

Operations update



International Federation
of Red Cross and Red Crescent Societies

Haiti: Earthquake

Emergency appeal n° MDRHT008
GLIDE EQ-2010-000009-HTI
Operations update n° 10
24 March 2010

Period covered by this Ops Update: 16 – 19 March 2010

Appeal target (current): Swiss Francs 218.4 million (US Dollars 203,478,000 or Euros 148,989,000) in cash, kind, or services is solicited to support the Haitian National Red Cross Society (HNRCS)/Federation to provide basic non-food items and emergency/transitional shelter to 80,000 beneficiary families and provide emergency health care, fulfilment of basic needs in water and sanitation and livelihoods support for vulnerable populations in the earthquake-affected region. Of the Swiss Francs 218.4 million sought, the International Federation solicits Swiss Francs 2.07 million to support its inter-agency coordination of the Shelter and Non-Food Items Cluster.

The donor response report shows current coverage of 55% of the Appeal target.

The budget for inter-agency coordination of the Shelter and Non-Food Items Cluster currently stands at 57%

[<Click here to go directly to the donor response report; or here to view contact details>](#)

Summary:

Heavy rains which fell over Port-au-Prince on 18 March signalled the start of the country's rainy season. Relief, health and water and sanitation activities continue to be implemented according to and ahead of plan with the International Federation having reached 83% of its target for the distribution of emergency shelter items. Items such as tarpaulins and rope have proven to be particularly helpful to protect thousands of families from the heavy rains that fell. A prototype of a tank latrine which is suitable for the dense urban operational context has been finalized and Haitian National Red Cross Society hygiene promotion and psychosocial support teams are reaching out to hundreds of people per day. The first shipment of materials to support families with core and transitional shelter are on their way to Port-au-Prince and assessments are being conducted to confirm where activities will take place. There have been reports that distribution of both food and free health care may be restricted but to date there is no confirmation by the government of any action in that regard.



23 March 2010. The American Red Cross/ Benelux Red Cross relief ERU distributed non-food items in the rural community in Kenscoff, Haiti. Photo source: Hope Weiner / IFRC.

The situation

It is apparent from a car ride through Port-au-Prince that this is a city that has not given up. For a split second at the week's end, one could be in any other city in the world stuck in traffic on a Friday afternoon with the local radio station playing the latest top 40 hits. Against the backdrop of pulverized buildings and hundreds of transitional settlements, the streets are lined with industrious individuals who have set up small stands selling items such as clothing, tins of fish, soft drinks, mayonnaise and fruit. Vendors weave through cars trying to clean car windows and sell frustrated drivers cold soft-drinks. Even within the settlements makeshift shelters now house small stores and businesses such as hair dressers. The day after Thursday night's heavy rains, the hundreds of thousands of tarpaulins distributed over the past two months are being put to the test by their recipients, and given the relative normalcy of the day, it appears that the situation is relatively stable.

The individuals making their way down the streets picking up items for their evening meal have no doubt suffered unbelievable losses. During the brutal seconds of the 12 January earthquake, thousands of people were thrust into the personal crisis of witnessing the death of their children, parents and friends, while their homes, businesses, their capital and much of their country crumbled around them. Consequently, the uncertainty has resulted in an entire population trying to find the way forward. On the one hand, hundreds of thousands of people craving tranquillity have themselves sought refuge, or sent their children to the homes of relatives and friends in the countryside. On the other end of the spectrum, however, many seeking out financial opportunities and possible answers are gravitating towards the crowded temporary settlements in Port-au-Prince, only upon arrival to continue to transition from settlement to settlement within the city. Within the context of the current situation created by the earthquake and the ongoing issues that have challenged Haiti for decades, such as poverty, HIV/AIDS and poor infrastructure, the Red Cross and Red Crescent has adopted a constructive and proactive phased approach to carrying out activities which address basic needs in an effort to mitigate the impact of the earthquake on affected communities.

At the moment, the tangible lack of "humanitarian space" is having a negative impact on maintaining the significant momentum which the emergency and relief phase the Federation operation has achieved. This is manifested by the absence of a fully functioning government system, a viable infrastructure, and above all the failure to identify land for decongestion of precarious and exposed camps to ensure new safer sites for constructing temporary shelters. The availability of space for the thousands of displaced persons continues to be the prevailing challenge in moving forward with reducing the vulnerability of communities living in temporary settlements. Over the weekend the US government introduced a plan based on its assessment that some 250,000 Haitians, of the 1.3 million homeless, are living in areas of Port-au-Prince that are highly susceptible to floods. The US government has approached the Haitian government, the UN and overseas donors to participate in a multi-pronged effort to re-locate people living in highly vulnerable areas. An example of the options being considered take into consideration the fact that some 60% of homes have been classified by government inspectors as habitable, one alternative being to negotiate with individuals who were living in those homes to return. Movement into host families and relocation to safer sites are other alternatives. Consultations with communities on the acceptability of these options will take place over the week ending 28 March.

Red Cross and Red Crescent action

Operation in Figures

**** Statistics as of 18 March 2010 except as indicated below**

Health	<ul style="list-style-type: none"> • 65,055 people treated by Red Cross Red Crescent health care facilities and mobile clinics. • Over 150,000 people have been vaccinated (<i>including against measles</i>). • 1,000 to 2,000 patients seen daily by basic health care units (BHCU) and integrated mobile clinics. • Number of earthquake-trauma cases is <i>diminishing</i>. • More than 16 million text messages with key community health awareness messages sent to people participating of the programmes.
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Relief	<ul style="list-style-type: none"> • Hygiene kits distributed to 50,198 households. • Kitchen sets distributed to 34,345 households. • Buckets distributed to 35,438 households. • Food items distributed to 38,221 households. • 77,705 mosquito nets distributed (<i>2 pcs per HH</i>). • 64,917 jerry cans (<i>2 pc. per HH</i>) • 131,779 Blankets distributed (<i>3 – 5 pc. s per HH</i>) • Between 1,500 - 2,500 families PER DAY receiving Non-food and Food Items
WatSan	<ul style="list-style-type: none"> • 40 million litres of drinking water distributed. • 112 camps have water points. • 1,252 latrines built.
	** As of 10 March 2010
Shelter	<ul style="list-style-type: none"> • 4,341 tents distributed. • 105,474 tarpaulins distributed. • 25,192 rope(s) distributed. • 9,202 shelter tool kits distributed.
Logistics	<ul style="list-style-type: none"> • 102 flights received in the operation. • 60 sea shipments (<i>40' containers</i>). • <i>The estimated tonnage of shipments is 4,850</i>

The fact that the earthquake of 12 January in Haiti shattered the country's capital city (an impoverished and densely populated urban area housing the country's government infrastructure) has presented many new complexities in terms of strategically meeting the needs of the affected population. The earthquake related needs are compounded by the fact that Haiti is prone to annual heavy rains and hurricanes over the period from March through June. Given the needs and existing circumstances, the Federation has adopted a three pillar approach to addressing the requirements of the affected population. Namely, the IFRC and the Haitian National Red Cross Society will: 1) continue to coordinate and implement relief and recovery programming in earthquake affected areas; 2) prepare for the flood and hurricane season by introducing nationwide disaster risk reduction programming, and, 3) ensure that the HNRCS is able to fully resume its role in reducing vulnerability by rebuilding the National Society's capacity to manage its core programmes in areas such as health and disaster preparedness.

Heavy rains fell over the period 17-18 March signifying the start of Haiti's rainy season. In terms of the potential of flooding, mudslides and hurricanes, the HNRCS and the IFRC recognize that the damage created by the earthquake has increased the risks posed to the country's population (in particular those people living on hills or in over-crowded settlements). The IFRC and HNRCS have developed a disaster risk reduction plan that not only takes into account the threats posed to the earthquake affected communities, but also to those living in the country's northern departments. The plan for the 2010 hurricane season applies lessons learned from past experience working with the HNRCS on previous disaster response and disaster preparedness activities during the hurricane season, in particular, initiatives carried out over the past four years. At the same time, generations living in Haiti have faced floods and hurricanes on an annual basis, and the HNRCS and the IFRC are consulting with local communities to determine the material needs these communities have to improve their ability to cope with the season.

The extraordinary needs generated by the earthquake have been mirrored by an equally extraordinary response by Movement actors. This operation has seen new developments in both the speed and manner in which assistance is being delivered. By way of example, as has been previously discussed in these reports, this operation has deployed 21 Emergency Response Units (ERU), the largest deployment ever in the history of the Movement. Moreover, the multi-national composition of the ERU teams has required an increased level of cooperation between National Societies.

In terms of statistics, nine weeks after the earthquake struck, the IFRC relief team has successfully delivered 83 % of the relief items related to the emergency shelter goal (tents, tarpaulins and shelter tool kits) set out in the emergency appeal. To this end, thirty six per cent of all tarpaulins handed out through the actors participating in

the Shelter Cluster in the Haiti response operation have come from the Red Cross Red Crescent. The IFRC was also the first international agency to “decongest” an improvised settlement: Camp Fondsable near Leogane.

Hard living conditions, high temperatures and the culmination of numerous sources of personal stress can potentially contribute to tension within communities and even among Red Cross relief teams during the distribution of relief items. To this end, the international organizations and NGOs distributing assistance have adopted varying security procedures for distributions, with some agencies reportedly using armed monitors. The relationship between the HNRCS and the communities has allowed the HNRCS and the IFRC to develop alternative means of maintaining a secure atmosphere. Music, which has a very important role in the lives of most Haitians, has now been incorporated into most of the relief distributions. HNRCS/IFRC relief teams or the communities themselves play popular recorded music over loud speakers, and when available recruit local live bands to improve the mood of the beneficiaries. Despite the global attention being given to the earthquake, in times of distress, on a personal level it is easy to feel forgotten during the uphill battle of reconstructing one’s life. Whenever possible, relief distributions are personalized. During a relief distribution conducted on Friday 19 March by the Mexican Red Cross in two orphanages and a school for the blind in Port-au-Prince, as volunteers from the Mexican Red Cross unloaded the trucks filled with food parcels and baby kits for the children, a team member from the HNRCS gathered the children and additional Red Cross team members into a circle for a round of songs.

It has been noted by that there is relatively little in the way of mental health facilities in Port-au-Prince. As a result, psychosocial support (PSP) was incorporated into the Federation’s initial emergency response activities. The PSP component of the Norwegian/Canadian/Magen David Adom Rapid Deployment Hospital is providing community based PSP support to nearby settlements. The activities include play groups for children and mother’s groups in the settlements. Again, as with the relief activities, music and dance play an integral role in the sessions.

Integrated programming is also a priority in water and sanitation activities, which has the ambitious goal of providing communities with hygiene promotion activities and the resources to maintain a healthy regime at one time. In terms of hygiene promotion, teams of HNRCS health workers have developed two hour presentations using theatre, songs and games and in some settlements the teams have even enlisted the assistance of clowns. The entertaining and informing presentations and the recognition of needs are highly appreciated by the people enduring long days in settlements with little access to entertainment. The challenges in water and sanitation assistance are tied into the fact that damage to the infrastructure in Port-au-Prince took place throughout the city and many of the settlements are located in areas where there is no capacity for drilling. Large numbers of people and lack of space have also had to be factored into developing feasible systems. Since February, the British Red Cross Society ERU and the IFRC’s water and sanitation team have been developing a prototype to meet the needs and conform to the cultural expectations of the population. To this end, the team has developed a latrine using plastic tanks. The tanks are buried in the ground and a western style toilet is installed above it. When the tanks are full the settlement’s leadership is charged with ensuring that it is cleaned and maintained. Given the fact that some settlements are sitting on concrete, an above ground version of the latrine has also been developed. The British Red Cross mass sanitation ERU – as a rainy-season measure – is succeeding in replacing emergency pit latrines, dug in the immediate aftermath of the quake, with flood-proof septic tanks.

Progress towards objectives

Relief distributions (basic non-food relief items)
Objective 1 (Relief phase): The most vulnerable people affected by the earthquake have access to basic non-food items and cash transfers that enable them to resume essential household activities.
Expected results (Relief phase)
<ul style="list-style-type: none"> • 80,000 families resume essential household activities using non-food relief items: 1 kitchen set, 2 blankets, 1 bucket, 2 jerry cans, 2 mosquito nets and 1 hygiene kit. • 20,000 families are supported in fulfilling the basic care and non food needs of their children under two years of age with baby kits. • Up to 60,000 families have access to cash that allows them to purchase items to supplement their basic household needs during the emergency phase.

Progress: (As of 16 March 2010)

80,000 families resume essential household activities using non-food relief items: 1 kitchen set, 2 blankets, 1 bucket, 2 jerry cans, 2 mosquito nets and 1 hygiene kit.

The table below summarizes distributions to date.

Distributor	Shelter Items				Non Food Items								Food_Total HH
	Tents	Tarps	Shelter ToolKits	Rope	Blankets	Mosquito Nets	Kitchen sets	Jerry Cans	Buckets	Detergent	Plastic Rolls	Hyg_kits	
Colombian RC	0	200	776	1426	1564	0	110	677	10			9746	19016
French RC	1152	224	25	0	2680	782	193	498	0		1301	193	0
German RC	0	0		0	0	0	865	1020	0			510	0
Haiti RC	0	0		0	0	0	0	0	300			0	3000
Spain RC	0	400		0	1600	800	0	800	800			225	0
Turkish RC	177	0		0	650	0	100	0	600			0	3059
IFRC-German RC	0	2640		2569	5209	30	15	756	2584			771	0
IFRC-DR RC	0	4685		400	5082	3632	1741	3772	2992			2496	1400
IFRC-French/Finn ERU	0	22074		8200	28290	21722	11593	14800	6788			9375	0
IFRC-Turkish RC	0	2832		2000	500	700	350	700	1918			200	0
IFRC-Colombian RC	0	3280		50	3396	3096	50	3196	1748			1698	0
IFRC-Canadian RC	1990	8588		1527	23842	13388	5812	11310	4736			6370	0
Danish ERU	466	19199	8381	246	0	0	0	0	0			0	0
IFRC-RIT/RDRT-Relief	295	2898		1135	19108	9028	3355	10488	3770			4865	3180
IFRC-MEX/COL RC	0	0		0	0	0	0	0	0			0	5337
IFRC-Mexican RC	0	0		0	0	0	0	0	0			0	500
IFRC-AmCross/BeNeLux	61	35154	20	7639	37458	23727	10161	16500	8592	1056	1337	11799	30
IFRC-Haitian RC	200	3300		0	2400	800	0	400	600			1950	3199
Grand Total	4341	105474	9202	25192	131779	77705	34345	64917	35438	1056	2638	50198	38721

The Relief ERUs are currently scheduled to continue activities until the end of May. Over the coming weeks the ERU team leaders, the IFRC and the HNRCS will collaborate on developing a plan for handing over the responsibilities of the respective ERUs.

The Danish Red Cross relief ERU has now set up a school in Dufrenais, north-east of Port-au-Prince, using dispensary tents. With 80% of the country's schools destroyed and some of the now remaining 20% being used as temporary settlements this will hopefully assist in getting local children back in school as soon as possible.

IFRC-Mexican/Colombian Red Cross Societies

Volunteer teams from the Mexican Red Cross and the Colombian Red Cross Society and the HNRCS are distributing family food parcels, NFIs and items such as clothing and medicine on a daily basis. The Colombian Red Cross Society received a new shipment of items on Thursday, 18 March.

IFRC-RIT/-Relief:

Work is being continued with the HNRCS to develop HNRCS relief distribution teams.

Up to 60,000 families have access to cash that allows them to purchase items to supplement their basic household needs during the emergency phase

A test of the cash transfer programme (CTP) via the SMS distribution mechanism was conducted on 13 March at Fonkoze, a microfinance institution that also provides remittance services. Five HNRCS volunteers received the

text notifications and were able to cash the funds with the tellers. A technical consultant and finance director from the American Red Cross observed the test, and a questionnaire was also completed with the participants after the transactions were completed. Several issues were identified and are being addressed including the structure of the messaging and reducing the need to navigate an overly complicated automated messaging system by the beneficiaries. Overall, the test was successful.

A second test was scheduled at a Unibank branch on 16 March, but due to firewall issues the test was unable to take place and has been scheduled for a later date. On a positive note, Mobile Accord, on behalf of American Red Cross, has been able to establish systems interfaces with the two main Haitian mobile carriers (Digicel and Voila) and is establishing payment agent agreements with Unibank, Sogebank and Fonkoze. Training of tellers and testing of the encashment process occurred at Sogebank on 19 March. In order to increase encashment capacity for the programme, talks are continuing with C.A.M and Unitransfer.



23 March 2010. IFRC Security team works with the relief teams to develop procedures to ensure the efficient distribution of relief items. Source: Hope Weiner / IFRC.

Regarding beneficiary registration, an assessment delegate joined the team on 8 March and has been systematizing beneficiary data that has already been gathered, identifying gaps and determining assessment needs and developing the plan of action plan to move forward. As per the latest count, the team has approximately 10,000 potential beneficiary names and numbers. Teams are continuing to gather and sort the information, but it appears that the development of relief CTP assessment teams will be necessary in order to reach the desired scale of the programme. A systems delegate who oversaw the design and development of a password-controlled beneficiary registration database over the past few weeks re-joined the team on 15 March. As the team moves towards implementation and team members continue to rotate out, an additional two assessment delegates will be needed and continuity is also required for the systems. The team will be hiring additional local staff for data entry and assessment purposes and coordination is taking place with the American Red Cross delegation for additional office space.

20,000 families are supported in fulfilling the basic care and non food needs of their children under two years of age with baby kits.

The Mexican Red Cross distributed baby kits to two orphanages in Port-au-Prince on Friday, 19 March. Despite the previous evening's rains, the road access in the city was good and the distribution went as planned.

Challenges:

The primary challenge posed to the implementation of relief activities is ensuring that items are delivered in a secure manner. To this end, the IFRC continues to strictly follow a four step process developed in consultation with the IFRC security team to ensure that distributions are fair and that the planned amount of relief items reaches the beneficiaries. There were no significant security incidents over the reporting period that inhibited activities. However, an increased level of tension has been noted in some of the Federation locations around warehouses and at some settlements.

Water, sanitation, and hygiene promotion

Objective 1: The risk of waterborne and water related diseases has been reduced through the provision of minimum safe water, minimum sanitation and hygiene promotion.

Expected Results (Relief phase)

- 150,000 people in Port-au-Prince, Carrefour, Leogane, and Jacmel and Petit Goave have access to safe water.

<ul style="list-style-type: none"> • Three health facilities in Port-au-Prince and Leogane have access to safe water.
<ul style="list-style-type: none"> • 80,000 families will receive a 6 months' supply of aqua tablets for water purification.
<ul style="list-style-type: none"> • At least 150,000 people in Port-au-Prince and Leogane have improved environmental sanitation through community clean-up committees and healthier hygiene practices.
<ul style="list-style-type: none"> • 150,000 to 300,000 people in Port-au-Prince, Leogane and Jacmel have better access to sanitation facilities.

Progress:

150,000 people in Port-au-Prince, Carrefour, Leogane, and Jacmel and Petit Goave have access to safe water.

Over the reporting period the French Red Cross and Spanish Red Cross ERUs distributed a combined total of 1.5M litres of water in 88 sites.

At least 150,000 people in Port-au-Prince and Leogane have improved environmental sanitation through community clean-up committees and healthier hygiene practices.

Sanitation

The prototype of the "tank latrine" was finalized and most of the Participating National Societies working with the HNRCS will adopt this model. As mentioned above, the design of the latrines was developed to address the constraints faced in providing sanitation facilities to temporary settlements in order to support the needs of the affected population until a final decision is made in terms of re-locating people.

The British Red Cross Mass Sanitation Module (MSM20) has temporarily stopped work in La Piste Jean Marie Vincent as a result of an increased number of security incidents. While the community has been highly receptive to Red Cross activities, issues remain to be resolved as to how to ensure a more secure environment. Hygiene promotion activities are going well in Automeca where some 10,000 people are currently living in the temporary settlement. The British Red Cross sanitation team has been working in this camp for over four weeks for people made homeless by the earthquake. Mapping of water and sanitation needs, focus group discussion and committee leaders' meetings are going well to identify the water and sanitation issues in the settlement.



Sanitation is a major issue in addressing the needs of earthquake affected communities. The challenge posed is that Port-au-Prince is an urban area and much of the ground is either paved or difficult to drill through. Example of temporary latrine with underground tanks. Source: Hope Weiner / IFRC

The Austrian Red Cross Mass Sanitation Module (MSM20) has installed 184 latrines, and is carrying out hygiene promotion activities which reach 25,000 people. Additionally 68 programme volunteers have been trained.

To date, the French Red Cross has installed 570 latrines and 410 showers in 16 sites throughout settlements in Delmas and in the Cité Militaire. Hygiene Promotion activities have commenced and work has been carried out to create 20 trash pits.

The Spanish Red Cross Mass Sanitation Module (MSN20) has built 222 latrines in ten camps as well as 99 showers.

Hygiene Promotion

The Spanish Red Cross is complementing the distribution of water with hygiene promotion activities. It has been noted that in Haiti song and games are the best way of engaging large groups of people. HNRCS volunteers gather people in the settlements in a fun and light-hearted manner by making their way through the settlement whilst singing. Upon bringing together a crowd the HNRCS hygiene promotion team presents a small show followed by a discussion. On average, some 50 to 150 people attend each session which last for about two hours. The Spanish Red Cross is carrying out hygiene promotion in 25 camps.

Challenges:

Sanitation in Port-au-Prince remains the primary concern of the Water and Sanitation and Hygiene (WASH) Cluster. Cluster group members continue to explore several solutions to contain and dispose of excreta prior to the height of the rainy season. There have been delays in repairs to the water supply system on the part of CAMEP (*Centrale Autonome Métropolitaine d'Eau Potable*), the government agency in Haiti responsible for water and sanitation supply. The IFRC is currently assessing the potential for the outbreak of diseases in the coming months.

Emergency Health
Objective 1 (Relief phase): The immediate health risks of the emergency are reduced through the provision of curative and preventive basic health, emergency evacuation services, targeted community-based health education and psychosocial support for the affected population.
Expected results (Relief Phase)
<ul style="list-style-type: none"> • Medical health, surgical care and physiotherapeutic treatment are ensured in the rapid deployment hospital ERU in Port-au-Prince, referral hospital ERU in Carrefour, and other Movement-supported medical facilities with the capacity to provide essential surgical services for a population of 500,000 people.
<ul style="list-style-type: none"> • Primary health care needs are met by the Basic Health Care ERUs and their respective Mobile Health Clinics with a capacity to provide basic health care to a population of 150,000 people.
<ul style="list-style-type: none"> • Affected communities increase their capacity and skills in epidemic control, community based first aid and psychological first aid.
<ul style="list-style-type: none"> • The HNRCS has improved capacity to provide a more effective and relevant evacuation service of wounded and ill to reduce acute injuries and infections during the emergency phase.
<ul style="list-style-type: none"> • Selected affected groups and communities and Movement personnel and volunteers receiving psychosocial support have improved their resilience and coping mechanisms.

Progress:

Focus on Psychosocial Support

Selected affected groups and communities and Movement personnel and volunteers receiving psychosocial support have improved their resilience and coping mechanisms.

Within days after the earthquake, the Norwegian and Canadian Red Cross Societies and Magen David Adom deployed the rapid deployment emergency hospital to Port-au-Prince. The site selected for the ERU hospital was the University Hospital in the centre of Port-au-Prince which was partially collapsed and some of the remaining buildings deemed too unstable for occupation. Upon arrival, two psychosocial delegates immediately started working alongside their medical colleagues. Together with a team of 22 volunteers who were trained in psychological first aid (PFA) and other basic psychosocial skills, the delegates provided PFA and emotional support for hospitalized children and adults, took care of and established a protocol for ensuring protection and continuous care of unaccompanied minors/isolated children. Providing psychosocial support to the volunteers was an important activity as they themselves were seriously affected by the earthquake.

Two mobile hospitals: the rapid deployment emergency hospital deployed by the Norwegian and Canadian Red Cross Societies and Magen David Adom on 14 January and a referral hospital deployed by German and Finnish Red Cross Societies on 21 January deployed psychosocial support delegates who worked alongside medical staff, in order to provide an integrated health response. The work of the delegates is structured around the ERU psychosocial support component that was developed in 2008 by the International Federation's Psychosocial Support Centre, in collaboration with Norwegian Red Cross and deployed for the first time in Haiti.

The PSP team in Port-au-Prince established a child-friendly space with structured playing and activities that allowed the children a break from the chaos after the earthquake. A space was created for adults to come and talk, play games or simply be with others; this was used by mobile patients, visitors and relatives as well as hospital staff. In the third week of deployment, there was a need to move the ERU psychosocial work outside the hospital. Together with the ERU community health team, the psychosocial team visited the nearby camp of La Piste. A link was established between HNRCS and Médecins du Monde who trained 20 social workers to continue activities there. In February, after about one month, responding to the needs of a community where the health needs rose as the infrastructure crumbled, the Norwegian Red Cross/Canadian Red Cross along with medical personnel from the Magen David Adom established a rapid deployment hospital Emergency Response Unit "ERU" and initiated PSP programming in Petit-Goâve, a city located some 68 kilometres southwest of Port-au-Prince.

Following 12 January's devastating earthquake, this coastal community was hit by a 5.9 aftershock the epicentre of which was almost directly under the nearly four hundred year old city. Staff and volunteers of the HNRCS Petit-Goâve branch, most of whom have been left homeless and have been affected personally by the earthquake themselves, are currently reaching out to their communities on a daily basis assessing the health needs at the community level and addressing emotional needs. Three times a week, 27 HNRCS volunteers set out in the settlements around Petit-Goâve for three hour sessions with "Mother's Groups" formed in the camps. Interestingly, these "Mother's Groups" which allow a chance for parents to express their concerns and emotions in a safe environment have also attracted some fathers as well. The PSP programme's child friendly spaces staffed by Haitian National Red Cross Society volunteers are, in the words of Norwegian Red Cross delegate allowing "children to play which is what children are supposed to do."

A Real Time Evaluation ("RTE") conducted by the IFRC Psychosocial Support Centre's technical adviser for the PSP programme took place over the period 19-28 February 2010.

Additionally the French Red Cross is working with HNRCS volunteers to organize PSP activities for children (from ages 5 to 11) in Petionville. Everyday, between 300 and 400 children from the settlements of St. Pierre and Boyer squares are welcomed. Support groups for adults have also been formed at these sites and will take place twice a week hosting some 25 people per day.

Primary health care needs are met by the Basic Health Care ERUs and their respective Mobile Health Clinics with a capacity to provide basic health care to a population of 150,000 people.

The following ERUs continue to operate on a daily basis and to date have treated some 65,055 people. The number of chronic diseases is increasing, and the clinics are now addressing an increasing number of everyday complaints.

Finnish/ French / Swedish Red Cross Societies

The Basic Health Care Unit has deployed four mobile clinics per day in 18 sites. More than 12,000 patients have been seen since the beginning of the deployment.

Finnish Red Cross / German Red /Swiss Red Cross Societies

- **BHC Unit:** German Red Cross/Swiss Red Cross activities are ongoing in their mobile and fixed sites.
- **Referral Hospital:** The Finnish Red Cross / German Red Cross referral hospital continued its activities in Carrefour; the search for an alternative venue is ongoing.

Japanese Red Cross Society

- **BHC Unit:** The Japanese Red Cross Society's activities in the fixed clinic are ongoing.
- **French Red Cross / Qatari Red Crescent**
- **BHC Unit:** The Unit continues to provide mobile clinic services in 18 sites.

Colombian Red Cross Society

The Colombian Red Cross Society operates mobile clinics in 17 sites, and to date has provided care to over 4,000 patients, psychosocial support to 1,303 persons, and community health education to 714 persons.

Norwegian/Canadian/MagenDavid Adom Rapid Deployment Hospital

As earthquake related trauma cases decline, Red Cross/Magen David Adom staff and HNRCS Branch staff and volunteers are engaged in ambitious initiatives filling needs for urgent care (surgeries), primary care (triage) and community based health and psychosocial support programming. Given the affected health infrastructure and the continuing and extensive health care needs in Haiti, the ERU is involved in activities beyond the ERU's traditional

role supporting three to four hundred patients per week with medical staff, medicine and surgical and electrical equipment. Lately, on a typical day, ERU team members in coordination with the local health authorities and NGOs are playing an important role in the lives of patients in triage, in the wards and in the emergency and operating rooms. ERU team members are rewarded on a daily basis as they are able to deliver assistance which has meant the difference between life and death to new born babies, orphaned toddlers and the elderly.

Affected communities increase their capacity and skills in epidemic control, community based first aid and psychological first aid.

The epidemic preparedness plan is under review with the health team leaders. The medical logistics of the operation will be supported by the Senior Officer for Medical Logistics who will arrive in Haiti for two weeks to support the operation to sort the medical stocks and identify the medical supplies needed for preparedness.

Challenges:

As with relief, it is always important to introduce disaster response activities in a manner which does not interfere with the local economy, and is well coordinated with the local government. As such, all planning of health related activities, this is done taking into consideration the local market.

Shelter and community infrastructure
Objective 1 (Relief phase): Ensure that 80,000 affected families have healthy and safe emergency shelter to help preserve their physical and mental well-being, human dignity and prevent the further deterioration of their humanitarian situation.
Expected results (Relief Phase)
<ul style="list-style-type: none"> • The most vulnerable affected families are supported in the recovery of their comprehensive well-being through the distribution of emergency shelter materials to 80,000 families in Port-au-Prince, Carrefour, Leogane and Jacmel. • Collective rubble removal is achieved by local committees using 1,200 clearing kits linked with a cash for work programme in Carrefour, Leogane and Jacmel. • 3,000 host families receive cash vouchers for the purchase of shelter materials to improve the living conditions and promote housing solutions in host families.

A study led by the European Commission's Joint Research Centre (JRC) was released this week reporting that almost 60,000 buildings, ten times more than originally estimated, were either destroyed or very heavily damaged by the earthquake. To date, 220 hectares of land have been identified by the Government. It is currently estimated that a minimum of 600 hectares of land are needed to relocate solely the 200,000 persons currently displaced in high risk settlements.

Progress:

Relief activities are ongoing including distributions of covering kits, shelter kits with timber and tents in Leogane, Port-au-Prince and Jacmel. Over the coming week there is a planned distribution of 2,280 pieces of corrugated zinc sheeting (CGIs) to complement relief distributions of shelter kits and timber.

There is an ongoing assessment by the Canadian Red Cross taking place in Leogane, Jacmel and Gressier to identify sites for interventions. The second rotation of the IFRC Shelter Technical Team is in place. Five shelter specialists have been tasked with the following responsibilities:

- preparation of the wooden core –transitional shelter programme in Leogane, Jacmel and Petit Goave.
- preparation of the wooden core –transitional shelter programme in Port-au-Prince.
- preparation of the La Piste-L'aviation site.
- design study to finalize generic specification of the steel frame transitional shelter.
- safe hurricane shelter centre programme.
- development of assessment tools.

One more shelter specialist will join the team to cover the host-family programme.

The IFRC shelter team is working closely with the HNRCS and the Shelter Cluster to identify areas for

implementing activities. At the moment due to the delays in government action in allocating humanitarian space it is difficult to make any firm decisions in terms of identifying locations.

Wooden core shelter & transitional shelter activities:

6,000 units of the 12sqm wooden core shelter have been procured. One thousand units were purchased in Santo Domingo, and 5,000 through an international tender process. The 1,000 units will be delivered around 22 March and will be distributed before the end of March. Detailed information of the delivery schedule is expected in few days. The shelter department will work with the British logistics ERU to study pre-cutting and prefabrication options. To complement the distribution of wooden core units, 20,000 shelter tool kits and 60,000 tarpaulins have been ordered.

Identification of sites is in process in Port-au-Prince. Two sites have been targeted in Cité Soleil: "Fort Dimanche and Annexe de la Mairie". The HNRCS will approach the "Centre National de L'équipement" to clear the Fort Dimanche site. The site will be used to re-locate households from the La Piste site. The mayor of Cité Soleil has confirmed to the HNRCS the possible intervention and implementation of the wooden core shelter in both sites. The registration has started with some complications, and a complete assessment will be re-organized.

A technical manual is being developed with a local artist featuring instructions as to how to put together a wooden core shelter. The IFRC and HNRCS have prepared an assessment training package. The two day training will target more than 70 HNRCS volunteers to support shelter needs assessments and land identification.

Participating National Societies are currently determining their interventions in the shelter sector.

Challenges

As noted earlier in this report, arrangements for land in order to be able to set up the wooden core and transitional shelters need to be confirmed.

Strengthening of HNRCS capacities

Objective 1 (Relief phase): HNRCS volunteer management in emergencies is improved.	
Expected results	Activities planned
The HNRCS has reinforced its body of active, trained volunteers.	<ul style="list-style-type: none"> • Ensure management of new volunteers and incorporate them in the relief operation. • Develop or revise job descriptions for current volunteers. • Ensure coverage of a core group of volunteers by the accident insurance scheme. • Increase the capacity of the national society to respond to emergencies, through strengthening of volunteer networks

Progress:

The HNRCS continues to play an instrumental role in implementing activities. To date, each of the programmes has involved the training and development of new HNRCS volunteers. Volunteers are being trained in important skills in conducting assessments and distributions, hygiene promotion and health and water and sanitation skills.

Challenges:

The main challenge is related to ensuring the retention of volunteers and their continued development.

IT/Telecom

Objective 1 (Relief phase): A well functioning and reliable communications system has been established to ensure effective communication and security for all Movement partners for the immediate response to the disaster.
Expected results

- The shared ICRC / HNRCS VHF network is covering the operational areas.
- Radio contact is possible from branches to communicate operational updates.
- Data communication and office facilities are available for the operation.

Progress:

The IT/Telecom team supports clear communications and contributes to safety in all aspects of this operation via computer support services and radio communications.

Challenges:

More time is needed to import IT/Telecom equipment given the resumption of normal customs procedures in Haiti.

Logistics

Objective 1 (Relief phase): To effectively manage the supply chain from arrival of relief items and ERUs, including clearance, storage and forwarding to distribution.

Expected results

- All programmes receive professional logistics support and goods are received for distribution as planned.

Progress:

Key Statistics as of 17 March 2010:

Activity	To Date Total
Flights received in the operation	102
Sea shipments (40' containers)	80
Total tonnage of shipments	5,150

Activity	Period
Trucks / containers received Haiti	20
Estimated tonnage	300
Trucks despatched	59
Estimated tonnage	320

- The site for storage of the Core Shelter is being prepared by the British Red Cross Logistics ERU.
- The warehouses for relief items have been restocked with items arriving by road and sea.
- 6 rubbhalls have been ordered for Leogane.

Challenges:

Service agreements for National Societies implementing bilateral programmes in Haiti are under discussion with the secretariat's legal department in the Zone Office and the Headquarters. In Haiti, the area of support services is currently being strengthened. It is expected that service agreements will be drawn up in due course for the provision of support to Participating National Societies.

Security

Objective 1 (Relief phase): A well functioning and effective operational security framework that will enable RC/RC personnel to operate safely and securely.

Expected results

- Sound operational security management structures and procedures established and operating effectively ensuring a safer working environment.
- Federation and HNRCS operations have good security awareness and are able to anticipate and react to changing situations and circumstances in a timely manner.
- Improved planning capacity, more effective management and prevention of security incidents, and enhanced

ability to be proactive through reports, analysis and lessons learned.

- Effective working partnerships established with other agencies providing increased access to information and resources.

Despite the operation's size and complexity, Movement actors continue to operate safely and securely. Having volunteers and staff from the HNRCS participate in all phases of the relief efforts is advantageous. Clear communication in the local language of Creole, as well as cultural understanding of society, allow HNRCS volunteers to contribute to security objectives.

Progress:

The IFRC's security team, now composed of three delegates, continues to coordinate with all programme delegates on a regular basis to identify necessary needs in developing optimum security procedures. The team and the delegates have continued to respond to changes in the situation by modifying standard operating procedures.

Challenges:

It is important that all of the PNS and ERUs regularly report any incidents to the security team so that measures can be taken to improve security. By compiling information, the security team seeks to create a proactive strategy to cope with security risks.

Communications – Advocacy and Public Information

Media interest continues to focus on questions about the speed of the provision of emergency shelter and its cost, issues relating to transitional shelter, transitional housing, the approaching rainy / hurricane seasons, and violence against women and amputees.

Over the reporting period the communications team carried out the following activities:

- Interviews on Radio South Africa, BBC World Service (World Have Your Say), China Radio International. In Spanish: RFI, DW. German: DW.
- Briefing for the "Miami Herald."
- AP took pictures of the core and transitional shelters.
- Briefing with local newspaper Le Nouvelliste.

Coordination and partnerships

The HNRCS and the International Federation continue to maintain coordination and partnership with State institutions and local authorities, international aid agencies and other actors. The Cluster system is one of the principal interagency coordination mechanisms in place. Twelve clusters are active in Haiti, as reported previously¹, with the Federation assuming the role of convener of the Emergency Shelter and Non-Food Items Cluster. Highlights of developments in Cluster activity can be found in OCHA Situation Reports².

Coordination of the Emergency Shelter & NFI Cluster

The International Federation is the convening the Shelter/NFI Cluster as of 10 February.

The Shelter/NFI Cluster is made of 156 members, of which around 50 participate actively. These members include NGOs, the Red Cross Red Crescent, UN agencies, donors, and IOM. Until now the members of the Shelter Cluster have reported the distribution of 290,700 plastic sheets and 37,492 tents. These can provide

¹ The Twelve Clusters are: Emergency Shelter and Non-Food Items, Camp Coordination and Camp Management, Education, Food, Logistics, Nutrition, Protection, Water Sanitation and Hygiene (WASH), Agriculture, Early Recovery, Emergency Telecommunications and Health. Decentralized cluster mechanisms cover regions outside of Port-au-Prince. Furthermore, Logistics/Telecommunications, Health, Emergency Shelter, WASH, and Nutrition clusters are active in the Dominican Republic.

² The latest OCHA reports for Haiti can be found on: <http://ochaonline.un.org/tabid/6412/language/en-US/Default.aspx>

emergency shelter to 182,842 households which account for over 70% of the population in need of shelter³. The shelter members are aiming at covering the emergency shelter needs of all the affected population by 1 May. The members of the Shelter Cluster are also working on transitional shelter and support to host families as well as NFI distributions. The lack of appropriate land for displaced people is the main constraint at this stage. For more detailed information visit the website of the cluster www.shelterhaiti.org in English and French.

Given the scale of the disaster and the fact that shelter is a high priority, the IFRC has deployed a large dedicated Shelter Coordination Team (SCT) to be able to provide good coordination services. This team is being deployed for at least 6 months. The team is made of twelve persons at this moment. They are summarized in this table:

In Port –au-Prince: covering PaP, and the areas near the border with Dominican Republic. This team also gives support to the teams in the other hubs.	
Shelter Cluster Coordinator	Netherlands Red Cross
Shelter Cluster Deputy Coordinator	CARE
Shelter Cluster Hub Coordinator	IFRC
Shelter Technical Coordinator	CARE
Shelter Information Manager	IFRC
Shelter GIS & Mapping Specialist	MapAction
Communications Advisor	British Red Cross
Logistics Advisor	Finnish Red Cross
In Leogane: covering Leogane, Petit Goave, Carrefour	
Shelter Cluster Hub Coordinator	UNHCR
Shelter Information Manager	CARE
In Jacmel: Covering Jacmel	
Shelter Cluster Hub Coordinator	IFRC
Shelter Information Manager	IFRC

Additional people are going to be deployed in the coming days in the roles of Shelter Recovery Advisors and Environmental Advisors.

The IFRC is appealing for 2.07 million CHF to convene the Shelter/NFIs Cluster in Haiti and the Dominican Republic through the IFRC Emergency Appeal in a separate project; funds for this purpose need to be earmarked for coordination. This cost represents less than 1.5% of the funds that are being requested for shelter in Haiti by all the Shelter Cluster members including the UN agencies, the Red Cross and Red Crescent Movement, IOM and NGOs. The budget is detailed in Operations Update no. 5. So far the Shelter Cluster Coordination project of the appeal is funded at 57%

To resource the initial IFRC-led Shelter/NFI Cluster Coordination Team, acknowledgement is made of the human resources provided by or being finalized with the Andorra Red Cross, Australian Red Cross, Canadian Red Cross, Finnish Red Cross, French Red Cross, German Red Cross, Netherlands Red Cross, Spanish Red Cross, Care, MapAction, UN Habitat, UNHCR and WWF US. The Federation also acknowledges the financial support provided to date from the Netherlands Red Cross, DFID (via IOM in support of Care), and the Swedish Red Cross.

ICRC Response

Present in Haiti on a permanent basis since 1994, the International Committee of the Red Cross (ICRC) has greatly increased its activities and presence in response to the earthquake. Main activities are currently focusing on Restoring Family Links (RFL), water and sanitation, relief distributions and on-going cooperation with HNRCS.

³ The number of people in need of shelter is 1,301,491 as reported by the Government of Haiti on 28 February 2010.

Appeal history

- CHF 500,000 (USD 491,265 or EUR 338,880) was allocated from the International Federation's Disaster Relief Emergency Fund (DREF) to jump-start response activities and mobilization of Federation personnel. Non-earmarked funds to replenish DREF are encouraged.
- A Preliminary Emergency Appeal for CHF 10.1m was launched on 12 January 2010 to support the Haitian National Red Cross Society (HNRCS) to immediately deliver life-saving assistance to some 20,000 families (some 100,000 beneficiaries) for 9 months.
- A Revised Preliminary Emergency Appeal with a Revised Budget of CHF 105.7 million to assist up to 60,000 families (300,000 people) for 3 years was issued on 26 January 2010.
- On 9 February, Operations Update no. 5 was published, reflecting revised objectives for the six-month relief phase of the operation under the plan of action, and including a revision of the preliminary budget to CHF 218.4 million of which CHF 2.07 million is designated to support the Federation's inter-agency coordination of the Shelter and Non-Food Items (NFI) Cluster.
- An **Appeal, replacing the current Preliminary Appeal is expected to be launched by early April**, following the agreements reached at the Montreal Summit, and based on a new plan of action for the relief phase of the operation and associated budget currently being drafted, to reflect a prolonged relief phase of up to 12 months.

How we work

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

The International Federation'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.

The International Federation'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.

Contact information

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- Shelter Cluster: Coordinator can be contacted on shelterhaiti2010@gmail.com; Information and updates can be obtained from www.shelterhaiti.org

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