

DREF Plan of Action (EPoA) Ecuador: Civil Unrest

DREF Operation°		MDREC020	
Date of issue:	4 July 2022	Expected timeframe:	3 months
		Expected end date:	30 September 2022
IFRC Category allocated to the disaster or crisis: Yellow			
DREF allocated: 173,415 CHF			
Total number of people affected:	Approximately 52,000 people at risk	Number of people to be assisted:	<ul style="list-style-type: none"> • 1,895 direct people • 210,000 indirect people
Provinces affected:	All continental Ecuadorian territory (Except Galapagos Islands)	Provinces targeted:	Imbabura, Guayas, Pichincha, Cotopaxi, Bolívar, Tungurahua, Chimborazo, Sucumbíos, Pastaza and Azuay.
Host National Society presence:			
The Ecuadorian Red Cross (ERC) has a 24 provincial branches and 83 cantonal branches. It has 7,000 volunteers and 200 employees specialized in different lines of action.			
Red Cross Red Crescent Movement partners actively involved in the operation:			
The International Federation of the Red Cross and Red Crescent (IFRC) and the International Committee of the Red Cross (ICRC).			
Other partner organizations actively involved in the operation:			
The main actors at the local levels with whom the institutional work is coordinating are Organization of American States, embassies of the countries of the European Union (EU), the United Kingdom, Japan, the United States and Canada in Quito, and Amnesty International.			

A. Situation analysis

Description of the disaster

Since mid-June 2022, various social groups and labour associations maintained a national strike demanding reductions in fuel prices, economic relief for indebted families, fair prices for agricultural products, employment and labour rights, security, and protection. Thousands of people have mobilized around the country, blocking roads and main supply routes.



Photo: The Ecuadorian Red Cross shares information on its role and the need to protect first responders in Morona Santiago, June 2022.

Although the mobilizations began peacefully in the provinces of Sucumbíos, Cotopaxi, Pastaza, and Los Ríos the situation deteriorated rapidly. On 17 June 2022, the Presidency of the Republic issued an Executive Decree No. 455 declaring a State of Exception¹ due to severe internal commotion in the provinces of Cotopaxi, Imbabura and Pichincha and the curfew in the city of Quito.

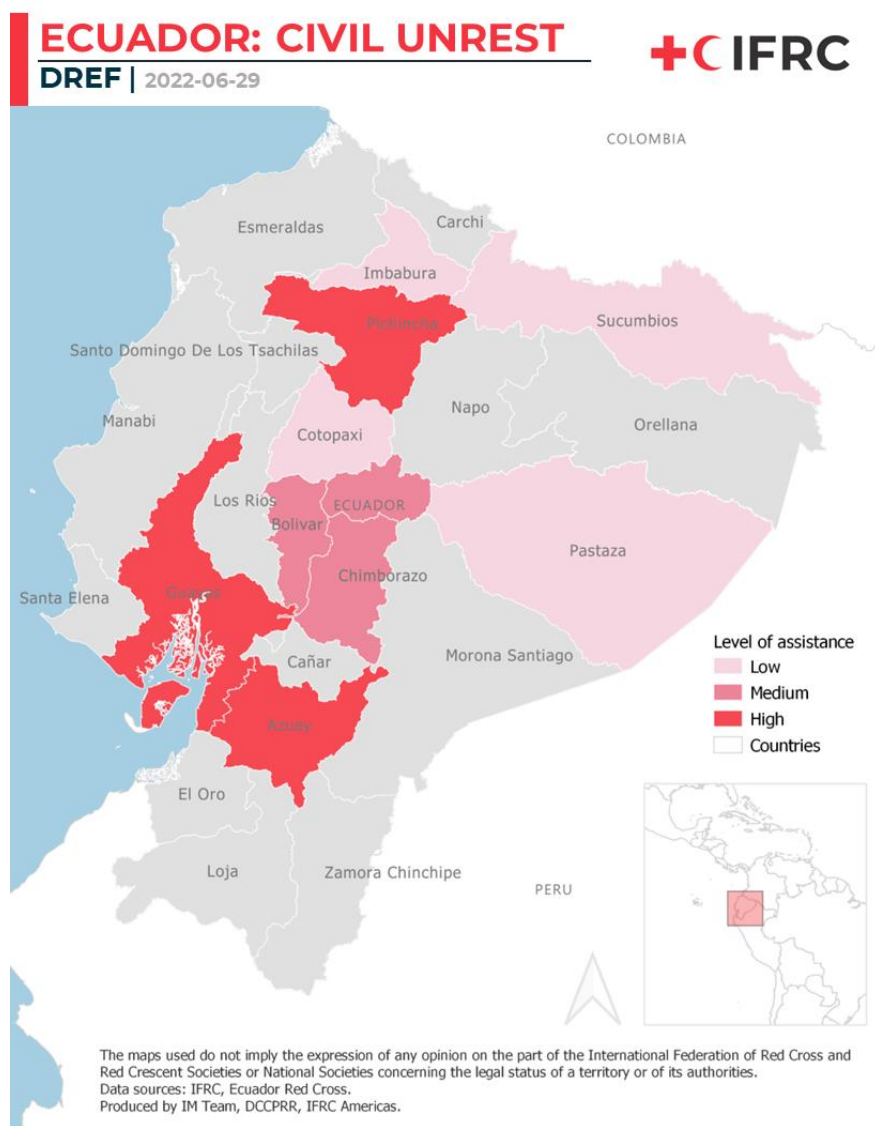
On 24 June 2022, the Confederation of Nationalities, and Indigenous Peoples of the Ecuadorian Coast (CONAICE), the Confederation of the Peoples of the Kichwa Nationality of Ecuador (ECUARUNARI), the Confederation of Indigenous Nationalities of Ecuadorian Amazon, organizations of students, teachers, peasants, carriers, among other civil and social organizations, joined the Confederation of Indigenous Nationalities of Ecuador (CONAIE), mobilization with a national strike.

The protests have taken place in 22 provinces and more than 70 cantons with more than 70 concentration points and road blockades. The presence of

protesters being more representative in the provinces of Imbabura, Pichincha, Cotopaxi, Bolívar, Tungurahua, Chimborazo, Azuay, Pastaza, and Guayas. Additionally, in the case of Sucumbíos, the protesters have focused their interest on occupying the building of the Limoncocha Oil Station. As a result of these demonstrations, public and private property damage and people detained and injured have been reported by media and social media. According to a rapid assessment of the situation from the Ecuadorian Red Cross, it is estimated that around 52,000 people are affected at the national level, corresponding to protesters, who are more exposed to risk. According to data provided by the Confederation of Indigenous Nationalities of Ecuador (CONAIE), there have been 280 people injured, five deaths, eight missing people, and 158 detained in different parts of the country. According to the Ministry of Government reports, an estimated 100 police officers and 25 military personnel were injured in the conflicts.

On 24 June 2022, the riots intensified, causing an increase in the number of injured people. As a result, the Ecuadorian Red Cross (ERC), although it was already aiding and monitoring the situation, deployed its response operations, mobilizing personnel and resources to assist the affected people, thus beginning its activities in the emergency.

Based on the high demand for assistance the ERC provided to the population (table 1 and graph 2), the ERC has scaled up its response to continuing to support the affected people for the duration of this event.



¹ [Alianza por los Derechos Humanos. Pronunciamento ALIANZA decreto 455.](#)

The Headquarters team has carried out support activities for the provincial branches, such as virtual advisory meetings on recommendations to respond to requests made by government institutions, which may compromise the actions of the Red Cross and its principles. Similarly, advice has been provided to the provincial branches so that they can apply neutral humanitarian intermediation in complex situations involving people who may possibly be held or advice to state entities through the application of humanitarian diplomacy, with the purpose that they can make decisions that favour the most vulnerable people within this context.

The ERC has provided support to the population with different vulnerability criteria based on compliance with Safer Access standards and operational security by all staff to safeguard emergency personnel's integrity. The ERC has the presence of 256 volunteers, 46 paramedics and humanitarian personnel in the ten provinces of the country where this operation will be implemented.

Available capacity in the provincial branches involved:

#	Province	Ambulances	Paramedics	Volunteers (First Aids)	Mental health and psychosocial support (MHPSS)	RFL Staff	Operational Security
1	Pichincha	4	22	50	4	18	1
2	Imbabura	1	2	10	2	2	1
3	Cotopaxi	1	2	10	3	2	1
4	Tungurahua	1	2	25	4	16	1
5	Bolívar	1	2	20	1	2	1
6	Guayas	2	9	50	10	8	1
7	Pastaza	1	1	10		1	1
8	Chimborazo	1	2	25	1	2	1
9	Azuay	1	3	50	8	9	1
10	Sucumbíos	1	1	6	1	2	1
TOTAL		14	46	256	34	62	10

The Information Management and Analysis of Adverse Events Team from the ERC monitors protest at the national level, reports developments compiles and systematizes the information issued by the provincial branches, providing information that allows decision-making.

The Situation Rooms of the ERC provincial branches in Pichincha, Guayas, Imbabura, Cotopaxi, Tungurahua, and Azuay are active and in permanent communication with the National Situation and Monitoring Room.

Overview of Red Cross Red Crescent Movement Actions

The IFRC, through its team in Ecuador, is supporting the advice and development of this Emergency Action Plan through their staff present in the country, mainly in the areas of PMER and Finance. The authorities of the IFRC Country Office in Ecuador held constant meetings with the ERC authorities. First, monitoring the situation's progress and, later, providing technical advice on drafting an emergency action plan.

The IFRC has a Country Office in Ecuador, providing support to the ERC in other Operations and Programmes. Likewise, the IFRC office in Ecuador, the Cluster of Andean Countries in Peru and the IFRC Regional Office for the Americas will provide support through technical guidance on the technical management of this Action Plan. The IFRC staff in Ecuador will provide support through technical guidance and managing this Emergency Plan of Action.

The ERC is coordinating the complementary actions amongst Movement partners in the country. After discussions with the ICRC, it was confirmed that it would provide support and financing in the activities to support the current national operation of ERC of:

- Operational security
- Communications
- Partial support for operational activities
- Lessons learned workshop with the ERC, IFRC and ICRC participants.

Overview of non-RCRC actors' actions

Various international organizations, such as the Organization of American States, have proclaimed their concern for the current social situation in the Republic of Ecuador. The embassies of the countries of the European Union (EU), the United Kingdom, Japan, the United States and Canada in Quito also issued a statement on 21 June, expressing their concern and calling for dialogue. Likewise, human rights organizations such as Amnesty International have observed the harsh situation in the country.

Needs analysis, targeting, scenario planning and risk assessment

Needs analysis

So far, the demonstrations have caused six deaths and around 500 injured between protesters and police officers, and according to the government, material damage exceeds 2 million American dollars².

Based on the current context, response actions and projected scenarios, the ERC considers that the primary needs for the affected population are:

Health:

Prehospital Care (PHC)

Considering that the current operational context produces confrontations between social actors and the security forces, injuries were identified with contusions, skull, chest, abdomen, pelvis or multi-system injuries, fractures, haemorrhages, and breathing disorders, among other pathologies. It is necessary to support the local Ambulance and Prehospital Medicine System because there is limited access to health sub-centres, health centres, and hospitals, due to blockades of streets, avenues, and highways.

Mental Health and Psychosocial Support

The ERC has identified the need to provide mental health and psychosocial support to people affected due to stress and traumatic situation and tension that increases anxiety associated with losing their freedom of movement and exposure to dangers in the streets and social conflict. In the case of children and adolescents who are on the eve of finishing the school year and, due to the suspension or change in the school schedule, they cannot attend face-to-face classes or do not have the means to participate in virtual courses. Resulting in an additional loss of their psychosocial supportive and protective environment.

It is necessary to provide mental health and psychosocial support to the volunteers and staff that are part of the response because they are working more than 10 hours daily dealing with confrontations between the actors. Burnout syndromes or compassion fatigue occur when witnesses of complex situations require attention and psychosocial support to prevent problems to their mental health immediately and in the future.

Protection, Gender, and Inclusion:

Because this social conflict brings together different groups of people, such as women, children, adolescents, indigenous people, or minority groups can be exposed to significant security risks, especially if they do not receive timely medical attention. Considering the importance of protection issues, the ERC finds it essential that the ERC volunteers know the minimum standards of PGI to provide priority and specialized attention to these groups in the different lines of response. It is considered necessary to map actors and referral routes for victims of gender-based violence and children and adolescents.

² [BBC News Protestas en Ecuador: finaliza el paro tras un acuerdo entre el gobierno y el movimiento indígena 30 June 2022.](#)
[El Universo. Más de \\$ 2 millones representan los daños materiales que provocó el paro indígena en Quito. 2 July 2022.](#)

Migration:

During this type of situation, it is possible that, during the massive displacement of people from various cities to the capitals of the provinces or the capital of the country, there are separations or ruptures of family ties of multiple types and temporality, such as:

- No news from their families or spouses for some or several days.
- Lack of communication by frequent devices like the telephone because they do not have it or do not have access to data plans or power sources.
- Non-application of processes to maintain frequent communication with loved ones.
- People in a situation of vulnerability who require some care or safe referral to State institutions or competent organizations.

For this reason, the ERC considers that it is necessary to provide the Restoring Family Links (RFL) services, which are based on the evolution of the scenario and the needs of each person, considering the need to:

- Dissemination of preventive measures for the separation of family ties through recommendations addressed to the community at the national level.
- Activation of the connectivity service (calls, device charging and access to mobile data) for that population that does not have access to a mobile device and wishes to provide family news.
- Activation of safe referral routes and/or registration of vulnerable people, unaccompanied children, and adolescents.
- Possible search requests for missing persons.
- Attention to cases through the national RFL line for information or referral to each service.

Restoring Family Links:

Considering the activities of pre-hospital care, psychosocial support and re-establish family links are carried out directly in the scenes of protests and crowds. It is necessary to enhance the humanitarian role of the Red Cross in these situations and provide information on its presence, the reason for the assists that are made, and the assistance that the Red Cross is providing to the population.

Communications:

There is a need to develop a communication strategy focused on disseminating key messages on emergency response, and prioritizing messages of the humanitarian role of the ERC in social protest (dissemination through social networks and mass messaging) is considered. Including the monitoring of traditional and digital media (social networks) to evaluate the contents, messages and primary and secondary actors that are part of the collective public opinion. The communication strategy will also allow for documenting the impact of this DREF-funded response.

Security:

The lack of understanding of humanitarian work by the actors involved can generate risks to the safety of the humanitarian personnel of the ERC, such as attacks on institutional vehicles, especially ambulances, facilities and personnel in the Provincial Branches of Chimborazo and Pastaza. Mitigating these operational risks requires proper equipment, identification, visibility, life insurance activation, and humanitarian staff and volunteers training on safer access and operational security.

During the days of mobilizations, there have been clashes between the public forces and the citizens participating. Tear gas is frequently used as part of crowd control. Therefore, the personnel involved in operations, assisting in first aid, pre-hospital care, psychosocial support and re-establishing family contact require anti-gas masks to increase safety and protect their protection.

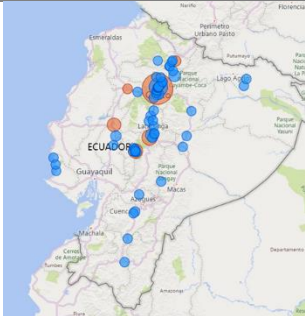
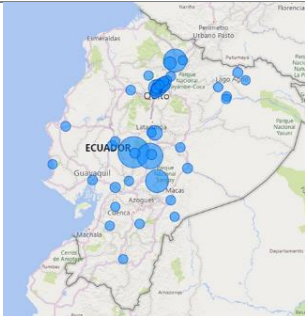
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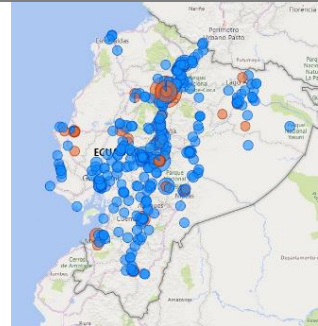
Prioritized population: People affected from the provinces of Imbabura, Guayas, Pichincha, Cotopaxi, Bolívar, Tungurahua, Chimborazo, Sucumbíos, Pastaza and Azuay will be prioritized during the protests based on the

situation analysis made by the ERC on the provinces with the most significant demonstrations and the number of people exposed to conflicts.

Scope of intervention					
Intervention line	Activities	Direct		Indirect	
		Male	Female	Male	Female
Health	Pre-hospital care	420	630	-	-
	Psychosocial support for the community	392	408	-	-
Protection, gender and inclusion		-	-	4,900	5,100
Migration	Restoring family links	22	23	98,000	102,000
TOTAL		834	1,061	102,900	107,100

Scenario planning

Scenario	Details	Response
 <p>Most Likely Scenario 1 - Low Level</p>	<p>Demonstrations in up to 12 provinces: 10 thousand demonstrators.</p> <p>Blockage of main highways affects ERC's ability to carry out activities such as transporting blood components and mobilising humanitarian personnel to their target locations.</p> <p>The provinces of the north-central highlands are the most affected, with the most significant number of protesters and recurrence of events.</p> <p>The protests last approximately 1 month</p>	<p>Health care in psychosocial support, humanitarian assistance</p>
 <p>Scenario 2 - Mid Level</p>	<p>Demonstrations in up to 18 provinces: 25 thousand demonstrators.</p> <p>Blockages in several main crossroads: The ERC operations find it difficult to carry out their activities. Stoppages affect the mobility of the personnel.</p> <p>The provinces of the north-central highlands are the most affected, with the most significant number of protesters and recurrence of events.</p> <p>The protests last approximately 2 months</p>	<p>Health care in psychosocial support, humanitarian assistance.</p> <p>Dissemination of messages on the protection of first responders.</p>

 <p>Scenario 3 - High Level</p>	<p>Demonstrations in most of the territory provinces: 80,000 thousand demonstrators.</p> <p>Blockages in several main crossroads: Stoppages affect the mobility of the ERC personnel and projects. Vehicles and personnel are attacked.</p> <p>The north-central highlands' provinces are the most affected, with the most significant number of protesters.</p> <p>The protests last approximately 3 months</p>	<p>Health care in psychosocial support, humanitarian assistance.</p> <p>Improved security measures, restriction of activities to areas where safe access is possible</p>
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Operation Risk Assessment

As this is a context of socio-political interest and since the need to strengthen the pillar of acceptance of the actions of the ERC is an important one, the following factors may affect the response:

- Attacks on ambulance units, institutional vehicles, and ERC facilities.
- Attacks on ERC operational personnel who provide pre-hospital care, psychosocial support, referents for RFL
- Blockage of roads or hindering units' mobility to different points of the country's cities.
- Shortage of pre-hospital care supplies, food products or fuel to continue care.
- Situations of violence that generate looting and consequently the shortage of stocks in the market and effects on the availability of food resulting in nutritional insecurity of the population.
- Identification of ERC as a government institution rather than an independent and impartial actor.
- Physical and mental exhaustion of the response teams.
- Damage to the image and institutional reputation due to false or ill-intentioned information circulating on social networks.
- Risk of contagion of COVID-19 response personnel or other virally transmitted diseases.

The operational risk for this operation has the same analysis and the lesson learned from the similar Emergency Plan of Action implemented in 2019.

Another significant risk is that social unrest continues despite some efforts by multiple parties to end the situation. However, negotiations could eventually lead to a cease of mobilisations. Currently, the CONAIE and the National Government are participating in a dialogue that will last 90 days to agree on actions. If negotiations are not achieved, it is expected that protests and strikes will continue.

B. Operational strategy

Overall Operational objective:

Provide first aid, pre-hospital care, mental health, psychosocial support, and restoration of family contact to the population affected by the social manifestations that occur in Ecuador, as well as provide technical assistance to the provincial branches, considering the approach of minimum standards related to protection, gender and inclusion for emergencies.

Health

It is necessary to have an operational response strategy to provide patient care in a technical-professional manner that considers the provision of materials, supplies, biomedical equipment, and devices that facilitate the assessment, stabilization, care, and transfer of patients. In addition, operational support costs are also considered. The set of proposed actions allows us to:

- Save lives through the application of protocols, procedures, techniques, and manoeuvres within the framework of the Humanitarian action of the Movement.
- Provide First Aid and Pre-Hospital Care, establishing a rapid triage system that makes it possible to establish care priorities.
- Achieve the efficient transport of the patient, properly managing the time of care in all the operative phases.
- Prevent injuries from getting worse, favouring the recovery of the affected person in a short time.

The context includes maintaining biosecurity measures to prevent COVID-19 for the personnel that make up the response teams (paramedic, driver, ambulance assistant, and first responders) and maintaining the cleaning and disinfection process of pre-hospital resources.

- At least 1,050 people receive pre-hospital care and first aid.
- Mental health and psychosocial support
- At least 800 people receive psychosocial support
- At least 200 volunteers and humanitarian personnel receive psychosocial support
- At least 50 people from the emergency services receive psychosocial support

Protection, gender and inclusion

- At least 10,000 people are indirect beneficiaries of the dissemination of PGI.
- At least one PGI Minimum Standards in Emergencies workshop is held for volunteers and intervening personnel.

Migration

- At least 200,000 people receive key messages to prevent the loss of family contact.
- At least 20 connectivity services are carried out nationwide.
- At least 20 people are assisted through the registration service for vulnerable people and safe referral.
- At least five search requests are made nationwide.

Communication, Engagement and Accountability

- Humanitarian role messages are diffused within the community.
- Volunteers and humanitarian staff have institutional visibility.

These activities are complemented by the RFL key messages.

Operational Support

Human Resources

The ERC has national technicians for Disaster Risk Management, Telecommunications, Logistics, Institutional Communication, Principles and Values (P&V), Community Health, and Security, who are active in the Situation and Monitoring Room, holding regular meetings, the follow-up to the Provincial Branches through the P&V Programme, liaison with key actors, communication protocols, preparation, and issuance of reports as the scenario evolves. For this operation, the ERC has activated 200 volunteers.

Hiring administrative/logistical technical staff is also required to support the management of the operation. Surge Personnel has been deployed for one month to support the Country Office in following and monitoring this operation.

Equipment

Some branches had their communication equipment affected due to this event, and others had equipment no longer in use. Telecommunications equipment reinforcement has been included to maintain constant contact with headquarters and coordinate actions.

The Ecuadorian Red Cross is committed to the well-being of Volunteers from the different Branches, which is why it contemplates purchasing and providing personal protection equipment and visibility material. The National Society has full annual insurance coverage for the volunteers who participate in the response actions through another project.

Logistics and supply chain

The Ecuadorian Red Cross has a Logistics and Purchasing Coordination dedicated to procurement and purchasing processes responsible for the timely provision of goods and services that meet the requested technical requirements. Purchases will be done locally and aligned with IFRC Logistics Procedures. The Regional Logistics Unit will support the follow-up of procedures and advise if additional technical expertise is required to execute the operation.

Telecommunication:

Given this declaration, around 1,500 demonstrators from the Union of Communities of the Northwest of the Andean city of Ambato (UNOCAN), specifically from the Pilisurco hill sector, Ambato canton, Tungurahua province, proceeded to take control of the telecommunications antenna installations. This affected the radio and television signal and the VHF telecommunications system of the Ecuadorian Red Cross. The loss of this service hinders humanitarian activities throughout the province involving direct communication between the teams, volunteers and/or rented personnel displaced in the territory. It is worth mentioning that the damage affected other communication systems belonging to the provinces of Cotopaxi and Chimborazo.

Currently, the Ecuadorian Red Cross has thirteen repeater systems in the Joint Command of the Armed Forces facilities. All of them work in the VHF band, which is why a backup system is required in case the VHF system fails. Therefore, the proposal is to implement the HF system in the territorial network, which does not require repeaters and is functional in emergencies. However, it is necessary to purchase news HT radios to improve and maintain communication between response teams.

Some branches had their communication equipment affected by these events, and others no longer used the equipment. Telecommunications equipment reinforcement has been included to maintain constant contact with headquarters and coordinate actions.

Information Technology

Technological support and technical support to the personnel involved. Provision of means of communication, such as internet access and videoconference.

Security

Provide advice and technical support to volunteers and humanitarian personnel regarding Operational Security (OS) to guarantee safer access through the socialization of guidelines for this context and the management of the Operational Security (OS) Booklet for a rigorous application of the Security Standards. All humanitarian personnel will implement OS and Safer Access, which are activated in a binding manner in the response operation. The ICRC will support security activities and reinforce training with volunteers and staff.

Planning, Monitoring, Evaluation and Reporting

The Country Cluster Delegation will provide technical support for monitoring and reporting the operation. A Lessons Learned workshop is planned jointly with the ICRC to gather experiences and learning opportunities of this event for future operations.

Administration and finance

ERCs Headquarters has a financial team that oversees follow-up, supervision of economic reports, quality control of intermediate products and preparation of final reports. Its administrative-financial software allows the institution to control its resources and/or those generated by different projects, including emerging ones. ERC's finance team maintains permanent coordination with the other donors for a financial review, budget validation, bank transfers and technical advice on cost justification procedures, and review and validation of invoices.

C. Detailed Operational Plan



Health

People targeted: 1,850

Male: 925

Female: 925

Requirements (CHF): 80,514

Needs analysis: The current situation demands First Aid and Prehospital Care services, as there are people bruised, wounded, dehydrated, or being short of breath, further complicating pre-existing conditions. First-line responders are responsible for recognizing the urgency of a given situation and transporting a patient as quickly as possible to the facility where definitive care can be provided. The initial assessment of the patient consists of checking haemorrhages, airways, ventilation, circulation, neurological deficit, and exposure, among others. Other effects are decompensation and internal imbalance, triggering cardio-respiratory arrest, with CPR treatment essential. There are also the risks of hypoxia, which leads to a lack of oxygenation. The primary injuries correspond to patients with trauma in a single body system or multisystem trauma, that is, injuries involving more than one body system, including the pulmonary, circulatory, neurological, gastrointestinal, musculoskeletal, and integumentary systems. It is necessary to have immobilization kits that contain splints for the arm, leg, sling, adjustable cervical collars for adults and children, and rigid splints for spinal immobilization that contain spider-type fastening straps and a spinal immobilizer.

Risk analysis: The First Aid and Pre-Hospital Care response teams face risks such as:

- Aggression against the personnel that comprise the First Aid and Pre-Hospital Care response teams, ambulances and the institution's resources.
- Response team personnel are injured because of impact by blunt objects, physical assaults, looting, or other violent situations, including the involuntary retention of personnel and vehicles.
- Mistaking the staff of the Ecuadorian Red Cross with health personnel from other public or private institutions, generating an increased risk and probability of suffering physical and/or psychological aggression
- Physical and mental exhaustion of the people who make up the response teams.
- The institutional image and reputation are damaged due to false or malicious information from groups involved or the public.
- Risk of contagion of COVID-19. Short description of any anticipated risks relevant to these Areas of Focus that the Plan of Action will seek to address to ensure a risk-informed response.

Population to be assisted: At least 1,000 people receive First Aid care by mobile response teams or aid stations and/or Prehospital Care through the Ecuadorian Red Cross Ambulance and Prehospital Medicine System. Targeted people belong to the following population groups:

- Protesters from different social organizations
- Children and senior citizens
- National Police and Army staff

- Business owners, street vendors, store employees, and the population in general
- Officials of governmental and non-governmental organizations

Programme standards/benchmarks:

- National Law of patient's rights and protection.
- Regulations to typify health establishments of the National Health System – Ministry of Public Health.
- Regulations for the Management of the Unique Clinical History - Annex 002 (patient attention sheet)
- Management Model, Organization and Functioning of the Mobile Health Care Service.
- PHC protocols from the Ministry of Public Health.
- Pre-hospital care procedure for response to ERC emergency situations.
- Procedure Prehospital care for ERC internal tensions.
- Safer Access and Operational Security Manuals.
- Agreements: framework and specific between the Integrated Security System (SIS ECU 911) and the Ecuadorian Red Cross

Needs analysis: Mental Health and Psychosocial Support (MHPSS) The normal reactions detected in people, families or communities affected by social mobilizations are manifested in different ways, at different levels:

Emotional: anxiety, grief, guilt, anger, irritability, frustration, sadness, shame, numbness, loss of hope, loss of meaning, feeling empty.

- Mental: Loss of concentration, memory loss, confusion, intrusive thoughts, difficulty making decisions, disorganized thinking. Physical: increased heart rate, trouble sleeping, aches (stomach, head), back and neck pain, muscle tremors and tension, loss of energy, inability to rest and relax.
- Social: taking risks; eating more or less; increasing consumption of alcohol or cigarettes, aggression, withdrawal, isolation.

Attention to the psychological and psychosocial needs of the affected population is developed, individually or in groups, in spaces of peace, educational establishments and safe spaces, in which playful, reactional, sports, physical, and informative activities are carried out. Awareness, preventive, and psychotherapeutic with the support of educational and reactional materials. In addition, remote assistance is carried out in which communication facilities are required to provide adequate care.

Risk analysis - MHPSS: Mental Health and Psychosocial Support activities face risks such as

- Little interest or participation of the affected people in receiving the service.
- Refusal of people to receive the service for mistaking the State with the ERC.
- The stressful environments that volunteers are exposed to during this scenario can be challenging to manage without the right tools.
- Risk of contagion of COVID-19.

Population to be assisted - MHPSS:

- 800 community members in general, with priority attention to women, girls, boys, adolescents, and older adults. Personnel from response agencies external to ERC.

- 250 ERC humanitarian staff (volunteer and staff).

At least 1,050 people from the population groups receive mental health care and psychosocial support from ERC humanitarian personnel.

Programme standards/benchmarks - MHPSS:

- The policy of the International Red Cross and Red Crescent Movement on the attention to mental health needs and psychosocial support.
- The Mental Health Care Model, within the Comprehensive Health Care Model (MAIS) framework, has a Family, Community, and Intercultural approach.
- Previous learning opportunities from past operations. Contingency Plans are developed to address this kind of event.

P&B Output Code	Health Outcome 1: The immediate risks to the health of the affected populations are reduced through improved access to medical treatment	<i># of people reached with pre-hospital care and first aid services</i> Target: 1,050											
	Health Output 1.1: Improved access to prehospital care and emergency health care for the targeted population and communities.	<i># of people receiving pre-hospital care and first aid</i> Target: 1,050 <i># of provincial branches equipped with first aid kits, supplies, and materials to provide health services.</i> Target: 10 provincial branches											
	Activities planned Week	1	2	3	4	5	6	7	8	9	10	11	12
AP022	Provide Pre-hospital care and first aid for affected people												
AP022	Purchase and distribution of FA kits, supplies, materials, and devices for pre-hospital care and first aid												
AP022	Provision of protection equipment for responders												
P&B Output Code	Health Outcome 2: The psychosocial impacts of the emergency are lessened	<i># of people reached with mental health care and psychosocial support.</i> Target: 800											
	Health Output 2.1: Psychosocial support provided to the target population as well as to RCRC volunteers and staff	<i># of number people receiving mental health care and psychosocial support.</i> Target 800 <i># of number of Volunteer staff and staff receiving mental health care and psychosocial support.</i> Target: 250 (these people are not considered in the total count as they are part of the organization).											

		# of number MHPSS kits delivered for provincial branches involved Target: 12											
		1	2	3	4	5	6	7	8	9	10	11	12
AP023	Rapid assessment MHPSS affected population needs												
AP023	Provide mental health care and psychosocial support to affected people												
AP023	Purchase and delivery of MHPSS kits and telecare chips to provide mental health care and psychosocial support to affected people												
AP023	Establish referral pathway for complex cases												



Protection, Gender, and Inclusion

People targeted: 10,000 (indirect)

Male: 5,000 (indirect)

Female: 5,000 (indirect)

Requirements (CHF): 15,742

Needs analysis: The context of social mobilizations in Ecuador, especially when the participants are from indigenous communities, includes in their groups the presence of women, adolescents, children, and the elderly. Under this premise, it is determined the need to have the tools (information and approach) to address or satisfy situations that arise in the context of protests, such as situations of gender-based violence, situations of lost or unaccompanied children, or other situations that require a timely response, well informed and with guidelines for a safe referral or derivation from volunteers who could identify these cases, as well as in general can provide care with a gender protection and inclusion approach, so that the minimum standards of protection, gender and inclusion in emergencies should be further deepened, and mainstreamed throughout the planned response.

Risk analysis: These demonstrations have generated scenarios where children and adolescents have been lost, have been exposed to tear gas, smoke and violent scenarios, as well as pregnant women and older adults; so the identification of these cases makes that the actions that are carried out do not cause more damage, the information that is transmitted is correct, and the most important thing is to know how to address this issue; so if the volunteer staff does not have a focus on PGI it could be a detriment to the image of the movement and its protection policies.

Population to be assisted: On the one hand, the teams of humanitarian personnel of the ERC, activated in the lines of action of first aid, psychosocial support and restoring family links, will be the recipients of a national workshop for the acquisition of knowledge in minimum protection, gender and inclusion standards and the correct approach to this issue.

On the other hand, the community will be provided with information on awareness and referral routes to protect people belonging to priority attention groups.

Program standards/benchmarks:

- Sphere Handbook: DAPS Standards
- IFRC Minimum Standards for protection, gender, and inclusion in emergencies.
- IFRC Safe Referral Guide.

P&B Output Code	Protection, Gender & Inclusion Outcome 1: Communities become more peaceful, safe and inclusive through meeting the needs and rights of the most vulnerable.	<i># of volunteers trained on PGI Minimum Standards Target: 200</i>											
	Protection, Gender & Inclusion Output 1.1: Programmes and operations ensure safe and equitable provision of basic services, considering different needs based on gender and other diversity factors.	<i>One virtual workshop on PGI Minimum Standards carried out</i>											
	Activities planned Week	1	2	3	4	5	6	7	8	9	10	11	12
AP031	Conduct a virtual workshop with the intervening personnel on the Minimum Standards for PGI in emergency situations.												
P&B Output Code	Protection, Gender & Inclusion Output 1.2: Programmes and operations prevent and respond to sexual- and gender-based violence and other forms of violence especially against children.	<i>One mapping of actors and referral routes developed # of people that people receive information and guidance on referral routes Target: 10,000</i>											
	Activities planned Week	1	2	3	4	5	6	7	8	9	10	11	12
AP033	Develop mapping of actors and referral routes for victims of gender-based violence and children and adolescents.												
AP033	Elaboration and dissemination of communication pieces to inform and orient people about referral routes, through community radio stations.												
P&B Output Code	Protection, Gender & Inclusion and Output 1.3: NS educational and advocacy programmes raise awareness on humanitarian challenges, cultivate humanitarian values and develop relevant interpersonal skills	<i>One communication campaign developed to support protection activities</i>											
	Activities planned Week	1	2	3	4	5	6	7	8	9	10	11	12

AP034	Communication campaign for the protection of the humanitarian mission												
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Migration

People targeted: 45 direct and 200,000 indirect

Male: 22 direct; 100,000 indirect

Female: 23 direct; 100,000 indirect

Requirements (CHF): 13,845

Needs analysis: The provision of the RFL service is based on the evolution of the scenario and the need of each one of them, which considers:

- Dissemination of preventive measures of separation of family ties through recommendations addressing the connectivity at the national level.
- Activation of the connectivity service (calls, device charging and mobile data access) with a provision of a kit (backpack, USB, posters with RFL information, RFL-banner, RFL format stubs, cell phone charger (power bank), USB port extensions, cell phone, headphones, folder, pens, RFL cards, megaphone), for the population that does not have access to a mobile device and wishes to provide family news.
- Activating safe referral routes and/or registration of vulnerable persons, unaccompanied children, and adolescents.
- Possible search requests for missing persons.
- Attention to cases through the national RFL line for information or referral to each service.

Risk analysis: The referents and teams that provide the range of RFL services in the Provincial Branches and the territory may witness the following risks in the course of their work:

- Acts of violence during their interventions of a physical or emotional nature.
- Acts of common violence such as the crime of RFL equipment.
- Lack of facilities and security levels of personnel for the development of the survey of the population's needs.
- Scarce information is provided to implement search services for missing persons and records of people in vulnerable situations.
- Risk of contagion of COVID-19.

Population to be assisted:

- 200,000 people between 16 and 70 years of age reached through key prevention messages to avoid the loss of family contact in situations of demonstrations at the national level through the contracting of the mass messaging service via WhatsApp.
- 20 connectivity services (access to telephone calls to establish communications with their families, access to data) at the national level, provided at the headquarters of the Provincial Branches of the Red Cross or mobile points.
- 20 people assisted through the registration service for vulnerable people, unaccompanied children, and adolescents, who require safe referral to other institutions.

- 5 search requests at the national level.

Program standards/benchmarks:

- Global RFL Strategy 2022-2025
- ERC National RFL Strategy 2022-2025.
- International Red Cross and Red Crescent Movement Family Links Network Code of Conduct on Data Protection.

P&B Output Code	Migration Outcome 1: Communities support the needs of migrants and their families and those assisting migrants at all stages of migration (origin, transit and destination)	<p><i># of people reached with RFL services Target: 45</i></p> <p><i># of indirect people reached with RFL services Target: 200,000</i></p> <p><i># of people reached with communication messages: Target: 200,000</i></p> <p><i># of (indirect) people reached with preventive RFL communication messages Target: 200,000</i></p> <p><i># of (indirect) people reached with humanitarian role messages Target: 200,000</i></p>											
	Migration Output 1.3: “Family links are restored for people separated from, or without news of, their loved ones as a result of the disaster”	<p><i># of provincial branches provided with RFL emergency cases Target: 10</i></p>											
	Activities planned Week	1	2	3	4	5	6	7	8	9	10	11	12
AP083	Needs assessment according to the scenario by the RFL technical teams of the 10 Provincial Branches.												
AP083	Attention to people affected by the breaking of family ties such as search requests, connectivity services, registration of vulnerable people.												
AP083	Acquisition of equipment for RFL emergency cases for 10 Provincial Branches												

Strategies for Implementation

Requirements (CHF): 63,314

P&B Output Code	S1.1: National Society capacity building and organizational development objectives are facilitated to ensure that National Societies have the necessary legal, ethical and financial foundations, systems and structures, competences and capacities to plan and perform													
	Output S1.1.6: National Societies have the necessary corporate infrastructure and systems in place											# of volunteers insured by the Ecuadorian Red Cross Target: 200 # of gas masks provided to volunteers Target: 50 One staff hired to support the implementation of the operation		
	Activities planned Week	1	2	3	4	5	6	7	8	9	10	11	12	
AP042	Mobilization, monitoring and operational support of headquarters staff and volunteers.													
AP042	Recruitment of an administrative/logistic technician													
AP042	Administrative and clerical support to HQ													
AP042	Fuel and maintenance of vehicles													
AP042	Printer and institutional visibility (volunteer cards, banner, etc.)													
AP042	Personal protective equipment and visibility for volunteers and staff													
AP042	Gas masks for volunteers with filter refill													
AP042	Rapid Response Support													
-	Lessons Learned Workshop (covered with other funds)													
P&B Output Code	Outcome S2.1: Effective and coordinated international disaster response is ensured													
	Output S2.1.1: Effective and respected surge capacity mechanism is maintained.													
	Activities planned Week	1	2	3	4	5	6	7	8	9	10	11	12	

AP046	IFRC Operational Support													
AP046	IFRC Monitoring													
P&B Output Code	Outcome S3.1: The IFRC seERCtariat, together with National Societies uses their unique position to influence decisions at local, national and international levels that affect the most vulnerable.	<i>One communications campaign carried out</i>												
	Output S3.1.1: IFRC and NS are visible, trusted and effective advocates on humanitarian issues													
	Activities planned Week	1	2	3	4	5	6	7	8	9	10	11	12	
AP053	Implementation and development of a communication strategy prioritizing messages about the humanitarian role of the ERC in social events (dissemination through social networks and mass messaging).													
AP053	Disseminate key messages on the prevention of the breaking of family ties through digital media.													
AP053	Materials for audio-visual communications													

Budget

See Annex

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

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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

MDREC020 - ECUADOR - CIVIL UNREST

04/07/2022

Budget by Resource

Budget Group	Budget
Shelter - Relief	0
Shelter - Transitional	0
Construction - Housing	0
Construction - Facilities	0
Construction Materials	0
Clothing & Textiles	0
Food	0
Seeds & Plants	0
Water, Sanitation & Hygiene	0
Medical & First Aid	59,250
Teaching Materials	20,581
Utensils & Tools	0
Other Supplies & Services	0
Emergency Response Units	0
Cash Disbursement	0
Relief items, Construction, Supplies	79,831
Land & Buildings	0
Vehicles	0
Computers & Telecom	2,500
Office & Household Equipment	0
Medical Equipment	0
Other Machinery & Equipment	0
Land, vehicles & equipment	2,500
Storage	0
Distribution & Monitoring	0
Transport & Vehicles Costs	6,500
Logistics Services	0
Logistics, Transport & Storage	6,500
International Staff	10,000
National Staff	0
National Society Staff	8,800
Volunteers	36,500
Personnel	55,300
Consultants	0
Professional Fees	0
Consultants & Professional Fees	0
Workshops & Training	100
Workshops & Training	100
Travel	1,900
Information & Public Relations	400
Office Costs	5,300
Communications	10,600
Financial Charges	400
Other General Expenses	0
Shared Office and Services Costs	0
General Expenditure	18,600
Assets Depreciation	0
Depreciation	0
Cash Transfers National Societies	0
Cash Transfers to 3rd Parties	0
Contributions and Transfers	0
DIRECT COSTS	162,831
INDIRECT COSTS	10,584
TOTAL BUDGET	173,415

Budget by Area of Intervention

AOF1 Disaster Risk Reduction	
AOF2 Shelter	
AOF3 Livelihoods and Basic Needs	
AOF4 Health	80,514
AOF5 Water, Sanitation and Hygiene	
AOF6 Protection, Gender and Inclusion	15,742
AOF7 Migration	13,845
SFI1 Strengthen National Societies	49,256
SFI2 Effective International Disaster Management	14,058
SFI3 Influence others as leading strategic partners	
SFI4 Ensure a strong IFRC	
TOTAL	173,415

