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Emergency Plan of Action (EPoA)

Trinidad and Tobago: Floods

 International Federation
of Red Cross and Red Crescent Societies

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| DREF n° MDRTT001 | Glide n° FL-2018-000194-TTO |
| Date of issue: 29 October 2018 | Expected timeframe: 3 months Expected start date: 26 October 2018 Expected end date: 26 January 2019 |
| Category allocated to the of the disaster or crisis: Yellow | |
| DREF allocated: 249,603 Swiss francs (CHF) | |
| Total number of people affected: 100,000 to 150,000 according to the Office of Disaster Preparedness and Management (ODPM) | Number of people to be assisted: 500 families (2,500 people) |
| Host National Society(ies) presence (n° of volunteers, staff, branches): The Trinidad and Tobago Red Cross Society (TTRCS) has 1 national headquarters, 3 branches, 17 staff members and nearly 250 volunteers throughout the country. | |
| Red Cross Red Crescent Movement partners actively involved in the operation: The International Federation of Red Cross and Red Crescent Societies (IFRC) and its Country Cluster Office for the English-Speaking Caribbean and Suriname, the Canadian Red Cross Society | |
| Other partner organizations actively involved in the operation: ODPM, Caribbean Disaster Emergency Management Agency (CDEMA), the Trinidad and Tobago Defence Force including Coast Guard and Regiment, the Trinidad and Tobago Police and Fire Service, the Ministry of Works and Transport, the Ministry of Family Services and Social Development, the Ministry of Rural Development and local government and all other affiliated state entities and civil society organizations. | |

[<Click here for the DREF budget. Click here for the contact information >](#)

A. Situation analysis

Description of the disaster

On Tuesday, 16 October 2018, the Trinidad and Tobago Meteorological Office (TTMS) issued an Adverse Weather Alert (Yellow Level) that predicted showers and thunderstorms due to the presence of an Inter-Tropical Convergent Zone (ITCZ); the warning was in place from Wednesday, 17 to Friday to 19 October. On Thursday, 18 October, the TTMS upgraded the alert to Orange Level, as the ITCZ continued to produce intermittent periods of rainfall and thunderstorms. Late Thursday, 18 October, the TTMS issued a Riverine Flood Alert (Red Level), as river levels exceeded threshold levels and some of them overflowed their banks. Since additional rainfall was forecasted, river levels were expected to remain elevated for the next several days.



TTRCS personnel prepare donated items for delivery to affected communities: Source: TTRCS

On Friday, 19 October, the Piarco International Airport was closed for several hours, as the weather made it impossible for aircraft to land, and the surrounding roadways were flooded. That same day, the ODPM issued Public Advisory #8 at 2031 hours, which alerted the TTRCS Disaster Management system of an ongoing life-threatening operation in the

Greenvale Park community of La Horquetta, where residents were stranded on their roofs due to the rapid onset of floodwaters.

On Saturday, 20 October a national newspaper described the floods as 'catastrophic' (Trinidad Express 20 Oct. 2018), and the Trinidad and Tobago Police Service (TTPS) advised that the main north-south highway was impassable; nevertheless, the country's president has not issued an official national disaster declaration in accordance with the Disaster Measures Act. The persistent rainfall has caused flooding in approximately 80 per cent of the country, primarily the north, east and central parts of the island nation such as Sangre Grande, Matelot, La Horquetta, St. Helena, Caroni and Mayaro. There are reports from ODPM and CDEMA's Situation Report #1 that the flooding has impacted 100,000 to 150,000 people. Additionally, official reports from ODPM and CDEMA indicate that 800 people sought shelter in collective centres during the peak of the emergency; however, the collective centre population is decreasing as affected people return home to begin the cleanup process.

Summary of the current response

Overview of Host National Society.

On 19 October 2018, the TTRCS mobilized an 11-member team of responders, which included shelter management, psychosocial support (PSS), medical and coordination specialists, to conduct an initial assessment and provide medical support in the event of injuries during any rescue operations. Upon their arrival in the community of La Horquetta, the team had to transition from assessment to response mode because rescued residents were being housed at a multi-purpose sporting complex and a primary school approximately one mile from the impacted zone. The deployed TTRCS personnel engaged in shelter support to ensure that proper emergency shelter procedures were implemented, such as the registration of residents, dormitory management and that the affected population's psychosocial needs were met; the situation was exacerbated by the many children who had become separated from their parents due to the emergency.

The TTRCS's medical team and the two ambulances it had at its disposal supported the National Society's rescue operations through the transportation of injured people to health facilities and the evacuation of persons with special needs; the team also conducted a rapid medical evaluation of the rescued people, as these people had been stranded for several hours and partially submerged in floodwaters during that time in many cases.



The TTRCS also addressed the basic needs of the residents who had been marooned outside the flooded community and waited for up to eighteen hours to return to their community through the provision of blankets and water.

Thus far, the TTRCS has deployed the following resources to support the emergency operation:

- 2 ambulances
- 3 support vehicles
- Over 40 volunteers (trained in PSS, shelter management, emergency medical response and first aid)
- In the affected areas, the TTRCS is assisting with the management of one large emergency evacuation centre, which had 77 residents as of 23 October 2018
- The provision of ambulance service to the collective centres and the affected communities
- Support on evacuations and the rescue of affected people
- Provision of PSS to affected community members
- Coordinating the collection and delivery of relief supplies

The TTRCS will conduct detailed damage assessments as flood waters recede; the National Society is currently conducting rapid community level assessments, and it has already assessed the following villages: Kelly Village, Saint Helena, Madras Road, Cumuto, Sangre Grande, Valencia, Rio Claro, Mayaro, La Horquetta Greenvale

Overview of Red Cross Red Crescent Movement in country

- The IFRC has a Country Cluster Support Team (CCST) in Port of Spain, Trinidad. The office and staff provide the TTRCS with technical support through guidance on operational strategy and the implementation of best practices.
- The CCCT's acting head of office and operations manager has been providing technical guidance on this Disaster Relief Emergency Fund (DREF) request
- CCST staff are providing support to the operation's reporting actions
- The international Committee of the Red Cross (ICRC) supports the TTRCS through its regional delegation in Caracas, Venezuela on restoring family links (RFL) and migration actions
- The French Red Cross's Regional Intervention Platform of Americas and Caribbean (PIRAC for its acronym in French) has been in close contact with the TTRCS in accordance with its mutual agreement on disaster management for the Caribbean region with TTRCS; PIRAC had made its pre-positioned stock and personnel available to the TTRCS if necessary
- The Canadian Red Cross Society will deploy a staff member to support the operation, particularly the Cash-based intervention (CBI) component

Overview of non-Red Cross Red Crescent actors in country

The government has activated its National Emergency Operations Centre (NEOC) to coordinate the activities of all on-the-ground responders. National Security agencies are maintaining order and supporting the search and rescue efforts. The Ministry of Works and Transport is attempting to clear roadways and strengthen bridges to facilitate access, while the Ministry of Social Development and Family Services has begun to assess the wellbeing of affected community members. Civil Society, including non-governmental organizations (NGOs), faith-based organizations and corporate bodies, are also providing food, water and clothing to affected people.

The Ministry of Health and the Regional Health Authorities activated their emergency operations, and health teams are working as part of the NEOC-coordinated relief efforts to bring relief to affected residents. Finally, the Ministry of Health activated and established the La Horquetta Health Centre and the Arouca Health Centre as advanced medical posts (Ministry of Health, 20 Oct. 2018).

Needs analysis, targeting, scenario planning and risk assessment

Needs analysis

Water and Sanitation: Prolonged showers have caused the closure of several water processing plants, as muddy waters block intake screens; this forced the Water and Sewerage Authority (WASA) to redistribute water from other parts of the island, thereby reducing the overall supply and the frequency with which it could be delivered. The recession of the floodwaters is not expected to happen quickly due to tidal factors; consequently, affected people have no choice but to transit through the contaminated floodwaters to conduct basic activities, exposing themselves to harmful bacteria and increasing their risk of contracting a waterborne or water-related disease.

The drinking water supply is being supplemented by donations of bottled water to the affected communities; however, access to the flooded communities is limited. The Ministry of Health has published preventative information regarding leptospirosis, post-flooding safe water handling and suggested cleaning and disinfection practices. The collective centres have had regular access to water.

Sanitation is a major concern since evacuated/rescued people could not bring any sanitary items with them. NGOs and government agencies supporting the response operations have requested additional donations of relief items. Maintaining hygiene through access to clean water and hygiene kits is a priority, and health promotion through the dissemination of proper hand washing techniques is required, especially for children who are separated from their parents/guardians.

Livelihoods: According to the president of the Agricultural Society of Trinidad and Tobago, approximately 75 per cent of local farmers have been severely affected through the loss of crops and livestock such as ducks and chickens; the Agricultural Society's president expects that there will be a resultant increase in the price of crops and livestock. Additionally, the flooding is preventing affected people from going to work, especially the people housed in the collective centres. Immediate basic food needs are being met through donations of cooked meals to all the collective centres and the distribution of meals to all the affected communities. The government has set up distribution centres to receive in-kind donations, which will be distributed to affected families; furthermore, various NGOs have been working to meet affected families' immediate food needs.

Health: All public health facilities continue to function. The government has converted two primary health care centres into Advanced Medical Posts to provide 24-hour access to healthcare in the severely affected areas. Government-and TTRCS-provided ambulance services continue to function; however, there is an urgent need to train more volunteers in advanced emergency medical skills (beyond first aid) such as emergency medical responders or emergency medical technicians to manage the complex range of injuries and illnesses faced when rescuing and treating impacted residents.

The affected population has a variety of health-related needs. The critical need is meeting the medication requirements of people with chronic illnesses such as diabetes and high blood pressure. Emergency medical needs have subsided as rescue operations wind down. First Aid is still required in the collective centres; additionally, ambulance services for the affected communities will continue to be needed, as people may injure themselves while engaging in cleanup activities. There is a need for post-disaster vector control since rapid assessments in the affected communities show large amounts of stagnant water in forested areas that are conducive to mosquito breeding. There is a need for long-lasting insecticide treated [mosquito] nets (LLITNs) and vector control sensitization. Many of the affected people will require PSS because of the trauma they have experienced from losing all their belongings, possibly their house, being required to relocate to a collective centre and the uncertainty of when they will be able to return to their house and whether their lost belongings will be replaced; PSS is needed in the collective centres, for people in the affected communities and volunteers working in the field.

The TTRCS established a medical post at the La Horquetta collective centre, where its residents can access basic healthcare from attending doctors who visit daily from the Regional Health Authorities; these doctors are also administering medicine to treat chronic illnesses. The post is manned by emergency medical personnel 24/7, with ambulances on standby to transport critical cases.

During the rescue operation, there were persons with disabilities who required special mobility devices such as wheelchairs, crutches or special medical beds because they lost these items in the flood, and there is no support system to help replace these medical devices.

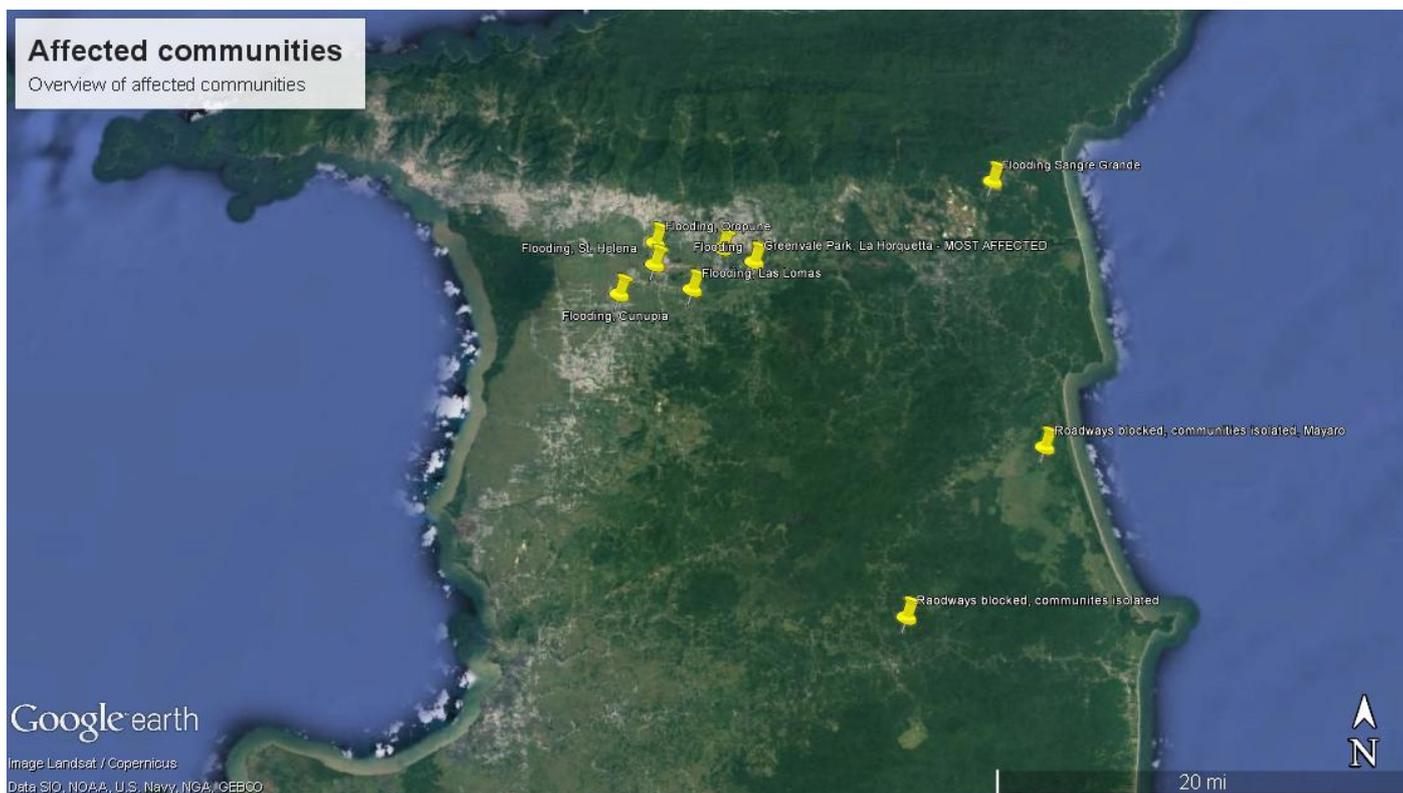
Shelter: A detailed damage assessment of the affected houses has not been conducted yet, as the responding agencies are still staging rescues, and many of the affected areas remain flooded; however, the minister of national security estimated that the flooding affected 4,100 households and 100,000 to 150,000. The extent of damage will vary depending upon the height of flood water. The government's social support mechanism will also kick in as damage assessments begin shortly; nevertheless, the grant application process can take as many as three to six months to process, leaving families virtually homeless as they wait for government grant assistance to begin repairing their homes and replacing lost items.

Many people were forced to seek shelter in emergency evacuation centres during the height of the emergency. Several collective centres are still open on the islands of Trinidad and Tobago; however, the collective centre population is dwindling, as affected people are beginning to return to their homes. While these collective centres are considered short-term (maximum 72 hours) solutions, their use can be extended for months in dire situations such as this.

For shelter, the most severely affected areas are as follows:

- La Horquetta
- Greenvale Park
- Sangre Grande
- Saint Helena

- Kelly Village
- Bamboo Village
- Las Lomas
- Oropune
- Cunupia
- Kelly Village
- Rio Claro
- Mayaro
- Mafeking



The people in evacuation centres require coverage of their basic needs such as food, water and hygiene. Shelter needs correspond to the replacement of lost items such as appliances and furniture and the repair of damaged houses to ensure their structural integrity.

Targeting

- The specific targeting criteria of the operation is based on the assessment conducted together with the National agencies, and the TTRCS's selection of beneficiaries is based on the below criteria, which has been agreed upon with other actors to avoid duplication. The TTRCS will prioritize single-parent households, households not receiving government aid, households whose monthly income is below 2,500 East Caribbean dollars (XCD) (USD 922), households with persons with special needs and the country's migrant population.

Scenario planning

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| Worst-case scenario | Persistent rainfall associated with non-cyclone events, ITCZ and other localized weather phenomenon exacerbate flooding, rendering affected communities inaccessible. Contaminated water sources cause outbreaks of waterborne and water-related diseases. |
| Most Likely scenario | Weather is manageable, and tidal factors allow for the gradual recession of the floodwaters over a two to three-day period, enabling response teams to conduct detailed assessments to register beneficiaries. Within six months, in-country conditions return to pre-flood levels. |

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| Best-case scenario | Rainfall dissipates, allowing the floodwaters to recede and no major flooding occurs for the remainder of the season. |
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Operation Risk Assessment

There are several risks involved as the situation is still unfolding:

- Security in the La Horquetta area can be an issue, as there is some gang activity and residents can become restless if they feel aid is being delivered too slowly; however, the TTRCS has had a strong presence in this community for decades, and it is well respected by community members.
- The TTRCS will not gain access to the affected communities until the water levels recede because the floodwaters are too deep for TTRCS's vehicles to traverse them.
- The TTRCS's lack of required equipment and vehicles
- The success of the operation will depend upon a coordinated response effort between the TTRCS, government agencies and other NGOs. There have been several ad-hoc response deployments from civil society bringing aid to people; however, it has been difficult to coordinate these activities, making inadequate inter-agency coordination a potential threat to the operation

B. Operational strategy¹

Overall Operational objective:

The TTRCS will support 500 families (2,500) in Tunapuna/Piarco, Sangre Grande, Mayaro/Rio Claro and Couva/Tabaquite/Talparo through the provision cash grants, water, sanitation and hygiene promotion (WASH) and health services. The TTRCS will consider gender, protection and inclusion (PGI) in both the planning and implementation of all its actions.

Since the government is covering emergency shelter and the replacement of some of the larger lost household items, the TTRCS's operation will focus on the following lines of intervention:

| Sector | Activity | Justification |
|-------------|--|---|
| Livelihoods | CBI: Distribution of 500 unconditional debit cards for USD\$ 250 to the 500 most vulnerable beneficiary families ² . A RIT specialized in CBI will be deployed to support the National Society on the feasibility study | To ensure that the affected families that are not receiving support from the collective centres or government aid can purchase basic items. TTRCS will need to develop standard operating procedures (SoPs) for the CBI. Since this is the TTRCS's first CBI, the IFRC will deploy a technical person to provide support on it. |
| WASH | Delivery of hygiene kits to 500 families | The flooding has affected sanitary conditions in the affected communities; the hygiene kits will ensure that affected families can maintain good hygiene practices, thus preventing outbreaks of waterborne and water-related diseases, breeding grounds for vectors and other illnesses and ailments caused by unhygienic conditions |
| WASH | Hygiene promotion activities such as a hygiene promotion campaign for affected communities and the printing of graphic material (posters, infographics, brochures) | Ensure that good hygiene practices are in place to prevent disease outbreaks through the maintenance of hygienic conditions |
| Health | Replenishment of the TTRCS's stock of first aid kits | Since the TTRCS is using its stock of first aid kits, the delivery of 10 first aid kits will help replenish its stock. |
| Health | Provision of PSS to affected people | Responding volunteers and affected people can experience trauma during a flood emergency due |

¹ The plan should be prepared by the National Society, with support from the IFRC's technical departments and support services.

² The calculation is based on the amount established by the government: Food Support of XCD 410 (USD\$151), 500 (USD\$184) or 700 (USD\$250) based on family size.

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| | | to the loss of life, their belongings, their livelihoods or the uncertainty surrounding the event; consequently, the TTRCS needs to provide PSS to 500 beneficiary families and its volunteers participating in the operation to ensure their mental health |
| PGI | The TTRCS will conduct PGI workshops with its volunteers and the beneficiary families | Given emergencies adverse impact on affected people's behaviour and family dynamics, it is crucial that the TTRCS incorporate PGI into the planning and implementation of all its actions to prevent sexual and gender-based violence (SGBV) and discrimination and xenophobia, particularly with Trinidad and Tobago's large migrant population, among other relevant PGI-related issues |

Human Resources

The TTRCS has a pool of 250 volunteers and 18 staff that can effectively execute the EPoA. These personnel are currently performing the following roles:

- Volunteers and staff for damage assessments
- Volunteers for emergency medical care
- Staff for administration and finance
- Volunteers for WASH activities

Logistics

Logistics activities aim to effectively manage the supply chain, including the mobilization, procurement, customs clearance, fleet, storage and transport to distribution sites in accordance with the operation's requirements and the IFRC's logistics standards, processes and procedures. All procurement related to this operation will follow the IFRC's standards procurement procedures and Sphere standards for non-food item (NFI) purchases. The TTRCS has experience with procurement based on past regionally funded projects. The National Society has sufficient storage space for the goods to be procured. The TTRCS will attempt to procure all goods locally; the IFRC's Regional Logistics Unit (RLU) will support the TTRCS if regional procurement is required during the operation.

Community Engagement and Accountability (CEA)

CEA is an integral cross-cutting component of all interventions, including health, sanitation, livelihoods, and shelter. Based on the principle of 'information as aid', a CEA approach will ensure that communities targeted through this DREF receive consistent, reliable and actionable information that can empower them to guide the response and recovery process; it will also ensure feedback, questions and complaints from communities are consistently tracked, analyzed and integrated into the operational strategy.

Communications

During the operation, the TTRCS will produce social media content on the operation's progress and disseminate key messages and press releases.

Planning, monitoring, evaluation and reporting (PMER)

The TTRCS's disaster management coordinator is responsible for implementing the EPoA, in coordination with other TTRCS directors. The IFRC will continuously monitor and hold meetings with the TTRCS to keep abreast of the planned actions' progress and the situation's evolution, and IFRC technical staff will also conduct monitoring visits during the operation. The TTRCS will produce one final report at the end of the operation.

C. Detailed Operational Plan



Livelihoods and basic needs

People targeted: 500 families (2,500 people)

Male: 1,000

Female: 1,500

Requirements (CHF): 162,692

Needs analysis: The flooding, one of the most serious emergencies in Trinidad and Tobago in recent years, has crippled the country's transportation network. Many people are stranded in their own communities and thus do not have access to basic items. People who have been rescued and evacuated to collective centres or people that can walk to them are being provided with food, clothing, hygiene and medical care; however, those that do not have access to the collective centres may not be able to meet their basic needs. The programme will aim to provide a cash voucher (or debit card) to targeted households to purchase basic items for USD\$250; the amount of the CBI is based on the average cost of a basic food basket in Trinidad and Tobago³. The TTRCS will conduct a market assessment and a feasibility study to determine the effectiveness of a CBI for the affected communities; likewise, the TTRCS will need to develop SoPs for the CBI. Since this is the TTRCS's first CBI, the IFRC should deploy a technical person to provide support on it.

Population to be assisted: Based on household level assessment, the TTRCS will identify affected people that cannot access basic needs (food, water, hygiene, medical care) in the four most affected regions of Tunapuna/Piarco, Sangre Grande, Mayaro/Rio Claro and Couva/Tabaquite/Talparo.

Programme standards/benchmarks: Provide humanitarian assistance to the affected population, considering the Minimum Standards set out in the Sphere Manual; the IFRC's Fundamental Principles and mandate; the IFRC's Strategic Framework on Disability Inclusion; the IFRC's Minimum Standard Commitments to Gender and Diversity in Emergencies; the Code of Conduct; and other documents related to the Movement and other organizations that provide quality humanitarian assistance in a dignified manner.

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| P&B Output Code | Livelihoods and basic needs Outcome 1: Affected population's economic security is supported | |
| | Livelihoods and basic needs Output 1.1: Households are provided with unconditional/multi-purpose cash grants to address their basic needs | <p># of families that receive CBI debit cards Target: 500 families</p> <p># of TTRCS volunteers that receive CBI refreshment briefing Target: 10</p> <p># of assisted households able to meet (Survival) Minimum Expenditure Basket needs (including food items, food-related non-food items) Target: 500 households</p> |

³ Costs are elevated in Trinidad and Tobago because it is a high-income country according to the World Bank.

| | | Activities planned Weeks | | | | | | | | | | | | | | | |
|-------|--|--------------------------|---|---|---|---|---|---|---|---|----|----|----|----|----|----|----|
| | | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 |
| AP081 | CBI Refreshment for TTRCS volunteers | | | ■ | ■ | | | | | ■ | ■ | | | | | | |
| AP081 | Distribution of 500 debit cards to 500 beneficiary families | | | ■ | ■ | ■ | | | | | | | | | | | |
| AP081 | Conduct a cash feasibility study for a CBI | | ■ | | | | | | | | | | | | | | |
| AP081 | Conduct a rapid market analysis | | ■ | | | | | | | | | | | | | | |
| AP081 | Conduct a beneficiary satisfaction survey | | | | | | | | ■ | | | | | | | | |
| AP081 | Purchase of an Open Data Kit (ODK) (15 telephones purchased locally) | ■ | ■ | | | | | | | | | | | | | | |
| AP081 | Deployment of a CBI Regional Intervention Team (RIT) member | | ■ | ■ | ■ | ■ | ■ | ■ | ■ | | | | | | | | |



Health

People targeted: 500 families (2,500 people)

Male: 1,000

Female: 1,500

Requirements (CHF): 18,137

Needs analysis: The affected population has a variety of health-related needs. The critical need is meeting the medication requirements of people with chronic illnesses such as diabetes and high blood pressure. Emergency medical needs have been subsiding as rescue operations wind down; nonetheless first Aid is still required in the collective centres. Additionally, ambulance services for the affected communities will continue to be needed, as people may injure themselves while engaging in cleanup activities. PSS is needed in the collective centres, for people in the affected communities and for the TTRCS volunteers working in the field.

Population to be assisted: The target population for the provision of PSS will be a total of 500 families (2,500 people) in the collective centres and the affected communities.

Programme standards/benchmarks: Provide humanitarian assistance to the affected population, considering the Minimum Standards set out in the Sphere Manual; the IFRC's Fundamental Principles and mandate; Trinidad and Tobago's Ministry of Health; the IFRC's Strategic Framework on Disability Inclusion; the IFRC's Minimum Standard Commitments to Gender and Diversity in Emergencies; the Code of Conduct; and other documents related to the Movement and other organizations that allow for the provision of quality humanitarian assistance in a dignified manner.

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| P&B Output Code | Health Outcome 2: The immediate risks to the health of the affected population are reduced | |
| | Health Output 2.1: Target population is provided with rapid medical management of injuries and diseases | # of people reached through first aid services. Target: 2,500 people # of health posts established in the collective centres |



Water, sanitation and hygiene

People targeted: 500 families (2,500 people)

Male: 1,000

Female: 1,500

Requirements (CHF): 39,612

Needs analysis: The water supply has not been significantly affected. Nine water treatment plants were shut down during the height of the flooding, as the river water intake screen quickly become blocked. WASA immediately began to redistribute water from other parts of the island to ensure a reliable source of water was provided to the affected communities. Access to sanitation items, i.e., hygiene kits, with additional consideration for women, and infants is limited because people are still stranded in their communities and thus cannot access shops to purchase items.

Population to be assisted: The target population for this sector is 500 families (2,500 people) in Tunapuna/Piarco, Sangre Grande, Mayaro/Rio Claro and Couva/Tabaquite/Talparo.

Programme standards/benchmarks: Provide humanitarian assistance to the affected population, considering the Minimum Standards set out in the Sphere Manual; the IFRC's Fundamental Principles and mandate; the IFRC's Strategic Framework on Disability Inclusion; the IFRC's Minimum Standard Commitments to Gender and Diversity in Emergencies; the Code of Conduct; and other documents related to the Movement and other organizations that allow for the provision of quality humanitarian assistance in a dignified manner.

| P&B Output Code | WASH Outcome 3: Vulnerable people have increased access to appropriate sanitation and hygiene services | | | | | | | | | | | | | | | | |
|-----------------|---|---|---|---|---|---|---|---|---|---|----|----|----|----|----|----|----|
| | WASH Output 3.1: Hygiene-related goods (NFIs), which meet Sphere standards and training on how to use those goods, is provided to the target population | | | | | | | | | | | | | | | | |
| | Activities planned | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 |
| AP030 | Monitor use of hygiene kits and water treatment products and user's satisfaction through household surveys | | | | | | | | | | | | | | | | |
| AP030 | Distribute 500 hygiene kits (sufficient for 1 month) to 500 families. | | | | | | | | | | | | | | | | |
| P&B Output Code | WASH Outcome 4: Sustainable reduction in risk of waterborne and water-related diseases in target communities | | | | | | | | | | | | | | | | |
| | WASH Output 4.1: Hygiene promotion activities are provided to the target population | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |

of families that receive hygiene kits

Target: 500 families

of household surveys administered to families

Target: 150 families

of hygiene promotion campaigns for affected communities

Target: 1

of people reached through hygiene promotion campaign

Target: 500 families

| Activities planned Week | | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 |
|-------------------------|---|---|---|---|---|---|---|---|---|---|----|----|----|----|----|----|----|
| AP030 | Hygiene promotion campaign for affected communities | | | | | | | | | | | | | | | | |
| AP030 | Printing of graphic material (posters, infographics, brochures) | | | | | | | | | | | | | | | | |
| AP030 | Social media campaign (radio) | | | | | | | | | | | | | | | | |



Protection, Gender and Inclusion⁴

People targeted: 500 families (2,500 people)

Male: 1,000

Female: 1,500

Requirements (CHF): 6,477

Needs analysis: Data on the composition of the affected families is needed, i.e., whether they are female-headed households, extended families, a nuclear family, a teenage mother and so forth to tailor the aid and the key messages to the impacted population. The affected female population needs to be made aware of how to report cases of gender violence, specifically sexual violence, and TTRCS volunteers need to receive training on managing these situations; this is especially important in emergencies since the heightened stress can increase the risk of SGBV.

Population to be assisted: The target population for this sector is 500 families (2,500 people) in Tunapuna/Piarco, Sangre Grande, Mayaro/Rio Claro and Couva/Tabaquite/Talparo.

Programme standards/benchmarks: Provide humanitarian assistance to the affected population, considering the Minimum Standards set out in the Sphere Manual; the IFRC’s Fundamental Principles and mandate; the IFRC’s Strategic Framework on Disability Inclusion; the IFRC’s Minimum Standard Commitments to Gender and Diversity in Emergencies; the Code of Conduct; and other documents related to the Movement and other organizations that allow for the provision of quality humanitarian assistance in a dignified manner.

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| P&B Output Code | Inclusion and Protection Outcome 5: Communities identify the needs of the most vulnerable and particularly disadvantaged and marginalized groups, as a result of inequality, discrimination and other non-respect of their human rights and address their distinct needs | | | | | | | | | | | | | | | | |
| | Inclusion and Protection Output 5.1: TTRCS programmes improve equitable access to basic services, considering different needs based on gender and other diversity factors | <p># of activities that consider Gender, Social Inclusion and Disability issues within their planning and implementation Target: 100% of activities</p> <p># of people reached through community sensitization sessions Target: 2,500</p> | | | | | | | | | | | | | | | |
| | Activities planned | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 |

⁴ Since this this Area of Focus is still under development, it is temporarily composed of what was previously the Social Inclusion and Culture of Non-violence and Peace Area of Focus.

Budget

Please see the attached budget.

Contact Information

For further information, specifically related to this operation please contact:

In the Trinidad and Tobago Red Cross Society:

- Email: admin@ttrcs.org

In the IFRC Country Cluster Support Team:

- Kwan Ho Timothy LAM, acting head of the English-speaking Caribbean's CCST and operations coordinator, email: Timothy.LAM@ifrc.org

In the IFRC regional office for the Americas:

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For Resource Mobilization and Pledges:

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For Performance and Accountability (planning, monitoring, evaluation and reporting enquiries)

- Paula Martes; Planning, Monitoring and Reporting Team Coordinator; email: paula.martes@ifrc.org

In Geneva:

- Carmen Ferrer, Operational Support Disaster and Crisis (Prevention, Response and Recovery); email: carmen.ferrer@ifrc.org

DREF Operation

MDRTT001 - Trinidad and Tobago Floods

29/10/2018

| Budget Group | DREF Grant Budget CHF |
|--|--------------------------|
| Shelter - Relief | 0 |
| Shelter - Transitional | 0 |
| Construction - Housing | 0 |
| Construction - Facilities | 0 |
| Construction - Materials | 0 |
| Clothing & Textiles | 0 |
| Food | 0 |
| Seeds & Plants | 0 |
| Water, Sanitation & Hygiene | 17,439 |
| Medical & First Aid | 9,965 |
| Teaching Materials | 14,699 |
| Utensils & Tools | 0 |
| Other Supplies & Services | 0 |
| Emergency Response Units | 0 |
| Cash Disbursements | 130,544 |
| Total RELIEF ITEMS, CONSTRUCTION AND SUPPLIES | 172,647 |
| Land & Buildings | 0 |
| Vehicles | 0 |
| Computer & Telecom Equipment | 0 |
| Office/Household Furniture & Equipment | 0 |
| Medical Equipment | 0 |
| Other Machinery & Equipment | 0 |
| Total LAND, VEHICLES AND EQUIPMENT | 0 |
| Storage, Warehousing | 0 |
| Distribution & Monitoring | 3,991 |
| Transport & Vehicle Costs | 8,969 |
| Logistics Services | 3,493 |
| Total LOGISTICS, TRANSPORT AND STORAGE | 16,453 |
| International Staff | 15,944 |
| National Staff | 0 |
| National Society Staff | 997 |
| Volunteers | 7,252 |
| Other Staff Benefits | 0 |
| Total PERSONNEL | 24,193 |
| Consultants | 0 |
| Professional Fees | 0 |
| Total CONSULTANTS & PROFESSIONAL FEES | 0 |
| Workshops & Training | 4,285 |
| Total WORKSHOP & TRAINING | 4,285 |
| Travel | 7,474 |
| Information & Public Relations | 2,292 |
| Office Costs | 3,737 |
| Communications | 100 |
| Financial Charges | 3,189 |
| Other General Expenses | 0 |
| Shared Office and Services Costs | 0 |
| Total GENERAL EXPENDITURES | 16,791 |
| Partner National Societies | 0 |
| Other Partners (NGOs, UN, other) | 0 |
| Total TRANSFER TO PARTNERS | 0 |
| Programme and Services Support Recovery | 15,234 |
| Total INDIRECT COSTS | 15,234 |
| TOTAL BUDGET | 249,603 |