

Final report



International Federation
of Red Cross and Red Crescent Societies

Haiti: Hurricane Season 2008

Final report
Emergency appeal n° MDRHT005
GLIDE n° TC-2008-000147
19 October 2010

Period covered by this Final Report: 5 September 2008 to 5 November 2009.

Appeal target: The budget sought CHF 8,475,870 (USD 7,895,768 or EUR 5,539,350) in cash, kind or services to support the Haitian Red Cross Society to assist 10,000 families (50,000 beneficiaries).

Final Appeal coverage: 100%;

[<Click here to go directly to the final financial report, or here to view the contact details>](#)

Appeal history:

- CHF 300,000 (USD 272,727 or EUR 186,335) was allocated from the Federation's Disaster Relief Emergency Fund (DREF) to support this operation on 27 August 2008.
- A Preliminary Emergency Appeal of CHF 3,812,770 (USD 3,466,154 or EUR 2,360,848) was launched on 5 September to support the Haitian Red Cross Society to assist 10,000 families (50,000 beneficiaries) for 6 months.
- The Preliminary Appeal was revised on 25 September to CHF 8,360,877 (USD 7,600,810 or EUR 5,177,020) and extended to a 9-month period.
- The Revised Emergency Appeal issued on 6 November 2008 features a Revised Budget for CHF 9,817,443 (USD 9,006,829 or EUR 6,293,233) to assist 10,000 families for 9 months.
- Delays of several weeks in the delivery of construction materials for the shelter programme had delayed the expected progress. As a result, the operations update published on 14 August reflects the extension of the appeal until 5 November 2009 (14 months). The budget was revised to CHF 8,475,870 (USD 7,895,768 or EUR 5,539,350) in line with Appeal funding including two additional pledges.



Within three months of the disaster, the HRCS assisted by the Relief ERU distributed non-food items to 10,000 of the most vulnerable families, thus helping 50,000 people recover from the events. Source: International Federation.

Summary: The hurricane season which officially begins in June and ends in November, left hundreds of people dead and tens of thousands homeless in Haiti in 2008 when Hurricane Gustav, tropical storm Hanna and Hurricane Ike made their impact as of 26 August last year. The hardest hit regions of the country were the departments of Sud, Sud-Est, Artibonite and the northern coast. These regions were cut off from the centre due to damaged roads and infrastructure. Emergency relief efforts by the Haitian Red Cross Society (HRCS) with the support of the International Federation's Pan American Disaster Response Unit (PADRU) and the Latin Caribbean Regional Representation began immediately, despite the challenges of accessing remote areas. Preparedness activities and pre-positioning of emergency relief items had been carried out in the months leading up to the hurricane season.

Following the initial assessment by a nine-member Field Assessment Coordination Team (FACT), a joint FACT- Emergency Response Unit (ERU) mission was undertaken in the country as of 2 September 2008 to assist and support the HRCS in its ongoing emergency relief efforts. These efforts focused on addressing the needs of the most affected people, were coordinated with Partner National Societies (PNS) present in the country as well as with the International Committee of the Red Cross (ICRC).

The Operation focused on providing immediate assistance to 10,000 families (50,000 people) through the provision of basic health care (BHC-ERU), water and sanitation, non-food items and shelter (Relief-ERU). The Operation also focused on building the capacity of the National Society to respond to future emergencies while reducing the risk of the most vulnerable communities. The activities were supported by the deployment of Logistics and IT/Telecom Emergency response Units and International Federation's Regional Intervention Teams (RITs) and delegates.

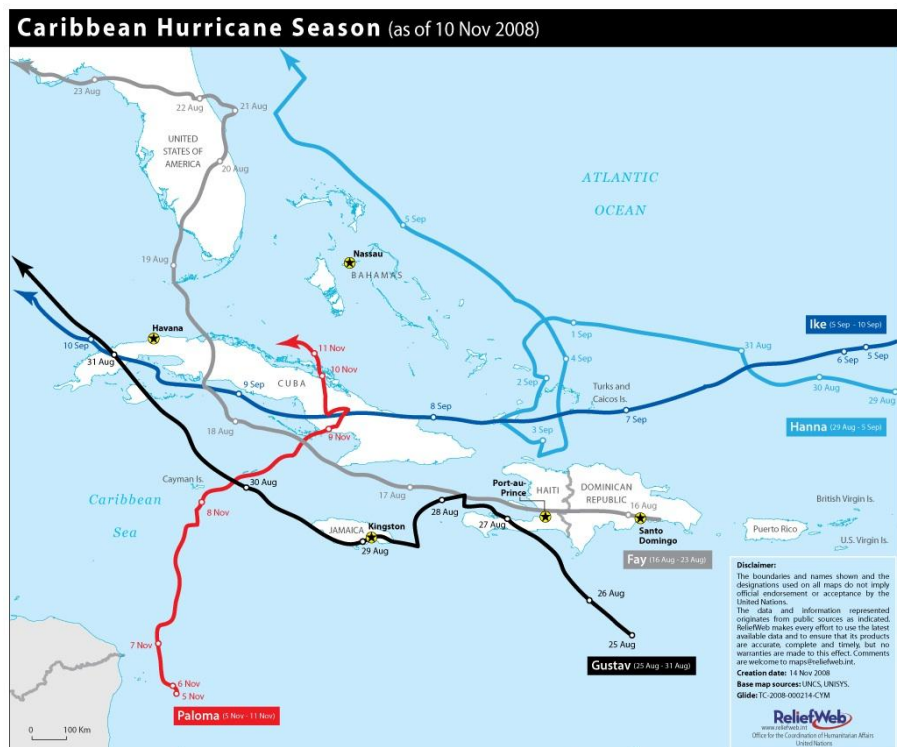
This Final Report focuses on the results of the Operation. The progress and achievement of each objective is described herein, as well as the impact on the affected population. Constraints, challenges and lessons learnt are also reflected.

The final financial report reflects a balance of 77,958 Swiss francs. It is proposed that approximately 12,000 Swiss francs from this balance will be allocated to support the International Federation's Pan American Disaster Response Unit, and the remaining funds will be reallocated to the emergency operation in response to the earthquake of January 2010 to support organizational development activities in the Haitian Red Cross Society.

The HRCS and the International Federation would like to thank the many donors for their generous contributions to the Appeal and the HRCS volunteers for their dedication and commitment, which were fundamental to the successful implementation and completion of the Operation.

The situation

Haiti is severely affected by hurricanes and tropical storms year after year, and during the 2008 hurricane season three major hurricanes hit the country with force leaving thousands of people affected in various parts of the country. On 26 August, Hurricane Gustav affected the southern area of the country. Just as the Haitian Red Cross Society was responding to this emergency with the support of a PADRU Disaster Management delegate who was deployed to the country, Hurricane Hannah unexpectedly changed its course creating torrential rains in Haiti. Hurricane Hanna left in its wake many parts of the



country flooded, this time particularly affecting the northern coast of the country. The city of Gonaïves (Artibonite) was isolated for almost four days before the first aid agencies were able come through. This was only a brief respite, however, as Hurricane Ike brought yet more rain and isolated this region again, along with other areas in the south of the country.

According to Département de la Protection Civile (DPC) statistics, 793 people lost their lives and damages to houses and infrastructure was unprecedented affecting 165,337 families (approx. 826,685 people). The government estimated the losses caused by the hurricanes at USD 1 billion in damage, and aggravated chronic malnutrition in several areas of the country.

Overview of Damages (TOTAL 4 Events: Gustave, Fay Hanna, Ike)

Department	Deaths	Missing	Injured	Families Affected	Houses destroyed	Houses damaged
Ouest	156	40	401	30,276	5,447	17,842
Artibonite	506	255	58	61,403	7,470	29,421
Centre	-	-	-	1,476	112	830
Nord Est	-	-	-	178	5	173
Nord	3	2	31	6,967	1,184	5,006
Nord Ouest	3	2	5	12,925	564	5,848
Sud Est	52	5	33	17,022	5,116	11,906
Nippes	19	1	13	3,587	504	3,078
Sud	48	2	6	27,754	1,685	8,792
Grande Anse	6	3	1	3,749	615	1,729
TOTAL	793	310	548	165,337	22,702	84,625

Source: Département Protection Civile (1 October 2008)

The scale of the disaster overwhelmed the local response resources. The HRCS requested the support of the International Federation to assist them in responding to the humanitarian needs resulting from the 2008 hurricane season (Gustav, Hanna and Ike), and mobilized the full capacity of the combined Movement partners present in Haiti. The International Federation provided full support to the HRCS and facilitated the rapid scale up of International Movement assistance within the country to conduct damage and needs assessments at the onset of the emergency.

The 2008 Operation was a positive collaborative and coordinated effort by all Movement partners and Federation tools. The HRCS benefited from the experience, and technical knowledge and support of the International Federation through the deployment of Field Assessment and Coordination Team, Emergency Response Unit, RITs, National Intervention Team (NIT) and volunteers. Support was provided from the secretariat in Geneva, the Zone in Panama, the Regional Representation in Santo-Domingo, PADRU in Panama, Partner National Societies and the French Red Cross – Plateforme d'Intervention Régionale Amerique-Caraïbes (PIRAC).

The HRCS and the International Federation worked actively together with other humanitarian agencies in the field and coordinated their efforts with the Humanitarian Forum led by the United Nations Office for the Coordination of Humanitarian Affairs (OCHA). They attended cluster and coordination meetings regularly to best coordinate efforts while avoiding duplication. The cluster approach and coordination efforts also contributed to the success of the operation by providing valuable support such as the Logistics Cluster (led by the World Food Program - WFP) that provided transportation and warehousing when necessary.

IASC CLUSTER APPROACH, Haiti 2008

SECTOR	LEAD
Inter-Cluster Coordination	OCHA
Agriculture	FAO
Food Security	WFP
Temporary Shelter and Non-Food Items	IOM
Logistics Coordination	WFP
Water and Sanitation	UNICEF
Education	UNICEF
Nutrition	UNICEF
Protection	OHCHR / UNICEF

Early Recovery	UNDP
Health	MoH / WHO
Telecommunications	UNICEF
Security	MINUSTAH

The Operation achieved the following results:

The provision of emergency health care: Two Basic Health Care ERUs were deployed to reduce the immediate health risks of the emergency on the affected population through the provision of basic health care to **9,837** patients. Additionally, **10,000** families received mosquito nets (two per family) to prevent vector borne diseases. For affected communities a health promotion campaign (including hygiene promotion, malaria prevention and psychosocial support) was conducted. As a result the capacity of the HRCS was strengthened.



All Movement partners in-country participated in multi-sector assessments to assist the HRCS in reaching the most vulnerable communities in the most affected areas. Source: International Federation.

Water, sanitation and hygiene promotion:

The risk of waterborne diseases has been reduced through the provision of safe drinking water, adequate sanitation and hygiene promotion: **10,000** families received relief items that facilitated access to safe drinking water and adequate sanitation (20,000 jerry cans, 10,000 hygiene kits, and 10,000 buckets). Cleaning tools were received by **1,500** families and **300** latrines were constructed. These same communities are experiencing improvement in behaviour related to hygiene promotion, reduction of the incidence of diarrheic diseases and increased community management of water and sanitation facilities through the implementation of the Participatory Hygiene and Sanitation Transformation (**PHAST**) methodology. In the Sud-Est department, the rehabilitation of the water-supply pipeline was completed providing adequate and safe drinking water up to **15,000** people (3,000 families).

Relief Distribution (Non-food items):

Three rotations of ERUs provided **10,000** families (approx **50,000** people) affected by the disaster with the provision of non-food items to resume household activities in a satisfactory way.

Shelter: A total of **4,000** families whose houses were damaged received shelter kits to provide sufficient covered space to allow for temporary shelter. Moreover, **400** families whose houses were destroyed received durable construction materials to rebuild storm-resistant houses.

Disaster management: In order to increase the resilience of communities to disaster and develop a stronger HRCS emergency response capacity, a disaster management component was implemented. Ninety one of the most vulnerable communities from seven departments of the country were included in a project to strengthen early warning systems, emergency plans and community emergency groups. To complement this, **3,000** family kits emergency stocks were pre-positioned in seven of the most difficult to reach HRCS branches.

Telecom: A capacity-building project to consolidate the HRCS VHF network and training volunteers was carried out.

Additionally to the emergency response teams (FACT and ERU) Federation delegates were deployed over the course of the operation, to assist the HRCS to complete the operation and achieve its objective. The deployed delegates were: Head of Operations, Finance and Administration Delegate, Logistics Delegates, Health Delegate, Water and Sanitation Delegate and Shelter Delegates.

Over the course of the past year, major clean-up operations and rehabilitation of infrastructure (which includes roads, bridges, canals and riverbanks) have been accomplished by the government with the support of the international community increasing access to the most remote areas of the country.

The Haiti Hurricane Operation was completed on the 31 October 2008 by the HRCS and the International Federation with the support of all Movement partners in country (ICRC, the American Red Cross, the Canadian Red Cross, the French Red Cross, the German Red Cross and the Spanish Red Cross). At the request of the HRCS, the International Federation will maintain its representation in-country to provide ongoing support to the HRCS in its efforts along with the International Federation's Regional Representation office in Santo-Domingo and Zone Office in Panama.

For more information about Coordination and Movement Partner activities, please refer to [Operations Update n° 4](#)

Red Cross and Red Crescent action

Achievements against objectives

Overview

Supported by the International Federation, ERUs and Partner National Societies, the HRCS succeeded in meeting the needs at the intended target group. Although most of the operation met the intended overall time frame, others required some adjustments due to delays encountered during the course of the operation.

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 as well as hygiene promotion.	
Expected results	Activities planned
10,000 families receive relief items that facilitate access to safe drinking water and adequate sanitation (20,000 jerry cans, 10,000 hygiene kits, and 10,000 buckets).	<ul style="list-style-type: none"> • ERU relief deployment. • Conduct rapid emergency needs and capacity assessments. • Develop beneficiary targeting strategy and registration system to deliver intended assistance. • Distribute relief supplies and control supply movements from point of dispatch to end-user. • Monitor activities and provide reporting.
Objective 2: (Transition and Recovery Phase). The risk of waterborne, water related diseases and injuries have been reduced through the provision of sanitation and hygiene promotion.	
1,500 families receive cleaning tools in Artibonite.	<ul style="list-style-type: none"> • Conduct rapid emergency needs and capacity assessments. • Develop beneficiary targeting strategy and registration system to deliver intended assistance. • Procurement of materials and equipment: wheelbarrows, shovels, etc. following International Federation procurement procedures. • Distribute supplies and control supply movements from point of dispatch to end-user. • Monitor activities and provide reporting.

Appropriate sanitation, including excreta disposal, solid waste disposal and drainage, is provided to 1,500 families in Artibonite for six months.	<ul style="list-style-type: none"> • Rehabilitation of 300 family latrines in Artibonite. • Vector control and prevention measures. • Waste disposal measures. • Drainage measures. • Monitor activities and provide reporting.
The health status of the population is improved through behaviour change and hygiene promotion activities.	<ul style="list-style-type: none"> • Train 26 community-based HRCS trainer of trainer's volunteers on Promotion of Hygiene and Sanitation (PHAST) methodology. • Initiate a hygiene promotion campaign within the affected population focusing on behaviour change and targeting 13 regional committees of HRCS. The focus of the campaign will be identified according to the needs and assessment. This will be integrated with the Health promotion campaign in the Emergency Health objective and activities. • Provide printed materials (posters, flyers, manuals, educational materials, etc) and other supplies to be used in the hygiene promotion campaign. • Monitor activities and provide reporting.

Impact Objective 1 (Relief Phase):

Following the rapid emergency damage and needs assessment conducted by the joint FACT/ERU team, three rotations of Relief ERU, American Red Cross / BeNeLux Red Cross Societies, were deployed to respond to the emergency in the provision of much needed non-food items to the affected population.

Between 16 September and 26 October 2008, **10,000** families received family kits that included items to facilitate access to safe drinking water and adequate sanitation and reduce the risk of waterborne diseases.

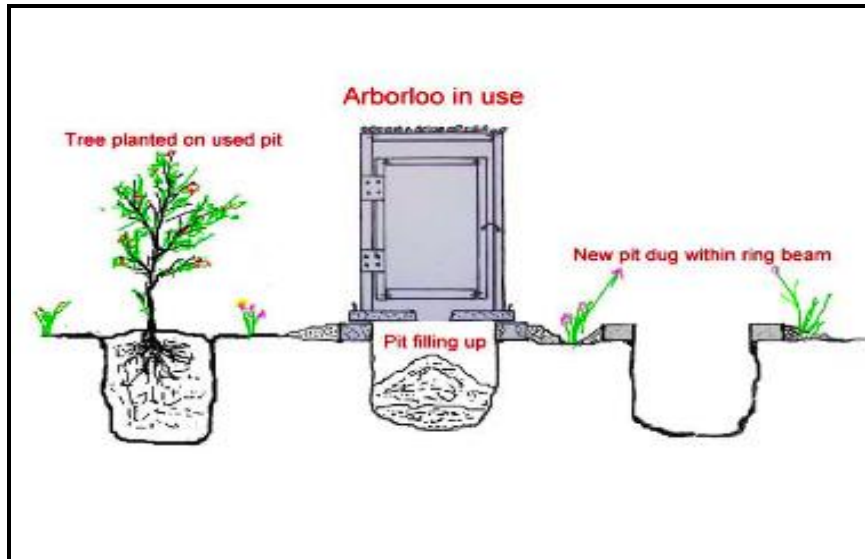
Each family received **two jerry cans, one hygiene kit and one bucket** as part of their family kit.

Department	Beneficiary Families	Jerry cans	Hygiene kit	Bucket
Sud-Est	425	850	425	425
Nord-Ouest	500	1,000	500	500
Grande-Anse	500	1,000	500	500
Les Nippes	500	1,000	500	500
Ouest	967	1,934	967	967
Centre	1,208	2,416	1,208	1,208
Artibonite	5,900	11,800	5,900	5,900
TOTAL	10,000	20,000	10,000	10,000

Impact: Objective 2: (Transition and Recovery Phase):

The distribution of **cleaning tools** benefited **1,500 families** in the rural zone around Gonaïves (Artibonite). A total of 230 hoes, 122 spades and 40 wheelbarrows were distributed between May and June 2008.

These same communities in Artibonite, **1,500 families**, benefit from appropriate sanitation through the construction of **300 latrines** under the Arborloo methodology. This particular latrine is called an Arborloo because a tree is planted on the filled pit. The Arborloo is then moved to a new place.



At the same time the community is experiencing improvement in behaviour related to hygiene and reduction of incidence of diarrheic diseases as well as increased community management of water and sanitation facilities through the implementation of the **PHAST methodology**.

Additionally, the HRCS volunteers in the Artibonite area have the capacity to utilize the PHAST methodology and carry out environmental sanitation projects.

Approximately **15,000 people** have access to safe drinking water in Peredo (Sud-Est department) through the rehabilitation of the clean water source and the implementation of a secondary pipe system. This seven-kilometre pipeline running from the mountain with a 100 metres overpass on the riverbed and at a height of 8 meters from the flatland provides water to the agricultural communities of Peredo.

Constraints: Delays were encountered in the procurement of specialized pipes.



15,000 people have access to safe drinking water in Peredo (Sud-Est) through the rehabilitation of the clean water source and the implementation of a secondary pipe system.

Source: International Federation /I.Marin

Emergency Health and Care	
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 to up to 60,000 people for up to three months.	
Expected results	Activities planned
Two basic health care ERUs serve the primary health care needs of up to 60,000 people (30,000 each) for up to three months. 10,000 families receive mosquito nets (2 per family) to prevent vector borne diseases	<ul style="list-style-type: none"> Assess the health risks of the affected population in terms of health services, prevention, health needs and risk of communicable diseases. Deployment of the basic health care ERUs to their areas of operations and provision of service. Handover of the ERU. Conduct rapid emergency needs and capacity assessments. Develop beneficiary targeting strategy and registration system to deliver intended assistance. Distribute supplies and control supply movements from point of dispatch to end user. Monitor and evaluate the activities and provide reporting on distributions.
Objective 2: (Transition and Recovery Phase). The medium-term health risks of the emergency on the affected population are reduced through the provision of targeted health education and hygiene promotion, malaria and dengue prevention and psychosocial support to the affected communities.	
Expected results	Activities planned
10,000 families benefit from correct mosquito net use, reduction of malaria transmission and increased community involvement in malaria prevention through social mobilization.	<ul style="list-style-type: none"> Community sensitization in correct use of mosquito nets together with distributions in 7 departments. Community education on malaria, protection and basic vector control in line with the Vwazen Kore Vwazen - Neighbours helping Neighbours; Haiti Community Health and Malaria Prevention Project in 13 communities. Dissemination of key messages on malaria, treatment and prevention with posters, stickers and leaflets with pictures.
The affected communities benefit from the services of well trained HRCS volunteers providing psychosocial support through a validated methodology	<ul style="list-style-type: none"> Conduct two workshops in psychosocial support for 400 HRCS volunteers and staff from la Providence Hospital. Conduct the PSP workshops in affected communities. Monitor activities and provide reporting.

Impact: Objective 1 (Relief Phase):

Following the rapid emergency health assessment conducted at the onset of the emergency, two Basic Health Care – ERUs were deployed at the start of the operation by the Spanish Red Cross (one rotation) and the German Red Cross / Canadian Red Cross/ Finnish Red Cross (3 rotations).

From September to the end of November a total of 9,837 consultations were conducted in close coordination with the Ministère de la Santé Publique et de la Population (MSPP).

Basic Health Care - ERU (Spanish Red Cross)	Basic Health Care -ERU (German/Canadian/Finnish Red Cross)
25 September 09 October	1 October to 11 December
1 ERU rotation	3 ERU rotations
879 consultations	8,958 consultations
TOTAL	9,837 consultations

Both Basic Health Care ERUs equipment were handed over to the HRCS who continued to conduct mobile clinics around the country.

Three rotations of Relief ERU, American Red Cross / BeNeLux Red Cross Societies, were deployed to respond to the emergency in the provision of much needed non-food items to the affected population.

Between 16 September and 26 October 2008, **20,000 mosquito nets** were distributed to **10,000 families** to prevent vector-borne diseases.

Each family received **two mosquito nets** as part of their family kit.

Department	Beneficiary Families	Mosquito nets
Sud-Est	425	850
Nord-Ouest	500	1,000
Grande-Anse	500	1,000
Les Nippes	500	1,000
Ouest	967	1,934
Centre	1,208	2,416
Artibonite	5,900	11,800
TOTAL	10,000	20,000

These communities in all seven departments benefited from sensitization in the proper use of and installation of mosquito nets

Constraints:

- Delays for ERU medical staff to obtain license to practice from the Ministry of Health as required by the HRCS.

For more information about this objective please refer to [Operations update n° 2](#)



The ERU Basic Health Care Clinic was set up for three months in Gonaïves (Artibonite), one of the most severely affected areas. Source: International Federation/ I.Marin

Impact: Objective 2: (Transition and Recovery Phase):

The resilience of the community was improved through enhanced health awareness, knowledge and behaviour. Over a six-month period (November 2008 to June 2009) the HRCS with the support of the International Federation implemented two health programmes; one in malaria prevention and another in psychosocial support.

The **Malaria Prevention Programme** was implemented – in coordination with Partner National Societies involved in Malaria Prevention Programmes (the American Red Cross and the Canadian Red Cross) – in **45** localities with a total population of 60,000 people in the department of Les Nippes, in the two the most affected communes of Baradères and Miragoane.

Over a three-month period, **6,000 people** directly benefited from the Malaria Prevention Programme while an additional **30,000 people** benefited from the dissemination of messages within the community.

The capacity of the HRCS was increased through the training of **50 volunteers** in malaria prevention. Modules focusing on community-based approach towards prevention, detection and referral were used. Tools were produced in Creole to facilitate data collection and reporting. Thus, the scope and quality of the HRCS health in emergencies as part of disaster preparedness was improved.

Following a decision made jointly by the HRCS and the International Federation, it was decided to redirect psychosocial support to HRCS volunteers and to the staff of the La Providence Hospital de Secours des Gonaïves (Artibonite).

The **Psychosocial Support Programme** focused on improving their psychological status to enable them to respond and support others in a more sustainable way. The psychosocial workshops took place in Gonaïves with **400** HRCS volunteers and hospital staff from the La Providence Hospital.

The workshops were conducted by IDEO (Institut de Développement Personnel et Organisationnel) and the institute specialized in psychology.

Four workshops were conducted with the main goal to stabilize the psychological status of each participant by giving them the methodology to manage their stress and to face their responsibilities in their field of assistance.

The analysis of the 311 Trauma Screening Questionnaires gave the following results:

Graduation of the trauma	Number of participants	Proportion
0 < trauma < 4: no risks of PTS: self cured	106	34%
Trauma = 5: high risk of PTS	46	14.7%
6 < trauma < 7: very high risk of PTS	85	27.3%
8 < trauma < 10: huge risk of PTS	74	24%
Total	311	100%

PTS = Post Trauma Symptoms

IDEO conducted group sessions from 12 to 16 January, where 205 cases surfaced as the most traumatized and reflecting PTS high risk.

In order to support the HRCS network mainly composed by the volunteers, to help them cure their trauma, to valorize them by taking care of them and to give them the keys to ensure their responsibilities in giving assistance and support to distress population, the HRCS and the International Federation decided to implement a second phase of PSP for the 205 most vulnerable participants.

This second phase took place from 27 to 30 April targeting the most vulnerable participants, 90 HRCS volunteers and 24 members of the *Hopital de Secours* attended. The IDEO employed the EMDR (Eye Movement Desensitization Reprocessing) treatment that had been translated into Creole. The goal of this therapy was to treat the participants with the EMDR method. The emotional state of the participants has been evaluated at the beginning and the end of the sessions with a tool called "SUD" (Subjective Unit of Distress). The goal was to evaluate their emotional status from 0 to 10, where "0" translates to a *good feeling* while « 10 » translates to a *very bad feeling* – related to emotions such as sadness, fear, anger. The goal was to help the

participants reach a level between 0 to 3 synonyms of *good feeling*, meaning they expressed more positive emotions.

Among the 114 participants of this session, the results of SUD before the session showed that the emotional status of 89.49 per cent of participants was evaluated in the category *bad feeling* (ranging from 4 to 10) and only 10.53 per cent of the participants evaluated to be in a *good feeling* status. After the PSP session, the results showed a clear evolution of the emotional status of the participants. The percentage of participants who did feel good increased from 10.53 to 70.15 per cent. The percentage of participants who did not feel good decreased from 89.49 to 30.70 per cent.

Thanks to the two phases of the PSP, the volunteers and the staff of the hospital improved their emotional well-being which was affected during their interventions providing assistance to the most affected people.

Taking in account the probability of potential natural catastrophes, it was recommended by the IDEO to anticipate PSP for the volunteers of the Haitian Red Cross Society in order to ensure they have all the capacity to assure their responsibilities during and after their deployment.

Constraints:

- Limited availability of HRCS staff and volunteers to carry out activities.

Shelter and Non-Food Items

Objective 1: (Relief Phase). Provide sufficient non-food items to emergency public shelters where essential household activities can be satisfactorily undertaken.	
Expected results	Activities planned
10,000 families receive kitchen sets (1 per family) and blankets (2 per family).	<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 of materials. • Distribute supplies and control supply movements from point of dispatch to end-user.
Objective 2 (Transition Phase). Provide sufficient covered space to allow for temporary shelter for 4,000 families.	
Expected results	Activities planned
4,000 families whose houses have been damaged receive shelter kits.	<ul style="list-style-type: none"> • Develop beneficiary targeting strategy. • Trainer of trainers workshops for HRCS in temporary shelter set up. • Workshops to disseminate knowledge on temporary shelter set up to the targeted communities. • Distribution of shelter kits and materials. • Supervision of the construction of temporary shelter by HRCS trained volunteers in shelter construction. • Monitor activities and provide reporting.
Objective 3 (Recovery Phase). The long-term shelter needs will be covered by providing durable materials to rebuild homes that were completely destroyed.	
Expected results	Activities planned
400 families whose houses have been destroyed receive construction materials.	<ul style="list-style-type: none"> • Develop beneficiary targeting strategy. • Trainer of trainers workshops for HRCS safer building technique and methodology • Distribution of construction materials. • Supervision of the construction of houses. • Monitor activities and provide reporting.



Impact: Objective 1 (Relief Phase):

Following the damage and needs assessments conducted by FACT/ERU teams, three rotations of a joint **American/BeNeLux** (Belgian/ Netherlands/ Luxemburg) **Relief ERU** were deployed to support relief activities of the HRCS in providing non-food items to 50,000 people.

Relief ERU and HRCS volunteers undertook preparatory activities prior to the distributions, which included detailed assessments, identification of affected communities and households, distribution of beneficiary cards and the identification of locations to carry out distributions.

Between 16 September and 26 October 2008, **10,000 families (approx. 50,000**

people) received essential non-food items to meet their immediate needs and allow them to resume their essential daily activities in a satisfactory and dignified way.

Department	Beneficiary Families
Sud-Est	425
Nord-Ouest	500
Grande-Anse	500
Les Nippes	500
Ouest	967
Centre	1,208
Artibonite	5,900
TOTAL	10,000

- 10,000 families received the following relief items:
 - Hygiene kit (1 per family)
 - Kitchen set (1 per family)
 - Mosquito nets (2 per family)
 - Blankets (2 per family)
 - Jerrycans (2 per family)
 - Buckets (1 per family)

A post-distribution survey was conducted, by the Relief ERU team in three districts (Gonaïves, Hinche and Cabaret), which corroborated that the items were needed and used by beneficiaries.

Coordination with Logistics ERU provided procurement following International Federation logistics procurement procedures as well as customs clearance, loading, transport and offloading.

The International Federation and PADRU pre-positioned in 2008 2,000 family kits (of the total 10,000 distributed) as contingency stocks to better respond at the onset an emergency. This pre-positioning served useful at the onset of the emergency as most remote areas were cut-off and access was impossible. The HRCS branches distributed the 2,000 family kits as follows:

2008 Pre-positioned NFIs

Department	Town	Quantity of Stocks
Grande-Anse	Jeremy	500
Nord-Ouest	Port-de-Paix	500
Les Nippes	Anse-à-Veau	400
	Petit Trou de Nippes	100
Artibonite	Saint-Marc	200
Sud-Est	Jacmel	300
Total		2,000

The capacity of the HRCS was increased through the distribution of NFIs by the Relief ERU staff by providing on-the-job training to staff and volunteers further improving their technical skills in relief implementation and knowledge in assessments, distribution, monitoring and reporting.

Impact: Objective 2: (Transition Phase):

Following the disaster, it was estimated by the DPC (Département de la Protection Civile) that over 22,000 houses were destroyed and more than 84,000 houses were damaged. The affected population sought refuge in collective centres and host families. On 9 September it was estimated by the DPC that over 150,000 people were sheltered.

Between 30 September and 18 November, the HRCS and the International Federation, with the support of PNSs (the French Red Cross and the German Red Cross), distributed **shelter/tool kits** to **4,000 families** whose houses were damaged. This allowed them sufficient covered space for temporary shelter as well as adequate tools to begin repairing their homes.

Shelter/Toolkit distribution

Department	Beneficiary families
Artibonite	2,073
Sud-Est	450
Ouest	477
Les Nippes	1,000
Total	4,000



4,000 families whose houses were damaged received shelter/tool kits to help them repair their homes. Source: International Federation

Shelter/Toolkit composition

Item	Quantity
Tarpaulins	2
<i>Toolkit:</i>	1
Shovel	1
Hoe	1
Saw	1
Machete	1
Pair of construction scissors	1
Hammer	1
Meters of rope	30
Meters of Steel wire	5
Grams of roofing nails	500
Grams of nails	500

In order to assist the affected communities while building the capacity of the HRCS, workshops to disseminate knowledge on temporary shelter set-up were conducted. In addition, training of trainers for the HRCS staff and volunteers were conducted in selected communities in temporary shelter set-up. In total, 5 workshops took place and 80 HRCS staff and volunteers have been trained.

Date	Location	Facilitators	No of HRCS Participants
19 September	Port-au-Prince	2 Federation delegates	14 Staff
29 September	Jacmel (Sud-Est)	2 HRCS trainers	8 volunteers
22 October	Saint-Marc (Artibonite)	2 HRCS trainers	18 volunteers
8 November	Cabaret (Ouest)	2 HRCS trainers	20 volunteers
15 November	Gonaïves (Artibonite)	2 HRCS trainers	20 volunteers

Constraints:

- Delays in programme implementation were encountered due to delays in beneficiary selection.

Impact: Objective 3: (Recovery Phase):

Based on a careful review of the programme in accordance with the “safer building” concept, the HRCS and the International Federation decided to reduce the target number of beneficiaries from 1,000 families to 400. The programme’s objective was to assist **400** families to re-build storm-resistant houses (approx. 22 square-metres) by providing them with:

- 1) Building materials
- 2) Technical expertise
- 3) Guidance throughout the process

Following a detailed assessment, **400 families** whose homes were completely destroyed in 32 rural villages within a 20 km radius of Gonaïves were selected based on the following criteria (Some villages were also part of the water and sanitation latrine construction programme):

- 1) House completely destroyed
- 2) Elderly (over 60 years of age)
- 3) Handicapped or severely ill
- 4) Women with more than three children under the age of five.



400 new storm-resistant houses were built under the shelter programme. Families whose houses were completely destroyed were able to re-build their homes under the ‘build back better’ community-based approach. Source: International Federation/I. Marin

400 houses in Rural Gonaïves (Artibonite)

Community	No of houses built
Canal André	5
Jacobin	7
Poste Couttand & Laserre	7
Tarasse & Pont Gaudin	7
Terre Sonnée & Finel	7
Chanflo	9
Canal Bwa	12
Tete Canal & Terre Blanche	12
Labranle	14
Vincent & Labondance	14
Carrefour Labranle & Hatte Dubidoux	16
Badjo	20

Ti Dolan & Caillon	41
Goya & Désiré	40
Desfontaines	46
Mapou	36
Sous Raille	50
Passe Reine	57
TOTAL	400

The 'safer building' or 'building back better' concept includes roofing materials and construction techniques that make the homes resistant to wind pressure through a bracing technique.

Fifty HRCS volunteers and two local staff were trained in improved building techniques and monitored the progress of each house along with the International Federation shelter delegate. Following the "safer building" concept the location for the construction of the new houses had to be in a safe and non-floodable area.

The construction materials were procured according to the International Federation standards and procedures. Local procurement was possible and was opted for as it supported the local economy and reduced the amount of additional procurement delays. Each family was provided with the following construction material to re-build their homes:

Construction materials per house (approx 22 square-meters)

Item	Quantity
Building blocks	700
Doors	2
Windows	3
Flat zinc sheeting	2
CGI zinc sheeting	28
Steel bars (1 x 4 x 20)	24
Steel bars (1 x 4 x 30)	28
Cement bags	55
Wood (2 x 4 x 12)	18
Wood (2 x 4 x 14)	12
Wood (1 x 4 x 16)	19
Sand	10 cubic metres
Carpenter/Mason	1
Roofing nails	3,5 kg
4" nails	2,5 kg
3" nails	2,5 kg

On 31 October, the houses were completed and beneficiaries were issued with a certificate of donation and committed to not selling the house within a ten-year period. The initiative was particularly successful as it engaged the participation of the community and was carried out over a short period of time, with concrete results that are significantly improving the lives of the inhabitants of these vulnerable communities

Constraints:

- Delays in identifying and deploying French-speaking shelter delegates to implement the programme.
- Delays due to changes in programme strategy and objectives.



Inauguration ceremony took place on 31 October 2009 for the beneficiaries of the 400 new houses built in rural Gonaïves (Artibonite). Source: International Federation

- Delays in beneficiary selection from 1,000 to 400, required additional assessments.
- Delays in procurement of construction materials, particularly timber.

Disaster Preparedness and Risk Reduction

Objective 1: (Transition and Recovery Phase). In the six departments of Haiti most affected by annual storms / hurricanes and where there are traditionally difficulties with road access, highly vulnerable communities will be supported by their regional and local Red Cross committees in preparing for future disasters.

Expected results	Activities planned
<p>18 communities in 6 departments of Haiti, with extreme vulnerability to natural disaster, have established an early warning system, emergency plan and community emergency teams in preparation for the annual threat from hurricanes and tropical storms.</p> <p>The HRCS has the capacity to run a community disaster risk reduction / preparedness programme in 6 departments of Haiti.</p>	<ul style="list-style-type: none"> • Mobilize Movement partners to align their DM objectives. • Selection of priority departments with disaster vulnerability. • Selection of 6 HRCS branches and volunteers for inclusion in the project. • Training of branch disaster managers as DPP trainers (20). • Training of DPP volunteer teams in 6 branches (teams of 10). Selection of 3 vulnerable communities for each branch (total 18) • Community DPP training for 20 in each location (total 360). • Development of an early warning system and evacuation plans. • Distribution of community emergency equipment kits. • Monitoring and reporting of activities. • Monitor activities and provide reporting.

Objective 2: (Transition and Recovery Phase). The risks of future emergencies on the population have been reduced through improvement of disaster management mechanisms of HRCS, including the establishment of a national Red Cross contingency planning process in preparation for the 2009 hurricane season, pre-positioning of stocks, and training.

Expected results	Activities planned
<p>13 HRCS regional committees have the capacity to develop local contingency planning processes and 75% have developed a formal contingency planning document which is updated annually.</p> <p>Emergency stocks for 3,000 families are pre-positioned throughout the six departments most vulnerable to disasters.</p> <p>Regional HRCS committees and volunteers are trained in VCA and beneficiary selection.</p>	<ul style="list-style-type: none"> • Design, prepare, and conduct workshop at HRCS HQ on contingency planning. • Selection of Regional Committees for pre-positioning. • Define clear procedures and an operating manual for the management and distribution of pre-positioned stocks. • Pre-position stocks in 6 regional committees (3,000 families). • Conduct 6 branch workshops on stock management, VCA, beneficiary selection and reporting on needs / stocks distributions. • Monitor on activities and provide reporting.

Impact: Objective 1: (Transition and Recovery Phase).

In order to increase the resilience of communities to disaster and develop a stronger HRCS emergency response capacity, a disaster management component was implemented. Ninety one of the most vulnerable communities from seven departments of the country were included in a project to strengthen early warning systems, emergency plans and community emergency groups.



Kouri di Vwazen'W early warning project was implemented in eight regions in preparation of the 2009 Hurricane Season. Source: International Federation/I. Marin

The **Kouri di Vwazen'W (Run and Warn your Neighbour)** early warning project, developed in 2006 was implemented once again as its success had been demonstrated during the 2008 Hurricane Season by significantly reducing the number of deaths through an early warning system that is adapted to the country. The aim of the project is to create a network of HRCS National Intervention Teams (NITs) relays that will inform the most vulnerable communities on disaster preparedness and risk reduction as well as relay early-warning signals when they are necessary and, in so doing, reduce loss of life.

The **Kouri di Vwazen'W (Run and Warn your Neighbour)** public awareness campaign was launched by the HRCS on 4 August 2009 in collaboration with the DPC (Département de la Protection Civile) and the International Federation. The campaign included the production

20 public service radio announcements to be broadcast once a week on two radio channels (AMI and ANMH). Additionally, a total of 12 billboards, providing vital early warning information, were set-up countrywide.

Twenty four HRCS coordinators were trained as trainers in **8** regions and **240** HRCS volunteers were trained, by the coordinators, as NITs. They were provided with training on disaster preparedness and risk reduction, early-warning systems, VCA (Vulnerability and Capacity Assessment) and SPHERE standards. Each locality was provided with cleaning equipment, communication tools, visibility materials and protective gear. Additionally six HRCS branches in six departments received motorcycles to allow relays/NITs with faster access to isolated communities.

Over a period of 40 days, between September and October, each HRCS relay conducted the early-warning public awareness campaign in his/her locality. This campaign reached up to **50 families per day** (250 people) per day and over **5,000** people per week. The relays also conducted the campaign in schools once a week.

Department	Number of Localities	Number of Coordinators	Number of Relays	Approx. Population Reached
Grande-Anse	12	3	48	244,320
Sud	18	4	34	183,240
Nord-Ouest	11	2	31	101,800
Nippes	12	3	24	122,160
Sud-Est	12	2	25	101,800
Ouest/Metro	15	3	28	147,610
Ouest (Gonave)	2	2	21	25,450
Artibonite	9	4	29	96,710
Total: 7	91	24	240	1,023,090

The programme increased the capacity of the HRCS to provide disaster preparedness and early warning signals to more than one million people approximately. The sensitization campaign was conducted throughout the 2009 Hurricane Season.

Impact: Objective 2: (Transition and Recovery Phase).

The capacity of the HRCS to respond effectively, at the onset of an emergency, in the most remote and isolated areas of the country has been increased through the pre-positioned of emergency stocks (family kits) as part of the HRCS contingency plan.

A total of **3,000 family kits** have been pre-positioned in the seven areas most vulnerable to disasters (both in terms of humanitarian need and damage to the transportation system) in five departments. The family kits are stored in Tropical Mobile Storage Units (TMSUs) that are storm-resistant. Three new 40-foot TMSUs were provided, along with **3,000** family kits, to the HRCS by the International Federation and PADRU as part of the disaster preparedness programme.



Three new 40-foot Tropical Mobile Storm Units (TMSU) were provided, along with 3,000 family kits, to the HRCS by the International Federation as part of the disaster preparedness programme. Source: International Federation/I. Marin

2009 Pre-positioned NFIs

Department	Town	Quantity of Family Kits
Grande-Anse	Jeremy	500
Nord-Ouest	Port-de-Paix	500
Les Nippes	Anse-à-Veau	500
Artibonite	Gonaïves	750
Artibonite	Gros-Morne	250
Centre	Hinche	250
Centre	Mirebalais	250
Total		3,000

Family Kit composition

Item	Quantity
Hygiene kit	1 per family
Kitchen set	1 per family
Mosquito nets	2 per family
Blankets	2 per family
Jerry cans	2 per family
Buckets	1 per family

The HRCS has the capacity to respond by providing immediate relief assistance to **3,000 families (15,000 people)**. These pre-positioned kits proved essential during the 2009 Hurricane Season to immediately assist the families affected by mudslides (800 people) and flash flooding (500 families). These stocks will be replenished by the respective allocated DREF funds.

Programme Support Objectives:

IT/Telecoms

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

Expected results	Activities planned
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<p>The shared ICRC / HRCS VHF network is covering the operational areas.</p> <p>Radio contact is possible from 3 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 3 VHF repeaters. • Installation of one VHF repeater for coverage of Sud and Sud-Est. • Rehabilitation of 6 VHF base stations. • Installation of VHF radios in vehicle. • Installation of data connectivity facilities and provision of IT support. • Monitor activities and provide reporting.
<p>Objective 2: (Transition and Recovery Phase). The disaster management capacity of the HRCS has been strengthened through effective communication systems.</p>	
<p>Expected results</p>	<p>Activities planned</p>
<p>HRCS will be able to communicate within branch areas and branch to headquarters with independence of public communication systems.</p>	<ul style="list-style-type: none"> • Rehabilitation and provision of spare parts for 10 VHF base stations • Distribution of VHF handsets in 13 branches. • On-site training of staff and volunteers in 13 branches. • Monitor activities and provide reporting.

Impact Objectives:

Jointly, the Austrian Red Cross and New Zealand Red Cross deployed two rotations of joint **IT/Telecom ERU** during the relief phase of the operation to rehabilitate the VHF coverage that had been damaged by the hurricanes and to increase the coverage for the HRCS branches and all Movement partners in-country.

Repeater coverage, repairs and upgrades was established in the following areas; Obleon, Port-au-Prince, Fort-de-Pêche, Gonaïves, Limbes, Cap Haïtien, Fort de Liberté, Mirebalais, Hinche, Port-de-Paix, Saint-Marc, Jacmel, Anse-à-Galet and La Gonâve island. In addition, back-up batteries were exchanged in all locations and the necessary equipment was provided where needed.

Moreover, the capacity of the HRCS branches was increased through the radio operator training of local branch staff (5 to 20 people) in all 14 locations.

Logistics

<p>Objective 1: (Relief Phase). To manage effectively the supply chain from arrival of relief items and ERUs, including clearance, storage and forwarding to distribution.</p>	
<p>Expected results</p>	<p>Activities planned</p>
<p>All programs receive professional logistics support and goods are received for distribution as planned</p>	<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.
<p>Objective 2: (Transition and Recovery Phase). The capacity of the HRCS in logistics has been strengthened.</p>	
<p>Expected results</p>	<p>Activities planned</p>
<p>The capacity of the HRCS to manage the logistics chain is enhanced.</p>	<ul style="list-style-type: none"> • One training in warehouse management. • Monitor activities and provide reporting.

Impact Objectives:

Three rotations of **Logistics ERU** were deployed by the Swiss Red Cross during the relief phase of the operation to provide much needed logistics support for an operation of this scale. The ERU team implemented a supply chain from procurement to beneficiary according to International Federation procurement and logistics procedures

which included, procurement and reception of air and sea goods, customs clearance, transportation, warehousing. Following the last ERU rotation, logistics delegates were deployed to continue providing logistics support to the operation.

The capacity of the HRCS was increased with a major reorganization of the Diquini warehouse and an inventory of stocks as well as increased knowledge in International Federation procurement, warehousing and logistics procedures.

Conclusion and Lessons Learnt

Overall the operation was a success. Objectives were accomplished and, when necessary, adapted to suit the context and needs in a sustainable way, which had a positive impact on the HRCS and the beneficiaries both in the short and longer term.

The HRCS has benefited from trainings and equipment that will improve its ability to effectively respond to disasters in the future. However, during the operation the capacity of the HRCS was stretched. The organizational development support provided by the International Federation was instrumental to the achieved outcome.

The Movement coordination and collaboration was successful from the onset of the emergency throughout the entire operation in support of the HRCS. Furthermore, cooperation between components of the Movement and external partners proved effective, thus maximizing efforts while avoiding duplication.

The response approach by the HRCS/International Federation to implement programmes in a sustainable and integrated way underlines the importance of integrating early recovery components that reduce vulnerabilities through the provision of sustainable solutions.

The beneficiaries expressed their satisfaction at the kind and quality of the relief provided. A post-distribution survey was conducted, by the Relief ERU team in three districts (Gonaïves, Hinche and Cabaret), which demonstrates that the items were needed and used by beneficiaries.

In particular, beneficiaries participating in the housing construction project were satisfied with the quality of building materials used. The housing project was similar to the one under the 2004 Appeal. The construction of storm-resistant homes has proven to be an achievable and sustainable shelter strategy for Haiti. Local procurement of building materials encouraged the local economy while reducing delays in procurement.

The ERUs capacity to respond in the first weeks was reduced due to delays of governmental authorizations required by the HRCS, most specifically medical licenses to practice and customs clearance of vehicles. These requirements should be considered in future emergencies.

Difficulties in recruiting experienced delegates for Haiti, particularly French-speaking delegates, were once again noted in 2008. It is recommended that delegates deployed have the required language skills and previous experience in a similar context.

The International Federation, through PADRU and the Regional Representation in Santo Domingo, conducted monitoring and evaluation of the activities and objectives throughout the operation. The results are reflected in the Operations Updates and Donor Reports. Additionally, specialized consultants provided monitoring reports during each phase of the operation: Emergency Response phase, Transitional phase, and Recovery phase. The reports underline the challenges faced most particularly in implementing the shelter activities. These challenges were related to programme strategy and implementation, procurement of material and logistical challenges as well as organizational development. The Regional Representation in Santo Domingo is planning a final internal review of the operation to assess the implementation of the operation and draw up the lessons learnt and recommendation for future emergency operations.

The 2008 Operation was a positive collaborative effort by all Movement partners and Federation tools. The HRCS benefited from the experience and technical knowledge and support of the International Federation through the deployment of FACT, ERUs, RITs, Federation delegates, NITs and volunteers. Support was provided from the Secretariat in Geneva, the Zone in Panama, the Latin Caribbean Regional Representation in Santo Domingo, PADRU in Panama, Partner National Societies and PIRAC.

**[<Final financial report below and contact details below;
click here to return to the title page>](#)**

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

For further information specifically related to this operation please contact:

- **In the Dominican Republic:** Alexandre Claudon, Regional Representative for the Latin Caribbean; phone (829) 970 90 20; and e-mail: alexandre.claudon@ifrc.org
- **In the Americas Zone, Panama:**
 - Jan Gelfand, Head of Operations; phone: (507) 317 3050; fax: (507) 317 1304; and email: jan.gelfand@ifrc.org
 - Francisco Maldonado, Acting Head of PADRU; phone: (507) 316 1001; fax: (507) 316 1082; and email: francisco.maldonado@ifrc.org
 - Ilir Caushaj, Acting Head of Regional Logistic Unit; phone: (507) 316 1001; fax: (507) 316 1082; and email: ilir.caushaj@ifrc.org
 - Nelson Castaño; Disaster Risk Management Coordinator for the Americas; phone: (507) 317 3050; fax: (507) 317 1304; and email: nelson.castano@ifrc.org
 - Zuleyka Maynard, Resource Mobilization officer; phone: (507) 317 3050; fax: (507) 317 1304; and email: zuleyka.maynard@ifrc.org
- **In Geneva:** Pablo Medina, Operations Coordinator; phone: (41 22) 730 42 74; fax: (41 22) 733 03 95; and email: pablo.medina@ifrc.org

International Federation of Red Cross and Red Crescent Societies

MDRHT005 - Haiti - Hurricane Season 2008

Final Financial Report

Selected Parameters	
Reporting Timeframe	2008/08-2010/07
Budget Timeframe	2008/08-2009/12
Appeal	MDRHT005
Budget	APPEAL

All figures are in Swiss Francs (CHF)

I. Consolidated Response to Appeal

	Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination	TOTAL
A. Budget	8,475,870					8,475,870
B. Opening Balance	0					0
Income						
Cash contributions						
American Red Cross	153,958					153,958
Andorran Red Cross	3,634					3,634
Australian Red Cross	-369					-369
Australian Red Cross (from Australian Government)	235,419					235,419
British Red Cross (from British Government)	965,686					965,686
Canadian Government	11,836					11,836
Canadian Red Cross	4,414					4,414
Canadian Red Cross (from Canadian Government)	104,000					104,000
Caribbean Development Bank	464,360					464,360
Cayman Islands Red Cross	31,189					31,189
French Red Cross	150,761					150,761
Irish Red Cross	19,892					19,892
Italian Government Bilateral Emergency Fund	296,083					296,083
Japanese Red Cross	224,933					224,933
Japan - Private Donors	7,908					7,908
Monaco Red Cross	29,967					29,967
Monaco Red Cross (from Monaco private donors)	1,498					1,498
Netherlands Red Cross	323,576					323,576
New York Office (from Kraft Foods)	26,787					26,787
New York Office (from United States - Private Donors)	193					193
New Zealand Red Cross	18,818					18,818
Nicaraguan Red Cross	726					726
Norwegian Red Cross (from Norwegian Government)	1,700					1,700
On Line donations	21,165					21,165
OPEC Fund For International Development	327,615					327,615
Slovakia Government	51,706					51,706
Swedish Red Cross (from Swedish Government)	321,800					321,800
Swiss Red Cross (from Swiss Government)	110,000					110,000
Switzerland - Private Donors	500					500
The Bahamas Red Cross (from Bahamas - Private Donors)	503					503
The Barbados Red Cross	45,633					45,633
United States - Private Donors	1,141					1,141
C1. Cash contributions	3,957,034					3,957,034
Outstanding pledges (Revalued)						
British Red Cross	6,276					6,276
C2. Outstanding pledges (Revalued)	6,276					6,276
Inkind Goods & Transport						
American Red Cross	409,491					409,491
Austrian Red Cross	338,491					338,491
Canadian Government	182,088					182,088
Canadian Red Cross	109,527					109,527
Danish Red Cross	451					451
Finnish Red Cross	184,340					184,340
French Red Cross	87,264					87,264
Germany Red Cross	1,140,100					1,140,100

International Federation of Red Cross and Red Crescent Societies

MDRHT005 - Haiti - Hurricane Season 2008

Final Financial Report

Selected Parameters	
Reporting Timeframe	2008/08-2010/07
Budget Timeframe	2008/08-2009/12
Appeal	MDRHT005
Budget	APPEAL

All figures are in Swiss Francs (CHF)

<i>Luxembourg Red Cross</i>	109,231				109,231
<i>Netherlands Red Cross</i>	118,830				118,830
<i>New Zealand Red Cross</i>	9,609				9,609
<i>Norwegian Government</i>	26,159				26,159
<i>Spanish Red Cross</i>	1,330,373				1,330,373
<i>Swiss Red Cross</i>	440,129				440,129
C4. Inkind Goods & Transport	4,486,082				4,486,082

Inkind Personnel

<i>Canadian Red Cross</i>	55,800				55,800
C5. Inkind Personnel	55,800				55,800

Other Income

<i>Miscellaneous Income</i>	-6,205				-6,205
<i>Services</i>	-681				-681
C6. Other Income	-6,886				-6,886

C. Total Income = SUM(C1..C6)	8,498,306				8,498,306
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D. Total Funding = B + C	8,498,306				8,498,306
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Appeal Coverage	100%				100%
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II. Balance of Funds

	Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination	TOTAL
B. Opening Balance	0					0
C. Income	8,498,306					8,498,306
E. Expenditure	-8,420,348					-8,420,348
F. Closing Balance = (B + C + E)	77,958					77,958

International Federation of Red Cross and Red Crescent Societies

MDRHT005 - Haiti - Hurricane Season 2008

Final Financial Report

Selected Parameters	
Reporting Timeframe	2008/08-2010/07
Budget Timeframe	2008/08-2009/12
Appeal	MDRHT005
Budget	APPEAL

All figures are in Swiss Francs (CHF)

III. Budget Analysis / Breakdown of Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance
		Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination		
A		B					A - B	
BUDGET (C)	8,475,870						8,475,870	
Supplies								
Shelter - Relief	274,248	519,230				519,230	-244,981	
Shelter - Transitional		951				951	-951	
Construction - Housing		310,069				310,069	-310,069	
Construction Materials	602,396	270,072				270,072	332,324	
Clothing & textiles	262,013	262,013				262,013	0	
Water & Sanitation	198,054	198,054				198,054	0	
Medical & First Aid	367	367				367	0	
Teaching Materials	1,522						1,522	
Utensils & Tools	725,685	675,198				675,198	50,486	
Other Supplies & Services	3,652,400	301,665				301,665	3,350,735	
ERU		3,350,735				3,350,735	-3,350,735	
Total Supplies	5,716,685	5,888,354				5,888,354	-171,669	
Land, vehicles & equipment								
Vehicles	26,958	26,049				26,049	909	
Computers & Telecom	25,065	41,492				41,492	-16,427	
Office/Household Furniture & Equipm.	15,291	15,588				15,588	-298	
Total Land, vehicles & equipment	67,313	83,129				83,129	-15,816	
Transport & Storage								
Storage	75,840	62,161				62,161	13,679	
Distribution & Monitoring	186,543	187,816				187,816	-1,273	
Transport & Vehicle Costs	200,150	216,813				216,813	-16,664	
Total Transport & Storage	462,533	466,791				466,791	-4,258	
Personnel								
International Staff	730,481	731,501				731,501	-1,020	
Regionally Deployed Staff	8,152	8,152				8,152	-0	
National Staff	199,731	166,650				166,650	33,081	
National Society Staff	242,547	152,874				152,874	89,673	
Consultants	58,542	67,494				67,494	-8,952	
Total Personnel	1,239,453	1,126,671				1,126,671	112,782	
Workshops & Training								
Workshops & Training	118,437	109,768				109,768	8,669	
Total Workshops & Training	118,437	109,768				109,768	8,669	
General Expenditure								
Travel	115,185	114,515				114,515	671	
Information & Public Relation	111,361	100,632				100,632	10,729	
Office Costs	84,710	85,338				85,338	-628	
Communications	52,572	41,842				41,842	10,730	
Professional Fees	47,958	24,295				24,295	23,663	
Financial Charges	48,639	-5,913				-5,913	54,551	
Other General Expenses	33,232	11,586				11,586	21,646	
Total General Expenditure	493,656	372,295				372,295	121,362	
Programme Support								
Program Support	315,888	320,361				320,361	-4,473	
Total Programme Support	315,888	320,361				320,361	-4,473	
Services								
Services & Recoveries	61,904	52,980				52,980	8,924	
Total Services	61,904	52,980				52,980	8,924	
TOTAL EXPENDITURE (D)	8,475,870	8,420,348				8,420,348	55,522	
VARIANCE (C - D)		55,522				55,522		