



American Red Cross



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Saving Lives in the Caribbean through Preparedness

August 25th 2011 – February 24th 2014

AID-OFDA-G-11-00189

ANNUAL REPORT

August 24th 2012 – September 30th 2013

Submitted December 23, 2013

1. Executive Summary

The Caribbean is a region at risk. This low-lying and densely-populated area is highly-exposed to natural disasters. Climate change, rising sea levels, and increased storm intensity will only amplify the impact of future disasters. Over the past decade, the number and severity of natural disasters occurring in the region increased precipitously, including hurricanes, floods flash floods, landslides and mudslides.¹ The resulting loss of life, livelihoods, and assets undermines the health and long-term survival of many communities across the Caribbean.

Since 2007, the U.S. Agency for International Development's Office of Foreign Disaster Assistance (USAID-OFDA) has generously supported American Red Cross' (ARC) work with National Societies (NS) in the Caribbean to reduce vulnerabilities through local awareness and capacity building activities. ARC is currently wrapping up the OFDA/ARC-funded *Saving Lives in the Caribbean Through Preparedness (Saving Lives)* project, a two-and-half year initiative (\$1,778,817) that builds on previous community-based disaster risk reduction program success (August 25, 2011–February 24, 2014), and is aimed at reducing the number of deaths, injuries and socio-economic impact from climate-related disasters and other emergencies in Caribbean communities. The *Saving Lives* project is being implemented in partnership with NS from Bahamas, Belize, and St. Lucia.

In the past year, significant progress has been made across all three target countries, including:

- Two hundred and seventy-nine community disaster responders from twenty-nine communities trained;
- Three thousand family preparedness plans developed;
- Three hundred and twenty-nine people trained in First Aid;
- Twenty micro-mitigation projects aimed at reducing the impact of multiple disasters were either completed or are currently being implementing;
- Forty-three National Intervention Team (NIT) members trained;
- Project Management in Development (PMD-Pro) training implemented;
- Partnerships developed with regional reference centers. For example, Terms of References were created to host an internship at the Caribbean Disaster Risk Management Reference Center (CADRIM) to update the Community Disaster Response Team (CDRT) manual² and adapt and translate the “Basic Training Skills” toolkit developed by the Costa Rica Reference Center for Community Resilience;
- Key project positions were filled, including a Disaster Management Project Officer and a Caribbean Program Management Delegate; and
- A six-month (\$150,000) OFDA cost extension was awarded in July 2013, extending the project end date from August 24, 2013 to February 24, 2014.

The annual report detailed below provides an overview of our key accomplishments, challenges, and lessons learned.

¹ The Hyogo Framework for Action-2005-2015, Midterm Review Building the Resilience of Nations and communities to Disasters. UNISDR.

² The updated CDRT manual will cover additional themes, including climate change, youth and disasters, public health in emergencies, and disaster communications.

2. Project Information

| | | | |
|--|--|-------------------------------------|---|
| Project Name: | Saving Lives in the Caribbean through Preparedness | | |
| Donor Name | OFDA / USAID | | |
| Region: | Caribbean | Location/Coverage/Countries: | Bahamas Belize St. Lucia |
| Project Sector(s): | Disaster Management | Grant # or ID: | AID-OFDA-G-11-00189 |
| Project Duration (Start and End Dates): | Start: August 25 th 2011 End: February 24 th 2014 | Project Manager: | Christopher Chin & Chloe Guazzone-Rugebregt |
| Funded Amount: | \$1,126,951 USD | Prepared by: | Chloe Guazzone-Rugebregt & Christopher Chin |
| ARC Cost Share/Match: | \$651,866 USD | Report Approved by: | |
| Total Budget Amount: | \$1,778,817 USD | Number of Beneficiaries: | 75,260 |

3. Project Overview

The strategic goal of the *Saving Lives in the Caribbean through Preparedness* program is to **reduce the number of deaths, injuries and socio-economic impact from climate-related and other disasters in Caribbean communities**. The program seeks to achieve this goal via a two-pronged approach that is focused on simultaneously strengthening institutional and community capacity to prepare for and respond to disasters:

Objective 1: Enhance Red Cross capacity to deliver, coordinate, and advocate for disaster risk management.

Objective 2: Reduce disaster risk and increase the resiliency of vulnerable communities.

The current program follows on the former five-country (Antigua & Barbuda, Bahamas, Haiti, St. Kitts & Nevis and St. Lucia) OFDA-funded *Readiness to Respond* project in the Caribbean. The *Saving Lives in the Caribbean through Preparedness (SLIC)* program has incorporated lessons learned from previous phases of this project and other community based disaster management (CBDM) projects carried out in the region during the last year. In addition, this project has also complemented and leveraged resources invested through other disaster preparedness (DP) projects in the region.

The program's design and implementation has been guided by the Caribbean Disaster Management Strategy, 2009-2014. This strategy has identified a core set of CBDM activities that are being implemented as part of all Red Cross CBDM

projects over this five-year period. It will also serve as a tool for benchmarking and measuring progress over time for the entire region.

The countries targeted under this program include: **Bahamas, Belize and St. Lucia.** These countries were selected following a series of meetings with the Caribbean Red Cross Disaster Management Network and Red Cross NSs to identify key selection criteria highlighting interests, resources, and gaps.

The program originally aimed to reach a total of **75,260** direct beneficiaries over two years, accounting for populations across 34 communities.³ Through this project, we have continued to develop beneficiary counting guidelines, emphasizing more conservative estimates and reporting; as a result, we estimate a more accurate direct beneficiary target to be **10,780** direct beneficiaries across **34 communities.** This estimate for direct beneficiaries includes participants in NIT trainings, First Aid instructor trainings, direct recipients of household preparedness plans, families that can be served by pre-positioned stocks, and beneficiaries from school-based DRR programming. The revised number of direct beneficiaries does not include beneficiaries of micro-mitigation projects due to the complexity of defining relevant activities as direct or indirect.⁴ As a result, the LOP beneficiaries reached is significantly lower than originally targeted (23%). The revised beneficiary target does not change the scope of the project (target communities or activities implemented); rather, it aims to capture a more rigorous and accurate description of the *Saving Lives* project’s direct beneficiaries. Given our revised methodology for counting direct beneficiaries, we will report against our original target and the revised target noted above (see the “Analysis” section for additional details).

4. Results to Date

Table 1: Indicator Status

The status of the project Indicators and narrative description, including the three USAID-OFDA indicators and eight additional) ARC project indicators (Additional Project Indicator (API) 1 - 8), are detailed below.

| USAID/OFDA INDICATOR | | | | | |
|---|-------------------|-------------------|--------------|---------------|----------------------|
| | Actuals Year 1 | Actuals Year 2 | LOP Total | LoP Target | % of LoP achieved |
| 1 Number of people trained in Disaster Preparedness, mitigation and management | 782 | 1236 | 2018 | 2169 | 93% |
| Bahamas | | | | | |
| Number of individuals who are NIT Trained | 0 | 12 | 12 | 25 | 48% |
| API 3 Number of First Aid Trainers and/or Instructor Trainers trained | 0 | 14 | 14 | 15 | 93% |
| API 5 Number of community members who have completed a First Aid Course | 69 | 74 | 143 | 100 | 143% |
| Average number of people participating in Vulnerability & Capacity Assessments | 58 | 241 | 299 | 250 | 120% |
| API 6 Number of individuals who are part of a CDRT/CERT Team | 22 | 51 | 73 | 127 | 57% |
| Belize | | | | | |
| Number of individuals who are NIT Trained | 0 | 19 | 19 | 25 | 76% |
| API 3 Number of First Aid Trainers and/or Instructor Trainers trained | 0 | 0 | 0 | 0 | N/A |
| API 5 Number of community members who have completed a First Aid Course | 148 | 206 | 354 | 280 | 126% |
| Average number of people participating in Vulnerability & Capacity Assessments | 163 | 155 | 318 | 280 | 114% |
| API 6 Number of individuals who are part of a CDRT/CERT Team | 15 | 140 | 155 | 280 | 55% |
| St. Lucia | | | | | |
| Number of individuals who are NIT Trained | 0 | 12 | 12 | 25 | 48% |
| API 3 Number of First Aid Trainers and/or Instructor Trainers trained | 0 | 11 | 11 | 12 | 92% |
| API 5 Number of community members who have completed a First Aid Course | 106 | 49 | 155 | 250 | 62% |
| Average number of people participating in Vulnerability & Capacity Assessments | 149 | 179 | 328 | 250 | 131% |
| API 6 Number of individuals who are part of a CDRT/CERT Team | 52 | 73 | 125 | 250 | 50% |

³ This project Original targeted: 10 communities and 8,507 direct beneficiaries in the Bahamas, 14 communities and 55,200 direct beneficiaries in Belize, and 10 communities and 11,553 direct beneficiaries in St. Lucia).

⁴ The original direct beneficiary target used community populations from micro-mitigation activities to set targets. This original methodology counted many indirect beneficiaries as direct; as a result, we revised our methodology to be more conservative, not counting any direct beneficiaries from micro-mitigation activities. It is held that the direct beneficiaries from the micro-mitigation activities will already be captured through other community-based activities.

Indicator 1

At the regional level, the number of people reached through Disaster Preparedness (DP), mitigation, and management training opportunities is on track. With 5 more months left in the project period, cumulative targets have reached 93% achieved (LOP totals/LOP targets). For the first OFDA required indicator; Number of individuals who are NIT trained, all NSs have held NIT training and have cumulatively trained 43 individuals representing 58% of the LOP target. No further NITs trainings are scheduled to take place for the second OFDA required indicator. At the onset of the project, targets had not been set for this activity and in hindsight were unrealistic given the size of the NS and interest and time available for 25 staff or volunteers to participate in NIT training. Average number of people participating in a Vulnerability and Capacity Assessment (VCA), NSs have achieved 122% of the LOP target and have completed this activity for the project cycle. All three NSs have ramped up delivery on each project activity during the year and are wrapping up community trainings as they move to the final project activities including mitigation projects. All three NS have completed the formation of CDRT teams, NIT Trainings and/or First Aid Instructor Trainings⁵. Over the 6 months-cost extension, Bahamas and St. Lucia will complete the remaining 5 communities, rolling out the full community-based DRR project scope which will increase the LOP achieved beneficiaries.

In the **Bahamas**, Project targets are either on target or fully achieved for all major project activities under USAID-OFDA outcome 1 except for NITs trained. Although the training was held, only 13 people participated with 12 people successfully being certified. Due to the reasons aforementioned above, the project has not scheduled an additional NIT training for the sake of achieving the LOP target and has instead focused on the community based activities including VCAs and First aid courses in which targets were exceeded. BRC continues to face challenges in low community participation and difficulty particularly in the new urban communities (Bain Town 1, 2, 3 and 4). Therefore, targets for CDRT/CERT teams trained is low at 57% achieved but the BRC did manage to train a greater number in year 2 (51) than year 1 (22). As part of a “One BRC” approach SLIC activities are being combined with activities implemented by other projects, particularly in the hard to reach areas. This is already showing promise to result in greater turnout and participation in future activities for the upcoming remainder of the project cycle.

In **Belize**, successful implementation of all activities under OFDA outcome 1 has continued in year 2. NIT training was completed with 19 individuals successfully certified (76% of LOP target). Again, targets were set without taking into account the NS staff and volunteers available to participate in the training. As such, one NITS training was held and emphasis in year two has focused on completing community-based activities. Although, FA trainings for new instructors were not planned, refresher trainings were held in March 2013 for First Aid instructors who were certified in year one of the project. One hundred and sixty-nine individuals participated in a VCA training representing 60% of LOP target achieved. Finally, Belize has achieved 55% of it’s LOP target for CDRTs, 140 individuals forming a CDRT team were trained in the last year compared to year 1 figures (15).

In **St. Lucia**, targets are all well underway and almost fully achieved with the exception of participants in the NIT and CDRT trainings (same reason as mentioned above in the previous two NSs). St. Lucia continues to have challenges getting commitments from community members to participate in longer trainings thus, the LOP target achieved for number of individuals receiving first aid training is 62% compared to all 3 of the other activities (first aid instructor training, and VCAs) that are anywhere from 70-100% achieved with 5 months still left in the project.

⁵ Target for Number of First Aid Trainers and/or Instructor Trainers is 0 in Belize as the National Society conducted a First Aid Instructor Training in mid-2011 and does not anticipate needing training or a refresher training during the Life of Project. In St. Lucia, the target is 0 as the National Society may conduct training in June 2013, but these plans may be subject to change once the National Society assesses needs.

Indicator 2

| USAID/OFDA INDICATOR | | | | | | |
|----------------------|--|----------------|----------------|-------------|------------|-------------------|
| 2 | Number and percent of beneficiaries retaining disaster preparedness, mitigation and management knowledge two months after training | Actuals Year 1 | Actuals Year 2 | LOP Actuals | LoP Target | % of LoP achieved |
| | | 0 | 0 | 0 | 0 | 0% |
| <u>Bahamas</u> | | | | | | |
| <u>Belize</u> | | | | | | |
| <u>St. Lucia</u> | | | | | | |

While National societies have been conducting several activities (VCA, first aid, CDRT training etc.) aimed at ensuring that community members increase and retain disaster preparedness, mitigation and management knowledge; pre-test, and post-tests⁶ two month after trainings/activities take place, are not been implemented. This is in part due to the logistical challenges associated with returning to communities and being able to gather an adequate number⁷ of community members to conduct post-training tests. Additionally, in the case of VCA, it is challenging to develop pre and post tests given that the information produced through VCA sessions is unique to each community and dependent on the input provided by the community members participating in the VCA sessions.

As stated in the prior annual report, ARC is working with the NSs to use the information gathered from the John Hopkins University’s (JHU) Community Based Disaster Risk Reduction (CBDRR) household survey and will be used as a proxy in two ways. First, the tool is used to assess a community’s knowledge base and knowledge retention of DP, mitigation and management concepts. Second the tool will assess whether a community has taken action to increase its state of readiness in the event of a disaster⁸.

Currently, National Societies have implemented baseline surveys in 29 communities where VCAs have been conducted. NSs were slow to input the data and conduct the analysis in year 1. It was decided that baselines would not be conducted in 5 communities where NSs are beginning project activities during the cost-extension period. This decision was taken so that human resources would not be directed towards conducting surveys in communities that would not experience an amount of coverage among the population as a whole to show impact from baseline to endline (a period of 6-months). Endline surveys for all other long-standing project communities are being planned in 29 communities where project activities are completed, thereby allowing for the change over time and comparison of key risk knowledge and awareness indicators, among others⁹.

⁶ In the case of certain DP, mitigation and management trainings (e.g. First Aid, CDRT, NIT trainings etc.) pre-post tests are conducted to assess knowledge increase of DP, mitigation management concepts. However these tests are usually implemented immediately after the training has been completed. CDRT knowledge is also tested through a simulation exercise as are other skills to ensure that knowledge is reinforced through practice.

⁷ In order for pre-and post-test results to have statistical significance, National Societies would have to ensure that the same individuals participating in activities would be available to take post-tests two months after the given activities have been conducted. Additionally, the number of post-test conducted would have to be close to or equivalent to the number of pre-tests conducted.

⁸ To monitor and evaluate achievement toward increasing community resilience and reducing disaster impact, JHU household level surveys are carried out in each of the project communities. The survey, which consist of 100 household level questionnaires, 1-2 focus group discussions with community members and one community checklists, captures information on where a community stands against the Hyogo Framework resiliency domains: 1) Governance, 2) Risk Knowledge, 3) Public Awareness 4) Risk Reduction and 5) Preparedness. Per the framework, the stronger a community’s capacity in each of these five areas, the better a community will be able to reduce disaster impact. Project activities conducted with communities are aimed at increasing a community’s strength in each of these five domains. Following completion of project activities, an end line survey is conducted to determine whether the five resiliency domains were strengthened in the community.

⁹ For the same reasons stated earlier, the JHU household survey results will also be used a proxy to report on Additional Project Indicator 4 (API 4): “% increased of families that have taken preparedness actions and feel better [prepared to handle a disaster situation”.

The administration and subsequent analysis of the JHU baselines and ending survey has proven to be a time consuming process. As such, American Red Cross has liaised with the Central American Region to utilize mobile phone technology to conduct endline surveys in Belize. Currently, the surveys have been uploaded into the survey platform and 1 of the 3 NSs are scheduled to receive training in the use of mobile phone technology to conduct endline surveys which will remove the step of manually entering survey data and greatly facilitate the analysis process. Unfortunately, both St Lucia and Bahamas had already begun endline data collection using pen and paper when Belize RC was able to benefit from an online training via another ARC funded project.

In the Bahamas, the baseline survey has been conducted and data entry for eight communities has been completed. The results will be compared with the endline survey for these same eight communities which are currently being conducted. The NS has completed three communities for the endline and plans on completing the other communities by the end of January 2013. In St. Lucia, baseline surveys for seven communities were completed. The NS has planned to complete the endline survey by the end of January. Belize completed baselines for all fourteen communities and endline surveys have been completed in 10 of 14 communities. Three are currently underway and one is scheduled to take place mid-December. Mobile phones were successfully used and data will be automatically generated and easily comparable to data sheets from the baseline.

Indicator 3

| USAID/OFDA INDICATOR | | | | | |
|---|-------------------|-------------------|----------------|---------------|----------------------|
| | Actuals Year 1 | Actuals Year 2 | LOP Actuals | LoP Target | % of LoP achieved |
| 3 Number of hazard risk reduction plans policies or curriculum developed | 1029 | 2645 | 3674 | 11060 | 33% |
| Bahamas | | | | | |
| API 1 Number of NS HQ and Branch Preparedness and/or Contingency Plans Updated | 0 | 1 | 1 | 2 | 50% |
| API 1 Number of National level simulation exercises conducted | 0 | 1 | 1 | 1 | 100% |
| Number of community level disaster plans completed | 3 | 3 | 6 | 10 | 60% |
| Number of community engagement plans developed | 1 | 0 | 1 | 10 | 10% |
| Number of persons participated in the development of community engagement pl | N/A | 0 | 0 | 50 | 0% |
| Number of community level simulation exercises conducted | 3 | 7 | 10 | 15 | 67% |
| Number of community persons involved in the simulations | 34 | 79 | 113 | 118 | 96% |
| Number of Family Preparedness Plans distributed and developed by households | 696 | 1125 | 1821 | 2858 | 64% |
| Belize | | | | | |
| API 1 Number of NS HQ and Branch Preparedness and/or Contingency Plans Updated | 2 | 0 | 2 | 7 | 29% |
| API 1 Number of National level simulation exercises conducted | 0 | 0 | 0 | 1 | 0% |
| Number of community level disaster plans completed | 0 | 14 | 14 | 14 | 100% |
| Number of community level simulation exercises conducted | 0 | 14 | 14 | 14 | 100% |
| Number of community persons involved in the simulations | 0 | 119 | 119 | 168 | 71% |
| Number of Family Preparedness Plans distributed and developed by households | 0 | 700 | 700 | 6252 | 11% |
| St. Lucia | | | | | |
| API 1 Number of NS HQ and Branch Preparedness and/or Contingency Plans Updated | 0 | 0 | 0 | 0 | 0% |
| API 1 Number of National level simulation exercises conducted | 0 | 0 | 0 | 1 | 0% |
| Number of community level disaster plans completed | 3 | 4 | 7 | 10 | 70% |
| Number of persons participated in the development of community engagement pl | 0 | 0 | 0 | 50 | 0% |
| Number of community disaster plans distributed | 0 | 101 | 101 | 208 | 49% |
| Number of community level simulation exercises conducted | 3 | 4 | 7 | 21 | 33% |
| Number of community persons involved in the simulations | 62 | 73 | 135 | 250 | 54% |
| Number of Family Preparedness Plans distributed and developed by households | 222 | 400 | 622 | 1000 | 62% |

Because many of the indicators set for OFDA indicator 3 were dependent on project activities completed in the first and second year, the work on this indicator is being heavily implemented in the last months of the project and is expected to be achieved by the end of the project.

Regionally, 33% of the LOP target has been achieved for the number of hazard risk reduction plans, policies or curricula developed. While the percentage of total targets achieved is low, it is expected to increase during the last 5 months of

the project and achievements vary. In particular, St Lucia has struggled to maintain the basic requirements necessary for successful program management resulting in some significant delays. The Caribbean Delegation has worked closely with the St. Lucia Red Cross to improve their program management, emphasizing the adoption of policies and procedures to promote enhanced efficiency and accuracy. The cost extension has given projects additional time to continue the completion of community based trainings in 5 remaining communities in order to roll into the activities that fall under OFDA objective 3. A total of 29 project communities (14 Belize; 7 St Lucia; 8 Bahamas) in the three countries have completed VCAs. The remaining 5 project communities where work was initiated during the cost extension have begun their VCAs and will be at a stage where they have sufficient information to develop community disasters plans and conduct simulation exercises during the remaining project period. All three NSs have formed CDRTs in the 29 project communities enabling them to work closely with the National Society distributing family preparedness plans to households in their communities.

In **Bahamas**, under the NS strategic approach of “one BRC” the SLIC Bahamas team has been able to leverage the support of staff and volunteers from other projects to make significant headway in year 2 in completing objectives towards the number of community level simulations that are carried out and the number of family hazard plans distributed. In terms of the development of NS plans, the Well-Prepared National Society Self-Assessment was finalized by the BRCS Director General (DG). The NS also developed a First Aid Business Plan by September 2013. This business plan continued to be enhanced as a working document for BRC management. In addition, the BRC collaborated with NEMA or Nassau Airport Development to conduct NS assessments and simulation exercises. At the community level, a total of three community disaster plans and community simulation/demonstrations were completed. The development of family preparedness plans has ensured that over 1,125 households are better prepared for community disasters.

In **Belize**, 100% of the target has been met for community level disaster plans completed. The team has distributed 6,000 family preparedness plans among the 14 communities but 700 or 11% of the target have been fully developed with the families. CDRTs are expected to increase the LOP achievements significantly by the end of the project. The Belize NHQ contingency plan along with Stan Creek who updated their branch plan was updated in March 2012 and represents 29% of the target achieved. BzRC was led in the Organizational Capacity Assessment and Certification (OCAC) process in collaboration with the International Federation of the Red Cross (IFRC). The target for the number of simulations was achieved with attendance of 71% of the LOP target for number of participants.

In St. Lucia,

St. Lucia continues to have challenges meeting their targets due to staffing and organizational challenges. However, their targets remain around 50-60% achieved and they also have made significant progress in the 2nd project year towards Indicator 3. They completed all remaining VCAs in the 2nd year which facilitated the distribution of 622 family disaster plans (62% LOP target achieved). SLRC doubled their achievements of community simulations and family preparedness plans distributed. Like with the other two NSs now that significant activities have been carried out in all communities, activities such as distributing family preparedness plans are expected to increase significantly for the remainder of the project.

Additional Project Indicator 2 (API 2)

| | Actuals Year 1 | Actuals Year 2 | LOP Actuals | LoP Target | % of LoP achieved |
|---|-------------------|-------------------|----------------|---------------|----------------------|
| API 2 Number of families that can be served by pre-positioned stocks** | 1700 | 0 | 1700 | 0 | 100% |
| Bahamas | | | | | |
| API 2 Number of families that can be served by pre-positioned stocks | N/A | N/A | N/A | N/A | N/A |
| Belize | | | | | |
| API 2 Number of families that can be served by pre-positioned stocks | 1700 | 0 | 1700 | 1700 | 100% |
| St. Lucia | | | | | |
| API 2 Number of families that can be served by pre-positioned stocks | N/A | N/A | N/A | N/A | N/A |

ARC's support of this activity was based on the availability of pre-positioned stocks by other sources along with the expectation of onset disasters. The results of these activities continue to be contingent on the realization of stock availability and disaster onset.

Currently information, on the number of families that can be served by pre-positioned stocks is not available for all national societies under the *Saving Lives in the Caribbean through Preparedness* program, as many national societies in the Caribbean region are currently examining and revamping their pre-positioned stocks logistics system.¹⁰ Therefore, information on pre-positioned stocks is currently under review and is subject to change.

Under the *“Readiness for Response Prepositioning in Caribbean Red Cross Societies”* program, funded by the Japanese Red Cross, the IFRC is working with Caribbean Red Cross societies to build each National Society's logistics capacity. The program, which started in July 2012, is currently targeting 6 Caribbean National Societies including Belize and Bahamas. As part of this program all National Societies will appoint an individual from the National Society to serve as a logistics focal point, who will work to develop guidelines and systems for inventory management and will also work with CDRTs to pre-position stocks in key locations.

As this program continues to develop, ARC works closely with the IFRC's Caribbean Regional Representation Office and the National Societies under the *Saving Lives in the Caribbean through Preparedness* program support these efforts peripherally via CDRT team members, OD efforts to enhance guidelines, systems and human resources.

Additional Project Indicator 7 (API 7)

¹⁰ During disasters, National societies in the Caribbean region have been able to rely on the IFRC's Regional Logistics unit in Panama to quickly obtain relief supplies needed to serve vulnerable and/or affected populations. However, in an effort to reduce costs and increase the efficacy of response, containers were pre-positioned relief supplies place in each of the 13 NS societies in the Caribbean (2005-2006 –Pilot Project). Between 2010 and 2011, the Caribbean Red Cross Societies have once again started to pre-position goods in containers and have also signed agreements with suppliers for priority access to goods in the event of a disaster – a system known as “virtual warehousing”¹⁰. [Source: <http://www.caribbeanredcross.org/index.php/what-we-do/disaster-preparedness-and-response>]

| | Actuals Year 1 | Actuals Year 2 | LOP Actuals | LoP Target | % of LoP achieved |
|---|-------------------|-------------------|----------------|---------------|----------------------|
| API 7 Number of school DRR sessions conducted | N/A | 0 | 0 | 565 | 0% |
| Bahamas | | | | | |
| API 7 Number of schools were awareness raising workshop were conducted | N/A | 0 | 0 | 5 | 0% |
| Number of awareness raising workshops conducted | N/A | 0 | 0 | 5 | 0% |
| Types of awareness raising activities conducted | N/A | N/A | N/A | N/A | N/A |
| Number of students participating in awareness raising activities | N/A | 0 | 0 | 400 | 0% |
| Number of teachers participating in awareness raising activities | N/A | 0 | 0 | 20 | 0% |
| Number of School Disaster Response Teams Formed | N/A | 0 | 0 | 5 | 0% |
| Number of Individuals who are part of a School Disaster Response Team | N/A | 0 | 0 | 125 | 0% |
| Number of Schools with Disaster Response Plans Developed | N/A | 0 | 0 | 5 | 0% |
| Percentage of students who retained knowledge (Pre-post test passes of 50%) | N/A | 0 | 0 | 0% | 0% |
| Belize was not planned on being implemented | N/A | N/A | N/A | N/A | N/A |
| St. L. was not planned on being implemented | N/A | N/A | N/A | N/A | N/A |

To date, national societies have not implemented any school-based Disaster Risk Reduction (DRR) activities. Per the program proposal, this specific activity does not apply to all targeted communities and countries. Per the cost extension proposal, Bahamas was the only project country that included a budget for school-based DRR activities for five schools. Bahamas will partner with five schools in year 2 on school-based DRR in which activities will be carried out for the remainder of project. BRCS will use the protected schools module developed by the Federation.

Belize received financial assistance from USAID/ OFDA in 2012 and UNESCO (to support their school-based DRR program activities. Belize was able to share their data and experiences with the Bahamas team to assist with program implementation. USAID/OFDA worked with the policy makers and principals and BRC worked with students/parents/teachers for a total of 19 schools in Cayo District to build capacity to better respond to minor accidents and emergencies. The project, which ended in June 2013, assisted the schools in developing emergency plans—including the formation of specialized brigades dedicated to first aid, fire safety, psycho-social support, and evacuation—as well as drafting general safety guides. So, although this activity was not reported on via this grant, It should be noted that Belize achieved significant success with UNESCO in this area and received further funding to conduct activities for four schools in urban Belize City scheduled to begin in October, 2013.

Additional Project Indicator 8 (API 8)

| | Actuals Year 1 | Actuals Year 2 | LOP Actuals | LoP Target | % of LoP achieved |
|--|-------------------|-------------------|----------------|---------------|----------------------|
| API 8 Number and type of micro-mitigation project completed | 1 | 20 | 21 | 34 | 62% |
| Bahamas | | | | | |
| API 8 Number of micro-mitigation projects implemented | 0 | 6 | 6 | 10 | 60% |
| Belize | | | | | |
| API 8 Number of micro-mitigation projects implemented | 0 | 8 | 8 | 14 | 57% |
| St. Lucia | | | | | |
| API 8 Number of micro-mitigation projects implemented | 1 | 6 | 7 | 10 | 70% |

Currently an average of 62% of the target for number and type of micro-mitigation project implemented has been achieved. This is a significant change from the 3% target achieved at the end of year 1. Given that micro-mitigation projects are typically finalized towards the end of the project, the NSs are now on target for the successful achievement of LOP targets before the end of the project period.

To date, 21 micro-mitigation projects have been completed with 7 in progress to complete 28 of 29 communities that have benefited from the entire package of DRR project activities. Two¹¹ communities in Belize will not have micro-

¹¹ As mentioned Lord's Bank will implement its micro-project using CCDRMF funding and Ladyville did not select a project that is within the project scope.

projects funded by the *Saving Lives* Project. One community in Belize was funded outside of this grant agreement as the mitigation project was beyond the scope and budget of the project). The Belize Red Cross facilitated the acquisition of funds for the community of Lord's Bank from the Canadian Governments' CCDRMF for the complete refurbishment of the community center, a project which was identified as a need during the VCA process. The other community of Ladyville did not select a project that is within the project scope.

***Please see Annex 1 for a detailed list of projects per NS, including those currently in progress.**

Analysis

Objective 1: Enhance capacity of Red Cross to deliver, coordinate, and advocate for disaster risk management

The second year of project implementation, all three National Societies have made significant progress against activities listed under objective 1 of the project proposal. Key program activities that were carried out in year 2 included: **First Aid Instructor Training, NIT Training and development/ revision of NS contingency plans**. Additionally NSs received supplemental training such as Epidemic Control for DM volunteers and Volunteer Management in Emergencies to further support their ability to respond to disasters.

Despite it not being a specific target of this project, significant headway was made in the area of organizational development¹² particularly for the Bahamas and Belize. Organizational Development was identified as a significant need in response to the slow start-up of the project. Through our partnership with the IFRC, an Organizational Capacity Assessment Certification (OCAC) was carried out in Belize and a STAR training was provided for the Bahamas including a 3-day process which helped the NS conduct a self-assessment and set goals to work towards. This process is ongoing with follow-up and support from ARC.

Finally, while all three National Societies had developed First-Aid business plans, these plans were monitored and updated in the Bahamas and Belize.

Objective 2: Communities are strong (knowledgeable, organized and prepared, connected, protected) and resilient to the impacts of potential disasters.

With the key human resources in place, the delegation was able to support NSs to ramp up activities in all scheduled communities and carry out a complete package of services in 29 of the 34 communities despite a very slow start in year 1. Implementation is under way in the remaining 5 communities (in Bahamas and St. Lucia) with targets set to be achieved by the end of the project period.

Challenges were presented at each NS in terms of staffing and expanded roles for project staff. In particular, funding was withheld from **St Lucia** for 3 months (Q1 of year 2) in order for the delegation to support the NS to better adhere to financial policies and procedures. As such, activities in the communities were placed on hold for this time. By the 3rd quarter of year 2 most staffing and compliance issues had been resolved and community level project activities began to accelerate.

Project teams continue to focus on community-based activities. Currently 29 of the 34 targeted communities have received a full package of services, including simulations, community disaster plans, family preparedness plans and mitigation projects that are either completed or are underway (see annex 1). This is significant progress from the

¹² The American Red Cross helps partners identify priority areas through movement wide trainings. These improvements can include partnerships, human resource management, fundraising and governance.

previous year in which activities had only been implemented in 19 of the 34 communities and were still far from completing the entire spectrum of program activities.

This year, hurricane Sandy in October 2012 tested the response capacity of the NSs. CDRTs that were formed in year 1 were ready and capable to respond to community needs. Particularly, St. Lucia activated early warning systems and CDRTs were notified and ready to respond. Luckily no impact was reported. In the Bahamas early warning systems were activated and CDRTs were ready and responded with distribution of relief items to affected communities, demonstrating increased capacity of the NS to respond immediately in the wake of disaster.

Relationship building and strengthening with key stakeholders at the community and national level remains an ongoing process aimed at ensuring that national societies and community members participating in project activities do not operate in silos, but rather leverage and involve key local resources and authorities. This year, simulation activities were carried out in partnership with various government partners in all 3 NSs. Additionally, many of the micro-mitigation projects were conducted in consultation with local authorities as well as government agencies. In one instance in Belize, funding was secured from the Canada Caribbean Disaster Management Fund (CCDRMF) for a micro-project that was out of the scope and budget of the current project.

Overview Summary

| <u>Number</u> | | | <u>Percentage</u> | | |
|-----------------------------------|---------------------------------|----------------------------------|-----------------------------------|---------------------------------|----------------------------------|
| <u>Cumulative Period Targeted</u> | <u>Reporting Period Reached</u> | <u>Cumulative Period Reached</u> | <u>Cumulative Period Targeted</u> | <u>Reporting Period Reached</u> | <u>Cumulative Period Reached</u> |
| <u>75,260</u> | <u>11,193</u> | <u>17,483</u> | <u>23%*</u> | <u>15%</u> | <u>24%</u> |

*Although the original targets were set based on community population, please see the explanation below for a discussion on accurate target setting and counting.

In this annual report we have worked towards creating strict beneficiary guidelines and reporting on our beneficiary numbers as conservatively as possible so as to only account for direct beneficiaries and to avoid any double counting from engaging in numerous activities in a single community. Included in the table above is a count of the number of direct beneficiaries reached during the LOP. However, due to the original target which was set at 75,483 that accounted for community populations, we are achieving only 23% of the LOP target. This target may be realistic if we had included indirect and direct beneficiaries; however, we are not required to report on indirect beneficiaries per OFDA requirements. We set our internal targets considering that a community member cannot be counted as a direct beneficiary unless they have received a tangible leave behind from the project. Instead, we have opted to target only beneficiaries who participated in NIT trainings, First Aid instructor trainings, direct recipients of household preparedness plans, families that can be served by pre-positioned stocks, and beneficiaries from school-based DRR programming.

Unfortunately, we cannot determine exactly how many beneficiaries are utilizing or benefiting directly from the 29 micro-mitigation projects that have been implemented, so the actual direct beneficiary count is probably much higher but is unable to be measured accurately. Therefore despite having only achieved 23% of our LOP target for all community members, we consider this a success and we estimate that the number of direct beneficiaries we reported is a significant underestimation given that we cannot use the entire community populations nor accurately account for the direct beneficiaries of micro-mitigation projects. A more accurate estimate of 10, 780 direct beneficiaries, would result in a 104% reporting period reached and 163% cumulative period reached.

Finally, 5 communities are still receiving ongoing program activities due to the cost-extension. Community members will receive family preparedness plans and will identify and complete micro-mitigation activities by the end of the project. These activities will contribute towards even higher final counts of direct beneficiaries at the end of the program.

Staffing

During this first half of the project, the rate of staff turnover was a key challenge experienced by the National Societies that affected the rate of project implementation. In the second year, staff was hired and maintained at all levels (NS and delegation). With the appropriate human resources in place the project has grown significantly. Additionally, although quarterly monitoring visits are required, the delegation has capitalized on visits for other programs to the NSs to provide additional support for activities such as community simulations, baseline/endline, and work planning and self-monitoring exercises.

At **the delegation**; Chris Chin started as the Disaster Preparedness Program Officer in December 2012. Sally Moore was hired on as Caribbean Program Management Delegate in September 2012 which relieved the NHQ Program Officer who was spending significant time covering for both the absence of a Program Officer and Program Management Delegate. Finally, Sally Moore was replaced by Chloë Guazzone-Rugebregt in July 2013.

In **Bahamas**, Wellington Ferguson was hired in November 2012 to replace the previous officer who resigned in September 2012.

During the first year of the project, the **St. Lucia** Red Cross also experienced staffing changes which continued in year two of the project cycle. Rita Louis, hired in September 2012 was replaced in August 2013 by the previous Finance Officer Bendalene Bowers who had previously resigned in 2012. Additionally, Rogevarro Lawrence who was hired in September 2012 to support the project resigned in May 2013. Challenges in working with St. Lucia NS staff and senior management persist and significant effort has been made by the programs team and finance team as well as the Head of Delegation to support project activities.

In **Belize**, the project staff is stretched thin with responsibilities on multiple projects. In particular, the project coordinator is responsible for two projects. As such, the delegation works closely with field staff, the Director General and finance to assure that program activities continue to be implemented without delay.

Cross-cutting

In addition to training and activities directly related to the SLIC program, staff from all three national societies benefited from supplemental capacity building training in other areas including resilience programming, NS organizational development trainings and Social and Behavior Change Communication training. The ARC is in the process of rolling out a resilience approach in its programming and conducted extensive community assessments as part of that process. Staff from the SLIC project contributed to these activities and participated in a lessons learned workshop that will assist them going forward in directing programming towards a more integrated approach to DRR. Delegation staff participated in the OFDA grant Guidelines Workshop which has assisted the disaster program officer to better monitor the progress of the project and write effective reports as well as plan for future interventions. Finally, all 3 NSs took the World of Red Cross online training offered by the IFRC as part of strengthening the movement and collaboration between partner national societies.

5. Lesson Learned

- The past year presented a couple of key learning moments for NSs whom faced threats from violent weather conditions. Most importantly the responses by NSs demonstrated the importance of working with communities to enhance skills and capacities to empower communities to mobilise themselves in times of imminent threats (Storm Chantal) and post disasters (Hurricane Sandy).
- The NSs continued to 'learn-by-doing' by working to strengthen their project management capabilities. Throughout the months, the stronger NSs demonstrated their capacity to program project funds within the scope of the project.

- A well-functioning NS which is supported by skilled staff and a core group volunteers all with the willingness to work across projects has positively affected the effectiveness and efficiency of implementing program activities.
 - In this regard, organizational development is a key component to ensuring that projects have the structure and support they need to implement community-based activities.
 - Bolstering capacity through trainings of volunteers and branch capacity to manage volunteers can enhance the reach of programs. Specifically, trained volunteers can support with the implementation of activities and can do follow up community visits where needed. This will also support project teams as project implementation delays can be reduced.
- Determining beneficiary impact from micro-mitigation projects needs to be established at the onset of the project. Particularly as it relates to projects that are not at the household level and instead target a community catchment area. Additionally, having a clear definition of micro-project scope that is allowable in the project will help NSs determine when they need to seek external advice or funding.

6. Sustainability and Transition Plan

In each of the project communities, the formation of CDRTs is designed to facilitate the sustainability of project activities while building local and NS capacity to respond to disasters large and small as was demonstrated during Hurricane Sandy this year. These trained teams will be able to lead further risk reduction and response activities in their communities. The sharing of the products of the VCA process with members of the wider communities facilitated under the project is meant to highlight the vulnerabilities and capacities to them. It is anticipated that having received training under the project, CDRT members will be able to lead their communities in addressing and responding to risks and disasters.

The robust scope of project activities that are delivered to each community ensure that community members get repeat information in multiple formats and see tangible changes and results in their communities in the form of community level disaster plans, simulations, micro-mitigation projects and family preparedness plans. American Red Cross is committed to continuing to work in an integrated approach in existing communities so that they are in a continuous process of identifying needs and being empowered to address them until the community maintains a high level of resilience.

Building on the National Societies' organizational development and capacity to implement programs is a natural step towards strengthening their institutions and making them less dependent on financial support and more capable of maintaining a high standard of business.

7. Project Monitoring, Evaluation and Learning

In the currently reporting period, ARC has conducted quarterly monitoring visits (December 2012, January 2013, June 2013, July 2013 and September 2013) to the National Societies. Key objectives of monitoring trips include but are not limited to the following:

- Work with NS to develop a clear (quantitative and qualitative) understanding of project progress to date.
- Work with NS to assess budget spending to date and ascertain budget need for the activities that remain to be completed
- Work with NS to build on project reporting and analysis
- Work with NS to clearly detail appropriate actions to ensure project compliance and to address challenges

Outputs of monitoring trips include trip reports, management action plans, updated life of project spending forecasts, updated work plans among others.

7. Annexes

Annex 1

Micro-project Summary for the Saving Lives in the Caribbean Project Belize

| Name of Community | Type of Project/ Month completed. | Cost US\$\$ | Community Population |
|---------------------------------|--|--------------------|--|
| Independence Town | Independence Town commenced their micro-project to supply VHF radios for use by the Red Cross- trained community emergency response team (CERT) in collaboration with the Fire Service volunteer team, many of the members of whom are also on the CERT. Quotes for the supply and installation of these have been received, and an order placed. | 1,110.00 | 4,100 with the highest population of 524 persons within the 10 to 14 age group followed by 523 persons in the 5 to 9 age group, 474 persons in the 15 to 19 age group and 471 children in the 0 to 4 year age group. Independence has a young population of (58%) fifty eight percent. |
| Placencia Village ¹³ | Placencia Village ¹⁴ completed their micro-project option for two back-up generators for the health clinic and the community center/shelter. They will also receive 2 hand-held VHF radios. | 2,460.00 | 1,749 inhabitants with the highest population of 199 in the 20 to 24 years age group followed by 194 in the 25 to 29 years 165 in the 30 to 34 and 163 in the 10 to 14 years age groups. |
| Seine Bight Village | Seine Bight Village has commenced their micro-project for the provision of a water reservoir, a stand-by generator and a refrigerator to make the community storm shelter fully functional; and for a set of VHF radios for the community emergency response team. The generator has been delivered and the other equipment will be delivered in October 2013. | 2,922.00 | of 1,310 inhabitants with a relative young population. The highest population of 171 being in the 10 to 14 years age group followed by 169 in the 0 to 4 years 168 in the 5 to 9 years age group. |
| Sittee River Village | Sittee River Village completed their micro-project to repair the bathrooms of the school buildings used as the community hurricane shelter. They will also receive 2 hand-held VHF radios | 3,581.00 | 442 inhabitants with a young and old population. From 0 to 19 age group followed by elderly in the 65 and over age group. |
| Hopkins Village | Hopkins Village has commenced their micro-project to secure the school building (reinforcing with storm shutters) used as a hurricane shelter and to provide a back-up generator to power lights and appliances. The generator has been delivered. They will also receive 2 hand-held VHF radios | 5,786.00 | 1,614 inhabitants with the highest population of 213 in the 5 to 9 years age group followed by 187 in the 0 to 4 years 185 in the 10 to 14 and 174 in the 15 to 19 years age groups. |
| Dangriga Town | Dangriga Town commenced rehabilitation of drains and culverts in its community to reduce flooding risks, and its concurrent health risks associated to water and vector borne disease transmission. They will also receive 2 hand-held VHF radios. | 6,839.00 | estimated population of 9,096 (SIB, 2011), with a breakdown of 4,686 females and 4,410 males. |
| San Pedro Town | San Pedro Town will receive a 20-foot container which is donated to the Town Council by the Red Cross. This container will be used by the Town Council to store disaster risk reduction equipment and supplies. Bids were received for the transportation from Belize City to San Pedro | 3,000.00 | 3,774 households with a total resident population of 11,778, broken down into 6 "Neighborhood Watch" zones collaborating with local authorities not |

| | | | |
|---------------------------|--|-----------------|---|
| | Town. If there are additional funds, VHF radios will be purchased. | | only for security issues but also for 1 st Aid and other emergency response, since there is a large senior citizen and retirees population in this community, and an estimated 3,500 persons living in the highly vulnerable low-income areas of San Mateo, DFC Layout, San Pedrito, Boca Del Rio, and San Juan. |
| Caye-Caulker | Caye-Caulker will improve Emergency Health Care Services by refurbishing a local Health Care Facility at a Community Center was completed in September. Similar to neighboring San Pedro Town, the Island can only be accessed by daylight transportation. No public transportation is available after 6:00 PM. This is a great risk for the residents to access 24 hours health care services. | 7,050.00 | 1,767 residents of Caye Caulker are vulnerable due to their location, spaces for basic medical services, and transportation not available 24 hours per day off the Island. |
| Hattieville | Hattieville commenced work in July 2013 on extension of a health post to include a patient-waiting area, including a toilet facility, asthma treatment station, and water tanks, and a generator (NO) for the community health clinic. This will in turn increase the community's capacity to respond to its growing health needs particularly since it serves five other smaller communities as well. Under an emergency or disaster scenario, access to Belize City or Belmopan could be limited and all six communities, with a combined population of about 4,400, would depend on this one clinic for medical assistance. | 9,750.00 | 2,350 people in 628 households in Hattieville, and 2,050 people in 558 households from 5 more villages in the vicinity: Gracie Rock, Freetown Sibun, Democracia, Gales Point Manatee, and Mahogany Heights, will benefit from this Health Post. |
| Jane Usher Boulevard | Jane Usher Boulevard completed their land-filling project to elevate land at risk of flooding, including homes that are most vulnerable in July 2013. This project helped in controlling water- and vector-borne diseases. | 5,950.00 | A total of seventy (70) loads were delivered to 64 households. The entire neighborhood of about 600 households will benefit from the vector control |
| Ladyville | Ladyville will not implement a micro project despite attempts to engage the community; additionally, the VCA did not identify a community need that fell within the project scope. | | |
| Lord's Bank | Lord's Bank selected a project to enhance the community centre area which was beyond the budget scope of the project. However, the community received funding from the Canadian Governments' CCDRMF for the complete refurbishment of the community center. It was agreed to address the issues under this fund (CCDRMF) and save the "Saving Lives" project funds for other activities in other communities. | | |
| Western Paradise (Mile 8) | Western Paradise (Mile 8) refurbished an existing building into a community health post (health facility). This will benefit the growing population of Western Paradise, which at the 2010 national census stood at 1,260 persons. People with special needs, in particular the elderly, differently-abled and economically disadvantaged will benefit | 6,500.00 | approximately 1200 villager's, 287 families, 287 males, 396 women and 317 children. |

| | | | |
|---------------------|---|-----------------|--|
| | the most from the use of this health-post by not having to travel to Belize City for health care. It is also hoped that the service they will receive will be more personalized and timely. | | |
| Belama, Belize City | Belize City selected the construction of septic tanks for those residents most in need to prevent the rest of the community from being contaminated by the water from the very regular flooding during the rainy season. In some cases open drums and old refrigerators are being used for septic tanks. This project will assist to eliminate those uses and the community will benefit from a decrease in vector borne diseases and possible contamination of water due to improper disposal of feces. 10 of the 19 identified as needed will be constructed. Bids are being received for the construction. | 7,500.00 | Of 79 households counted in the area, 19 did not have septic tanks. Those who do not have affect and put at risk themselves and all their surrounding neighbors, or about a total of 500 people. |

St. Lucia

| Name of Community | Type of Project/ Month completed. | Cost US\$\$ | Community Population |
|-------------------|--|-------------|----------------------|
| La RivereMitant | Drainage works (a forty five meters (45) of U Drain project). | \$5185.19 | 925 |
| Barre St. Joseph | A women's farmer group (Ti Colon Women's Farmers Group) in the Barre St. Joseph community received farming tools in year 1 to enable them to prepare plots in order to facilitate proper irrigation and drainage of the lands. In addition, another project was completed in year 2 on drainage works (a forty five meters (45) of U Drain project) in this community. | \$5185.19 | 379 |
| Barre Du Chassaue | Drainage works (a forty five meters (45) of U Drain project) in year 2. | \$5185.19 | 1281 |
| Plateau | Drainage works (a forty five meters (45) of U Drain project) in year 2. | \$10362.38 | 594 |
| Aux Lyon | Drainage works (a forty five meters (45) of U Drain project) in year 2. | \$5185.19 | 2500 |
| Entrepot | Drainage works (a forty five meters (45) of U Drain project). For Entrepot there were additional funds to support printing of a Neighbourhood Watch Manual) in year 2. | \$5185.19 | 1332 |
| Anse La Raye | Drainage works (a forty five meters (45) of U Drain project) in year 2. | \$5185.19 | 6071 |
| | | | |

Bahamas

| Name of Community | Type of Project /Month completed. | Cost US\$\$ | Community Population |
|-------------------|--|-------------|----------------------|
| Eleuthera (1,2,3) | Implementation commenced with One Eleuthera Foundation proposal to promote road safety (a critical issue identified in the VCA process), which will benefit Eleuthera 1, 2, and 3. The proposal addresses the lack of proper lighting, road safety signs, and the visibility of road markings for a major roadway. | \$7,500 | 3,282 |
| Andros | Three mobile water trailers which will function as fire-fighting tools for three townships in Andros (considered as three project communities) were procured and shipped to Andros, where the Administrator agreed in the previous quarter to be full responsibility for the management of the trailers. | \$22,000 | 1,471 |
| Bain 1 +3 | No identified project yet. Currently in progress | | 4,372 |
| Grant 2 + 4 | No identified project yet. Currently in progress | | 4,372 |