

Mid-Year report

 International Federation
of Red Cross and Red Crescent Societies

Caribbean

Appeal No. MAA49001

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This report covers the period 01 January 2011 to 30 June 2011.



Students of Crooked Tree Village school in Belize who participate in the Belize Red Cross Society Disaster Risk Reduction awareness project gather in front of a community preparedness billboard posted on their school building.

In brief

The International Federation of Red Cross and Red Crescent Societies' (IFRC) 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 IFRC'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.

Programme outcome:

The Caribbean Regional Representation Office's (CRRO) 2011 programmes involve support to the Caribbean Red Cross Societies¹ to become better functioning, with the ability to plan, resource and manage programmes that address the needs of society's most vulnerable people. Priority is being given to supporting the institutional development of National Societies and to align their actions with *Strategy 2020*. This includes leadership support – with particular regard to the role of governance and management; building on agreements arising from the 2010 Caribbean leadership forum; increased focus on National Society statutes and strategic plans; and continued support to youth, volunteering, resource mobilization and communications. Regional expertise is being enhanced through the promotion of regional exchanges, internships and the strengthening of the technical networks.

For the promotion of humanitarian diplomacy, continued emphasis is being placed on the development of external partnerships with key Caribbean organizations, the roll-out of an advocacy campaign on disaster risk reduction, and the promotion of International Disaster Response Law with

¹ Antigua and Barbuda, the Bahamas, Barbados, Belize, Dominica, Grenada, Guyana, Jamaica, Saint Kitts and Nevis, Saint Vincent and the Grenadines, Saint Lucia, Suriname, Trinidad and Tobago

governments as an integral part of the National Societies' auxiliary role.

Disaster risk reduction (DRR) programming continues to be implemented in the context of the Caribbean Red Cross Disaster Management Framework 2009–2014, which sets out a process for coordinated disaster mitigation. This approach focuses on the achievement of three intended results: safer and more resilient communities; enhanced institutional Red Cross capacity for disaster management at national and community levels, and; increased Red Cross coordination and advocacy for comprehensive disaster management.

The Health programme focus for 2011 has been on strengthening the integration of health with DRR using the Vulnerability and Capacity Assessment (VCA) as the principal process. Impacted however by lack of expected Health programme funding for 2011, National Societies are being encouraged to use an innovative approach for supporting communities to understand and better link community health with disaster preparedness towards building community resilience. The response to HIV and AIDS continues through tailored support to those countries with highest prevalence rates working within the framework of the Global Alliance on HIV.

Additional progress in the area of first aid was achieved in several National Societies that had undergone first aid business planning in 2010 supported by the American Red Cross. This is being further strengthened through the development and submission of a regional proposal that – if funded – will allow National Societies to refine and further professionalize their first aid programmes. This in turn would increase the income generated from corporate first aid commercial training so that additional resources can be generated to support outreach to vulnerable communities and to strengthen the National Societies advocacy role which is needed for ensuring legislation that adequately supports the requirements for first aid skills both in industry and for community preparedness.

Programmes summary:

Disaster Management: Work in disaster management has progressed through: development and implementation of tools designed to reduce vulnerability; the prepositioning of response/relief supplies; and revision and further development of response, contingency and livelihood recovery plans. The CRRO and the Red Cross National Societies in the Caribbean continue to collaborate with regional and national disaster management systems through the Caribbean Disaster Emergency Management Agency (CDEMA) - the coordinating body for regional disaster management and a partner of the IFRC. Simulation exercises continue to test the efficiency of resource allocation and deployment throughout the region, and tools are shared through the efforts of the Caribbean Disaster Risk Management Resource Centre that is based in Barbados. While the Disaster Preparedness Programme of the European Community Humanitarian Office (DIPECHO) VII funding ended in February 2011, other disaster management proposals are being given active consideration by the Canadian International Development Agency (CIDA), DIPECHO, and the Office of Foreign Assistance (OFDA) of the United States Agency for International Development (USAID). The Caribbean Disaster Management Network continues to serve as the coordinating body for related activities. Through the Resource Centre, a review and standardization of educational materials is being conducted. Services to migrant communities and families continue where and as needed.

Cooperation within the Movement: Two members of the CRRO staff remain deployed to the Haiti earthquake response operation. Pan-American Disaster Response Unit (PADRU) representatives visited the CRRO for consultations prior to a disaster management workshop scheduled to be conducted during the month of July. Partner National Societies continue to collaborate for National Society development and for the delivery of DRR programmes in the region, including: the American, British, Canadian, French, Finnish, Netherlands and Norwegian Red Cross Societies.

Health: In addition to the ongoing response to vector-borne diseases by some National Societies related to the increased prevalence of dengue and the heightened alert to cholera in 2010 into 2011, the regional focus on community health has been promoted through Water, Sanitation and Hygiene (WASH) training in Guyana, Saint Lucia and Suriname. A proposal developed to fund First Aid

programme development took into consideration the newly-released *IFRC International First Aid and Resuscitation Guidelines* which were used to review the Caribbean First Aid Reference Manual developed with the support of the British Red Cross and scheduled to be released in the 3rd quarter of this year. Other community-based activities focused on adapting the Community-Based Health and First Aid (CBHFA) in action community tool to the Caribbean and implementation of the '10 Steps' programme supported by the Canadian Red Cross. Considerable efforts were made to collaborate with the Pan American Health Organization (PAHO) on cholera and the water, sanitation and hygiene (WASH) activities after the Hurricane Tomas response. A dengue poster was also developed and is being distributed to National Societies for use in their community awareness-raising work. Additionally, the Suriname Red Cross was successful in gaining support for their plan of action for Club 25 as a youth initiative for increasing Volunteer Non-Remunerated Blood Donations (VNRBD).

HIV and AIDS: 2010 marked the end of the first three-year Global Alliance on HIV programme in the Caribbean region. The four English speaking National Societies involved in the programme (Belize, Jamaica, Guyana and Trinidad and Tobago) are developing their new 4-year proposals, which will continue to support scale-up of the local response to HIV. Proposals will also place a key focus on Most at Risk Populations (MARPS) as this group now accounts for the largest share of new infections in Latin America and the Caribbean.

• **Volunteer Development:** Progress in the sector of volunteer development during the reporting period included an increase in the number of volunteer focal points among the National Societies and the completion of new volunteer education and development materials. Over 130 volunteers are engaged in Community-Based Disaster Management (CBDM) activities in the Caribbean region. National Societies are also institutionalizing their volunteer management processes; Antigua and Barbuda and Saint Kitts and Nevis Red Cross Societies are improving their physical database records; Belize and Trinidad and Tobago are launching computerized volunteer management systems.

• **Advocacy:** Increased coordination is being achieved through the partnerships with CDEMA, the Eastern Caribbean Donor Group (ECDG), and Partner National Societies (PNS) active in the region. The CRRO and Caribbean National Societies representatives attended meetings and participated in simulation exercises for emergency response. The CRRO continues to include advocacy issues in its ongoing communications with partners, stakeholders and with the National Societies in the region in support of their respective auxiliary roles.

Financial situation: The 2011 budget has been revised from 2,528,048 Swiss francs to 2,842,401 Swiss francs. The financial report attached reflects that 1,373,585 Swiss francs (48 per cent) of the budget has been covered (end of June 2011). However, the current appeal coverage stands at approximately 85 per cent as some contributions were received after the period. A total of 764,429 Swiss francs have been spent during the period covered by this mid-year report.

[Click here to go directly to the financial report.](#)

See also:

[Hurricane Tomas – MDR49006](#)

No. of people we have reached: Within the reporting period, a wide range of beneficiaries have been reached through disaster management and health programme delivery in the region. In community based DRR, project staff and volunteers supported 27 communities in 6 National Societies to provide direct training to 13,352 persons in first aid, community disaster planning, CDRT and family emergency plan training. As well, more than 21,000 people benefitted from community mitigation micro-projects in 9 communities. At the National Society level, institutional preparedness for disaster risk reduction contributed to eight National Society updates, or initial development of their disaster response plans. In addition, 77 Red Cross staff and volunteers from the region benefitted from National Intervention Team (NIT), Regional Intervention Team (RIT) and Field Assessment Coordination Team (FACT) Team Leader training in the first half of the year. In health programming, the training of 26 CBHFA facilitators in Suriname and Guyana led to a cascade training of 91 CBHFA community-level volunteers in 8 communities reaching 5,869 people. Given that almost all available health funding at this time is focused on HIV activities through the Global

Alliance, consequently this is the programme area in health that is reporting the most substantial results. To date, National Societies have reached a reported 458,000 persons with prevention messages, provided psychosocial support to 357 persons living with HIV and to 49 children orphaned as a result of the virus. Further, a total of 6,327 volunteer working hours have been recorded in the National Societies HIV programmes, with 192 staff and volunteers benefitting from training on new National Society policies related to HIV in the workplace.

Our partners: Movement partners in the region include the American, British, Canadian, French, Finnish, Netherlands and Norwegian Red Cross and the International Committee of the Red Cross (ICRC). External partners include – as previously noted – CDEMA and ECDG as well as the Organization of American States (OAS) and the Association of Caribbean States (ACS). At time of this report, discussions are underway with the Eastern Caribbean Area Office of UNICEF for project collaboration on the delivery of post-disaster child psychosocial response.

Context

While there was relative stability in the socio-political environment of the region for the first semester of 2011, the global economic downturn and the continued fallout from the collapse of one of the region’s large insurance and investment commercial institutions have had a combined economic impact on the region’s governments and businesses. A significant consequence of the global financial struggle has been a downturn in the regional tourism industry, a critical sector that fuels the majority of the region’s economies. A reduction in citizens’ disposable income has in turn impacted on both corporate and personal charitable donations, and this has translated to a reduced scope of work for Red Cross programme expansion beyond the donor-funded activities. Job redundancy has not been matched by a commensurate increase in volunteer hours. In this difficult operating environment, efforts continue nonetheless in the development of volunteer recruitment and resource mobilization activities.

Progress towards outcomes

Disaster Management

Programme purpose
Reduce the number of deaths, injuries and impact from disasters.
Programme component 1: Community-Based Disaster Risk Reduction
Component outcome 1: Vulnerable communities have increased knowledge, skills and resources to conduct disaster mitigation, preparedness and response activities.

Strengthening their capacity for emergency response, National Societies in Antigua and Barbuda, Barbados, Dominica, Grenada, Guyana, Saint Vincent and the Grenadines, Saint Lucia, and Saint Kitts and Nevis completed updates of their Response and Contingency Plans. At the date of this report, the Barbados Red Cross Society Governing Council has approved these documents, and this National Society is collaborating with the Regional Resource Centre on a template to help replicate this planning process. As well, the Barbados Red Cross Society has begun a volunteer training based on their plan and has initiated a warehouse management system in support of the same. In the Grenada Red Cross Society, the Governing Board has also approved their revised Response and Contingency plans.

Work continued in 27 communities in the region to strengthen preparedness through Community Disaster Response Teams (CDRT), community first aid and family disaster planning. Communities were also engaged in 12 mitigation micro-projects designed to reduce risk for more than 20,000 beneficiaries.

With regards to all National Societies implementing Community-Based Disaster Management programmes (CBDM) working in high-risk communities directly in partnership with PNS and conducting a learning-by-doing training in construction and retrofitting homes in selected communities, further progress towards these interventions will be carried out in the second half of 2011, once the DIPECHO

8 project commences. Nonetheless, eight National Societies —Antigua and Barbuda, Barbados, Bahamas, Grenada, Jamaica, Suriname, Saint Kitts and Nevis, and Saint Lucia— were already conducting CBDM activities with communities.

Similarly, further progress on the pilot disaster awareness and first aid training in schools will take place in the second half of the year. However, the Suriname Red Cross Society is already engaged in a school programme.

Programme component 2: Institutional Preparedness for Disaster Risk Reduction

Component outcome 1: Red Cross institutional capacity for disaster risk management at national and community levels is enhanced.

Eight² National Societies have updated, or developed and tested, their disaster response plans which link to their national systems. Through IFRC's Disaster Management Information System (DMIS) and by direct communication, the CRRO monitored Red Cross participation in response activities related to excessive rainfall in April that led to flooding in the parishes of Saint John and Saint Mark in Grenada, and inundated roads and damaged bridges in eastern Saint Vincent and the Grenadines. In Grenada, the Red Cross supported 29 families in the affected area with in-kind items, while the SVGRC distributed 48 hygiene kits, 160 jerry cans, 60 buckets, 40 blankets, basic food and clothing to affected families. Planning for response continued with the revision and development of operational plans for the Red Cross in Barbados and in Trinidad and Tobago.

Continued strengthening of some 70 staff and volunteers continued with five NIT trainings in the Caribbean and RIT training in Guadeloupe in February 2011.

An initiative funded by the Canadian International Development Agency (CIDA) and the Canadian Red Cross entitled Caribbean Community Resilience to Disaster Risk (CCRDR) addresses disaster preparedness in the National Societies of Jamaica, Dominica and Guyana as well in support of the Reference Centre.

The most recent ECHO-funded (DIPECHO 7) intervention ended in February and the newest proposal, to include DRR programming in Trinidad and Tobago, Saint Vincent and the Grenadines, Barbados, Suriname and Grenada, was submitted following consultative proposal revisions (DIPECHO 8). Through DIPECHO 7 and other funding sources by the end of last year, it was possible to pre-position stocks for families in Antigua and Barbuda, Bahamas, Barbados, Belize, Dominica, Grenada, Saint Kitts and Nevis, Saint Lucia, Saint Vincent and the Grenadines, and Trinidad and Tobago. In 2011, through the new proposal the National Red Cross Societies of Suriname, Jamaica and Guyana will be supported to preposition stocks. The Jamaica Red Cross has already requisitioned its stock.

Due to lack of funding for livelihood recovery initiatives, it will not be possible to work on capacity building of the Jamaica and Suriname Red Cross Societies to support livelihood recovery initiatives in 2011.

Programme component 3: Coordination and advocacy

Component outcome 1: Increased Red Cross coordination and advocacy for comprehensive disaster management.

Within the programmes planned and delivered for disaster management coordination amongst the National Societies of the region, the *Caribbean Red Cross Disaster Management Framework 2009-2014* continues to be the operating guideline. The Secretariat continues to work with regional partners on developing common indicators for measuring impact, including CDEMA and UN ISDR, to develop country risk assessments. The CRRO continues to seek advocacy opportunities to support the auxiliary role of the National Societies for disaster management planning, preparedness and response, as well as for the promotion of the International Disaster Response Law (IDRL) guidelines. For IDRL advocacy, a Caribbean workshop involving National Societies and government representatives is being planned

² Antigua and Barbuda, Barbados, Dominica, Grenada, Guyana, Saint Vincent and the Grenadines, Saint Lucia, and Saint Kitts and Nevis.

for the fourth quarter of 2011. As well, the Regional Representative is Co-chair of the CDEMA Civil Society Committee, which provides an opportunity for communication and collaboration on DM-related matters with a wide range of civil society organizations in the Caribbean region.

In regards to the planned for scaling up services to migrant communities in the Bahamas and Barbados, it will not be possible to focus on this issue during 2011. Nevertheless, discussions are taking place this year in order to encourage these two National Societies to increase their services to these vulnerable groups during 2012.

Since mid 2010, the Red Cross Caribbean Disaster Management Resource Centre has been established and it now has a coordinator assigned to further promote the various processes and establish spaces for cooperation with relevant stakeholders. In 2011, efforts continue and the Centre is already serving as a platform and repository for the development, storage and sharing of disaster risk reduction related tools.

Health and Care

Programme purpose
Reduce the number of deaths, illnesses and impact from diseases and public health emergencies.
Programme component 1: HIV and AIDS
Component outcome 1: National Societies scale up activities aimed at preventing further HIV infection

Caribbean National Societies continue to extend their HIV programmes to target Most at Risk Populations (MARPS) and engage in activities which endeavour to prevent further HIV infections. In Guyana, focus has been placed on the development of curriculums and tools for working with Miners, Sex Workers and Youth in the hinterland mining communities. The Guyana Red Cross has produced the first draft of a programme manual which addresses prevention education, and risk reduction needs of the mentioned target groups. The manual will be supplemented with cue-for-action posters and message cards. Plans also involve providing Sex Workers with personal hygiene kits.

The Jamaica Red Cross has facilitated MSM Empowerment Workshops. These workshops provided training on life skills, the basics of HIV, other STI's and the assessment of risk. Sex Workers were also reached with VCCT Services and Sensitization Sessions and were targeted at the local Clubs where they work. The National Society has identified that there are benefits to working through club owners and encouraging them buy-in to the ideas in favour of the benefits of their staff being aware of HIV.

For this reporting period the Belize National Society's revision of the TWC methodology and materials targeted at in school youth is almost complete. The materials have been piloted, reviewed and arrangements are now being made for the printing of the revised materials, along with the roll-out of the methodology to identified communities.

The IFRC has had the opportunity to submit a proposal to the United Nations Populations Fund (UNFPA) for the development of a Sexual and Reproductive Health (SRH) and HIV Peer Education Methodology targeted at the Vulnerable Youth population. This small programme will be implemented within six months ending in December of this year.

Finally, discussions have commenced and will continue into the next semester, on the prospect of the Bahamas Red Cross Society preparing for entry into the Global Alliance framework. This is an opportune time for the National Society as they can benefit from the work being carried out by the other Global Alliance member countries as they prepare their new four year proposals.

Component outcome 2: National Societies strengthen HIV treatment, care and support activities

During the first half of the year, the Bahamas, Jamaica and Trinidad and Tobago Red Cross National Societies are reported to have provided psychosocial support to 357 persons living with HIV (PLHIV) and to 49 children orphaned as a result of the virus.

The HIV Prevention Treatment Care and Support (PTCS) initiative continues to be promoted as a capacity building framework for volunteers working within HIV programmes at the community level. This year, the Jamaica and the Trinidad and Tobago National Societies have - in conjunction with their Ministries of Health - successfully rolled out training to Red Cross and other community volunteers. Response to these trainings has been encouraging, with National Societies now being able to use the effectiveness of the HIV PTCS activities as a means of further resource mobilization.

The CRRO has promoted the PTCS methodology with the Bahamas Red Cross, however it will be implemented once funding is available in a step-by-step manner in line with the capacities of the National Society on HIV programming, which is increasing with the support provided by the American Red Cross Caribbean HIV and AIDS Project (CHAP).

Component outcome 3: National Societies scale up activities to reduce HIV stigma and discrimination

Anti-stigma training is an integral part of the Global Alliance on HIV programme design. The preparation of Red Cross volunteers for their interaction with communities for HIV awareness building includes non-discrimination as a basic component of the messaging. This is supported by HIV in the workplace policies, which have been developed by the American Red Cross-supported Caribbean HIV and AIDS Project (CHAP) and each of the Global Alliance on HIV member countries, where training for staff and volunteers is currently being provided. Thus far, 192 staff and volunteers within the Bahamas, Barbados, Jamaica and Trinidad and Tobago, National Societies have been reached through HIV in the workplace programmes.

This process will continue towards the end of the year and the beginning of 2012 in the Bahamas and Barbados Red Cross National Societies in line with capacities.

Component outcome 4: National Societies' capacities to deliver and sustain scaled-up HIV programmes are strengthened.

For this reporting period, the IFRC continued its focus on the provision of technical support to the four National Societies³ engaged in the Global Alliance on HIV and has collaborated with the American Red Cross bilateral Caribbean HIV AIDS Project (CHAP), which is based within the Bahamas Red Cross Society. In March of 2011, the Bahamas, Belize, Guyana, Jamaica, and Trinidad and Tobago National Societies participated in a *Design for Behaviour Change* workshop presented by CHAP. The goal of this workshop was to further support HIV programme managers and planners' need for a practical behavioural framework that assists them in planning their projects strategically for maximum effectiveness.

The last three years have seen a focus on a uniform approach to HIV mitigation through the Federation's Global Alliance on HIV framework. The Global Alliance framework has supported the development of National Society HIV programme plans and has encouraged National Societies to seek funding from independent donors. The Belize Red Cross Society was successful in accessing funds from the Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM) as was the Trinidad and Tobago Red Cross Society from Refineria de Petróleos de Escombreras Oil (REPSOL - a Spanish Oil and Gas Company), and the Jamaica Red Cross similarly from the United States Agency for International Development (USAID).

³ Belize, Jamaica, Guyana, Trinidad and Tobago

The Caribbean Global Alliance on HIV members met in Trinidad to discuss programme progress, to ensure that there is a common appreciation of what is required to move to the next 4-year phase of the programme and to discuss planning, monitoring, evaluation and reporting (PMER), particularly as it relates to monitoring and reporting, which has proven to be challenging for the National Societies over the first 3-year phase of the programme.

It is noted that, in attempting to develop the new 4-year Global Alliance on HIV proposals, National Societies have had the opportunity to clearly identify the challenges that exist within the Global Alliance on HIV Framework. These challenges have been communicated to the HIV team at the Federation headquarters. A series of virtual meetings with Global Alliance members have also been conducted with support from the Americas Zone PMER unit, in an effort to improve planning, monitoring and reporting processes and to establish a standard criterion for data collection in member countries.

An evaluation of the first three years of the Global Alliance on HIV in the Americas has been postponed from the first quarter to the second semester of 2011.

The first Caribbean HIV Conference will take place in the Bahamas in November of this year. Abstracts were submitted for consideration and materials were accepted for presentation at the conference by the following National Societies.

Poster Displays:

- Role of the Jamaica Red Cross in Providing Safe Space for MSM - Jamaica Red Cross
- Development of MSM Training Manual for the Jamaica Red Cross Peer Education Programme - Jamaica Red Cross
- Adapting culture for theatre-based HIV prevention with Peer Education in Bahamas - American Red Cross Caribbean HIV AIDS Programme (CHAP)
- HIV Knowledge attitudes and practices and level of stigma and discrimination against MSM in Jamaica – University of the West Indies and American Red Cross (CHAP)
- Red Cross Global Alliance on HIV – Jamaican Red Cross
- Communicating safe messages through radio – Jamaica Red Cross

Oral Presentations:

- Challenges of Recruiting Peer Educators from High Risk Populations in Urban Communities in the Bahamas - Bahamas Red Cross
- Challenging risk behaviours in the hinterland: Peer Education with miners and sex workers in Guyana - Guyana Red Cross

Skills Building Workshops:

- Cyber Peer Educators – Jamaica Red Cross

Preliminary discussions with the Bahamas Red Cross Society have taken place during the reporting period which will continue in the next semester to start preparing their future entry into the Global Alliance on HIV, during the next year.

Programme component 2: Community Based Health
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Component outcome 1: Communities are healthier and more resilient
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The intention of delivering regional CBHFA facilitator training for those countries not yet trained in the last sessions was limited by funding restrictions that also slowed the plan to strengthen the linkages between health and community disaster risk reduction. Therefore, the target of 21 communities will be out of reach due to this funding constraint. Nevertheless, National Societies continue to be supported for integrating CBHFA training in communities where health hazards are clearly identified and prioritized through the VCA process. If this is successful it will represent a large step towards demonstrating the natural integration process between health and disaster management activities that takes place at the community level. Additionally, the linkage of the Epidemic Control for Volunteers (ECV) methodology with CBHFA, which started during this year, will continue to better prepare National Societies to partner with their Ministries of Health during critical times of health emergencies. As well, the community component of the CBHFA toolkit was adapted to the Caribbean context and will be released for use by National Societies in the third quarter of this year.

The Guyana Red Cross Society conducted a CBHFA training at the same time that Venezuela – which borders a region in Guyana that is under CBHFA implementation – reported over 200 cases of cholera. Guyana was subsequently placed on heightened alert by their Ministry of Health. The National Society's presence in the region allowed the CBHFA facilitators to focus on cholera, hygiene and safe water in the training. In light of the on-going risk, the topic of cholera has been added to the standard CBHFA community toolkit under adaptation for the Caribbean.

Pre-positioning of water and sanitation supplies to increase response capacity and to complement CBHFA and WASH training, was another element of overall capacity building during this reporting period. Water and sanitation equipment, intended to complement community training, arrived in Suriname in January 2011, however due to delays as well as budget constraints, Guyana will receive equipment later in the year. Both National Societies, through previous projects with the French and Netherlands Red Cross, have skilled community WASH facilitators who were able to integrate WASH topics into the CBHFA curriculum. The CRRO will be further building on the skills of the Guyana and Suriname Red Cross Societies to strengthen their abilities to become a resource for the wider region, which will include those other National Societies that have an interest in water and sanitation initiatives.

A Health and Water and Sanitation Planning and Coordination meeting held in Panama in February 2011, as well as a CBHFA Monitoring and Evaluation workshop held in May, made important contributions to strengthening coordination in the region and the understanding of how CBHFA can be best integrated with water and sanitation and DRR for a cross-programmatic and more effective approach aligned with *Strategy 2020*.

During the reporting period no new initiatives to link the impact on health of climate change have yet commenced in the Caribbean, although there is increased awareness on how climate change and the rainy season have in turn an effect in the increase of diseases (dengue and cholera for example), which further highlights the need to pursue this work. This will be one of the objectives for the remainder of the year.

Component outcome 2: Scaled up First Aid services are strengthening community resilience and supporting National Society development

The regional proposal to procure funding to strengthen the first aid programme took into consideration the initial *IFRC International First Aid and Resuscitation Guidelines* released in February 2011. These new guidelines also influenced the final revision of the Caribbean First Aid Reference Manual that was developed with support of the British Red Cross and is now due for release in the third quarter of the year.

The Belize Red Cross Society developed its First Aid Policy as a continuation of a first aid resource mobilization process that commenced with the support of the Norwegian Agency for Development Cooperation (NORAD) in 2009. Other National Societies⁴ that commenced first aid business planning with American Red Cross support in 2010 continue to strengthen their first aid programmes. Building on these initiatives, the regional first aid proposal considers three key aspects: 1) increased professionalism in first aid programming for raising capacity to generate funds from commercial first aid; 2) increased outreach services to vulnerable communities, and; 3) advocacy to governments to put into place legislation that supports mandatory requirements for first aid in industries including tourism, as well as first aid as a requirement for community risk reduction.

Component outcome 3: National Societies capacity to contribute to increasing countries' blood supply is strengthened

Funding from the Swiss Humanitarian Foundation was approved in April 2011 to support the Suriname Red Cross' participation in a 5-year global project to strengthen Red Cross Red Crescent Club 25 worldwide. This is being accomplished by increasing the number of youth donors focused on healthy lifestyles and by ensuring the longer-term sustainability of the initiative. The Antigua and Barbuda Red Cross Society launched their own Club 25 Campaign on World Blood Donor Day on 14 June 2011

⁴ Antigua and Barbuda, the Bahamas, Saint Kitts and Nevis, Saint Lucia, Barbados, and Trinidad and Tobago.

while other National Societies in the Caribbean joined their blood bank services in support of raising awareness to the need for VNRBD.

The learning from the Suriname Red Cross will help to strengthen their programming and if possible share their learning and skills with other National Societies (for example, Guyana and Jamaica) to promote coordination with their respective ministries of health.

Programme component 3: Public Health in Emergencies
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Component outcome 1: Capacity and preparedness of National Societies to mitigate against the impact of public health emergencies increased

The integration of health in emergencies in the National Intervention Team (NIT) training has been deferred in Belize as the process for the standardization of the NIT course has commenced. This activity will therefore be pursued once the public health in emergencies module for the NIT training is completed.

At a continental level, the psychosocial support in emergencies module, initiated in 2010, was finalized during the first semester of 2011, and will be piloted during the second semester. Further developments at the continental level on the psychosocial support module will be utilized to build on the already existing NIT and CDRT trainings in the Caribbean to integrate psychosocial support. As this is an area that Caribbean National Red Cross Societies consider critical in their response to disasters, the CRRO intends to seek that additional financial resources to support these processes.

The on-going cholera focus during the first semester of 2011 also involved the Red Cross in The Turks and Caicos Islands (TCI) and in the Bahamas, due to the size of their migrant populations from the neighbouring countries of Haiti and the Dominican Republic where cholera continues to cause concern. The Overseas Branch of the British Red Cross in TCI worked closely with their Ministry of Health in a DFID-sponsored project for cholera preparedness within the territory, and was subsequently invited to participate in monthly virtual meetings hosted by PAHO, in which the CRRO sat as a principal member. A dengue poster was developed and printed for the Caribbean and continues to be shared with National Societies in readiness for the next rainy season. It is anticipated that, following the pattern of 2010, the incidence of cholera will again increase.

The *10 Steps* training was conducted in Guyana for staff and volunteers from the Guyana and the Jamaica Red Cross Societies, facilitated and supported by the Canadian Red Cross which is active in violence prevention programming in the Americas. The *10 Steps* programme is a resource for developing, implementing and monitoring risk management strategies within organizations and communities to help keep individuals, especially children and youth, safe from violence, abuse and harassment.

The regional Health Network continued its outreach with the wider Caribbean Red Cross community, and was active in several initiatives, including a review of health mapping processes that are in development by the Americas zone office, as well as completing the Inter-American Conference (IAC) questionnaire for health. In April, the Health Network was represented at a workshop on *Emerging and Re-emerging Diseases in the Americas*. A representative of the Health Network also sat as a member of the Global Gender Review committee for the development of the IFRC Gender Strategy. The Health Network is planning the first joint meeting of the Health and Disaster Management Networks scheduled for July 2011.

A CBHFA training that had commenced in Guyana and Suriname in 2010 as part of the regional Comprehensive Disaster Management (CDM) programme was completed in the first half of 2011, establishing a resource of 26 national CBHFA facilitator trainers, available nationally but also to the region, in addition 91 community members were trained in the CBHFA methodology in 8 communities. As a direct outcome of this work, the Suriname Red Cross signed a Memorandum of Understanding (MOU) to work in partnership with UNICEF and a local NGO to roll out joint training based on CBHFA in new communities.

The CRRO participated in FACT training held in Chile in March 2011. This was the 19th FACT course and the first time the training involved deployment in the field as part of the course.

Organizational Development

Programme purpose

Increase local community, civil society and Red Cross Red Crescent capacity to address the most urgent situations of vulnerability.

Programme component 1: Support National Society Organizational Development Processes

Component outcome 1: National Society leadership is supported to adhere to the well functioning performance of their National Society in terms of governance, management and leadership practices

All Caribbean National Societies now have Governing Boards in place. The revision of Statutes and Strategic Plans, underway in most of the National Societies, is at varying stages of development due to differences in capacity. The alignment to *Strategy 2020* is well understood among the National Societies, and is an integral part of their strategic planning considerations.

Component outcome 2: National Societies are supported in adhering to standards of performance and accountability

The achievement of this component outcome is progressing through the inclusion of two Caribbean National Societies – Saint Lucia and Trinidad and Tobago – in the Federation Wide Reporting System (FWRS) pilot and test run initiatives. A proposal has been presented for supporting the FWRS process in the Belize Red Cross Society.

In relation to the IFRC's global databank, a pilot exercise with selected National Societies to test the online platform will take place during the second half of 2011. As this initiative is being rolled out globally in a progressive manner in order to make improvements to the platform, a complete exercise with all Caribbean National Societies is not expected to be carried out in 2011. Nonetheless, the National Societies of Barbados, Belize, Guyana, Suriname and Trinidad and Tobago have been invited to participate in the pilot round of the databank initiative during the second half of the year.

While all National Societies are making progress regarding independent external audits, four National Societies to date have produced such audits: Belize Red Cross Society, Guyana Red Cross Society, Jamaica Red Cross Society, and Trinidad and Tobago Red Cross Society.

Activity is underway to promote the use of FedNet by National Societies especially to update the Americas National Society profiles, with focal persons having been identified for all 13 National Societies. Through these focal persons, National Societies are being oriented and data collection has commenced.

All Caribbean National Societies have been oriented to the E-Learning Platform and are moving towards making use of this development resource.

Component outcome 3: National Societies are better able to sustain their organizations through improved resource mobilization

A focus on sustainability through improved resource mobilization is being realized through improvements in the delivery of Commercial First Aid programmes in six National Societies. Resource mobilization best practices continue to be shared, and three National Societies – Barbados, Belize, and Jamaica – will be participating in a planned Resource Mobilization workshop in Panama to be held in July 2011.

Programme component 2: Volunteering Development

Component outcome 1: National Societies have active and vibrant networks of well managed

and trained volunteers

Building on the previous year's Volunteer Development training, National Societies are engaging new volunteers from a more diverse pool of people. This initiative involves the Volunteer Focal Points appointed in each National Society and the completion of new Volunteer Education and Development materials.

The Caribbean region will be represented by a member of the St. Lucia Red Cross at the IFRC/UNV (UN Volunteers) jointly hosted Global Volunteer Conference: Volunteering for a Sustainable Future in Budapest, Hungary, 15-17 September 2011.

At the end of the reporting period, examples of volunteering best practices are in the process of being documented for production and distribution. Likewise, the content for the Volunteering in Emergencies toolkit has been finalized and funding is being sought for its printing and distribution to the National Societies in the region.

At least 20 participants from the Caribbean have completed the European E-learning Volunteer Management Programme training through the Open University of Catalonia. However, technical issues with the production of the WORC CD have delayed its production and replication, and this is still in process.

Programme component 3: Youth Development

Component outcome 1: National Societies with strongly integrated Youth Programmes

The existing Youth Network continued in its efforts for capacity building through a project initiated in three National Societies – Barbados, Grenada and Saint Lucia – that focuses on youth leadership for violence prevention, funded by the Finnish Red Cross. The objective of having National Society youth functioning at governance level has been met in the Belize Red Cross Society and the Jamaica Red Cross. Youth Development is currently without a dedicated programme officer at the CRRO, and this has led to some capacity constraints in promotion and further development of this component outcome. These limitations include the implementation of this year's youth internship activities due to lack of funding, and the staging of proposed leadership training, as well as the connection among Red Cross Youth leadership in the Caribbean through social media platforms.

Principles and Values

Programme purpose

Promote respect for diversity and human dignity, and reduce intolerance, discrimination and social exclusion.

Programme component 1: Promotion of Humanitarian Principles and Values (Humanitarian Diplomacy)

Component outcome 1: Increased promotion of the Red Cross work through implementation of communication and advocacy strategies.

Although the advocacy of the National Societies' auxiliary role is undertaken whenever an opportunity arises during programme visits, and the promotion of the Movement's Principles and Values is integral in the delivery of programme activities, however due to the completion of the DIPECHO 7 programme that funded a communications officer at CRRO, there was a decrease in dedicated communications and advocacy activities during the reporting period.

Component outcome 1: Increased strategic collaboration with external partners

During the reporting period, CRRO representatives participated in a disaster response systems coordination meeting facilitated by the United Nations Development Programme (UNDP) as well as several health coordination meetings conducted by PAHO, and in the ECDG-DM coordination session. In addition, the Regional Representative took an active role in setting the agenda for the CDEMA civil

society committee's deliberations. These meetings with Red Cross partners continue to provide an opportunity to promote the objectives of the International Red Cross and Red Crescent Movement in general and the programmes of the respective National Societies in the Caribbean region.

Role of the Secretariat

The Secretariat continues to provide technical support for programme design and delivery in the disaster management and health and care programmes, as well as for strategic planning and organizational development activities according to the capacities and readiness of the respective National Societies in the region. During this reporting period, a concentration of effort was invested in the completion of the DIPECHO 7 project and preparation of the DIPECHO 8 proposal, working in ongoing collaboration with the Finnish, French and the Netherlands Red Cross partners. The Caribbean office was also involved in the cooperation with the Canadian Red Cross that led to the launch of the CCRDR project in three National Societies and for the Regional Resource Centre.

The CRRO staff support has also maintained an active implementation of the Global Alliance on HIV activities as well as the Health and the Disaster Management Networks.

Representation at external partner agency meetings continue to profile the presence and role of the IFRC and the National Societies in the Caribbean, and the CRRO is continually looking for funding opportunities to resource the unmet humanitarian needs of the communities served by the National Societies in this region.

Promoting gender equity and diversity

Progress in the promotion of gender equity and diversity was achieved in part through the Health Network Chairperson's role as the focal point for Gender for the National Societies in the region. A Gender Audit Tool developed by the Australian Red Cross was piloted for subsequent dissemination. The Health Network was also requested to assist in the development and review of a module on Gender in the HIV Prevention, Treatment, Care and Support methodology.

Quality, accountability and learning

The National Societies in the region are increasing their use of the Federation's E-Learning platform, FedNet, and one National Society participated in a previous (2010) pilot exercise in the early stages of the FWRS development. Focal persons have been identified in all National Societies for training and provision of content for FedNet and extensive data collection is underway for the Secretariat's Digital Divide initiative.

Four National Societies have conducted external audits during the reporting period, and two – Belize and Trinidad and Tobago - have launched volunteer database projects to support volunteer recruitment, training, deployment, recognition and retention. As well, linkages are being explored to the newly-launched PADRU RIT database.

Achievements

Significant to note during the reporting period is the steady progress in organizational development. All Caribbean National Societies now have Governing Boards in place and work is well advanced regarding the updating of Statutes and Strategic Plans. The orientation of National Societies to use of the E-Learning Platform introduces National Societies in their respective countries to the younger cyber-literate generation of membership and volunteers, so that the smart use of IT technology can assist in the realization of the Red Cross humanitarian mandate.

Constraints or Challenges

The CRRO was challenged by a reduction in staff for programme implementation support due to the completion of key donor funding cycles during the reporting period. As well, two members of staff were deployed to operations related to the Haiti earthquake response. Critically, additional funding was not secured for the programme officer with responsibility for Organizational and Volunteer Development and Youth programmes, and these additional mandates now revert to the CRRO regional representative.

Following the submission of a proposal for regional first aid programme development, information was received about the introduction of new guidelines on International First Aid and Resuscitation. Both the submitted proposal and National Societies' current implementation of their first aid programmes must now be modified in accordance with these guidelines in order to ensure continuing professional Red Cross first aid services based on the approved standards.

The latest guidelines regarding the delivery of First Aid training will need to be absorbed by the National Societies in the region, particularly those offering commercial first aid.

The reality of these small Caribbean countries with only limited health care facilities calls for close linkages between disaster management and health programming. However, this is constrained by the limited resources of the Red Cross National Societies themselves. It is hoped that the increased representation by National Societies in governmental and inter-agency disaster management and health committees will allow them to leverage prospective opportunities arising in these programme areas.

Given the uncertainties and the impact of the current global economic situation, the Caribbean National Societies have performed relatively well by making effective use of available resources, and specifically by mobilizing resources to support their HIV programmes.

The HIV and AIDS *Together We Can* intervention has long been the flagship of the region's preventative approach to reducing this pandemic, however this programme may need to be refreshed in order to capture the attention of a crowded and highly competitive donor environment. For this reason, the proposal to develop a Peer Education methodology with the support of United Nations Population Fund (UNFPA) will serve to establish a revised, standardized, modular curriculum which can be adjusted to suit the requirements of local country environments within the region.

Training of RIT members continues to strengthen regional responses, noting that a focus on country-focused National Intervention Team (NIT) development could reduce the dependence upon an external response by the disaster-affected National Societies.

Working in partnership

In 2011 the IFRC's resources in the region continued to be tested with the response to crises in Haiti, while beginning the annual preparations for the 2011 hurricane season. Red Cross partners and donors sponsored interventions and training aimed at continuing to strengthen both human and physical capacities. These interventions were predominantly applied to the health and care and disaster management areas. Through sponsorship by the French Red Cross, one representative of the Bahamas Red Cross Society was able to attend a RIT training held in Guadeloupe in May, increasing the region's response readiness. Cholera outbreaks in Haiti and the Dominican Republic prompted PAHO coordination meetings on WASH on a monthly basis. In March, the ECDG conducted a disaster response exercise - CARIB/WAVE/EX to test the tsunami response of the islands of the Caribbean, particularly the Virgin Islands, and included significant response from the French Red Cross on behalf of Saint Martin.

To varying extent, all National Societies continue to engage in their role as auxiliaries to their governments. These working relationships are reflected in the representation of National Societies with

their National Disaster Organizations (NDOs), Ministries of Health, and Ministries of Social Development.

Contributing to longer-term impact

As every new or revised programme is implemented, the Federation's monitoring and evaluation mechanisms – and those of the National Societies who are delivering activities at the community level – need to ensure continuously improving management, learning and accountability. As well, project proposals moving forward continue to include considerations regarding gender, equity, diversity and community empowerment. This consideration is particularly relevant for disaster management interventions in a region so heavily and regularly impacted and disrupted by hurricanes and tropical storms.

Regional, national and branch-level workshops and meetings conducted in every programme area throughout the reporting period have been used as opportunities to share lessons learned, best practices and quality standards in the activities that are benefitting communities; and this intention will continue. As well, capacities at the regional level will continue to be improved through effective use of the DM and Health Networks to support and encourage National Societies to replicate best practices in project implementation.

The growing use of the Federation's E-Learning platform will, ideally, lead to a standardized understanding and approach to the Movement's Principles and Values and ensure consistent quality programme delivery.

A focus on volunteer development and on resource mobilization is intended to strengthen National Societies' programme delivery capacities and longer-term sustainability that depends less on major donor support and more on the involvement, ownership and support by local communities and stakeholders.

Looking ahead

With full recognition of the substantial role of the DIPECHO, OFDA and CIDA CCRDR multi-country projects, the *Strategy 2020* vision emphasizes the need to articulate individualized Country Support Plans that identify how best the Secretariat can provide targeted support to each National Society within its territorial mandate. The approach going forward will leverage the benefits to the Caribbean National Societies of the major donors' regional perspectives as key contributions to fulfilling the strategic plans of each National Society in the region.

The intention is to support each National Society to meet its full potential and to effectively address the needs of its respective constituencies, while recognizing the inter-dependent characteristics of the Caribbean 'neighbourhood.' The Country Support Plan process is in its early phase of development, with the objective of preparing a Country Support Plan for each of the 13 National Societies in the region, within the context of the Americas zone 2012-2015 long-term planning framework and addressing the *S2020* business lines as well as the external trends and internal pressures identified for the Americas zone.

At the programmatic level, the continuing vulnerability to vector-borne diseases such as dengue demonstrate the region's susceptibility to emergency health threats and reinforce the need for stronger links between programmes for early warning, awareness building and response.

With long-term sustainability of National Societies operations always remaining a priority, improving volunteer development and resource mobilization techniques and practice will help to increase the capacities of the National Societies in the region to fulfil their mandates.

How we work

The IFRC'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 IFRC's work is guided by Strategy 2020 which puts forward three strategic aims:

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

Contact information

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International Federation of Red Cross and Red Crescent Societies

MAA49001 - Caribbean

Mid Year Report

Selected Parameters	
Reporting Timeframe	2011/1-2011/6
Budget Timeframe	2011/1-2011/12
Appeal	MAA49001
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	2,423,208	330,310	88,883	0	0	2,842,401
B. Opening Balance	-283,004	-1,304	-18,161	0	8,297	-294,171
Income						
Cash contributions						
American Red Cross	6,721					6,721
American Red Cross (from United States Government - USAID)	547,752					547,752
European Commission - DG ECHO	-29,357					-29,357
Finnish Red Cross			4,319			4,319
Finnish Red Cross (from Finnish Government)			24,474			24,474
Japanese Red Cross Society	223,439					223,439
Norwegian Red Cross		27,427	2,590			30,017
Norwegian Red Cross (from Norwegian Government)		246,842	23,314			270,156
Other	-395					-395
The Canadian Red Cross Society (from Canadian Government)	473,569					473,569
C1. Cash contributions	1,221,729	274,269	54,698			1,550,695
Inkind Personnel						
American Red Cross	116,200					116,200
C3. Inkind Personnel	116,200					116,200
Other Income						
Services Fees					861	861
C4. Other Income					861	861
C. Total Income = SUM(C1..C4)	1,337,929	274,269	54,698	0	861	1,667,756
D. Total Funding = B + C	1,054,925	272,965	36,537	0	9,158	1,373,585
Appeal Coverage	44%	83%	41%	#DIV/0	#DIV/0	48%

II. Balance of Funds

	Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination	TOTAL
B. Opening Balance	-283,004	-1,304	-18,161	0	8,297	-294,171
C. Income	1,337,929	274,269	54,698	0	861	1,667,756
E. Expenditure	-622,281	-130,887	-11,624		363	-764,429
F. Closing Balance = (B + C + E)	432,644	142,078	24,913	0	9,521	609,156

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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)	2,423,208	330,310	88,883	0	0	2,842,401		
Relief items, Construction, Supplies								
Shelter - Relief	206,930						206,930	
Construction Materials	10,000	5,133				5,133	4,867	
Clothing & Textiles		243				243	-243	
Food	3,220						3,220	
Water, Sanitation & Hygiene		38,292				38,292	-38,292	
Medical & First Aid		18,188				18,188	-18,188	
Other Supplies & Services	39,546	742				742	38,804	
Total Relief items, Construction, Supplies	259,696	62,598				62,598	197,098	
Land, vehicles & equipment								
Land & Buildings	1,076						1,076	
Computers & Telecom	3,117	15,477				15,477	-12,360	
Office & Household Equipment	3,493	6,401				6,401	-2,908	
Others Machinery & Equipment				5,001		5,001	-5,001	
Total Land, vehicles & equipment	7,686	21,878		5,001		26,880	-19,194	
Logistics, Transport & Storage								
Storage		2,047	256			2,303	-2,303	
Distribution & Monitoring		1,842				1,842	-1,842	
Transport & Vehicles Costs		6,067		1,465		7,532	-7,532	
Logistics Services		2,380				2,380	-2,380	
Total Logistics, Transport & Storage		12,336	256	1,465		14,056	-14,056	
Personnel								
International Staff	184,054	216,379	25,442			241,822	-57,768	
National Staff	86,411	25,587	7,599		6,236	39,423	46,988	
National Society Staff	236,920	212,516	2,417	9,183	975	225,091	11,829	
Volunteers		4,765		951	53	5,769	-5,769	
Total Personnel	507,385	459,248	35,458	10,134	7,265	512,104	-4,720	
Consultants & Professional Fees								
Consultants	116,539	10,639				10,639	105,900	
Professional Fees	2,439						2,439	
Total Consultants & Professional Fees	118,978	10,639				10,639	108,339	
Workshops & Training								
Workshops & Training	387,834	87,136	1,613	3,972		92,722	295,112	
Total Workshops & Training	387,834	87,136	1,613	3,972		92,722	295,112	
General Expenditure								
Travel	146,468	27,780	997	1,403		-0	116,288	
Information & Public Relations	103,672	20,776		4,759			78,136	
Office Costs	97,629	24,747	-102	3,797	4,151		65,036	
Communications	12,311	4,394	419	119	966		6,413	
Financial Charges	14,906	11,967	7,540	686	66		-5,352	
Other General Expenses		7,607		11	26		-7,643	
Shared Office and Services Costs	90,418	24,434	39,200	5,244	-12,932		34,472	
Total General Expenditure	465,403	121,705	48,053	16,019	-7,724		287,351	
Contributions & Transfers								
Cash Transfers National Societies	920,853	142,448					778,405	
Total Contributions & Transfers	920,853	142,448					778,405	
Operational Provisions								
Operational Provisions		-333,102	35,946	-25,956		119	322,993	
Total Operational Provisions		-333,102	35,946	-25,956		119	322,993	
Indirect Costs								

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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)		2,423,208	330,310	88,883	0	0	2,842,401		
Programme & Services Support Recov	173,480	35,515	7,886	691			-22	44,070	129,410
Total Indirect Costs	173,480	35,515	7,886	691			-22	44,070	129,410
Pledge Specific Costs									
Pledge Earmarking Fee	1,086	1,680	1,486	167				3,333	-2,247
Pledge Reporting Fees		200	188	129				517	-517
Total Pledge Specific Costs	1,086	1,880	1,674	297				3,850	-2,764
TOTAL EXPENDITURE (D)	2,842,401	622,281	130,887	11,624			-363	764,429	2,077,973
VARIANCE (C - D)		1,800,927	199,423	77,259	0	363		2,077,973	