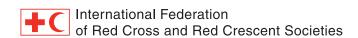


Haiti earthquake

Four-year progress report

January 2014



The International Federation of Red Cross and Red Crescent Societies (IFRC) is the world's largest volunteer-based humanitarian network, reaching 150 million people each year through our 189 member National Societies. Together, we act before, during and after disasters and health emergencies to meet the needs and improve the lives of vulnerable people. We do so with impartiality as to nationality, race, gender, religious beliefs, class and political opinions.

Guided by Strategy 2020 – our collective plan of action to tackle the major humanitarian and development challenges of this decade – we are committed to 'saving lives and changing minds'.

Our strength lies in our volunteer network, our community-based expertise and our independence and neutrality. We work to improve humanitarian standards, as partners in development and in response to disasters. We persuade decision-makers to act at all times in the interests of vulnerable people. The result: we enable healthy and safe communities, reduce vulnerabilities, strengthen resilience and foster a culture of peace around the world.

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Cover: Edlin Lamotte lives in the community of Sous Savanne in Léogane. She received training and livelihood support grants from the Red Cross Red Crescent. Edlin now runs a shop where she sells groceries and small household items.

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Haiti four-year progress report 1265300 12/2013 E

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12 January 2010

strikes Haiti leaving 222,570 people dead, 300,572 injured and 2.3 million people displaced.

January 2010

The Red Cross Red Crescent immediately responds by deploying 21 Emergency Response Units (ERUs) including field hospitals, water treatment plants, logistic bases, portable operational centres, emergency telecommunication infrastructure and sanitation supplies.



Welcome note

The magnitude of the 2010 earthquake and the resulting relief and recovery operations have changed Haiti irrevocably.

Over the last four years, amidst overwhelming suffering and destruction, the Haitian people have worked tirelessly to rebuild their homes, communities and lives.

The Red Cross Red Crescent has been a proud partner in this process. Providing basic support such as food, water, shelter and health care has been essential but it is the long-term projects, aimed at helping communities meet their own needs, which are finally coming to fruition.

This report spans the Red Cross Red Crescent operations from January 2010 to September 2013, with a focus on the fourth year of the operation during which thousands of people have moved to more-secure, sustainable accommodation, communities country-wide have started to adopt safer health practices and families have taken important steps towards recovering their income sources and, ultimately, their independence.

The Haitian Red Cross has also been transformed and is now bigger and stronger, and is reaching more vulnerable people than it has done ever before. Ensuring the National Society is able to sustain the increase in operational capacity that has been built through earthquake operations is critical. This will include maintaining a high level of support to the Government, through the National Society's auxiliary role, to ensure the public authorities are also well equipped to meet the needs of vulnerable people in years to come.

Sadly, despite these achievements, there are still thousands of people who remain in great need and there is undoubtedly much more to be done. But the combined force of the Haitian people, along with the Red Cross Red Crescent, means that together we are well placed to do it.

Dr. Guiteau Jean-Pierre President

Haiti Red Cross Society

Thromas ?

Mr. Xavier Castellanos Director of Zone for the Americas

International Federation of Red Cross and Red Crescent Societies

February 2010

In the Montréal Declaration, the IFRC secretariat, 23 National Societies and ICRC commit to undertake a coordinated, coherent and comprehensive approach to meeting Haiti's immediate and longer-term needs.

February 2010

The Red Cross Red Crescent assumes the coordination of the shelter/ non-food items (NFI) cluster.



April 2010

The Red Cross Red Crescent water trucking operation reaches its peak through the provision of daily access to drinking water for 320,000 people.

A note on reading this report

This report presents a collective portrait of the Red Cross and Red Crescent plans, achievements and financial expenditure in response to the earthquake on 12 January 2010 in Haiti. It reflects a consolidated picture of the best available data obtained in Haiti and through the participation of Red Cross and Red Crescent National Societies and organizations around the world. This is the fourth Federation-wide public report in the proposed series of reports and presents the cumulative achievements of the Red Cross and Red Crescent since the earthquake.

The report consists of programmatic data, collected in Haiti, and financial data, collected from the headquarters of National Societies. Updated programmatic data was provided by 13 National Societies and the IFRC's secretariat for this report. The programme information and indicators illustrate the principal activities carried out during the relief and recovery phases of operations through to 30 September 2013, but do not reflect the full portfolio of each Federation member. The indicators and methodologies used to gather information on programmes will continue to be refined to reflect future phases of the operation.

The financial data reported as of 30 September 2013 shows an analysis of the funds received and expended for the operation in response to the earthquake. The financial information presented in each Federation-wide progress report is reflective of the number of National Red Cross and Red Crescent Societies reporting into it. For this fourth public report, 19 National Societies and the IFRC Secretariat provided updated financial information. Fourteen National Societies had already accounted for all their funds raised for the operation, therefore no updated data was requested from them. A further two Red Cross or Red Crescent Societies have not submitted updated data for this reporting period, and in all cases their most recent past submission of data was used. The report tries to also capture data regarding activities funded by the Red Cross and Red Crescent, but implemented through external partners.

As the methodologies continue to be refined, the definitions of some indicators might alter, which will lead to changes in the figures reported. For explanations of the methodology and definitions used in this report, please refer to Annexes 1 and 2.

International Federation of Red Cross and Red Crescent Societies (IFRC): refers to the Federation secretariat and all member National Societies, collectively. The term Red Cross Red Crescent is used interchangeably with IFRC. Note that this is different

June 2010

The Interim
Haiti Recovery
Commission (IHRC)
is established.



September 2010

Tropical Storm Thomas.

October 2010

A deadly cholera epidemic breaks out leading to 596,389 cases and 7,533 deaths (as of September 2012). The IFRC launches a cholera appeal. from 'the International Red Cross and Red Crescent Movement' which would include the International Committee of the Red Cross (ICRC) in addition to the Federation secretariat and member National Societies.

Federation secretariat: refers to the coordinating entity which represents the IFRC members. In the earthquake response operation in Haiti – as in many other operations – the secretariat also performs an operational role in the implementation of programmes. For the purpose of Federation-wide reporting, the secretariat must report income, expenditure and the programme results of its operations in the field.

External partner: refers to a non-Federation member, including ICRC, United Nations agencies, governments, foundations, universities, or other international or local NGOs.



November 2010

The Red Cross Red Crescent hands over the coordination of the shelter/NFI cluster to UN Habitat.



March 2011

The Community Education and Awareness Training Centre of the Haiti Red Cross Society is officially set up.

September 2011

the Haitian government initiates the 16/6 project to allow the closure of six internally displaced people's camps and facilitate the return of nearly 5,000 families to 16 neighbourhoods of origin; the Red Cross Red Crescent offers its support.

Operational overview

The collaborative efforts of the international community and the Haitian Government have seen the number of displacement camps continue to decrease in 2013, with thousands more people moving to safer housing. According to United Nations figures, an estimated 89 per cent1 of the 1.5 million people originally displaced by the earthquake have now left the camps and over 40,000 of these families were supported by the Red Cross Red Crescent.

The success of rental support schemes has been an important factor in helping families to leave camps. The Red Cross Red Crescent relocation and returns project has enabled thousands of families to move to safer living accommodation. The programme also played a major role in the success of the government-led 16/6 return and relocation programme, launched at the end of 2011, which helped to relocate families from six priority camps while facilitating the rehabilitation of 16 nearby districts.

However, the challenges relating to finding safe housing for the approximately 170,000 people still in camps, the majority living in increasingly desperate conditions, cannot be underestimated. Over the last 12 months, the Red Cross Red Crescent has been working with the government unit for housing and public building construction (UCLBP) to investigate a variety of additional options for the camp population.

While long-term solutions are being sought, continued support for the camp population has been necessary and the Red Cross Red Crescent camp mitigation programme has run throughout 2013, providing basic humanitarian support and helping to ensure the safety of the people through disaster-preparedness and violence-prevention activities.

The lasting legacy of the Haiti earthquake has been the weakening of communities¹ resistance to the threats they face but helping to build stronger, more-resilient communities is the common thread in all Red Cross Red Crescent programmes. A major aspect of this in 2013 has continued to be a focus on public health, specifically with regard to cholera, and the Red Cross Red Crescent has now scaled up its cholera response plan, in line with the Haitian Government's 10-year plan for the elimination of cholera. Red Cross volunteers continue to work in communities, endeavouring to raise awareness and knowledge among the public, while trained Haitian Red Cross health workers have been providing treatment. Maintaining vigilance in identifying any potential rise in cases is critical, particularly during the rainy and hurricane seasons; both of these resulted in an increase of cases in 2013.

OCHA Haiti Humanitarian Bulletin 34



October 2011

The IHRC mandate ends; the responsibilities of guiding the reconstruction are to be turned over to the Haiti Development Agency (RDH).

December 2011

The Haiti Red Cross Society releases its 2012–2015 operational plan.

February 2012

The end of the IFRC cholera appeal and cholera operation.



Construction of rural gravityfed water system in Verrettes, Artibonite.

The precarious living conditions for many people have exacerbated the impact of new and emerging crises such as Hurricane Sandy and deteriorating food security. The Red Cross Red Crescent has supported thousands of people affected by Hurricane Sandy, with a specific focus on livelihoods and on agriculture as a way of helping families stabilize their incomes and improve their access to food.

The fundamental humanitarian concerns still facing Haiti, four years after the earthquake, will be addressed only through the collaboration of all of those working towards recovery. The Red Cross Red Crescent is partnering with communities and coordinates closely with the Haitian Government to help improve humanitarian operations now and in the future. Over the last 12 months, this has included contributing to government discussions on international disaster-response law and drawing on a wealth of Red Cross Red Crescent emergency-response experience, thus helping to improve national policies. Specifically, Red Cross Red Crescent experts have been providing input into policies relating to the adequate provision of medical supplies post-disaster, and the facilitation of communications during an emergency.

Influencing the humanitarian agenda in Haiti is a vital aspect of Red Cross Red Crescent programmes. By working with the Government and with other organisations, the Red Cross Red Crescent is able to share the collective community knowledge that has been built up by the thousands of Haitian Red Cross volunteers who work tirelessly in their local neighbourhoods every day.

The evolution of earthquake-recovery programmes will soon come to an end in Haiti but the long-term impact of Red Cross Red Crescent support will continue to be felt for decades.

March 2012

Inter-American conference in Montruis, Haiti, gathering all the representatives of the Red Cross societies of the continent and some quest National Societies.





May 2012

80th anniversary of the creation of the Haiti Red Cross Society.



July 2012

100% of transitional shelter commitments reached.

Building healthier communities



The Red Cross Red Crescent has increased availability of safe water through the creation and rehabilitation of water points in various communities across Hairi

The impact of the 2010 earthquake, coupled with a devastating cholera epidemic, rocked the health foundations of the Haitian population and the effects continue to be felt to the current day.

The Haitian Red Cross, as an auxiliary to the Government, has been delivering programmes aimed at helping Haitians live longer, healthier lives for decades and, with the support of the Red Cross Red Crescent, these activities have been developed and extended in recent years as part of the earthquake recovery programme. This has included the recruitment of hundreds of additional community volunteers; this has seen the Haitian Red Cross expand its reach and it is now delivering more community-based health services than it has done ever before.

The community-based health and first-aid approach focuses on helping communities identify and respond to the specific health threats they face. Trained Red Cross volunteers work with local residents to help them understand how to prevent common diseases such as malaria, respiratory infections, tuberculosis, HIV and diarrhoeic diseases including cholera. To date, approximately 2.1 million people have been reached with community health and first-aid services, nationwide.

To encourage positive behavioural change, thousands of Haitian families have participated in hygiene-promotion activities, with Red Cross volunteers reinforcing the importance of hand-washing and sharing information on safe drinking water and good health practices. Children are also targeted through a variety of activities in schools, including song and dance, and volunteers go door-to-door to reach the elderly and infirm. Volunteers are trained to focus on maternal, newborn and child health and hold community sessions specifically for mothers and children.

But, to be effective, health education must go hand in hand with the provision of facilities and, in 2013, Red Cross Red Crescent provided more than 38,000 families with access to improved sanitation facilities and an estimated 87,000 households now have increased availability of drinking water.

August 2012

Hurricane Isaac hits. Red Cross Red Crescent emergency preparedness triggered.





October 2012

Camp population decreases to 357.785

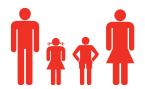
November 2012

Hurricane Sandy. The IFRC launches appeal to meet humanitarian needs.



People reached by CBHFA

2,129,526



#	Maternal, newborn and child health	137,145
X	HIV prevention	590,735
4	Anti-stigma messages	336,021
	Prevention of malaria, dengue and other vector-borne diseases	493,717
+	Training in community-based first-aid	11,143
9	Psychosocial support activities	361,999
\$	Other services (mainly general health promotion)	1,084,794

Estimated households with increased availability of drinking water

87,943



Households provided with access to an improved sanitation facility

38,440



6,731

51 **19,632**

392

Number of water points newly constructed or rehabilitated
Number of water systems newly constructed or rehabilitated
Number of improved sanitation facilities newly constructed or rehabilitated
Water and sanitation committees set up and trained

The chronic lack of sanitation services and access to water remains a major humanitarian concern and Red Cross Red Crescent initiatives to strengthen the capacity of the government agency for water and sanitation (DINEPA) have continued throughout 2013 with the provision of technical, material and financial support. To increase national emergency response capacity, and at the request of DINEPA, a Red Cross Red Crescent team completed training of water-truck drivers in the North, South and Centre departments of the country. This training will ensure emergency trucking of water can be activated in the various regions, should disaster strike. Also, materials worth an estimated 500,000 dollars have been donated by the Red Cross Red Crescent to further the repair and extension of the water network in the capital, Port-au-Prince.

Ensuring communities' access to medical facilities has been another priority and the Red Cross Red Crescent has supported the construction and repair of 24 clinics and hospitals, thus opening up vital health services to an estimated 1.6 million people in nearby areas. This construction work is complemented in many areas with training

May 2013

"Haiti 3 years +" meeting in Haiti, gathering RC National Societies, the Secretariat and ICRC to revisit humanitarian needs and confirm identified priorities.

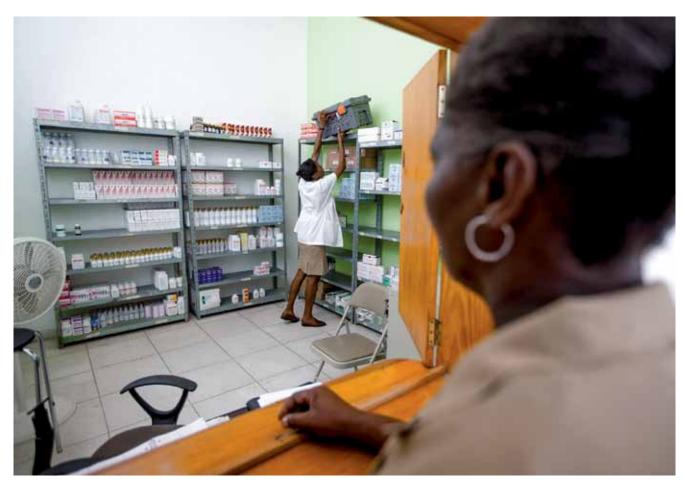
May 2013

IFRC participated in the first meeting of CAED (mechanism for the coordination of external aid).



June 2013

More than 40,000 households have benefited from Red Cross Red Crescent shelter solutions



Pharmacy in the community of Descayettes, Port-au-Prince. The Red Cross Red Crescent has supported the strengthening of a health centre through the reconstruction of consultation rooms, the opening of a laboratory and a pharmacy.

of administrators and medical personnel and the procurement of essential medical supplies, to ensure the health facilities can run independently and effectively. The Haitian Red Cross programmes to support blood donation are also ongoing and, in 2013, capacity-building trainings were carried out to improve blood transfusion operations.

Institutional support of the Haitian Ministry of Public Health and Population, MSSP, is being maintained to strengthen its capacity in areas such as planning, epidemiological surveillance and public health. Support offered to government departments is critical for addressing the underlying weaknesses of the Haitian health, water and sanitation systems and this requires strong coordination and alignment of programming. Red Cross Red Crescent teams have dedicated significant time and resources to this as part of ongoing recovery programming. This includes participating in national government meetings to ensure the strategic direction of Red Cross Red Crescent programmes complements national plans and, ultimately, to ensure all the positive steps being taken to build and protect the health of the Haitian population are sustainable.



September 2013

2nd Haiti Learning Conference, gathering more than 150 Red Cross Red Crescent representatives from the field, regional offices and headquarters, aimed at collectively defining the way the lessons learnt would contribute to organizational learning and change.

December 2013

The IFRC launches appeal in support of a ten-year strategy to eliminate cholera in Haiti and the Dominican Republic.



Cholera

Cholera operations in Haiti continue to be a humanitarian priority for the Red Cross Red Crescent and, over the last 12 months, the focus has been to try to prevent new cholera cases emerging, with the overall goal of eliminating the disease from the entire island of Hispaniola.

The Red Cross Red Crescent has now scaled up its cholera response plan, in line with the Haitian government's 10-year plan for the elimination of cholera. The new country-wide strategy focuses on carrying out extensive awareness and education activities, to encourage people to adopt safe health and hygiene practices, in conjunction with the renovation of, or construction of, water and sanitation facilities in public places such as markets and schools. The Red Cross Red Crescent will also focus on constructing small water-supply systems and, where possible, rehabilitating existing systems throughout the country.

Red Cross Red Crescent cholera programmes are carried out in close collaboration with the relevant government departments. This includes the provision of funding to government projects which are helping to build water and sanitation capacity at a community level and to the management of cholera treatment centres and units. To guarantee the effective monitoring of the disease, Haitian Red Cross volunteers are also working closely with the national epidemiological surveillance systems to help ensure any spikes in cases are swiftly reported and to support response actions.

As cholera is a preventable and treatable disease, raising awareness of the disease has been a priority throughout 2013. Haitian Red Cross volunteers have continued to go door to door and school to school to remind people for the need to be vigilant and SMS messages have shared life-saving information on how to stay safe.

The cholera epidemic in Haiti has posed a constant threat to the lives and well-being of the entire Haitian population. The Red Cross Red Crescent, as a signatory to the Coalition on Water and Sanitation for the Elimination of Cholera in the Island of Hispaniola, is working with all relevant actors, in particular the Governments of Haiti and the Dominican Republic, to ensure that future generations can live free from the fear of cholera.

Number of patients treated in cholera treatment centres or units supported by the Red Cross Red Crescent





Pauline Ellen stands next to her rainwater-collection system provided by the Red Cross Red Crescent.

"Since we received the Red Cross support, none of my family has become sick with cholera or other diseases of dirty hands." Cholera swept through 75-year-old Pauline Ellen's community, devastating countless families, including her own. Without knowing how to protect themselves against the disease, Pauline, her husband and her grandchildren all fell victim to the spread of cholera or what she calls "diseases of dirty hands".

"Me, my husband and our two grandsons were exposed to cholera and other diarrhoeal diseases because of poor hygiene and a lack of drinking water, especially during the heavy rainy season," she said.

Red Cross volunteers were alerted to the severe needs in the community which is located in Western Haiti, in the Petit Bois commune of Arcahaie.

"Red Cross volunteers began to visit us, giving us messages about how to protect ourselves from cholera," continued Pauline. "We started to be very careful about everything we eat; we got used to washing the vegetables and fruits before eating and washing our hands with soap after using the toilet," she continued.

But good hygiene knowledge can be applied only if people have access to the services they need. To help address these challenges, the Red Cross began distributions of soap and aquatabs, along with information on how to use them most effectively. Having witnessed the benefits, Pauline and her family are now prioritising the purification of their drinking water:

"Since then, my husband and I decided to buy the aquatabs to purify our water, even if the Red Cross volunteers have not yet distributed them to us, just as we do with the salt that we use in the food." she said.

Also, Pauline's household, along with a number of others in the neighbourhood, was provided with a toilet and a rainwater-collection system along with a filter to help purify the water they collect.

"Since we received the Red Cross support, none of my family has become sick with cholera or other 'diseases of dirty hands'," she said.

Importantly, Pauline is now sharing the information and services she has received with those who live nearby:

"We also educate our neighbours, who come to use our toilet, and our visitors on personal and environmental hygiene."



Pauline Ellen

Building safer communities

Although the Haitian earthquake of 2010 has been the largest disaster to strike the country recently, it is by no means the only one. Over the last four years, millions of Haitians have been exposed to floods, tropical storms, droughts and even hurricanes.

Throughout 2013, efforts have continued to help the thousands of vulnerable families who bore the brunt of both Hurricane Sandy and Tropical Storm Isaac which swept through the country in 2012 destroying people's homes and livelihoods. While emergency-response activities have been necessary, the disaster highlighted the ever-increasing need for disaster-preparedness activities throughout the country.

Haiti is prone to extreme weather-related disasters and this situation is further exacerbated by geological hazards and the population's high levels of vulnerability; the Haitian Red Cross Society has a long-established risk-reduction programme and Red Cross Red Crescent programmes have focused on helping the National Society build its response capacity over the last 12 months, with specific attention being paid to helping reinforce the regional branches.

Ensuring strong regional capacity is an important aspect of Red Cross Red Crescent disaster-preparedness programming, with regional teams providing the vital link between national and community disaster-preparedness activities.

To empower local residents to set up their own early-warning and alert systems, Haitian Red Cross volunteers have been helping to establish local intervention teams, by providing communities with trainings and equipment. To date, 421 community response teams throughout the country are ready to respond, thanks to Red Cross Red Crescent support¹. Also, volunteers have been distributing disaster-preparedness leaflets, visiting people door to door and practising emergency evacuations in schools and public buildings.

However, those who are especially vulnerable to Haiti's perennial storms and floods are those without homes. To help reduce the severe risks faced by the displaced camp population, particularly those living on sites which regularly flood or suffer from land-slides, Red Cross Red Crescent disaster-preparedness projects have carried out a series of mitigation activities in 2013 such as digging ditches, installing drainage systems, planting trees, building protecting walls and reinforcing embankments. Disaster-response committees, made up of trained camp residents, have been established with the teams creating individual preparedness plans and early-warning systems.

Levels of preparedness were thoroughly tested in July 2013 when Tropical Storm Chantal made its way over the Caribbean, threatening to wreak further devastation on the Haitian population. The Haitian Red Cross regional branches were immediately placed on standby and over 500 volunteers were mobilized to respond in at-risk areas, supporting early-warning systems by alerting the population to the impending storm. Hai-



Community intervention team (EIC) in Brache, West department. EICs are made up of community volunteers whose focus is on disaster preparedness and risk reduction activities. Their goal is to minimize fatalities, especially in the hurricane season. Between 2011 and 2013 the Red Cross Red Crescent has contributed to the formation of more than 160 such teams.

This number includes 255 vigilance committees located in temporary camps.



In response to a highlighted need by the community, the Red Cross Red Crescent has installed 50 solar-powered street lights in Carrefour Feuilles.

"It's as if life has returned to the community." The bustling community of Carrefour Feuilles in Port-au-Prince is home to hundreds of people. For the countless shops, businesses and street vendors, the neighbourhood is also a much-needed marketplace where local residents come to buy and sell goods.

But, for many years, this vibrant community became silent as the sun went down, with local residents fearful of the dark corners and unlit streets. With only a few hours of electricity a day, and many days with none at all, stores and businesses were forced to close early and community members found it safer to be inside their homes.

Ferald Gilorsé, a 23-year-old law student living in Carrefour Feuilles, recalls the situation:

"It's as if life just stopped once it got dark. You couldn't go out to buy anything because most businesses were closed and people didn't want to be out at night."

As part of the Integrated Neighbourhood Approach, the Red Cross Red Crescent has been working with the neighbourhood committee in Carrefour Feuilles and the residents were quick to identify the urgent need for better lighting in their community. In response to the highlighted need, and as part of the ongoing renovation of the neighbourhood, the Red Cross Red Crescent installed 50 solar-powered street-lights in 2013.

"Following discussions with the neighbourhood committee on violence prevention, solar-powered lights were identified to help the community to take ownership of public spaces," says Ascension Martinez, IFRC Head of Operations.

The change in the local community has been dramatic. Businesses are open later and people are no longer afraid to walk around the neighbourhood at night. For Ferald, the lights also enable him to study at night without having to rely on candlelight.

"Before, we used to either use candles to study or we would have to walk until we found a street-light, study there and then come back home. We didn't feel safe having to come home in the dark. Now, at night, you find many people under the street-lights studying, reading or just talking."

Ferald, who has lived in Carrefour Feuilles all his life, feels that these solar-powered lights have improved community life tremendously.



tian Red Cross SMS messages were sent out, reaching over one million people, warning them of the storm and telling them how to keep safe and protect their homes and belongings. While Tropical Storm Chantal was eventually downgraded to a tropical wave, the need to stay alert and prepared for future disasters continues, as experience tells us it will not be the last tropical storm on Haiti's horizon.

Building safer communities relies on protecting residents from the variety of threats they face and this includes focusing on violence within communities. Violence is a long-standing problem in Haiti and it is often women, girls and youth who are most affected. The causes are complex but are rooted in conditions of extreme poverty, social inequality (including gender inequality), social exclusion, the lack of access to employment opportunities, poor governance and the weak rule of law.

Red Cross Red Crescent programmes have adopted a number of approaches to help increase people's safety including education and awareness-raising activities and practical interventions such as the provision of safe spaces for women and children, the lighting of dark and potentially dangerous pathways, and support to set up referral systems for victims of gender-based violence.

Protecting communities against violence requires an organisational commitment to recognising and responding to the conditions in which violence can occur. In 2013, the Haitian Red Cross has expanded its violence-prevention initiative, known locally as Koté Trankil, with activities and trainings carried out in regional branches and within the provinces. In recognition of the acute levels of vulnerability faced by children, this has included targeting teachers and school directors in a bid to raise awareness and to provide support. This includes the 'Ten Steps to Creating Safe Environments' training which the Haitian Red Cross has successfully conducted in schools across different

communes in the country.

To support national strategies, the Haitian Red Cross Society is a member of the National Disaster Risk Management System which runs the Emergency Operation Centre system under the Directorate of Civil Protection. Lessons learned from recent disaster responses indicate that protection concerns, including the prevention and mitigation of interpersonal violence, need to be more fully integrated into emergency response programmes. The Haitian Red Cross is helping to address these concerns by supporting the wider roll-out and sharing of trainings and institutional tools and guidelines.

Restitution exercise in Delmas 9. The Red Cross Red Crescent has been supporting simulation exercises as part of its community-based disaster preparedness activities.



Building more economically resilient communities

The central aim of all Red Cross Red Crescent recovery programmes is to empower Haitian communities to take control of their recovery and live independently. Supporting livelihoods is fundamental to this process and, over the last four years, the Red Cross Red Crescent has implemented a variety of livelihoods initiatives, focusing on both urban and rural communities, to help meet the evolving needs of earthquake-affected communities.

Cash support has played an important role in helping thousands of families to each regain a degree of economic independence. To date, 81,383 households have received grants, loans or other financial support. In addition to helping families take charge of their own finances, cash support also benefits local economies with people using the money to re-enter the market and purchase food or other necessary household items.

The Red Cross Red Crescent integrated neighbourhood approach, which is helping local communities renovate their neighbourhoods, also includes a large livelihoods component. Ensuring families can secure regular incomes is essential for any thriving community and it has been consistently stated as a priority by local residents. Low or non-existent family income does not allow people to build, buy or rent proper housing with sanitation facilities while it also impacts on a family's ability to fund its children's schooling. This naturally spirals further as a lack of education leads to limited job prospects for future generations. Inevitably, the communities without job prospects are generally more exposed to internal tensions and potential acts of violence.

The Red Cross Red Crescent livelihoods programme has attempted to stop this negative cycle by helping to build local marketplaces, supporting people to set up veg-



Sous Savanne, Léogane.
Distribution of conditional grants to help local farmers purchase inputs for their agricultural production. According to agronomist Dorcilien Dukens from the Haiti Red Cross Society, "traditional farming in small family plots could become a viable solution to Haiti's food security needs."



Renaud Sidrac has benefited from livelihoods support from the Red Cross Red Crescent on agricultural techniques along with the provision of seeds and tools.

For Renaud Sidrac, a farmer from Léogane, the plot of land where he lives is also his workplace. Having received a transitional shelter from the Red Cross Red Crescent after his home was destroyed by the earthquake, Renaud has also received livelihoods support to enable him to make the most of the surrounding land.

This support has included intensive training on agricultural techniques along with the provision of seeds and tools. This basic assistance is enabling hundreds of families in Haiti to capitalize on their assets, even though they receive relatively limited financial support.

For Renaud, this means he is now able to feed his family with healthy and nutritious produce from his garden while also growing additional crops which he can sell and trade.

"I'm a farmer; I sow beans, bananas, everything. Agriculture supports my whole family. The money I make from my gardens will help us to be able to provide education for our children and we are now able to buy clothes and other items we need. The gardens provide us with more than just food," he said.

The potential to further develop the business is also evident to Renaud who is already thinking about expansion. "If I can find a way to generate more revenue, I could work a larger piece of land," he said.

"The gardens provide us with more than just food."



Renaud and his daughter

Households that have received livelihood support grants, loans or other forms of financial support



35,440

Number of people trained and/or provided with necessary equipment to provide relevant services in their communities

90,110

Number of people supported through the provision of short-term employment opportunities – cash-for-work activities



90

Small and medium enterprises provided with training, equipment or financial support

etable gardens and providing food-preparation and hygiene training so people can run small food stalls.

Small and medium-sized enterprises have continued to grow in 2013 with Red Cross Red Crescent support. This has included training people to develop business plans, to manage finances and to monitor stock and profit levels. Throughout Haiti, a variety of businesses has recently been established including a pasta factory, a bakery and a brick factory.

Over 35,000 people have now been provided with training and/or equipment to help each one get back on their feet and bring in an income. Additionally, 90 small and medium-sized enterprises have received support.

In 2013, Red Cross Red Crescent livelihoods support has expanded following Hurricane Sandy, when thousands of people were plunged deeper into poverty following extensive damage to local food supplies and, consequently, to people's means of income. The Red Cross Red Crescent Hurricane Sandy response includes cash transfers to more than 3,900 households with funds being distributed to support a variety of purposes including house repairs, construction, food security and livelihoods.

Horne Jean Pierre works for a small plastic recycling business in Port-au-Prince. This project has received start-up funding and support from the Red Cross Red Crescent.

Distributions of seeds and tools, and the provision of trainings, were provided to 1,800 households to help improve agricultural techniques. Also, cash-for-work activities are being carried out with a focus on the rehabilitation of community soil-andwater-conservation structures.



Supporting families to live independently is another of the primary goals of the Red Cross Red Crescent relocation programme and, in 2013, families continued to leave camps and move to safer housing, through the provision of a combination of Red Cross Red Crescent financial and livelihoods support.

In recognition of the unique vulnerabilities often faced by women, and to help overcome some of the barriers they can face when trying to establish and develop livelihoods, Red Cross Red Crescent programmes have been designed to give special consideration to supporting female entrepreneurs through targeted trainings relating to small-enterprise development skills.

Building better sheltered communities

Since the onset of the earthquake relief and recovery operations, the Red Cross Red Crescent has been one of the leading providers of safer shelters for displaced Haitian communities, and has now reached over 40,000 families with shelter support. However, as time has gone on, finding suitable shelter for those still displaced increasingly has required a new way of looking at the challenges of space, land and community rehabilitation. Red Cross Red Crescent shelter options have transitioned over the last four years to adapt to the ever-changing realities and, in 2013, the primary focus has been on helping families to leave camps through rental and livelihoods support while simultaneously renovating local neighbourhoods.

Sorel Desroches is one of thousands who have benefited from Red Cross Red Crescent support to repair and strengthen their homes. Sorel's home is shown before and after repairs.







Vesta Pierre Louis

"I hope that others like me benefit from an opportunity such as this. I feel safe again."



Reinforced corner inside the house

Fifty-eight-year-old Vesta Pierre Louis has lived in Delmas 30 for many years. A widow and a single mother, Vesta was devastated by the effects of the 2010 earthquake which left one side of the family home completely caved in.

Despite the precarious living conditions, Vesta had little choice but to remain in her house or move into one of the many makeshift camps in Port-au-Prince. She decided to stay in the family home and, in February 2012, the Red Cross Red Crescent targeted her community for assistance. Through its integrated neighbourhood approach, teams worked with local residents to help repair houses. Vesta's damaged home benefited from much-needed repair with teams helping to reinforce corners, repair fallen and damaged walls and put up heat-reflecting roofing. Attention was also paid to ensuring the home was safe and secure.

"New windows and doors provide increased security for the families with whom we have worked," said Colin Price, IFRC project manager.

"The psychological benefits to the parents and their children are quite evident as we walk around the neighbourhood and a new level of dignity is created. Many owners have begun renting to tenants while other beneficiaries have opened small shops in their front rooms selling food and other goods; this provides steady incomes making them more resilient for the future," he continued.

Vesta, her son and two other children that she took in after the earthquake now feel much safer living in the home and can turn their attention to other priorities. Vesta, who earns her living by selling various staples such as bread, coffee, rice, beans and charcoal, hopes to expand her small business in the near future.



The Red Cross Red Crescent relocation programme has helped over 14,000 households already to leave the camps where they had been living, for safer, more secure accommodation. While a variety of options is offered within the Red Cross Crescent relocation programme, 98 per cent of families supported through the programme have opted for rental assistance and, by September 2013, 14,183 families had been relocated successfully from overcrowded camps to rental accommodation.

This Red Cross Red Crescent support is a significant factor in the overall success of rental relocation programmes in Haiti. To date, approximately 55,000 displaced families have been able to leave camps due to rental and cash support provided by the international community and the Government of Haiti. Over 20 per cent of these displaced families were supported by the Red Cross Red Crescent. Critically, information gathered through recent Red Cross Red Crescent beneficiary surveys and monitoring visits shows that supported families also report that they are feeling much safer in their new homes.

To ensure those leaving camps have better living conditions and thriving communities to which they can return, Red Cross Red Crescent programmes are working in partnership with local residents to rehabilitate three neighbourhoods. Within the 'Integrated Neighbourhood Approach', residents are encouraged to lead the way in identifying the priority needs and potential solutions for their communities. With Red Cross Red Crescent assistance, communities have been supported to repair damaged homes and schools, to establish improved water supplies and to clear blocked drains. Vocational training and the provision of tools and equipment to help community members restore their livelihoods have also been under way and Red Cross volunteers have been on hand to implement violence-prevention measures, to share knowledge on disease prevention and hygiene, and to help communities prepare for future disasters.

While the construction of permanent houses is still under way, to date, 615 have been built already with support from the Red Cross Red Crescent. In addition, 4,321 damaged houses have been rehabilitated. Also, Red Cross Red Crescent construction activities have acted as training activities for local residents, to enhance the 'knowhow' of construction workers and improve their employability.

The scope of the projects supported by Red Cross Red Crescent programmes has been possible only because of the initiative taken by local residents and through close collaboration with local government departments and community groups, who have come together to help overcome some of the issues raised and to provide additional local knowledge and resources.

While many communities continue to strive forwards, the living conditions for people living in camps have steadily deteriorated with minimal resource and funding now provided to these vulnerable families.

Over the past 12 months, the Red Cross Red Crescent has continued its camp mitigation programme with regular activities such as de-sludging and trash and rubble removal, aiming to ensure that, where possible, the very basic needs of people living in camps continue to be met. In camps targeted by Red Cross Red Crescent, emergency shelter may continue to be the undeniable reality for many families but efforts have ensured these shelters are improved and safer to live in.

Combined efforts to find suitable homes for families, particularly those led by the Haitian government, have proven to be crucial as seen in the government-led 16/6 return and relocation initiative. Close coordination with national and local authorities has been critical not only in the re-housing of families and the closing of camps, but also in ensuring that vacated land can be restored to be useful, public spaces. The Red Cross Red Crescent, together with the authorities, has rehabilitated a number of public sites once occupied by displaced families including public parks and sports grounds, which are now used for leisure activities.

Beneficiary communications



Red Cross Red Crescent programmes are continually striving to improve communications with the people and communities with which they are working. That does not mean simply sharing life-saving information on how to avoid or treat disease, or warning of coming storms. Communication is a two-way process; receiving information and listening to the people with whom we are working is just as important, if not more so, than is providing information. Without listening, we cannot hope to establish what support people need and, importantly, what they do not need, or better ensure that communities receive the right help, in the right place, at the right time.

The Red Cross Red Crescent is committed to understanding the potential advantage, and implications, of communication innovations, as evidenced in the 2013 International Federation of Red Cross and Red Crescent World Disasters Report which focused on new technology and the future of humanitarian action. The Haiti earthquake operation has played a critical role in this process, in that it saw the first field deployment of some technologies which are now being evaluated, and in some cases replicated, in other contexts.

A variety of beneficiary communications tools have been implemented in Haiti over the last four years from high-tech SMS systems and voice lines, through to traditional posters, leaflets and sound trucks.

Haitian Red Cross communications team answers questions from listeners about Red Cross projects. Radyo Kwa Wouj is a one hour radio programme that is broadcast every Wednesday on a national radio channel.

By using a number of different modes of communication, the Red Cross Red Crescent aims to increase the number of people reached and the levels of engagement with communities. Importantly, these forms of communications are proving to be highly effective. A 2013 evaluation report suggests that almost **90 per cent of the affected population received information from the Haitian Red Cross** and that, of these, **87 per cent said the information was useful and 82 per cent shared the information with their families, friends or local communities**.

The most-recent addition to the beneficiary communications toolkit in Haiti, Telefon Kwa Wouj, has also proved to be a resounding success; it receives an average of more than 100,000 calls every month. As of October 2013, Telefon Kwa Wouj has received 1,662,100 calls. Funded by a grant from the Humanitarian Innovation Fund, Telefon Kwa Wouj represents an important development in the provision of information to communities. Through the audio menu, people are able to proactively and confidentially seek out and access the information they want to hear – an innovation which is proving extremely popular.

A critical aspect of beneficiary communications work is its use of tools to improve accountability – both through informing communities of the work the Red Cross Red Crescent is doing and, critically, in collecting and responding to complaints, questions and general feedback, as well as ensuring that information from communities is itself fed back into operational planning.

The Noula call centre, the questions and complaints line hosted by an independent third-party provider, has been accessible free of charge and provides an opportunity for those who have received Red Cross Red Crescent support to ask questions about the services or raise complaints they may have. As of October 2013, the Noula line had answered more than 16,500 calls.



Telefon Kwa Wouj, a first-ofits-kind Red Cross interactive information line registered its millionth call in April 2013, less than ten months after the system began operating.

Learning from Haiti



Over the past four years, the Red Cross Red Crescent has worked continually to better connect its earthquake recovery programmes with the people they are designed to support. One important aspect of this has been a focus on innovation and the utilisation of new and emerging trends, particularly in relation to mobile and internet-based technology.

Red Cross Red Crescent staff makes use of mobile technology to register beneficiaries in Gueskio camp, Port-au-Prince for the IFRC's Return and Relocation Programme.

Through the Red Cross Red Crescent partnership with Trilogy International Partners, a wireless telecommunication company, a new global way of conducting communications with affected communities has been developed. The Interactive Voice Response (IVR) system has pushed the boundaries driving technology, which is usually employed only by private businesses, into humanitarian operations.

This learning is now being applied to cash programming also as part of Red Cross Red Crescent livelihoods support, with teams researching the feasibility of setting up mobile banking facilities to enable fast distribution of cash during future disasters. Mobile technology has been used in Haiti to help improve humanitarian relief assessments and distributions. The OpenDataKit system (ODK) provided Red Cross staff and volunteers with an easy-to-use digital database, accessed through mobile phones, which facilitated the timely collection and accessing of assessment information. For relief distributions, the Mega V distribution software enabled Red Cross Red Crescent teams to track and monitor the distribution of relief items to beneficiaries

through a simple bar-code system. When used in combination, these systems were shown to greatly improve the speed and efficiency of Red Cross Red Crescent assessments and distributions, and the digital applications have since been rolled out and are being used now in a number of other countries and emergency operations.

Ensuring that the experience and knowledge captured by staff and volunteers over the last four years is being utilised has been a priority for the Red Cross Red Crescent. As such, significant efforts have been made to collectively identify the lessons and innovations gained from the earthquake operation and to develop concrete measures to ensure future Red Cross Red Crescent policies and practices incorporate this learning. Six priority areas are currently being addressed: readiness, community work, recovery, human resources, resilience of host National Societies and humanitarian diplomacy, alongside the identification of specific measures that will enhance the capacity to learn as an organization and to develop a learning culture.

in September 2013, the 2nd Haiti Learning Conference gathered more than 150 Red Cross Red Crescent senior leaders and practitioners from the field, regional offices and headquarters, with the aim of collectively defining the way the lessons learnt from this unique operation would contribute to organizational learning and change.

Despite having over 150 years of humanitarian experience, the Red Cross Red Crescent is continually striving to ensure its support is relevant, to enhance its performance and accountability, and to strengthen recovery from disasters. The knowledge, practices and tools developed in the Red Cross Red Crescent earthquake operation have already helped to safeguard the lives and well-being of millions of people throughout Haiti. But it is through the ongoing integration of this learning, and the potential benefits it will bring to the next disaster-stricken global population, that we will truly see how the Haiti operation has transformed humanitarian programmes.



Looking ahead



After school hours, children from Gaillard National School in South East department help their parents run their family's small business.

Earthquake-recovery options are now winding down in Haiti, with many Red Cross Red Crescent programmes ending in the coming 12 months. Undoubtedly, there will still be significant needs at this time but Red Cross Red Crescent recovery programmes have been developed to build community resilience and, over the last 12 months, there has been a significant transition towards empowering local people to take increasingly prominent roles in the rebuilding of their lives and communities.

But the Haitian people will not continue their recovery alone; they will be supported by a stronger Haitian Red Cross Society. The development of the National Society and of the capacity of its regional branches will continue to be prioritised over the next year and the Haitian Red Cross will work closely with the national Government also and with external actors to ensure remaining recovery resources are effectively managed and to avoid vulnerable groups being overlooked. This will require specific attention being paid to Haiti's youth to ensure that the next generation is able to contribute actively to Haiti's development and the Haitian Red Cross Society is focusing on creating these opportunities through its volunteer programme.

The Red Cross Red Crescent is ambitious in its approach for the coming, final months of its Haiti programmes. Teams are focused on overcoming the long-standing challenges which have held back the recovery of thousands of Haitians. Working closely with the Government, local communities and other partners, the Red Cross Red Crescent is working to find suitable housing for the remaining camp population and is committed to supporting the eradication of cholera from the country. These are high-reaching aims but it is imperative that, collectively, we do reach them.



Programmatic analysis¹

This is a summary of the Red Cross Red Crescent's collective performance data on the earthquake operation in Haiti. It reports cumulative data from the start of the operation to 30 September 2013, unless otherwise indicated.

Relief distributions

Ind. no.	Indicators	Total reached
1a	Estimated number of households provided with at least one type of essential non-food relief item	226,030
1b	Total number of households provided with additional relief items	6,818
2	Total number of households provided with at least one hygiene kit	193,720
3	Total number of households reached with emergency cash distributions	1,839
4	Total number of households provided with food assistance	195,160

Healthcare

Ind. no.	Indicators	Total reached
5	Total number of patients treated in Red Cross Red Crescent emergency healthcare facilities	229,977
6	Total number of communities that have developed a community-based health and first-aid plan of action based on identified priorities	124
7	Total number of people reached by community-based health and first-aid services Disaggregated by category of service ² Maternal, newborn and child health HIV prevention Anti-stigma messages Prevention of malaria, dengue and other vector-borne diseases Training in community-based first-aid Psychosocial support activities Other services (mainly general health promotion)	2,129,526 ³ 137,645 590,735 336,021 493,717 11,143 361,999 1,084,794
8	Total number of Haiti Red Cross Society volunteers trained in epidemic control	1,258
Chole	era response	
9	Total number of cholera treatment centres or units supported by the Red Cross Red Crescent at the end of the reporting period	7
10	Total number of patients hospitalized in the cholera treatment centres or units supported by the Red Cross Red Crescent	36,7364
11	Total number of oral rehydration points operated by the Red Cross Red Crescent at the end of the reporting period	1
Blood	d services	
12	Total number of blood collection centres newly built or rehabilitated Completed Under construction In a planning phase	4 1 0
	Total number of blood collection centres to be newly built or rehabilitated	5

^{1.} The programmatic information in this report reflects contributions from Red Cross and Red Crescent National Societies and organizations working in Haiti as well as from the IFRC's secretariat which is conducting relief and recovery operations on behalf of 104 Red Cross and Red Crescent National Societies. The Red Cross and Red Crescent National Societies and organizations that have provided data for the programmatic performance section of this report are: American Red Cross, British Red Cross, Finnish Red Cross, French Red Cross, German Red Cross, Haiti Red Cross Society, Italian Red Cross, Luxembourg Red Cross, Nowegian Red Cross, Spanish Red Cross, Swiss Red Cross, the Canadian Red Cross Society, and the Netherlands Red Cross.

^{2.} The sum of the disaggregated figures is not equal to the total number of people reached by community-based health and first-aid services. This is because one person might receive more than one service from the Red Cross Red Crescent, but in the total number of people reached each person is counted only once.

^{3.} Corrections have led to a large decrease in the total number of people reached with community-based health and first aid services, and to the number of people reached with maternal, newborn and child health services.

^{4.} A correction in the figure reported in the previous round led to a large decrease in the reported number of patients treated in CTCs/CTUs

Water and sanitation

Ind.	Indicators	Total reached
13	Total number of people provided with daily access to drinking water at the peak of the emergency operation	317,480
14	Total amount of drinking water distributed (emergency set-up)	1,232,001,470 litres
15	Estimated number of households with increased availability of water through the rehabilitation of water systems and/or creation of new improved water sources	87,943
16	Total number of water systems newly constructed or rehabilitated	51
17	Total number of water points newly constructed or rehabilitated	6,731
18	Total number of households provided with access to an improved sanitation facility	38,4405
19	Total number of improved sanitation facilities newly built Household facility Shared facility	19,083 ⁶ 18,217 2,034
20	Total number of improved sanitation facilities rehabilitated Household facility Shared facility	549 517 32
21	Total number of communal or public sanitation facilities newly built or rehabilitated	565
22	Total number of water and sanitation committees set up and trained ⁷	392
23	Total number of people reached through hygiene promotion activities	5.5 million ⁸

^{5.} A correction in the figure reported has led to a decrease in the number of households provided with access to an improved sanitation facility.

^{6.} There was a correction in the number of improved sanitation facilities built that led to a decrease compared to the figure reported in the previous round.

^{7.} In some camps or communities there are separate committees for the management of water and sanitation facilities. If there is both a water and a sanitation committee in the same community, these are counted as two committees.

^{8.} This figure includes multiple counting as some external partners supported by the Red Cross Red Crescent are counting the number of contacts made rather than how many different community members were reached following the various hygiene promotion (HP) activities. In addition it has not been possible to eliminate multiple counting in some of the directly implemented HP programmes where people were reached multiple times following such activities.

Shelter

Ind. no.	Indicators	Total reached	
24	Total number of households provided with emergency shelter materials		179,645
25	Total number of host families provided with cash or voucher assistance enhancement	for shelter	7,690
26	Total number of households reached with tarpaulin replacement		70,423
27	Total number of households reached with reinforcement/improvement of	of emergency shelter	8,849
		Planned	Reached ⁹
	Total number of households provided with safe and improved shelter solution Disaggregated by type of shelter solution	44,698	43,728
28	Total number of households provided with a transitional or upgradable shelter10	24,609	24,60911
	Total number of households provided with a settlement or relocation grant	14,206	14,183
	Total number of households provided with permanent housing solution	5,553	4,936
	> House repair	4,480	4,321
	> Permanent house	1,073	615
29	Total number of community members trained in shelter activities		26,673
30	Total number of shelter beneficiary households with access to an improved sanitation facility		24,226
31	Total number of shelter beneficiary households with access to improved water source		14,173
32	Volume of rubble removed		112,688 cubic metres
33	Volume of rubble recycled		14,373 cubic metres

^{9.} The number of households reached with improved shelter solution captures the households that moved into a transitional/upgradable shelter, permanent shelter, or received a settlement or relocation grant to support them in finding a self-sheltering solution.

^{10.} This indicator captures the number of households to whom a transitional/upgradable shelter has been handed over.

^{11.}A correction has led to a decrease in the reported number of households compared to the previous figure.

Community and social infrastructure

Ind. no.	Indicators			Total reached
	Total number of schools newly built, rehabilitated, equipped or strengthened	Newly built or rehabilitated	Completed	41
34			Under construction	3
			In a planning phase	8
34		Equipped or strengthened	Planned	19
		Equipped of strongthoried	Reached	19
	Total number of schools to be newly built, rehabilitated, equipped or strengthened		71	
35	Estimated catchment population of newly k	ouilt, rehabilitated, equipped or	strengthened schools	7,054
		Newly built or rehabilitated Equipped or strengthened	Completed	24
	Total number of clinics or hospitals newly built, rehabilitated, equipped or strengthened		Under construction	1
36			In a planning phase	1
00			Planned	2
			Reached	2
	Total number of clinics or hospitals to be newly built, rehabilitated, equipped or strengthened		28	
37	Estimated catchment population of newly built, rehabilitated, equipped or strengthened hospitals or clinics			1,674,720
	Total number of other community buildings and infrastructure newly built or rehabilitated Completed Under construction In a planning phase		20	
38			Under construction	2
			In a planning phase	7
	Total number of other community buildings and infrastructure to be newly built or rehabilitated		29	

Livelihoods

Ind. no.			Total reached
		Planned	Reached
	Total number of households that have received livelihood support	82,320	81,383
39	grants, loans or other forms of financial support Disaggregated by type of shelter solution		
	Earthquake- affected family		61,644
	Host family		17,768
	Not specified		1,971
40	Total number of children who received grants for the payment of school fees and other educational expenses during one school year (2010-2011)		17,898
	Total number of people trained and/or provided with necessary equipment to provide relevant services in their communities		35,440
41	Only trained		31,382
41	Only provided with equipment		240
	Trained and provided with equipment		3,759
	Not specified		79
		Planned	Reached
42	Total number of small and medium enterprises provided with training, equipment or financial support	90	90
43	Total number of people supported through the provision of short-term employment opportunities – cash for work activities		90,110

Disaster preparedness and risk reduction

Ind.	Indicators	Total reached
44	Total number of households covered by pre-positioned non-food relief stock for Haiti	31,630
45	Total number of communities with a community disaster response plan in place	228
	Total number of community members trained in vulnerability and capacity assessment or community-based disaster management	7,543
46	Haiti Red Cross Society volunteers	551
46	Community volunteers	6,379
	DPC/CASEC members ¹²	112
	Others	501
	Total number of community response teams set up and equipped Disaggregated by target population	421
47	Temporary camps (vigilance committees)	255
	Communities in high-risk areas outside of camps	166
48	Total number of camps or communities reached with mitigation micro-projects Disaggregated by target population	138
	Temporary camps Communities in high-risk areas outside of camps	61 77
49	Total number of camps or communities reached with awareness-raising activities on disaster risks Disaggregated by target population	428
	Temporary camps Communities in high-risk areas outside of camps	117 311
	Total number of communities with a comprehensive action plan in place	56
50	Action plan under implementation	34
	Action plan implemented Action plan developed but not yet under implementation	8 14
	Action plan developed but not yet under implementation	14
	Total number of Haiti Red Cross Society regional branches with strengthened capacity for risk and disaster management ¹³	13
51	with a contingency plan in place	13
0.	have participated in a simulation exercise	13
	supported with reliable access to electricity and internet	4
	with operational radio station in place	13

^{12.} DPC (Direction de la Protection Civile) is the Haitian civil protection agency; CASEC (Conseil d'Administration de la Section Communale) is the Administrative Council of Communal Sections.

^{13.} The sum of the disaggregated figures is not equal to the total number of Haiti Red Cross Society regional branches with strengthened capacity for risk and disaster management. This is because one branch might meet more than one of the criteria, but in the total number of regional branches with strengthened capacity each branch is counted only once.

Strengthening the Haiti Red Cross Society

Ind. no.	Indicators	Total reached	
52	Total number of Haiti Red Cross Society regional branches rebuilt or rehabilitated	Completed	5
		Under construction	1
		In a planing phase	0
	Total number of Haiti Red Cross Society regional branches to be rebuilt of	6	
53		Completed	25
	Total number of Haiti Red Cross Society local committees strengthened or rebuilt	Under way	10
		In a planing phase	11
	Total number of Haiti Red Cross Society local committees to be strength	46	

Programme support and coordination

Ind. no.	Indicators	Total reached	
54	Total number of Red Cross Red Crescent expatriate staff in Haiti at the experiod	129	
55	Total number of Red Cross Red Crescent national staff in Haiti at the end period	1,717	
56		Planned	14
	Total number of project, programme and operations evaluations in Haiti	Under way	2
		Undertaken	64
57	Total number of Red Cross Red Crescent National Societies or organizate Haiti	13	
58	Total number of Red Cross Red Crescent National Societies or organizate Haiti operation with people, cash or in-kind ¹⁴	126	

^{14.} A list of these 126 Red Cross and Red Crescent National Societies and organizations is included as Annex 3 in this report.

Financial overview

The International Federation of Red Cross and Red Crescent Societies (IFRC)¹ has raised a total of **1,248.2** million Swiss francs in support of its response operation in Haiti.² As of 30 September 2013, **973.8** million Swiss francs, or **78 per cent** of the total income has been spent for relief and recovery operations in Haiti.

Figure 1. Total funds donated to the Red Cross Red Crescent by original sources

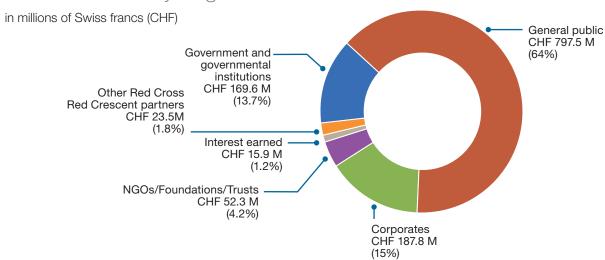
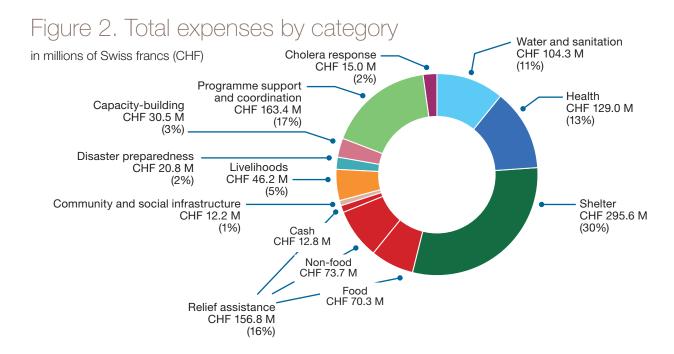


Figure 2 reflects spending by programme area through to 30 September 2013³ The largest amounts spent by the Red Cross Red Crescent are in the areas of shelter (295.6 million Swiss francs), programme support and coordination (163.4 million Swiss francs), relief assistance (156.8 million Swiss francs)health and care (129 million Swiss francs), water and sanitation (104.3 million Swiss francs). The amount spent on cholera response (CHF 15 million) does not necessarily capture the overall expenditure of the Red Cross Red Crescent on cholera response, but is the amount that has been spent on cholera related activities from earthquake response funds.

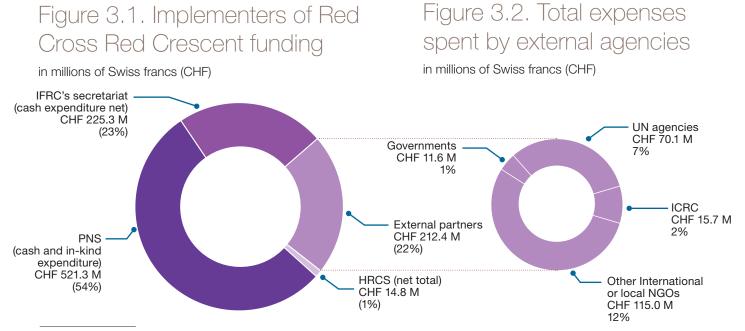
¹ The financial information in this report combines unaudited data from 34 independent National Societies (listed below) and the IFRC secretariat, which is conducting Haiti relief and recovery operations on behalf of 105 National Societies which contributed directly to its Haiti appeal. The financial data for this report was provided by the following Red Cross and Red Crescent National Societies and organizations: American Red Cross, Australian Red Cross, Austrian Red Cross, Belgian Red Cross – Flanders, Belgian Red Cross, Finnish Red Cross, French community, British Red Cross, Colombian Red Cross Society, Costa Rican Red Cross, Danish Red Cross, Finnish Red Cross, French Red Cross, German Red Cross, Haiti Red Cross Society, Icelandic Red Cross, Italian Red Cross, Japanese Red Cross, Sweiss Red Cross, Norwegian Red Cross, Red Cross Society of China – Hong Kong branch, Spanish Red Cross, Swedish Red Cross, Swiss Red Cross, the Canadian Red Cross, Chilean Red Cross, Costa Rican Red Cross, Danish Red Cross, Irish Red Cross, Fifteen other National Societies (Australian Red Cross, Chilean Red Cross, Costa Rican Red Cross, Danish Red Cross, Icelandic Red Cross, Irish Red Cross, Korean Red Cross, Mexican Red Cross, New Zealand Red Cross, Qatar Red Crescent Society, Slovak Red Cross, Thai Red Cross Society, Turkish Red Cross, Crescent Society and the Red Crescent Society of the United Arab Emirates) had already accounted for all their funds raised for the operation, therefore no updated data was requested from them. Two National Red Cross and Red Crescent Societies (, Red Cross Society of China, and Luxembourg Red Cross) with remaining balances have not given updated data during this reporting period, and therefore their data has been included to the extent of their past submission covering income, expenditure and projections as of 28 February 2010 (first round), 31 March 2011 (third round), 30 September 2011 (fourth round), 31 March 2013 (seventh round).

² National Societies' financial reporting was received in local currencies and converted to CHF. For the current reporting period, the exchange rate used to calculate income and expenditures is the weighted average rate of Secretariat income receipts from 10 January 2010 through 30 September 2013. The exchange rate used to calculate projected expenditures is the spot rate of the last day of the reporting period. This methodology differs from previous rounds in that separate exchange rates were previously applied to income (the weighted average rate) and expenditures (average rate). These rates produced a foreign exchange effect that resulted in an overstatement of the residual funds available.

³ Financial reporting has been restricted to 12 categories. Each Red Cross or Red Crescent National Society and organization has its own unique financial accounting and coding structures. Therefore, for the purposes of consolidating financial figures, the data supplied by the Red Cross Red Crescent Societies and organizations were simplified into the 12 categories shown in Figure 2. For definitions and a detailed list of these categories, see the financial reporting methodology notes, annexed to this report.



Figures 3.1 and 3.2 reflect how the expenditure is split among the IFRC's secretariat, the 34⁴ Red Cross and Red Crescent National Societies and organizations reporting financial figures, as well as other partners outside the IFRC. The majority of the expenditure is carried out by Red Cross and Red Crescent National Societies and organizations,⁵ while the IFRC also coordinates relief and recovery efforts through other actors to avoid unnecessary duplication or gaps in the provision of assistance. The percentage of assistance delivered through these external agencies is 22 per cent.



⁴ The expenditure of sixteen Red Cross and Red Crescent National Societies that have not given updated data during this reporting period has been included to the extent of their past submission covering expenditure up to 28 February 2010 (first round), 31 March 2011 (third round), 30 September 2011 (fourth round), 31 March 2012 (fifth round), 30 September 2012 (sixth round) or 31 march 2013(seventh round).

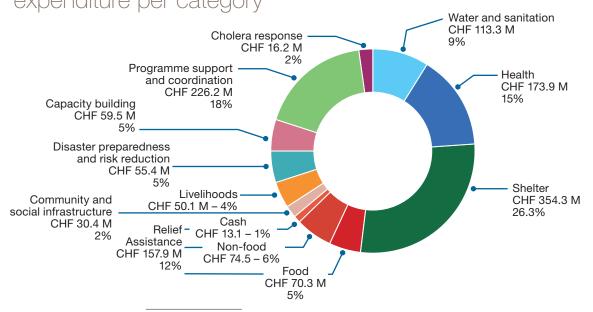
⁵ The costs of Emergency Response Units (ERUs) are reflected in Partner National Society expenditures. In-kind expenditure distributed by the IFRC's secretariat is attributed to the source Partner National Society. This adjustment during the consolidation of figures increases the actual expenditures attributed to the IFRC's secretariat by approximately CHF 2.6 million.

Several Red Cross and Red Crescent National Societies and organizations report that Haiti relief and recovery programming will continue through to the end of 2014, with some members indicating that programming will continue into 2015 and possibly longer.⁶ Estimated spending projections are shown in Figure 4, Table 1 and Figure 5.⁷

Figure 4. Red Cross Red Crescent expenses and forecast combined (2010 to 2015+)



Figure 5. Red Cross Red Crescent expenses and projected expenditure per category



⁶ Financial reporting for this consolidated report has been restricted to a six -year time frame, although some Red Cross and Red Crescent National Societies and organizations project expenditure beyond that date. For purposes of consolidating financial figures, Red Cross and Red Crescent National Societies and organizations were requested to adapt their plans to the time frame shown in Figure 4.

⁷ The forecasts portrayed in this report are not to be considered as formal commitments, but estimated allocations that are still likely to be adjusted as details of plans and budgets in certain programme areas become available.

Table 1. Red Cross Red Crescent expenses and projected expenditure by year and by category (2010 to 2015+)

in million Swiss francs (CHF)

Programme area	Actual expenditure	Forecast			Total (Expenditure + forecast)	
	Until 30 September 2013	Last quarter of 2013	2014	2015+	Total forecast	2010 to 2015+
Cholera response	15.0	0.4	0.8	_	1.2	16.2
Water and sanitation	104.3	3.7	2.8	2.6	9.1	113.4
Health	129.0	6.0	17.6	21.2	44.8	173.8
Shelter	295.6	6.6	24.4	27.7	58.7	354.3
Relief — Food	70.3	_	_	_	_	70.3
Relief — Non-food	73.7	_	0.8	-	0.8	74.5
Relief — Cash	12.8	0.2	_	_	0.2	13.0
Community and social infrastructure	12.2	3.8	11.7	2.8	18.3	30.5
Livelihoods	46.2	1.2	2.0	0.7	3.9	50.1
Disaster preparedness and risk reduction	20.8	4.0	13.7	17.0	34.7	55.5
Capacity building	30.5	2.3	7.1	19.7	29.1	59.6
Programme support and coordination	163.4	9.0	23.9	30.0	62.9	226.3
Total	973.8	37.2	104.8	121.7	263.7	1,237.5
Unallocated balances						13.1
Grand total					CHF	1,250.6 M

Annex 1. Notes and methodology regarding the programmatic progress indicators

The following is a summary of the methodology used for programmatic progress indicators.

Relief distribution

1a. Estimated number of households each provided with at least one type of essential non-food relief item

A household is counted as provided with when it has received at least one out of the following six non-food relief item categories:

a) a kitchen setb) a hygiene kitc) two blanketsd) a buckete) two jerry cansf) two mosquito nets

1b. Total number of households each provided with additional relief items

A household is counted as provided with when it has received an additional non-food item that is not covered in indicator 1a. For example, baby kits are included in this category.

2. Total number of households provided with at least one hygiene kit

A household is counted as provided with when it has received at least one hygiene kit.

3. Total number of households reached with emergency cash distributions

A household is counted as reached when it has received at least one cash distribution. Emergency cash is cash which is provided during the first 12 months of the earthquake relief operation. This does not include cash assistance to host families for shelter enhancement. Longer-term cash support for livelihoods is not included here either since it is separately reported within the livelihoods sector (indicator 40).

4. Total number of households provided with food assistance

A household is counted as provided with when a member of the household has received food assistance at least once. Food assistance is supplementary food for an emergency situation, normally distributed only once to a household.

Healthcare

5. Total number of patients treated in Red Cross Red Crescent emergency healthcare facilities

This includes the number of people who have received treatment in the Red Cross Red Crescent mobile units, fixed clinics or field hospitals during the relief and early recovery phase. This indicator does not cover the patients treated in permanent clinics or hospitals which were built or renovated by the Red Cross Red Crescent.

6. Total number of communities that have developed a community-based health and first-aid plan of action based on identified priorities

This includes each community that has developed a community-based health and first-aid plan based on discussions about the priorities of the community. The word

'community' is generally defined in the Red Cross Red Crescent as the lowest official administrative unit; in the context of Haiti, this can be adapted to the neighbour-hood/village level. A community-based health and first-aid plan of action should be:

1) developed by the community health committee and local branch volunteers/staff
2) approved and adopted by the committee representing community-based health and first aid

3) include: purpose, tasks, resources, timeframe, and responsible person.

7. Total number of people reached by community-based health and first-aid services

This is the number of people who have received community-based health and first-aid services from the Red Cross Red Crescent (training in community-based first-aid; promotion of maternal, new-born and child health; HIV prevention and anti-stigma messages; malaria, dengue and other vector-borne disease prevention; psychosocial support; or other intervention). It does not include people who have only received a health message via a text message or people reached through mass media. The same person is counted only once during the reporting period, regardless of the number of services provided. People reached through hygiene promotion activities are reported under a separate indicator within the water and sanitation sector (indicator 23). Community-based health and first-aid services aim at raising awareness about health priorities and their prevention and control and promoting behavioural change, using an approach that engages communities and their volunteers to address the priority needs and to empower them to be in charge of their own development.

8. Total number of Haiti Red Cross Society volunteers trained in epidemic control

This includes Haiti Red Cross Society volunteers trained in epidemic control in the different branches of the Society.

9. Total number of cholera treatment centres or units supported by the Red Cross Red Crescent at the end of the reporting period

This includes the cholera treatment centres or units¹ supported by the Red Cross Red Crescent as a response to the outbreak of this disease in Haiti in October 2010. This indicator is not cumulative; it reports the number of cholera treatment centres or units as they stand at the end of the reporting period.

10. Total number of patients hospitalized in the cholera treatment centres or units supported by the Red Cross Red Crescent

This includes the number of people who have been hospitalized in the cholera treatment centres or units supported by the Red Cross Red Crescent. 'Hospitalized' refers to hospital admissions. People who receive treatment by means of oral rehydration salts but are not admitted to the hospital are not counted here.

11. Total number of oral rehydration points operated by the Red Cross Red Crescent at the end of the reporting period

This includes the oral rehydration points provided by the Red Cross Red Crescent as a response to the cholera outbreak in October 2010. Oral rehydration points are sites at a community level that provide rapid access to this treatment.

12. Total number of blood collection centres newly built or rehabilitated

This indicator is disaggregated as follows:

• Completed: this is the number of blood collection centres where building work has been finished and the building can be used for the collection of blood units.

¹ Cholera treatment centres are stand-alone facilities with an average capacity of 100 to 200 beds, whereas cholera treatment units are typically in or next to healthcare facilities and have a smaller capacity than cholera treatment centres.

- Under construction: this is the number of blood collection centres to be newly built or rehabilitated that have begun the process, with some form of preparatory work at least.
- In a planning phase: this is the number of blood collection centres for which plans have already been developed or commitments have been made but construction has not yet started.
- Total number of blood collection centres to be newly built or rehabilitated: this is the total number of blood collection centres to be supported by the Red Cross Red Crescent.

Water and sanitation

13. Total number of people provided with daily access to drinking water at the peak of the emergency operation

This includes the number of people to whom the Red Cross Red Crescent provided water daily, through water trucking or other emergency water set-up during the relief phase. Longer-term solutions where water systems have been installed or renovated and improved water sources were built are not reported here. This indicator is not cumulative; it reports the number of people who were being provided with daily access to drinking water at the peak of the operation.

14. Total amount of drinking water distributed (emergency set-up)

This refers to the total amount of drinking water distributed since the earthquake through emergency water trucking.

15. Estimated number of households with increased availability of drinking water through the rehabilitation of water systems and/or creation of new improved water sources

This includes the number of households with increased availability of drinking water as a result of Red Cross Red Crescent interventions that have rehabilitated pre-existing water systems and/or created new improved water sources. An improved water source is one that, by nature of its construction or through active intervention, is protected from outside contamination, in particular from contamination with faecal matter. This takes into account household connection, public standpipe, borehole/tube well, protected dug well, protected spring, rainwater collection and vendor-provided water. Although vendor-provided water is not considered an improved water source according to industry-standard definitions (WHO-UNICEF Joint Monitoring Programme), vendor-provided water will often be the most common drinking water solution in the context of Haiti, and as such it is included in the list of improved water sources.

16. Total number of water systems newly constructed or rehabilitated

This includes the number of new water systems (see indicator 15) created and the number of pre-existing water systems that have been rehabilitated by the Red Cross Red Crescent.

17. Total number of water points newly constructed or rehabilitated

This includes the number of new water points (see indicator 15) or pre-existing water points that have been rehabilitated by the Red Cross Red Crescent.

18. Total number of households provided with access to an improved sanitation facility

This includes the number of households provided with access to an improved sanitation facility, either used by a single household or shared between a group of households in a single plot, compound or building. An improved sanitation facility is one

that hygienically separates human excreta from human contact. This takes into account the provision of flush/pour flush toilets or latrines connected to a sewer, septic tank or pit; ventilated pit latrines; pit latrines with a slab or platform of any material which covers the pit entirely except for the drop hole; and composting toilets/latrines.

19. Total number of improved sanitation facilities newly built

This includes the number of improved sanitation facilities newly built (see definition in indicator 18) by the Red Cross Red Crescent.

20. Total number of improved sanitation facilities rehabilitated

This includes the number of improved sanitation facilities rehabilitated (see definition in indicator 18) by the Red Cross Red Crescent.

21. Total number of communal or public sanitation facilities newly built or rehabilitated

This includes the number of communal or public sanitation facilities that have been newly built or rehabilitated by the Red Cross Red Crescent. A communal facility is one that is shared by a group of households in a community, whereas a public facility is open to anybody, in public places or in residential areas. Institutional facilities (for example in schools and hospitals) are not counted here.

22. Total number of water and sanitation committees set up and trained

This includes the total number of water and sanitation committees set up and trained to maintain community water and sanitation facilities. Each committee member receives basic training on the structure of the committee, the roles of committee members, and education in the technical skills corresponding to the role of the individual committee member.

23. Total number of people reached through hygiene promotion activities

This includes the total number of people reached through hygiene promotion activities. It does not include those reached through mass media. The same person is counted only once during the reporting period, regardless of how many times that person was targeted with hygiene promotion.

Shelter

24. Total number of households provided with emergency shelter materials

This refers to all households that have received at least one type of emergency shelter material (two tarpaulins, a tent or a shelter toolkit). If a household receives several different types of emergency shelter materials, it is still only counted once.

25. Total number of host families provided with cash or voucher assistance for shelter enhancement

Host families are those who are providing shelter in their house or property to people affected by the earthquake. This indicator covers cash or voucher assistance given to host families to improve their living conditions. It does not include emergency cash assistance or longer-term livelihoods assistance which are accounted for in other indicators.

26. Total number of households reached with tarpaulin replacement

This refers to all households that have received at least two tarpaulins to replace those which have deteriorated due to Haiti's tough climate.

27. Total number of households reached with reinforcement/improvement of emergency shelter

This includes all households that have been supported with interventions to improve/upgrade the emergency shelter in order to offer a more secure environment

and a healthier living area. For example, where work has been carried out to ensure that the roof is pitched and rain resistant or where the shelter has been fitted with sturdy frame posts and secured well into the ground.

28. Total number of households provided with safe and improved shelter solution

This includes shelter solutions that provide better resistance to the elements as well as greater privacy and security than emergency shelter or people's current living situations. It covers temporary as well as more permanent solutions, including transitional or upgradable shelters, provision of settlement or relocation grants to ensure that families have access to safe shelters, as well as house repairs and the building of permanent houses.

Transitional or upgradable shelters are temporary but solid structures which can house families until they are able to move into, or return to, permanent houses. For families living on land they own, transitional shelters can be expanded and upgraded with additional materials to become permanent. A household is reported in this category once the shelter has been handed over to them.

A household is defined as a group of people who live together and share resources and intend to do so in future.

This indicator is disaggregated as follows:

- total number of households provided with a transitional or upgradable shelter
- total number of households provided with a settlement or relocation grant
- total number of households provided with permanent shelter (i.e., those where the house has been repaired as well as ones provided with a newly built permanent house).

29. Total number of community members trained in shelter activities

This includes the total number of community members that have been trained in shelter activities since the beginning of the operation. The same person is counted only once during the reporting period, regardless of the number of trainings received.

30. Total number of shelter beneficiary households with access to an improved sanitation facility

This includes the total number of shelter beneficiary households that have access to an improved sanitation facility. The access can be to a pre-existing sanitation facility, to a facility newly built or rehabilitated by the Red Cross Red Crescent, or to a sanitation facility newly built or rehabilitated by another organization.

Improved sanitation facility is one that hygienically separates human excreta from human contact. A sanitation facility is considered improved if it is private or shared, but not for communal or public use.

31. Total number of shelter beneficiary households with access to improved water source

Chapter This includes the total number of shelter beneficiary households that have access to an improved water source. The access can be to a pre-existing water source, to a source newly created or rehabilitated by the Red Cross Red Crescent, or to a water source created or rehabilitated by another organization.

Improved water sources comprise household connection, public standpipe, borehole/tube well, protected dug well, protected spring and vendor-provided water. Although vendor-provided water is not considered an improved water source according to industry-standard definitions (WHO-UNICEF Joint Monitoring Programme), vendor-provided water will often be the most common drinking water solution in the context of Haiti, and as such it is included in the list of improved water sources. It is acknowledged, however, that the Red Cross Red Crescent is not ensuring access to

drinking water through that channel, since access would also mean making sure the water supply is affordable; the Red Cross Red Crescent's involvement in this regard is about increasing the availability of water through the construction or rehabilitation of water kiosks. Therefore in this indicator the households covered by a water kiosk will not be counted. However, such households are accounted for within the indicator 'Estimated number of households covered with increased availability of drinking water', listed under the water and sanitation section.

32. Volume of rubble removed

This includes the total volume of rubble removed (in cubic metres).

33. Volume of rubble recycled

This includes the total volume of rubble recycled or reused (in cubic metres).

Community and social infrastructure

34. Total number of schools newly built, rehabilitated, equipped or strengthened

This indicator is disaggregated as follows:

Newly built or rehabilitated:

- Completed: this is the number of schools where building work is complete and the school building can be used.
- Under construction: this is the number of schools to be newly built or rehabilitated that have begun the process, with some form of preparatory work at least.
- In a planning phase: this is the number of schools for which plans have already been developed or commitments have been made but construction has not yet started.

Equipped or strengthened:

- Planned: this is the number of schools planned to be provided with teaching and learning materials, equipment or with financial and/or technical support.
- Reached: this is the number of schools provided with teaching and learning materials, equipment or with financial and/or technical support.
- Total number of schools to be newly built, rehabilitated, equipped or strengthened: this is the total number of schools to be supported by the Red Cross Red Crescent.

35. Estimated catchment population of newly built, rehabilitated, equipped or strengthened schools

This is the total of the estimated catchment population of newly built, rehabilitated, equipped or strengthened schools.

36. Total number of clinics or hospitals newly built, rehabilitated, equipped or strengthened

Methodology similar to indicator 34 has been applied.

37. Estimated catchment population of newly built, rehabilitated, equipped or strengthened hospitals or clinics

This is the total of the estimated catchment population of newly built, rehabilitated, equipped or strengthened hospitals or clinics.

38. Total number of other community buildings and infrastructure newly built or rehabilitated

Methodology similar to indicator 34 has been applied..

Livelihoods

39. Total number of households that have received livelihood support grants, loans or other forms of financial support

This is the number of households that have directly received some form of financial support to restart or strengthen their productive activities. It does not include those that have indirectly benefited from the financial support or that have received asset or in-kind support.

40. Total number of children who received grants for the payment of school fees and other educational expenses during one school year (2010-2011)

This is the number of children who received grants for the payment of school fees and other educational expenses. This support is reported under the livelihoods sector since it provides families with free resources to enable them to prioritize their income for other recovery activities.

41. Total number of people trained and/or provided with equipment to provide relevant services in their communities

This is the number of people who received a series of training sessions, aimed at acquiring the necessary skills and knowledge, and/or necessary equipment to offer services matching the demand in the community.

42. Total number of small and medium enterprises provided with training, equipment or financial support

This is the number of small and medium enterprises provided with support in the form of training, provision of equipment or financial support. The same enterprise is counted only once during the reporting period, regardless of how many types of support it received.

43. Total number of people supported through the provision of short-term employment opportunities – (e.g., cash-for-work activities)

This is the number of people who have been able to access increased resources to meet their basic needs by means of cash-for-work activities in community-driven projects.

Disaster preparedness and risk reduction

44. Total number of households covered by pre-positioned non-food relief stock for Haiti

Chapter This is the number of households that could be served with non-food relief stocks, in the aftermath of a disaster in Haiti.

45. Total number of communities with a community disaster response plan in place

This is the number of communities that have developed a plan for responding to potential disasters. A community is generally defined in the Red Cross Red Crescent as the lowest official administrative unit; in the context of Haiti, this can be adapted to the neighbourhood/village level. The process of developing this plan should include identifying disaster risks, vulnerabilities, potential impact, community resources and capacities, and determining roles and responsibilities in responding to a disaster.

46. Total number of community members trained in vulnerability and capacity assessment or community-based disaster management

This refers to the number of people who have successfully completed training in vulnerability and capacity assessment or community-based disaster management. Ideally this would include some sort of quality control check allowing verification of 'successful completion', e.g., pre- and post-training tests, skills demonstration or other form of

quality measure resulting in provision of a certificate or recognition of skills transfer. This indicator is disaggregated as follows:

- Haiti Red Cross Society volunteers
- community volunteers: these are the volunteers forming the community response teams (or vigilance committees in camps)
- DPC/CASEC members: members of the Haitian civil protection agency (Direction de la Protection Civile) or the administrative councils of the communal sections² (Conseil d'Administration de la Section Communale)
- others.

47. Total number of community response teams set up and equipped

This refers to the number of community-based teams trained to be first responders in case of a disaster. In camp settings these teams are often called vigilance committees. A team is considered set up when its members have received the basic training units such as vulnerability and capacity assessment, disaster risk reduction, community early-warning systems, first aid, damage assessment and needs analysis, and education about the role and mandate of the community response team, CASEC, the Red Cross and DPC at community level. A team is considered equipped when it has been provided with at least the following equipment for early warning and first response: whistle, megaphones, radio, emergency kit and visibility T-shirts.

48. Total number of camps or communities reached with mitigation micro-projects

This includes the number of camps or communities reached with at least one mitigation micro-project such as: tent reinforcement; strengthening of banks, pathways and small-scale infrastructure; improving water and sanitation; digging drainage channels or clearing blocked drains; or addressing other specific needs identified by the communities. If more than one mitigation activity has been implemented in one community, this community is counted only once.

49. Total number of camps or communities reached with awareness-raising activities on disaster risks

This includes the number of camps or communities reached with activities aimed at increasing awareness on disaster risks. If more than one awareness-raising activity has been implemented in one community, this community is counted only once.

50. Total number of communities with a comprehensive action plan in place

A community action plan is a local plan aiming at enhancing the resilience of the community based on the vulnerabilities and capacities identified during a multisectorial assessment.

The indicator is disaggregated as follows:

- action plan developed
- action plan under implementation
- action plan implemented.

51. Total number of Haiti Red Cross Society regional branches with strengthened capacity for risk and disaster management

A branch can be reported as strengthened if at least one of the following criteria is met:

- It has a contingency plan in place.
- It has participated in a disaster simulation exercise.
- It has been supported with reliable access to electricity and Internet.
- It has an operational radio station in place.

² Haiti is divided into 568 communal sections, each of them having an administrative council (CASEC).

Strengthening the Haiti Red Cross Society

52. Total number of Haiti Red Cross Society regional branches rebuilt or rehabilitated

This indicator is disaggregated as follows:

- Completed: this is the number of Haiti Red Cross Society regional branches where building or rehabilitation work has been completed.
- Under construction or rehabilitation: this is the number of Haiti Red Cross Society regional branches for which the building or rehabilitation process has begun, e.g., site prepared, materials delivered or some form of preparatory work commenced.
- In a planning phase: this is the number of Haiti Red Cross Society regional branches for which plans have already been developed or commitments have been made but work has not yet been started.
- Total number of Haiti Red Cross Society regional branches to be rebuilt or rehabilitated: this is the total number of regional branches to be rebuilt or rehabilitated, summing completed, under construction and in a planning phase.

53. Total number of Haiti Red Cross Society local committees strengthened or rebuilt

Methodology similar to indicator 49 has been applied.

Programme support and coordination

54. Total number of Red Cross Red Crescent expatriate staff in Haiti at the end of the reporting period

This includes all expatriate staff working in Haiti for the Red Cross Red Crescent at the end of the reporting period.

55. Total number of Red Cross Red Crescent national staff in Haiti at the end of the reporting period

This includes all national staff working in Haiti for the Red Cross Red Crescent at the end of the reporting period. It does not include daily workers.

56. Total number of project, programme and operations evaluations in Haiti

This includes all evaluations planned, under way or undertaken by the Red Cross Red Crescent in Haiti.

For those evaluations referred to as planned, this covers those in a planning phase, under way and already undertaken.

57. Total number of Red Cross Red Crescent National Societies or organizations operating in Haiti at the end of the reporting period

This refers to Red Cross Red Crescent National Societies or organizations that have set up their presence and operations in Haiti. This indicator is not cumulative; it reports the number of Red Cross and Red Crescent National Societies or organizations operating in Haiti at the end of the reporting period.

58. Total number of Red Cross Red Crescent National Societies or organizations supporting the Haiti operation with people, cash or in-kind

This figure refers to all Red Cross Red Crescent National Societies or organizations that have supported the Haiti operation with people, cash or in-kind donation.

Annex 2. Notes and methodology regarding presentation of combined financial data

- 1. The combined income and expenditure data in this report was generated based on financial data collected from the IFRC secretariat and the 35 National Red Cross or Red Crescent Societies referenced in the report. These data were collected and compiled over a period of four weeks, from 8 October to 8 November 2013. The method, developed to obtain financial data, considered the flows of income and expenditure and eliminated multiple counting (within the Red Cross Red Crescent network) of income and expenditure.
- 2. This report is a combined, cumulative portrait of IFRC financial information. All of the updated reports were received from the National Red Cross and Red Crescent Societies and organizations and used to generate this collective portrait reflected data through 30 September 2013, with the following exceptions: fourteen National Societies had already accounted for all their funds raised for the operation, therefore no updated data was requested from them. A further two Red Cross or Red Crescent Societies, with remaining balances, have not submitted updated data for this reporting period and, in all cases, their most-recent past submission of data was used.
- 3. Included in the reporting of income are in-kind goods and services (non-cash contributions). Due to variations in the way that in-kind goods are treated by IFRC members, the value of income and expenditure related to in-kind goods and services (non-cash contributions) may not be fully represented in this consolidation, because of the different accounting treatments of these non-cash items. As a result, the report possibly under-reports the income and expense values for these in-kind goods and services. However, these values are estimated to be small, and immaterial to the overall report.
- 4. The exchange rates used to combine the financial data during this round of reporting are shown in the table below:

Forex rate	Income and expenditure rate	Projections rate
AUD	0.95570	0.8451
CAD	1.04000	0.8803
CHF	1	1
CNY	0.15110	0.1478
DKK	0.05320	0.1645
EUR	1.37380	1.2257
GBP	1.64870	1.4629
HKD	0.12680	0.117
ISK	0.08600	0.0076
JPY	0.01170	0.0093
KRW	0.00090	0.0009
MXN	0.07140	0.0691
NOK	0.17970	0.1515
NZD	0.74040	0.7522
SEK	0.14330	0.1411
USD	1.08410	0.9066

- 5. Some National Red Cross and Red Crescent Societies and organizations report operating on a cash accounting basis, while others work on an accrual basis. Working on a cash accounting basis means that the reported financial income and expenditure include only income received and expenditure paid at 30 September 2013. Accrual basis means that the reported financial income and expenditure include all income received and receivable and expenditure paid or payable as at 30 September 2013.
- 6. Treatment of interest income: each National Red Cross or Red Crescent Society or organization's treatment of interest earned on donations is governed by its own financial policies. In the cases where interest is not allocated back to the Haiti operation, National Red Cross and Red Crescent Societies report interest being allocated to future international and emergency operations or to general headquarters' operations.
- 7. National Societies' financial reporting was received in local currencies and converted to CHF. For the current reporting period, the exchange rate used to calculate income and expenditure is the weighted average rate of secretariat income receipts from 10 January 2010 through to 30 September 2013. The exchange rate used to calculate projected expenditures is the spot rate on the last day of the reporting period. This methodology differs from that of previous rounds in that separate exchange rates were previously applied to income (the weighted average rate) and expenditure (average rate). These rates produced a foreign exchange effect that resulted in an overstatement of the residual funds available.
- 8. The categories and definitions used for the classification of expenditure are the following:

Cholera response:

- water and sanitation expenditure related to cholera response
- health Emergency Response Units (ERUs) and other health expenditure for cholera response
- costs related to procurement, transport, warehousing, and distribution of emergency food parcels, non-food items or cash in response to the cholera outbreak.

Water and sanitation:

- water and sanitation ERUs
- water trucking and other temporary water supply activities
- construction of sanitation facilities (latrines and bathing facilities) in camps and makeshift settlements
- hygiene promotion (if not included in health activities)
- environmental sanitation interventions: vector control, solid-waste management, camp and house cleaning, trainings
- repair and replacement of water systems
- installation of water systems or sanitation facilities as part of shelter initiatives (if not included in shelter expenditure)
- promotion of hygiene, sanitation and community management of water and sanitation facilities in line with the Participatory Hygiene and Sanitation Transformation (PHAST) approach
- long-term water and sanitation programming through the Global Water and Sanitation Initiative (GWSI).

Health:

• health ERUs

- first aid, emergency clinical services
- education and health promotion campaigns; hygiene, if not included above in water and sanitation category
- psychosocial and disaster mental health
- disease control; vaccination programmes, and mosquito net distributions (if not included below in relief category)
- prosthetics programmes
- community-based health programming
- · long-term health programming
- enhancement of blood banking and ambulance services.

Shelter:

- shelter supplies for immediate or temporary use, including tools and kits, tarpaulins, tents, sheeting, rope, etc.
- training and support to improve emergency shelter solution
- assistance to host families for shelter enhancements: cash, vouchers (if not listed below in relief cash assistance category)
- transitional shelters (with intended duration of 12 to 60 months)
- assistance (in kind or cash) to improve or repair houses
- permanent shelter construction (housing specific).

Relief assistance - food:

• Costs related to procurement, transport, warehousing and distribution of emergency food parcels for earthquake-impacted or host families.

Relief assistance - non-food:

 Costs related to procurement, transport, warehousing and distribution of items such as blankets, hygiene kits, kitchen sets, jerry cans, mosquito nets and baby kits for earthquake-impacted or host families.

Relief assistance – cash:

• Total value of emergency cash assistance distributed to date for earthquake-impacted or host families.

Community and social infrastructures:

- short-term community services such as day care, child-friendly spaces and elderly care
- protection activities
- repair, refurbishment or new construction of schools, clinics, hospitals, community centres and other infrastructure such as roads, bridges and other community assets.

Livelihoods:

- 'cash-for-work' programmes
- livelihoods support grants, loans or other forms of financial support
- economic resiliency and development programmes
- livelihoods strengthening and diversification programmes
- · asset replacement programmes, if not already included in the other categories
- payment of school fees to free resources to be used for economic recovery activities
- long-term livelihoods programming.

Disaster preparedness:

- all mitigation activities in any sector related to hurricane preparedness: building drainage ditches, community mobilization and awareness-raising
- hurricane shelters, if not included in shelter or community and social infrastructures
- tracing services and capacity-building of tracing staff, if not included in other categories
- pre-positioning of stocks
- setting and working towards improved disaster management standards
- building new/enhanced disaster response mechanisms
- risk reduction programmes
- early-warning systems
- community-based disaster preparedness
- international disaster response law (IDRL) programming.

Capacity building in support of the Haiti Red Cross Society:

- costs related directly to supporting the Haiti Red Cross Society's earthquake response
- volunteer support, if not reflected in other categories
- short-term support to Haiti Red Cross Society for salaries, equipment, supplies, transportation or rent
- refurbishment and construction of earthquake-impacted Haiti Red Cross Society branches and headquarters
- developmental support: for example, to enhance financial, reporting and management systems
- humanitarian values programming
- provision of technical assistance, training materials and professional development
- volunteer capacity-building.

Programme support and coordination:

- operations support and assessment (staffing or transport), if not included in the other categories above
- headquarters and field management and staff costs such as local or international staff costs
- planning, reporting staff and associated costs like workshops and trainings
- monitoring and evaluation (surveys or assessments), and other quality and accountability activities
- communications and advocacy staff; publications
- human resources recruitment and support
- logistics functions
- coordination and direction
- accounting, audit and other financial services
- cross-cutting themes such as gender, environment, sustainability, beneficiary participation and risk reduction
- fund-raising costs and processing of donations
- head office costs (service fees and similar)
- other indirect support
- foreign exchange loss and gain.

Annex 3. Red Cross and Red Crescent National Societies and organizations involved in the Haiti relief and recovery efforts

Albanian Red Cross American Red Cross Andorran Red Cross Antigua and Barbuda Red Cross Argentine Red Cross

Armenian Red Cross Society Australian Red Cross

Austrian Red Cross

Bangladesh Red Crescent Society

Baphalali Swaziland Red Cross Society

Belarus Red Cross Belgian Red Cross

French speaking Community Flanders

Belize Red Cross Society

Brazilian Red Cross

British Red Cross

British Red Cross - Cayman Islands Overseas branch

Bulgarian Red Cross

Cambodian Red Cross Society

Chilean Red Cross

Colombian Red Cross

Society

Costa Rican Red Cross

Croatian Red Cross

Czech Red Cross Danish Red Cross

Dominica Red Cross Society

Dominican Red Cross

Ecuadorian Red Cross

Egyptian Red Crescent

Society

Estonia Red Cross

Ethiopian Red Cross Society

Finnish Red Cross

French Red Cross

German Red Cross

Grenada Red Cross Society Guatemalan Red Cross

Red Crescent Society of the

Islamic Republic of Iran Red Crescent Society of the

United Arab Emirates Red Cross of Benin

Red Cross of Cape Verde

Red Cross of Monaco

Red Cross of Montenegro

Red Cross of Viet Nam

Red Cross Society of China

Red Cross Society of China - Hong Kong Branch

Red Cross Society of

China - Macau Branch Red Cross Society of

Georgia

Red Cross Society of Côte

Red Cross Society of

Panama

Rwandan Red Cross

Saint Kitts and Nevis Red Cross Society

Saint Lucia Red Cross

Saint Vincent and the Grenadines Red Cross

Salvadorean Red Cross

Society

Sao Tome and Principe Red

Seychelles Red Cross

Society

Singapore Red Cross Society

Slovak Red Cross

Slovenian Red Cross

Spanish Red Cross

Suriname Red Cross

Swedish Red Cross

Haitian Red Cross Society

Hellenic Red Cross

Honduran Red Cross

Hungarian Red Cross

Icelandic Red Cross

Indian Red Cross Society

Indonesian Red Cross

Society

Irish Red Cross Society

Israel - Magen David Adom

in Israel

Italian Red Cross

Jamaica Red Cross

Japanese Red Cross Society Kenya Red Cross Society

Kuwait Red Crescent Society

Latvian Red Cross

Lebanese Red Cross

Liberian Red Cross Society

Libyan Red Crescent

Liechtenstein Red Cross

Lithuanian Red Cross

Society

Luxembourg Red Cross

Malaysian Red Crescent

Society

Mauritius Red Cross Society

Mexican Red Cross

Moroccan Red Crescent

Namibia Red Cross

Nepal Red Cross Society

New Zealand Red Cross

Nicaraguan Red Cross

Nigerian Red Cross Society

Norwegian Red Cross

Pakistan Red Crescent Society

Palau Red Cross Society

Papua New Guinea Red

Cross Society

Peruvian Red Cross

Portuguese Red Cross

Qatar Red Crescent Society

Swiss Red Cross

Syrian Arab Red Crescent

The Bahamas Red Cross

The Barbados Red Cross Society

The Canadian Red Cross

Society The Gambia Red Cross

Society

The Guyana Red Cross

Society

The Netherlands Red Cross The Netherlands Red Cross

- Curacao Overseas branch

The Red Cross of Serbia

The Red Cross of The

Former Yugoslav Republic of Macedonia

The Red Cross Society of

Bosnia and Herzegovina The Republic of Korea National Red Cross

The South African Red Cross

Society The Sri Lanka Red Cross

Society The Sudanese Red Crescent

The Thai Red Cross Society

The Trinidad and Tobago **Red Cross Society**

Turkish Red Crescent

Society

Ukrainian Red Cross Society

Uruguayan Red Cross

Zambia Red Cross Society

Notes

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The Fundamental Principles of the International Red Cross and Red Crescent Movement

Humanity The International Red Cross and Red Crescent Movement, born of a desire to bring assistance without discrimination to the wounded on the battlefield, endeavours, in its international and national capacity, to prevent and alleviate human suffering wherever it may be found. Its purpose is to protect life and health and to ensure respect for the human being. It promotes mutual understanding, friendship, cooperation and lasting peace amongst all peoples.

Impartiality It makes no discrimination as to nationality, race, religious beliefs, class or political opinions. It endeavours to relieve the suffering of individuals, being guided solely by their needs, and to give priority to the most urgent cases of distress.

Neutrality In order to enjoy the confidence of all, the Movement may not take sides in hostilities or engage at any time in controversies of a political, racial, religious or ideological nature.

Independence The Movement is independent. The National Societies, while auxiliaries in the humanitarian services of their governments and subject to the laws of their respective countries, must always maintain their autonomy so that they may be able at all times to act in accordance with the principles of the Movement.

Voluntary service It is a voluntary relief movement not prompted in any manner by desire for gain.

Unity There can be only one Red Cross or Red Crescent Society in any one country. It must be open to all. It must carry on its humanitarian work throughout its territory.

Universality The International Red Cross and Red Crescent Movement, in which all societies have equal status and share equal responsibilities and duties in helping each other, is worldwide.

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