

OPERATIONS UPDATE



International Federation of Red Cross and Red Crescent Societies
Fédération internationale des Sociétés de la Croix-Rouge et du Croissant-Rouge
Federación Internacional de Sociedades de la Cruz Roja y de la Media Luna Roja
الاتحاد الدولي لجمعيات الصليب الأحمر والهلال الأحمر

HAITI: FLOODS

12 January 2005

The Federation's mission is to improve the lives of vulnerable people by mobilizing the power of humanity. It is the world's largest humanitarian organization and its millions of volunteers are active in over 181 countries.

In Brief

Appeal No. 22/04; Operations Update no. 8; Period covered: 8 December 2004 to 7 January 2005; Appeal coverage: 83.7%; ([click here to go directly to the attached Contributions List, also available on the website](#)).

Appeal history:

- Launched on 22 September 2004 for CHF 4,246,000 for 6 months to assist 40,000 beneficiaries.
- Budget revised and increased to CHF 11,673,000 (USD 9,246,529 or EUR 7,515,212) to assist 50,000 beneficiaries for 6 months.
- Disaster Relief Emergency Funds (DREF) allocated: CHF 150,000

Outstanding needs: CHF 1,899,974 (USD 1,629,656 or EUR 1,227,906)

Related Emergency or Annual Appeals: Caribbean Annual Appeal (01.51/2004); Haiti Social Unrest Emergency Appeal (07/2004) and Dominican Republic & Haiti Floods Appeal (13/2004)

Operational Summary: A number of food and non-food distributions have taken place in Gonaïves and Ennery and at least four weekly aid distributions are planned for the coming weeks. To date, a total of 5,195 families in Gonaïves and Ennery have received relief items and between 20 and 30 HRCNS volunteers continue to be actively involved in distributions, together with the Federation team. Repairs to the public water distribution network are on-going and approximately half of Gonaïves' boreholes and wells have already been cleaned of mud. In accordance with the common exit strategy for all organizations providing drinking water, the French Red Cross Emergency Response Unit (ERU) gradually reduced its daily production and closed down the water treatment plant on 20 December. The treatment plant provided clean drinking water to up to 30,000 people in greater Gonaïves for more than two months until original sources could be brought back on line. Rehabilitation work in La Providence Hospital began in December and work to repair the outer walls and clean the main buildings and the hospital compound of mud and debris is well under way. The Federation water and sanitation delegate has arrived and the water and sanitation team have initiated the latrine reconstruction project. Despite this new addition to the relief team, there remains a serious lack of field delegates. In addition, the current level of funding has forced the Federation to temporarily limit the number of beneficiary families to 5,575. The coverage of the Appeal currently stands at 83.7 percent. New contributions are urgently needed to ensure that all of the objectives of this Emergency Appeal are accomplished and that assistance is provided to the most vulnerable people afflicted by the floods; particularly in the villages outside Gonaïves, where floods have direly affected more than 3,000 families.

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Background

A little more than three months after Tropical Storm Jeanne's heavy rains brought on violent flash floods in north-western Haiti the official death toll stands at over 1,800 while more than 800 remain unaccounted for. Deforestation, poverty and a general lack of preparedness were the major causes of the disproportionately high loss of life as landslides and high waters drowned people and buried a large region in mud. An estimated 300,000 people in at least eight communes in the region have been affected as a result of these devastating floods. The poor, overcrowded town of Gonaïves and its environs, which as a population of approximately 200,000, has been hardest hit. Homes and possessions were swept away in the floods, sewers and latrines overflowed and vast areas of economically vital agricultural land were destroyed. When the waters at last receded, dead bodies littered the streets. Estimates are that at least half the population in Gonaïves was severely affected. With nowhere else to go, families have returned to what remains of their homes; many having lost all their possessions. Hundreds of newly-orphaned children face an uncertain future in what was already one of the poorest countries in the world. A World Health Organization survey of displaced people revealed that nearly half of the 56 overnight shelters set up in churches and schools by the Haitian authorities (La Protection Civile) in the wake of the disaster are still being used, mostly by women and children. Flooded latrines and sewers contaminated the few available sources of fresh water. An epidemiological surveillance system was set up in the aftermath of the disaster by the Ministry of Health and its partners which continues to monitor the incidence of disease. So far no epidemic trends have been identified. Gonaïves' main hospital as well as over 90 percent of the private clinics sustained considerable damage due to the flooding. A high water table coupled with a lack of funding have stymied efforts to remove the remaining stagnant water from the streets and vacant lots which are still covered in mud and debris. Despite private citizens' and municipal contractors' best efforts, many of Gonaïves' water channels and aqueducts are still clogged with mud and refuse. Heavy machinery has been making headway in clearing badly damaged roads and mud-covered public spaces, but it is expected that, even with a dedicated labour force of two thousand, a full clean up will take at least eight months.

The Federation's revised Emergency Appeal, launched on 5 October, is based on the plan of action designed by the joint Haitian National Red Cross Society (HNRCS) / Federation Field Assessment and Coordination Team (FACT) which conducted a four-day assessment of the affected regions. The assessment focused mostly on remote areas outside Gonaïves where whole communities were cut off from transport and communications. The FACT team identified at least 3,000 seriously affected families (15,000 people) in the communes of Pilate, Gros Morne, Bassin Bleu, Anse Rouge, Port de Paix and Ennery in dire need of assistance. These people had not been identified or targeted during preliminary assessments. The plan of action prioritizes emergency relief distributions of food and non-food items in addition to shelter, health and water and sanitation interventions. The plan also includes activities to strengthen the capacity of the HNRCS, which is now facing the third consecutive catastrophe in Haiti in only one year, to respond to future disasters.

Security remains precarious, making the transportation and distribution of aid difficult. The United Nations Stabilization Mission in Haiti (MINUSTAH) comprises a multi-national military and police force of approximately 7,000 and has been mandated by the UN Security Council to assist the Haitian authorities in maintaining peace and public order. As a result, the MINUSTAH has been directly involved in providing security for the public, which up until Christmas has included escorting and/or being present during distributions of relief goods to ensure that distributions take place in the best possible conditions for everyone involved. A joint

ICRC/Federation security assessment is planned for early January to determine whether distributions without MINUSTAH are indeed compatible with minimal security requirements.

The international community has responded with distributions of food and water and the provision of immediate medical attention, in spite of a complex security situation. These efforts to date, however, have been insufficient to meet the needs of many of the vulnerable in flood-affected areas, the majority of whom were already living well below the poverty line. Subsequent to the international communities' response to the immediate crisis, there will be significant needs for continued international support in the rehabilitation phase.

Operational developments

For the sixth consecutive week, the security situation in Gonaïves has remained relatively stable, but common crime and/or political violence is reportedly threatening to increase. During the previous reporting period, most NGO personnel were evacuated for a couple of days as it was feared that the unrest that was cropping up in one area of Gonaïves might spread to the rest of the city. Gonaïves has a long tradition of public demonstration that



Distribution of food parcels in Ennery

can quickly flare up into full-blown riots. A considerable number of demonstrations and barricades temporarily blocked roads, while various incidents of vehicles transporting humanitarian aid being ambushed, assaulted and looted were reported as recently as November.

As sufficient funds and human resources to implement all the objectives of this Emergency Appeal have not yet become available, the Federation team in Gonaïves, in consultation with the Panama Regional Finance Unit, has been obliged to temporarily limit the number of beneficiaries originally targeted in this appeal. In Gonaïves, the number of targeted beneficiaries presently stands at 4,285 families, instead of 7,000, while the number of beneficiary families outside Gonaïves will be limited to 1,290 in the commune of Ennery.

With support from humanitarian partners, the National Water Company, SNEP, has been able to open drainage trenches and repair part of the damaged water network. At present, one borehole is operational and supplying water to public kiosks through the network. Two more boreholes will soon be repaired. In addition, teams from OXFAM, Action Against Hunger (ACF), Médecins sans Frontières (MSF) and the French Red Cross ERU have cleaned about half of Gonaïves' 800 wells.

Apart from what appear to be a few isolated cases of contagious disease, no outbreaks of epidemics have been reported in Gonaïves. The overall health situation, which is comparable to that of other developing countries, is reportedly better than before the floods. This good news can be attributed to preventative measures such as fumigation against malaria-bearing mosquitoes, chlorination of public water and increased availability of potable water. The dissemination of health messages by radio, combined with medical consultations and free medicines provided by various humanitarian organizations, has also play a large role in improving the health situation. Nevertheless, the World Health Organization warns that the community's health remains at risk without continued close monitoring since large amounts of stagnant water and waste remain in public areas.

In bilateral initiatives outside the framework of the Federation Appeal, the German Red Cross will rehabilitate the houses of 1,500 families in the region between Port-de-Paix and Anse Rouge, while the French Red Cross is distributing hygiene kits, kitchen sets and kerosene stoves in shelters and selected vulnerable areas in Gonaïves. German Red Cross is also distributing plastic sheeting for temporary shelters.

Red Cross and Red Crescent action - objectives, progress, impact

Emergency relief (food and basic non-food items)

Objective 1: 50,000 beneficiaries (10,000 families) will have benefited from the provision of non-food items delivered through secure distribution centres.

Progress/Achievements (activities implemented within this objective)

A total of 7,000 families in Gonaïves and 3,000 families in the outlying 7 communes have been identified by the Federation assessment as being in need of non-food assistance. However, due to a funding shortage, the Federation has only been able to target 5,575 beneficiary families at this time. Haitian National Red Cross Society (HNRCS) volunteers and Federation delegates have completed a survey in Gonaïves and Ennery to select beneficiaries to receive non-food items. During the reporting period, nine carefully planned aid distributions were carried out in Gonaïves with distributions of hygiene kits, plastic sheeting, blankets, jerry cans, kitchen sets. In addition, three separate one-time distributions were carried out to smaller communities identified as in need. At present, 5,195 families have now received relief items.



Checking names at a relief distribution

The following table shows the distribution status of the Federation relief items as of 9 January:

Beneficiary families registered (food/non-food)	5,575
Beneficiary families assisted (food/non-food)	5,195
Ratio registered/assisted (food/non-food)	93%
Beneficiary families receiving non-food items	3,994
Kitchen set	3,931
Family hygiene kits	13,213
Individual hygiene kits (male)	3,520
Individual hygiene kits (female)	4,928
Cleaning kits	666
Blankets	14,065
Plastic sheeting	222
Jerry cans, 20 litres	6,541
Jerry cans, 10 litres	1,336
Buckets	4,886
Mosquito nets	5,712

Impact

To date, a total of 5,195 families in the towns of greater Gonaïves and Ennery have received non-food relief items that will help them cope better and recover from the material losses they suffered as a result of the floods. The beneficiary families have been assisted through regular distributions corresponding closely to their nutritional and practical needs. To avoid duplication and achieve a maximum level of coverage, the Federation has been closely

coordinating with other humanitarian NGOs, such as Action Against Hunger, OXFAM and CARE. The resulting plan covers five principle areas within Gonaïves, including Assifa et Ceprenn, Bigot, K-Soleil, Parc Vincent, and Raboteau, which are densely populated and were particularly hard hit by the floods.

Constraints

Pending a joint Federation/ICRC assessment of the security situation in Haiti planned for January, questions raised as to MINUSTAH's participation in Federation relief distributions has led to a suspension of distributions in Gonaïves.

Objective 2: 1,400 families (7,000 people) will have benefited from the provision of food items delivered through secure distribution centres.

Progress/Achievements (activities implemented within this objective)

In the outlying communes of Ennery and Chansolme, the joint HNRCS/Federation assessment team identified some 1,400 families (within the same above mentioned 3,000 families that were identified by the Federation's initial assessment) whose subsistence and cash crops were destroyed and are therefore in need of food assistance.

The commune of Chansolme, in which the World Food Programme (WFP) has distributed food rations to 3,000 people, will not be assisted by the Federation. As a result, all resources will instead be directed towards the commune of Ennery where, to date, close to 1,290 beneficiary families have received distribution cards. In addition, HNRCS volunteers will conduct a survey in remote communities to verify another 300 – 400 vulnerable families who, as confirmed by the mayor's office in Ennery, have yet to receive humanitarian assistance. This will bring the total number of beneficiary families in Ennery to well over the originally planned 1,400. During the reporting period, the Federation team carried out three distributions of food parcels to previously identified beneficiary families living in and around Ennery and in the nearby the community of Passe-Reine. In addition, three separate one-time food distributions were carried out to smaller communities identified as in need, including to the outlying Pilate Hospital, which received cumulatively more than one ton of wheat flour, maize flour and biscuits just before Christmas.

The following table shows the distribution status of the Federation relief items as of 9 January:

Beneficiary families registered (food/non-food)	5,575
Beneficiary families assisted (food/non-food)	5,195
Ratio registered/assisted (food/non-food)	93%
Beneficiary families receiving food items	1,201
Food parcels	4,749
Corn flour, 20 kg	74
Food bags, 16 kg	22

Impact

To date, 1,201 families in the commune of Ennery have received food parcels. These distributions are intended to supplement individual families' food supplies and improve their overall nutrition over a period of three months. The amount distributed to date represents approximately one third of the total target per family. By the end of January, each beneficiary family will have received a total of fifteen parcels. Each food parcel is designed to provide an individual with at least 1,000 calories per day for a period of one month, which represents about half of the SPHERE standard food intake per person. Each parcel contains:

- Rice (10 lbs)
- Red beans (2 lbs)
- Sardines (2 lbs)
- Salt (1 lb)
- Sugar (4 lbs)
- Cooking oil (2 litres)



Food parcels handed out by the Haitian National Red Cross Society and the Federation have provided relief to many affected families.

Constraints

Pending a joint Federation/ICRC assessment of the security situation in Haiti planned for January, questions raised as to MINUSTAH's participation in Federation relief distributions has led to a suspension of distributions in Gonaïves.

Shelter

Objective: 15,000 beneficiaries (3,000) families) will have benefited from the provision of shelter materials delivered through secure distribution centres.

Progress/Achievements (activities implemented within this objective)

Due to the damage that thousands of resident families' homes sustained as a direct result of flooding, the joint HNRCS/Federation assessment team identified some 3,000 families in need of materials for temporary shelter and other construction activities. Distribution of shelter materials has been delayed by the security situation in the country and a lack of human resources in the field. Tarpaulins and plastic sheeting stored at the Federation warehouse will be distributed in collaboration with the German Red Cross, which is starting a rehabilitation project in the area between Port-de-Paix and Anse Rouge.

Impact

Following discussions between the German Red Cross and the Federation, it was agreed that the German Red Cross, which is developing a shelter programme, would receive part of the plastic sheeting stock currently in storage at the Federation's warehouse in Gonaïves. Additionally, 74 beneficiary families in the commune of Mandrin which was more recently identified as in need, received three pieces of plastic sheeting during the last week of the reporting period.

Health

Objective 1: To rehabilitate Gonaïves' only referral hospital, La Providence, serving the primary and secondary health care needs of the population.

Progress/Achievements (activities implemented within this objective)

A fully equipped 100-bed field hospital, jointly sponsored by the Canadian and Norwegian Red Cross Societies, is in place in Gonaïves. A team of Cuban and Haitian medical staff, employees of the local La Providence Hospital, are working at the field hospital until La Providence is rehabilitated. The field hospital will then be dismantled and all medical equipment and activities transferred to La Providence Hospital.

The process of a gradual handover of the field hospital to the local health authorities is progressing well. The administration of La Providence, accommodated in a tent in the Red Cross compound, has taken over full responsibilities for the day-to-day operation of hospital. In order to maintain good channels of communication, meetings are held as necessary between the Canadian and Norwegian Red Cross field hospital representatives, the

Federation team, local Ministry of Health representatives and representatives from the Cuban health brigade that supports the hospital with medical personnel.

The joint evaluation exercise of the field hospital services and units has been completed. Four services had been reported to be functioning self-sufficiently, while six had been deemed in need of further supervision and training. Final services were turned over on in mid-December. A joint effort by the Federation and the Canadian and Norwegian Red Cross Societies will continue to monitor hospital functions at the administrative level.

A plan of action for restarting work in La Providence Hospital was drawn up by the field hospital staff and the Federation team. Several working meetings with the administration of La Providence succeeded in prioritizing repairs and improvements and allocating roles and responsibilities. Suggested technical repairs included a thorough clean up of the main building to remove large amounts of mud and refuse, repairs to large sections of the broken perimeter walls and to damaged building walls, and the installation of water, sanitation and electricity services. All these projects must be completed before medical facilities and equipment can be transferred.



The flood water level can be clearly seen on the walls of the damaged hospital building.

The proposed plan of action was deemed feasible and approved by La Providence Hospital administration. At a meeting in Port-au-Prince convened by the Ministry of Health, the plan of action was discussed and endorsed. The massive rehabilitation project, which has been managed by the Canadian/Norwegian Red Cross working in concert with the French ERU team, has been underway for several weeks now.

Rehabilitation of La Providence is expected to be completed on or before 5 February 2005. All equipment in the Red Cross temporary tent hospital compound will then be packed, moved and installed at La Providence over a period of a week, while a full handover to local health authorities is expected to take place approximately ten days following completion of the rehabilitation work.

La Providence's non-essential buildings, which were not within the Canadian/Norwegian Red Cross' project goals, remain for the most part as they were in the wake of the flood disaster, including the main administration building. The Haitian Ministry of Health has the central role in the renovation of these buildings and is currently drawing up plans to rehabilitate them. The status of these non-essential buildings should not have a significant impact on the practical use of the most necessary hospital buildings. Therefore, if the remaining buildings are not rehabilitated by 5 February, the moving and installation of equipment should not be delayed.

Impact

The population of Gonaïves and the surrounding areas now have access to primary and secondary health care services. Between 4 December and 2 January, the field hospital received 2,658 outpatients. Some 692 persons were admitted for special care, including 72 patients for overnight care, of which 40 patients were admitted for surgery. The same medical services will be available to patients when the field hospital facilities are transferred to La Providence Hospital. In addition, the repaired buildings at La Providence will provide patients with a better environment for care than the present hospital tents, which, in addition to being inadequate shelter during the heavy February winds and rains, leave patients, staff and equipment undesirably exposed to the sun, heat and dust.

Constraints

The Haitian health authorities had taken considerable time to agree on a decision regarding the return of services to La Providence. Part of the health system was in favour of abandoning La Providence and opted for the construction of a new hospital, which would take an estimated two to three years to complete. While the possibility of building a new hospital has not been excluded, the plan that has been approved will allow La Providence to become operational and provide patients with an adequate standard of care. In the meantime, health authorities will have the opportunity to consider whether additional funding should be sought elsewhere to entirely rehabilitate La Providence or whether a new hospital should be built.

Finding workers, managers and contractors for the clean-up and rehabilitation of La Providence has been tremendously challenging. A good portion of the day labourers has proved particularly unreliable, entailing volatile labour disputes, mass lay-offs, increased security demands and significantly more time required on an administrative level. It was soon realized that the best option would be to complete the work through a contractor with a proven track-record. Thus the remaining rehabilitation has been successfully outsourced to a well-known Haitian contractor which has been operating on a national level for years.

Due to time constraints, the last members of the French ERU team, responsible for revamping the water sanitation and plumbing systems at La Providence finally left in the first week of January. A French Red Cross delegate is slated to replace the ERU team on 20 January. But facing three weeks without an experienced water engineer, lengthy delays to the rehabilitation project seemed inevitable. Fortunately, the recently arrived Federation water and sanitation delegate, who is responsible for building latrines in residential areas, has agreed to oversee the plumbing, water and sanitation reconstruction in the interim.



A large piece of La Providence's perimeter wall was totally destroyed by flood.

Objective 2: To reduce the impact of water/vector born diseases (typhoid, malaria and diarrhoeal diseases) in the affected areas.

Progress/Achievements (activities implemented within this objective)

Two basic kits of the New Emergency Health Kit (NEHK) have been supplied to the Hospital de l'Espoir in Pilate to assist efforts to reduce the impact of water and vector borne diseases. In addition, the Federation and the president of the Gonaïves branch of the HNRCS have drawn up job descriptions for a programme officer and an assistant to coordinate the rapid-impact health promotion campaign related to water and sanitation, hygiene, basic nutrition and HIV/AIDS.

Impact

The contents of the two kits will cover the basic health care needs of 2,000 people in Pilate for three months. Through the rapid-impact health promotion campaign, HNRCS volunteers will not only deliver basic health promotion messages to beneficiaries during distributions, but will also train other volunteers. The programme is pending the arrival of a health delegate.

Water and Sanitation

Objective 1: To provide 450,000 litres of water in accordance with WHO water quality standards, affording 30,000 people (6,000 families) in Gonaïves with 15 litres per day.

Progress/Achievements (activities implemented within this objective)

A total of 6,000 families in Gonaïves have been identified by the Federation assessment as being in need of fresh water. Despite a funding and human resource shortage, the Federation, in cooperation with the French ERU team, has succeeded in meeting and actually exceeding the needs of the target population. The focus of the French Red Cross ERU team, specialized in mass water and sanitation, has now implemented its common exit strategy for all agencies working with water distribution. With the public water system partly repaired and connected to the network; and with ever more wells being cleaned or rebuilt, communities will soon have access to water through the sources that served them before the floods. The plan was to gradually reduce production and to close down distributions by 20 December. At the end of the reporting period, the French Red Cross ERU staff members closed down reservoirs, removing and reconditioning the bladders. Four local ERU staff members have been trained by MSF and are now working on cleaning wells in the 12 areas serviced by the French Red Cross water tankers. The local staff members are working in two teams of two people, each of which is able to clean and test the water quality of five wells per day.

Impact

The amount of potable water distributed to the affected population in Gonaïves has provided a population of up to 30,000 people with over 20 litres of clean water per day for more than two months and has prevented the spread of water borne diseases. In addition, as a result of the dissemination of promotional hygiene messages at the water distribution points, families now have an increased awareness of hygiene issues.

Constraints

Of the three main SNEP boreholes used to supply freshwater, only one is functioning properly. Overflow caused by the flooding destroyed pumps, which are in need of replacement. The two remaining French ERU team members, who left Gonaïves on 5 January, had faced considerable time constraints but managed to take on extra responsibilities such as providing the La Providence hospital with a completely new water purification system. They not only had to recondition and store bladders belonging to their own project, but also received those used by OXFAM, which all at a later stage will be handed over to the Haitian National Red Cross Society. Eleven Haitian nationals working at the specialized water and sanitation unit servicing the field hospital have received thorough training in maintaining high-quality water systems. These newly-trained water engineers are now capable of taking over the responsibility of maintaining and reconditioning the equipment until the arrival of two French Red Cross delegates who will finalize the handover process. Also, it has been arranged that OXFAM will give materials and continue their work on the water programme in cooperation with HRCNS.



A member of the French Red Cross ERU conducts water and sanitation training.

Objective 2: To improve the transport and storage capacity at household level of clean water for 50,000 people (10,000 families)

Progress/Achievements (activities implemented within this objective)

During the reporting period, an additional 734 families received one or two 20-liter collapsible jerry cans each. Since the beginning of the operation, more than 5,000 families in Gonaïves and the commune of Ennery have received collapsible jerry cans. For the most part families received either one 20-litre jerry can or two 10-litre jerry cans. In total, 7,877 10- and 20-litre jerry cans have been distributed to date. More distributions have been planned for the coming weeks.

Objective 3: To supply the Gonaïves field hospital and living compound with sufficient water that is in accordance with the WHO standards for quality water.

Progress/Achievements (activities implemented within this objective)

The French Red Cross ERU, which took over from the Spanish Red Cross specialized water and sanitation ERU, has continued to supply the hospital with approximately 40,000 litres of high quality water per day. The hospital area is fumigated each morning and showers and latrines are disinfected. Waste is collected and burned in the incinerator at the former referral hospital, La Providence. A team of four HNRCS volunteers have been trained in vector control, disinfecting and waste disposal and are carrying out this job without supervision. An additional 22-25 staff members have been trained in general water distribution and production.

During the previous reporting period, the remaining Spanish Red Cross team member completed his mission and the Federation team came to an agreement with the Spanish and French Red Cross Societies that the French Red Cross ERU team would temporarily take over monitoring of the water supply system at the field hospital. The French Red Cross ERU water and sanitation delegate also participated in the survey of the water supply systems at La Providence Hospital and came up with recommendations for measures to make these systems functional, which are now being implemented. In addition, a stationary water treatment plant has been donated to and installed in La Providence. In the meantime, the French Red Cross water and sanitation delegates have reached their end of mission. Until their replacement arrives on 20 January, the Federation water and sanitation delegate will be in charge of monitoring the ongoing repairs to the hospital's water supply system.

Impact

High quality water and healthy surroundings have been ensured for the hospital and for staff living quarters. Neighbours of the Red Cross compound are also benefiting from access to clean drinking water. In addition, HNRCS volunteers have acquired new skills, enabling them to operate the ERU unit with the support of a Federation water and sanitation delegate.

Constraints

French Red Cross delegates responsible for the water supply to the field hospital reached their end of missions. Until their replacement on 20 January 2005 the Federation water and sanitation delegate, who arrived in Gonaïves on 20 December 2004 to manage the latrine construction project, has been assigned to temporarily take over responsibility for monitoring the ongoing activities.

Objective 4: To provide materials and technical assistance in latrine reconstruction for 1,000 families living in areas where the risk of uncontrolled disease is high.

Progress/Achievements (activities implemented within this objective)

A water and sanitation consultant that was deployed for a month to the Federation office in Gonaïves and an HNRCS-designated counterpart have identified an area to implement a project for individual family latrines. A Federation water and sanitation delegate arrived on 20 December 2004 to manage the project and has since been attracting bids from contractors to complete latrines in five zones. The project also includes emptying full latrines, mostly filled with mud, and/or rehabilitation of damaged latrines. The project proposes to build new latrines for clusters of families where the SPHERE standards of a maximum of 20 persons per latrine are exceeded. Other organizations are being kept informed of the plans to avoid duplication in the area.

Impact

The Federation assessment identified the need to reconstruct existing latrines and build 1,000 new latrines in order to prevent additional water contamination. The reconstruction of as many latrines as possible will contribute to the prevention of waterborne diseases.

Constraints

The number of latrines will need to be dramatically reduced until additional funding can be secured. In addition, there are two more obstacles which until now have postponed the reconstruction of latrines: the water table has remained high and the rehabilitation of latrines is perceived by the affected population as a secondary priority when compared with the urgent need to rebuild destroyed or damaged homes.



Haitian Red Cross Volunteer Badge

Strengthening of Response Capacity

Objective: To reinforce the HNRCS with its mandate to respond to catastrophes within a country with a fragile political context and during the hurricane season.

During this phase, the focus of the relief operation is on the immediate needs of the affected population. Activities to strengthen the capacity of the HNRCS will be undertaken once more resources can be dedicated towards rehabilitation.

Federation Coordination

From the onset of the disaster, the Federation and Partner National Societies in Haiti have coordinated their support to the Haitian National Red Cross Society in order to agree on a framework for the operation and to avoid duplication of efforts. In Port-au-Prince, the ICRC is also being consulted daily in connection with the security situation. At the field level, a close working relationship with the ICRC, which has supported the Federation in the design of security and evacuation plans, has been established. In addition, the Federation is ensuring close cooperation with UN agencies and other external partners in its effort to make the best use of available resources. In Port-au-Prince, as well as in Gonaïves, the Federation is participating in coordination meetings, which take place once a week. In Port-au-Prince these meetings are chaired by the UN, while in Gonaïves, the local authorities, La Délégation de L'Artibonite, is the coordinating body. A summary of the revised Appeal was prepared for the UN agencies, giving short and concise information, with a clear distinction between intended activities in Gonaïves itself and the seven outlying communes.

In the field, the Federation-deployed French Red Cross mass water and sanitation ERU has been participating in coordination meetings with other water and sanitation actors, such as, OXFAM, Action against Hunger, CARE and the local water agency (SNEP). In addition, the field hospital's Norwegian Red Cross administrative staff has been accommodated at the Federation's flood response office, while the ICRC delegate deployed to Gonaïves and the French Red Cross delegates have often used the Federation's office facilities.

Red Cross and Red Crescent Movement -- Principles and initiatives

- Relief activities being carried out are based on the Fundamental Principles of the Red Cross and Red Crescent Movement.
- Beneficiary selection criteria focus on the vulnerability of those affected
- Relief operations are being conducted with respect for the culture of beneficiaries, ensuring gender sensitivity and prioritizing assistance to children and the elderly.
- Activities are based on the SPHERE Project humanitarian charter and the code of conduct for emergency response.
- Transparency is being ensured through the production of regular reports and news bulletins.
- All objectives put forward in the appeal are in line with Strategy 2010, as well as the Strategy for the Movement and the Principles and Rules of the Movement.

National Society Capacity Building

The Federation expects to leave the affected communities and the National Society better organized and prepared for disasters. As a first step, the participation of branch volunteers in activities such as conducting surveys and assessments, distributing relief supplies, installing and maintaining water supplies and the training of trainers in health related issues has provided volunteers with additional skills and capacities to respond to disasters.

Communications – Advocacy and Public Information

The provision of information influencing public opinion regarding the Red Cross is a key activity. A reporting delegate is in Haiti, and a number of media interviews have been given by both the delegate, the Federation representative in Haiti and the head of the Federation's floods response office. News articles concerning the disaster have been posted on the Federation's website and a press release was issued on 5 October concerning the launch of the Federation's revised Emergency Appeal. A news article has been compiled for an ICRC news magazine targeting the international community in Haiti. In addition, with the support of the Federation, work is on-going to ensure the visibility of the operation which is being led by the National Society. Distributions of relief items are being carried out wherever possible by HNRCS volunteers, and volunteers and relief items are clearly marked with the Red Cross emblem as a means of increasing the visibility of the Red Cross within Haiti.

[Contributions list below; click here to return to the title page.](#)

Haiti - Floods (hurricane Jeanne)

ANNEX 1

APPEAL No. 22/2004

PLEDGES RECEIVED

11/01/2005

DONOR	CATEGORY	QUANTITY	UNIT	VALUE CHF	DATE	COMMENT
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CASH

REQUESTED IN APPEAL CHF ----->				11,673,000	TOTAL COVERAGE 83.7%	
AMERICAN - PRIVATE DONOR		15,000	USD	18,967	28.09.04	
AMERICAN - PRIVATE DONORS				126	07.10.04	
BARBADOS - RC		7,750	USD	8,773	30.12.04	
BELGIAN - GOVT/RC		8,409	EUR	12,959	22.09.04	PROGRAMME SUPPORT
BERMUDA - RC		20,000	USD	25,290	12.10.04	
BRITISH - RC		40,000	GBP	91,440	28.09.04	
BRITISH - GOVT/DFID		147,059	GBP	336,177	18.10.04	RELIEF NEEDS, OPERATIONAL NEEDS
CANADIAN - RC		50,000	CAD	46,900	20.09.04	ASSESSMENT MISSION
CANADIAN - GOVT/CIDA/HAPS		200,000	CAD	187,600	24.09.04	
DANISH - RC				75,975	17.11.04	
FRENCH - PRIVATE DONOR		200	EUR	303	07.12.04	
IRISH - GOVT		150,000	EUR	232,875	06.10.04	
JAPANESE - RC		111,400	USD	140,865	01.10.04	
LUXEMBOURG - RC		50,000	EUR	77,625	21.10.04	
MONACO - RC		8,000	EUR	12,420	11.10.04	
NETHERLANDS - GOVT		529,412	EUR	809,736	29.10.04	OPERATIONAL COSTS, RELIEF ITEMS
OFDA/USAID		990,000	USD	1,251,855	23.09.04	
PRIVATE DONORS				57,564	15.11.04	
PRINCETOWN CARIBBEAN CONNECTION		1,587	USD	2,006	06.12.04	
SWEDISH - GOVT		1,000,000	SEK	167,500	27.09.04	
SWISS - RC				42,781	28.10.04	
SWISS - RC				6,999	27.10.04	
SWISS - PRIVATE DONORS				11,598	29.09.04	
ANMWE POU AYITI				5,000	11.10.04	
WHO STAFF				4,000	30.09.04	
SUB/TOTAL RECEIVED IN CASH				3,627,334	CHF	31.1%

KIND AND SERVICES (INCLUDING PERSONNEL)

DONOR	CATEGORY	QUANTITY	UNIT	VALUE CHF	DATE	COMMENT
BELGIAN - GOVT		257,214	EUR	396,367	22.09.04	PURIFICATION TABLETS, JERRYCANS, BLANKETS, PLASTIC SHEETING, FAMILY TENTS
BELGIUM	DELEGATES			15,000		
CANADIAN - RC		1,270,000	CAD	1,191,260	05.11.04	DIRECT ASSISTANCE: ERU REFERRAL HOSPITAL
CANADIAN - RC	DELEGATES			18,400		
DENMARK	DELEGATES			10,200		

Haiti - Floods (hurricane Jeanne)

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PLEDGES RECEIVED

11/01/2005

DONOR	CATEGORY	QUANTITY	UNIT	VALUE CHF	DATE	COMMENT
FRENCH - RC/GOVT/ECHO/VEOLIA		785,000	EUR	1,209,685	24.09.04	DIRECT ASSISTANCE: MEDICAL KITS, BLANKETS, JERRYCANS, KITCHEN SETS, LAMPS, TARPAULINS, HYGIENE KITS, STOVES, 5 DELEGATES, ERU LOGISTICS AND WATER DISTRIBUTION & TRUCKING
NETHERLANDS	DELEGATES			18,000		
NORWEGIAN - GOVT/RC		9,523,810	NOK	1,785,714	05.11.04	DIRECT ASSISTANCE: ERU REFERRAL HOSPITAL
SPANISH - RC		849,981	EUR	1,319,595	20.10.04	DIRECT ASSISTANCE: TOYOTA HILUX, WATER TTT PLANTS, JERRY CANS, HYGIENE KITS, FOOD RATIONS, ERU LOG, WATSAN, 10 DELEGATES
SWISS - RC				181,471	27.10.04	REHYDRATION SALT, EMERGENCY HEALT KIT, WATER PURIFICATION TABS. MOSQUITO NETS, COOKING EQUIPMENT, TRANSPORT
SUB/TOTAL RECEIVED IN KIND/SERVICES				6,145,692	CHF	52.6%

ADDITIONAL TO APPEAL BUDGET

DONOR	CATEGORY	QUANTITY	UNIT	VALUE CHF	DATE	COMMENT
SUB/TOTAL RECEIVED				0	CHF	