

To date, there are no official figures on the numbers of dead and affected, but there are estimates that well over 100,000 people have perished and some 500,000 are now feared homeless. In the days following the quake, people were left wandering the streets and sleeping in open spaces, fearful to enter their homes or any kind of building, as powerful and frequent aftershocks were felt for days. As time progressed, makeshift tent cities have started emerging in parks, streets and stadiums.

Dead bodies that piled up on the streets of Port au Prince for days started to be collected once the national government was able to regroup, after being severely affected in its staffing and infrastructure. The bodies were taken to mass graves, as an urgent measure.

With regard to security, violent incidents are occurring every day, and there are fears that once criminal organizations re-establish themselves, the situation will be more difficult to control. UN peacekeepers are patrolling the streets, as are United States troops. The UN, Canada and the United States will provide more troops for peacekeeping purposes. The Red Cross and Red Crescent Movement has established a base camp from where it is coordinating and implementing all response activities. The Haitian National Red Cross Society is leading the operation with the support of sister National Societies from around the globe.

To date, a 16 member FACT team is on the ground conducting the operation, and 17 ERUs with various specialties from several Partner National Societies are operating on the ground or arriving shortly. It is important to highlight that a joint Canadian and Norwegian Red Cross rapid deployment hospital is now operational in Port au Prince's University Hospital. This 70-bed facility can provide assistance to 200 wounded people each day, and triage is taking place with the aim to start performing surgeries soon. The Finnish/French/Swedish Basic Health Care Unit is also operational and attended 55 people on its first day in the affected areas.

The FACT relief and FACT shelter coordinators and the American Red Cross and French/Benelux Red Cross Societies' Relief ERUs have developed a plan to assist an initial 60,000 families, prioritizing the distribution of a non-food items package as the main relief need. Distribution points have been identified, and vouchers have been handed out; a small number of families were reached with relief items on 18 January; distributions will continue on 19 January.

With regard to shelter items, addressing the situation of the approximately 380 makeshift camps is the top priority for the government and aid agencies: 10,000 units should arrive in Haiti in the coming two weeks. The distribution of tents and alternative shelter options are being planned, such as working with the population to re-utilize debris for temporary shelter and distributing shelter kits.

The Spanish Red Cross has distributed 120,000 litres of water in coordination with volunteers from the Haitian and Dominican Red Cross Societies, mobilizing 13 tanker trucks in 6 settlements in Port au Prince. As a result of this action, approximately 24,000 people have received water. In addition, the Spanish Red Cross has installed two bladders in Delmas 33 and Carrefour Aviation. Another bladder was installed by the ICRC in Delmas 33. In total, an additional 234,350 litres of water have been distributed to the General Hospital.

Contributions to the Revised Appeal are flowing in thanks to strong support from donors including Partner National Societies, companies and individuals. However, given the increased budget of this revised Appeal, there is a significant need for on-going generous contributions to ensure vital assistance is provided to the affected Haitian population. The donor response list which is published on the public web site is constantly being updated.

The situation

Seven days after the unprecedented damage caused by earthquake, humanitarian conditions continue to be extremely difficult in Haiti, with increasing needs on the part of the affected population. The capital city of Port au Prince is the worst affected area, with a population of over two million inhabitants, many of whom already lived in extremely vulnerable conditions prior to the earthquake. Tens of thousands of households have been destroyed as housing occupation density was extremely high in the capital. The extensive destruction has forced the displacement of thousands of Haitians who are establishing makeshift settlements in open areas away from unstable structures, in parks, sport fields, churches and grassy medians of main roads. It appears

from initial assessments that many of the surrounding communities have also been affected with up to 80 per cent -90 per cent damage. Assessments continue in rural communities in order to obtain clearer information.

The international humanitarian community is working to overcome the challenges posed in the area of logistics to mobilize and distribute aid as soon as possible to those who desperately need it. The Port-au-Prince International Airport, currently being operated by the U.S. military, is open but heavily congested. There is limited capacity for flights to land as the airport only has one landing strip and standing room for 18 planes at a time. Due to the congestion, many organizations have had to re-route their flights carrying humanitarian aid and personnel to Santo Domingo, including the Red Cross Red Crescent Movement. This leads to delays because of the added shipping time required to send the items by land to Port-au-Prince. The main port in Port-au-Prince remains inoperable as the docks and loading cranes are damaged; arriving vessels could be redirected to the port in Cap-Haïtien on the northern coast of Haiti.

The lack of fuel has been a concern for humanitarian activities. The United Nations' Office for the Coordination of Humanitarian Affairs (OCHA) reports an increase in fuel prices, which have now reached the equivalent of USD 10 per gallon. The UN has agreed to manage a pipeline for fuel to supply for all humanitarian aid agencies. There is very little food to be found and what is available has increased drastically in price.

The health and sanitary situation is growing increasingly precarious in the makeshift settlements and streets. The proper management of bodies is an issue that concerns all actors involved in the response. The need for specialized medical supplies, equipment, and physicians is extremely urgent, as well as for clean water and waste management. The World Health Organization reports that the displaced populations are at high risk from outbreaks of disease, due to reduced access to safe water and broken sanitation systems.

The logistical problems affecting the rapid arrival of relief aid and food to the country are increasing the frustration among the population. There are reports of an increase in incidents of violence and looting and there is growing tension as the vulnerable become more desperate to receive food, water and shelter.

The President and Secretary General of the International Federation were in the Dominican Republic on 18 January to attend a high level summit on the Haitian emergency, summoned by the Haitian and Dominican Presidents, and hosted by the Dominican Republic. The President announced on Monday that the International Federation intends to maintain its humanitarian support in Haiti for an unlimited amount of time, and that the main implementers will be the Haitian National Red Cross Society and the Dominican Red Cross.

He added that the affected population must rest assured that the Red Cross will permanently offer support and relief and strive to preserve human dignity with an aim to facilitate overcoming the pain and suffering caused by the loss of family members, wounds and injuries, damage to properties and the general consequences endured by the Haitian nation.

The President of the International Federation also stressed the need for world perception to be focused on the humanitarian aspect of this emergency, and that the humanitarian task must rely on effective coordination so that relief reaches those in need in a timely manner.

Coordination and partnerships

As the days pass, aid agencies are able to better organize their operations and to increase their delivery of immediate assistance to those in need, as well as to coordinate their efforts with other agencies with the aim of making the best use of the limited resources available. At this point, coordination meetings for the Logistics, Shelter/NFI, Water and Sanitation, Health and Food Clusters are being held regularly. In addition, the Child Protection cluster has also been activated.

The Red Cross and Red Crescent Movement has now established the Chabouma base camp. Daily coordination meetings have been organized and are attended by all Red Cross and Red Crescent stakeholders present.

A Movement Coordination Platform is operational and a second meeting took place on 17 January. Various Secretariat staff members have joined the efforts in Port au Prince.

At this time, 17 ERUs have been deployed, of which seven are operational in Port au Prince and one in Santo Domingo.

ERU Deployment to date. Additional ERUs are expected to be mobilized.

ERU Type	Approx. no. of personnel	National Societies	Installed & operational
Referral Hospital	46	German and Finnish RC	ETA 22 Jan
Rapid Deployment Hospital	29	Norwegian and Canadian RC	Yes, additional equipment and personnel arriving shortly
Fixed BHC	10	Japanese RC	Personnel in PaP, equipment arriving shortly
BHC	13	Finnish, French and Swedish RC	Yes
BHC	10	German RC	Yes
Relief	5	American RC	Yes
Relief	6	Benelux and French RC	Yes
Logistics	4	British RC	Yes
Logistics	6	Swiss RC	Yes
WatSan	6	French RC	Yes
WatSan	6	Spanish RC	Yes
IT /Telecom	5	Spanish RC	Yes
IT/Telecom	5	Danish and American RC	Pending arrival
Sanitation M20	7	Austrian RC	Pending arrival
Sanitation M20	TBC	British RC	Pending arrival
Base Camp	13	Italian RC	Currently being installed
Base Camp	6	Danish RC	Pending arrival
17 ERUS	177	16 National Societies	11 ERUs in the field

FACT	National Society
Team leader	Canadian Red Cross
Reporting	Canadian Red Cross
Health coordinator	Federation/Norwegian Red Cross
Relief coordinator	American Red Cross
Media	Federation
IT-Info Mgt.	Danish Red Cross
Shelter (2)	Swiss RC/ Andorran Red Cross
Finance	Icelandic Red Cross
Security	Federation
HR/BCH –TL	Japanese Red Cross
Assessment	Finnish Red Cross
Recovery	British Red Cross
Logistics (2)	Federation
Wat/San	Federation/Spanish Red Cross

Given the nature of the situation in Haiti, the Federation and ICRC are collaborating closely on a 'Movement' approach, including collaboration, facilitation, and support for the entry and movement of the Field Assessment and Coordination Team (FACT) and Emergency Response Unit (ERU) assets.

The Federation's Geneva-based secretariat continues to support the operational coordination in the Zone and field with the deployment of global surge capacity and representation in global level coordination meetings at the UN and other multi-lateral agencies.

The Haitian National Red Cross Society has shown incredible resilience in the face of this disaster. At the onset of the emergency, it was not possible to establish contact with the headquarters, but then as time passed, HNCRS volunteers started gathering and providing basic health care and other services to those in need. The HNCRS is at the heart of the Red Cross / Red Crescent response in Haiti, and is coordinating with all Movement Partners.

Red Cross and Red Crescent action

Overview

A high level team of the International Federation, made up of the President and Secretary General of the Federation, the President of the American and Dominican Red Cross and the Director of the Americas Zone, arrived in Port-au-Prince on 19 January to spearhead joint coordination of relief and rescue operations, as well as distribution of the relief items channelled through the Dominican Red Cross.

The Red Cross and Red Crescent Movement has established a base camp from where it is coordinating and implementing all response activities. Relief workers from sister National Societies have come to Haiti to lend a hand to the HNRCS in reaching out to quake survivors. One of these National Societies is the Turkish Red Crescent (TRC), which has so far deployed relief and logistics delegates and a psychologist to provide psychosocial support. This team arrived in Port au Prince on 15 January. A relief consignment was dispatched to Haiti from Ankara containing 200 family tents, 2,000 blankets, 145 kitchen utensils and 1,000 body bags.

The TRC's response team started distribution of 200 food rations each including: 2 litres of milk, 1 litre of fruit juice, 2 pounds of sugar, 1 can of corn, 2 cans of red beans, 2 litre of potable water, 2 cans of sauce, 2 cans of sardines, 1 box of 10 bars of chocolate, 1 pack of sweet crackers and 1 pack of salty crackers in the capital Port-au-Prince in close coordination and cooperation with International Federation staff and the Food Cluster established by the UN. The TRC has launched a donation campaign in Turkey and called for the people of Turkey to extend their helping hand to people of Haiti by contributing to the campaign.

The Colombian Red Cross Society (CRCS) is also present in Haiti as part of a contingent sent by that country. This rescue team has pulled at least one survivor out of the rubble. Fifteen additional CRCS volunteers will join the team of 29 already in Haiti. Work will continue by this sister National Society in the areas of temporary shelter, search and rescue, water and sanitation, health, restoring family links and telecommunications and logistics.

The Mexican Red Cross has a search and rescue team in place which has been working tirelessly and will now join the relief operation.

With the aim of addressing the most urgent relief and shelter needs, a plan of action has been developed to address these needs and implementation has begun immediately.

The FACT and ERUs in the field are working arduously to deliver the critically needed relief, and in many cases are already doing so, as is the case of the health ERUs that are already treating patients and are due to start performing surgeries at the camp hospital.

The ICRC is supporting the HNRCS in the area of first aid and has assisted the National Society to establish ten first aid posts in makeshift camps across Port-au-Prince. These first aid posts are now operational and are expected to provide basic care to thousands of people. The ICRC delivered around 600 body bags to various search and rescue teams.

The ICRC together with the HNRCS has opened a family links post in the Headquarters of the National Society. A family links antenna has been established in Croix de Pré in an attempt to reunite family members separated by the earthquake and people are able to forward and receive information about relatives. The ICRC has been granted local radio signal airtime to advertise the family linking service in Haiti and posters are being developed to inform about the service.

Six truckloads carrying 36 metric tons of ICRC relief supplies arrived in Port au Prince on Sunday, immediately boosting the organization's capacity to help those in need.

The ICRC is providing water in 3 areas of Port au Prince covering the water needs of 7,500 people living in makeshift camps. Two water distribution points have already distributed 40,000 litres of water. In addition, latrines have been built in the Delmas area. Assessments of the water situation were conducted in Canapé Vert and at Haiti's University Hospital.

Progress towards objectives

The operation is guided by the strategic aim to save lives, protect livelihoods, and strengthen recovery from disasters. The Appeal focuses on three key principles: quality services to targeted beneficiaries; an integrated approach linking all programme areas in the services provided to beneficiaries and a livelihoods approach that forms the basis of the recovery phase of the operation.

During the relief phase, the operation is focusing on the timely provision of essential relief items, emergency shelter and preventive and curative health care, as well as water and sanitation initiatives to reduce the spread of water-borne disease. In the recovery phase of the operation, the focus will shift to the rehabilitation and reconstruction of homes and community infrastructure (such as schools, health centres and markets) and the restoration and strengthening of livelihoods. Throughout all phases of the operation, the capacity of the HNRCS will be strengthened to deliver an integrated multi-sectoral disaster response targeting the most vulnerable communities.

The relief and recovery processes will be supported and guided by a commitment to holistic assessment and analysis including the continuous participation of the disaster affected communities in the definition of needs and appropriate solutions.

Relief distributions (basic non-food relief items)

Objective 1 (Relief phase): People affected by the earthquake will have benefited from the distribution of basic non-food relief items.

Expected results	Activities planned
<p>Affected families receive kitchen sets (1 per family) and blankets (2 per family).</p> <p>People affected by the earthquake see their basic needs met by receiving essential non-food relief items.</p>	<ul style="list-style-type: none"> • Relief ERU deployment to support relief activities in collective shelters. • Conduct rapid emergency needs and capacity assessments. • Develop beneficiary targeting strategy and registration system to deliver intended assistance. • Procurement and transport of relief supplies and materials. • Distribute supplies and control supply movements from point of dispatch to end user (possibly to include unconditional cash grants). • Monitor and evaluate the relief activities and provide reporting on relief distributions. • Develop an exit strategy.

Shelter, water and non-food items have been identified as critical needs. Most families have lost their homes and basic household items, such as kitchen utensils, blankets, hygiene items. Access to water is limited. It is essential to provide people affected by the earthquake with basic non-food relief items.

Progress: Representatives from the International Federation in the field continue to attend non-food items Cluster coordination meeting, sharing assessments and planned distribution information.

A joint **Relief/Shelter Plan of Action** to assist an initial 60,000 families has been developed and is ready to be implemented urgently, prioritizing the distribution of a non food items package. This Family Kit package contains the following items:

	Item	Per family	Families	Total for mobilization
1	Family hygiene kit	1 per month	60,000	60,000
2	Kitchen set	1	60,000	60,000
3	Tarpaulins	2	60,000	120,000
4	Rope	1	60,000	60,000
5	Blanket (light)	5	60,000	300,000

6	Mosquito nets	2	60,000	a120,000
7	Jerry cans	2	60,000	120,000
8	Buckets	1	60,000	60,000
9	Aqua tabs	1 (family pack) 1 tab per/litre 8 Ltr/pp/pd X 30 days	60,000	60,000
Shelter items to be distributed by Relief ERU				
10	Tents	1	10,000	10,000
11	Shelter kits	1	10,000	2,000

Jerry cans and aqua tabs will be provided in conjunction with health education and hygiene education activities. HNCRS volunteers will explain and demonstrate to beneficiaries the use of the aqua tabs.

The American Red Cross and French/Benelux Red Cross Relief ERUs together with FACT Relief and FACT shelter coordinators have developed a plan which includes looking into the feasibility of cash transfer programming for the most vulnerable families. The Haitian National Red Cross Society has experience in cash transfer programming and is in agreement with implementing this type of intervention.

The contents of baby kits and additional items for pregnant women and mothers with young children are yet to be defined. An HNCRS standard kit will be defined and requisitions will be submitted to logistics for mobilization.

There are several Red Cross and Red Crescent Societies that are bringing in food kits, including the Colombian Red Cross and Turkish Red Crescent. The HNCRS has agreed that the Relief ERU will facilitate the distribution of these items.

Location of beneficiaries: Affected people are congregating in parks, in the streets, are staying with host-families, and are beginning to build make-shift tents close to their destroyed homes. The Relief ERU and the Relief FACT team have identified points of distribution in the capital as follows:

Delmas	Diahatsu #1
Paco	Croix des Pres
Delmas	Diahatsu #2
Delmas	Camp Simon
Delmas	Haitian Tractor
Delmas	Camp Pele

Distribution vouchers have already been handed out in these areas with an aim to facilitate distribution activities and to ensure that these occur in an orderly manner. The distribution of relief supplies will expand outward from these areas, and will also incorporate other areas, in coordination with the NFI/Shelter Cluster.

Selection Criteria: Priority will be given to families whose homes are uninhabitable. Within this group of families, priority will be given to female-headed households, the disabled, elderly and otherwise disadvantaged persons.

Challenges: Distributions are now beginning. Security is a concern and, as a result, the Relief ERU has secured the support of MINUSTAH staff for all distributions.

Water, sanitation, and hygiene promotion	
Objective 1 (Relief phase): The risk of waterborne and water related diseases has been reduced through the provision of safe water, adequate sanitation and hygiene promotion.	
Expected results	Activities planned
Affected families and health centres gain access to safe drinking water, adequate sanitation and hygiene promotion.	<ul style="list-style-type: none"> • Coordination of Movement water and sanitation activities. • Provision of water through the ERU Water and Sanitation deployment providing safe water to up to 30,000 people. • Conduct rapid emergency needs and capacity assessments and deploy further ERUs (including sanitation) if needed.

	<ul style="list-style-type: none"> • Distribute water and sanitation relief supplies (household water treatment, jerry cans, buckets, etc) and provide training on use of items. • Mobilize HNRCS volunteers to carry out hygiene promotion activities during distribution. • Monitor activities and provide reporting.
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Situation: Although it is not possible at this point to have full details concerning the sanitation situation or the exact number of people without water supply, it is clear that there are thousands of people in need of water and sanitation services, especially in the areas where the displaced have gathered. There are existing water sources that can be used, so there is no immediate need for production of new water sources. Some of the current sources of water supply are not providing potable water at this time.

The Haitian Water Ministry is hosting WASH Cluster meetings supported by UNICEF, which are being attended by the Red Cross / Red Crescent. Action Against Hunger (ACF), Oxfam, and other organizations are also active and more organizations are joining daily. The city has been divided into areas to be assessed and covered by the various organizations. Standards on water points management are being agreed by organizations in order to avoid future problems and “competition” (salaries, number of persons managing the points etc).

Progress: The WASH cluster strategy has been defined, including the management of water points and water trucking. Two water and sanitation staff members are on the ground (one FACT member deployed from PADRU and one Spanish Red Cross WatSan Delegate from the GWSI programme), with the possibility of this need increasing in the future. Recruitment of a water and sanitation coordinator for the field is being undertaken.

Two Water and Sanitation ERUs have been deployed by the Spanish and the French Red Cross Societies. With these Units, 2 water treatment plants will arrive, each of which capable of producing water for 15,000 people daily. The staff have arrived in Port-au-Prince, with the equipment to follow soon over land from the Dominican Republic as the plane carrying it was re-routed to Santo Domingo. Two additional ERUs will arrive this week from the Austrian and British Red Cross which will implement hygiene promotion and sanitation activities for up to 20,000 people each.

The Spanish Red Cross has already distributed 120,000 litres of water in coordination with volunteers from the Haitian and Dominican Red Cross Societies, mobilizing 13 tanker trucks in 6 settlements in Port au Prince. As a result of this action, approximately 24,000 people have received water in the areas of Saint Louis in Delmas 33, in Bicentenaire, la Place Nationale and Université Quisqueya, Carrefour aviation (2 camps) and Cité Militaire. Since the ERU equipment is yet to arrive, the teams are working with HNRCS water and sanitation equipment. In addition, the Spanish Red Cross has installed two bladders in Delmas 33 and Carrefour Aviation. Another bladder was installed by the ICRC in Delmas 33. In total, an additional 234,350 litres of water have been distributed to the General Hospital.

Challenges: Water points are not currently available at the areas where the displaced have congregated which is an issue to be addressed.

Emergency health

Objective 1 (Relief phase): The immediate health risks of the emergency on the affected population are reduced through the provision of preventive, community-level and curative basic health services.

Expected results	Activities planned
A rapid deployment hospital, a referral hospital and Basic Health Care ERUs serve the primary health care needs of the affected population.	<ul style="list-style-type: none"> • Assess the health risks of the affected population in terms of access and availability of health services, prevention, health needs and risk of communicable diseases and epidemics. • Identify and target groups at higher health risk including children, mothers, pregnant women, the elderly and people living with HIV/TB. • Deployment of the rapid hospital ERU and a referral hospital to its area of operations to provide medical and surgical health care. • Deployment of the community outreach module as part of the hospital to provide health promotion and epidemic surveillance, prevention and control measures. • Deployment of the psychosocial support module as part of the hospital

<p>Prevention of epidemics is ensured.</p>	<p>to provide PSP services to affected population.</p> <ul style="list-style-type: none"> • Deployment of the basic health care ERUs to their areas of operations and provision of service. • Provision of reproductive health kits to ERUs to cover needs including medical, surgical, clean delivery, and gender violence. • Continuously assess and fulfil the needs for further curative, preventive, and community health services throughout the emergency phase including further deployment of health ERUs, materials or personnel. • Continuously monitor the risk of epidemics including diarrhoea, cholera, measles, vector-borne diseases and others through active surveillance in health facilities and in the community. • Conduct epidemic prevention and response as assessments and needs indicate. • HNRCS volunteers raise awareness in their communities to epidemics and communicable diseases and provide preventive, control, and health information, education and support. • Train volunteers and staff as needed on the use of the Federation epidemic control and community health tools (Epidemic Control for Volunteers, CBHFA).
<p>All activities in the area of health are well coordinated.</p>	<ul style="list-style-type: none"> • Coordinate health activities with the Ministry of Health and the health cluster • Coordinate activities, specifically prevention and community outreach with Water and Sanitation activities.

Progress: A joint Canadian and Norwegian Red Cross rapid deployment hospital is now operational in Port-au-Prince's University Hospital. This 70-bed facility can provide assistance to 200 wounded people each day. Patients are already being treated here, and triage is being carried out while the infrastructure is set up. There are plans to establish a larger 150-bed German hospital during the week.

The Finnish and German Red Cross Societies have two mobile BCH units in the field with capacity to each provide preventive and curative health to some 30,000 people. The base for the mobile units has been set up in the Red Cross base camp and outreach activities have started to the numerous temporary settlements in the Port-au-Prince area and around the Haitian Red Cross' destroyed facility in Bicentenaire.

The Japanese Red Cross Society basic health care unit personnel have arrived and are now assessing where best to deploy their fixed unit.

Emergency health kits for 30,000 people which were donated by the Spanish Red Cross in 2008 have been distributed to the central hospital in Port-au-Prince and to volunteers from the Haitian and Dominican Red Cross Societies who are providing first aid care.

Challenges: There are many challenges related to the provision of emergency health since there are thousands of wounded who need urgent attention. Efforts are now focused on the rapid deployment hospital and the basic health care units.

Shelter and community infrastructure

Objective 1 (Relief phase): Ensure that some 30,000 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	Activities planned
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<p>30,000 affected families have adequate emergency shelter which assists them in returning to their daily lives.</p>	<ul style="list-style-type: none"> • Conduct rapid emergency needs and capacity assessments with the support of HNRCS volunteers. • Develop community and beneficiary targeting strategy in coordination with local authorities and other humanitarian actors. • Procure and distribute suitable shelter relief options (tents, shelter kits complemented with other construction materials and tools). • Procure and distribute other household NFIs in coordination with relief. • Provide basic guidance on the use of shelter relief items to complement the distribution. • Develop a shelter strategy and plan of action to deliver on both transitional shelter solutions and shelter early recovery options. • Identify and prioritize vulnerable groups for the next phase. • Monitor and evaluate the shelter activities and report on distributions.
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Progress: The FACT shelter delegate has been attending shelter Cluster coordination meetings to evaluate where to establish camps for the affected people. The FACT shelter team member and the Relief ERU are working together to provide integrated relief and shelter support.

Addressing immediate and longer term shelter needs is a top priority. So far, 700 tents have already arrived in Port-au-Prince from the French Red Cross. A hundred additional units from the Iranian Red Crescent arrived on 18 January, as well as 20 units from the Swiss Red Cross. Up to 4,260 additional tents will arrive in the following days from the American and Canadian Red Cross Societies and from the United Arab Emirates Red Crescent.

Tarpaulin distribution still remains as a priority combined with rope. Seventy six shelter kits units have arrived from the Spanish Red Cross. In addition 6,915 tarpaulins (4 x 6 m) have arrived in Port-au-Prince from the Netherlands and Spanish Red Cross Societies. Up to 5,050 more units from the British, Spanish and Swiss Red Cross Societies are scheduled to arrive shortly. Up to 44,053 more tarpaulins have already been requested and reflected in the Mobilization Table.

Challenges:

There is a pressing and immediate need for emergency shelter, however the logistical challenges have slowed down the process. This is why local alternatives must be identified in this early phase for the shelter kits, such as usage of recovered materials from the debris to use as part of the emergency shelter frame. Shelter delegates within the Relief ERU and FACT are working arduously on finding feasible solutions based on the specific context.

On 19 January, the authorities announced their intentions of relocating people from an estimated 380 makeshift camps into one or several large emergency settlements, with huge implications for aid organizations' shelter strategy. The proposed course of action will be elaborated over the next few days and the Federation's strategy will be adjusted accordingly.

Livelihoods	
Objective 1 (Relief phase): Disaster affected individuals and households are assisted through livelihood substitution activities.	
Expected results	Activities planned
<p>Vulnerable individuals and households are actively involved in relief planning and delivery and benefit from livelihood substitution activities.</p>	<ul style="list-style-type: none"> • Assessment and participatory planning. • Selection of target communities and beneficiaries. • Delivery of livelihood substitution activities such as cash-for-work for debris clearing. • Delivery of livelihoods / income substitution activities such as unconditional cash grants. • Support for community-led livelihood restoration activities through the provision of productive assets, tools, waste removal, etc. • Monitoring and reporting. • Replication of successful pilot initiative and quick impact projects. • Lesson learnt exercises and transition to recovery planning.

Progress: Consideration is being given to engaging the population to recover shelter materials from the debris to use as part of the emergency shelter frame, using a cash for work or methodology.

Challenges: None to report.

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.

Progress: None to report.

Challenges: None to report.

Operational support

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	Activities planned
<p>The shared ICRC / HNRCS VHF network is covering the operational areas.</p> <p>Radio contact is possible from branches to communicate operational updates.</p> <p>Data communication and office facilities are available for the operation.</p>	<ul style="list-style-type: none"> • Deployment of ERU IT/Telecoms. • Rehabilitation of VHF repeaters. • Installation of one VHF repeater for coverage of Sud and Sud-Est. • Rehabilitation of VHF base stations. • Installation of VHF radios in vehicle. • Installation of data connectivity facilities and provision of IT support. • Monitor activities and provide reporting.

Progress: An IT and Telecommunications FACT member is in the field supporting FACTs, ERUs, the HNRCS and other Movement partners. A temporary office has been set up within the Red Cross base camp. The office has a shared internet connection which is open for Movement members, thus ensuring communications.

Power is currently provided from small 4KVA generators. A large 110V generator is available and used for perimeter lighting, but most ERU equipment is running on 220V.

Haiti's mobile networks are covering most parts of Port-au-Prince, but the network is still very congested and only a small percentage of calls are successful. Texting (which is the main means of communication to date) and data services are operating in a more stable manner. The Ericsson response team has mobilized a mobile cell system which will be dispatched as soon as the conditions in the field are appropriate for its use.

The ICRC radio network is fully operational, although overloaded. This system is and has been key in ensuring security for the Red Cross / Red Crescent team after the earthquake.

With an aim to better equip International Federation staff in the field, the following items have been requested to PADRU and are due to arrive in the Base Camp soon: 10 laptops, 50 VHF handsets, 10 Mobile VHF radios, printers, VHF repeaters.

Challenges: None to report

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. <i>To link to the Federation's logistics mobilization table: <https://www-secure.ifrc.org/DMISII/Pages/03_response/0307_logistics_mobTab.aspx></i>	
Expected results	Activities planned
All programs receive professional logistics support and goods are received for distribution as planned.	<ul style="list-style-type: none"> • Deployment of a logistics ERU. • Assess logistics infrastructure. • Set up efficient logistics unit and identify best supply chain to support the operation. • Carry out reception of air and sea relief goods and arrange transportation to distributions points. • Liaise and coordinate with other key actors to ensure best uses of all information. • Monitor activities and provide reporting.

Progress: A Logistics ERU from the Swiss Red Cross was established in Port-au-Prince, and a similar ERU from the British Red Cross is in Santo Domingo operating alongside the Dominican Red Cross. Both are in contact with the Regional Logistics Unit in Panama. Two additional Logistics ERUs arrived with material on 18 January, and a Logistics Coordinator has already crossed the Dominican border on his way to Haiti.

A warehouse was established in Port-au-Prince in the base camp compound and is receiving goods for distribution. Three to four 20 foot trucks are available each day for the transfer of goods from the airport to the warehouse. Additional space is being sought by the ERU, and should be available soon. Logistics staff in Santo Domingo are securing warehousing space with close cooperation of the Dominican Red Cross. Seven vehicles were rented to be used whilst the 4x4 vehicles for the Federation are shipped to the country.

Good contact was established with Logistics Cluster and "US Airborne", in charge of the operations in the Port au Prince airport. Confirmation is expected regarding the fuel situation in the country, so as to determine whether or not it will be necessary to import fuel. Transportation of items from Santo Domingo to Haiti is being ensured.

A number of relief items sent by the Spanish Red Cross have arrived in Santo Domingo: 915 tarpaulins, 720 kitchen kits and 4,950 blankets. A charter from Panama with 1,200 family kits (blankets, tarpaulins, bucket, jerry cans, mosquito nets, hygiene kits and kitchen sets) also arrived on 18 January.

With an aim to overcome some of the current logistical challenges, in particular the damages to the airport and the port, the International Federation is looking into the possibility of including in this operation a RO/RO vessel.

A flight containing relief items from the British Red Cross arrived in Haiti on 18 January. On 20 January, a flight with items funded by DfID will depart from Panama to Santo Domingo carrying 2,500 family kits for the ICRC, vehicles and partial family kits from the Danish Red Cross. In addition, two flights are confirmed for Tuesday 19 January to Port au Prince carrying relief items from Panama on behalf of the Canadian and American Red Cross Societies.

Five rumbhall (5.5 m x 16 m steel frame - 88 m²) multipurpose tents have arrived from Spanish Red Cross to be used as decentralized points as needed.

Challenges: The Port-au-Prince airport continues to be very congested with all the aid coming in and in light of the damages it has sustained and the shortage of fuel to refuel planes that arrive. The mounting security concerns relative to ground transportation continue to affect logistics, as well as the severe damage sustained by the majority of roads in the capital city. Poor communications have also affected the logistics.

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	Activities planned
<ul style="list-style-type: none"> • 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. 	<ul style="list-style-type: none"> • Deployment of Emergency Security Coordinator (first 6-8 weeks). • Recruitment of Security Coordinator for 12 months + • Implement IFRC Minimum Security Requirements (MSR), and the establishment of a sound security management process. • Participate in, and give advice to operational planning meetings, Critical Incident Management teams and Task Forces. • Monitor the security situation and provide updates and security briefings. • Manage security incidents and provide incident analysis • Provide security briefings and debriefings for RC/RC personnel in the operation. • Ensure a 24/7 security support and advice to operation. • Contract and manage security guard force company at offices, accommodations, warehouses and operational sites.

Situation: The security risk in Haiti remains significant as the initial shock in the wake of the earthquake fades and turns to despair and frustration. Cases of attacks on survivors by gangs have occurred, and over 4,000 inmates escaped from the capital's prison following the destruction caused by Tuesday's earthquake and are currently on the loose in the city.

Some 3,000 UN troops are patrolling the capital, though local police presence is close to non-existent in some areas that remain isolated due to closed roads. The UN Secretary General is recommending boosting the number of UN troops by 2,000 and the police by 1,500 to bolster security. In addition, the United States military expects to expand its contingent to 10,000 troops in Haiti and on ships offshore to support operations and maintain order in the city, and it was reported yesterday that Canada will send some 1,000 troops, which should arrive in a week.

Progress: The International Federation's Security Coordinator has arrived in Port-au-Prince, is assessing the base camp security set up, the general situation and will initiate the recruitment process for a field security coordinator.

Communications – Advocacy and Public Information

Worldwide interest in this emergency has remained very high throughout the week. Both traditional and social media have been crucial for dissemination of information on the needs and for fundraising with the general public.

During the course of the operation, as many as 150 interviews have been conducted with the media, both from the Secretariat Headquarters and the Zone Office in Panama.

The Federation's communications team in Panama will be producing short videos with interviews with Geneva-based operational experts on the various areas of work in the field, which can serve both web, media, background and internal uses. The first one will be on the topic of emergency health priorities.

The Google Advance Web Search returns approximately 20,000,000 hits for "Haiti Earthquake Red Cross" and Google News Advanced Search returns more than 16,000 distinct hits for "Haiti Earthquake Red Cross". Furthermore, Google Blog Search returns approximately 300,000 hits for "Haiti Earthquake Red Cross".

A cameraman/photographer is gathering footage and photos on the operation and the Federation's photos which are available on Flickr have received more than 1 million views within 24 hours.

Since the issue of the Preliminary Revised Appeal, four press releases have been issued and two stories have been published on the Federation's web site. In addition, a question and answer document, with additional reactive messaging and global facts and figures has been distributed to all PNS.

The Federation's audiovisual data base (videos and photos) can be found at the following address:
sendBasket.index2.jsp?basketID=G5TVBL93WKD19HSVYJ4DVF7UR2

In addition, the following online resources are available:

- A special page on the earthquake response has been created on the Federation web site at <http://www.ifrc.org/haiti>
- The latest ICRC update can be seen through this link: <http://www.icrc.org/eng>
- The special page on the earthquake response can be seen on the Federation's website for Latin America at <http://www.cruzroja.org/emergencias/2010/haiti/index-ter.htm>
- Updates are also being placed on Twitter: <http://twitter.com/federation> and a photo gallery is also available in Flickr
- http://www.flickr.com/slideshow/index.gne?set_id=72157623207618658
- All internal information is being posted on FedNet: <https://fednet.ifrc.org/haiti>

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 is committed to the Humanitarian Charter and Minimum Standards in Disaster Response (Sphere) in delivering assistance to the most vulnerable.

The International Federation's activities are aligned with its Global Agenda, which sets out four broad goals to meet the Federation's mission to "improve the lives of vulnerable people by mobilizing the power of humanity".

Global Agenda Goals:

- Reduce the numbers of deaths, injuries and impact from disasters.
- Reduce the number of deaths, illnesses and impact from diseases and public health emergencies.
- Increase local community, civil society and Red Cross Red Crescent capacity to address the most urgent situations of vulnerability.
- Reduce intolerance, discrimination and social exclusion and promote respect for diversity and human dignity.

Contact information

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