**DREF Operation**

**Haiti: Complex Emergency**

Motorists drive past a burning barricade during a demonstration in Port-au-Prince. Source: Ralph Tedy Erol / Reuters via RFI, 2024.

<table>
<thead>
<tr>
<th>Appeal:</th>
<th>Country:</th>
<th>Hazard:</th>
<th>Type of DREF:</th>
</tr>
</thead>
<tbody>
<tr>
<td>MDRHT021</td>
<td>Haiti</td>
<td>Complex Emergency</td>
<td>Response</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Crisis Category:</th>
<th>Event Onset:</th>
<th>DREF Allocation:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Orange</td>
<td>Slow</td>
<td>CHF 686,691</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Glide Number:</th>
<th>People Affected:</th>
<th>People Targeted:</th>
</tr>
</thead>
<tbody>
<tr>
<td>-</td>
<td>362,501 people</td>
<td>11,670 people</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Operation Start Date:</th>
<th>Operation Timeframe:</th>
<th>Operation End Date:</th>
<th>DREF Published:</th>
</tr>
</thead>
<tbody>
<tr>
<td>2024-05-13</td>
<td>6 months</td>
<td>30-11-2024</td>
<td>14-05-2024</td>
</tr>
</tbody>
</table>

**Targeted Areas:** Ouest
Description of the Event

Date when the trigger was met

2024-05-02

Map of targeted department and communes by Haitian Red Cross for direct intervention and multisectoral needs assessments. Source: IFRC ARO.

What happened, where and when?

Armed violence continues to disrupt security in Port-au-Prince. According to the latest situation report No. 21 issued by the United Nations Office for the Coordination of Humanitarian Affairs (OCHA), on 2 May, an armed attack in the Delmas commune forced more than 3,700 people to relocate.

The urgency of the humanitarian crisis in Haiti was highlighted in the latest displacement update for the Metropolitan Area of Port-au-Prince by the International Organization for Migration (IOM). According to the report, since 8 March, movements of 95,000 people leaving the Metropolitan area of Port-au-Prince have been observed, indicating a concerning increase of 41,696 internally displaced persons in a period of ten days, between 27 March and 9 April, in the Metropolitan Area of Port-au-Prince. This report underscores the rapid deterioration of conditions, reflecting the escalation of violence and instability that have gripped the country since late February 2024, displacing a total of 362,500 Haitians as of 9 April.

Since 29 February 2024, two of the major coalitions of armed gangs, have risen up and launched attacks against public infrastructure, including police stations, as well as private institutions in several communes of the Ouest department, notably the capital, Port-au-Prince. The damage caused by these attacks is considerable, with consequences at multiple levels. During these violent events, at least 21 commercial establishments, small and medium-sized enterprises, and nine police stations and sub-police stations were vandalized and/or set on fire. Between 30 and 40 people were killed in the sole commune of Pétion-Ville. Some were killed by police bullets in exchanges of fire, others were likely lynched by a popular movement and others were innocent collateral victims of urban confrontations.

The gangs continue to perpetrate violence with kidnappings and gunfire against the population at large, as well as conducting attacks against the police and key infrastructures as the international airport of Port-au-Prince that has been closed since 4 March. There have also been several attempted attacks against the presidential palace, which were thwarted by the security forces. Reports of heightened gang violence exacerbating food insecurity have increased, a situation dire enough that even essential services like healthcare and clean
water access were heavily compromised.

The Government of the Republic, referring to the Decree of 3 April 2024, established a state of emergency throughout the extent of the Ouest department for a period of one month, from 4 April to 3 May 2024. The political climate remains tense after the decree of 12 April officially establishing the Transitional Presidential Council. The nine political entities and civil groups that have chosen representatives for this council criticized a public declaration. They claim that the current Council of Ministers made significant changes to it, which, according to them, distorts the agreement reached between the parties on 11 March. On 16 April, the government officially announced in the Official Gazette the names of the seven voting members and two non-voting members of the Council.

Haiti’s transitional council has nominated Fritz Belizaire as the new Prime Minister of the country on 30 April. This council is also tasked with appointing a cabinet and an electoral council, which should pave the way for Haiti’s first general elections since 2016. However, internal squabbles on the panel have delayed the process. Tensions concerning the PM’s selections are reported to be threatening to dissolve the council already.

The crisis in Haiti has severely impacted various areas within Metropolitan Port-au-Prince, which are currently facing a serious multisectoral crisis exacerbated by the escalation of violence, political instability, and environmental challenges. The arrival of the rainy season has increased the risk of floods, particularly affecting displaced persons and those living in disadvantaged areas. This environmental challenge worsens the disastrous conditions faced by displaced persons due to violence, thus increasing the complexity of the necessary humanitarian response.

Scope and Scale

This crisis, marked by escalating violence and political instability, has led to significant displacement and suffering, particularly in the Metropolitan Area of Port-au-Prince. As detailed in recent reports, the situation has profoundly affected lives, livelihoods, and infrastructure. Specifically, as of 9 April, there are 362,500 internally displaced persons (IDPs) in Haiti. This represents a 15% increase since the beginning of the year. More than half of them, 180,000, are children, a particularly affected group.

According to the latest report on “impact of insecurity on population’s movement from the capital to the provinces” issued by IOM on 12 April, the results from populations flow monitoring and individual surveys revealed that:
-78% of people were leaving Port-au-Prince because of the violence and insecurity; 10% were leaving for economic reasons and 10% to join their families.
-39% were traveling with their families, and 61% alone.
-63% were already displaced persons in Port-au-Prince. Of these, the majority were staying with host families (82%) and 18% in spontaneous sites in Port-au-Prince.
-66% intend to stay away from Port-au-Prince for as long as necessary.

The surge in violence in Haiti has significantly exacerbated the already harsh living conditions for millions, particularly in Port-au-Prince. The recent escalation has been unusually intense and widespread. Port-au-Prince is now described as tense, volatile, and unpredictable, with residents living in constant fear and heightened levels of distress. The population, especially those in densely populated neighborhoods, faces increased risks, including food and health insecurity, lack of protection, and inadequate water and sanitation services.

Before this recent escalation, nearly half of the country’s population, approximately 5.4 million people, were already in need of
humanitarian assistance. This spike in violence has also led to a drastic increase in gender-based violence against women and girls, including rape and sexual violence. Despite the ongoing need for humanitarian assistance, access has become increasingly restricted, with limited space for operations due to logistical challenges and constrained access. Access to healthcare, safe spaces, and survivor-centered care for these individuals has become even more challenging.

The healthcare system is severely compromised facing significant strain, especially in terms of accessing services, which has been severely affected by ongoing violence, including:
- Large facilities such as the State University Hospital (HUEH) are currently non-operational due to security concerns.
- The Saint Camille Hospital in Croix-des-Bouquets was attacked on the night of 9-10 March 2024, resulting in the theft of its oxygen stock and the hospital operating at minimal capacity since.
- The Bernard Mevs Hospital has seen a gradual resumption of activities but is currently only operating at 30% capacity.
- The Médecins Sans Frontières emergency center in Turgeau is open for outpatient emergencies.

The Pan American Health Organization (PAHO) and the World Health Organization (WHO) have had to intervene, supporting the operational hospitals that are overwhelmed by the increased demand. The provision of basic services, including healthcare and sanitation, is critically hampered, affecting affected groups severely. Children, the elderly, and people with disabilities are among the most affected, facing heightened risks due to their reduced mobility and increased dependence on public services. There are also ongoing challenges in addressing cholera and other waterborne diseases, exacerbated by inadequate WASH (Water, Sanitation, and Hygiene) facilities.

The mental health burden among IDPs and frontline workers is significant, with both groups experiencing increased stress and psychological strain due to the ongoing violence and humanitarian conditions. Each new site presents new adaptation challenges, such as access to water and basic services. Families must constantly adapt, which increases stress and anxiety. “Successive displacements, where individuals abandon everything, coupled with experiences of violence, rape and overcrowding, have exacerbated psychological distress with an alarming increase in suicidal tendencies among displaced populations,” said IOM. Furthermore, the IOM emphasized the necessity for humanitarian partners to have unobstructed access throughout the country to ensure that critical aid reaches the most affected individuals.

Food security is another critical issue, with disruptions in supply chains and increased food prices exacerbating hunger among displaced populations. The World Food Programme (WFP) and other agencies are striving to distribute meals and food supplies, but the need far outstrips the available support. The lack of goods and resources is exacerbating an already precarious economic situation and Haiti's hunger crisis, as access to basic commodities have become more and more limited. According to the Integrated Food Security Phase Classification (IPC), more than 4.4 million Haitians are acutely food insecure, 1.4 million of whom are experiencing emergency levels of hunger. The WFP has published a note on the impacts of the events of March 2024 on household food security. The note indicates that the severity of insufficient food consumption increased in early March (poor or borderline food consumption), with the most severe category rising from 32% in February to 41%; nearly two out of three households experienced a significant drop in income in early March, with 14% experiencing a drop of more than half their income; seven out of ten ministries reported higher food basket costs than in January 2024.

In addition, the political landscape is unstable, with a newly established Prime Minister and a Transitional Presidential Council adding to the tension. The effectiveness of these political measures remains uncertain as they are met with skepticism and opposition from various groups.

This crisis has profoundly affected Metropolitan Port-au-Prince, with each area grappling with escalating violence, governance vacuums, and humanitarian distress. Particularly it has hit hard Delmas and Tabarre, alongside Cité Soleil, known this last one as one of Haiti's most dangerous locales due to intense gang activity and extreme poverty. In Delmas, a central urban area, the strategic location has made it a hotspot for displacement although gangs' violence is compromising access to essential services like healthcare and education. Similarly, Tabarre, located near crucial infrastructure like the Toussaint Louverture International Airport, also has experienced an increment of violence and displacement.

In summary, the scope of the crisis in Haiti is vast, affecting numerous aspects of life for hundreds of thousands of people. The scale of displacement, health crises, and the ongoing need for basic services highlight the profound and multi-layered challenges facing the nation.

Source Information

<table>
<thead>
<tr>
<th>Source Name</th>
<th>Source Link</th>
</tr>
</thead>
</table>
Previous Operations

Has a similar event affected the same area(s) in the last 3 years?  
Yes

Did it affect the same population group?  
No

Did the National Society respond?  
-

Did the National Society request funding from DREF for that event(s)?  
-

If yes, please specify which operation  
-

If you have answered yes to all questions above, justify why the use of DREF for a recurrent event, or how this event should not be considered recurrent:
-

Lessons learned:

The last DREF Operation (MDRHT019) launched by Haitian Red Cross Society (HRCS) in response to population movement was back in 2021. This operation targeted Haitian nationals who had been returned to Haiti, specifically to Port-au-Prince and Cap-Haïtien in the north. The primary goal was to provide humanitarian assistance to 1,500 returnees through the provision of essential health services, drinking water, food, hygiene kits and restoring family links. In contrast, the current situation differs significantly in scope and scale. The current DREF Operation targets assisting at least 11,670 internally displaced individuals by escalating violence in Delmas and Tabarre, Ouest department.

HRCS has extensive experience in implementing Emergency Appeals and DREF Operations in response to various events, including epidemics, tropical storms, and hurricanes. Recent experiences include Emergency Appeal MDRHT018 in response to an earthquake, a CVA program in Cité Soleil with BHA emergency funds, and DREF operation MDRHT020 in response to floods.

Regarding the previous DREF, MDRHT020, implementation delays resulted in a low implementation rate due to logistical and human resource challenges. Recruiting the field team proved challenging due to the specific coordination profile required not being readily available in the implementation area. Also, the implementation zone’s difficult access, located outside Port-au-Prince, necessitated the relocation of some personnel, causing delays. To address these human resource challenges and expedite recruitment for the current DREF, several measures have been foreseen. To enhance project delivery and overcome these limitations, several measures will be
Firstly, procurement will focus solely on essential items necessary for completing WASH activities and acquiring other required materials. Additionally, procurement will be conducted locally to avoid past challenges with international procurement, which was impeded by customs delays. This decision is due to the difficulties associated with importing and transporting items from regional areas to Port-au-Prince, particularly regarding security. Efforts have also been made to ensure in-country availability of goods and local vendors compliant with IFRC quality standards.

Secondly, to expedite recruitment and ensure the timely deployment of the field team, activities for this DREF will primarily take place in the west area, specifically in the Metropolitan Area of Port-au-Prince area, simplifying recruitment logistics. Several candidates have already been pre-identified for the required positions and are prepared to apply. Furthermore, some existing National Society staff will dedicate 100% of their time to implementing this DREF, eliminating the need for a recruitment process.

In addition to the lessons learned from MDRHT020, the HRCS is also leveraging the experience gained from all previous operations, incorporating other critical lessons into the formulation of the current DREF request. The objective is to address and mitigate similar challenges during its implementation, including:

- The importance of effective monitoring and evaluation processes to identify potential challenges early on and make necessary adjustments to keep the project on track.
- Effective and timely coordination with local authorities, such as the Directorate General of Civil Protection (DGPC) and its regional branches, has been crucial for the National Society to mobilize its volunteer network swiftly and obtain necessary permissions to access affected areas and respond effectively. Learning from this experience, HRCS has enhanced its coordination mechanisms and is currently working closely with relevant clusters, as well as national and local organizations, to assess needs, identify gaps, and prevent duplication of efforts and resources.
- The importance of strong protection mechanisms, guaranteeing that most affected populations receive tailored protection and support suited to their particular situations, from the commencement to the conclusion of the operation.
- Need for clear communication and stakeholder engagement to manage expectations and secure necessary support for timely project completion.
- The importance of conducting thorough security assessments and incorporating robust security measures into project planning from the outset.
- To prioritize security considerations in project planning and implementation and to be prepared to adjust their approaches in response to changing security situations.
- Meaningful community engagement is crucial to provide assistance that resonates with the needs of affected communities, particularly the most affected groups and should be a central focus of humanitarian operations.

Regarding Cash and Voucher Assistance (CVA), the Haitian Red Cross is committed to increasing the delivery of aid through CVA. The National Society has previous experience implementing CVA programs with the support of various Partner National Societies (PNS) in the country. This DREF request also integrates the lessons learned from past and recent experiences, including:

- The importance of context-specific planning and implementation in CVA programs.
- The need for robust monitoring and evaluation mechanisms to assess the impact of CVA interventions and inform future programming.
- Conducting thorough security assessments and implementing appropriate security measures to ensure the safety of both beneficiaries and aid workers. This includes measures such as ensuring secure delivery mechanisms for cash transfers such as telephone mobile providers.
- The need for CVA programs to be implemented in a manner that prioritizes the safety and security of all involved, while also ensuring that the assistance provided meets the needs of the affected population in a timely and effective manner.

It is important to highlight that the HRCS has been familiar with the current security challenging context, as cycles of violence have been observed at different times over the past 5 years. Throughout this period, the HRCS has been actively responding and adapting to these situations. An example of this, is last year’s implementation of a cash program in Cite Soleil, one of the most critical areas to access, in collaboration with IFRC and funded by BHA emergency funds. This demonstrates HRCS’s ability to operate effectively in similar security environments, showcasing their experience and adaptability in challenging circumstances.

These lessons and past experiences, when integrated into this operation, aim to significantly improve the effectiveness of the Haitian Red Cross response, ensuring that assistance is not only provided quickly and efficiently, but also safely and resonating with the specific needs and circumstances of the affected communities, particularly the most affected groups.

**Current National Society Actions**

**Start date of National Society actions**

2024-02-29
### Multi Purpose Cash

In Haiti’s current complex crisis, a Cash and Voucher Assistance (CVA) intervention is essential due to various pressing needs and gaps. Many families urgently require basics like food, clean water, and shelter, and CVA provides them with the flexibility to address their most immediate requirements. The crisis has displaced many people, leaving them without stable sources of income. Cash assistance can help them rebuild their businesses or explore new job opportunities. While local markets are partially functioning, they remain unstable. With accurate assessments, a CVA project can help boost the economy by empowering recipients to buy locally.

Despite challenges in accessing banking or local financial networks, mobile payment systems can ensure cash distribution remains secure and timely. Vulnerable groups, such as women, children, and the elderly, are at higher risk of exploitation or abuse, and cash assistance can help them access essential services while minimizing those risks. Robust data collection and monitoring are needed to reach the most affected families effectively, while engaging local communities will help identify key priorities and improve project design. Nonetheless, the current security context needs strong security guidance and support throughout any CVA intervention, ensuring that the distribution of assistance is conducted safely and that risks to both staff and beneficiaries are minimized.

### Health

The Haiti Red Cross Society is coordinating the response with its network of branches and partners, supporting the Ministry of Health with first aid and emergency health care services including PSS. The priority areas of action for the HRCS in response include community surveillance and public awareness raising about epidemic control in the sites for the IDPs. HRCS ambulance teams are also providing vital support in transporting in patients to health facilities. So far, 159 people have been assisted with health services. To meet the needs of victims, the HRCS has also mobilized its ambulance service and implemented a rotation system. This system allows several teams of first aiders to provide near-continuous ambulance service in high-risk environments. First-aiders have access to repositioned treatment equipment and other specialized gear to support their interventions. For instance, at the Haitian Red Cross headquarters, a medical post was established in close proximity to conflict zones between armed gangs and the Haitian National Police, where 11 injured individuals were treated. Additionally, 50 victims were safely evacuated to care facilities.

### Protection, Gender And Inclusion

The HRCS is actively promoting its Restoring Family Links (RFL) service to assist families who have been displaced and need to contact loved ones or seek support.

### Community Engagement And Accountability

The HRCS maintains a comprehensive approach to Complaints, Feedback, and Response Mechanisms (CFRM) and Planning, Monitoring, Evaluation, and Reporting (PMER) under the area of Accountability to affected people. The CFRM strategy, developed by the unit to support HRCS interventions, is aligned with the IFRC’s four minimum standards of Information sharing/Transparency, Participation, Complaints and Response Mechanism, and Monitoring and Evaluation, utilizing appropriate tools.

### Coordination

The HRCS coordinates with local, provincial, and national authorities, as well as other humanitarian organizations, and actively participates in coordination forums with other humanitarian actors at the country level. Also, the HRCS actively contributes to the APP/CEA interagency working group in Haiti, demonstrating a commitment to collaborative efforts that enhance communication and engagement with affected communities, ensuring that their needs and feedback directly inform humanitarian responses and strategies.

In addition, the Haitian Red Cross is in close collaboration with the IFRC Latin Caribbean Country Cluster Delegation (CCD) in Dominican Republic to assess needs and develop response plans for those affected by the emergency situation in Haiti. The Disaster Management focal points from the Haitian Red Cross and the IFRC technical team are working together, establishing an internal coordination mechanism and maintaining constant communication with Red Cross Movement partners. With the support of IFRC Americas Regional Office and the IFRC Delegation, the HRCS jointly organized a meeting with the Dominican Red Cross and Red Cross Movement partners virtually, on 27 March, to discuss on the complex crisis.
| National Society Readiness | The Haitian Red Cross Society (HRCS) is actively monitoring the situation, with branches in all regions and regular participation in meetings with the National Disaster Risk Management Unit (DGPC).

Other actions taken by the HRCS include:
- Registration of one alert report on the GO Platform of the International Federation.
- Publication of the HRCS internal SITREP. |

| Assessment | The Haitian Red Cross is collaborating as the co-lead organization with civil protection structures (DGPC - Direction Générale de la Protection Civile) to facilitate assessment activities in the affected IDP sites. Currently joint national assessment efforts are being conducted under the government leadership. |

| Activation Of Contingency Plans | The Haitian Red Cross is a member of all committees of the National Disaster and Risk Management System (CNGRD). The CNGRD is headed by the Prime Minister, his ministers and the HRCS president. The HRCS president maintains high-level contact with national authorities and coordinates the capacities of the National Society and the IFRC network. |

| National Society EOC | The Haitian Red Cross Society is a permanent member of the National Emergency Operations Centre (COUN). |

| IFRC Network Actions Related To The Current Event | The International Federation of Red Cross and Red Crescent Societies (IFRC) has a Country Cluster Delegation (CCD) which supports and assists Cuba, Haiti and the Dominican Republic. The Delegation team is in contact and coordination with the Haitian Red Cross. In addition, the Health, Disasters, Climate and Crisis Department of the IFRC Americas regional office in Panama is also in constant communication with the IFRC Delegation and provides technical support to the National Society.

To ensure effective response and support, the IFRC Delegation has facilitated exchanges with the technical team of the National Society’s disaster management unit. This collaboration aims to establish an internal coordination mechanism and maintain ongoing communication with the wider Red Cross Movement. Regular meetings will be conducted, and communication and coordination channels will remain open to facilitate information sharing and discuss operational activities pertinent to the current emergency.

In addition, the ARO communication manager conducted interviews with international news outlets such as NT24 and F24. Additionally, a joint statement involving the National Society, ICRC, and IFRC regarding respect for the medical and humanitarian mission was issued. |

| Participating National Societies | Currently, there are four Participating National Societies (PNSs) active in-country and one (the French Red Cross) supporting remotely. Although most of the PNSs have evacuated their delegates and technical international staff, their financial and technical support continues from the Dominican Republic and remotely as follow:

- The Spanish Red Cross provides technical and financial support on climate, crisis and health. Humanitarian health assistance and WASH actions are being carried out in Jacmel, Nippes, Miragoane, Les Cayes, Grand-Anse, Jeremie, Port-au-Prince, Bas-Lavoute, Jacmel until August 2024 (ECHO funded project). The multi-year livelihood program (with AECID) in Benait will end in July 2024.
- The Swiss Red Cross focuses their support on health, crises and National Society Development initiatives. They still have their delegate in Haiti and is currently developing a concept note to assist people who were displaced in April 2024 and have since returned to the commune of Léogane and Port-au-Prince. Their focus areas include food security and WASH (distribution of hygiene kits and awareness-raising).
- The Netherlands Red Cross is exploring the possibility of supporting families who have returned to communities in the south with livelihood activities.
- The Canadian Red Cross support HRCS work on health, PGI and security, at present, |
ICRC Actions Related To The Current Event

The International Committee of the Red Cross (ICRC) continues to support the Haitian Red Cross Society in implementing the Movement's Fundamental Principles to ensure safer access to different vulnerable communities. It joins the humanitarian coordination mechanism with the HRCS and the IFRC, helping to define the Movement's role and response to emergencies, and remains ready to facilitate necessary interventions in sensitive areas for RC/RC Movement partners and other humanitarian actors. The ICRC monitors humanitarian needs and displays a targeted response in communities affected by armed violence. ICRC, by virtue of its mandate, plays its co-convening role in relations to the Movement response to the consequences of the armed violence, which includes providing indispensable support to the HRCS, notably in mobilizing the ambulance service and promoting safer access. The ICRC's support essentially consists of financial resources, first-aid equipment and technical support when requested by the HRCS. A new stage of the Restoring Family Links' component at the HRCS is being developed with the support of the ICRC as well.

Other Actors Actions Related To The Current Event

| Government has requested international assistance | No |
| National authorities | The Government of the Republic of Haiti, on 12 April launched a decree establishing the Transitional Presidential Council and extending the 3 April State of Emergency throughout the West Department for a period of one month, from 12 April to 3 May. To restore order and take appropriate measures to regain control of the situation, extends the curfew throughout this territory. This measure does not apply to law enforcement officers on duty, firefighters, ambulance drivers, health personnel and duly identified journalists. During the state of emergency, all public demonstrations are prohibited, day and night, in the West department, and law enforcement agencies have been instructed to use all legal means at their disposal to enforce the curfew and apprehend all offenders. On 16 April, the Government published in the official gazette the names of the seven voting members and two non-voting members of the Council. Once installed, their mandate will run until February 2026. |
| UN or other actors | On March 10 and 11, the World Food Programme (WFP) distributed hot meals to 12,063 and 12,043 internally displaced people (IDPs) in nine sites. The WFP also continued to supply hot meals to a Médecins Sans Frontières (MSF) hospital. Since 29 February, the WFP has distributed over 62,500 hot meals to IDPs. The International Organization for Migration (IOM) and its partners are conducting mobile medical and psychosocial clinics at sites, referring the most affected cases, including gender-based violence (GBV) survivors. As a gender-based risk mitigation measure, the United Nations Population Fund (UNFPA) and its partners, in collaboration with the Shelter group, have installed streetlights at five sites for displaced people to improve security. UNFPA and its partners have referred 46 people to three local organizations for psychosocial care and temporary shelter. The United Nations Children's Fund (UNICEF) and its partners have distributed 29,000 gallons of water to displaced civilians living in three new sites established since 29 February 2024. UNICEF, in partnership with Initiative Citoyenne pour les Droits de l'Homme, and with financial support from World Vision, provided cash assistance to 125 households with affected children living in three displaced sites (Place Clercine, Cité Soleil, Croix des Bouquets) during the week, with each household receiving $125 USD. Nearly 8,200 children, including 6,600 girls, have received psychosocial support at several sites since 11 March. The Pan American Health Organization/World Health Organization (PAHO/WHO) and UNFPA are supporting three facilities providing maternal health services in the Metropolitan Area of Port-au-Prince to reduce the costs of caesarean sections and other |
maternity-related expenses. From April 8 to 15, 55 women, including 39 for caesarean sections, have already benefited from this support. PAHO/WHO received 38 tons of medical supplies from its strategic stocks in Panama, distributed throughout the Grand Nord region, including the Centre, Nord-Est, Nord, Artibonite, and Nord-Ouest regions, as well as to Justinien Hospital in Cap-Haitien, with logistic assistance from PAHO/WHO.

With support from national NGOs JEDEN and ICDH, child protection and welfare assessments to identify the needs of affected IDPs prior to aid distribution continued on 13 March at the Ecole Nationale des Frères site.

The IOM and its implementing partners, Médecins Du Monde Argentina and the Institute of Health, Population and Development (ISPD), provide medical assistance via mobile clinics at five sites for IDPs. Medical assistance and protection services were provided on March 12 and 13 at the site of displaced persons at Lycée Jean-Marie Vincent. PAHO/WHO supplied medicines and WASH equipment to the health authorities in charge of the Direction Sanitaire de l'Ouest to care for displaced persons and improve sanitary and hygiene conditions in the camps. Médecins Sans Frontières (MSF) donated 50 bags of blood to the Blood Transfusion Center and placed an order for supplies to support the center.

Are there major coordination mechanism in place?

The Haitian Red Cross Society is a member of the National Risk and Disaster Management System at national, regional, and local level. As such, it takes part in all the meetings organized by the General Directorate of Civil Protection on IDP management at national level, led by the General Director of Civil Protection, and at local level, led by the town councils.

The National Society is the co-leader of the thematic committee on shelter management, working with partners in the national system on assistance to the displaced population. It also takes part in the regular meetings of the Coordination and Camp Management Committee (CCCM), at which state institutions and international NGOs, including IOM, are represented to coordinate actions in IDP sites. Sectoral groups are in place.

It was suggested that particular attention be paid to coordination throughout the IDP assistance process between Haitian state entities, local actors and (inter)national NGOs to avoid duplication and maximize the effectiveness of interventions.

List of coordination meetings:
- Internal coordination of the Red Cross Movement, meeting monthly.
- National Risk and Disaster Management System meetings: regular and extraordinary meetings are held according to the situation. A draft integrated humanitarian response plan is underway, with the participation of all stakeholders.
- Humanitarian Country Team (HCT) meetings with the various sectors and sub-sectors.
- Health Cluster under the joint lead of the MSPP and PAHO/WHO, a subgroup has also been set up to coordinate actions related to internally displaced persons with the Western Health Directorate (DSO) of the Ministry of Public Health and Population (MSPP).

Needs (Gaps) Identified

Shelter Housing And Settlements

Currently, people are being evacuated to schools and churches, while many others are seeking shelter with neighbors. The destruction of thousands of homes and the evacuation of those at risk have left many families without shelter, creating an urgent need for safe and adequate housing. Additionally, insecurity and violence in urban areas have forced hundreds of families to flee, further exacerbating the demand for housing. These families have sought refuge in makeshift sites and shelters. Since 29 February, over 15,000 people have fled violence in the Port-au-Prince metropolitan area. Nationwide, more than 362,000 people are displaced, with many forced to move multiple times in search of safety. These frequent displacements increase household vulnerability, and the loss of goods and resources worsens an already precarious economic situation. Each new location presents new challenges, leading to heightened stress and anxiety among affected families.
Livelihoods And Basic Needs

The current crisis in Haiti has exacerbated the economic vulnerabilities of numerous families, particularly those displaced from their homes. Many of these families had to flee abruptly, leaving behind not only their personal belongings but also their sources of livelihood. A significant number of these individuals were dependent on small businesses located within their homes or jobs in their local neighborhoods. By abandoning these, they have not only lost their immediate income but also the means to sustain their livelihoods in the long run.

This loss has plunged them into even more challenging economic circumstances, significantly increasing their vulnerability. The lack of alternative livelihood opportunities, compounded by their status as displaced persons, places them at a heightened risk of food insecurity and malnutrition. The United Nations Secretary-General has highlighted that the levels of insecurity in Port-au-Prince are now akin to those seen in countries undergoing armed conflicts, which underscores the severity of the situation.

A comprehensive needs assessment is crucial for understanding the multifaceted needs of these populations, with a particular focus on food security and livelihoods. This assessment must include a detailed analysis of food security data to gauge how population movements have affected stability and access to food resources. Given the dire circumstances, it is evident that all displaced individuals require immediate food aid. This support is not just critical for meeting basic nutritional needs but also for stabilizing affected communities and paving the way for recovery and eventual economic resilience.

Health

Before the surge in violence reported since the end of February 2024, the Haitian healthcare system was already very limited in terms of services and faced many challenges. Insecurity, demonstrations blocking roads and the lack of fuel slowed down the operation of health facilities. The disruption of economic activities in the country exacerbated poverty and made access to basic health services more difficult. Even when these most affected groups do manage to access health services, they are often confronted with health facilities that lack essential equipment and medicines, or with a shortage of qualified medical staff, and a lack of access to medical care and emergency services. Access to healthcare services for both caregivers and patients remains extremely difficult.

At least 73% of the population of the Port-au-Prince metropolitan area has been affected by gang violence, with access to basic services drastically reduced. Hospitals, often caught in the crossfire of clashes between armed coalitions, are operating at best in slow motion. Staff are unable to get to their workplaces, and sick people are reluctant to seek treatment for fear of being hit by stray bullets or kidnapped. The elderly and disabled remain vulnerable to serious illness and abuse. Furthermore, the crisis is having an impact on the mental health of the affected populations. Several health facilities, such as the Médecins Sans Frontières hospital in Cité Soleil and Tabarre (ZMPAP), the Albert Schweitzer hospital (Artibonite) and the Mirebalais University hospital (Centre), were targeted by gangs, forcing them to close temporarily. In the department of Artibonite, a quarter of health establishments report problems of physical access to health infrastructures, for both patients and staff, due to insecurity.

Between January and August 2023, at least 40 doctors were kidnapped in Haiti. Even when health infrastructures do exist and function, they remain insufficient to provide the basic care required by those who desperately need it. When it comes to health needs, people living in remote areas don't often seek medical care, and only go to hospital as a last resort, when it's often too late. As a result, pregnant women, nursing mothers and young girls living in areas affected by insecurity must struggle daily to access services essential to their health, well-being, and survival.

This situation is particularly worrying at a time when the country is experiencing a cholera epidemic that has spread to all departments since the first cases were confirmed on 2 October 2022. According to the Pan American Health Organization, one year and a half after, the Haitian Ministry of Public Health and Population reported a total of 82,885 suspected cases in the country's ten departments, including 4,836 confirmed cases, 80,436 hospitalized suspected cases, and 1,270 reported deaths. The case fatality rate among suspected cases is 1.5% (institutional case fatality rate of 1.2%). Among a total of 14,980 samples tested by the National Public Health Laboratory of Haiti, 4,836 were confirmed (positivity rate of 32.3%).

Ouest Department continues to report the highest number of cases in the country, with 35% of all reported suspected cases. The municipalities of Port-au-Prince, Cité-Soleil, and Carrefour account for 51.5% (n=14,771) of all suspected cases reported in the Ouest Department.

The complex humanitarian and security crisis gripping the country has severely hampered epidemiological surveillance, leading to reduced access to health services and laboratories. Furthermore, established cholera transmission chains in various departments and municipalities have placed the population in a highly vulnerable position. This vulnerability is exacerbated by widespread inadequate access to clean drinking water, sanitation, and hygiene facilities. The worsening security situation and humanitarian crisis have aggravated
these conditions in recent months, significantly hindering efforts by the Ministry of Public Health and Population (MSPP) and other organizations to implement preventative and control measures. As a result, surveillance has suffered, and cases are underreported.

Also, as per the MSPP, there have been numerous recorded cases of individuals wounded by gunfire. The demand for ambulance services remains consistently high, even as response capabilities diminish. With the limitation of movement of the population and the neutrality of the Red Cross, the Ambulance service must strengthen its service. Access difficulties continue to complicate health interventions in displaced sites. The Western Health Directorate was able to carry out epidemiological surveillance activities in certain displaced persons camps. The main health problems encountered include urogenital infections, skin lesions, cough, fever and watery diarrhea. Furthermore, 68% of the latest GBV survivors involved internally displaced people in the West. Psychosocial support is almost non-existent in IDP camps. The trauma linked to the situation of the displaced, and the constant threat of violence is an element to be taken care of as soon as possible in order to reduce its impacts.

**Water, Sanitation And Hygiene**

In Haiti, the Water, Sanitation, and Hygiene (WASH) needs of IDPs in sites like the Metropolitan Area of Port-au-Prince are critical due to the ongoing humanitarian and security challenges. Access to safe drinking water remains limited, increasing the risk of waterborne diseases like cholera. Establishing additional water points and maintaining existing ones is crucial. Similarly, proper sanitation infrastructure is urgently needed, as many IDPs sites lack adequate latrines or sewage systems, resulting in unsanitary conditions that could exacerbate disease spread.

Hygiene supplies, including soap, menstrual hygiene products, and handwashing stations, are essential to promote personal cleanliness and curb transmission of infectious diseases. Educational campaigns to raise awareness about handwashing, sanitation practices, and safe drinking water handling are vital to empower IDPs to reduce health risks. Additionally, effective waste management practices, such as garbage collection and disposal, must be established to maintain clean living environments and reduce contamination. To support the IDPs sustainably, robust sanitation systems and water harvesting solutions should be developed for long-term resilience. Addressing these WASH needs is vital to ensure the health and well-being of IDPs, reduce the likelihood of disease outbreaks, and improve their living conditions.

**Protection, Gender And Inclusion**

In the Haitian crisis, addressing Protection, Gender, and Inclusion (PGI), especially concerning the prevalent gender-based violence (GBV), is essential for the welfare of the population. As of 2024, the situation remains dire, with a 377% increase in GBV cases reported last year, emphasizing the urgent need for expanded services for GBV survivors, such as medical, legal, and psychological support. There is also a critical requirement for humanitarian aid to be accessible to all the most affected groups, including women, children, the elderly, and the disabled, who often face barriers in receiving aid.

In Port-au-Prince, internally displaced persons (IDP) sites present significant challenges. Over 60% of the displaced population are women and girls who are especially vulnerable to abuse and exploitation in these settings. Enhancing community-based protection, providing education and economic opportunities, particularly for women and girls, and strengthening legal frameworks are key to fostering safety and equality. Furthermore, improved data collection on GBV and more robust psychosocial support are necessary. Engaging men and boys in gender equality initiatives is also crucial. These efforts require coordinated action between local and international bodies to ensure effective and inclusive responses to the crisis.

Numerous studies highlight the increase in sexual and gender-based violence following disasters, and national rates in normal times are also worrying. Cross-disciplinary actions to provide care, based on coordination with other players, are essential. Haitian women and girls are paying a heavy price for this wave of violence. Rape cases rose by 49% between January and October 2023, compared with the same period in 2022. In the vast Cité-Soleil district of Port-au-Prince, 80% of women and girls said they had been victims of one or more forms of gender-based violence.

In a context of insecurity marked by a lack of economic and social prospects, young boys, particularly in the neighborhoods under their control, join their ranks, while young girls run the risk of early pregnancy and forced prostitution. Between 30% and 50% of their members are minors, often forced to join for fear of reprisals against themselves or their families. The phenomenon of separating children from their parents also contributes to this situation, exposing them to dangerous and traumatic acts that threaten their survival.
Risk Reduction, Climate Adaptation And Recovery

Haiti’s Hydrometeorological Unit (UHM) has observed humid and unstable weather conditions, attributed to very low atmospheric pressures at the surface and upper-level troughs across various atmospheric layers. These meteorological conditions have been affecting a wide expanse of the Caribbean Basin. Coupled with displacement, economic impoverishment, and predominantly rural lifestyles, these environmental factors significantly heighten Haiti’s vulnerability to future disasters. The country is grappling with severe environmental degradation, largely driven by demographic pressures, exemplified by the alarming statistic that 98% of its forests have been depleted, primarily for fuel. This environmental degradation is exacerbating the impacts of the climate crisis, particularly on Haiti’s agriculture, which relies heavily on rainfall. This ongoing degradation not only undermines food security but also compounds the challenges in climate adaptation and recovery, emphasizing the urgent need for integrated risk reduction strategies and sustainable environmental management practices.

Community Engagement And Accountability

To enhance the effectiveness, timeliness, and relevance of disaster response efforts, it is crucial for communities to lead the process. This approach not only fosters community trust but also encourages active participation. The Haitian Red Cross Society is committed to utilizing the Community Engagement and Accountability (CEA) approach to ensure that the participation of affected communities is both meaningful and effective. This strategy will be developed through a detailed analysis of community needs and the channels through which information is exchanged, aiming to bolster their capacity to respond to crises.

The feedback mechanism integral to the CEA approach will primarily utilize regular updates and comprehensive reports from volunteers who gather both spontaneous and solicited feedback. This feedback will be collected during community meetings and through targeted quantitative surveys conducted as part of specific initiatives.

Overall, the CEA strategy is designed to empower volunteers through focused training and mentorship, enabling them to engage with and mobilize communities in a participatory manner. This engagement will be crucial in the planning and execution of activities, ensuring that community-led responses are well-informed and effectively meet the local needs.

Any identified gaps/limitations in the assessment

To effectively address the complex needs of IDPs, a comprehensive and nuanced assessment is essential. This assessment should not only identify the immediate needs of these most affected groups but also delve into their long-term challenges within IDP sites and along population movement routes. A structured approach for gathering and analyzing data on demographics, health status, access to services, and overall living conditions is vital to ensure that interventions are both targeted and impactful. Additionally, integrating community feedback mechanisms such as surveys and community meetings will provide a continuous stream of actionable insights. This will allow humanitarian organizations to adapt their strategies dynamically and improve the effectiveness of their response efforts.

The intensifying population movement crisis on the island is raising significant concerns, particularly as the escalating influx of displaced people into border regions like Dajabon and Elías Peña has led to an unprecedented surge in population, exacerbating pre-existing challenges related to sanitation and overcrowded conditions. To address this evolving situation effectively, a comprehensive and context-sensitive assessment is required.

A multi-sectoral needs assessment has been designated as a key activity under this DREF request. This assessment aims to collect critical data on migrant movements and the specific humanitarian needs that have arisen under the current enforcement of population movement policies, particularly targeting these affected populations. Identifying any gaps or limitations in this assessment, such as data collection barriers or lack of access to certain areas, will be crucial to refining the approach and ensuring that the aid provided meets the actual needs of the displaced and migrating populations.

Operational Strategy

Overall objective of the operation

Through this DREF operation, the Haitian Red Cross aims to provide assistance to at least 11,670 people in the Ouest department, in Delmas and Tabarre. The assistance will be provided through the implementation of activities in Health, Water, Sanitation and Hygiene (WASH), Multipurpose cash and Restoring Family Links, with a focus on cross-cutting PGI and CEA approach.
Furthermore, this operation entails conducting a multi-sectoral needs assessment in the areas of intervention (Delmas and Tabarre) to complement existing information, assess security situation and guide the planned actions of the National Society.

**Operation strategy rationale**

The development of this DREF Action Plan is grounded in insights provided by the HRCS, secondary data sourced from government, UN, and partner reports, as well as alerts and media coverage. However, it's important to highlight the integration of a comprehensive multi-sectoral needs assessment into this intervention. This assessment aims to complement existing information and guide the planned actions of the National Society to better aid the most affected population.

In this situation, where many people have been displaced due to the insecurity, the response plan includes the following activities aimed at providing essential support and assistance to affected individuals and households:

**MULTIPURPOSE CASH:**
The National Society aims to reach 500 families with a multipurpose cash transfer program:
- Feasibility and market study.
- Survey of targeted families on characterization, prioritization and selection of beneficiaries.
- Induction of volunteers for the development of the program.
- Design and distribution of the cash transfer program.
- Monitoring and evaluation of the cash transfer program.
- Post distribution satisfaction survey of assisted persons.

Two cash transfers will be done to implement the CVA program to help families cover the cost of any essential items. The amount initially allocated to each cash transfer program amounts to CHF 150, for a total of CHF 300. This amount was calculated based on the Basic Food Basket and the damages suffered, losses registered, among other aspects. The multi-purpose cash transfer modality will be analyzed in-depth in view of the security risk in the intervention zone and the national security coordinator will accompany and guide the process in terms of security. Additionally, a feasibility study will be conducted to ascertain the final amount and distribution method.

**HEALTH:**
The National Society aims to reach at least 2,550 people with health-related activities, including:
- Community-based surveillance to detect and report suspected cholera cases
- Psychological support to IDP and frontline workers
- Training on first aid / ECV and PSS for volunteers
- Awareness sessions on key messages on cholera implemented in the IDP sites
- Ambulance services

In addition, people will be reached indirectly with a mass sensitization campaign with key messages related to cholera using other digital/technological tools such as social media and SMS with national telephone providers with large reach such as Natcom and Digicel.

As part of this intervention, the Haitian Red Cross will continue to provide ambulance services in the Metropolitan area, along with psychological first aid services and mass sensitization sessions on key messages related to cholera. An operational community-based surveillance system will be implemented to detect and report new suspected cholera cases, in collaboration with the Ministry of Public Health's community health workers. Volunteers will disseminate messages using virtual and phone-line tools such as social media and SMS. When security considerations allow, activities will be conducted face-to-face at the IDP sites to ensure individuals are well-informed about key public health risks and can take appropriate measures to mitigate them.

The HRCS, already active through its ambulance service, will expand its services and ensure the provision of quality emergency care. It will strengthen general communication about the services offered to reach a greater number of people. The National Society will closely coordinate with the relevant technical directorates of the Ministry of Public Health and Population, Ministry of Social Affairs, Civil Protection Directorate, and PAHO/WHO. Identifying the most vulnerable people in the camps will enable the provision of psychosocial support to those in need, based on the Federation's Psychological Support Program (PSP) curriculum to standardize its actions. Additionally, psychological first aid services will be offered to IDPs in the IDP sites and to HRCS volunteers. An evaluation of the services available in the field will establish a reference and networking system.

**WATER, SANITATION AND HYGIENE (WASH):**
The National Society aims to reach at least 7,500 people with WASH-related activities, including:
- Installation of hand washing stations
- Distribution of drinking water and raw water
- Distribution of cleaning and sanitation materials in the selected IDP sites to clean and sanitize them
- Purchase and distribution of hygiene kits (1 per family) and menstrual/dignity kits
- Mass awareness-raising session on hygiene promotion
- Training for HRCS volunteers on Hygiene promotion
Based on initial needs identified by the branches, access to drinking water is essential. Efforts will be made to improve access to water by distributing drinking water and raw water. In addition, to reduce the risk of cholera, waterborne diseases and vector breeding sites, community hand washing facilities will be constructed and community surveillance activities will be implemented. The DREF will also cover the distribution of family hygiene kits and menstrual kits in IDP sites. The majority of WASH activities will take place in the IDP sites targeting internal displaced people. The implementation of water purification processes will be carried out directly in the IDP sites.

PROTECTION, GENDER, AND INCLUSION:
The National Society aims to assist 5,000 people with PGI-related activities, including:
- RFL services for IDPs
- Training on RFL for HRCS staff and volunteers
- Awareness session on SGBV-PSEA message prevention (especially on the IDPs sites).
- Training for HRCS volunteers on SGBV-PSEA
- Training for the HRCS staff on Child safeguarding policy/Child Safeguarding Risk Analysis
- Creation of safe referral mechanisms, with focus on survivors

As a cross-cutting priority, the National Society aims to enhance the capacity of its staff and volunteers in safeguarding against sexual exploitation and abuse to implement the minimum requirements at the operational level. Awareness-raising campaigns will also be conducted within communities. The operation will ensure a timely and appropriate response to address the needs of the targeted groups. To ensure that this operation upholds standards of quality and dignity, support on the PGI strategy will be given as well as specialized briefings for dedicated personnel and volunteers on child safeguarding to minimize risks to affected children, particularly unaccompanied and undocumented children, will be provided.

This operation will integrate systems such as a feedback and complaint reception mechanism, along with the HRCS information management mechanisms. This recommendation builds on the previous success of the feedback hotline previously implemented, which provided vital insights into the needs and concerns of affected populations. Training staff in the use of these mechanisms will be incorporated in the PGI training and will ensure that they are effectively implemented and can contribute to a more responsive and inclusive aid strategy, aligning with CEA to enhance transparency and trust between the HRCS, humanitarian actors and the community.

Also, training of volunteers on RFL and PGI will be done to enhance the capacity of volunteers on RFL service provision. Also phone calls as well as assistance and protection services, along with printing of PGI and RFL material, will be provided.

COMMUNITY, ENGAGEMENT AND ACCOUNTABILITY (CEA):
The National Society aims to assist 5,000 people with CEA-related activities, including:
- Implementation of the HRCS Hot line
- Meetings in the IDP camps with IDPs
- Development of the lessons learned workshop with staff and volunteers
- Dissemination of information and key messages to internally displace population in the IDP site

The National Society prioritizes a community participation and accountability approach in all its activities. This approach is implemented by all areas of work and is continuously monitored and advised by the National Society's National Communication Department. Among the activities prioritized in the early response and recovery strategy are those related to community participation in the different stages of the processes, the dissemination of information and key messages and the establishment of feedback mechanisms at the community level. Communities that participated in interviews during rapid assessments and during the distribution of relief items will be continuously consulted on the usefulness and proposals for improvement. Additionally, feedback mechanisms and satisfaction surveys will be carried out to strengthen the National Society's interventions in the future.

NATIONAL SOCIETY DEVELOPMENT (NSD):
Strengthening the capacity of staff and volunteers of the HRCS is of utmost importance to ensure an effective response. Given the current security situation, the National Society component has a strong security focus. It will include a training on Operational Security for all volunteer and staff. This training will cover the development of security protocols for this operation. Also, a second training on Radio and Security will be conducted, to ensure that personnel can communicate effectively and maintain safety in volatile environments. Additionally, a workshop will be held to disseminate the Stay Safe protocols, operational security procedures and trainings, ensuring that all volunteers and staff are well-prepared before reaching the IDP sites. The trainings and dissemination workshop will be conducted by the IFRC Security Delegate who will as well be in charge of the oversight of security plans and strategy of the operation. During the trainings and workshop, emphasize will be done on ensuring security protocol and measures during the implementation of CVA activities to ensure the security of volunteers, staff and beneficiaries. Also, the national security coordinator will closely guide and support the security of the CVA activities to be implemented day to day.

As such, continuous refresher sessions will be provided in the field as needed. In response to the heightened security risks, the IFRC will
ensure that the three surge personnel deployed have a strong security background and properly trained before deploying to the field to support the HRCS safety plans and ensure their own safety. The surge personnel will be based in the Dominican Republic and could potentially travel to Haiti if the security situation improves, and the Security Coordinator clears their deployment to Haiti.

To strengthen National Society capacity, technical refresher sessions for field personnel will be provided as needed, including Health, WASH, RFL, CEA and PGI. Also, two virtual trainings will be conducted by ARO for a small group of volunteers and staff on communication to increment the capacity of communications in emergency of the HRCS.

At the end of the operation a lesson learned workshop with volunteers and staff is planned in this section, which will integrate insights from recent operations to improve future response strategies.

MULTISECTORIAL NEEDS ASSESSMENT:
A significant aspect of this DREF operation entails conducting a multisectoral needs analysis, encompassing risk assessment for operational security in the two communes. This is crucial for ensuring the comprehensive and complementary nature of the Movement’s response. The multisectoral needs assessment aims to evaluate the situation across various sectors, including Health, WASH and PGI/RFL, to inform the planned actions of the National Society. Depending on the results of the assessment, the operation could be scaled up through an operations update.

The intervention in Delmas and Tabarre is critical due to their strategic and humanitarian significance within Port-au-Prince. Delmas serves as a vital hub for commerce and transit, heavily impacted by gang control, disrupting access to essential services and leading to substantial displacement. Similarly, Tabarre, located near key infrastructure such as the Toussaint Louverture International Airport, is essential for logistical movements related to humanitarian assistance, though gang dominance complicates access to aid.

Both areas host internally displaced populations living in challenging conditions, struggling for safety amidst ongoing gang conflicts. Moreover, the humanitarian needs in Port-au-Prince are escalating, with only 35% of all IDP sites currently receiving assistance, highlighting significant gaps in coverage.

The Haitian Red Cross (HRC) has identified three IDP sites where it can potentially enhance its interventions. This positions them to address the dire needs in these areas, where the majority of IDP sites are still without adequate humanitarian support. Addressing the needs in these areas is essential not only to provide immediate relief but also to stabilize critical areas that influence the broader stability and infrastructure of the capital.

Targeting Strategy

Who will be targeted through this operation?

This intervention will target the most affected people, especially those who have been displaced, and who are currently in IDPs sites at Lycée Jean Marry Vincent in Tabarre, ISBACOM, situated at Delmas 19th and Eglise Primitive at Delmas 19th. These 3 sites have been chosen due to the high humanitarian needs identified and the accessibility of the HRCS in terms of security.

Special attention will be given to affected groups such as women, migrants, children, and the elderly. The National Society has networks at the community level that allow it to identify these groups and collaborates with migrant care institutions that facilitate the identification of this specific population.

The rationale behind targeting these specific groups is to ensure that aid reaches those who are most at risk and least able to recover from the disaster on their own. By prioritizing affected households, IDP sites, and people with specific needs, the National Society aims to provide targeted and tailored support, maximizing the impact of the DREF operation and promoting equitable relief work.

For the current intervention, the HRC has planned a more integral help to the families, but during this initial phase they will be reached only through relief actions and delivery of kits. The multisectoral assessment needs will indicate the need and the viability of scaling up, as well as the viability of delivering cash after an operational update.

Despite the security situation and challenges in Delmas and Tabarre in Port-au-Prince, the HRCS remains committed to operating in these areas ensuring assistance to the most vulnerable and needed people. The decision is based on several key justifications:

- High Concentration of Displaced Persons: Delmas and Tabarre host many displaced individuals due to ongoing instability. Moving operations could leave this vulnerable population underserved, contradicting the HRC’s responsibility to leave no one behind.
- Established Infrastructure and Networks: The HRC has well-established infrastructure, logistics, and networks in Port-au-Prince, enabling them to provide aid effectively. Relocating would mean losing access to these crucial resources.
- Collaborative Efforts: The HRCS is closely coordinate with other local and international organizations in Port-au-Prince, maximizing the efficiency and effectiveness of aid efforts.
Inclusive Assistance: The decision aligns with international humanitarian principles, delivering aid based on need and ensuring marginalized groups aren't excluded.

Community Trust and Engagement: The HRCS has developed strong relationships with local communities, fostering trust and cooperation that bolster effective aid delivery.

Advocacy for Marginalized Groups: Operating in Delmas and Tabarre allows the HRCS to directly witness the plight of displaced persons, strengthening advocacy for these vulnerable groups and securing greater international support.

Adaptability and Risk Mitigation: The HRCS has adapted its security protocols and operational procedures to minimize risks in these areas while remaining flexible to rapidly respond to evolving security assessments.

Targeting IDPs in Delmas and Tabarre aligns with the Haitian Red Cross's humanitarian responsibility to leave no one behind. The organization aims to maximize its impact by leveraging existing resources, ensuring comprehensive aid delivery, and providing strategic visibility to marginalized groups while adapting security protocols and operational procedures to minimize security risks.

**Explain the selection criteria for the targeted population**

To effectively reach 11,670 people directly targeted by this DREF, the National Society will work with local authorities, community leaders and relevant stakeholders with knowledge of the affected areas and populations. A multisectoral assessment will be carried out to identify households and communities requiring immediate assistance. Selection criteria will be discussed and updated in consultation with local authorities and affected IDPs as necessary, as other humanitarian actors are also in the area. HRCS will ensure coordination and no duplication of efforts.

Given the scale of the displacement, selection amongst IDPs may still be required. In this case priority will be given based on vulnerability criteria including household size, number of children under 5 years old, presence of pregnant and/or breastfeeding women, old people, people with reduced mobility, women heads of households, single parent households, and unaccompanied children.

The HRCS volunteers will also explain the targeting/selection criteria to the people concerned. They will also explain to the IDPs how people will be selected to receive assistance.

**Total Targeted Population**

<table>
<thead>
<tr>
<th>Category</th>
<th>Number</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Women</td>
<td>4,458</td>
<td>80%</td>
</tr>
<tr>
<td>Girls (under 18)</td>
<td>1,850</td>
<td>20%</td>
</tr>
<tr>
<td>Men</td>
<td>3,649</td>
<td>10%</td>
</tr>
<tr>
<td>Boys (under 18)</td>
<td>1,713</td>
<td></td>
</tr>
<tr>
<td>Total targeted population</td>
<td>11,670</td>
<td></td>
</tr>
</tbody>
</table>

**Risk and Security Considerations**

Please indicate about potential operation risk for this operations and mitigation actions

<table>
<thead>
<tr>
<th>Risk</th>
<th>Mitigation action</th>
</tr>
</thead>
<tbody>
<tr>
<td>Media pressure in a context with limited public comms and media management capacities at national and cluster levels.</td>
<td>Develop and share key media messages as well as support the HRCS with virtual communication support from the cluster and ARO.</td>
</tr>
<tr>
<td>Increment of critics against the Red Cross' operations in Haiti.</td>
<td>Revision and dissemination of reactive lines.</td>
</tr>
<tr>
<td>Difficulty in transporting and delivering humanitarian aid to the affected population due to fuel shortages.</td>
<td>- The IFRC has a Strategic Fuel Reserve that secure and maintain fuel reserves specifically for emergency cases when no fuel is available.</td>
</tr>
<tr>
<td></td>
<td>- The HRCS will utilize route optimization software to plan the most efficient routes for aid delivery, minimizing fuel consumption and maximizing the number of deliveries per trip.</td>
</tr>
<tr>
<td>Limited access to the areas with affected population due to the deterioration of the security situation</td>
<td>- NS with the support of IFRC will update its Security Plan and will constantly assess the situation to implement additional security mitigation measures.</td>
</tr>
</tbody>
</table>
- IFRC trained the NS Security Focal Point to adapt and respond to the current need.
- Information sharing with support from IFRC and ICRC

Safety risk for humanitarian actors in the field due to cholera misinformation

- The operation has a strong CEA component to ensure community members understand the role of humanitarian actors and that volunteers know how to address rumors related to cholera.
- Volunteers will be trained in Operational Security.

Continuity of movement and change of IDP sites due to fear of violence or actual violence.

- Through coordination meetings, visits in the field and IDP movement monitoring, humanitarian actors are assessing where IDPs are going and are deciding where to set up settlement camps in case of further displacement and in case of growing numbers. The operation will target IDPs based on coordination with gov & other stakeholders to cover areas where they may move to. IFRC and the National Society remain alert to possible scale-up needs as numbers increase & response plans are coordinated with external partners and the government.

Operational capacity constraints

- The DREF will provide remote support from IFRC in the areas of monitoring, implementation, security, communications and technical support remotely until security status improve. IFRC will be able to travel to support the NS when security situation improves.
- 3 surge personnel will be deployed in Dominican Republic to support the operation until the security situation improves and are cleared to travel to Haiti by the Security Coordinator.

NS and IFRC members (staff and volunteers) could be target of kidnaping, robbery and extortion.

- NS with the support of IFRC will update its Security Plan and will constantly assess the situation to implement additional security mitigation measures.
- The NS with the support of IFRC will implement a communication campaign for the protection of the humanitarian mission

Please indicate any security and safety concerns for this operation

DREF’s activities will take place under the constraints of a security environment that remains volatile. As a result, all programs develop detailed work plans that can be adapted to different scenarios and respond more effectively to changes in the operating environment. Teams, including those of the Red Cross, are operating with reduced staffing levels, and due diligence measures are being taken to ensure their safety. A risk matrix was prepared in the initial operational plan, covering all potential risks, their impact and associated mitigation measures, and is still valid.

Has the child safeguarding risk analysis assessment been completed?

No

Planned Intervention

**Multi Purpose Cash**

**Budget:** CHF 167,205  
**Targeted Persons:** 2,500

**Indicators**

<table>
<thead>
<tr>
<th>Title</th>
<th>Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>Market and Feasibility Study conducted</td>
<td>1</td>
</tr>
</tbody>
</table>
### Health

**Budget:** CHF 70,184  
**Targeted Persons:** 2,550

#### Indicators

<table>
<thead>
<tr>
<th>Title</th>
<th>Target</th>
</tr>
</thead>
<tbody>
<tr>
<td># of people reached by the HRCS ambulance services (SAOM – Service Ambulancier Ouest Metropolitain)</td>
<td>500</td>
</tr>
<tr>
<td># of people reached with psychological support</td>
<td>500</td>
</tr>
<tr>
<td># of people reached through awareness sessions implemented in the IDP sites (key messages on cholera)</td>
<td>1,500</td>
</tr>
<tr>
<td># of people trained on first aid, EVC and PSS</td>
<td>50</td>
</tr>
</tbody>
</table>

#### Priority Actions

- Community based surveillance to detect and report suspected cholera case  
- Psychological support to IDP and frontline workers  
- Mass sensitization on key messages related to cholera using others tools: Social media, SMS (Natcom /Digicel)  
- Door-to-door health awareness/sensitization on health emphasizing Cholera prevention messages.  
- Trainings on first aid / PSS and EVC focusing on Cholera and Community base-surveillance  
- Revision, production and distribution of IEC materials for community awareness activities

### Water, Sanitation And Hygiene

**Budget:** CHF 193,830  
**Targeted Persons:** 7,550

#### Indicators

<table>
<thead>
<tr>
<th>Title</th>
<th>Target</th>
</tr>
</thead>
<tbody>
<tr>
<td># hand washing stations installed by the operation</td>
<td>9</td>
</tr>
<tr>
<td># of household reached with essentials hygiene items</td>
<td>1,100</td>
</tr>
<tr>
<td># of sanitation kits delivered (HTH, ORS and Soap products)</td>
<td>10</td>
</tr>
<tr>
<td># of people reached by hygiene promotion activities by HRCS volunteers</td>
<td>7,500</td>
</tr>
<tr>
<td># of volunteers trained on Hygiene promotion</td>
<td>50</td>
</tr>
<tr>
<td>% of families satisfied with access to water</td>
<td>80</td>
</tr>
</tbody>
</table>
# of construction of wooden rooms and tarpaulins for sanitary areas 2

# of women reached with essentials menstruation hygiene items 750

**Priority Actions**

- Installation of hand washing stations
- Distribution of menstrual kits.
- Distribution of drinking water and raw water
- Distribution of sanitation materials
- Purchase and distribution of family hygiene kits
- Mass awareness-raising session on hygiene promotion
- Training for HRCS volunteers on Hygiene promotion

**Protection, Gender And Inclusion**

**Budget:** CHF 22,365

**Targeted Persons:** 2,460

**Indicators**

<table>
<thead>
<tr>
<th>Title</th>
<th>Target</th>
</tr>
</thead>
<tbody>
<tr>
<td># of people reached by awareness-raising sessions on SGBV-PSEA message prevention (specially on the IDPs sites)</td>
<td>2,000</td>
</tr>
<tr>
<td># of volunteers reached on the Code of conduct, PSEA, PGI concept for the staff and HRCS volunteers</td>
<td>30</td>
</tr>
<tr>
<td># of SVBG or other protection needs referred cases</td>
<td>200</td>
</tr>
<tr>
<td># of National Society PGI strategic documents in place for this operation</td>
<td>1</td>
</tr>
<tr>
<td># of HRCS volunteers trained on PGI and RFL</td>
<td>30</td>
</tr>
<tr>
<td># of free calls services/RFL services provided to IDPs</td>
<td>300</td>
</tr>
</tbody>
</table>

**Priority Actions**

- Awareness-raising sessions on SGBV-PSEA message prevention (on the IDPs sites).
- Training for HRCS volunteers on SGBV-PSEA
- Support the National Society on the PGI Strategy and the Child Safeguarding policy
- Training on RFL for HRCS staff and volunteers
- RFL service provision
- Awareness-raising sessions on RFL (on the IDPs sites)
- Creation of safe referral mechanisms, with focus on survivors

**Community Engagement And Accountability**

**Budget:** CHF 12,780

**Targeted Persons:** 5,000

**Indicators**

<table>
<thead>
<tr>
<th>Title</th>
<th>Target</th>
</tr>
</thead>
<tbody>
<tr>
<td># of IDPs reached through dissemination of information and key messages</td>
<td>5,000</td>
</tr>
<tr>
<td># of HRCS hotlines running</td>
<td>1</td>
</tr>
<tr>
<td>% of community feedback received that has been addressed</td>
<td>80</td>
</tr>
</tbody>
</table>
# of community discussion held during the intervention with local leaders and representative per districts | 6
---|---
# of lessons learned workshop with staff and volunteers | 1

**Priority Actions**

- Implementation of the HRCS Hotline
- Meetings in the IDP camps with IDPs
- Development of the lessons learned workshop with staff and volunteers
- Dissemination of information and key messages to internally displace population in the IDP site

**Secretariat Services**

**Budget:** CHF 85,200

**Targeted Persons:** 0

**Indicators**

<table>
<thead>
<tr>
<th>Title</th>
<th>Target</th>
</tr>
</thead>
<tbody>
<tr>
<td># of surge deployments</td>
<td>3</td>
</tr>
</tbody>
</table>

**Priority Actions**

- Surge deployment of an Ops Manager for 4 months.
- Surge deployment of a Security Coordinator for 3 months.
- Surge deployment of a CVA Coordinator for 2 months

**National Society Strengthening**

**Budget:** CHF 135,127

**Targeted Persons:** 0

**Indicators**

<table>
<thead>
<tr>
<th>Title</th>
<th>Target</th>
</tr>
</thead>
<tbody>
<tr>
<td># of volunteers insured</td>
<td>100</td>
</tr>
<tr>
<td># of volunteers involved in the operation</td>
<td>100</td>
</tr>
<tr>
<td># of volunteers who have received support in terms of reinforcement (visibility equipment and materials, etc.)</td>
<td>100</td>
</tr>
<tr>
<td># of volunteers and staff who have received the virtual fast training on storytelling</td>
<td>10</td>
</tr>
<tr>
<td># of volunteers and staff who have received the virtual fast training on media management</td>
<td>10</td>
</tr>
<tr>
<td># of volunteers and staff who have received the Operational Security training</td>
<td>109</td>
</tr>
<tr>
<td>% of volunteers and staff who know and have access to Stay Safe protocols and operational security procedures</td>
<td>100</td>
</tr>
<tr>
<td># of volunteers and staff who have received Radio training and security</td>
<td>109</td>
</tr>
</tbody>
</table>

**Priority Actions**

- Office costs
- Monitoring visits
- Repair, maintenance of vehicles
- Hiring of 7 profiles (9 national staff)
- Insurance for 100 volunteers
- Visibility
- Other equipment for volunteers.
- Develop a communications self-assessment and plan for development.
- Virtually conduct a fast training on storytelling about the operation and HRCS principled humanitarian action.
- Virtually conduct a fast training on media management for the NS spokespersons at national and local levels.
- Operational Security training
- Radio training and security
- Dissemination of Stay Safe protocols, operational security procedures and trainings.

About Support Services

How many staff and volunteers will be involved in this operation. Briefly describe their role.

109 National Society staff and volunteers (9 staff and 100 volunteers) are involved in the response.

For the ambulance service, volunteers will be assigned to ambulatory teams of first aiders providing on-site emergency care in displaced persons camps. In addition, the Haitian Red Cross's West Metropolitan Ambulance Service will continue to transport emergency cases to health facilities for the general population as part of its routine activities. The 109 number is still operational as part of the Haitian Red Cross ambulance service.

As part of psychological first aid activities, support groups with Haitian Red Cross staff and front-line volunteers will be set up and deployed in the project's target displacement sites. Volunteers trained in psychosocial support will carry out psychosocial support activities with IDPs, particularly direct victims of violence, SVBG survivors, children, and adolescents, as well as the elderly and people with reduced mobility. Animation sessions, games, post-traumatic stress management and discussion groups will also be carried out by volunteers. A case referral and networking system psychological support will also be set up.

Volunteers who have received training sessions on epidemic control and community-based surveillance will be mobilized to set up surveillance committees to detect and report new cases of cholera, especially in sites dedicated to displaced people. In addition, a group of volunteers will be mobilized to follow up on mass awareness raising which will be implemented through the sharing of key messages related to cholera. For this awareness campaign, the Haitian Red Cross will use online tools, such as social media (Facebook, X, CRH website). Furthermore, contracts will be signed with the two telephone companies based in Haiti (Natcom/Digicel) to allow the national company to share messages on cholera by sending SMS messages.

Regarding activities in Protection, gender, and inclusion, HRCS volunteers will be mobilized to set up awareness sessions on the prevention of SGBV-PSEA messages, particularly on IDP sites). Furthermore, a risk analysis in terms of child protection will be implemented in the displaced sites as part of the implementation of activities with children.

Regarding WASH activities, HRCS volunteers will be mobilized to implement awareness sessions on Hygiene Promotion, specifically in sites for displaced people. In addition, volunteers will be responsible for demonstrating the use of water treatment products at home, carrying out activities related to the use of latrines, and holding community meetings with the aim of exchanging ideas. on the importance of health and hygiene at the sites of displaced people. In addition, volunteers will be responsible for setting up RFL services, also feedback mechanisms will be put in place by the CEA team of the National Society.

The costs of NS personnel, representing around 12% of the total budget, are necessary to support key roles such as the NS DREF Coordinator, Security Coordinator, Field Coordinator, CVA Officer, PMER Officer, Accountant, and drivers. These key support staff members are necessary to ensure smooth and efficient management of the operation by coordinating logistics, handling financial transactions, and overseeing field activities. Their combined efforts provide critical transportation, data monitoring, and resource allocation services ensuring the necessary rotation under the current security situation and enabling timely aid delivery. Additionally, the inclusion of a security coordinator ensures that risks are effectively mitigated, supporting the safety of staff and beneficiaries. Given the complexity and scale of the operation, these roles are crucial for safer operations and successful planning, managing risks of implementation delay and ensuring efficient aid delivery.

The following national positions are considered for this operation:
- NS DREF Coordinator: This coordinator oversees the implementation of the Disaster Relief Emergency Fund (DREF) operation, aligning it with strategic objectives, managing resources, and coordinating with internal and external stakeholders.
- Field Coordinator: The field coordinator manages daily activities, linking field teams to central management and ensuring that field operations align with strategic plans.
- Security Coordinator: The security coordinator assesses risks, implements safety protocols, and advises field teams to maintain safe working conditions. They also conduct briefings and provide risk management strategies.
Will surge personnel be deployed? Please provide the role profile needed.

As long as the Port-au-Prince international airport remains closed and the security situation is not clear by the Security Coordinator, deploying surge personnel to Port-au-Prince is not possible. However, there have been discussions about the need to provide additional French-speaking technical support. As such, this support would be provided by three surge personnel to be deployed in the Dominican Republic:

The following surge positions have been identified:
- Surge deployment of an Ops Manager (4 months)
- Surge deployment of a Security Coordinator (3 months)
- Surge deployment of a CVA Coordinator (2 months)

It is worth noting that although the profiles will be based in Dominican Republic, all the three profiles will focus solely on the implementation of the DREF Operation in Haiti, ensuring that their responsibilities are not duplicated with other efforts being implemented in the Dominican Republic to ensure that resources are used efficiently.

Given the complex security situation in Haiti, the surge security coordinator role will provide specialized, hands-on expertise directly related to this specific crisis. Though temporary, this position bridges current gaps in security management and supports and strengthens the national security coordinator’s local capacity who will remain until the operation ends. Additionally, it assists the IFRC security delegate with the implementation of security training, dissemination workshops, and strategic improvements to the security component for the broader operation.

This role complements the longer-term positions of the national security coordinator and the IFRC security delegate. By offering short-term specialized support during the initial stage of the operation strengthening their capabilities and helping build a stronger security framework. The role, and along the IFRC Security Delegate, also coordinates with the Regional Security Coordinator for ARO and the Geneva Security Unit to ensure alignment with international standards while adapting strategies to local realities.

Ultimately, the surge security coordinator will fortify the security management structure by enhancing the local expertise and operational character of the national security coordinator, and the international knowledge and strategic and managerial role of the IFRC security delegate. Together, they ensure that the local operations teams have the guidance and support needed to effectively manage the security environment, ultimately providing a proactive response to the evolving security challenges.

If there is procurement, will it be done by National Society or IFRC?

Given the operational constraints to import goods, local procurement has been identified as the most viable strategy to mitigate several risks effectively. The primary airport in Port-au-Prince is currently closed and controlled by gangs, severely limiting our ability to safely receive and dispatch international shipments. Furthermore, transit routes from operational airports to Port-au-Prince are compromised by gang activity, posing high risks of delays, customs retention, and potential loss or tampering with goods.

To enhance efficiency and ensure safety, the Haitian Red Cross (HRC) has conducted extensive market research and identified reliable local vendors capable of supplying the necessary goods and materials. This proactive approach confirms the availability of required items within the country, ready for prompt delivery that meets both IFRC and Sphere quality standards. Additionally, it’s crucial to note that the HRC is well-versed in IFRC procurement and logistics procedures, ensuring adherence to high standards.

The Americas Regional Office (ARO) Regional Logistic Unit will provide close support throughout the process, further ensuring the quality of goods and adherence to procurement protocols. Opting for local procurement not only facilitates timely and secure aid delivery but also supports the local economy, aligning with strategic objectives to effectively navigate Haiti’s complex logistical landscape while maintaining compliance with international quality standards.

How will this operation be monitored?

To ensure effective monitoring and evaluation of the operation, the IFRC will provide ongoing support to the Haiti Red Cross Society. A dedicated Planning, Monitoring, Evaluation, Reporting (PMER) officer from the National Society will be responsible for conducting field-
level monitoring. This will involve regular visits to displacement sites identified for the project, with monitoring visits scheduled twice a month and additional visits during specific field activities. These sites will also be closely watched to assess the impact and efficiency of the services provided, such as health services and WASH activities. Updated data shared weekly with the National Society by the Protection office and IOM on the displaced sites will serve as baseline data for beneficiary selection.

Furthermore, Post-Distribution Monitoring (PDM) surveys will be conducted following the distribution of hygiene kits to evaluate the effectiveness of the interventions and identify areas for improvement. This approach ensures a robust framework for continuous feedback and adjustment, enhancing the overall efficacy and responsiveness of the humanitarian response. Additionally, the integration of community feedback mechanisms such as the hotline could further enrich the monitoring process by capturing real-time, on-ground insights directly from the beneficiaries, thereby aligning subsequent interventions more closely with the community's evolving needs.

To address security concerns, the operation will incorporate several strategies to ensure the safety of staff and volunteers during monitoring activities. Security assessments will be conducted prior to each field visit to understand and mitigate potential risks. Coordination with local authorities and community leaders will be strengthened to ensure safe access to all project sites. The PMER officer and other field staff will receive security training, including risk assessment and management, secure movement, and emergency response. Use of technology for teams and secure communication channels will also be implemented to maintain constant contact with field teams during their missions. This comprehensive approach to security will ensure that monitoring and evaluation activities can be conducted safely and effectively, even in challenging environments.

Please briefly explain the National Societies communication strategy for this operation

The communication strategy includes direct information activities at displaced sites to ensure affected populations are well-informed about ongoing humanitarian services such as hygiene kit distribution, ambulance services, psychosocial support, and Restoring Family Links activities. Additionally, the Haitian Red Cross plans to expand its outreach through targeted awareness sessions on social media platforms like Facebook, Instagram, X, and their official website. These activities and results will be documented and shared by the communications team after approval from Governance, prominently featuring the emblems of the Haitian Red Cross and the IFRC.

To further enhance its internal communication capabilities during emergencies, the Haitian Red Cross will also conduct two key virtual trainings supported by IFRC ARO staff. The first training focuses on media management, equipping participants with skills to handle media interactions effectively, manage public relations, and maintain control of the narrative during crises. The second training, Virtual Fast Training on Storytelling for Emergency Operations, aims to teach participants how to capture and communicate compelling human stories that highlight the impact of their work and the resilience of the communities they serve. These initiatives are designed to bolster the National Society’s ability to conduct effective and empathetic communications, ensuring that both the media and the public remain well-informed and engaged with their critical humanitarian efforts.
# DREF Operation

MDRHT021 - Haiti Red Cross Society

Haiti: Complex Emergency

## Operating Budget

<table>
<thead>
<tr>
<th>Planned Operations</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Shelter and Basic Household Items</td>
<td>0</td>
</tr>
<tr>
<td>Livelihoods</td>
<td>0</td>
</tr>
<tr>
<td>Multi-purpose Cash</td>
<td>167,205</td>
</tr>
<tr>
<td>Health</td>
<td>70,184</td>
</tr>
<tr>
<td>Water, Sanitation &amp; Hygiene</td>
<td>193,830</td>
</tr>
<tr>
<td>Protection, Gender and Inclusion</td>
<td>22,365</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>12,780</td>
</tr>
<tr>
<td>Environmental Sustainability</td>
<td>0</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Enabling Approaches</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Coordination and Partnerships</td>
<td>0</td>
</tr>
<tr>
<td>Secretariat Services</td>
<td>85,200</td>
</tr>
<tr>
<td>National Society Strengthening</td>
<td>135,127</td>
</tr>
</tbody>
</table>

**TOTAL BUDGET** 686,691

*all amounts in Swiss Francs (CHF)*

---

**Click here to download the budget file**
Contact Information

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

**National Society contact**: Mr. Guetson Lamour, President of Haiti Red Cross Society, president@croixrouge.ht, +509 34915147

**IFRC Appeal Manager**: Elias Ghanem, Head of Delegation, elias.ghanem@ifrc.org

**IFRC Project Manager**: Suzanne Bernard, Coordinator, Health and Care, suzanne.bernard@ifrc.org

**IFRC focal point for the emergency**: Suzanne Bernard, Coordinator, Health and Care, suzanne.bernard@ifrc.org

**Media Contact**: Jacob Charles, Communications Focal Point, j.charles@croixrouge.ht, +50934159817

[Click here for the reference]