Nepal Red Cross volunteers are providing support to the affected population as well as conducting assessment to understand the need and provide support through the appeal. *(Photo: NRCS)*

<table>
<thead>
<tr>
<th><strong>Appeal №:</strong></th>
<th><strong>To be assisted:</strong></th>
<th><strong>Appeal launched:</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>MDRNP016</td>
<td>50,000 people</td>
<td>07/11/2023</td>
</tr>
<tr>
<td><strong>Glide №:</strong></td>
<td><strong>DREF allocated:</strong></td>
<td><strong>Disaster Categorisation:</strong></td>
</tr>
<tr>
<td>EQ-2023-000214-NPL</td>
<td>CHF 794,627</td>
<td>ORANGE</td>
</tr>
<tr>
<td><strong>Operation start date:</strong></td>
<td><strong>Operation end date:</strong></td>
<td></td>
</tr>
<tr>
<td>04/11/2023</td>
<td>31/12/2024</td>
<td></td>
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</tbody>
</table>

**IFRC Secretariat Funding requirement:** CHF 5 million  
**Federation-wide funding requirement:** CHF 7\(^1\) million

\(^1\) The Federation-wide funding requirement encompasses all financial support to be directed to the Nepal Red Cross Society in response to the emergency. It includes the Nepal Red Cross Society’s domestic fundraising requests and the fundraising appeals of supporting Red Cross and Red Crescent National Societies (CHF 2 million), as well as the funding requirements of the IFRC secretariat (CHF 5 million). This comprehensive approach ensures that all available resources are mobilized to address the urgent humanitarian needs of the affected communities.
3 November 2023: a 6.4 magnitude earthquake struck in the Jajarkot and Rukum Districts of Karnali Province in Nepal in the middle of the night causing widespread damage.

4 November 2023: NRCS HQs deployed three Emergency Response Team (ERT) members in each most affected districts (Jajarkot and Rukum West), dispatched emergency items from its prepositioned stocks and transferred initial cash allocation to affected district chapters in support of volunteer mobilization and other early actions.

5 November 2023: CHF 794,627 allocated from the IFRC’s Disaster Response Emergency Fund (DREF); subsequently Emergency Appeal was launched on 7 November for CHF 5 million with Federation Wide funding requirement CHF 7 Million

6 November 2023: by this date, more than 300 aftershocks recorded in the area, including another strong earthquake with 5.6 magnitude.

6 November 2023: Surge Information Management Support (SIMS) and Surge alert for Operations Manager activated. Operations Coordinator deployed on 9 November to provide support to Country Delegation

12 November 2023: To date, 13,150 people reached through relief items distribution.
Prior to the devastating earthquake in Nepal, the affected regions already faced significant challenges that have exacerbated the humanitarian impact of the crisis. Chronic issues such as poverty, malnutrition, and a high health risk profile due to limited medical infrastructure and services have heightened the vulnerability of these communities. These pre-existing conditions mean that the earthquake’s impact is more severe, as many people already have numerous challenges to face in their daily lives.

**Severity of humanitarian conditions**

A magnitude of 6.4 earthquake hit the western part of Nepal on 3 November 2023 at around 11:47 pm. The epicenter was in Jajarkot district in Karnali Province, a mountainous area of the country known for its low socio-economic development indicators. The earthquake and its more than 300 aftershocks in the following days triggered a few landslides, affecting transportation and access to remote communities.

The catastrophic disaster caused losses and damage to both people and infrastructures. Given the remoteness of the affected areas, understanding the full extent of the damage is gradually unfolding.

According to the Government’s National Emergency Operation Centre (NEOC), as of 12 December 2023, approximately 62,039 households (approx. 300,000 people) were affected (with homes either completely or partially damaged) by the earthquake in 13 districts of Karnali, Sudur Paschim, and Lumbini provinces.

Having lost their homes, the affected people are enduring the harsh realities of living in open spaces. This exposure is particularly harrowing at night, with plummeting temperatures posing a significant threat to the most vulnerable groups, including children, pregnant and lactating women, and the elderly. These groups are disproportionately affected, struggling not only with the trauma and uncertainty in the quake’s aftermath but also battling severe cold, elevating the urgency of the humanitarian crisis.

These affected areas are also known for large movements of seasonal migration, where the majority of male workers, migrate for economic opportunities, leaving behind the elderly, children and women. While this migration can bring economic opportunities through remittances brought to the communities (especially in the festival season in October-November), this will also be a key factor of vulnerability as communities recover from the trauma of the disaster and gradually rebuild their lives.
1. National Society response capacity

1.1 National Society capacity and ongoing response

Nepal Red Cross Society (NRCS) was established in 1963. It was recognized by the International Committee of the Red Cross (ICRC) in 1964 and affiliated with the International Federation of the Red Cross and Red Crescent Societies (IFRC) in the same year. Currently, the National Society has 392 paid staff members, and more than 146,524 volunteers are active in providing humanitarian support in the country through NRCS. Among these 23,284 are youth volunteers between the age group of 18 to 39 years of age.

Similarly, 20,572 volunteers are aged between 13 to 17, mostly member volunteers from the Junior youth and Red Cross Circle, contributing to the humanitarian causes in Nepal. NRCS provides services such as first aid, blood transfusion service, ambulance and other emergency and non-emergency services through its 77 District Chapters and more than 1,500 sub-chapters. NRCS is working as an auxiliary to the government while providing emergency and non-emergency services such as Epidemic, pandemic Response, flood and landslide response and others with support from the IFRC and its member network.

In the aftermath of the earthquake, NRCS immediately mobilized branch personnel and resources to each most affected district. NRCS conducted distributions of relief items and conducted an Initial Rapid Assessment (IRA) of the affected areas.

Currently, NRCS is implementing its eighth development plan, which sets out the direction for setting the NRCS as one of the largest and leading humanitarian organizations in Nepal. The 8th Development Plan focuses for a large part on disaster management as well as resilience building of communities, in particular those affected by disasters and crisis, leveraging the existing technical capacities across all sectors proposed in this plan.

Also, the National Society is being guided by its Consolidated National Society Development Plan, an effort to guide NRCS work in the areas of National Society Development in the upcoming years. In 2021, NRCS reached 2,314,807 people through disaster response and early recovery services and 787,390 people were reached with long-term services and development programme. For further data, please refer to FDRS (ifrc.org) 2021.
1.2 Capacity and response at national level

The Government of Nepal is leading the response through its Ministry of Home Affairs (national level), Karnali Provincial Disaster Management (DM) Committee and respective Disaster and Municipality DM Committees. Under the 2017 Act, the NRCS is a member of such committees and as such is coordinating its response as auxiliary to public authorities. This includes being a key stakeholder of the “one-door policy” set-up by authorities to ensure coordinated efforts among humanitarian actors, where NRCS is a key contributor in terms of relief items contributions.

These responses are designed to complement the government efforts outlined in the response plan, including supporting the distribution and recovery of the affected communities. In addition, the Government has entrusted the National Society with the Initial Rapid Assessment (IRA) in all affected areas, mostly completed within 72 hours and shared with all partners through the Humanitarian Country Team (HCT).

Since 21 November 2023, NRCS has been leading the detailed assessments across most affected communities in close coordination with local authorities. Furthermore, the NRCS is in discussion with the Government on ways to integrate its response with the wider plans of the Government, particularly on temporary shelter, health, WASH and the mobilization of volunteers to support of government efforts (risk communication, community engagement and accountability, etc.).

While the Government of Nepal has not requested international assistance, it welcomes contributions from local, national and international partners. The private sector in Nepal and civil society organizations are highly active, and the people of Nepal (including the Nepali diaspora) have been donating funds and items, including through the local unit of NRCS in many cases.

2. International capacity and response

2.1 Red Cross Red Crescent Movement capacity and response

IFRC membership

The IFRC Country Delegation has been supporting the NRCS in formulating the overall response strategy whereby all in-country IFRC members were invited to contribute. The IFRC is also coordinating with members present in the country. Similarly, the IFRC Country Delegation is sharing information with other members who are not present in Nepal. The IFRC will ensure Federation-wide reporting for the emergency response, demonstrating the collective support of the IFRC membership in providing humanitarian assistance to the affected populations.

The IFRC/British Red Cross and IFRC/Swiss Red Cross teams in Nepal have been supporting a large community health project in the province, which includes some local capacity building on disaster response. This effort has shown tangible results in the initial stage of the response, with trained volunteers taking early actions in the middle of the night. The Danish Red Cross has pledged initial support to the operation and all in-country partners are participating in regular coordination meetings chaired by the NRCS. A Partners Call was held on 7 November 2023 with several IFRC members initiating resource mobilization efforts in support of the operation, following a coordinated IFRC-wide approach based on what was learned from previous similar operations.
ICRC

ICRC has a small country presence in Nepal and information-sharing is ensured on regular basis among Movement partners. A meeting was held on 9 November 2023 to update each other on the situation. At this stage, ICRC is not contributing to the response.

2.2 International Humanitarian Stakeholder capacity and response

The Humanitarian Country Team (HCT) mechanism has been active, coordinating with various clusters since day one. UN agencies are supporting cluster leads (line ministries) in the response, utilizing using in-country capacities, including for example the Humanitarian Staging areas managed by the Government of Nepal and WFP. Other active UN agencies include UNICEF, UNFPA, IOM, WHO and UNDP. The Association of International NGOs (AIN) is also supporting the response and the START Network activated its funding of 200,000 GBP on 6 November. Nepal Red Cross/IFRC are co-leading the Nepal Shelter Cluster.

In terms of donor support, the Governments of India and China dispatched relief items to the country, while the EU/ECHO and USAID/BHA undertook a field assessment of the affected areas.

3. Gaps in the response

The initial report from affected districts shows that the immediate needs primarily involve emergency shelter support integrated with emergency-WASH support (toilet and water storage tanks) and health support, such as Mental Health and Psychosocial Support (MHPSS) and pre-hospital care. In the long run, recovery efforts will be required to restore the lives of people to pre-earthquake situations, taking into consideration earthquake resistance as well as inclusion.

Due to the earthquake and continuous aftershocks impacting their houses, affected families are living in makeshift tents or in the open. With the onset of winter season and dropping temperature, this situation adds further challenge for displaced families. Considering this, there is an urgent need to provide safe and inclusive emergency shelter support through tarpaulins, blankets and mattresses. In addition, warm clothing and other winterization support are needed, potentially covered by cash grants as the market remains functional (as per initial assessments).

While the rescue operation led by the security forces has concluded, there may still be healthcare needs, including first aid and ambulance service, in case of significant aftershocks resulting in injuries. In addition, people (including children) are living in fearful situations, where urgent psychosocial support is needed. At the same time, the continuation of health services will be hampered by the fact that at least 36 health centres have been damaged (health cluster data) so temporary community health services will be critically needed in the coming weeks and months.

Currently, there is limited data on WASH-specific damage. However, the earthquake and aftershocks may have damaged water schemes, requiring rehabilitation and reconstruction. In the absence of drinkable water sources, the displaced people residing in temporary shelters might use contaminated water sources, leading to the spread of waterborne diseases. The lack of proper sanitation facilities, likely damaged irreparably, exacerbates this issue.

The displaced population is residing in temporary shelters in close proximity, increasing the risk of sexual and gender-based violence (SGBV). Urgent measures are needed to provide psychosocial support (PSS) and raise awareness on violence prevention, including SGBV. Promoting referral pathways, among the affected population, especially for women and children is also crucial for such circumstances. Similarly, since a large number of households have been displaced and affected, with human casualties, special care and attention towards children, pregnant and lactating mothers, people with disability and those with chronic illnesses as well as the elderly and other vulnerable groups will be required.
OPERATIONAL CONSTRAINTS

The geographical remoteness of the affected districts remains one of the constraints for the overall operation. Due to the remoteness of these areas, it will be very costly to transfer all the relief items and other supplies. For this reason, the IFRC will consider adopting cash-based modalities, drawing from the learning from the Doti Earthquake 2022-23 response. In this approach, community members will receive initial orientation and guidance from NRCS volunteers on ways to build their temporary shelter (and attached toilet/hand-washing station), enabling them to buy the required materials from nearby functional markets.

In the aftermath of the recent earthquake in Jajarkot, Khalanga’s market remains relatively stable and operational. The majority of shops are open and continue to offer regular items for purchase. Fortunately, there is no evidence of price hikes or black marketing, indicating a fair and ethical market environment. For other components requiring transportation, NRCS will coordinate with other humanitarian stakeholders, security forces and the private sector and mobilize local volunteers and community members.

Another significant challenge for the operation will be managing a large number of staff and volunteers in remote areas with limited pre-existing local capacities of the NRCS. It is essential to note that the NRCS is also responding to the previous earthquake (3 October 2023) affecting the neighboring districts of Bajhang and Bajura (refer to IFRC-DREF operation MDRNP015).

The Emergency Operations Centre (EOC) of the NRCS will continue to serve as the information and management hub for both responses, which will be complemented by technical support (surge) from IFRC and its membership. At the provincial and district levels, significant resources will need to be allocated to ensure timely, relevant and fully accountable response, also ensuring proper coordination with the authorities and other humanitarian actors.

FEDERATION-WIDE APPROACH

The Emergency Appeal is part of a Federation-wide approach, based on the response priorities of the Operating National Society and in consultation with all Federation members contributing to the response. The approach, reflected in this Operational Strategy, will ensure linkages between all response activities (including bilateral activities and activities funded domestically) and will assist in leveraging the capacities of all members of the IFRC network in the country, to maximize the collective humanitarian impact.

The Federation-wide funding requirement for this Emergency Appeal comprises all support and funding to be channeled to the Operating National Society in response to the emergency event. This includes the operating National Society's domestic fundraising ask, the fundraising ask of supporting Red Cross and Red Crescent National Societies, and the funding ask of the IFRC secretariat.

NRCS and the IFRC Country Delegation have a strong history of planning and implementing unified humanitarian response operations dating back from the 2015 earthquake response operation (the largest ever of the NRCS), followed by the COVID-19 operation, the monsoon responses in 2020, 2021 and 2022, as well as two dengue prevention and response operations in 2022 and 2023.

From the onset of this operation, in-country partners united in support of the NRCS. After the IFRC appeal was launched, all in-country partners worked together with NRCS and IFRC teams to formulate this operational strategy, identifying key needs, and priority areas and agreeing on common targets as part of a unified planning process. Partners are also currently planning a joint field mission in each district focusing on security, programme support and IFRC-wide communications in support of resource mobilization.
OPERATIONAL STRATEGY

Vision

The primary goal of the NRCS response operation is to meet the urgent needs of around **10,000 families (50,000 people)** impacted by the earthquake, particularly in the hardest-hit districts of Rukum West, Salyan and Jajarkot. This response also remains flexible to extend aid to neighbouring districts if additional needs arise, while ensuring that additional considerations integrated in the response. In the **immediate phase**, the key areas of focus under the Emergency Appeal include:

- **Emergency Shelter**: Providing emergency shelter support to those whose homes have been damaged or destroyed.
- **Multi-Purpose Cash Assistance**: Offering financial support to allow affected families to meet their diverse and immediate needs.
- **Transitional Shelter**: Assisting in the provision of temporary housing solutions for those displaced or in need of shelter.
- **Water, Sanitation, and Hygiene (WASH)**: Ensuring access to clean water, adequate sanitation facilities, and promoting hygiene practices.
- **Health Promotion**: Focusing on health awareness to prevent the spread of diseases and to promote overall well-being.
- **Risk Communication and Community Engagement**: Keeping communities informed about risks and involved in the decision-making process for their recovery.
- **Protection Interventions**: Addressing the safety, access and rights of vulnerable populations, including women, children, the elderly, and those with disabilities.

Beyond the short-term relief efforts, this operational strategy will also support the longer-term recovery and resilience of the affected communities. Furthermore, the approach also integrates elements of preparedness for effective response, building stronger NRCS at the local, provincial and national levels for sustainable humanitarian action, in line with the localization agenda. Needs remaining at the end of the emergency operation and early recovery response (31 December 2024) will be covered through the strategic priorities of the 2025 IFRC country plan.

Transition To the Country Plan

After 31 December 2024, significant response activities to this disaster, if any, will continue under the IFRC Nepal Country Plan for 2025. The IFRC and in-country IFRC members will support the NRCS to develop a unified country plan prior to the end of the Emergency Appeal, to ensure a smooth transition to a long-term strategy. The IFRC Network Country Plan will provide an integrated view of ongoing emergency response(s) and longer-term programming tailored to the needs NRCS are prioritising and addressing in country, as well as a Federation-wide view of the country's action. This aims to streamline activities under one plan, while still ensuring that the needs of those affected by the disaster are met in an accountable and transparent way. This will be communicated clearly to relevant stakeholders including the donors.

Anticipated climate related risks and adjustments in operation

The winter season has already started in Nepal. In hilly districts like Jajarkot, Rukum West, the winter is harsh with very minimum rainfall. The minimum temperature can drop below zero. In this situation, people with chronic illness and children could be the worst hit as the risk of hypothermia persists. There is unofficial news that two people affected by the Earthquake who were living out in the open in Jajarkot Districts have lost their lives due to cold-related complications. There is a high chance that more and more people will be impacted by the winter. NRCS is coordinating with the local authorities to distribute emergency shelter items to the affected families and to build an inclusive transitional shelter until they build permanent houses.

In addition to this, every year, Nepal witness monsoon rains between June to September when heavy rainfall is recorded resulting in floods and landslides in many parts of the country including districts impacted by the earthquake. According to the research study of [Durham University](https://www.dur.ac.uk/) the 2015 earthquake triggered landslides
during the monsoon season of the following years and the same can be expected in affected areas during the upcoming monsoons. NRCS will prepare a monsoon preparedness plan together with the authorities at all levels so that NRCS is ready to support those most at risk.

**Targeting**

1. **People to be assisted**

This operation aims to reach out to an estimated number of 10,000 families each family consists of an estimated 5 based on the general population demographics of the area, reflecting the slightly higher percentage of women compared to men. This demographic data is crucial for tailoring the humanitarian response to meet the specific needs of different groups effectively, ensuring that both women and men receive appropriate aid and support. Based on the data, 51 per cent are women and 49 per cent are men. In actual numbers estimated 25,500 women and 24,500 men.

Specific targeting and selection criteria will apply for different activities. The selection criteria for the targeted population are:

- Families whose houses are fully and partially damaged by earthquake.
- Households headed by children below 18 years and elderly above 65 years of age.
- Households headed by women and single women.
- Death of an earning member of the family due to earthquake.
- Households comprising of pregnant and lactating women.
- Household with members with disability or living with chronic illness.
- Persons with SGBV risk and SGBV survivors and community people from low income who have been displaced due to the disaster.
- Migrant/stateless people who are not able to access other support due to legal or social issues.

2. **Considerations for protection, gender and inclusion and community engagement and accountability**

The integration of Protection, Gender, and Inclusion (PGI) considerations into all sectors of the operation is essential for ensuring a holistic and effective response to the crisis. The approach outlined for the Nepal Red Cross Society (NRCS) operation includes several key elements:

1. **Awareness Against Sexual and Gender-Based Violence (SGBV):**
   - Prioritizing the dissemination of messages to raise awareness against SGBV and violence against women, children, and other vulnerable groups. This involves creating and spreading information that educates and informs communities about the risks, prevention, and support available for SGBV.

2. **Ensuring the IFRC Dignity, Access, Participation, and Safety (DAPS) Framework are followed:**
   - Implementing the DAPS framework across all operation sectors. This framework emphasizes:
     - Dignity: Treating all individuals with respect and ensuring their rights are upheld.
     - Access: Guaranteeing equitable access to services and assistance for all, regardless of gender, age, or other factors.
     - Participation: Involving affected communities, especially marginalized groups, in the planning and implementation of activities.
     - Safety: Ensuring the safety of beneficiaries and staff in all aspects of the operation.

3. **Establishment of Feedback Mechanisms:**
   - Setting up feedback mechanisms in districts to listen to people for quality programming. This involves:
     - Mobilizing volunteers to engage with community members, gather feedback, and respond appropriately with support from the Community Engagement and Accountability (CEA) team at headquarters.
- Creating a two-way communication channel between community members and the NRCS to foster a trusting environment. This allows communities to contribute to the planning of activities and report any issues they face during the operation.

4. Mobilization of Volunteers for Health and Hygiene Promotion:
   • Volunteers will not only conduct health and hygiene promotion activities and information dissemination but also engage in risk communication initiatives. During these activities, they will collect feedback from the community, ensuring that the response remains adaptive and responsive to the community’s evolving needs.

By incorporating these PGI considerations, the NRCS operation aims to deliver a response that is inclusive, sensitive to gender and protection issues, and tailored to the specific needs of different community groups. This approach ensures that the most vulnerable are not only protected but also actively involved in the response, leading to more effective and sustainable outcomes.

**PLANNED OPERATIONS**

**INTEGRATED ASSISTANCE**

<table>
<thead>
<tr>
<th>Shelter, Housing and Settlements</th>
<th>Female &gt; 18: <strong>25,500</strong></th>
<th>Female &lt; 18: <strong>n/a</strong></th>
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<tbody>
<tr>
<td>Male &gt; 18: <strong>24,500</strong></td>
<td>Male &lt; 18: <strong>n/a</strong></td>
<td>Total target: <strong>50,000 people</strong></td>
<td></td>
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<tr>
<td><strong>Objective:</strong></td>
<td><strong>Communities in disaster- and crisis-affected areas restore and strengthen their safety, well-being and longer-term recovery through shelter and settlement solutions.</strong></td>
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</tr>
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</table>

**Emergency phase**

- Procurement, distribution and monitoring of essential household items (blankets, mattresses, tarpaulins, and ropes) tailored to specific needs of target groups while considering the winter conditions.
- Construction of transitional shelters for most at-risk affected people through cash-based modality, following GoN guidance and SPHERE standards (also integrating toilet, hand-washing station and water tank) while mainstreaming Protection, Gender & Inclusion elements. Shelters design will include winter insulation and accessibility/safety features as per needs.

**Recovery phase**

- Dissemination of safe sheltering messaging through volunteers to support “build back better” strategies complimented with PASSA workshops.
- Contribution to the Government permanent housing programme (reconstruction) as part of longer recovery efforts.

<table>
<thead>
<tr>
<th>Livelihoods</th>
<th>Female &gt; 18: <strong>5,100</strong></th>
<th>Female &lt; 18: <strong>n/a</strong></th>
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<td>Male &lt; 18: <strong>n/a</strong></td>
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</table>

The targets in below sections are IFRC Wide targets while the Funding Ask corresponds to for the Secretariat Funding Requirement (See last page for the overall Secretariat Budget)
### Objective:

To address the long-term recovery needs of the earthquake affected population

**Priority Actions:**

- Skills training focusing on trades and small business venture, such as plumbing, soap making, tailoring, mobile repairing, electrician, small business based on livelihood activities in the affected areas.
- Conditional cash grants for business start-up support

<table>
<thead>
<tr>
<th>Multi-purpose Cash</th>
<th>Female &gt; 18: 25,500</th>
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<td></td>
<td>Male &gt; 18: 24,500</td>
<td>Male &lt; 18: n/A</td>
<td>Total target: 50,000 people</td>
</tr>
</tbody>
</table>

### Objective:

To address the immediate basic needs and of targeted vulnerable households through the provision of multipurpose cash grants.

**Priority Actions:**

- Coordination with national and local authorities as well as the cash working group on the cash modalities to be applied based on a common understanding of the market situation.
- Distribution of unconditional Multi-Purpose Cash Grant (MPCG) to cover the emergency needs of affected populations across sectors for one month. The value of the grants is based on the Minimum Expenditure Basket (MEB) for one month as agreed by the inter-agency cash working group at country level.
- An additional allocation covering the needs for a second month will be considered as well for most at-risk families (also contributing to the protection sector).

### HEALTH & CARE INCLUDING WATER, SANITATION AND HYGIENE (WASH)

**HEALTH & CARE INCLUDING WATER, SANITATION AND HYGIENE (WASH)**

**(MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT / COMMUNITY HEALTH)**

<table>
<thead>
<tr>
<th>Health &amp; Care (Mental Health and psychosocial support / Community Health / Medical Services)</th>
<th>Female &gt; 18: 25,500</th>
<th>Female &lt; 18: n/a</th>
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</table>

### Objective:

Reduce immediate morbidity and mortality* and prepare for, prevent, and rapidly contain emerging health risks**

* this involves providing immediate first aid, basic medical care and support to those who are injured or ill as a result of the earthquake, aiming to save lives and reduce the severity of injuries and illnesses

** this includes anticipating potential health crises that could arise from the earthquake, such as outbreaks of communicable diseases due to poor living conditions or lack of clean water and implementing measures to prevent and quickly address these risks

### Emergency Phase

- Deployment of First Aid Responders (FAR) and ambulances to provide pre-hospital care in the initial days after the earthquake and its aftershocks.
- Mental Health and psychosocial support including Psychological First Aid (PFA) through volunteer-based psychosocial education, developing support groups and identifying coping strategies with communities.
• Implementation of community health activity based through volunteers and in partnership with local health workers.
• Mobilization of the RC Emergency Clinic in coordination with health authorities

Recovery Phase
• Health post construction/rehabilitation support, selected equipment support based on assessment and capacity building on trauma management.
• Continuation of implementation of community health activity based through volunteers and in partnership with local health workers.

<table>
<thead>
<tr>
<th>Water, Sanitation and Hygiene</th>
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<td>Male &lt; 18: n/a</td>
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<td></td>
</tr>
</tbody>
</table>

Objective:
Ensuring the provision of safe water, adequate sanitation, and promote effective hygiene practices among the earthquake-affected populations in the targeted communities, thereby reducing the risk of waterborne diseases and improving overall health outcomes.

Priority Actions:
Emergency Phase
• Promotion of good hygiene practices through the mobilization of volunteers
• Distribution of hygiene kits to affected populations.
• Toilet construction and Water storage management at household level (integrated with the temporary shelter construction)

Recovery Phase
• Enhance Sanitation Facilities through toilet construction in communities and schools, applying inclusive and child-friendly approaches (integrated with the temporary shelter construction)
• Rehabilitation of water schemes as per identified needs and in collaboration with local authorities

PROTECTION AND PREVENTION
(PROTECTION, GENDER, AND INCLUSION (PGI), COMMUNITY ENGAGEMENT AND ACCOUNTABILITY (CEA), MIGRATION, RISK REDUCTION, CLIMATE ADAPTATION AND RECOVERY, ENVIRONMENTAL SUSTAINABILITY, EDUCATION)

<table>
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<td>Male &lt; 18: n/a</td>
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</tr>
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</table>

Objective:
Ensuring protection and safety through strengthening existing protection capacity of the affected community and ensuring all facilities, goods and services are dignified and safe to access for all backgrounds.

Priority Actions:
• Distribution of dignity kits to women and adolescent girls
• Distribution of assistive devices, including hearing aid, urinary catheter, wheelchair, half crutches and full crutches, glasses, etc. as per need in partnership with specialized organization
• Support to protection related referral services identified in close cooperation with the existing social services.
• Community messaging and violence prevention campaign on SGBV and violence against children
• PSEA messaging as well as messaging on misconduct and related reporting to all distributions.
• Establishment of child friendly spaces in collaboration with education facilities.
• Mainstreaming of PGI considerations in the operation through the DAPS framework, including through orientations,
• Set relevant safeguarding mechanisms to ensure do-no-harm, including child safeguarding risk assessment and all staff and volunteers (to be trained at and) signing of code of conduct.

<table>
<thead>
<tr>
<th>Community Engagement and Accountability</th>
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</tbody>
</table>

**Objective:**
To integrate CEA comprehensively into the response efforts, ensuring that the needs, priorities, and context of the affected communities are thoroughly understood and addressed in a collaborative and participatory manner.

**Priority Actions:**
- Establishment of feedback mechanisms in all areas covered by the operation, also using the existing systems of the NRCS (hotline, radio, social media channels, etc.)
- Implementation of risk communication and community engagement initiatives at scale (across all sectors of intervention)
- Production and dissemination of IEC materials through various channels (social media, radio, mass meetings, door-to-door visits, etc.)

**Enabling approaches**

<table>
<thead>
<tr>
<th>National Society Strengthening</th>
<th>CHF 470,000</th>
</tr>
</thead>
</table>

**Objective:**
Contribute to strengthening NRCS at district local chapters and NHQ level while improving service delivery at community level

**Priority Actions:**
- Orientation on Red Cross Red Crescent principles as well as IFRC/NRCS policies and tools to new volunteers and staff mobilized by the operation.
- Support to Preparedness for Effective Response efforts at the three levels of the organization (affected districts, Karnali province and national level), focusing on key known areas such as logistics, information management, volunteer management, domestic resource mobilization and communications as well as compliances (finance, HR management, PMER, audit, etc.).
- Rehabilitation/reconstruction of district local chapters office and warehouses. Prepositioning of relief items in local warehouses in preparation for future crisis.
- Support to NRCS flagship programmes (pre-hospital care and blood transfusion services)

## Coordination and Partnerships

**Objective:**

*Strengthening coordination within the IFRC membership and within the Movement to bring technical and operational complementarity and enhancing cooperation with external partners.*

**Priority Actions:**

**Movement Coordination:**
- Regular information sharing among the component of the Movement about humanitarian needs and ongoing response efforts.

**Membership Coordination**
- Promotion of the IFRC-wide approach of the operation through joint assessment of needs, unified planning process as well as common M&E framework.
- Establishment of one response structure for the operation with NRCS at the center and support from IFRC/members to fill the gap (also considering surge capacities in case existing national resources across the network are not sufficient)
- Joint visibility and humanitarian diplomacy as part of the operation.

**Engagement with external partners**
- Leverage the unique positioning of NRCS in the national response system, with close collaborations at all levels and across sectors.
- Regular engagement in the HCT mechanism and coordination platforms. NRCS (along with IFRC) is the co-lead of the Nepal Shelter Cluster and is a key contributor to many other clusters and IFRC ensures the representation of the collective footprint in strategic meetings (alongside NRCS leadership as relevant).
- Continued engagement with the diplomatic community and the development partners, based on the IFRC Status Agreement in the country.

## Shelter Cluster Coordination

**Objective:**

*Supporting a comprehensive, quality, coherent and consistent Shelter and Settlements response.*

**Priority Actions:**

- In its capacity as the Nepal Shelter Cluster co-lead NRCS/IFRC to ensure ongoing support to the shelter cluster lead (Department of Urban Development and Building Codes under the Ministry of Urban Development), as well as to the shelter cluster coordination mechanism being set-up at provincial level where Save the Children is co-leading the engagement with provincial authorities.
- Promote harmonized practices among cluster members in particular focusing on temporary sheltering.
**Objective:**

To provide comprehensive support to the NRCS in their relief operations, ensuring adherence to compliance standards, effective operational management, and enhanced visibility of their actions.

- **Procurement:** support to NRCS in procuring required relief items (either for immediate distribution, replenishment of dispatched stocks or prepositioning efforts)
- **Security:** provide security services to the NRCS and the IFRC membership as per Country Delegation mechanisms
- **Finance and Human resources:** ensure compliances under the operation as per IFRC and donor requirements. Foster a risk management culture at all levels and ensure staff and volunteers understand finance and human resource rules and procedures across all support services.
- **PMER:** as an IFRC-wide team, support NRCS in key operational management functions including final evaluation (need assessment, planning, monitoring, information management, etc.)
- **Communications:** support the visibility of IFRC/NRCS actions through joint communications initiatives.

**Risk management**

The NRCS EOC as the main coordination hub for the operation is responsible to regularly assess the risks and identify mitigation actions as appropriate. The EOC receives daily support from the IFRC and its membership where risk management is embedded in the planning and monitoring functions of the operation. At the stage, the below risks and their mitigation actions have been identified, noting that the below table will be updated as per the situation evolving:

<table>
<thead>
<tr>
<th>Risk</th>
<th>Likelihood</th>
<th>Impact</th>
<th>Mitigating actions</th>
</tr>
</thead>
</table>
| 1. Access to the targeted areas due to logistical capacities and challenges | Medium | Medium | • Security visit undertaken to inform future travels and trucking of goods.  
• Close coordination with local authorities and police  
• Use of cash programming to reduce logistics challenges |
| 2. Delay in field reporting on activity progress and operational challenges, not allowing the management team to take corrective decisions as required | high | medium | • Increase capacity at field level for data collection and reporting.  
• Increased use of IT/IM tools for real-time information (supported by the IM surge)  
• Collective support of the IFRC and membership to the EOC |
| 3. Overdue reporting and late reconciliation of work advances, causing | Medium | Medium | • Increased financial monitoring at local level to ensure compliances.  
• Orientation to field-level staff and volunteers on rules and procedures and coaching from distance as required. |
subsequent cash flow delays.

4. Risk of sexual exploitation/abuse and gender-based violence against children, women and or other targeted community member

<table>
<thead>
<tr>
<th>Sector</th>
<th>Indicators</th>
</tr>
</thead>
<tbody>
<tr>
<td>High</td>
<td>High</td>
</tr>
</tbody>
</table>

- Introduce minimum standard commitments to gender and diversity in all projects and programmes
- Commitment to IFRC fundamental principles and code of conduct, PSEA and child protection policy
- Community sensitization on gender-based violence and child protection
- Basic community complaints and response mechanisms, including hotline and whistle blowing mechanisms.
- Gender and inclusion team to provide trainings on gender related issues
-的基本社区投诉和响应机制，包括热线和吹口哨机制。
- Gender and inclusion team to provide trainings on gender related issues Staff training on the IFRC’s Code of conduct and NRCS has also its own CoC which is signed off by staff and volunteers

5. Poor quality of data collection and analysis (due to capacity gaps), resulting in a lack (or perceived lack) of accountability to communities, partners and donors

<table>
<thead>
<tr>
<th>Sector</th>
<th>Indicators</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medium</td>
<td>Medium</td>
</tr>
</tbody>
</table>

- IM team in place led by NRCS with support from IFRC and PNSs - Involve qualified volunteers and project staff in data collection at field level.
- M&E framework for the operation developed and disseminated.
- Reconciliation of narrative and activity reports to check consistency.
- Promote use of standardized data collection formats by NRCS, IFRC and its membership
- Keep the donors informed about the challenges related to data collection, aggregation, and reporting

**Quality and accountability**

NRCS will be responsible for the day-to-day monitoring of the operation, primarily at the branch level. Using contextualised tools, joint monitoring teams will visit operation sites on a regular basis to measure the progress of the implementation and provide support to accomplish the proposed actions in the intervention areas. Final evaluation of the operation will be conducted at the end of the operation to identify best practices and lessons learned. In addition, below indicators serve to track progress and measure the impact of the response across different sectors and areas. The list may change and update as the operation evolves.

<table>
<thead>
<tr>
<th>Sector</th>
<th>Indicators</th>
</tr>
</thead>
<tbody>
<tr>
<td>Shelter Number of people provided with basic and safe emergency shelter that adequately enables essential household and livelihood activities to be undertaken with dignity.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Number of people (and households) provided with household items that support the restoration and maintenance of health, dignity and safety and the undertaking of daily domestic activities in and around the home.</td>
</tr>
<tr>
<td></td>
<td>Number of staff and volunteers who completed training in emergency shelter and emergency household items.</td>
</tr>
<tr>
<td></td>
<td>Number of people who attended training/awareness raising sessions on transitional safe shelter.</td>
</tr>
<tr>
<td>Livelihoods</td>
<td>Number of people reached with livelihood assistance.</td>
</tr>
<tr>
<td></td>
<td>Number of people provided with livelihood training.</td>
</tr>
<tr>
<td>Health</td>
<td>Number of people reached through RCCE services (mobile clinic)</td>
</tr>
<tr>
<td></td>
<td>Number of people reached through MHPSS and PFA services</td>
</tr>
<tr>
<td>Category</td>
<td>Indicators</td>
</tr>
<tr>
<td>-------------------------------</td>
<td>-----------------------------------------------------------------------------</td>
</tr>
<tr>
<td><strong>WASH</strong></td>
<td>Number of people reached through health awareness</td>
</tr>
<tr>
<td></td>
<td>Number of people reached by community health services (CBHFA)</td>
</tr>
<tr>
<td></td>
<td>Number of health facilities rehabilitated/reconstructed</td>
</tr>
<tr>
<td><strong>WASH</strong></td>
<td>Number of people reached through WASH assistance</td>
</tr>
<tr>
<td></td>
<td>Number of toilets constructed</td>
</tr>
<tr>
<td></td>
<td>Number of enhanced sanitation facilities</td>
</tr>
<tr>
<td></td>
<td>Number of people reached by hygiene promotion activities in the response period</td>
</tr>
<tr>
<td></td>
<td>Number of handwashing stations constructed</td>
</tr>
<tr>
<td><strong>Multi-Purpose Cash</strong></td>
<td>Number of people (and households) who successfully received cash for basic needs after being identified and processed for transfer.</td>
</tr>
<tr>
<td><strong>Cross-cutting (CEA, PGI)</strong></td>
<td>Number of RCRC staff and volunteers trained on PGI</td>
</tr>
<tr>
<td></td>
<td>Number of people reached with referral services</td>
</tr>
<tr>
<td></td>
<td>Number of child friendly/safe spaces supported</td>
</tr>
<tr>
<td></td>
<td>Number of people received assistive devices following the screening camps</td>
</tr>
<tr>
<td></td>
<td>Methods established to communicate with communities about what is happening in the operation, including selection criteria if these are being used.</td>
</tr>
<tr>
<td><strong>National Society Strengthening</strong></td>
<td>Number of volunteers insured throughout the operation</td>
</tr>
<tr>
<td><strong>IFRC Secretariat Services</strong></td>
<td>Number of IFRC monitoring and support missions</td>
</tr>
<tr>
<td></td>
<td>% of financial reporting respecting IFRC procedures</td>
</tr>
<tr>
<td></td>
<td>Logistics department provides constant support to the National Society's logistics unit for replenishment and other procurements</td>
</tr>
<tr>
<td></td>
<td>Number of evaluations conducted for this operation</td>
</tr>
</tbody>
</table>

**FUNDING REQUIREMENT**

**Federation-wide funding requirement**

- **Federation Wide Funding Requirement**
  - Including the National Society domestic target, IFRC Secretariat and the Partner National Society funding requirement
  - 7 million CHF

- **IFRC Secretariat Funding Requirement**
  - In support of the Federation Wide funding ask
  - 5 million CHF

*For more information on Federation-Wide funding requirement, refer to section: Federation-wide Approach*
Breakdown of the IFRC secretariat funding requirement

**OPERATIONAL STRATEGY**

MDRNP016 - Nepal Red Cross Society
Karnali Earthquake

**FUNDING REQUIREMENTS**

<table>
<thead>
<tr>
<th>Planned Operations</th>
<th>Amount (CHF)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Shelter and Basic Household Items</td>
<td>1,133,000</td>
</tr>
<tr>
<td>Livelihoods</td>
<td>360,000</td>
</tr>
<tr>
<td>Multi-purpose Cash</td>
<td>1,196,000</td>
</tr>
<tr>
<td>Health</td>
<td>745,000</td>
</tr>
<tr>
<td>Water, Sanitation &amp; Hygiene</td>
<td>623,000</td>
</tr>
<tr>
<td>Protection, Gender and Inclusion</td>
<td>229,000</td>
</tr>
<tr>
<td>Education</td>
<td>0</td>
</tr>
<tr>
<td>Migration</td>
<td>0</td>
</tr>
<tr>
<td>Risk Reduction, Climate Adaptation and Recovery</td>
<td>0</td>
</tr>
<tr>
<td>Community Engagement and Accountability</td>
<td>107,000</td>
</tr>
<tr>
<td>Environmental Sustainability</td>
<td>0</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Enabling Approaches</th>
<th>Amount (CHF)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Coordination and Partnerships</td>
<td>0</td>
</tr>
<tr>
<td>Secretariat Services</td>
<td>138,000</td>
</tr>
<tr>
<td>National Society Strengthening</td>
<td>470,000</td>
</tr>
</tbody>
</table>

**TOTAL FUNDING REQUIREMENTS** 5,001,000

*all amounts in Swiss Francs (CHF)*
Contact information

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

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Reference documents

Click here for:
• Previous Appeals and updates