendments, amongst others. The department also provided legal advice in coordination with the local legal firms. In addition, the department is coordinating mid-year follow up on the second internal audit recommendations. This audit was conducted between 22 October and 2 November 2012.

## Contact information

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## How we work

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

The IFRC's vision is to inspire, encourage, facilitate and promote at all times all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.

[www.ifrc.org](http://www.ifrc.org)  
Saving lives, changing minds.



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

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

Disaster Response Financial Report

MDRHT008 - Haiti - Earthquake

Timeframe: 13 Jan 10 to 31 Dec 15

Appeal Launch Date: 13 Jan 10

Disaster Response Financial Report

I. Funding

A. Budget 259,457,988

B. Opening Balance 0

C. Income	Cash contributions	Deferred Income	Inkind Goods & Transport	Inkind Personnel	Other Income	Total
Albanian Red Cross	15,828			0		15,828
American Red Cross	44,475,884		12,080,463	574,870		57,131,217
Andorran Red Cross	71,872		0	0		71,872
Antigua and Barbuda Red Cross	108,694		0	0		108,694
Arcoz Dorados S.V.	1,215,429		0	0		1,215,429
Argentine Red Cross	272,916		0	0		272,916
Armenian Red Cross Society	2,098		0	0		2,098
Australian Red Cross	3,214,684		0	325,067		3,539,751
Australian Red Cross (from Australian Government*)	926,900		0	0		926,900
Australia - Private Donors	439		0	0		439
Austrian Red Cross	36,629		570,822	0		607,451
Austrian Red Cross (from Austrian Government*)	684,275		0	0		684,275
Austrian Red Cross (from Austria - Private Donors*)	46,677		0	0		46,677
Bain & Co. Inc.	46,921		0	0		46,921
Bangladesh Red Crescent Society	1,099		0	0		1,099
Bahawal Swaziland Red Cross Society	6,889		0	0		6,889
Belarus Red Cross	14,935		0	0		14,935
Belgian Red Cross (Flanders)	61,454		1,054,080	0		1,115,534
Belgian Red Cross (Francophone)	16,562		254,806	0		271,369
Belgium - Private Donors	14,682		0	0		14,682
Belize Red Cross Society	341,663		0	0		341,663
Bolivia Private Donors	830		0	0		830
Botswana Red Cross Society	28,788		0	0		28,788
British Red Cross	1,992,174		1,255,290	167,927		3,415,392
British Red Cross (from DEC (Disasters Emergency Committee))	1,689,020		0	0		1,689,020
British Red Cross (from DFID - British Government*)	1,086,366		0	0		1,086,366
Bulgarian Red Cross	292,200		0	0		292,200
Cambodian Red Cross Society	10,415		0	0		10,415
Cambodia - Private Donors	724		0	0		724
Canada - Private Donors	254		0	0		254
Canadian Government	41,158		909,447	0		950,605
CARE International	68,280		0	0		68,280
Caribbean Airlines	2,289		0	0		2,289
CERN Staff Association	17,000		0	0		17,000
Chilean Red Cross	547,044		0	0		547,044
China Red Cross, Hong Kong branch	3,597,019		814,268	0		4,411,287
China Red Cross, Macau Branch	754,187		0	0		754,187
Colombian Red Cross Society	431,143		0	0		431,143
Consolidated Contractors Co. (CCC)	72,020		0	0		72,020
Costa Rican Red Cross	1,383,795		0	0		1,383,795
Credit Suisse	16,162		0	0		16,162
Croatian Red Cross	301,675		140,097	0		441,772
CWT Beheermaatschappij BV	104,145		0	0		104,145
Cyprus - Private Donors	135		0	0		135
Czech Government	81,808		0	0		81,808
Czech private donors	7,300		0	0		7,300
Czech Red Cross	165,107		0	0		165,107
Danish Red Cross	1,133,209		113,195	144,800		1,391,204
Danish Red Cross (from Danish Government*)	563,119		0	0		563,119
Denmark - Private Donors	103		0	0		103
Dominica Red Cross Society	105,745		0	0		105,745
Economist Group	16,689		0	0		16,689
Egyptian Red Crescent Society	52,010		0	0		52,010
Egypt - Private Donors	513		0	0		513
Ericsson	513,094		0	0		513,094
Estonia Government	235,246		0	0		235,246
Estonia Red Cross	66,946		0	0		66,946
Ethiopian Red Cross Society	3,000		0	0		3,000
European Commission - DG ECHO	2,828,186	104,653	0	0		2,828,186
European Economic & Social Committee (EESC)	19,887		0	0		19,887
Finland Red Cross	62,175		161,242	273,533		1,056,490
Fixed Mobile Convergence Alliance (FMCA)	11,581		0	0		11,581
France - Private Donors	464		0	0		464
French Red Cross	100,023		721,874	0		821,897
French Red Cross (from European Commission - DG ECHO*)	886,684		0	0		886,684
GDF Suez	10,613		0	0		10,613
German Red Cross	759,398		0	0		759,398
Germany - Private Donors	7,790		0	0		7,790
Ghana Red Cross Society	13,151		0	0		13,151
Great Britain - Private Donors	16,412		0	0		16,412
Guatemalan Red Cross	66,482		0	0		66,482
Haitian Red Cross Society	846,183		0	0		846,183
Hellenic Red Cross	73,790		0	0		73,790
Hilton Worldwide	779,047		0	0		779,047
Hungarian Red Cross	41,560		0	77,570		349,380
Icelandic Red Cross	219,297		52,514	0		349,380
IFRC at the UN Inc	-5,387		0	0		-5,387
IFRC at the UN Inc (from Alcatel Lucent*)	25,839		0	0		25,839
IFRC at the UN Inc (from Alcatel-Lucent Foundation*)	49,665		0	0		49,665
IFRC at the UN Inc (from Analoa Devices Incorporated*)	53,330		0	0		53,330
IFRC at the UN Inc (from BlackRock*)	18,738		0	0		18,738
IFRC at the UN Inc (from BP Foundation*)	315,459		0	0		315,459
IFRC at the UN Inc (from Brazilian Government*)	1,005,598		0	0		1,005,598
IFRC at the UN Inc (from CoreLogic*)	22,531		0	0		22,531
IFRC at the UN Inc (from DELL Direct Givino Campaign*)	250,053		0	0		250,053
IFRC at the UN Inc (from Electronic Theatre Controls, Inc.*)	63,406		0	0		63,406
IFRC at the UN Inc (from Fibrogen*)	10,052		0	0		10,052
IFRC at the UN Inc (from Gallagher Arthur J. & Co.*)	116,361		0	0		116,361
IFRC at the UN Inc (from Gilson Inc.)	8,081		0	0		8,081
IFRC at the UN Inc (from Health Partners of Philadelphia*)	2,158		0	0		2,158
IFRC at the UN Inc (from Islamic Heritage*)	3,001		0	0		3,001
IFRC at the UN Inc (from Jones Apparel Group*)	130,603		0	0		130,603
IFRC at the UN Inc (from Kraft Foods Foundation*)	951		0	0		951
IFRC at the UN Inc (from Mellon Bank*)	163,675		0	0		163,675
IFRC at the UN Inc (from The Mosaic Company*)	125,027		0	0		125,027
IFRC at the UN Inc (from ThermoFisher Scientific*)	24,624		0	0		24,624
IFRC at the UN Inc (from United States - Private Donors*)	31,755		0	0		31,755
IFRC at the UN Inc (from Westminster Presbyterian Church of India - Private Donors)	64,017		0	0		64,017
India - Private Donors	308		0	0		308
Iranian private donors	74		0	0		74
Ireland - Private Donors	23,968		0	0		23,968
Irish Government	368,895		0	0		368,895
Irish Red Cross Society	3,667,940		0	0		3,667,940
Irish Red Cross Society (from Irish Government*)	221,988		0	0		221,988
Italian Government	267		0	0		267
Italian Government Bilateral Emergency Fund	737,681		0	0		737,681
Italian Red Cross	1,726,751		0	0		1,726,751
Italy - Private Donors	891		0	0		891
Jamaica Red Cross	213,066		0	0		213,066
Jamaica Red Cross (from Jamaica - Private Donors*)	265,281		0	0		265,281
Japanese Government	7,038,649	1,815	0	0		7,038,649
Japanese Red Cross Society	13,233,034		0	1157,138		14,390,172
Japan - Private Donors	8,894		0	0		8,894
Jordan - Private Donors	9,703		0	0		9,703
Kazakhstan - Private Donors	1,645		0	0		1,645
KPMG Disaster Relief Fund	1,331		0	0		1,331
Kuwait - Private Donors	50,374		0	0		50,374
Kuwait Red Crescent Society	1,052,147		362,340	0		1,414,488
Latvian Red Cross	5,870		0	0		5,870
Lebanese Red Cross	45,975		0	0		45,975
Liberian Red Cross Society	4,275		0	0		4,275
Libyan Private Donors	4,063		0	0		4,063

Selected Parameters			
Reporting Timeframe	2010/01-2013/07	Programme	MDRHT008
Budget Timeframe	2010/01-2015/12	Budget	APPROVED
Split by funding source	Y	Project	*

All figures are in Swiss Francs (CHF)

Lichtenstein - Private Donors	5,199	0	0	5,199
Liechtenstein Red Cross	2,419	0	0	2,419
Lithuanian Red Cross Society	37,296	0	0	37,296
Luxembourg - Private Donors	183	0	0	183
Luxembourg Red Cross	18,466	348,512	0	366,979
Macedonia private donors	100	0	0	100
Malaysian Red Crescent Society	10,895	0	0	10,895
Malaysia - Private Donors	31	0	0	31
Malta Red Cross Society	63,699	0	0	63,699
Marricott International Inc.	7,784	0	0	7,784
Mauritius Red Cross Society (from Mauritius Private Donors)	70,097	0	0	70,097
McDonald corp.	513,084	0	0	513,084
Mexican Red Cross	326,278	0	0	326,278
Mexico - Private Donors	1,026	0	0	1,026
Michelin	50	0	0	50
Moroccan Red Crescent	32,560	0	0	32,560
Morocco Private Donors	16,705	0	0	16,705
Namibia Red Cross	56,716	0	0	56,716
Nepal Private Donors	2,039	0	0	2,039
Nepal Red Cross Society	1,500	0	0	1,500
Nestle	205,655	0	0	205,655
Netherlands - Private Donors	1,394	0	0	1,394
New Zealand Red Cross	875,285	0	101,680	976,965
New Zealand Red Cross (from New Zealand Government*)	298,380	0	0	298,380
Nicaraguan Red Cross	172,205	0	0	172,205
Nigeria private donors	220	0	0	220
Nigeria - Private Donors	10,830	0	0	10,830
Norwegian Red Cross	3,787,063	214,548	40,187	4,041,798
Office of the Representative of the Dalai Lama	100,000	0	0	100,000
Oman - Private Donors	8,556	0	0	8,556
On Line donations	894,656	0	0	894,656
OPEC Fund For International Development	538,097	0	0	538,097
Other	5,057,278	0	164,797	5,222,075
Pakistan Private Donors	5,332	0	0	5,332
Palau Red Cross Society	6,371	0	0	6,371
Peruvian Red Cross	72,717	0	0	72,717
Polish Red Cross	128,947	0	0	128,947
Portuguese - Private Donors	147	0	0	147
Portuguese Red Cross	737,078	0	0	737,078
Procter & Gamble	5,000	0	0	5,000
Qatar Red Crescent Society	156,342	0	0	156,342
Red Crescent Society of the United Arab Emirates	164,972	236,100	0	401,073
Red Cross of Cape Verde	396	0	0	396
Red Cross of Monaco	73,649	0	0	73,649
Red Cross of Montenegro	5,556	0	0	5,556
Red Cross of Montenegro (from Montenegro Government*)	87,038	0	0	87,038
Red Cross of Viet Nam	21,395	0	0	21,395
Red Cross Society of China	3,228,045	0	0	3,228,045
Red Cross Society of China (from Jet Lee One)	319,898	0	0	319,898
Red Cross Society of Côte d'Ivoire	34,193	0	0	34,193
Red Cross Society of Georgia	320	0	0	320
Red Cross Society of Georgia (from United States Government - Missions*)	680	0	0	680
Romanian Red Cross	69,633	0	0	69,633
Russia - Private Donors	106	0	0	106
Saint Kitts and Nevis Red Cross Society	68,676	0	0	68,676
Saint Lucia Red Cross	63,426	0	0	63,426
Saint Vincent and the Grenadines Red Cross	90,463	0	0	90,463
Saudi Arabia - Private Donors	1,075	0	0	1,075
Save the Children (from Great Britain - Private Donors*)	209,514	0	0	209,514
Senegal Private Donor	148	0	0	148
Seychelles Red Cross Society	12,948	0	0	12,948
Seychelles Red Cross Society (from Seychelles private donors*)	26,339	0	0	26,339
Singapore - Private Donors	3,405	0	0	3,405
Singapore Red Cross Society	583,749	0	0	583,749
Singapore Red Cross Society (from New Creation Church*)	20,636	0	0	20,636
Singapore Red Cross Society (from Rahmatan Lili Alamin (Blessings-to-all) Foundation*)	50,782	0	0	50,782
(SITA) Ste Intern. Telecom. Aeronau	77,226	0	0	77,226
Slovak Red Cross	219,505	0	0	219,505
Slovenia Government	73,746	0	0	73,746
Slovenian Red Cross	108,446	0	0	108,446
Soft Choice Corporation	23,069	0	0	23,069
Sonesta Maho BC	26,582	0	0	26,582
South Africa - Private Donors	105	0	0	105
Spain - Private Donors	15,228	0	0	15,228
Spanish Red Cross	1,354,632	464,194	168,463	1,987,289
Sohene International Ltd	1,570,081	0	0	1,570,081
Sri Lanka - Private Donors	1,037	0	0	1,037
SSI (Survey Sampling International)	20,638	0	0	20,638
Suriname Red Cross	600,921	0	0	600,921
Swedish Red Cross	7,545,157	0	181,363	7,726,520
Swedish Red Cross (from Swedish Government*)	3,941,750	0	0	3,941,750
Swiss Red Cross	66,135	1,017,467	34,250	1,117,852
Switzerland - Private Donors	41,542	0	0	41,542
Synovate Inc.	30,203	0	0	30,203
Syrian Arab Red Crescent	10,027	154,257	0	164,284
Tajikistan - Private Donors	103	0	0	103
Thailand - Private Donors	52,443	0	0	52,443
Thasia International Development Ltd	53,637	0	0	53,637
The Bahamas Red Cross Society	675,792	0	0	675,792
The Barbados Red Cross Society	413,594	0	0	413,594
The Canadian Red Cross Society	21,772,354	1,008,789	825,293	23,606,436
The Canadian Red Cross Society (from Canadian Government*)	33,853,840	0	0	33,853,840
The Gambia Red Cross Society	1,591	0	0	1,591
The Guyana Red Cross Society	69,507	0	0	69,507
The Netherlands Red Cross	8,975,757	4,669,405	0	13,645,162
The Netherlands Red Cross (from Netherlands Government*)	735,943	0	0	735,943
The Red Cross of Serbia & Montenegro	-700	0	0	-700
The Red Cross of Serbia & Montenegro (from Government of Serbia & Montenegro*)	172,162	0	0	172,162
The Red Cross of Serbia & Montenegro (from Serbia & Montenegro - Private Donors*)	1,739	0	0	1,739
The Red Cross of The Former Yugoslav Rep. Macedonia	95,161	0	0	95,161
The Red Cross Society of Bosnia and Herzegovina	31,403	0	0	31,403
The Red Cross Society of Bosnia and Herzegovina (from Government of Bosnia & Herzegovina*)	171,317	0	0	171,317
The Republic of Korea National Red Cross	2,408,824	0	0	2,408,824
The Republic of Korea National Red Cross (from Republic of Korea - Private Donors*)	545,955	0	0	545,955
The South African Red Cross Society	286,805	0	0	286,805
The Thai Red Cross Society	4,341,900	0	0	4,341,900
The Thai Red Cross Society (from Thai The Trinidad and Tobago Red Cross Society)	30,658	0	0	30,658
The Trinidad and Tobago Red Cross Society	1,262,754	0	0	1,262,754
Thomson Reuters	14,048	0	0	14,048
Trinidad & Tobago - Private Donors	15,046	0	0	15,046
Ukrainian Red Cross Society	9,303	0	0	9,303
Unidentified donor	5,199	0	0	5,199
United Arab Emirates - Private Donors	13,084	0	0	13,084
United States - Private Donors	18,089	0	0	18,089
Uruguay Red Cross	14,205	0	0	14,205
VERFWHO Voluntary Emergency Relief	7,000	0	0	7,000
WIPO /OMPI staff	1,570	0	0	1,570
Xstrata AG	508,906	0	0	508,906
Zambia Red Cross Society (from Zambia - Private Donors)	234	0	0	234
Zurich Insurance Company	239,923	0	0	239,923
Zurich Foundation	250,000	0	0	250,000
Balance Reallocation			866,506	866,506
Fundraising Fees			-312,898	-312,898
IFRC at the UN line allocations			31,487	31,487
Interest Allocation to Programmes			70,661	70,661
Programme & Services Support Recover			855,560	855,560
Services Fees			1,482,997	1,482,997
Sundry Income			768,836	768,836
<b>Total</b>	<b>217,681,102</b>	<b>106,468</b>	<b>26,603,713</b>	<b>4,236,838</b>
<b>D. Total Funding = B+C</b>	<b>435,146,376</b>	<b>212,837</b>	<b>53,207,425</b>	<b>8,473,676</b>
* Funding source data based on information provided by the donor				<b>7,526,297</b>
				<b>504,353,974</b>

## II. Movement of Funds

	Raise humanitarian standards	Grow RC/RC services for vulnerable people	Strengthen RC/RC contribution to development	Heighten influence and support for RC/RC work	Joint working and accountability	TOTAL	Deferred Income
<b>B. Opening Balance</b>	0	0	0	0	0	0	
<b>C. Income</b>	152,736,404	67,646,224	6,916,101	24,886,171	252,184,901	106,468	
<b>E. Expenditure</b>	-131,383,927	-59,931,194	-6,385,314	-21,950,607	-219,651,041		
<b>F. Closing Balance = (B + C + E)</b>	21,352,478	7,715,030	530,787	2,935,564	32,533,860	106,468	

## III. Expenditure

Account Groups	Expenditure						TOTAL	Variance A - B
	Budget A	Raise humanitarian standards	Grow RC/RC services for vulnerable people	Strengthen RC/RC contribution to development	Heighten influence and support for RC/RC work	Joint working and accountability		
<b>BUDGET (C)</b>			141,900,787	79,644,924	8,796,030	29,116,247	259,457,988	
<b>Relief items, Construction, Supplies</b>								
Shelter - Relief	18,067,281		18,007,093	54,612			18,061,705	5,576
Shelter - Transitional	22,410,889		21,271,633	365,275			21,636,907	773,982
Construction - Housing	205,860		106,615	36,695		62,550	205,860	-
Construction - Facilities	2,286,052		1,519,216	124,484			1,643,700	642,353
Construction Materials	5,491,251		4,632,856	714,629			5,451,295	39,956
Clothing & Textiles	4,140,988		3,734,377	398,180			4,217,560	-76,572
Food	313,444		1,662				311,782	1,662
Seeds & Plants	27,281		4,478				4,478	22,803
Water, Sanitation & Hygiene	22,405,897		14,076,162	7,348,533	89	54,281	21,479,064	926,833
Medical & First Aid	812,684		551,598	98,671	84,984	17,972	753,424	59,259
Teaching Materials	1,451,824		57,350	310,508		1,037	368,896	1,082,928
Utensils & Tools	4,562,849		4,472,024	58,340		9,882	4,540,046	22,803
Other Supplies & Services	684,021		536,551	2,789		7,363	546,703	137,318
<b>Total Relief items, Construction, Supplies</b>	82,860,320		68,971,614	9,512,915	85,073	653,481	79,223,082	3,637,238
<b>Land, vehicles &amp; equipment</b>								
Land & Buildings	3,625,758		44,981	1,136,273		4,108	1,185,362	2,440,396
Vehicles	1,843,716		273,153	1,570,563	-17,060		1,826,656	17,060
Computers & Telecom	1,245,655		443,202	78,955	178,961	356,312	1,057,430	188,225
Office & Household Equipment	573,764		239,458	120,161	3,096	213,270	575,984	-2,221
Medical Equipment	30,315		389,368	30,315			30,315	0
Others Machinery & Equipment	57,159		23,008	6,955		27,197	57,159	0
<b>Total Land, vehicles &amp; equipment</b>	7,376,367		1,023,802	2,943,222	164,998	600,885	4,732,907	2,643,460
<b>Logistics, Transport &amp; Storage</b>								
Storage	4,226,022		2,415,038	865,348	32,578	14,006	3,326,970	899,052
Distribution & Monitoring	6,626,819		5,305,683	937,565	-117,390	442,943	6,568,800	98,018
Transport & Vehicles Costs	11,768,752		5,037,330	3,454,120	233,770	1,850,435	10,575,656	1,193,096
Logistics Services	2,012,473		1,542,446	203,541	7,873	244,754	1,998,614	13,859
<b>Total Logistics, Transport &amp; Storage</b>	24,634,066		14,300,497	5,460,575	156,831	2,552,138	22,470,041	2,164,025
<b>Personnel</b>								
International Staff	45,034,971		11,084,814	8,294,252	2,801,187	15,840,080	38,020,332	7,014,639
National Staff	24,044,319		7,257,639	5,976,454	491,087	7,211,456	20,936,636	3,107,683
National Society Staff	8,586,185		1,435,613	3,821,389	175,274	559,962	5,992,239	2,593,946
Volunteers	1,164,288		389,368	486,359	7,736	129,697	1,025,160	139,128
<b>Total Personnel</b>	78,829,763		20,167,434	18,590,454	3,475,284	23,741,195	65,974,367	12,855,396
<b>Consultants &amp; Professional Fees</b>								
Consultants	3,940,870		2,058,121	148,380	368,171	586,410	3,161,083	779,787
Professional Fees	1,560,732		241,234	301,287	153,910	506,530	1,202,940	357,792
<b>Total Consultants &amp; Professional Fees</b>	5,501,602		2,299,355	449,667	522,081	1,092,940	4,364,023	1,137,580
<b>Workshops &amp; Training</b>								
Workshops & Training	3,625,465		1,200,575	555,382	252,054	263,317	2,271,328	1,354,137
<b>Total Workshops &amp; Training</b>	3,625,465		1,200,575	555,382	252,054	263,317	2,271,328	1,354,137
<b>General Expenditure</b>								
Travel	3,043,647		1,155,869	278,934	368,262	773,410	2,576,474	467,172
Information & Public Relations	1,547,631		414,020	164,403	394,216	205,222	1,177,861	369,770
Office Costs	6,603,397		823,095	1,273,495	49,075	1,331,889	3,477,555	3,125,842
Communications	1,677,634		256,271	148,911	231,252	149,651	1,386,086	291,548
Financial Charges	-861,450		-729,365	89,217	51,364	-280,399	-869,092	7,642
Other General Expenses	529,774		291,275	92,785	7,019	42,793	433,872	95,902
Shared Office and Services Costs	6,345,802		9,994,431	4,115,129	215,838	-12,294,830	2,030,568	4,315,233
<b>Total General Expenditure</b>	18,886,433		12,205,596	6,162,874	1,317,025	-9,472,173	10,213,223	8,673,110
<b>Depreciation</b>								
Depreciation and impairment	5,209,275		1,417,335	1,103,393	19,452	1,207,264	3,747,445	1,461,830
<b>Total Depreciation</b>	5,209,275		1,417,335	1,103,393	19,452	1,207,264	3,747,445	1,461,830
<b>Contributions &amp; Transfers</b>								
Cash Transfers National Societies	14,832,831		957,709	10,432,449			11,390,158	3,442,673
Cash Transfers to 3rd Parties	726,939		193,979	532,960			726,939	0
<b>Total Contributions &amp; Transfers</b>	15,559,770		1,151,688	10,965,409			12,117,097	3,442,673
<b>Operational Provisions</b>								
Operational Provisions	0		172,180	293,592	8,320	48,591	522,683	-522,683
<b>Total Operational Provisions</b>	0		172,180	293,592	8,320	48,591	522,683	-522,683
<b>Indirect Costs</b>								
Programme & Services Support Recover	15,690,785		7,660,284	3,517,518	374,154	1,258,279	12,810,236	2,880,549
<b>Total Indirect Costs</b>	15,690,785		7,660,284	3,517,518	374,154	1,258,279	12,810,236	2,880,549
<b>Pledge Specific Costs</b>								
Pledge Estimating Fee	1,212,540		776,806	345,942	4,841	4,313	1,131,903	80,637
Pledge Reporting Fees	71,603		36,761	30,271	5,200	376	72,608	-1,005
<b>Total Pledge Specific Costs</b>	1,284,142		813,567	376,213	10,041	4,689	1,204,510	79,632
<b>TOTAL EXPENDITURE (D)</b>	259,457,988		131,383,927	59,931,194	6,385,314	21,950,607	219,651,041	39,806,947
<b>VARIANCE (C - D)</b>			10,516,860	19,713,730	2,410,717	7,165,640	39,806,947	

## IV. Breakdown by subsector

Business Line / Sub-sector	Budget	Opening Balance	Income	Funding	Expenditure	Closing Balance	Deferred Income
<b>BL2 - Grow RC/RC services for vulnerable people</b>							
Disaster management	12,823,198	0	12,322,203	12,322,203	11,033,408	1,289,795	
Disaster response	59,799,454	0	69,784,721	69,784,721	58,265,803	11,518,918	10,235
Emergency preparedness	2,790,628	0	2,252,070	2,252,070	2,242,896	9,173	94,418
Recovery	100,727	0	100,747	100,747	100,747	0	0
Shelter	66,386,779	0	68,276,664	68,276,664	59,741,073	8,535,591	1,815
<b>Subtotal BL2</b>	141,900,787	0	152,736,404	152,736,404	131,383,927	21,352,478	106,468
<b>BL3 - Strengthen RC/RC contribution to development</b>							
Health	11,098,836	0	11,591,612	11,591,612	7,445,315	4,146,297	
Water and sanitation	37,437,759	0	35,996,354	35,996,354	33,801,272	2,195,083	
Organizational development	31,108,329	0	20,058,258	20,058,258	18,684,607	1,373,651	
<b>Subtotal BL3</b>	79,644,924	0	67,646,224	67,646,224	59,931,194	7,715,030	
<b>BL4 - Heighten influence and support for RC/RC work</b>							
Humanitarian principles and values	58,805	0	58,805	58,805	58,805	0	0
Communications	8,695,530	0	6,815,601	6,815,601	6,284,814	530,787	
Resource mobilisation	41,695	0	41,695	41,695	41,695	0	0
<b>Subtotal BL4</b>	8,796,030	0	6,916,101	6,916,101	6,385,314	530,787	
<b>BL5 - Joint working and accountability</b>							
Audit and risk management	1,138,961	0	964,751	964,751	839,394	125,357	
Cooperation and coordination	7,385,367	0	5,226,030	5,226,030	4,446,295	779,734	
General management	18,298,413	0	16,959,234	16,959,234	15,159,686	1,799,548	
Planning, monitoring and evaluation	1,890,953	0	1,216,752	1,216,752	1,102,678	114,074	
Security	402,553	0	519,405	519,405	402,553	116,852	
<b>Subtotal BL5</b>	29,116,247	0	24,886,171	24,886,171	21,950,607	2,935,564	
<b>GRAND TOTAL</b>	259,457,988	0	252,184,901	252,184,901	219,651,041	32,533,860	106,468

## EMERGENCY APPEAL

26/08/2013

MDRHT008

HAITI EARTHQUAKE

Budget Group	Multilateral Response	Inter-Agency Shelter Coord.	Bilateral Response	Appeal Budget CHF
Shelter - Relief	18,067,281			18,067,281
Shelter - Transitional	22,410,889			22,410,889
Construction - Housing	205,590	270		205,860
Construction - Facilities	2,286,052			2,286,052
Construction - Materials	5,491,251			5,491,251
Clothing & Textiles	4,140,988			4,140,988
Food	313,444			313,444
Seeds & Plants	27,281			27,281
Water, Sanitation & Hygiene	22,405,897			22,405,897
Medical & First Aid	812,661	23		812,684
Teaching Materials	1,451,824			1,451,824
Ustensils & Tools	4,562,849			4,562,849
Other Supplies & Services	684,021			684,021
Emergency Response Units	0		34,851,890	34,851,890
Cash Disbursements	0			0
<b>Total RELIEF ITEMS, CONSTRUCTION AND SUPPLIES</b>	<b>82,860,027</b>	<b>293</b>	<b>34,851,890</b>	<b>117,712,210</b>
Land & Buildings	3,625,758			3,625,758
Vehicles Purchase	1,843,716			1,843,716
Computer & Telecom Equipment	1,239,844	5,810		1,245,655
Office/Household Furniture & Equipment	573,764			573,764
Medical Equipment	30,315			30,315
Other Machiney & Equipment	57,159			57,159
<b>Total LAND, VEHICLES AND EQUIPMENT</b>	<b>7,370,556</b>	<b>5,810</b>	<b>0</b>	<b>7,376,367</b>
Storage, Warehousing	4,219,991	6,032		4,226,022
Distribution & Monitoring	6,623,000	3,818		6,626,819
Transport & Vehicle Costs	11,642,557	126,195		11,768,752
Logistics Services	2,012,473			2,012,473
<b>Total LOGISTICS, TRANSPORT AND STORAGE</b>	<b>24,498,021</b>	<b>136,045</b>	<b>0</b>	<b>24,634,066</b>
International Staff	44,778,707	256,264		45,034,971
National Staff	24,018,331	25,988		24,044,319
National Society Staff	8,583,747	2,438		8,586,185
Volunteers	1,164,288			1,164,288
<b>Total PERSONNEL</b>	<b>78,545,073</b>	<b>284,690</b>	<b>0</b>	<b>78,829,763</b>
Consultants	2,678,763	1,262,107		3,940,870
Professional Fees	1,552,796	7,936		1,560,732
<b>Total CONSULTANTS &amp; PROFESSIONAL FEES</b>	<b>4,231,559</b>	<b>1,270,043</b>	<b>0</b>	<b>5,501,602</b>
Workshops & Training	3,608,415	17,050		3,625,465
<b>Total WORKSHOP &amp; TRAINING</b>	<b>3,608,415</b>	<b>17,050</b>	<b>0</b>	<b>3,625,465</b>
Travel	2,987,705	55,942		3,043,647
Information & Public Relations	1,517,904	29,727		1,547,631
Office Costs	6,568,291	35,105		6,603,397
Communications	1,655,289	22,344		1,677,634
Financial Charges	-862,173	723		-861,450
Other General Expenses	5,708,457	30,592		5,739,049
Shared Support Services	6,337,146	8,655		6,345,802
<b>Total GENERAL EXPENDITURES</b>	<b>23,912,620</b>	<b>183,088</b>	<b>0</b>	<b>24,095,708</b>
Partner National Societies	14,817,355	15,475		14,832,831
Other Partners (NGOs, UN, other)	532,960	193,979		726,939
<b>TOTAL TRANSFER TO PARTNERS</b>	<b>15,350,316</b>	<b>209,454</b>	<b>0</b>	<b>15,559,770</b>
Operational Provisions				0
<b>TOTAL OPERATIONAL PROVISIONS</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
Programme and Supplementary Services Recovery	15,551,461	139,323	0	15,690,785
<b>Total INDIRECT COSTS</b>	<b>15,551,461</b>	<b>139,323</b>	<b>0</b>	<b>15,690,785</b>
Pledge Earmarking & Reporting Fees	1,274,652	9,490		1,284,142
<b>Total PLEDGE SPECIFIC COSTS</b>	<b>1,274,652</b>	<b>9,490</b>	<b>0</b>	<b>1,284,142</b>
<b>TOTAL BUDGET</b>	<b>257,202,701</b>	<b>2,255,286</b>	<b>34,851,890</b>	<b>294,309,878</b>
<b>Available Resources</b>				
Multilateral Contributions	249,934,435	2,250,465		252,184,901
Bilateral Contributions		0	34,851,890	34,851,890
<b>TOTAL AVAILABLE RESOURCES</b>	<b>249,934,435</b>	<b>2,250,465</b>	<b>34,851,890</b>	<b>287,036,791</b>

NET EMERGENCY APPEAL NEEDS	7,268,266	4,821	0	7,273,087
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