


www.ifrc.org
Saving lives,
changing minds.

Emergency Plan of Action Preliminary Final Report

St. Vincent and the Grenadines, Americas: Flood

 International Federation
of Red Cross and Red Crescent Societies

DREF Operation	MDRVC002; Glide n° FL-2013-000159-VCT
Date of disaster: 25 December 2013	Date of issue: 20 August 2014
Operation start date: 25 December 2013	Operation timeframe: 3 January 2014 to 3 April 2014
Host National Society: St Vincent and the Grenadines Red Cross Society with 100 volunteers and staff; all branches were involved in the operations.	Operation budget and DREF allocation: 149,440 Swiss francs. The DREF has been 100% replenished by the Canadian Red Cross/Govt. (16,949 Swiss francs and 3,299 Swiss francs), DG ECHO (60,000 Swiss francs, the Spanish Red Cross/Govt. (36,900 Swiss francs and Coca Cola Foundation (32,292 Swiss francs).
Number of people affected: 13,029	Number of people to be assisted: 7,000 (1,400 families)
N° of National Societies involved in the operation: The French Red Cross/PIRAC, the Barbados Red Cross Society, Antigua and Barbuda Red Cross, Jamaica Red Cross, Trinidad and Tobago Red Cross, St Kitts and Nevis Red Cross	
N° of other partner organizations involved in the operation (if available and relevant): NEMO (National Emergency Management Office), Ministry of Health, Wellness and the Environment – MoH, Central Water Sewage Authority - CWSA	

A. Situation analysis

Description of the disaster

A low-level trough system produced torrential rains on 24 December 2013 and caused severe floods, landslides and damages in the country. A total of 308.6 mm of rainfall was recorded over a 24-hour period in the island of Saint Vincent and affected the following areas: Pembroke, Vermont, Buccament Bay, South Rivers, Byera, Spring Village, Rose Bank and North Windward - Sandy Bay, Megum, Orange Hill and London, as well as the capital Kingstown.

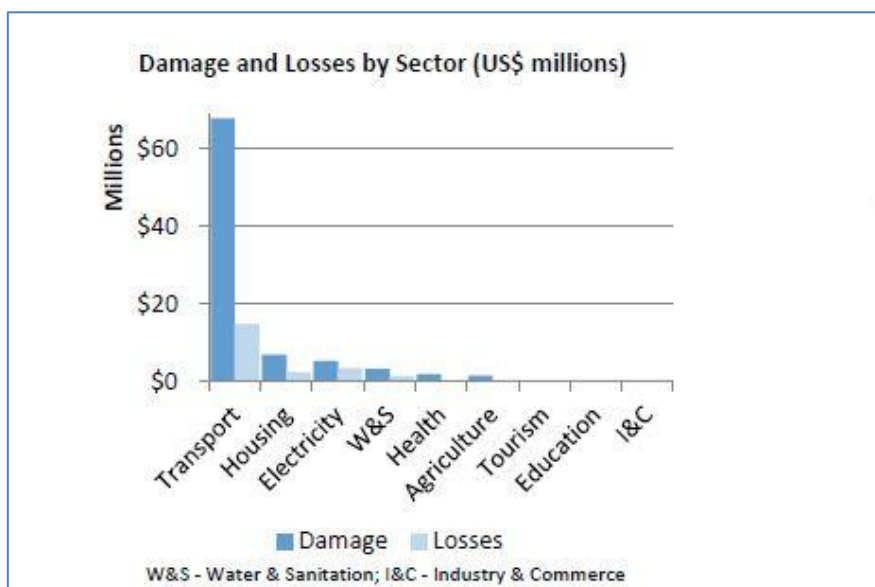
The flooding affected critical infrastructures, including the E.T. Joshua Airport, the Milton Cato Memorial Hospital (referral hospital with 215 bed capacity) and three clinics. Several clinics were closed for several weeks since there was no running water. According to the assessment carried out by the Ministry of Health, Wellness and the Environment (MoH), the estimated cost of the damages incurred in the Milton Cano Hospital was of approximately 2 million East Caribbean dollars; some of the hospital's records and essential equipment were damaged.



Red Cross volunteers loading relief supplies on sea vessel Joshua for distribution in North Leeward. Source: SVGRCS

According to the Caribbean Disaster and Emergency Management Agency (CDEMA) the trough system caused 9 fatalities, 3 people missing, 37 people severely injured and 500 homeless with a total of 2,325 people displaced after the disaster. On 1 February there were 158 people in 5 government shelters (Rillan Hill, Spring Village, Fitz Hughes, Rose Bank, South Rivers) managed by NEMO. 278 people stayed in informal shelters, with families, friends and relatives. All shelters were closed after approximately two months after the operation started.

According to the Rapid Damage and Loss Assessment (DaLa) report¹ issued by the Government of St. Vincent and the Grenadines in collaboration with the World Bank, the floods resulted in total damages and losses of 108.4 million US dollars, mainly in the infrastructure sector (97 per cent), followed by the social (3 per cent) and productive sectors (1 per cent). Total economic loss was estimated the government of St. Vincent and the Grenadines (WB Rapid Damage and Loss Assessment) to be over 108 million USD.



Damage and losses by sector (millions of US dollars). Source: World Bank

According to the CDEMA 2014 report the detail of damages to houses and people were as follows:

SER	LOCATION/S	IMPACTED POPULATION
1	The Vermont Valley, all the way down to Buccament Bay (including the villages of Francois, Retreat, Vermont, Dubois, Hog Hole, Cane Grove, and Pembroke).	4,684 persons
2	Spring Village, Rose Bank and Dark View on the Leeward Side (including the villages of Pitit Bordel, Chateaubelair, Fitz-Hughes, Richmond Vale, Spring Village, Gordon Village, Cumberland, and Troumaca)	5,731 persons
3	South Rivers	1,213 persons
4	O'Briens Valley Georgetown and Spring Village Georgetown	1,401 persons
5	Sandy Bay, Owia, Fancy	3,856
TOTAL NUMBER OF PERSONS IMPACTED		16,885

The table represents 12 per cent of the country's entire population; however, when looking at water distribution, the figure is even higher, due to damaged water pipelines. 55 per cent of the population was estimated to have been affected (with daily cut offs), given a total of 48,856 people without water distribution from pipelines.

¹ http://reliefweb.int/sites/reliefweb.int/files/resources/SVG_Rapid_DaLA_Report.pdf

Summary of response

Overview of Host National Society

The Saint Vincent and the Grenadines Red Cross Society's (SVGRCS) Community Disaster Response Teams (CDRT), National Intervention Teams (NIT), as well as the volunteers trained as Regional Intervention Teams (RIT) were responding to the emergency since 25 December. The National Society has 83 general NIT members and 10 volunteers trained as RIT (two volunteers specialized in water and sanitation, two specialized in logistics, three general RITs, and one volunteer RIT specialized in information, reporting, communication and IT/telecommunications).

The CDRT groups were formed and equipped through the DIPECHO VIII project. There are eight CDRT groups in the country, located in different communities, which organize trainings outside emergencies and participate as active volunteers in times of disaster. The total number of volunteers in the National Society is 150 and 100 volunteers were involved in this operation.

Overview of Red Cross Red Crescent Movement in country

The 'Volcanic risk in the Lesser Antilles' project is being implemented by the SVGRCS in collaboration with PIRAC. During the emergency, collaboration with PIRAC was done as per logistical needs under this DREF operations for the items, that were later replenished by GLS under this operation.

The International Federation of the Red Cross and Red Crescent (IFRC) through the Pan-American Disaster Response Unit (PADRU) deployed a regional disaster management coordinator to support the operation, while the Americas zone office (through the Global Logistics Service, GLS) assisted with the logistics for the operation.

The Barbados Red Cross Society donated SVGRCS the following items:

- 25 kitchen sets; 26 square buckets; 25 round buckets; 288 bottles of water and 2 bags of toilet paper containing 44 rolls per bag.

These relief items were flown in the country through private companies such as the Grenadines Air and Liat, free of cost. The Barbados Red Cross Society has also provided 900 jerry cans, which were replenished with funds from the DREF and flown into the island. The Antigua, Barbuda Red Cross, Jamaica Red Cross, Trinidad and Tobago Red Cross Society and St Kitts and Nevis Red Cross also provided support to the operation by donating items.

The French Red Cross Regional Intervention Platform for the Caribbean (PIRAC) and PADRU coordinated with the Martinique Regional Council, associated with local organizations in Martinique, the shipment of three containers to Saint Vincent and the Grenadines which arrived in January 2014. The containers brought mattresses, jerry cans and bottled water. Also, a new AquaEW403D water purification unit (with capacity to distribute water for 4,000 beneficiaries per day, at the speed of 3 cubic metres per hour), which was prepositioned in Martinique in a PIRAC warehouse, was sent to the SVGRCS. The water purification unit and its chemicals have been replenished under this DREF to PIRAC. The Office of the Prime Minister of Saint Vincent and the Grenadines has exempted the SVGRCS from import taxes/customs for any incoming humanitarian aid transport.

Overview of non-RCRC actors in country

The UNDP offered the National Society some support to reach the affected communities that were cut off from the road and OFDA supported by funding three high pressure washing systems in country to support the cleaning campaigns in affected communities.

In accordance with the National Disaster Response Plan of the Government of St. Vincent and the Grenadines, the National Emergency Management Office (NEMO) conducted a preliminary damage and needs assessment, which it focused in the immediate emergency response: rescue of missing people, clearing of landslips, restoration of water and electricity, including the preparations of diversions around damaged bridges.

The collaboration and coordination with non-Red Cross actors worked well during the operation. The SVGRCS continued to work with partners such as NEMO, the Ministry of Health, the Wellness and the Environment – MoH, the Central Water Sewage Authority (CWSA) throughout the operations and supported a mission from the European Commission Humanitarian Aid and Civil Protection (ECHO) on 27 January to evaluate the response operation.

The Ministry of Education (MoE) provided assistance with the shelter managers who updated the needs assessment and with psychosocial support (PSP). Moreover, the MoE collaborated with the hygiene promotion and the distribution of hygiene items to schools and shelters.

The CWSA assisted with clean drinking water during the emergency phase until SVGRCS' shipment of bottled water arrived. It further assisted with the field training in water and sanitation and the field assessment in Vermont and Buccament. A MoU was signed recently between the SVGRCS and the CWSA for collaboration with the new water purification unit before and during emergencies.

The Ministry of Public Health (MoPH) participated in the hygiene promotion and in the consultations with the affected population; moreover, the MoPH assisted with the hygiene promotion and dissemination of information to the affected communities.

Needs analysis and scenario planning

The flooding and landslides heavily affected several areas of the country, causing injuries and loss of lives, crops, animals and personal property. Many of the families were able to clean their houses and the water was restored after three weeks in most of the affected areas, but there was still a risk of secondary hazards such as waterborne and vector-borne diseases. Safe water was needed for the affected populations as well as water storage units to ensure access to safe water and minimize the risk of diarrhetic diseases. Initially it was planned that the AquaEW403D water purification unit provided by PIRAC would be utilized in the target areas that are accessible by road and truck, but the unit arrived damaged, so the population was assisted using water bottles distributed by local partners such as the Coca Cola Company, the Martinique Regional Council, the French Red Cross platform for the Caribbean (PIRAC), and the Barbados Red Cross Society.

In coordination with the Ministry of Public Health (MoPH) and NEMO, the affected families were registered and were provided with food and non-food items.

Beneficiary selection

Based on assessments, the SVGRCS selected the most vulnerable people in the worst hit areas of Vermont Valley to Buccament Bay (Buccament Valley), Spring Village, Rose Bank on Leeward side, Sandy Bay and Rose Hall.

The selection of beneficiaries was done according to the needs, using the following criteria:

- families with destroyed houses or with substantial damage
- people with disabilities
- families with many children
- single-headed households with children
- elderly people

Risk analysis

The roads to the North Leeward side of the island were unsafe due to the various landslides and the collapse of bridges and parts of the roads. Many communities were inaccessible and at risk due to isolation and the settled water from the rains was feared to become breeding grounds for mosquitoes which could spread dengue and leptospirosis.

The Red Cross mitigated the risk of road travel by using a boat to transport non-food items, food parcels and water to isolated communities with collapsed roads. However, there were limitations on movement after dark. To reduce the risk of secondary hazards, the Red Cross included hygiene promotion, and distributed dengue and chikungunya prevention materials in the affected areas.

B. Operational strategy and plan

Overall Objective

The overall objective was to provide immediate relief and assistance to 1,400 families affected by the severe storm, in close coordination and collaboration with NEMO and other relevant national authorities of Saint Vincent and the Grenadines. The objective was met optimally and the additional funding from the Canadian Red Cross and Government complemented the DREF operation.

Proposed strategy

The current operation was developed using a two-level strategy. First, the immediate response included the assessment and distribution of relief items; and the second level of the operation included the distribution of water and the reduction of secondary health hazards.

The AquaEW403D water purification unit was shipped from Martinique and was used for training purposes, and jerry cans were distributed for safe water storage. For the control of vector and waterborne diseases, the National Society carried out a prevention campaign and hygiene promotion in each target community as well as in local TV channels. As the operation was closely coordinated with the MoPH and NEMO, steps were taken to avoid the duplication of efforts.

To ensure a two-way communication with beneficiaries, a complaint and feedback mechanism through bulletin boards was established by the Red Cross in each of the target communities. These boards are being managed by CDRTs, which channelled the information to the headquarters of the SVGRCS. In order to share the lessons learned of this operation, a two-day workshop was organized between 1 and 2 April, before the end of the operation, with volunteers, staff, NITs, CDRT members and beneficiaries. The workshop was supported by a reporting delegate from the Americas zone office. Also, a beneficiary satisfaction survey was conducted with 250 families (20 per cent of total number of families receiving aid) at the end of the operation.

Operational support services

Human resources (HR)

The SVGRCS mobilized 100 volunteers for assessments, distributions, communication, hygiene promotion and water and sanitation activities. In the aftermath of the disaster, the SVGRCS volunteers also intervened by giving first aid and providing psychosocial support to people who had lost family members and refused to accept basic first aid treatment due to loss of family members (effect of shock). The psychosocial support was continued as per the needs with the families. The meals and travel costs were covered under this DREF. The vehicles of the National Society as well as rented vehicles were used to safely transport volunteers from office to their homes and to operational areas. During the operation, the volunteers were provided with phone credit so they could communicate with the headquarters and to ensure their safety.

A RIT member specialized in water and sanitation was deployed from 17 January to 18 March 2014 and she was assisted by two water-and-sanitation staff from the National Society who were trained by PIRAC during the previous year on the use of the purification unit. The RIT deployment costs were covered by the Canadian Red Cross.

A local communications officer was hired to develop the beneficiary feedback mechanism and planned to be responsible for the beneficiary satisfaction survey of 250 families, working together with the SVGRCS volunteers. The communication officer together with one volunteer were responsible for a video production of the operation and he supported with a film specialist production of TV campaigns for hygiene promotion. The assignment was for the duration of one month, distributed along the three months of operations, according to the work plan of the operations coordinator.

Considering the operational requirements of the DREF, there was the need for one full-time operations coordinator who managed the operational activities in close liaison with NEMO and other national authorities. The operations coordinator was also responsible for volunteer management as well as the financial management of the operation, ensuring timely financial reporting to the IFRC.

Logistics and supply chain

- The procurement plan included the distribution of water purification tablets (aquatabs), jerry cans, buckets, food parcels, blankets, hygiene kits and hygiene promotion and vector-borne disease prevention material according to the needs identified in the affected area and based on further discussions with the Ministry of Health, Wellness and the Environment. The items used were from the prepositioned Tropical Mobile Storage Unit (TMSU) of the National Society, while the transportation of 900 jerry cans from the Barbados Red Cross Society was provided by the Americas Zone Global Logistics Services (GLS) in Panama including the replenishment of stocks used from the TMSU. The 900 jerry cans were replenished directly to the Barbados Red Cross Society from the warehouse in Panama. The PIRAC AquaEW403D unit was replenished by purchasing a new unit using the DREF and sending it to Martinique. The cleaning kits used were purchased locally (mops, brooms) and in addition, four pressure washers were purchased abroad under the OFDA funding. The cleaning of houses and clinics with pressure washers was done together with NEMO and the MoH. The detergents bought under this DREF were used for the cleaning of the houses and surrounding areas affected by floods.
- The National Society followed their own procurement procedures, but for the larger local purchases (over 1,000 Swiss francs), the IFRC procurement procedure was followed. In case of these larger local purchases e.g. medical supplies for first aid, the procedure of requesting three quotations and organizing a selection panel was used.

- The warehouse is located at the SVGRCS headquarters in Kingstown and the existing stocks were used entirely. In order to rotate the stocks in the warehouse and the items from the TMSU. The replenishment of stocks was done according to the above-mentioned procurement plan.
- Donations were coordinated to ensure the rotation of the existing stocks and to not overload the warehouse capacity of the National Society. Under this DREF, the hygiene kits were replenished locally by changing the expired toothpaste in 250 hygiene kits in the National Society warehouse, and thus moving the kits to “usable stock”.
- A boat was provided for free to transport relief material to the inaccessible communities. Volunteers were transported by the SVGRCS’ minibus and a 4x4 jeep and additional trucks were hired for transportation of non-food items and food items.
- An additional truck was required for the water purification unit for two weeks and the expenses (1,873.59 East Caribbean dollars or 670 US dollars) were covered under this DREF.

IT and Communications

Due to heavy reliance on mobile phones to reach volunteers and the affected communities, as well as the need to communicate with NEMO and PADRU, the phone costs of the National Society (especially international phone calls to Trinidad and Tobago/CRRO and Panama/Americas zone office) were covered in this operation. Communication lines were maintained throughout the operation.

The DMIS and the SVGRCS’ facebook pages were updated on a daily basis, and interviews were shared with the local media (for example, through the radio programme “View Point” on 14, 21, and 28 January, reaching a wide audience island wide with PSP, psychological first aid and supportive communication). The social media engaged also the diaspora for additional donations (to SVGRCS’ account for emergencies) and gave information on the ongoing operation. The affected communities benefited initially from a feedback mechanism through direct messages from CDRTs to the SVGRCS’ headquarters and through direct visits by the beneficiaries to the Red Cross headquarters. An article on the Red Cross response and the National Society’s collaboration with NEMO was published in the local newspaper, *The Searchlight*. The communications officer gave weekly updates on the radio (NBC Radio) on the work done with the communities and on the planned activities.

Security

Additional rainfall after the initial flood increased the possibility of further landslides, as the soil was saturated with water. The security risk was taken into account by limiting movement during the hours of darkness and by checking the situation with authorities before heading for the field.

In the field, there was a protocol in place at all times for the volunteers as to be moving in groups to minimize the risk of robberies or assaults on volunteers.

Planning, monitoring, evaluation and reporting (PMER)

The disaster management coordinator travelled for a short mission to Saint Vincent between 29 January and 1 February to support reporting at country level and revise the work plan together with the SVGRCS and the RIT member. Furthermore, a reporting officer from the Americas zone office supported the elaboration of the final report and participated in the two-day lessons learned workshop (1-2 April). ECHO and the Canadian Red Cross also conducted their own evaluation mission in the country.

Administration and Finance

The National Society administration and finance costs are according to the DREF guidelines and did not cover structural and normal annual office costs; the costs were limited to supporting only the DREF operation work plan for three months. The same rule was applied to the IFRC costs supporting human resources (PMER/Finance) and materials for the purpose of the operation. The regional disaster management coordinator based in Trinidad and Tobago was the project’s manager and worked closely together with SVGRCS.

C. DETAILED OPERATIONAL PLAN

Quality programming/Areas common to all sectors

OBJECTIVE	INDICATORS
Outcome 1 The SVGRCS has integrated emergency	1. # of meetings with stakeholders

response plan of action that has been designed in consultation with key stakeholders	2. Plan of Action (PoA) based on strategies and needs drawn from assessments developed											
Output 1.1 Detailed assessments are carried out in affected areas of Vermont Valley extending to Buccament Bay (Buccament Valley), Chateaubelair, Spring Village, Rose Bank on Leeward side, Sandy Bay and Rose Hall	1. # Number of assessments related to emergency and recovery responses											
Activities	1	2	3	4	5	6	7	8	9	10	11	12
Week												
1. Assessments of affected areas performed.												
2. Registration of most vulnerable families.												
3. PoA developed and submitted to PADRU.												
Output 1.2 Key decisions about the operation are informed by consultation of the affected people.	1. # of beneficiary representatives participating in lessons learned workshop											
Activities	1	2	3	4	5	6	7	8	9	10	11	12
Week												
1. Evidence-based communications and advocacy that leverage both traditional and non-traditional media are produced throughout operations.												
2. Beneficiary communications mechanisms are used during programme planning in order to ensure beneficiary participation and accountability.												
3. Regional DM mission in country for assessment and PMER purpose.												
4. Organizing lessons learned workshop.												

Achievements

Initial assessments were done in the affected areas in the country (Pembroke, Vermont, Buccament Bay, South Rivers, Byera, Spring Village, Rose Bank and North Windward - Sandy Bay, Magum, Orange Hill and London, as well as the capital Kingstown). Moreover, secondary assessments took place in order to evaluate the secondary needs of informally displaced people (278 people) who were living with families and friends and whose houses were not fully destroyed. For the families whose houses were fully destroyed, the government supported with shelter, but the SVGRCS supported the additional needs of the affected population (e.g. psychosocial support).

The beneficiary communication during the initial weeks of operations was carried out by face-to-face discussions with the staff at the SVGRCS headquarters and CDRT members, as well as through phone calls. Based on this feedback, clothing was given to the affected people and 80 low-income children in Buccament School received deodorants, soaps, combs and shampoo as they were marginalized by their peers due to poor self-hygiene (funds for those items came from a private partner in Buccament Valley—Layou Neighborhood Watchgroup).



Volunteers installing beneficiary information boards in Rose Banks. Source: SVGRCS

Furthermore, information boards were installed in the communities to collect feedback from beneficiaries and share information on the community trainings and activities. The Government of Canada through Canadian Red Cross, contributed with additional funding for the beneficiary information boards. The Ministry of Health, Wellness and Environment made two television hygiene promotional campaigns were produced for two television channels in the country to reach a maximum amount of people in coordination with (see link: <https://docs.google.com/a/vincysurf.com/file/d/0B8Ki1AenQYZ0MDIYaTNkWVM1VFk/edit?pli=1>). The spots were ready by mid-April and were aired till the end of the month of April.. In addition, a video of the operations with beneficiary stories and interviews with operational staff. This video was also funded with the additional funds through Canadian Red Cross. The video can be found in YouTube:

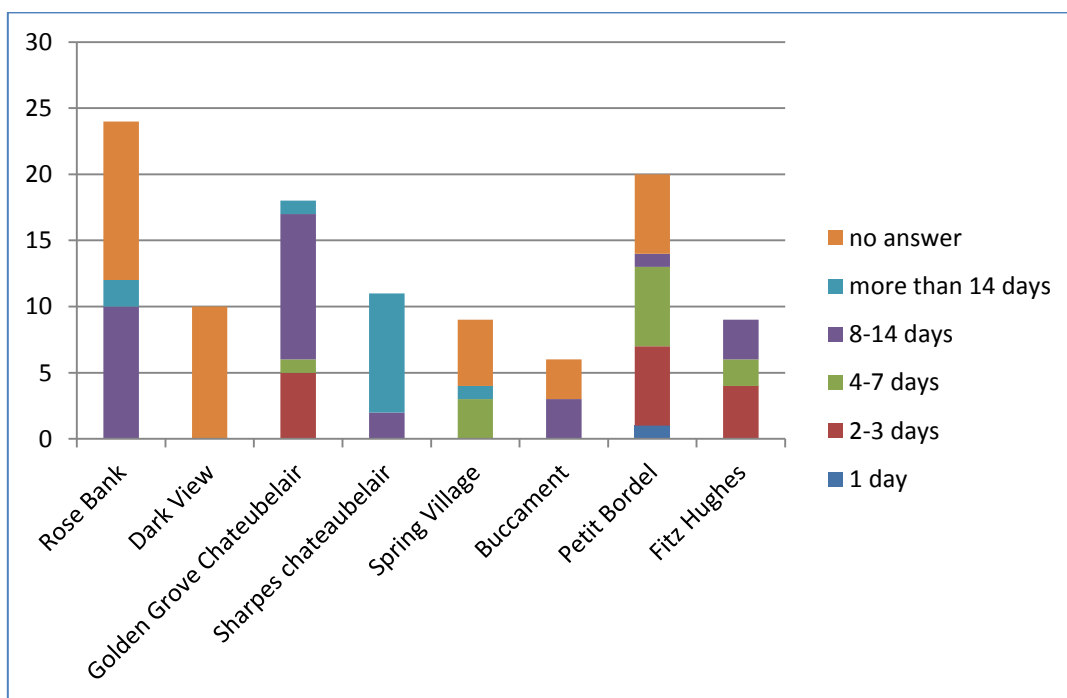
<https://www.youtube.com/watch?v=il4Xw2SVZKg&feature=youtu.be>

The social media was used for this operation to provide information and a series of specific messages including a press release:

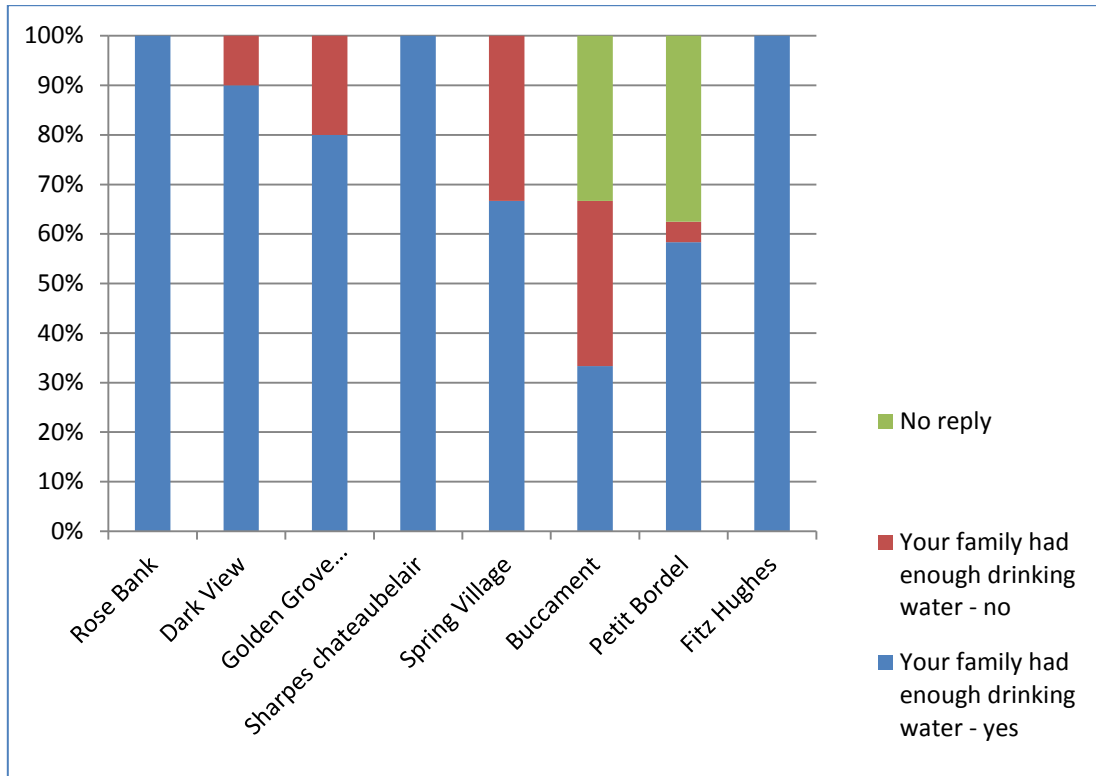
- Recycling messages: http://www.nbcsvg.com/2014/01/09/st_vincent-grenadines-red-cross-society-appealing-vincentians-practice-recycling/
- Water distribution messages: <http://www.nbcsvg.com/2014/01/14/weekend-st-vincent-grenadines-red-cross-society-distributed-one-hundred-food-packages-persons-windward-side-country/>
- Press release, published in the IFRC website: <http://www.ifrc.org/news-and-media/news-stories/americas/saint-vincent-and-the-grenadines/a-wet-christmas-to-end-the-year-in-the-lesser-antilles-of-the-caribbean-64347/>.

Also, with additional funding from Canadian Red Cross, a video production of the overall flood operation was done.

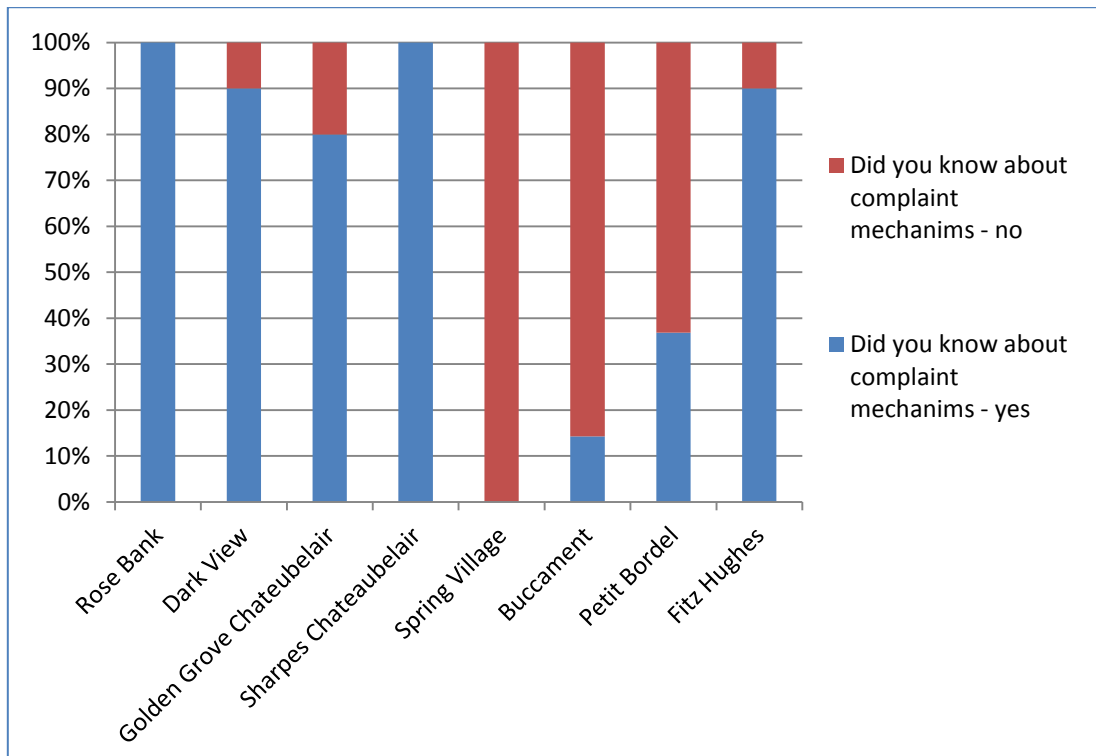
The beneficiary satisfaction surveys were planned to cover 280 families (20 per cent of overall beneficiaries target within this operation) but only 99 families were surveyed, reaching total of 392 people. Since it is a small sample size, the information from the survey can be used as indicative. Below is the information received from the beneficiaries for timing of relief items:



For accessibility of drinking water, most of the families informed having received enough drinking water. Only in Buccament, there seemed to have been a gap for some families in the distribution of water.



For the complaint mechanism during the operation, the beneficiaries answers showed mostly that the system is functioning, but gaps were identified in Buccament, Spring Village and Petit Bordel. In these communities, information boards came in March and there is no CDRTs at community level. This evidently caused information gaps for both needs changing by time (lack of water and long time for distribution of relief items) as well as not knowing how to get information to and from Red Cross.



The lessons-learned workshop was organized between 1 and 2 April, with the participation of National Society staff, volunteers, CDRT members and NITs. The participants highlighted the positive aspects of the implementation, as well as the ways the National Society can improve interventions in the future, especially in the areas of shelter management and communications.

Challenges

There was an initial delay of finding a supplier for the information boards in four communities and therefore the decision was made to purchase the materials so that the SVGCRS volunteers prepare the boards themselves. The fact that the number of boards increased (additional funds from Canadian Red Cross), combined with the fact that the volunteers didn't have much time available to craft the boards, resulted in further delays for the finalization of the boards. The beneficiary satisfaction survey was delayed until the end of the operation because of the unavailability of the volunteers in the final weeks of the operation.

Beneficiary satisfaction surveys were planned to take place two months after the start of the operation, but there were some challenges. Management of this survey was not planned properly, neither the plan to mobilize volunteers for this. In the final days of the operation, the project coordinator and one staff conducted 99 interviews in the field to be able to provide feedback data and managed to do in a short period of time.. In terms of communications, a need was felt for specific protocols to put in place and for strengthening the information sharing mechanisms between the field and the headquarters. Overall, the operation gap identified included insufficient feedback obtained from the beneficiaries.

Lessons learned

The information boards are a means of getting the Red Cross knowledge across into the communities in an expedite manner. The National Society realized the importance of maintaining the boards and updating them with relevant information.

As to the beneficiary satisfaction survey the recommendation that came through the lessons learned workshop was to be less formal and avoid saturating the distressed population with questions when other organizations may be doing the same. Moreover, the survey was stated to be carried out at the end of the operation, once the beneficiaries have passed the emergency phase. The survey still needs to be carried out in certain format to make the data statistically reliable, but recommendation would be thinking of timing needs of this survey as well as human resources needed to efficiently implement it within the timeline planned.

In terms of the damage and needs assessments carried out, having volunteers who knew the communities well and the fact that the population cooperated with the volunteers were seen as advantages which impacted positively in the operation. Some lessons learned from operations was the need to use trained volunteers for DANA as sometimes, ad hoc volunteers mentioned they were not acquainted with the form and methodology of the survey.

Health and care

Needs analysis: In addition to providing immediate first aid and psychosocial support to the affected population, there was a need of a dengue prevention and hygiene promotion to minimize the risk of secondary hazards in areas with saturated soil, mud pools and poor sanitation.

Population to be assisted: People assisted were in collaboration with the Ministry of Health, Wellness and the Environment from the worst-hit areas of Vermont Valley extending to Buccament Bay (Buccament Valley), Chateaubelair, Spring Village, Rose Bank on Leeward side, Sandy Bay and Rose Hall.

OBJECTIVES	INDICATORS											
Outcome 1 The immediate risks to the health of affected populations of 1,400 families are reduced.	# of dengue cases reported doesn't increase after the disaster											
Output 1.1 Provide immediate first aid care and community-based health to minimize risks due to disaster	# of people reached with First Aid care # of people reached by community-based health activities based on dengue outbreak records of the MoH											
Activities Week	1	2	3	4	5	6	7	8	9	10	11	12
1. Target population is provided with rapid medical management of injuries												
2. Community-based disease prevention and health promotion is provided to the target population in collaboration with MoH												
3. Epidemic prevention and control measures carried out by CDRT in collaboration with the MoH												

Farm Government, Bequia Seventh Day Adventist, Paradise, Mayreau government, Canouan government, Pelican Primary, Stephanie Browne, Mary Hutchinson and Mystique. Also, campaigns were made in six secondary schools and three schools in the Grenadines islands. 9 additional schools also received cleaning detergent and hygiene promotion in the Leeward and Windward side of the island.

The National Society also provided Community-Based Psychosocial and Psychological support in the Rillian Community Centre, from 17 to 30 January 2014 for 30 families, and in the Fitz Hughes at the Golden Grove Resource Centre between 4 to 20 February for 21 people. Support was provided in Prembroke for 10 people who were affected by the disaster. A woman who lost her daughter and granddaughter showed severe signs of post-traumatic stress disorder and was counseled weekly. The sessions included: regression exercises, role plays, self-expression of experience, stress management, peer support arrangements, and discussions with the grieving people who lost family members.

Children were provided with coloring pens, and activities were created for them. Participants stated that this support was needed for them to share their experiences. Moreover, radio programs were aired weekly on WE FM 99.9 during February and March, covering various topics: grief and loss, common reactions to stress, different types of stress, psychosocial support, crisis management, psychological first aid, supportive communication and children's reactions to physical abuse and violence.

Challenges

No challenges were identified.

Lessons learned

The collaboration with PIRAC for the campaign materials and the translation into English were of great help for the SVGRCS and the National Society plans to continue this collaboration for future operations.

Water, sanitation and hygiene promotion

Needs analysis: The water pipe system was not functioning in all areas for around one month and most of the affected communities relied heavily on water trucks and bottled water. There was a great need for safe water, water containers, hygiene kits, hygiene promotion materials (soaps and posters) and hygiene promotion campaigns.

Population to be assisted: 1,400 families in the areas of Vermont Valley extending to Buccament Bay (Buccament Valley), Chateaubelair, Spring Village, Rose Bank on Leeward side, Sandy Bay and Rose Hall.

OBJECTIVES	INDICATORS											
Outcome 1 Immediate reduction in risk of waterborne and water-related diseases in targeted communities.	# of cases of water-related diseases in affected areas reported by health authorities											
Output 1.1 1,400 families have access to safe water and hygiene which meets Sphere and WHO standards	# of people provided with safe water (according to WHO standards) # of households provided with a set of essential hygiene items # of people reached with hygiene promotion and awareness raising campaign											
Activities	1	2	3	4	5	6	7	8	9	10	11	12
Week												
1. Deployment of a water treatment plant and water trucking												
2. Distribution of bottled water in areas of difficult road access												
3. Hygiene promotion activities (training of volunteers and campaign) which meet Sphere standards in terms of the identification and use of hygiene items provided to target population.												
4. Distribution of hygiene kits, as well as jerry cans, aquatabs and buckets for water storage, detergents to clean affected houses and areas close to house.												
5. Replenish used 750 hygiene kits with purchase of												

Achievements

Approximately 85 per cent of the water pipeline system was restored at the beginning of January 2014 and water trucking by private companies (Lime, Mustique Island, NEMO etc.) was ongoing in the island. Some information showed that the quality of water could not always be ensured, therefore, the Red Cross targeted families with young children, elderly and disabled people with bottled water donated from private entities in the country, including the Barbados Red Cross, in the aftermath of disaster. The water distribution strategy with bottled water was further supported by 3 x 20 ft. containers of bottled water (3,461 cases of 24 x 0.5l bottles) provided by Coca Cola Company to the SVGRCS, which were distributed to families people in the clinics and pre-school children. Additional water was distributed to drought-affected Grenadines islands. The Martinique Council supported also with 773 cases (9 x 1ltr. bottles per case) for water distributions. When the water system was restored, there was still feedback coming from beneficiaries saying the water quality was not reliable all the time – there were still cut offs (because of CWSA maintenance) and the water would be brown and murky.. Therefore, the distribution of bottled water has been based on information coming from beneficiaries and the CWSA.

The distributed bottled water to pre-schools and health centres targeted the areas from Kingstown to Spring Village, as well as on the Windward side from Kingstown all the way to Fancy, to all health centres and the police stations (which are located in the same building). The police stations received five cases of water and all health centres and pre-schools received 10 cases of water. This was done to ensure safe water for the most vulnerable members of the communities—the elderly, children, the disabled, including people hospitalized. The bottles were able to cover the immediate needs of the targeted population while the pipelines were being repaired.

In an effort to reduce the impact of waste due to the distribution of bottled water, messages were sent to the communities to recycle the bottles received and the SVGRCS installed six containers in the affected communities to collect the empty bottles then they were sent to AIR (All Island Recycling) to be recycled. Additionally—and to further emphasize the importance of recycling in the newly targeted communities—the Government of Canada supported 24 additional recycling containers were installed complementary to the school and community campaigns.

The operation continued to provide water to the communities through water trucks because the water purification unit which arrived in the country at the end of January had a small broken valve and could only be used for trainings. A replacement part was ordered through the Americas Zone Global Logistics Service.

500 safe water and hygiene promotion/disease prevention posters each were printed and distributed under this DREF operation. Several additional areas (Fancy, Welcome, Greiggs, Fitz Hughes, Rose Hall, the Union Island and Bequia Island of the Grenadines) were reached with the new funds from the Canadian Red Cross and/or Government of Canada.



Campaign materials for hygiene promotion/disease prevention and safe water. SVGRCS.

A Water and Sanitation training was carried out between 18 and 21 February 2014 for 15 SVGRCS volunteers and 8 employees from CWSA with the new water purification unit AquaEW403D purchased under this DREF.. This training was organized with additional funding from the Canadian Red Cross. The training ensured the proper usage of the water purification unit, increasing the pool of volunteers able to assist in water distribution when requested by the CWSA. Three facilitators (two water and sanitation NITs and a RIT) supported this training which included a simulation in the field using the unit. The water and sanitation RIT deployed for this operation identified the need for an onion sedimentation tank that was covered with additional funds received outside this DREF, by the Government of Canada.



▲ WATSAN training with new purification unit under DREF funding with SVGRCS and CWSA trainees. SVGRCS.

The hygiene promotion trainings and campaigns were carried out in the affected communities and campaign materials were produced. The SVGRCS organized several Participatory Hygiene and Sanitation Transformation (PHAST) trainings between February and March:

Location of the training	Date	Participants
Kingstown	4 and 5 February	SVGRCS members
Kingstown	14 February	MoH, MoE
Greiggs	17 February	Greiggs CDRT members
Welcome	25 February	Welcome CDRT members
Bequia	1 March	SVGRCS members, MoE
Rose Bank	3 March	CDRT members from Rose Bank, Rose Hall, Fitz Hughes, Chateaubelair
Union Island	5 March	SVGRCS members, MoE
Owia	7 February	SVGRCS members, MoE

Training	Number of participants
Hygiene promotion workshop for stakeholders	16
Hygiene promotion workshop in Greggs	21
Hygiene promotion workshop in Welcome	16
Hygiene promotion workshop in Bequia	10
Hygiene promotion workshop in Rose Hall	13
Hygiene promotion workshop in Union Island	26
Hygiene promotion workshop in Owia	15
Hygiene promotion workshop for trainers	5
TOTAL	122

The Bequia and Union Island PHAST training and campaigns were funded under additional Canadian Red Cross funding. As part of the hygiene promotion activities, the SVGRCS distributed hygiene kits (please see below for the exact quantities).

Under this DREF and with support from the Government of Canada, a special campaign was carried out in 33 schools (16 schools under Government of Canada/CRC support and 17 schools under DREF). The students received anti-bacterial soap during the period between mid-February and the end of March and the schools received multi-purpose cleaners. Chikungunya, dengue and bacterial infection prevention messages were disseminated in the communities and schools.

Challenges

The water purification unit was damaged when it arrived in St. Vincent, so the initial plan of providing clean water for the communities had to be modified. The water distribution did not start very smoothly because of security issues linked to a slight delay in the assistance to the communities.

Lessons learned

Feedback from volunteers highlighted the need to strengthen support during distributions, improve or change the distribution method and plan simulation exercises. Volunteers were further gaining training on this during NIT course under additional funding but these type of capacity building activities should be done annually in National Society.

Shelter and settlements (and household items)

OBJECTIVES		INDICATORS											
Outcome 1 237 families living in collective centres are reached with essential items.		# of households reach with essential food and non-food items # of households provided means to return to their standard of living											
Output 1.1 Provide food and non-food items to 500 people in collective centres and other shelter solutions		# of families reached with clothing and blankets # of families reached with food parcels											
Activities Week		1	2	3	4	5	6	7	8	9	10	11	12
1. Support shelters established by NEMO with non-food items (clothing and blankets).													
2. Provision of a three-day food supply for at least 100 vulnerable families													
Output 1.2 Provide food parcels to 100 most vulnerable families													
Activities Week		1	2	3	4	5	6	7	8	9	10	11	12
1. Provision of three-day food portions for most vulnerable families													

Achievements

From 25 December onward, the SVGRCS distributed non-food and food items to the households in most need. The people that received items during the first days of the response were people in shelters, people who lost their houses or communities with no road access. For the people who had no place to live, the government provided shelter, NEMO provided the food in the shelter, and the SVGRCS provided other non-food items such as blankets, jerry cans, hygiene kits, PSP comfort kits and other non-food items. The total number of distributed food parcels is greater than the amount purchased as the SVGRCS received food donations from private companies and people (see the distributions table below). The 100 food parcels that were replenished with DREF support, were distributed directly after disaster in the Chateaubelair area.

The National Society distributed all the items under the DREF and additional items from private donations, based on needs and selection criteria under the DREF operation. The aquatab distribution was linked with sensitization information as to ensure the correct use them. The table below shows all distributions:

Community	Hygiene kits	Buckets	Jerry cans	Hygiene kit	Aquatabs	Blankets	Cleaning Kits	Mattress	PSP comfort kit	Food parcels	Clothes (bags)	Baby wipes (boxes)	Shelter toolkit	Bottled water	Mosquito Nets	School Supplies
Union Island				10										1,145	150	
North Leeward Spring Village to Fitz Hughes	312	157	635		1,200	326	52	11	60	294			5	1,440	300	
Windward	100		300		302					219	30	25		729		

S. Rivers Fancy, Owia							8								150	
Vermont/Buccament	111	42	27	80		165	53			102				470	150	55
Central Kingstown	48														100	
Campden Park	2														2	
Rose Place	25														35	
North Leeward School							50									
Windward School							9									
Grenadines				5 Prom o			5									
EdinBoro															6	
Anos Vale														50		
Kingstown			200		200		18			4				360		
Mesopotamia										5				40		
Pre-Schools Kingstown			600		200		35									
NEMO with the Red Cross										300						
Total	598	199	1,762	95	1,902	491	230	11	60	924	30	25	5	4,234	893	55

Less buckets (199) and jerry cans (1,762) is shown distributed above table then was replenished (250 and 2,000 respectively) under DREF. This was caused by donations received covered some of items planned under distribution for DREF that are not included to the table.

On 3 April, 118 people remained in shelters causing a delay in the distribution of the 55 kitchen sets planned to be distributed to the families under this operation. The kitchen sets were agreed to be distributed on January 2014 in a meeting between NEMO and the SVGRCS (meeting chaired by Cabinet Secretary) to be distributed to families that lost their belongings and homes. The distribution will be done after the completion of home reconstruction done by the Government.

Challenges

Although the Ministry of Education is the authority in charge on shelter in the country, the SVGRCS was called upon to assist with the additional needs of the population in the shelters. It was, however, evident that the lack of proper shelter management affected the operation, creating a difficult environment to live in and work with. Furthermore, private donors made unannounced distributions in the shelters, causing additional problems.

Lessons learned

The National Society needs to push for more involvement in shelter management in order to capitalize on its knowledge and human resources. Shelter simulations need to be run in the communities and more people need to be trained in shelter management. Moreover, it is necessary to ensure that all the shelters are well-equipped and that the communication lines are well-established.

National Society capacity building

Under the DREF, no courses were planned, following the DREF guidelines. With additional funds from the Canadian Red Cross, the National Society was able to carry out a National Intervention Team (NIT) training between 13 to 16 March (during the public holiday period that did not impact the overall response operations). 18 SVGRCS were trained as NITs by a NIT trainer of the Guyana Red Cross. The training included: damage and needs assessment (DANA) forms and practical training using the mobile application ODK, beneficiary selection, registration and distributions (using MegaV), Red Cross and Red Crescent information, the Sphere standards, the Fundamental Principles, the Code of Conduct, introduction to Safer Access, basic logistics, psychosocial support and health. A “learning by doing” delivery method of the training was used to support the different learning styles through highly interactive sessions.

Financial report

Please see preliminary final financial report attached.

Contact information

For further information specifically related to this operation please contact:

IFRC Regional Representation: Lorraine Mangwiro, Regional Representative for English speaking Caribbean, Port of Spain, Trinidad, phone: +1 868 628 7289; email: lorraine.mangwiro@ifrc.org

IFRC Zone: Benoit Porte, disaster response and crisis and early recovery coordinator; phone: +507 317 3050; email: benoit.porte@ifrc.org

In Geneva: Cristina Estrada, quality assurance senior officer, phone: +41.22.730.4529, email: cristina.estrada@ifrc.org

For Performance and Accountability

(planning, monitoring, evaluation and reporting enquiries):

In IFRC Zone: Priscila Gonzalez, planning and monitoring senior officer, phone: +507 317 3050, email: priscila.gonzalez@ifrc.org



Click here

1. Revised Emergency Appeal budget *(if needed)* [below](#)
2. Click [here](#) to return to the title page

How we work

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

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

www.ifrc.org

Saving lives, changing minds.



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

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