

DREF Plan of action (PoA)

Venezuela: Floods

DREF Operation N°	MDRVE006	Glide N°:	FL-2022-000207-VEN
Date of issue:	22 June 2022	Expected time frame:	3-months
		Expected end date:	30 September 2022
IFRC Category allocated to the disaster: Yellow			
DREF allocated: 347,701 Swiss francs			
Total number of people affected:	86,800 people	Number of people to be assisted:	5,000 people
States affected	Mérida, Zulia, Trujillo, Táchira, Distrito Capital, Carabobo, Lara, Portuguesa and Yaracuy.	Targeted states:	Mérida, Zulia and Táchira
Host National Society presence:			
The Venezuelan Red Cross is considered the most significant health network in the country, with eight hospitals and 34 outpatient clinics, approximately 4,784 volunteers and over 1,600 staff, including medical personnel.			
Red Cross Red Crescent Movement partners actively involved in the operation:			
The Venezuelan Red Cross is coordinating and sharing information with the International Federation of Red Cross Red Crescent Societies (IFRC), the International Committee of the Red Cross (ICRC), and the German Red Cross (which is under the IFRC integration agreement).			
Other partner organizations actively involved in the operation:			
Civil Protection, Ministry of People's Power for Health (MPPS), local and national authorities.			

A. Situation analysis

Description of the disaster

This year, the rainy season in Venezuela has been atypical. As a result, on 27 April, the states of Mérida, Zulia, Trujillo, Táchira, and the Capital District and Greater Caracas were declared in a state of emergency according to the [Official Gazette No. 42.364, Decree No. 4.682](#).

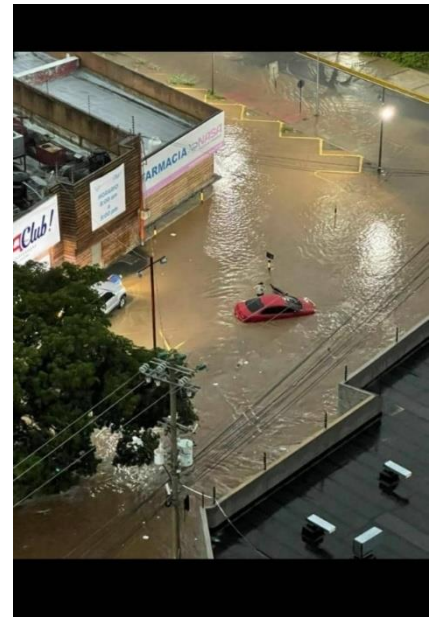
On 27 May, an orange alert was declared in the Zulia region due to increased rainfall and the re-re-channelling of the Zulia River to the southern Lake Maracaibo. This situation has affected an estimated 56,778 people, 6,159 houses and a loss of 150,000 agricultural hectares in the Zulia province,

According to the National Institute of Meteorology and Hydrology (INAMEH), three more tropical waves were expected to hit early June, worsening the country's severe conditions, which have already caused the loss of at least two people.

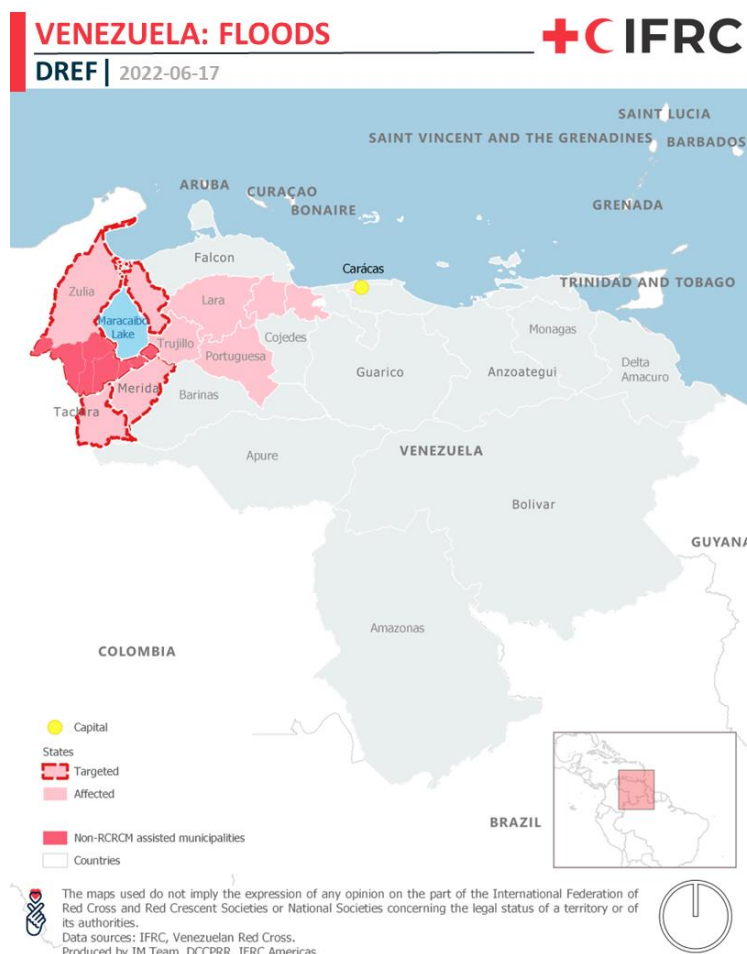
Initially, the Civil Protection at the local level provided assistance to the families. Since June 6th, the impact of the Tropical Storm Six has exceeded the response capacity because of the damages reported due to the saturation of soil humidity, which caused floods across the country. In the state of Merida, 30,000 people have been affected in at least 20 sectors, including the damages to houses and infrastructure, and roads are waterlogged, limiting the access to communities.

Severe rains have continued over June with affectation on structures in some states of the country, affected, to a large extent, by flooding rivers. On 21 June, the governor's office of the Zulia state decreed a state of alert to activate all preventive mechanisms to avoid a significant population collapse due to the rising level of the Limón River, which has already reached its maximum level.

Local authorities have escalated the response actions to a national level, for which the Venezuelan Red Cross (VRC) has mobilized personnel and is continuously monitoring the different events occurring in the country. New tropical waves with short intervals of time between (2 or 3 days) continue, breaking previous year's rainfall records.



Floods in the Bellavista sector of Maracaibo municipality in the state of Zulia (June 10, 2022). Source: VRC Zulia Branch.



Summary of the current response

Overview of Host National Society Response Action:

For 127 years, the Venezuelan Red Cross (VRC) has fulfilled its humanitarian mandate. It is considered the most significant health network in the country, with eight hospitals and 34 outpatient clinics. The VRC has 4,768 volunteers approximately and over 1,600 staff, including medical personnel. The VRC is known for providing primary health care, first aid, livelihoods, ambulance services, water, sanitation, and hygiene promotion, restoring family links, promoting the Red Cross and Red Crescent Fundamental Principles and emergency response to the most vulnerable communities despite the challenges facing the country including the impact of COVID-19.

For the current emergency, the National Society has developed a Contingency Plan for the 2022 rainy season, which includes the following actions:

- Activation of the five Regional Relief Departments to monitor and analyze the evolution of meteorological events at the national level.
- Damage assessments and needs analysis in the most affected states.
- Establishment of coordination mechanisms with local and national authorities to ensure the proper response.

The Venezuelan Red Cross has been on the field since the beginning of the crisis, offering first aid to those in need, cleaning impacted homes, and analyzing the damage and requirements in the areas served across the country. It has also been developing response plans at several levels (sectional, regional, and national) to be ready to respond to these disasters. These activities have overloaded the VRC branches while keeping the same number of personnel who attend regular programs and are also incorporated into the new emergency response.

Overview of Red Cross Red Crescent Movement actions:

The IFRC Country Delegation in Venezuela has worked jointly with the National Society in providing technical assistance to the current emergency and is supporting this DREF Operation.

The IFRC in Venezuela currently has eight international staff, 21 local staff and the temporary presence of the Regional Climate-Smart Livelihoods Advisor. They are supporting the VRC in monitoring and coordinating the emergency response and the preparation of this DREF. In coordination with the Regional Disaster, Crisis, Preparedness and Response Unit, the GO platform has been updated with three reports and one flash report.

The IFRC, the VRC, and the ICRC have actively participated in different coordination meetings to analyze the different response actions and provide the technical assistance required by the National Society. Also, through the Integration Agreement, the Delegate of the German Red Cross is attending these meetings and, if required, will provide additional support to the emergency will be coordinated.

The ICRC assists people most affected by armed violence in Venezuela. From its operational offices in San Cristóbal (Tachira), Puerto Ordaz (Bolívar) and Caracas, ICRC provides a comprehensive response to alleviate the suffering of the most vulnerable, including the wounded, the sick, persons deprived of their liberty and communities through an open, confidential, and permanent dialogue with the populations and the various actors, including arms carriers. It works in health, water, sanitation, protection, and economic security, supporting hospitals, primary health, and forensic centres, training their staff, distributing medical supplies and equipment, strengthening their infrastructure, and restoring essential services such as water and sanitation, among others. In coordination with the Movement, it cooperates with the Venezuelan Red Cross for its institutional strengthening in Safer Access, Dissemination, Restoring Family Links and other areas of expertise.

Overview of other actors' actions:

- The Civil Protection of Zulia is carrying out response activities on the south side of Lake Maracaibo in the municipality of Catatumbo.
- Local actors continue coordinating the distribution of relief items to the affected population in the municipalities of Catatumbo, Francisco Javier Pulgar, Colón, Jesús María Semprún and Sucre in Zulia state.
- Following an inter-agency mission coordinated by OCHA (the 2nd and 6th of May 2022), joint intervention actions were defined with Civil Protection and local authorities to assist the affected population on the south side of Lake Maracaibo.
- Save the Children has activated its humanitarian response to reach more than 500 families in the southern region of Zulia, in the Catatumbo and Colón municipalities.¹
- UNICEF will focus its response on supporting the collective centres in the municipalities of Catatumbo and Jesús María Semprún (prioritized EATs to be defined).
- PAHO is supporting the Santa Bárbara del Zulia hospital that hosts medical services in the municipalities of Jesús María Semprún, Colón and Catatumbo, in the state of Zulia.
- The People's Ministry of Health of Venezuela (MPPS) is strengthening epidemiological surveillance in the affected states.
- The UN system continues to coordinate response efforts at the local and national levels.

Needs analysis, targeting, scenario planning and risk assessment

Needs analysis:

Heavy rains across Venezuela have caused massive flooding, with a significant effect on the states of Mérida, Zulia, and Táchira with urgent needs in the areas of shelter, livelihoods, health, and mental health psychosocial support, water, sanitation, and hygiene promotion. However, given the communities' lack of access to institutions, a rapid assessment will be carried out with the support of VRC multidisciplinary teams and IFRC technical assistance.

Shelter: According to Civil Protection, on June 10th, 25 collective centres were set up in the states of Zulia and Mérida. Many affected families have moved to their relatives' houses or collective centres, which makes it necessary to provide an urgent response in the provision of non-food items. To this end, a rapid survey will be conducted to ensure the proper assistance. To ensure that the assistance provided to the affected people complies with international standards, a refresher session for shelter management will be provided.

Livelihoods and basic needs: Due to lower planting and production capacity because of the lack of work tools and supplies, the communities will not be able to recover sustainably, generating a loss of income and a negative impact on the affected population, which has evidence by the National Society's teams on the ground, who have reported damage to productive activities, which makes necessary a rapid assessment of this topic.

Health: The current floods are affecting the capacities of the health system and medical care services, which are facing significant challenges because of the impact of COVID-19 and the lack of access to medicines and medical supplies, absence of health personnel, and high costs of medical treatment in the country.

The water levels and their stagnation contribute to the increase of water-borne diseases such as acute diarrhoea or leptospirosis also, vector-borne diseases arbovirus considering that historically, from May to August is when the highest number of mosquito-borne disease cases has been reported. Many people have moved into shelters causing overcrowding and increasing the risk of health issues related to hygiene conditions or skin and respiratory

¹ <https://lac.savethechildren.net/news/save-children-activates-humanitarian-response-venezuela-after-floods>

problems. Risk communication messages will be necessary to reinforce protective measures as well as hand washing and general hygiene habits.

The fifth wave of COVID-19 in the region increases the number of positive cases in the coming weeks, as the governments are relaxing biosecurity measures. In this sense, all VRC actions will ensure the implementation of biosecurity measures and the provision of masks and gel.

Mental Health and Psychosocial Support (MHPSS): The population's mental health is critical due to the socio-economical country's condition. The population's psychosocial problems risks are increasing due to negative factors such as the sadness caused by the loss of assets and livelihoods, drug use and abuse resulting in loss of hope and uncertainty about the future or, fear to be sheltered due to possible protection issues. Anxiety episodes, excessive levels of stress and, preexisting neurological and mental health issues are observed. Support for crisis intervention, psychological first aid, and referral pathways to specialized psychological care for the most emotionally challenging cases is required to ensure the well-being of the response teams and the impacted population.

Water, Sanitation, and Hygiene (WASH): In normal conditions, the country's population has access to water supply ranging from 57% to 69 per cent; with the recent rains, the availability of safe water has been affected. Drinking water is primarily gathered in the impacted areas through medium-capacity dams in streams or artificial lagoons, with surface conveyance to populated areas. According to data collected by the VRC team on the ground, these systems have collapsed because of increasing flow and subsequent floods of solid material dragged from the rivers' headwaters. Both the quantity and quality of drinking water have been damaged. It is urgent to provide access to drinking water, sanitation services, and hygiene promotion activities to avoid water-borne diseases.

The prevention and control of diseases related to water, sanitation, and hygiene promotion are critical, especially for the impact of the C-19 and the economic situation in the country. Some people's ability to implement basic hygienic measures remains a struggle, dealing with the country's high cost of hygiene and cleaning supplies.

Protection, Gender, and Inclusion (PGI): The DREF prioritized states are in border areas of the country, where the live conditions and protection risks, including gender-based violence against children and women, are critical as a consequence of mixed flows of people (people planning to leave the country, returnees, pendular migrants, and people who have decided to stay in the border states). Because of the rains, their vulnerability could worsen and

The Venezuelan Red Cross has the operational capacity in PSEA, PGI Minimum Standards, and SGBV to support rapid assessments, dissemination of key messages, and collection of disaggregated data (including several types of disability and minority groups), and provision of differentiated services.

Targeting

By implementing this DREF, Venezuelan Red Cross will support a total of 1,000 families (5,000 people) affected by the heavy rains in the states of Merida, Táchira, and Zulia in the areas of shelter, health, water, sanitation and hygiene, livelihoods and protection, gender, and inclusion.

Vulnerability Criteria

The following vulnerability criteria have been considered for selecting households with emergency response activities in the different intervention areas.

- Families with loss of household belongings.
- Families with children and/or older adults
- Families with people with disabilities
- Families affected by partial or severe damage to houses
- Single-headed families with children

Estimated disaggregated data for population targeted.

Category	Estimated % of the target group	% Female	% Male
Young children (under 5 years)	15%	60%	40%
Children (5-17 years)	25%	60%	40%
Adults (18-49 years)	30%	60%	40%
Elderly (>50 years)	30%	60%	40%
People with disabilities *	5%	40%	60%

* This value does not add to the people percentage per category.

Scenario planning:

Scenario	Humanitarian consequence	Potential response
<p>Best case scenario: Rainfall intensity does not increase, and the population is not affected.</p>	<p>Access to communities is not affected, and timely assistance can be provided.</p> <p>People continue their daily and productive activities, and their livelihoods can be restored in the short term.</p>	<p>The National Society implements the response operation and does not require extra resources to respond to the emergency.</p>
<p>Most likely scenario: Rainfall remains intermittent over the next few days, and flooded areas increase.</p>	<p>Difficulties in accessing affected populations cause delays in the provision of humanitarian assistance.</p> <p>People's health conditions decreased, and the medical care services were exceeded.</p> <p>Limited access to safe water</p> <p>Livelihoods are affected, and populations have drastically reduced their income generation activities.</p>	<p>Request the implementation of a DREF and respond to health, MHPSS, water, shelter, and livelihood needs.</p> <p>Livelihood recovery actions are in place</p>

<p>Worst case scenario: Torrential rains exceed average annual records, and flooded areas have increased nationwide.</p>	<p>Loss of human lives increases.</p> <p>Access to affected populations is limited.</p> <p>Communication routes are severely affected and disrupted.</p> <p>Health services are totally collapsed.</p> <p>Collective centres at maximum capacity with high rates of communicable diseases.</p> <p>Families have lost their livelihoods and are unable to recover their income.</p>	<p>Review of the present Plan of Action to increase response actions.</p> <p>Elaboration of an Emergency Appeal.</p>
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Operation Risk Assessment

Alongside the challenges of the country context and the COVID-19 pandemic, the National Society has identified the following risks associated with the operation:

Identified Risk	Mitigation measures
Increased needs exceed the response capacity of the VRC.	<ul style="list-style-type: none"> – Constant monitoring of the situation in the country and of rain effects at the national level to adopt the Plan of Action. – Constant mapping of available resources in the VRC regional branches
Limited access to fuel for mobilization in response to the emergency.	<ul style="list-style-type: none"> – Coordination with local authorities to advocate for the operations of the VRC
Volatile exchange rate of foreign currency, causing inflation and loss of acquisition power.	<ul style="list-style-type: none"> – Constant monitoring of the exchange rate. – Payment of local suppliers from the Regional Office for items sent to Venezuela – Procurement of relief items coordinated at the regional level – Planning of goods and services are developed on time.
Population lack of understanding of the Fundamental Principles of the Red.	<ul style="list-style-type: none"> – Dissemination of key messages about the role of the Red Cross and its Fundamental Principles. – Constant monitoring of the perception of Red Cross activities. – IFRC and ICRC support RCRC efforts to strengthen messages and actions in the country. – Community engagement and accountability activities to be implemented on the ground (like feedback mechanisms)
Increase in COVID-19 positive cases among National Society volunteers and staff.	<ul style="list-style-type: none"> – Provision of personal protection equipment. – Medical follow-up of National Society cases. – Reduction of activities in the field. – Risk Communication and Community engagement activities

The operation is based on analysing the population's most urgent humanitarian need. During the current operation, the necessary mechanisms will be established to monitor and follow up on events that may affect the development of the operation.

In its auxiliary role to the public authorities, VRC will contribute and coordinate its response efforts with national authorities and other key actors to assist the most affected people promptly. The National Society will continue to implement biosecurity measures to reduce the risk of COVID-19 among staff, volunteers, and community members.

The operation will promote the application of security procedures and protocols visibility of volunteers and Red Cross personnel. Coordination with the VRC Communications Department will ensure proper compliance with the Fundamental Principles of the Red Cross.

B. Operational Strategy

Overall Operational Objective

Respond to the most urgent needs of the affected population in Mérida, Zulia, and Táchira.

Shelter

Based on vulnerability criteria and the rapid assessment within the collective centres, VRC will procure and distribute 2,500 blankets, 1,500 hammocks, and 1,000 kitchen kits. This distribution will be coordinated with community leaders and local authorities in charge of the collective centres. The hammock is not a standard item per se, but it is the equivalent of a regular bed in tropical, hot, and humid climates, and it is widely used in these locations.

VRC will also provide technical assistance to collective centres in the most affected areas, ensuring international standards and people's protection, safety and welfare are adapted to each state's context. VRC volunteers who support these activities will receive a refresher session on shelter management.

Livelihoods and Basic Needs

A rapid assessment of livelihoods and their needs will be conducted with a CEA/PGI approach. To this end, a group of 20 VRC volunteers will be trained in livelihoods.

Based on the need's assessment findings and coordination with community leaders or livelihood groups, the assets that will be prioritized for replacement will be defined. 100 families are expected to receive asset replacement support, emphasizing those whose livelihoods have been most affected. Several challenges limit the use of cash transfers in Venezuela: inflation, logistical, security and technical issues that would make it difficult for the target population to access or effectively use the transferred money. Agricultural and non-agricultural inputs will be used as a strategy to distribute farming implements, items, and work tools that are dependent on commercial activities. Purchases will be made locally and delivered to those who have been identified. The goal of this operation is to assist affected families in promptly regaining their livelihoods.

Health

Rapid health assessments of the affected population will be conducted based on the epidemic control toolkit. These evaluations will emphasize the population in temporary collective centres. In this activity, the National Society's volunteers will make periodic visits to the affected areas to identify the occurrence of diseases, which will be notified to the Ministry of People's Power for Health, and the community measures described in the epidemic control toolbox will be implemented.

VRC branches involved in this operation will receive a replenishment of first aid material, allowing them to continue caring for people who have suffered injuries or accidents during the emergency, during their stay in temporary collective centres or during the recovery and repair of their homes.

To reduce the risk of diseases transmitted by the *Aedes aegypti* mosquito, 1,000 families will be provided with mosquito nets. Educational sessions will accompany the distribution to promote vector control at both the family and community levels. The delivery of these supplies will contribute to the country's arbovirus prevention and control strategy.

In addition, the VRC Psychosocial Response Teams (ERPs) of the affected states, together with the support of the MHPSS National Technical Team, will promote self-care strategies for staff and volunteers, as well as psychosocial intervention strategies for the affected population through Psychological First Aid, Second Order Crisis Intervention and in some cases, specialized psychological care.

The personnel participating in the intervention will receive rapid training in psychological first aid or first-order crisis care to have the tools present when they are in the field, whether to deal with the containment of a person in the disaster who deserves it or to monitor their colleagues.

WASH

A rapid WASH assessment will be carried out to establish the need for a water purification plant to be mobilized. 1,000 water filters, 120,000 water purification tablets, and 2,000 10-litre jerry cans (2 per family) will be procured and distributed to promote safe water storage and consumption. Education sessions will accompany the distribution of these supplies on promoting cleanliness and water management to ensure efficient water storage and purification. In addition, equipment for measuring water quality will be distributed to VRC branches.

1,000 family hygiene kits and 1,000 family cleaning kits² will be distributed to 1,000 families monthly to improve their hygiene conditions, which will be complemented with educational sessions.

Human Resources

The Venezuelan Red Cross will hire an Operations Coordinator, an Administrative Assistant, and a Logistic Assistant who will be responsible for implementing the activities. In addition, the National Society will be supported by 120 volunteers and technical assistance from the International Federation of Red Cross and Red Crescent Societies.

Logistics and Supply Chain

In Caracas, the Venezuelan Red Cross has a central warehouse. The existing local market has the potential to obtain certain relief items that are required. All procurement for this DREF, locally and internationally, shall follow the IFRC procurement standards. Customs processes will be conducted by the IFRC Legal Status Agreement's procedures.

For freight transport, the Venezuelan Red Cross has adequate vehicles and transport providers that will be able to provide distribution services in the prioritized states.

Emergency response materials are currently being pre-positioned in branches in Anzoátegui (El Tigre), Distrito Capital, Carabobo (Valencia), Lara (Barquisimeto), and Barinas (Barinas). They will be distributed to branches in the target states of this DREF as a first response to the emergency. During this operation, some of them will be distributed and restocked.

² For the kit content see the [IFRC standard catalogue](#).

Communications

The National Communications team, with the support of the IFRC, will ensure that the population understands the actions developed by the Venezuelan Red Cross following the Fundamental Principles of the International Red Cross and Red Crescent Movement.

Communication efforts will focus on developing key messages disseminated through the VRC's social media, which will also be helpful for volunteers and field staff to share with the communities. Additionally, visual materials, life stories, and testimonies of the people reached will be produced to contribute to accountability and to measure the actions of this DREF.

Information technology

In collaboration with the VRC and IFRC Information Management Units, the IT department will offer necessary assistance to all field teams. The team will have a variety of communication tools to help with data collecting, including internet BAM, national phone lines, satellite phones, and maps.

Security

The IFRC has a security assistant overseeing the current operation's risk assessments. Mitigating risks in the field arising from the transportation of volunteers and staff in the affected areas will be done through implementing a security plan and the daily reinforcement of security rules to the staff.

Volunteers participating in the operation have the accident insurance provided by the IFRC. The operation will comply with COVID-19 protocols to ensure the safety of the volunteers who have at least two doses of the vaccination scheme.

Planning, Monitoring, Evaluation and Reporting (PMER)

The Venezuelan Red Cross PMER unit, in collaboration with the IFRC PMER team, will give periodic updates on the progress of this action plan. The Information Management Unit will assist in collecting, monitoring, and analyzing the data collected. A lesson learned workshop will be held to collect good practices and replicable processes of this type of experience, as well as important aspects to improve for future interventions.

Finance and administration

The Venezuelan Red Cross will hire a Coordinator with the skills to manage this operation, which an Administration Assistant will support. IFRC's finance team will provide permanent support in the validation of expense reports, as well as support in the monitoring of budget execution, bank transfers and the application of financial procedures.

Community Engagement and Accountability (CEA)

Key messages, promotion of Principles and Values, and the Use of the Indicative and Protective emblem will be disseminated through the social media of the VRC. In addition, the following feedback mechanisms will be established for this operation: Face-to-face, suggestion box with the use of socio-cultural animation, community assemblies and identification of information needs on the effects of rains and floods, disease prevention, etc.

C. Detailed Operational Plan



Shelter

People targeted: 5,000 people (1,000 families)

Male: 2,000

Female: 3,000

Requirement (CHF): 92,946

Needs analysis: Due to the rains, people have lost most of their belongings, making it necessary to provide supplies to improve their autonomy and quality of life. The planned activities aim to cover the people's basic needs, provide technical assistance to shelter managers, promote better organization and management of resources, and promote the safety and protection of the people affected by the rains.

Risk assessment: People affected have difficulties acquiring/accessing some items or household goods due to the socio-economic situation in the country. Blockage of access roads during the distribution of assistance.

Population to be assisted: 1,000 families will receive non-food items in Merida, Táchira, and Zulia states. The Venezuelan Red Cross will prioritize six (6) collective centres in the most affected areas based on vulnerability criteria, ensuring that compliance with international standards and people's safety and welfare are adapted to each state's context. VRC volunteers who support these activities will receive a refresher session on shelter management.

Standards/Benchmarks: The intervention will adhere to the Sphere Handbook, the International Red Cross and Red Crescent Movement's Fundamental Principles and Values, the IFRC Minimum Standards on Protection, Gender and Inclusion, the Code of Conduct, and other documents related to the Movement and other organizations to provide quality humanitarian assistance with dignity.

P&B Output Code	Shelter Outcome 1: Communities in disaster- and crisis-affected areas restore and strengthen their safety, well-being and long-term recovery through shelter and settlement solutions.	<i># of people provided with at least one household item. Target Population: 5,000 people (1,000 families);</i>
	Shelter Output 1.1: Shelter and settlements and basic household items assistance is provided to the affected families.	<i># of families assisted with the distribution of blankets. Target: 500 families. # of families assisted with family kitchen kits.</i>

		Target 1,000 families. # of families assisted with hammocks Target: 500 families (3 hammocks per family)												
Planned activities Week		1	2	3	4	5	6	7	8	9	10	11	12	
AP005	Procurement and distribution of blankets (2,500 units)													
AP005	Procurement and distribution of kitchen kits (1,000 units)													
AP005	Procurement and distribution of hammocks (1,500)													
AP005	Post-distribution satisfaction surveys													
P&B Output Code	Accommodation Output 1.2: Technical support, guidance, and awareness-raising on safe shelter design and settlement planning and improved building techniques are provided to affected households.		# of collective centres provided with technical assistance: Target: 6 collective centres.											
	Planned Activities Week		1	2	3	4	5	6	7	8	9	10	11	12
AP006	Provision of technical assistance on collective centres.													
AP006	Mobilization of volunteers for shelter activities.													
AP006	Refresher training of volunteers in shelter management													



Livelihoods and Basic Needs

People targeted: 500 persons (100 families)

Male: 200

Female: 300

Requirement (CHF): 31,105

Needs analysis: The recent rains have caused flooding affecting the livelihoods of people and communities due to the loss of work tools, productive inputs, damage to supply chains and loss of income sources. The lack of work tools and inputs will not allow for sustainable recovery of communities due to reduced planting and production capacity, resulting in loss of income and a negative impact on local food security. A livelihood group assessment needs to be conducted in the most affected communities to determine the impact on each group and prioritization of assistance.

Risk analysis: Weather conditions can potentially hamper field activities, particularly during the assessment stage. Local markets, which remain functional, do not have stock of the assets to be replaced, which may cause a delay in the procurement process. Risk of people selling or exchanging their assets to cover basic needs. For this purpose, support will be provided to families assisted by other components of the DREF.

Population to be assisted: Assistance will be provided to people from the states of Zulia, Merida and Tachira. The number of people per state will be determined according to the needs assessments to be carried out in the field during the next few days and per vulnerability prioritization criteria. 100 families will be supported in the replacement of livelihood assets.

Standards/Benchmarks: The response will adhere to Food Security Programming, Sphere Handbook, Household Economic Security (HES), International Federation Guidelines for Livelihoods Programs, and Climate Smart Livelihoods - Fact Sheet. CVA has not been considered due to the limitations of the context.

P&B Output Code	Livelihoods and Basic Needs Outcome 1: Communities, especially in disaster and crisis affected areas, restore, and strengthen their livelihoods.	# of people assisted with productive assets to improve their livelihoods Target: 500 people											
	Livelihoods and Basic Needs Output 1.1: Skills development and/or productive assets and/or financial inclusion to improve income sources are provided to the target population (off-farm livelihoods).	# of families replacing damaged assets Target: 30 families											
	Planned Activities Week	1	2	3	4	5	6	7	8	9	10	11	12
AP007	Rapid livelihoods assessment												
AP007	Procurement and distribution of productive assets												
P&B Output Code	Livelihoods and Basic Needs Output 1.3: Household livelihoods security is enhanced through food production, increased productivity, and post-harvest management (agriculture-based livelihoods)	# of families assisted with agricultural assets and tools Target: 70 families.											
	Planned Activities Week	1	2	3	4	5	6	7	8	9	10	11	12
	AP009	Procurement and distribution agricultural assets and tools.											
AP009	Post-monitoring distribution survey												



Health

People targeted: 5,000 people (1,000 families)

Male: 2,000

Female: 3,000

Requirement (CHF): 39,296

Needs analysis: The floods are affecting the health infrastructure and the functionality of public health services provided in the affected areas, intensifying the existing constraints to access health care. Due to the difficulty of accessing flood-affected communities, the implementation of disease control and prevention programs is hampered.

Higher levels of distress and psychological suffering in the targeted states have been evidenced that is increased due to the emergency. Gaps and difficulty in providing community mental care and attend the population demands have been detected in the local health services. Therefore, first and second-order crisis intervention is required.

Risk assessments: Heavy rains raise the potential risk of mosquito-borne diseases like malaria, dengue, chikungunya, and zika, as well as water-borne diseases. There is also a risk that COVID-19 cases could increase in shelters due to the overcrowding and lack of hygiene measures. Disaster and emergencies increase the emotional suffering of affected population.

Population to be assisted: 5,000 people will receive health services in Mérida, Zulia, and Táchira.

Standards/Benchmarks: The intervention will adhere to the Sphere Handbook's Standards, the International Red Cross and Red Crescent Movement's Fundamental Principles and Values, the International Red Cross and Red Crescent Movement's Strategic Framework for Disability Inclusion, the IFRC Minimum Standard for Protection, Gender and Inclusion, the Code of Conduct, and other documents related to the Movement and other organizations (Ministry of Health of Venezuela and Pan American Health Organization).

P&B Output Code	Health Outcome 1: The Immediate risks to the health of affected populations are reduced.	<i># of rapid health assessment Target: 3 assessments</i>											
	Health Output 1.1: The health situation and immediate risks are assessed using agreed guidelines.	<i>#of volunteers providing Epidemic Control to the targeted population Target: 120 volunteers</i>											
	Planned Activities Week	1	2	3	4	5	6	7	8	9	10	11	12
AP022	Rapid Health Assessment												
AP022	Refresher workshops in epidemiological control												
P&B Output Code	Health Outcome 2: The immediate risks to the health of the affected populations are reduced through improved access to medical treatment	<i># of people assisted with first aid Target: 500 people</i>											
	Health Output 2.1: Improved access to health care and emergency health care for the targeted population and communities.	<i># of people assisted with health promotion activities: Target: 5,000 people</i>											
	Planned Activities Week	1	2	3	4	5	6	7	8	9	10	11	12
AP022	Replenishment of consumables for first aid kits												
AP022	Health promotion activities												
P&B Output Code	Health Outcome 4: Transmission of diseases of epidemic potential is reduced	<i># of people assisted with mosquito nets Target: 5,000 people (1,000 families)</i>											
P&B Output Code	Health Output 4.2: Vector-borne diseases are prevented												
	Planned Activities Week	1	2	3	4	5	6	7	8	9	10	11	12
AP021	Procurement and distribution of mosquito nets (5,000 units)												
P&B Output Code	Health Outcome 6: The psychosocial impact of the emergency is lessened.	<i># of people reached with MHPPS assistance Target: 500 people</i>											
	Health Output 6.1: Psychosocial support provided to the target population, as well as to RCRC volunteers and staff	<i># of VRC volunteers and staff assisted with MHPSS. assistance Target: 80 Volunteers</i>											

		# of humanitarian workers assisted with MHPSS <i>Target: 500 people</i> # of affected population reached with MHPSS interventions <i>Target: 500 people</i>											
Planned Activities Week		1	2	3	4	5	6	7	8	9	10	11	12
AP023	Assessment MHPSS needs affected population especially in shelters												
AP023	Refresher training to volunteers in MHPSS												
AP023	Provision of MHPSS assistance to the affected population												
AP023	Provision of MHPSS assistance to VRC volunteers and staff (50)												
AP023	Provision of MHPSS assistance to humanitarian workers (30)												
AP023	Establish a referral pathway to specialized MH services												



Water, Sanitation, and hygiene

People targeted: 5,000 people

Male: 2,000

Female: 3,000

Requirement (CHF): 108,089

Needs analysis: The scarcity of drinking water caused by rainfall in catchment and distribution systems is jeopardizing proper hygiene and the availability of safe water. The scheduled operations are geared at satisfying the flood-affected population's essential water and hygiene needs, including distributing family hygiene kits and supplies for water storage and household filter systems.

Risk analysis: Because of the impact of the rains on the infrastructure, access to communities may be limited.

Population to be assisted: 1,000 families by providing items for safe water and personal hygiene in Zulia, Mérida and Táchira states.

Standards / Benchmarks: The intervention will adhere to the Sphere Handbook's Standards, the International Red Cross and Red Crescent Movement's Fundamental Principles and Values, the International Red Cross and Red Crescent Movement's Strategic Framework for Disability Inclusion, the IFRC Minimum Standard for Protection, Gender and Inclusion, the Code of Conduct, and other documents related to the Movement and other organizations (Pan American Health Organization).

P&B Output Code	WASH Outcome 1: Immediate reduction of the risk of waterborne and water-related diseases in the targeted communities	# of families have improved their access to water Target: 1,000 families											
	WASH Output 1.1: Continuous assessment of water, sanitation and hygiene situation is carried out in targeted communities.												
	Planned Activities Week/Month	1	2	3	4	5	6	7	8	9	10	11	12
AP026	Rapid needs assessment												
P&B Output Code	WASH Output 1.2: Daily access to safe water which meets Sphere and WHO standards in terms of quantity and quality is provided to target population	# of families assisted with safe water supplies. Target: 1,000 families											
	Planned Activities Week / Month	1	2	3	4	5	6	7	8	9	10	11	12
AP026	Provide safe drinking water to people in targeted communities through mobilization of OX-LMS water treatment plant.												
AP026	Distribution of water filters (1,000 units) and water purification tablets.												
AP026	Distribution of 10-litre jerry cans (2 per family) to facilitate water storage.												
AP026	Distribution of water quality measuring equipment to the VRC branches												
P&B Output Code	WASH Output 1.5: Hygiene-related goods (NFIs) which meet Sphere standards and training on how to use those goods is provided to the target population	# of families assisted with hygiene kits Target: 1,000 families											
	Planned Activities Week/Month	# of families assisted with family cleaning hygiene kits Target: 1,000 families											
	Planned Activities Week/Month	1	2	3	4	5	6	7	8	9	10	11	12
AP030	Distribution of 1,000 family hygiene kits, sufficient for a 1 month												

AP030	Distribution of 1,000 family cleaning kits for a month													
AP030	Post-monitoring Distribution Survey													

Strategies for Implementation

Required (CHF): 76,264

P&B Output Code	S1.1: National Society capacity-building and organizational development objectives are facilitated to ensure that National Societies have the necessary foundations, systems and structures, competencies, and legal, ethical, and financial capacities to plan and deliver	The National Society has the necessary resources to implement the operation for the 3 months.												
	Output S1.1.4: National Societies have effective and motivated volunteers who are protected.	# of volunteers involved in the operation.												
	Planned Activities Week	1	2	3	4	5	6	7	8	9	10	11	12	
AP040	Ensure the safety and well-being of volunteers													
AP040	Guarantee that VR volunteers are trained													
P&B Output Code	Output S1.1.6: National Societies have the necessary infrastructure and corporate systems in place	# of volunteers active in the response activities Target: 120 volunteers												
	Planned Activities Week	1	2	3	4	5	6	7	8	9	10	11	12	
AP042	Mobilization of volunteers													
AP042	Recruitment of staff													
AP042	Production of visibility of the operation - Communications													
AP042	Lessons Learned Workshop													
P&B Output Code	Outcome S2.1: An effective and coordinated international disaster response is ensured.	The IFRC provides technical support during the implementation of the operation.												
	Output S2.1.1: An effective and respected capacity-building mechanism is maintained													
	Planned Activities	1	2	3	4	5	6	7	8	9	10	11	12	

	Week												
AP049	Technical and operational accompaniment by IFRC												
AP049	IFRC Communications visibility of the operation (production of material)												
AP049	IFRC monitoring and follow up (remotely and field visits)												
AP049	IFRC technical assistance to conduct the rapid assessments												
AP050	IFRC logistical supply chain												

Budget

See annex

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How we work

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

DREF OPERATION

MDRVE006 - VENEZUELA - FLOODS

22/06/2022

Budget by Resource

Budget Group	Budget
Clothing & Textiles	50,844
Water, Sanitation & Hygiene	96,625
Medical & First Aid	33,295
Teaching Materials	779
Utensils & Tools	43,323
Other Supplies & Services	0
Relief items, Construction, Supplies	224,865
Distribution & Monitoring	11,313
Transport & Vehicles Costs	7,302
Logistics Services	15,737
Logistics, Transport & Storage	34,352
National Staff	15,129
National Society Staff	0
Volunteers	3,505
Personnel	18,634
Workshops & Training	8,178
Workshops & Training	8,178
Travel	26,578
Information & Public Relations	6,864
Office Costs	2,044
Communications	584
Financial Charges	487
General Expenditure	36,557
DIRECT COSTS	322,585
INDIRECT COSTS	20,968
TOTAL BUDGET	343,554

Budget by Area of Intervention

AOF1	Disaster Risk Reduction	
AOF2	Shelter	92,946
AOF3	Livelihoods and Basic Needs	31,105
AOF4	Health	39,296
AOF5	Water, Sanitation and Hygiene	108,089
AOF6	Protection, Gender and Inclusion	
AOF7	Migration	
SFI1	Strengthen National Societies	29,177
SFI2	Effective International Disaster Management	47,088
SFI3	Influence others as leading strategic partners	
SFI4	Ensure a strong IFRC	
TOTAL		347,701

