



Haiti earthquake operation

Summary of the plan of action

Table of contents

Background 1

Overview 2

Pillar 1: the earthquake operation 4

Pillar 1: outcomes 5

Pillar 1: outputs by program 6

Pillar 2: disaster preparedness 8

Pillar 2: outcomes and outputs 8

Pillar 3: National Society development 9

Pillar 3: outcomes and outputs 9

Linkages with Haiti's action plan for national recovery and development 10

Integrating programming for affected people 10

Financial overview of the plan of action 11

How we work 12

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Background

This document reflects a summary of the revised plan of action with a total budget of 314,329,971 Swiss francs. It articulates operational adjustments to the emergency appeal initially launched on 26 January 2010, which was then revised to 218.4 million Swiss francs on 9 February 2010 (the detailed plan of action is available upon request).

Montreal declaration

In February 2010, Red Cross and Red Crescent partners involved in the Haiti recovery operation gathered in Montreal to devise a shared strategy and identify common priority areas. Collectively, Red Cross and Red Crescent leaders committed to:

- strengthening the capacity of the Haitian Red Cross Society, recognizing its crucial role within Haiti's often fractured society
- providing curative health services for approximately 500,000 people for the critical first six months of the operation, as well as longer-term health support services
- providing approximately 30,000 families with appropriate transitional shelter
- complementing health and shelter assistance with water and sanitation for 30,000 families
- contributing meaningfully to protect the most vulnerable during Haiti's long and difficult recovery and reconstruction

Red Cross Red Crescent plan of action

A Red Cross Red Crescent plan of action was developed and presented at the Red Cross Red Crescent New York Summit in April 2010. This plan was structured around three pillars:

The three pillars approach		
Earthquake operation Pillar 1	Disaster preparedness Pillar 2	Strengthening the Haitian Red Cross Society Pillar 3
Support affected households with their immediate post-earthquake needs and help them move towards recovery.	Introducing key community-based disaster risk reduction and disaster preparedness measures, bearing in mind the potential impact that the rains and hurricanes can have on an annual basis upon this already weakened nation.	Focusing on the responsibility that Red Cross Red Crescent partners and the International Federation of Red Cross and Red Crescent Societies have for supporting and strengthening the Haitian Red Cross Society.

The International Federation of Red Cross and Red Crescent Societies plan of action

The International Federation of Red Cross and Red Crescent Societies (IFRC) plan of action comprises only part of the much broader Red Cross Red Crescent plan of action. It includes only multilateral activities, i.e., activities that will be delivered by the Haitian Red Cross Society with IFRC support, and with funding received from more than 90 National Red Cross and Red Crescent Societies.

The IFRC's plan and budget has been designed with the funding commitments and intentions of National Societies in mind. At the April 2010 New York Summit, there was a clear indication of interest from the 25 attending National Societies in providing a further (and estimated) 100 million Swiss francs to the IFRC in addition to the approximately 200 million Swiss francs that had already been contributed¹. The IFRC's plan of action calls for 314 million Swiss francs with 85 million Swiss francs being sought².

Overview

Cooperation among Red Cross Red Crescent actors has been essential to the Haitian Red Cross Society's (HRCS) ability to assume a lead role in addressing the staggering needs generated by the earthquake on 12 January 2010. In the seven month period following the earthquake, the HRCS with the support of delegates, staff and volunteers originating from some 59 Red Cross Red Crescent National Societies, 21 Emergency Response Units (ERUs) and other Red Cross Red Crescent emergency response teams from Mexico, Colombia, South Korea and Qatar have worked together to deliver urgently needed water, relief items (non-food items and emergency shelter), and health and sanitation services to hundreds of thousands of individuals in affected communities throughout Port-au-Prince and other affected areas. As the operation transitions into longer term programming, the IFRC will continue to work with the HRCS to provide assistance to affected communities, and help Haiti rebuild so local response capabilities are better than before. The programmes described in this plan of action have been developed in consultation with the HRCS based on needs assessments in the affected communities.

Pillar 1: the earthquake operation

Relief. Increasingly, and understandably, the attention of the Haitian Government and the international and humanitarian communities are turning towards the considerable task of recovery and reconstruction. There remains, however, staggering basic humanitarian needs amongst Haiti's displaced. The IFRC will continue to provide basic relief until the end of 2010 in an attempt to protect the basic dignity of those living in settlements. This includes the distribution of traditional non-food items and replacement of emergency shelter items that rapidly deteriorate in Haiti's harsh climate.

Shelter. The shelter needs in Haiti are unprecedented. The earthquake displaced an estimated two million people with 1.3 million people finding refuge in settlements across the affected region in the months that followed. It was clear from the outset that before permanent solutions could be found, Haiti's earthquake survivors would need considerable emergency shelter assistance as well as support to bridge the difficult transitional period of recovery.

In the six months following the earthquake, Red Cross emergency shelter distributions reached 125,000 families with 233,000 tarpaulins and more than 9,000 family tents. A second round of shelter distribution, targeting 80,000 families, began in August.

Whilst addressing emergency shelter needs, the IFRC has also started a programme that will provide 7,500 families with safe and improved shelter coupled with improved access to water and sanitation. In addition to building wooden transitional shelters, the IFRC will support families returning to their homes if the location is safe. The IFRC will also help families return to their plots once cleared of rubble, and help repair homes that can be salvaged.

1. The pledging exercise was carried out during the New York Summit in the weeks that followed. The final overview, shared with all participants on 31 May, includes information provided by 18 National Societies (American RC, Austrian RC, Belgium RC, British RC, Canadian RC, Colombian RC, Danish RC, French RC, German RC, Hong Kong RC, Icelandic RC, Italian RC, Japanese RC, Korean RC, Netherlands RC, Norwegian RC, Spanish RC and Swedish RC) and further multilateral pledges received by the IFRC from a wide number of National Societies

2. These figures will change regularly and are accurate to 20 September.

Health and care. Haiti's health indicators before the earthquake were amongst the worst in the Americas. Haiti had the region's highest rates of infant and maternal mortality, the worst malnutrition and the highest HIV and AIDS rates. The country also had a weak public health system with only 20 per cent of health care previously being delivered by the state. For many of Haiti's affected, the earthquake response represents the first time that they have had access to formal and free health care.

The IFRC's initial focus on supporting curative health services for the first year of the response will give way to a focus on community mobilization and behaviour change, supporting the long-term objectives of the Haitian Red Cross Society which include bolstering its HIV and AIDS capacity, and strengthening its existing blood donor recruitment programme.

Water and sanitation. Everyday more than 300,000 people in Port-au-Prince receive safe water from Red Cross Red Crescent partners. This support, coupled with extensive sanitation and hygiene activities, contributed heavily to the fact that there were no disease outbreaks in the post disaster phase. The water and sanitation needs in Haiti are not primarily the result of the earthquake. Prior to 12 January 2010, 63 per cent of Haitians had regular (but not necessarily sufficient) access to drinking water. Only 17 per cent had access to sanitation services and watery diarrhoea caused between five and 16 per cent of child deaths.

The need for a long-term approach to strengthening Haiti's water and sanitation capacity is clear. The IFRC has been working very closely with Haiti's national water authority, DINEPA (Direction national de l'Eau Potable et de l'Assainissement) since the earthquake. This collaboration will continue into the third year of the operation, with the goal of successfully transferring institutional capacity from the IFRC to the public authorities.

Livelihoods. Similarly to water and sanitation, income and livelihood needs in Haiti clearly pre-date the earthquake. In 2009, various estimates suggested that between 72 and even 90 per cent of Haitians lived on less than one dollar per day. Such poverty inevitably contributed to the severity of January's disaster and any recovery effort must address it wherever possible. Whilst planning is still underway, the IFRC's livelihoods programme will be integrated with shelter and water and sanitation programmes. In terms of shelter, opportunities clearly exist in relation to the building of transitional shelters, the repairing of damaged houses, and removal and transformation of rubble.

Pillar 2: disaster preparedness

Preparations for the hurricane and rain season are well underway. However, other triggers for new humanitarian crises are still on the horizon. The vulnerabilities of Haitian communities to natural hazards will require many years to address effectively.

Pillar 3: National Society development

The continuing strength of the Haitian Red Cross Society is at the very heart of the IFRC's plan of action. The strategy that has been developed focuses on ensuring the National Society's capacity can continue to meet the needs of earthquake-affected communities. However, it also addresses the long-term priorities of the Haitian Red Cross Society – priorities that pre-date the earthquake. It looks, for example, at continuing to ensure the Haitian Red Cross Society's leading role in the country's fight against HIV and AIDS, as well as expanding and strengthening the blood service programme.

Maintaining operational capacity

The IFRC's operation in Haiti is one of the largest in its history. More than 1,500 international delegates have been involved in the operation and an excess of 13,000 tons of aid has been brought into the country. In addition,

17 National Red Cross Societies have bilateral programmes underway in Haiti. The scope of the IFRC's logistical and operational capacity will remain consistent for the duration of the plan of action, albeit with changing and steadily increasing emphasis on recovery as of early 2011. The IFRC's ability to support National Societies in their operations will also need to be maintained, both in terms of support services and Movement coordination.

Finally, the IFRC is committed to continuing its engagement with beneficiaries. Already hundreds of thousands of earthquake survivors have received vital information about the support that is available to them, as well as warnings and advice about the risks they face through the IFRC's beneficiary communication project. The early successes of the Red Cross Red Crescent/Trilogy SMS partnership and the weekly Radio Croix Rouge Haitienne programme must evolve into a practice of sustainable engagement with our most important stakeholders: the beneficiaries.

Pillar 1: the earthquake operation

Goal: earthquake affected households in urban and rural areas have their humanitarian needs met, and are able to take steps towards recovering their livelihoods.

Strategy for protracted relief operations in Haiti

Immediately after the disaster, the IFRC deployed a Field Assessment and Coordination Team (FACT), and member National Societies were requested to deploy Emergency Response Units (ERU) – self-contained specialised units which provide essential services for fixed periods of time. An unprecedented total of 21 ERUs and three other response teams were deployed in Haiti. In total representatives from 59 National Societies have been deployed to Haiti during the first seven months of the operation to support Haitian Red Cross Society staff and 1,500 volunteers in delivering critically needed items and services to affected families.

Seven months following the earthquake some 1.5 million people remain displaced. Hundreds of thousands of people continue to live in fragile makeshift shelters in overcrowded spontaneous settlements without access to water or appropriate sanitation facilities. The earthquake is remarkable not only because of the high number of deaths and the extent of the damage it caused, but because the earthquake has disabled the country's densely populated economic and civil capital Port-au-Prince. Over the past few decades, Port-au-Prince has evolved into the centre of all activity in Haiti and tens of thousands have settled there in the hillside slums searching for opportunity, and as a result, leaving outlying regions economically paralyzed. Consequently the repercussions of the earthquake which struck the heart of Haiti are magnified, making recovery a far more complex process. To this end, due to the complexity of the operation and the threats posed by hurricanes and rain during the latter half of 2010, emergency phase activities in the areas of health, shelter, water and sanitation, and relief will take place through the end of 2010. At the same time, recovery activities are being initiated where possible in the areas of shelter, water, sanitation and health.

Developing and strengthening recovery operations

Rebuilding local response capacities so they are better than before means building safer and more resilient communities. We do not place people back in harm's way. The heart of the IFRC's approach to disaster recovery and disaster risk reduction is to address the local vulnerabilities that lead to disaster. Even as recovery projects gain ground, we will maintain the flexibility to simultaneously address new emergencies such as severe weather, flooding or further tremors that could require short-term relief response. Relief, recovery and disaster preparedness activities happen concurrently.

Pillar 1: outcomes

Relief operations

Recovery operations

Relief: the most vulnerable people affected by the earthquake have access to basic non-food items that enable them to resume essential household activities.

Emergency shelter: in cooperation with IFRC relief and water and sanitation teams, technical support will be provided to 3,000 families with training on how to optimize the use of existing emergency shelter resources and improve site conditions.

Shelter: in parallel to rapidly meeting the emergency shelter needs, we will provide shelter solutions to 7,500 households within the next 24 months.

Shelter: the IFRC will support to up to 3,600 households with shelter solutions, complemented by water and sanitation interventions to ensure that families are situated in a safe and sustainable environment.

Health: health risks posed by the emergency will be reduced through the provision of curative and preventive basic health, emergency evacuation services, targeted community-based health education and psychosocial support.

Health: together with the Haitian Red Cross Society and Red Cross Red Crescent partners, we will develop and scale-up good quality community-based health and first aid programmes through targeted capacity-building and training of volunteers and staff.

Watsan: the risk of waterborne and water related diseases in affected areas will be reduced through the provision of safe water.

Watsan: the sanitation needs of the beneficiary population will be met including the provision of latrines in areas where digging is feasible, as well as where digging is not feasible.

Water and sanitation: the national water authority (DINEPA) is implementing a three year strategy for water which has been developed in cooperation with the HRCS and the IFRC. They have assumed full responsibility for water trucking, and is providing water to communities.

Water and sanitation: we will support up to 200,000 people in improving their hygiene practices – targeting in particular women and children – through hygiene promotion activities, and the dissemination of key health and hygiene messages on water and excreta-related diseases.

Rubble removal: the IFRC, in collaboration with its partners, will be involved in rubble removal to support the delivery of critical Red Cross Red Crescent programmes such as transitional shelter, disaster risk reduction, health and sanitation, as well as other recovery activities.

Livelihoods: economic and social factors in host communities are conducive to the integration of the displaced population and their acceptance by the host community.

Beneficiary communications: capacity at the IFRC and the HRCS to communicate with disaster affected communities using media and advocacy tools has been developed.

Gender-based violence: specific programme activities to actively respond to gender-based violence within the IFRC's operational framework are being implemented.



Pillar 1: outputs by program

Relief

80,000 families will have received basic non-food items (including emergency shelter) within the six months following the disaster.

80,000 families will have received a hygiene kit on a monthly basis until December 2010.

Shelter

Relief

100,000 affected families have safe emergency shelter to help preserve their physical and mental well-being, human dignity and prevent the further deterioration of the situation.

3,000 families are receiving guidance on how to make best use of available shelter materials and improvements are made to the physical sites where families are temporarily settled.

Recovery

A transitional shelter programme will be implemented to meet the needs of 7,500 households within the next 24 months.

Health

Relief

Medical health, surgical care and physiotherapeutic treatment are ensured through the deployment of ERU field hospitals and basic health care clinics in the earthquake-affected areas. They have the capacity to provide essential medical, surgical and pre-hospital services for a population of up to 500,000 people.

Recovery

At least 200,000 people in affected communities, including camps for internally displaced people, have been reached through health education programmes. They have increased their capacity and skills in epidemic control, hygiene promotion, vector control, first aid and psychological support.

Curative and preventative health care services provided by the Haitian Red Cross Society and Red Cross Red Crescent partners have been effectively coordinated to ensure the optimal use of resources and timely and appropriate service delivery to beneficiaries.

Water

Relief	Recovery	
<p>Safe water is available to up to 200,000 people in camps, makeshift settlements and surrounding neighbourhoods in Port-au-Prince over a 18-month period, with a minimum of 5 litres per day (l/p/d) of drinking water. We are aiming for 10 l/p/d and SPHERE standards (15 l/p/d) in long-term camps.</p>	<p>The water needs of 5,000 people living in the streets alongside their damaged houses have been met, including increased water storage capacity and the establishment of water points.</p>	<p>In outlying areas, safe water is available for up to 40,000 people including host families in Léogane, Jérémie, Les Cayes, Petit Goave, Grand Goave and surrounding areas. This includes the improvement and rehabilitation of water supply networks and/or creation of new water sources, as appropriate, including the drilling of boreholes, springs and small network development.</p>
	<p>Health facilities have access to safe quality water supply and sanitation, in coordination with the health team.</p>	<p>Sustainable water supply will be provided to up to 3,600 families who are benefitting from transitional shelter. This includes new water sources and temporary trucking of water as needed.</p>

Hygiene promotion

Relief	Recovery
<p>Prevention of water-borne diseases is enhanced through the provision of water and sanitation services and hygiene promotion.</p>	<p>Water and sanitation actions for people living in Port-au-Prince, outlying areas and/or with host families (approximately 250,000 people) are supported through the creation, training and support of water committees and accompanied by hygiene promotion and household sanitation practices.</p>

Sanitation

Relief	Recovery	
<p>Provide and ensure excreta disposal infrastructure with washing facilities at makeshift settlements, planned settlements and/or in the affected population in general, including the installation of pit latrines, raised tank latrines, and the provision of sludge removal services for up to 280,000 people.</p>	<p>The sanitation needs (including the rehabilitation and construction of toilets and showers) of 40,000 people living in the streets close to their damaged houses have been met, based on assessments.</p>	<p>Prevention of water-borne diseases is enhanced through the provision of water and sanitation services and hygiene promotion.</p>
		<p>Provide medical waste management and disposal for Red Cross Red Crescent basic health care units</p>
<p>Undertake drainage work and vector control at makeshift sites and for households living in the streets to benefit up to 200,000 people.</p>		<p>Rehabilitate and empty existing septic tanks and latrines in schools, hospitals and other public infrastructure occupied by earthquake victims.</p>

Pillar 2: disaster preparedness

Goal: risks posed to the general population by potential future emergencies have been reduced through the improvement of HRCS disaster management mechanisms, enabling regional and local Haitian Red Cross committees to carry out appropriate preparedness activities to address the threats of annual and unforeseen natural disasters.

In addition to the earthquake response, the second pillar of this plan of action revolves around taking action to scale-up preparations for the hurricane season through disaster risk reduction and preparedness measures. Prior to the earthquake, the Haitian Red Cross Society was involved in a number of disaster risk reduction (DRR) programmes, with the support of sister National Societies in different parts of the country. The aim is to build on this capacity to ensure that all vulnerable areas of the country are prepared for future disasters.

Operationally, the disaster preparedness and DRR plan focuses on two main areas. Earthquake operations will continue to be managed from Port-au-Prince, while non-earthquake operations will be covered from a disaster management operations centre in Hinche. The Haiti disaster preparedness and disaster risk reduction project aims at implementing preparedness activities that will support up to 425,000 people and cover high-risk issues, including the hurricane season, the rainy season and potential civil unrest.

Pillar 2: outcomes and outputs	
Institutional preparedness: preparedness of HRCS is enhanced through the use of contingency planning, reinforcement of logistics, IT/Telecoms and operational capacity.	Community based risk reduction: strengthen the preparedness of communities through risk reduction.
Contingency plans at inter-agency, Red Cross Red Crescent and regional committee level are strengthened.	High-risk communities and makeshift camps in Leogane, Jacmel and Port-au-Prince are identified and assessed.
An operations and logistics centre is set up.	Simple early warning systems for hurricanes, flooding and epidemics in identified communities and makeshift camps are established, and appropriate preparedness activities are developed and implemented.
Ten HRCS regional committees are strengthened.	
Stocks to meet the needs of 25,000 families are prepositioned.	High-risk communities and makeshift camps are better prepared for disasters.
The radio communications system is strengthened throughout the country to cover all territorial committees.	Mitigation activities are carried out in high-risk communities and makeshift camps.
The IFRC and the HRCS (in its role as an auxiliary to the government) are working with the government on strengthening the legal framework for international disaster assistance in line with International Disaster Response Laws guidelines.	

Pillar 3: National Society development

Goal: the Haitian Red Cross Society, while responding to the needs of the earthquake affected population, is able to grow and develop in all geographical areas of the country along the lines of its strategic plan.

In working closely with and in support of Haitian Red Cross Society leadership, the strengthening of organizational capacity will be focussed on achieving sustainability and investigating opportunities for resource mobilization. Although the strategy describes three main strategic service lines, the approach will be an integrated one. When the HRCS works with an affected community, the HRCS representatives delivering services are generally consistent, with the same volunteers working in health promotion or disaster preparedness programming.

Three main service lines		
Disaster response	Health	Organisational development

The plan aims to strengthen HRCS branches and the headquarters together as each requires the other in order to be successful. Building these relationships and decentralizing where appropriate from headquarters to the regional committee level will be considered for all activities and priorities.

In delivering services, the HRCS also pursues advocacy to achieve its goals. The local and global reach of the Red Cross Red Crescent enables us to bring our name and reputation to bear on issues that service delivery alone cannot change, such as community rights, land issues, sanitation and health, and safe building and land use planning. Evidence-based advocacy can have a strong impact on bringing about changes that are directly relevant to Haiti's most vulnerable people.

Promoting and respecting our fundamental principles and humanitarian values is indispensable if the Haitian Red Cross Society is to be perceived as an impartial, neutral and independent actor. This will also enable Red Cross and Red Crescent partners to carry out local mandates. Operational programming based on, and in conformity with, our fundamental principles and humanitarian values is key to demonstrating the comparative advantage of the Haitian Red Cross Society versus other humanitarian actors.

Pillar 3: outcomes and outputs		
Community-based disaster preparedness training.	Improving community health at a national level.	A project management unit is established at headquarters.
Institutional disaster preparedness training.	The HRCS plays a primary role in national efforts to prevent and mitigate the impact of HIV and AIDs in Haiti.	The HRCS has a reliable flow of income.
Provision and maintenance of essential equipment at branch level.	HRCS blood services are readily available nationwide.	Volunteer management is more efficient.

Linkages with Haiti's action plan for national recovery and development

Action plan for national recovery and development of Haiti	IFRC Plan of action
4.1 Territorial rebuilding 4.1.1 Reconstruction of devastated zones 4.1.3 Preparation for the hurricane season and disaster risk management	Pillar 3: Ensure a strong Haitian Red Cross Society Pillar 2: Preparedness for the rainy season and hurricanes
4.2 Economic rebuilding 4.2.1 Agricultural production 4.2.2 Investment and access to credit 4.2.3 Private sector	Pillar 1: Livelihoods
4.3 Social rebuilding 4.3.1 Housing for the population: temporary and permanent 4.3.2 Creation of high-intensity labour jobs 4.3.5 Healthcare, food security and nutrition, water and sanitation	Pillar 1: Emergency and transitional shelter Pillar 1: Livelihoods Pillar 1: Health Pillar 1: Water, sanitation and hygiene promotion Pillar 1: Cross-cutting issues
4.4 Institutional rebuilding 4.4.2 Relaunching central administrations: salaries, relocation, equipment	Pillar 3: Ensure a strong Haitian Red Cross Society

Integrating programming for affected people

For the purposes of programming, three broad groups have to be considered:

People living in spontaneous settlements who are likely to need essential services provided on a protracted basis until alternate shelter arrangements can be finalised.

People living in or nearby their damaged homes, who will hope to return once their homes can be repaired or rebuilt.

People who have migrated out of Port-au-Prince who are living in host communities, as well as the host families themselves.

These groups do not necessarily have the same needs, and within each population there are different factors to consider. Some camps are more vulnerable to flooding while some will be relocated. Meanwhile, some families have greater resources, different skills and stronger networks. Individual programmes will, as much as possible, be tailored to the specific scenarios they are addressing.

People are also mobile. They will move in response to a variety of push and pull factors, including the availability of resources, services and employment. Such movement may also cause families to fragment, increasing protection concerns. Our programming will influence the movements of people, and this factor must influence our programming decisions. Efforts to develop and support stronger and more sustainable communities away from the urban areas will help to reduce future vulnerabilities, as well as support a more effective and complete recovery..

Financial overview of the plan of action

Appeal target: 314,329,971 Swiss francs in cash, in kind, or services are required to support the plan of action of the Haitian Red Cross Society and the International Federation of Red Cross and Red Crescent Societies. As of 24 September 2010, a total 229.5 million Swiss francs have been received to cover this budget, resulting in a **73% coverage** of the appeal. The 2,560,967 Swiss francs requested to support the International Federation of Red Cross and Red Crescent Society's inter-agency coordination of the shelter and non-food items cluster have already been covered by different donors.

Programme	Budget
Relief (1)	57,362,076
Health	6,843,227
Water and sanitation	36,910,005
Leogane water and sanitation and Health	10,976,327
Shelter (2)	62,718,559
Livelihoods	9,843,264
Pillar 2: disaster preparedness and disaster risk reduction	14,858,960
Pillar 3: National Society development	17,559,885
Movement coordination	3,883,161
Communications	4,442,775
Emergency Response Units (3)	19,445,615
In-country management	1,869,795
Support services	16,143,826
Logistics	20,655,098
Base camp and security	27,352,367
Zone office/Geneva support	3,465,030
Total plan of action	314,329,971
Shelter cluster coordination	2,560,967

(1) Relief program includes emergency shelter activities

(2) Includes the provision of water and sanitation facilities for transitional shelters

(3) Estimated value of ERUs according to the information available in April; currently under revision

How we work

All International Federation of Red Cross and Red Crescent Societies efforts seek to adhere to the code of conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations in disaster relief and the Humanitarian Charter and Minimum Standards in Disaster Response (Sphere) in delivering assistance to the most vulnerable.

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

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Saving lives, changing minds.



The International Federation of Red Cross and Red Crescent Society's work is guided by Strategy 2020 which puts forward three strategic aims:

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

The Fundamental Principles of the International Red Cross and Red Crescent Movement

Humanity / The International Red Cross and Red Crescent Movement, born of a desire to bring assistance without discrimination to the wounded on the battlefield, endeavours, in its international and national capacity, to prevent and alleviate human suffering wherever it may be found. Its purpose is to protect life and health and to ensure respect for the human being. It promotes mutual understanding, friendship, cooperation and lasting peace amongst all peoples.

Impartiality / It makes no discrimination as to nationality, race, religious beliefs, class or political opinions. It endeavours to relieve the suffering of individuals, being guided solely by their needs, and to give priority to the most urgent cases of distress.

Neutrality / In order to enjoy the confidence of all, the Movement may not take sides in hostilities or engage at any time in controversies of a political, racial, religious or ideological nature.

Independence / The Movement is independent. The National Societies, while auxiliaries in the humanitarian services of their governments and subject to the laws of their respective countries, must always maintain their autonomy so that they may be able at all times to act in accordance with the principles of the Movement.

Voluntary service / It is a voluntary relief movement not prompted in any manner by desire for gain.

Unity / There can be only one Red Cross or Red Crescent Society in any one country. It must be open to all. It must carry on its humanitarian work throughout its territory.

Universality / The International Red Cross and Red Crescent Movement, in which all societies have equal status and share equal responsibilities and duties in helping each other, is worldwide.



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