



DREF Operation - Final Report

Ecuador | Earthquake

	Operation N° MDREC019
Date of issue: 28 March 2023	Glide N°: EQ-2022-000194-ECU
Operation start date: 7 April 2022	Operation end date: 31 July 2022
DREF allocated: 167,716 Swiss francs (CHF)	Number of people assisted: 2,566 people (525 families)
Red Cross Red Crescent Movement partners actively involved in the operation: International Federation of the Red Cross and Red Crescent (IFRC) and International Committee of the Red Cross (ICRC).	
Other partner organizations actively involved in the operation: Government of Esmeraldas, Armed Forces Motorized Infantry Battalion (BIMOT), Esmeraldas Public Municipal Drinking Water and Sanitation Company PORTOAGUAS EP (EPMAPSE), National Sanitary Regulation, Control and Surveillance Agency (ARCSA), Ministry of Public Health (MSP), National Council for Equality of Disabilities (CONADIS), National Electricity Corporation (CNEL), National Telecommunications Corporation (CNT), National Risk Management Service (SNGRE), Ministry of Economic and Social Inclusion (MIES), Esmeraldas Human Rights Secretariat, Ministry of Urban Development and Housing (MIDUVI), Ministry of Education and Culture (MINEDUC), Ministry of Production, Foreign Trade, Investments and Fisheries (MPCEIP), Ministry of Tourism (MINTUR), Armed Forces (FFAA), National Police, Fire-fighters of Esmeraldas and Quito, Army Corps of Civil Engineers, Ministry of Transport and Public Works (MTOPE), Ministry of Environment, Water and Ecological Transition (MAAE), World Food Programme (WFP), Integrated Security Service (ECU 911).	
The Ecuadorian Red Cross spent a total of CHF 153,274. The remaining balance of CHF 14,442 will be returned to the Disaster Response Emergency Fund.	
<i>The major donors and partners of the Disaster Response Emergency Fund (DREF) include the Red Cross Societies and governments of Belgium, Britain, Canada, Denmark, German, Ireland, Italy, Japan, Luxembourg, New Zealand, Norway, Republic of Korea, Spain, Sweden and Switzerland; as well as DG ECHO, Blizzard Entertainment, Mondelez International Foundation, Fortive Corporation, and other corporate and private donors. The IFRC, on behalf of the Ecuadorian Red Cross, would like to extend thanks to all for their generous contributions.</i>	

A. SITUATION ANALYSIS

Description of the disaster

On 26 March, a 6.0-magnitude earthquake was recorded in Ecuador at approximately 11:28 pm. According to Special Seismic Report 2022 - 001, issued by Geophysical Institute (IGEPN)¹, the epicenter was located off the coast of Esmeraldas at a depth of 28 km. Fifteen aftershocks were recorded afterwards between 1.7 and 5.1 magnitude. The event is associated with the convergence zone of the Nazca and South American plates, to which the 8.6-magnitude earthquake that hit Ecuador in 1906 is attributed, as well as subsequent earthquakes in 1942, 1958, 1979 and 2016. All the latter were of a magnitude greater than 7.7, making them major earthquakes. According to Geophysical Institute (IGEPN) and National Risk Management Service (SNGRE) reports, the earthquake was felt with different levels of intensity in 63 cantons across 12 provinces:

- **HIGH:** 7 in Esmeraldas.
- **MODERATE:** 24 in Santo Domingo, Cotopaxi, Pichincha, Guayas and Manabí.
- **LOW:** 32 in Los Ríos, Pastaza, Guayas, Imbabura, Carchi and Bolívar.

Immediately after the event, response teams from relief organizations, such as the Red Cross, Firefighters, National Police, Armed Forces and National Risk Management Service (SNGRE), were activated and carried out search and rescue, pre-hospital care, evacuation, humanitarian assistance, psychosocial support (MHPSS), and damage and needs assessment in the impact zones.

The infrastructure of housing, public and private buildings, educational and health centres was affected. Such buildings were already affected by the 2016 earthquake, and this event worsened the damage.

The SNGRE reported the following damage caused by this earthquake:

People affected	
Affected families	2,371
Displaced families	2,227
Housing	
Light damage	5,375
Moderate damage	2,388
Severe damage	762
Public and private infrastructure	
Affected health centres	15
Educational units affected	16
Affected public infrastructure	12
Affected private infrastructure	6

Source: Progress Report No. 40 SNGRE (9 August 2022).

Summary of current response

Overview of Host National Society Response Action

As an auxiliary to authorities in humanitarian situations, the Ecuadorian Red Cross (ERC) carries out and implements emergency support activities in spaces such as the National Decentralized Risk Management System, which provided coordinated and quality care to the population affected by the earthquake in Esmeraldas.

The ERC activated its provincial operational response team, deploying 48 technicians (including volunteers and hired staff) in one ambulance and two support vehicles to perform pre-hospital care, mental health and

¹ <https://www.igepn.edu.ec/servicios/noticias/1920-informe-sismico-especial-no-2022-001>

psychosocial support, and evacuation support actions, as well as to provide humanitarian assistance and collect information on the affected population.

The staff and volunteers of the Esmeraldas Provincial Board worked since the beginning of the emergency. Also, from the ERC Headquarters, technicians and Cash and Voucher Assistance (CVA) specialists were mobilized in different missions to support the Provincial Board.

Overview of Red Cross Red Crescent Movement Actions

Through its team in Ecuador, the IFRC supported the ERC operation in Esmeralda's earthquake channelling DREF resources as detailed in the original Plan of Action. The IFRC office in Ecuador, the Country Cluster Delegation and the IFRC Americas Regional Office provided support through technical guidance on disaster management; finance; planning, monitoring, evaluation, and reporting (PMER), among others.

The International Committee of the Red Cross (ICRC) maintained an ongoing flow and exchange of information. Given that situations of violence were reported in this border province in months prior to the earthquake, especially in the San Lorenzo area, special care had to be taken to implement activities within the Operational Security and Safer Access framework.

A Surge Operation Manager designated for this operation also supported the ERC field operations.

Overview of Non-RCRC Actors' Actions in the Country

Key actors were activated at the national and local levels to respond to emergencies, the most relevant of which are detailed below, along with their main actions:

- **National Risk and Emergency Management Service (SNGRE):** Response coordination, information gathering and humanitarian assistance.
- **Integrated Security Service ECU 911:** Articulation and dispatch of emergency response resources.
- **Ministry of Public Health:** Providing care to wounded people, epidemiological fence, health care, antigen tests, psychosocial support, and vector control actions in emergency shelters.
- **Ministry of Transport and Public Works:** Removal and clearing of debris.
- **CNEL:** Change and rehabilitation of electrical energy system.
- **MIES:** Identification of priority population, verification of access to solidarity bonus and recreational activities with children and adolescents.
- **Country Humanitarian Team:** Support with technical assessments of emergency shelters.
- **Ministry of Production, Chamber of Commerce and BANEQUADOR:** Coordination of actions to facilitate potential loans to those affected for economic reactivation.
- **MINTUR:** Assessment of damage to hotel infrastructure in the canton.
- **Armed Forces:** Transport of humanitarian assistance.
- **Firefighters:** Search and rescue, damage assessment and pre-hospital care actions.

Needs analysis and scenario planning

The damage assessments and needs analysis (DANA) conducted by the Ecuadorian Red Cross and other relief organizations identified that the main needs were particularly related to impacts on infrastructure, water, sanitation and hygiene, health care, and basic needs coverage.

Needs analysis

Health

Although the number of injuries and deaths was low, considering the magnitude of the event, this province has a high rate of health-related problems and health system limitations. As a result, displaced families had to undergo

a physical health assessment, including COVID-19 antigen testing. Two positive cases of COVID-19 were identified, so preventive isolation and epidemiological fencing were carried out to prevent its spread.

People, especially senior citizens, children, and young adults reported the need for MHPSS. The aftershocks also caused the population to feel fear and uncertainty.

The canton of Esmeraldas is in a tropical zone with high rates of vector-borne diseases such as dengue, zika, and chikungunya. Vector breeding sites tripled due to the constant rains in the province, threatening those affected by the earthquake as they lost the tools that they could use to protect themselves from mosquitoes (like tarpaulins and mosquito nets). Therefore, it was a priority to implement fumigation and awareness actions in the community, especially in shelters and neighbourhoods near low-lying areas, as well as distribution of mosquito nets.

Water and Sanitation

The province of Esmeraldas has limitations in terms of public sewage, drinking water, and sanitation system service coverage, which was aggravated by the earthquake. This reality was especially true in places where the affected population was living, such as the collective centres opened in schools that lack sanitation facilities or an adequate water supply system for large groups. Therefore, one of the main issues identified in temporary shelters was the need to install safe water treatment and supply systems, as well as bathrooms that include showers for both men and women.

Livelihoods

While it is true that the greatest impact had been to shelter and housing, it is important to mention that within the affected area there is a population living in poverty that made their living by selling products from home (shops, hairdressers, restaurants, among others). Because of the emergency, they lost a significant part of their purchasing power, their homes, and belongings, which means they needed to invest in recovering or rehabilitating their livelihoods. The affected population needed assistance to meet urgent needs related to access to food and hygiene and cleaning supplies for at least one month.

Shelter

The effects of the earthquake were mainly seen in homes located in areas near ravines and mountain slopes and which had been previously affected by seismic events of a magnitude of up to 5.0 every year since 2016.

The families whose homes suffered moderate to severe damage spent the night in emergency shelters and return to their homes during the day to try to recover some of their personal or household items. Those staying with friends and family did this as well. In some cases, one or two family members spent the night outside their homes to prevent theft.

No major damage was reported to public and private infrastructure, mostly minor damage to masonry. However, response and emergency management needs exceeded the resources available in state institutions that were already responding to multiple adverse events across the country related to the rainy season.

Targeting

The groups targeted for this intervention included:

- Families whose homes were totally lost or suffered severe damage (living in collective centres or with friends and family)
- Families with older adults
- Families with people with disabilities
- Single-parent families
- Families who have lost their livelihoods (shops, hairdressers, restaurants, etc.)
- Families that do not receive bonuses or assistance from social or public entities

Scenario planning

Scenario	Humanitarian Consequence	Potential Response
Best case scenario: Aftershocks decrease considerably in terms of recurrence, magnitude, and intensity.	Families affected by previous events cannot reactivate their livelihoods or rebuild their homes in the short term. However, progress is seen.	<ul style="list-style-type: none"> • Monitoring and follow-up of the situation. • Support to raise community awareness of dangerous events and disease prevention during the winter continues in the most affected areas.
Most likely case scenario: Aftershocks continue in Esmeralda but with shorter frequency and magnitude.	<ul style="list-style-type: none"> • Increased number of families affected. • Greater uncertainty and fear due to aftershocks. • Increased number of people that need to be sheltered. 	<ul style="list-style-type: none"> • Monitoring and follow-up of the situation. • Activation of PHC, MHPSS, DANA, family census and humanitarian assistance teams. • Support in enabling emergency shelters and water and sanitation systems. • Institutional communication. • Activation of first response units.
Worst case scenario: Aftershocks increase in Esmeralda with higher frequency and magnitude.	<ul style="list-style-type: none"> • Increased number of canton families affected by damage to their homes. • Greater uncertainty and fear due to aftershocks. • Increased number of people that need to be sheltered. 	<ul style="list-style-type: none"> • Monitoring and follow-up of the situation. • Activation of PHC, MHPSS, DANA, family census and humanitarian assistance teams. • Support in enabling emergency shelters and water and sanitation systems. • Institutional communication. • Activation of first response units. • Activation of the crisis room and institutional coordination meetings. • Coordination with key actors. • Activation of the movement response system.

The second scenario happened during the project implementation, as the aftershocks continued, although at a lower magnitude. The affected population increased and was reached by other local actors.

Due to insecurity and violence widespread in the country, the President of the Republic decreed a state of emergency for 60 days, starting on 29 April 2022, which limited the mobility of personnel in the canton during this time. As a result, the distribution of humanitarian assistance was delayed. The local and Headquarters staff implemented all actions by following the Operational Security and Safer Access framework.

Operation Risk Assessment

- Aftershocks or new earthquakes with similar or greater intensity increase damage and weaken structures.
- Given the winter season, heavy rains cause landslides and flooding from rivers, potentially collapsing bridges or damaging roads, preventing access to earthquake-affected areas.
- Because it is an election year, there is a risk that people with political interests will try to get involved in distributions to attract votes before the election.
- Protests by the local population manifesting that they have also been affected, but no one has assisted them.
- SNDGR lacks the resources to serve the rest of the population under minimum need criteria.
- Demonstrations and protests occur in the affected sectors because they consider the government's response to the emergency inadequate.
- The possibility that COVID-19 cases will increase again across the country because of the withdrawal of all biosafety measures in some cantons, including Esmeraldas and Atacama, with the consequent pressure on the ERC teams to expand their actions.
- The population may hesitate to participate in face-to-face activities for fear to COVID-19.

B. OPERATIONAL STRATEGY

Overall Operational Objective

To provide care to at least 2,500 people (500 families) affected by the earthquake in urban areas in Esmeraldas, through humanitarian assistance, including cash and voucher assistance (CVA), mental health and psychosocial support (MHPSS), water, sanitation, and hygiene actions (WASH), and information according to needs for three months.

The DREF Operation reached a total of 2,566 people (525 families) in the Esmeraldas canton. Of these, 500 families received assistance through cash transfers, health services or water treatment kits, while 25 were assisted only with shelter kits. People reached, by location, is detailed below:

Community or Area	People reached			
	Families	People	Male	Female
La Ceiba	30	170	86	84
Boca del Ovo	88	368	176	192
13 de Abril	25	130	44	86
Delgadillo	57	366	177	189
Luis Vargas Torres	89	407	208	199
Patricio Páez	129	587	292	295
San José Obrero	107	538	239	299
Total	525	2,566	1,222	1,344

For this emergency, the Ecuadorian Red Cross (ERC) implemented the following operational strategy:

Shelter

- 163² families received shelter kits (one tool kit and two tarpaulins) to repair their homes.

Livelihoods and humanitarian assistance

- 500 families received Multipurpose Cash Transfers to cover food, hygiene, and cleaning expenses according to needs.

Health

- 500 families received vector-borne disease control services.
- 500 families received mosquito nets.
- 500 families received information on vector prevention and control.
- 500 families received Mental Health psychosocial support.
- 100 volunteers received personal protective equipment against COVID-19.
- 79 volunteers received psychosocial support.

Water and sanitation

- 500 families received household water treatment kits.

Operational Support

Human Resources

For this intervention, the ERC relied on a team of volunteers and hired personnel specialized in the components and lines of action included in the Plan of Action. In addition, the Headquarters team provided technical advice to the local teams, such as:

² 138 families received other type of humanitarian assistance within this project, as a result they are not being counted as part of the total families reached by this project to avoid double counting.

- 1x Supply Chain Operation Manager.
- 1x PMER technician.
- 1x Financial technician.
- 1x Monitoring and Information Management technician in the situation room.
- 1x CVA technician.
- Deployment of a Surge Operations Coordinator for 2 months.
- 100 volunteers and contracted personnel from the provincial board.

Logistics and Supply chain

All purchases were made at the national level through the SICRE system and managed by the ERC purchasing department, ensuring compliance with the standards approved in the signed letter of agreement and in line with the IFRC procurement procedures. Mosquito nets were procured through the Regional Logistics Unit to ensure standardization and quality. The cargo was received in time at the destination.

Communication

The communication plan contemplated several actions focused on the different needs associated with the emergency, the particularity of which is the management of public information focused on the needs of the population and the primary and secondary stakeholders or audiences. The primary target audience was the population in general, especially families. The secondary target audience was journalists, opinion leaders, migrants, tourists, health personnel, leaders of community and neighbourhood organizations.

The ERC's humanitarian work was visible at the institutional level through the National Society's official web platform and social networks and advertised on digital platforms, as well as the dissemination of press releases, life stories, and health promotion material, emergency response and prevention measures.

The Communication strategy contemplated the integration of the Headquarters communication team with the Provincial Board's Communication focal point.

Information Technology (IT)

The National Society has a ready-to-use technological infrastructure. Technological tools, such as Kobo, collected data from the different areas of intervention. The ERC adheres to the Organic Law on Personal Data Protection enacted in May 2021, which refers to the protection of personal data and its correct treatment through adequate security processes, regulating access, rectification, updating, deletion, portability, and limited consultations or restricted access, considering the sensitive nature of the data. The Power BI platform was used to publish general data (non-sensitive information).

Security

Advice and technical support were provided to volunteers and humanitarian personnel on Operational Security (OS) through the socialization of guidelines for rigorous compliance with the Operational Security and Safe Access Standards, which all activated humanitarian personnel must implement. The ERC has security protocols, COVID-19 protocols and team monitoring and follow-up mechanisms.

Planning, Monitoring, Evaluation, and Reporting (PMER)


A monitoring methodology was used for follow-up and evaluation. The planning and follow-up team ensured that the expected results were achieved. A periodic review of technical and budgetary progress was carried out. A lessons learned workshop was developed as part of the operation.

The ERC maintained communication and coordination with the IFRC's Disaster Management Coordinator for South America. Progress reports, interim reports and a final report were drafted on a timely basis. Visits and interviews were conducted with the beneficiaries, volunteers and other people who were part of the plan's implementation team to monitor progress and compliance with the objectives and make any necessary adjustments to the plan. A beneficiary satisfaction survey was conducted.

Administration and Finance

The ERC, through its Financial and Administrative Management, assigned an accountant to support the preparation of the budget, the allocation of funds and the monitoring of expenses incurred during the plan's execution, as well as the preparation of the financial report. In addition, the IFRC's financial officer supported the operation.

C. Detailed Operations Plan

	<h2>Shelter</h2> <p>People Reached 661 people (163 families) Male: 323 Female: 338</p>	
Outcome 1: Communities in disaster- and crisis-affected areas restore and strengthen their safety, well-being and long-term recovery through shelter and settlement solutions.		
Indicators:	Target	Actual
# of people receiving emergency shelter and settlement assistance (families)	140	163
Output 1.1: Affected families are provided with shelter and settlement and basic household items assistance.		
Procurement of tool kits	140	140
Procurement of tarpaulins	280	280
Distribution of tool kits (families)	140	138
Distribution of tarpaulins (families)	140	163
Safe shelter sessions (families)	140	163
Narrative description of achievements		
Needs analysis		
<p>In the immediate aftermath of the earthquake, local authorities set up two collective emergency centres to provide comprehensive care to people with damaged homes. Several families were taken in by friends and relatives, while others chose to build informal shelters next to their houses to care for their belongings. The government closed the shelters 20 days after their opening as families returned to their homes, even though several houses had infrastructure failures. As a result, the ERC decided to deliver shelter kits and tool kits to the affected population.</p>		

Activities conducted

Distribution of tool kits and tarpaulins

The Esmeraldas Provincial Board carried out the information gathering of affected families in coordination with community leaders and first-response institutions.

By request of the government authorities during the first week of the emergency, the Ecuadorian Red Cross (ERC) distributed 138 tool kits that reached 138 families and 301 tarpaulins that reached 163 families. These items came from the ERC pre-positioned emergency stock, later replenished through this DREF Operation.



*Shelter kit delivery in San José Obrero.
Source: ERC*

District or sector	People Reached			Humanitarian Assistance		
	Families	People	Male	Female	Tool Kits	Tarps
13 de Abril	25	114	56	58	0	25
Boca del Ovo	40	174	87	87	40	80
Delgadillo	30	139	71	68	30	60
Patricio Páez	50	169	77	92	50	100
San José Obrero	18	65	32	33	18	36
Total	163	661	323	338	138	301

During the distribution, volunteers carried out a security assessment to mitigate risks to humanitarian personnel and the civilian population. The process was carried out smoothly, and in addition to the delivery of the kit, training was provided on the use, content, and delivery of the tool kit.

Replacement of tools and tarpaulins

After the government closed the shelters, this plan was updated to adjust to the changes and better support the population in need. As a result, and after approval was received, the ERC changed the component of WASH to shelter and procured the 140 tool kits and 280 tarpaulins that had been delivered to replenish the national stock. In order to cover the demand for tarpaulins that were not covered by this DREF, the ERC supplemented 21 tarpaulins taken from the strategic warehouse. With these resources, the Provincial Board immediately assisted 163 families in urban neighbourhoods in the canton of Esmeraldas, Esmeraldas's province.

Challenges

- At the beginning of the emergency and after the needs assessment, the ERC planned to install two water treatment systems and two portable toilets to improve the sanitation conditions of the shelters provided by the government. However, the shelters closed 20 days after the start of the emergency. As a result, the ERC could not set up toilets and water-treatment tools, and the operational plan was modified. After conversations with IFRC, the ERC decided to distribute tool kits and tarpaulins to the affected families.
- The heterogeneous way in which the houses of the affected families were affected made the selection of beneficiaries for the tool kits and tarpaulins complex, as some people had slight, moderate and severe damage to their homes in different parts of the neighbourhoods. In response to this, the team of the Provincial Board of Esmeraldas shared the selection criteria with the community leaders to prioritize the most affected families, justifying why some received tools, tarpaulins, or both as appropriate.

Lessons Learned

- Volunteers should be strengthened with on-site training in information gathering and needs analysis to have more manageable criteria for the selection of beneficiaries and thus prevent or reduce the duplication of assistance.
- While it is true that humanitarian assistance was standardized to deliver one tool kit and two tarpaulins, community leaders and members of the community supported the idea of distributing items according to needs, reaching more families.



Livelihoods and Basic Needs

People reached: 2,436 people (500 families)

Male: 1,178

Female: 1,258

Output 1: Communities, especially in disaster and crisis affected areas, restore, and strengthen their livelihoods.

Indicators:	Target	Actual
At least 500 families receive Multipurpose Cash assistance to cover food, hygiene, and cleaning needs	500	500
Output 1.1: Households are provided with unconditional/multipurpose cash grants to address their basic needs		
Identification of a CVA strategy (feasibility analysis, market study, bank risk assessment)	1	1
Multipurpose Cash distributions for early livelihoods recovery for 500 families (USD 100)	500	500
Community induction sessions on the Multipurpose Cash assistance programme	500	500
Deployment of national technician specializing in field operations and CVA	3	3
Post-distribution monitoring (i.e., surveys)	1	1

Narrative description of achievements

Needs analysis

The affected families in the Esmeraldas province were living in homes that suffered damage to their infrastructure and had greater structural vulnerability due to telluric events in previous years (2016 earthquake). This is in addition to structural poverty conditions that have a negative impact on vulnerability and other underlying problems. The ERC identified the need to implement Cash and voucher assistance programmes in the communities where the Esmeraldas Provincial Board was already working and which were most affected by the 26 March earthquake, as they were living in an urban area and suffered moderate to severe damage to their homes.

The Cash and Voucher assistance provided USD100 per family, which complemented the assistance received by the affected people. The programme covered the most urgent basic needs according to the basic family basket, according to the calculation made in the feasibility analysis, the people assisted were given the freedom to purchase what they deemed necessary.

Activities conducted:

Identification of a CVA strategy (feasibility analysis, market assessment, bank risk analysis)

The ERC with the technical advice of a Surge CVA deployed in Ecuador conducted the feasibility analysis, local market assessment, and the selection of a banking company for CVA implementation. The "Transfer Value Calculation" analysis was also carried out, determining that the transfer value per family was USD100. Finally, for security reasons, the bank codes were delivered through SMS text messages (by the banking service) to each of the 500 heads of the families reached. This code was used in the Banco del Pichincha ATMs.



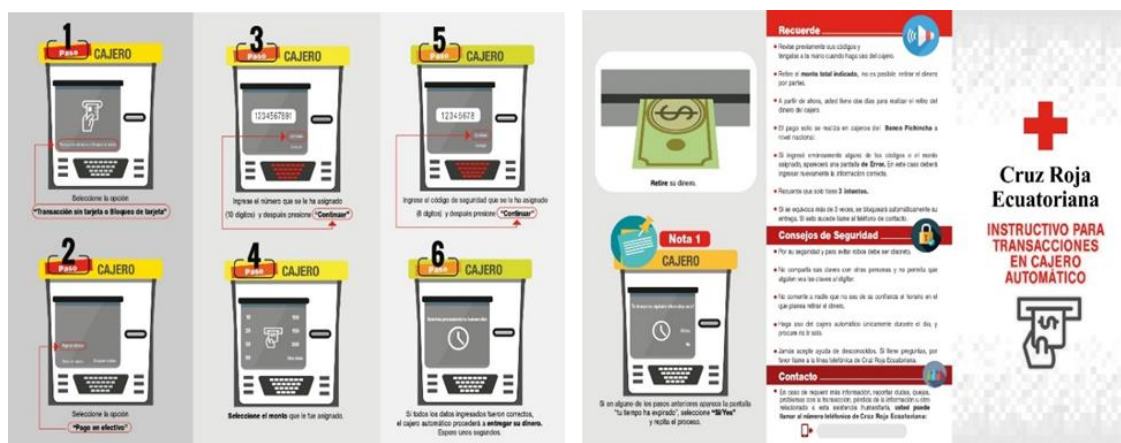
Cash and voucher assistance program, Luis Vargas Torres School. Source: ERC

CVA distributions to 500 families (USD100)

Two distribution processes were carried out, the first reached 460 families out of the 500 families, and the second reached the remaining 40. In the first process, data validation was carried out on the 28 and 29 May, and the activation of the codes was on 1 June 2022; in the second process, data validation was on 3 June, and the activation of the codes was on 9 June 2022.

Community induction sessions were also held on the following topics:

- Use of the ATMs.
- Use of Multipurpose cash assistance.
- Key messages on security measures and self-protection when receiving the code and making the transaction.



Brochures provided for the population on the use of the ATMs. Source: ERC.

After the training, the targeted population filled out an exit survey to ensure that the information provided was understood and the steps for using the ATMs were reinforced in specific cases.

At the end of the distribution process, 45 codes reported problems such as ATM blockages, and no text message received (SMS), among others. As a result, a cross-check was carried out with the bank account to validate the information, and the issues were solved, reaching the 500 expected families.

Community or area	People reached				CVA total amount
	Families	People	Male	Female	
La Ceiba	30	170	86	84	\$3,000.00
Boca del Ovo	88	368	176	192	\$8,800.00
Delgadillo	57	366	177	189	\$5,700.00
Luis Vargas Torres	89	407	208	199	\$8,900.00
Patricio Páez	129	587	292	295	\$12,900.00
San José Obrero	107	538	239	299	\$10,700.00
Total	500	2,436	1,178	1,258	\$50,000.00

A telephone line was activated in coordination with the Provincial CEA team, which solved requests from the population regarding the use of the ATMs and information on the programme.

Mobilization of a CVA Specialist Technician

The National Society's CVA technician was mobilized and was in charge of:

- Construction of the feasibility study.
- Leading the beneficiary census in accordance with the established selection criteria.
- Planning and preparation of the CVA.
- Implementation of the CVA.
- Monitoring of the follow-up survey.



ATM use training session at Luis Vargas Torres school. Source: ERC.


Post-distribution monitoring - Satisfaction survey on the use of CTP

A form was developed using the Multipurpose Cash Transfer Toolkit, available on CashHub, and the International Federation of Red Cross and Red Crescent Societies' CEA toolkit as guides. The design of the questions was validated by the Cash Transfer technical team, the IFRC CVA delegate deployed for the operation, and the CEA technician responsible for CEA at Headquarters and approved for implementation.

The sample was defined using a calculation tool and a 95% confidence and 3% margin of error was defined for the 500 families reached by the Cash Transfer Programme.

The results of the survey showed that most people invested their money in food purchases (78%), with priority also being given to education (40%), health expenses (32%), and other basic needs (11%); while to a lesser extent, it was invested in home repairs (8%), hygiene items (7%), debt repayments and rent (6%), and reactivation of livelihoods (5%). 66% of the people surveyed made their purchases in the city market closest to their neighbourhood, but they also bought from other suppliers such as neighbourhoods' shops (35%), supermarkets (25%), intermediaries (21%), and direct purchases from primary suppliers (11%).

Challenges
<ul style="list-style-type: none"> The security context in the province of Esmeraldas represented an alert in terms of staff protection and incident prevention due to the situations of violence generated in the city and the province. In response to this, close and detailed monitoring of security incidents and constant monitoring of staff movements in the field was maintained. Due to other organizations also providing assistance in the same area as the ERC, there was a concern to assist people that were given the same aid by other organizations. As a result, the ERC validated and cross-checked databases with the National Emergency Risk Management Service and the CARE organization, which had already implemented multi-purpose CVAs in the affected area, to reduce the possibility of duplication of assistance. The post-distribution follow-up surveys, which sought to identify the method of consumption, the experience of distribution, and beneficiary satisfaction, were conducted by telephone due to the context of insecurity, although some people did not want to participate in the survey, most of the population did agree to provide feedback.
Lessons learned
<ul style="list-style-type: none"> The strategy of placing staff at the ATMs to meet the needs of the assisted population made it easier for the population to withdraw cash without any problem. The assisted population has a greater preference for the delivery of cash rather than in kind, as this allows them to give priority to the most urgent needs, which are very different from one family to another. The mechanism of collection through the bank using codes has been widely known and applied by many humanitarian response organizations. However, the ERC was aware of the possibility of sporadic difficulties in the collection process, due to the connectivity of the ATMs to the communications network, which has led to a smaller proportion of the codes being blocked due to ATM malfunctions. Faced with this challenge, the National Society tested the mechanism a few days before the implementation, generating codes with a minimum value, as well as activating a telephone support line for beneficiaries, and mobilizing volunteer staff to provide support directly at the ATMs, which mitigated the blocking of codes.

	<h2>Health</h2> <p>People reached: 2,436 people (500 families) Male: 1,178 people Females: 1,258 people</p>	
Outcome 1: Potential epidemics and disease transmission are reduced		
Indicators:	Target	Actual
# of families that receive health services	500	500
Output 1.1: Prevention of vector-borne diseases		
Indicators:	Target	Actual
Procurement of mosquito nets	2,000	2,000
Distribution of mosquito nets	2,000	1,949
Community awareness-raising on disease risk reduction and vector control	500	500
Narrative description of achievements		

Needs analysis

The impact of the earthquake caused structural damage due to collapsed houses, destroyed roofs, and partially or totally collapsed walls, which left families in greater vulnerability to environmental elements such as rains and proliferation of vectors that are common in these times. Communities located in the equatorial zone with a warm humid subtropical climate are the enabling environment for the reproduction of vectors such as mosquitoes and other insects that mainly transmit the dengue virus (endemic), zika, chikungunya, malaria, or yellow fever. In response to this, disease prevention activities for the targeted communities were considered in this intervention.

Activities conducted:

Distribution of mosquito nets

The National Society in its pre-positioned emergency stock had mosquito nets that were sent to the Provincial Board of Esmeraldas to optimize the time for distribution.

In coordination with the CVA team, a call was made to validate the information of the population being assisted with cash, after which the nets were delivered according to the number of family members. The nets were distributed to the 500 families as detailed below.

Community or area	People reached				Mosquito nets
	Families	People	Male	Female	
La Ceiba	30	170	86	84	162
Boca del Ovo	88	368	176	192	350
Delgadillo	57	366	177	189	246
Luis Vargas Torres	89	407	208	199	401
Patricio Páez	129	587	292	295	430
San José Obrero	107	538	239	299	360
Total	500	2,436	1,178	1,258	1,949

Community awareness on disease risk reduction and vector control

The Esmeraldas Provincial Board in coordination with the neighbourhood authorities of the assisted sectors conducted weekly activities to address disease risk reduction and vector control issues. During the talks and workshops, key messages on vector control and good hygiene practices were shared with the community.

These activities, which were planned and facilitated by the volunteer staff, are "technical-expositive" (according to the methodology proposed by the Board) and involved a dynamic activity for the targeted families. In parallel, advantage was taken by carrying out home visits to execute household fumigation campaigns.

Three community workshops and three fumigation processes were carried out, as well as sessions on vector prevention and control at the time of the distribution to ensure that the 500 families that received the nets had adequate knowledge of their use, as well as other household measures for vector prevention and control.

Delivery of cleaning kits

With other funds, the Esmeraldas Provincial Board purchased cleaning and disinfection kits (chlorine, brushes, industrial bags) which were delivered to 246 affected families who suffered minor damage to the infrastructure of their homes.



Training on the use of mosquito nets and vector prevention measures, Esmeraldas.

In addition, informative talks on personal, family and community hygiene were given as prevention actions against vectors and bacteria that may appear in the locality.

Community or area	People reached		
	Families	People	Cleaning kits
La Ceiba	30	77	30
Boca del Ovo	70	188	70
Delgadillo	43	116	43
Patricio Páez	50	161	50
San José Obrero	29	71	29
13 de Abril	24	57	24
Total³	246	670	246

Procurement of mosquito nets

Due to the high cost of the mosquito nets in Ecuador, it was decided to ship them from the Regional Logistics Unit in Panama, so that after completing the customs clearance procedures, the supplies could be delivered in the first weeks of June. However, the National Society had already pre-positioned the number of mosquito nets needed in its stock, so it was decided to make the delivery to optimize time and avoid delays in scheduling.

The National Society's strategic warehouse had 6,250 mosquito nets in stock, of which 2,000 were used for this project. As a result, 2,000 mosquito nets were replenished to the ERC after the custom clearing process finished. It was expected to deliver 2,000 mosquito nets, based on the composition of each family, however, when the distributions were made, the ERC distributed 1,949 mosquito nets, as a result, the Provincial Board of Esmeraldas kept the 51 mosquito nets in their warehouse for future events.

Challenges

- The time involved in the logistical process of requesting and procuring the mosquito nets was longer than expected. To meet the activity plan, the ERC used the mosquito nets they had stored in their warehouse for distribution during the emergency.
- The delivery of mosquito nets was made according to the average number of members per family which is normally used as an approximation for planning purposes. However, not knowing the actual number of members of each family caused the delivery to take longer, as the ERC needed to register the actual number of people per family.

Lessons learned

- Having standard kits pre-positioned in the National Society's warehouse can speed up the response capacity to reach the affected population on time. The National Society keeps its warehouses stocked with supplies for a first response.
- A complete database should be kept for each member of the population when the supplies to be delivered are per person and not per family for the intervention to be efficient.


Outcome 2: The psychosocial impacts of the emergency are lessened


Indicators:	Target	Actual
Families reached with mental health and psychosocial support services	500	500

Output 2.1: Psychosocial support provided to the target population as well as to RCRC volunteers and staff

³ These people are not being counted as part of the total number of people reached by this project, as the ERC used other funds to cover this expense.

Indicators:	Target	Actual
Provide MHPSS to people affected by the crisis/disaster	500	500
Provide MHPSS to staff and volunteers	100	79
Narrative description of achievements		
<p>Needs analysis</p> <p>Families had emotional distress due to the impact of the earthquake. For this reason, the National Society decided to include psychosocial care in the communities among its response activities. Likewise, attention to volunteer personnel was also prioritized because they are not only working in the emergency but are part of the affected communities.</p> <p>Activities conducted:</p> <p>MHPSS to the communities</p> <p>Collective psychosocial support sessions reached 524 people from 500 families. The ERC teams implemented educative interventions using playful methodologies that consisted of rounds with local songs to involve the population in the activity. At the same time, individual spaces to talk about their emotions, thoughts, and feelings about the earthquake and how that affected their mental health were created.</p> <p>MHPSS to volunteers</p> <p>For the mental care of the volunteers, emotional discharges were set-up and delivered to the response teams of the Provincial Board of Esmeraldas. These activities were led by local mental health teams. Subsequently, group sessions were applied for the teams that supported the distribution of humanitarian assistance. Only 79 out of the 100 volunteers that first responded to the emergency were part of this activity as many of them needed to return to their normal activities and were not able to participate in the second part of the intervention.</p>		
Challenges		
<p>It was noticed that the people from the affected areas did not prioritize their mental health as they had other urgent needs to meet like access to food, shelter, and security. As a result, the ERC implemented mental health and psychosocial support activities during in-kind assistance distributions in order to be better received by the community and used their time more effectively.</p>		
Lessons learned		
<p>The ERC learned that it is very important to have their volunteers trained in mental health and psychosocial support in order to provide support in case of emergencies. Some volunteers were able to help in a timely manner to people in emotional needs.</p>		

	<p>Water, Sanitation and Hygiene</p> <p>People reached: 2,436 people (500 families)</p> <p>Males: 1,178</p> <p>Females: 1,258</p>	
	<p>Outcome 1: Immediate reduction in risk of waterborne and water related diseases in targeted communities</p>	
Indicators:	Target	Actual

Families who receive awareness on safe water management, hygiene promotion, and disease prevention	500	500
Output 1.1: Daily access to safe water which meets Sphere and WHO standards in terms of quantity and quality is provided to the targeted population		
Indicators:	Target	Actual
Initial water and sanitation assessment in targeted communities	1	1
Provision of safe water to people living in collective centres through the installation of two water treatment systems.	2	N/A
Acquisition and distribution of water treatment kits to 500 families	500	500
Monitoring of the use of the water treatment kits and water quality testing	3	3
Community sensitization on safe water consumption and storage to 500 families	500	500
Narrative description of achievements		
<p>Needs analysis</p> <p>The suburban neighbourhoods of Esmeraldas face some issues in relation to access to water, drainage, and sewage. Although the earthquake did not directly affect any water system, affected families had deficient conditions for water access. The ERC identified the need for water purification items to reduce the gap in clean water access. The ERC also identified the need for community support regarding the correct use of the purification items.</p> <p>The emergency led to the opening of two temporary shelters in the city of Esmeraldas. These were set up by the local government. The sanitation conditions of these shelters were not adequate, so it was proposed to assist them by installing two water treatment systems and two portable toilets. This was not possible because the shelters were closed 20 days after the event, instead, the ERC actions were re-focused on the assessment of water and sanitation issues at a household level.</p> <p>Activities conducted:</p> <p>Water and sanitation assessment in the affected communities</p> <p>A WASH assessment on access to safe water for human consumption was performed by a WASH specialist volunteer from the Santo Domingo Provincial Board. The analysis reported that the quality of the raw water was within acceptable limits for consumption.</p> <p>In addition, the Provincial Board of Esmeraldas trained their volunteers to monitor water quality.</p> <p>Distribution of water treatment kits to 500 families</p> <p>Water treatment kits were distributed to 500 families. In addition, as part of the distribution process, the ERC provided training to the communities on the chlorine dosing method, alternative methods for treating water, and the content and use of the water treatment kit.</p> <p>To achieve more comprehensive and complementary care for each family group of the target population, the families that were reached with these kits were the same ones that received the mosquito nets and cash assistance.</p>		
 <p>Training for communities on water treatment at Luis Vargas Torres school, Esmeraldas. Source: ERC.</p>		

Community or area	People reached				Water treatment kit
	Families	People	Male	Female	
La Ceiba	30	170	86	84	30
Boca del Ovo	88	368	176	192	88
Delgadillo	57	366	177	189	57
Luis Vargas Torres	89	407	208	199	89
Patricio Páez	129	587	292	295	129
San José Obrero	107	538	239	299	107
Total	500	2,436	1,178	1,258	500

Monitoring of the use of the water treatment kits and water quality tests

Water quality monitoring was conducted after the distribution of treatment kits; a total of 40 water samples were collected to assess their quality in terms of chemical (pH, residual chlorine), physical (turbidity), and bacteriological variables. In general, in order to conduct such monitoring, a sample size is needed to provide enough information to make an overall conclusion. As a result, the ERC had water samples of a small number of people reached that allow making sufficient conclusions.

The main results obtained from the field data collection were the following:

Variables	Results	Ideal values
Smell	None	None
Chlorine	-0,3 to 1,5 ppm	Optimal 0,5 ppm
PH	6,8 to 8,2	6,5 to 8,5

In addition, the ERC performed post-distribution monitoring phone calls to 40 families to ask the people reached with the water treatments which home treatment method they used. Only 15% said they effectively used the water treatment (tablets and chlorine), and most of the people (54%) said they used the boiling water method to get safe water for consumption.

Community awareness-raising on safe water consumption and storage

Training and awareness sessions on safe water use, treatment, and storage were conducted at the household level during treatment kit distributions, and during community talks for vector prevention and control.

The heads of households of the 500 families that received the water treatment kits participated in the meetings. Community awareness-raising included topics related to water treatment through the use of water purification tablets, chlorine, the boiling water method, and the proper storage and handling of water for human consumption to prevent gastrointestinal diseases caused by water contamination.

Challenges

Given that the shelters provided by the local government were only open for 20 days it was not possible to install the planned latrines. As a result, the ERC in coordination with the IFRC decided to redirect those funds and provided affected families with shelter kits.

Lessons learned

Although it is true that providing families with water treatment kits generated a new alternative that seemed accessible to the population, the ERC realized that more in-depth water treatment training for the communities was needed to generate a change in behaviour in the long term as families were not used to utilizing the water treatment kits provided.

Output 1.2: Adequate sanitation is provided according to Sphere standards to the affected population		
Indicators:	Target	Actual
Installation of two toilets in a collective emergency centre	2	N/A
# of families reached with community awareness on disease prevention and hygiene promotion	500	500
Narrative description of achievements		
<p>Needs analysis</p> <p>Affected families do not have easy access to official information on disease prevention, risk reduction, or epidemiological control in the area. The Ecuadorian Red Cross conducted community awareness actions to promote a healthier environment in the neighbourhoods.</p> <p>Installation of two toilets in a collective emergency centre</p> <p>This activity was not implemented as a result of the shelters provided by the government being closed 20 days after the emergency started.</p> <p>Community awareness on disease prevention and hygiene promotion</p> <p>The Esmeraldas Provincial Board implemented weekly activities to raise awareness of disease prevention and hygiene promotion. This activity was done in coordination with the community leaders. The weekly meetings were held in the communities of San José Obrero, Delgadillo, Boca del Obo, Patricio Pérez, and Luis Vargas Torres, with the participation of the heads of the families being reached, talks and workshops were implemented, and key messages on good personal hygiene practices and the importance of hygiene at home and in the community were the main topics covered.</p> <p>For the implementation of these activities, the volunteers of the Provincial Board of Esmeraldas used participatory methodologies with playful activities to share knowledge and generate behavioural changes in the population.</p>		
Challenges		
<ul style="list-style-type: none"> Given that the shelters provided by the government were only open for 20 days it was not possible to install the planned latrines. As a result, the ERC implemented another activity as mentioned above. The ERC identified that most of the population in the affected area did not have access to water and sanitation services in their homes. Because of this, the ERC realized that it was necessary to be constant in the promotion of hygiene to create some type of behavioural change. 		
Lessons learned		
<p>The training processes provided to the population should be participatory, applying adult education techniques to generate awareness and behavioural changes in the population.</p>		

National Society Strengthening
Outcome 1: National Society capacity building and organizational development objectives are facilitated to ensure that National Societies have the necessary legal, ethical, and financial foundations, systems and structures, competences, and capacities to plan and perform
Output 1.1: National Societies have the necessary corporate infrastructure and systems in place

Indicators:	Target	Actual
Response vehicle maintenance	3	3
Lessons learned workshop conducted with the ERC and external key actors	1	1
Hiring of a National Society Operations Coordinator	1	1
Narrative description of achievements		
<p>The National Society implemented the activities of this Emergency Action Plan by hiring an Operations Coordinator and a field technician.</p> <p>The coordinator was a Risk Management technician from Esmeraldas Provincial Board and oversaw the implementation of field activities. At the same time, he was the liaison for coordination with the administrative, financial, logistical, planning, and communication areas to promote the development of the activities.</p> <p>The Headquarters team mobilized zonal technicians, administrative and communication staff, and drivers, to provide support to the Provincial Board in the implementation and monitoring of the activities. A monitoring visit was made by the National Coordinator of the Disaster Risk Management Programme to validate the actions during the last weeks of the project.</p> <p>In addition, the ERC carried out the lessons learned workshop, where it was possible to obtain feedback from the community leaders, as well as from the volunteers, and technical, logistical, and administrative staff.</p> <p>As part of the strengthening of the National Society and specifically the Provincial Board of Esmeraldas, corrective and preventive maintenance was executed on its vehicles.</p>		
Challenges		
<p>The National Society is in a phase of transition and implementation of a new IT system. The lack of knowledge of this system led to delays in some administrative processes.</p>		
Lessons Learned		
<p>The recruited staff must meet the profile for the task, have extensive experience in the implementation of emergency projects, and be familiar with the actions of the Movement.</p>		

International Disaster Response		
<i>Outcome 1: Effective and coordinated international disaster response is ensured</i>		
<i>Output 2.1: Effective and respected surge capacity mechanism is maintained</i>		
Indicators	Target	Actual
Deployment of a Surge Operations Coordinator for 2 months	1	1
Narrative description of achievements		
<p>Operational support by the IFRC: The International Federation of the Red Cross and Red Crescent Societies, through its Country Office in Ecuador, the Country Cluster Delegation for the Andean Countries, and the Americas Regional Office, provided technical support to the National Society in terms of logistics, finances, communications, technical advice, administration, monitoring and follow-up.</p> <p>Deployment of a Surge, Operations Coordinator for 2 months: A Surge Operations Coordinator was deployed to the Country Office in Ecuador to provide support to the National Society.</p>		

Challenges
Due to the security context in the province of Esmeraldas and the social mobilizations in the country, the surge Operations Coordinator's travel in the territory was limited. For this reason, he provided virtual support to those involved in the intervention.
Lessons learned
The surge personnel's experience in administration processes and the development of activities contributed positively to the local team and the operation.

Influence others as the main strategic partner		
<i>Outcome 1: The International Federation Secretariat, together with National Societies, uses its unique position to influence decisions at local, national, and international levels that affect the most vulnerable</i>		
<i>Output 1.1: The IFRC and National Societies are visible, trusted, and effective advocates on humanitarian issues</i>		
Indicators:	Target	Actual
Communication and dissemination strategy with a CEA approach	1	1
Visibility (T-shirts, banner, logos, etc.)	100	100
Narrative description of achievements		
<p>Communication and dissemination of a strategy with a CEA approach</p> <p>Communication and dissemination activities have been carried out as follows:</p> <ul style="list-style-type: none"> • Publications on social networks and media: 17 publications have been made on social networks (8 on Facebook, 2 on Twitter, 7 on Instagram) with an estimated 23,000 people reached by the end of the project. • Talks with the media: A lunch talk was held with representatives of the communities involved, representatives of the local government, and 10 local media outlets of the province of Esmeraldas to communicate the activities developed by the project. • Development of CEA tools: As part of the CEA strategy, some tools for direct communication with people assisted were produced, including the creation of a guide for the mechanism for questions, complaints, and reports to provide adequate and timely information to people assisted and the general public who had concerns about the response programme. The guide empowered the ERC to activate the mechanism where people communicated mainly to follow up and consult on difficulties related to the cash transfer programme. • For the Shelter and Health components, key message guides were prepared so that the delivery of supplies was accompanied by useful information regarding the proper use and maintenance of the products, as well as so that information related to the project and the role of the ERC and the IFRC was communicated clearly. • For cash transfers, handouts were produced on the use of ATMs to reinforce the messages given in the group sessions. <p>In order to receive feedback from the people and families reached, exit and post-distribution monitoring surveys were also generated, which allowed the ERC to know how the project was adjusted to the needs and preferences of the population, as well as their level of satisfaction, where it was identified that 92.71% of the people surveyed preferred the cash transfer modality over other modalities of assistance to meet their urgent needs.</p>		

The population in general was quite satisfied with the quality and relevance of the in-kind assistance provided through shelter kits, mosquito nets, and water treatment kits. Also, there was a positive perception of how the Ecuadorian Red Cross (ERC) has intervened in the affected communities.

Visibility (T-shirts, banners, logos, etc.)

100 uniforms have been purchased (100 safari-type caps, 100 institutional bibs, and 100 institutional long-sleeve t-shirts). These were given to the volunteer staff of the Provincial Board of Esmeraldas.

Challenges

The security situation in the country meant that interviews and the collection of complaints and claims could only be carried out virtually, thus protecting the integrity of humanitarian personnel and the civilian population.

Lessons Learned

By having an integrated intervention with a CEA approach, it was possible to identify the needs of the population at the different levels of the intervention and to provide an adequate solution to the population that required it.

An effective, reliable, and responsible IFRC

Outcome 1: The IFRC enhances its effectiveness, credibility, and accountability

Output 1.1: Staff security is prioritized in all IFRC activities

Indicators:	Target	Actual
Acquisition of insurance for volunteers	100	100
Personal protective equipment for volunteers	100	100

Narrative description of achievements

Acquisition of insurance for volunteers

All the volunteers mobilized for the emergency were insured.

Personal protective equipment for volunteers

The volunteers mobilized for the emergency received personal protection equipment to carry out the tasks safely. Also, to strengthen the Esmeraldas Provincial Board, the delivery of 100 Personal Protection Equipment (PPE) was carried out as follows:

- 100 PPEs for response teams
- 10 boxes of gloves
- 15 boxes of surgical masks
- 50 N95 masks
- 100 alcohol spray dispensers
- 35 protective suits

These supplies helped to keep the team protected in the event of a COVID-19 outbreak.

Lessons Learned

The procurement process for PPE equipment and uniforms should be one of the first to be executed for volunteer staff to have these supplies for the implementation of the action plan. However, having prepositioned supplies allows for an optimization of the time until these items are procured.

D. Financial Report

See Annex.

Contact information

Reference documents

Click here for:

- [Previous Appeals and updates](#)
- [Emergency Plan of Action \(EPoA\)](#)

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

In the Ecuadorian Red Cross:

- **Secretary General:** Juan Carlos Vizcarra, jvizcarra@cruzroja.org.ec
- **Risk Management Director General,** Roger Zambrano, rzambrano@cruzroja.org.ec

In the IFRC Country Cluster Delegation for the Andean Countries:

- **Head of the IFRC Country Cluster Delegation Andean Countries,** Rubén Romero, ruben.romero@ifrc.org
- **Programme and Operations Coordinator - Ecuador,** Javier Ormeño, javier.Ormeno@ifrc.org

In the IFRC Americas Regional Office:

- **Regional Head of Health, Disasters, Climate & Crises,** Roger Alonso, roger.alonso@ifrc.org
- **Manager, Operations, Evolving Crises and Disasters;** María Tuna, maria.tuna@ifrc.org
- **Manager, Regional Communications;** Susana Arroyo, susana.arroyo@ifrc.org
- **DREF Senior Officer,** Santiago Rodriguez, Santiago.rodriguez@ifrc.org

In IFRC Geneva

- **DREF Senior Officer:** Eszter Matyeka, eszter.matyeka@ifrc.org
- **Operations Coordination:** Antoine Belair, antoine.belair@ifrc.org

For Performance and Accountability support (planning, monitoring, evaluation and reporting inquiries)

- **Head of PMER and Quality Assurance;** Golda Ibarra, golda.ibarra@ifrc.org

How we work

All IFRC assistance seeks to adhere to the **Code of Conduct** for the International Red Cross and Red Crescent Movement and Non-Governmental Organisations (NGO's) in Disaster Relief and the **Humanitarian Charter and Minimum Standards in Humanitarian Response (Sphere)** in delivering assistance to the most vulnerable. The IFRC's vision is to inspire, encourage, facilitate and promote at all times all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.

DREF Operation

FINAL FINANCIAL REPORT

Selected Parameters			
Reporting Timeframe	2022/4-12	Operation	MDREC019
Budget Timeframe	2022/4-7	Budget	APPROVED

Prepared on 03/Mar/2023

All figures are in Swiss Francs (CHF)

MDREC019 - Ecuador - Esmeralda Earthquake 6.0

Operating Timeframe: 07 Apr 2022 to 31 Jul 2022

I. Summary

Opening Balance	0
Funds & Other Income	167,716
DREF Allocations	167,716
Expenditure	-153,274
Closing Balance	14,442

II. Expenditure by planned operations / enabling approaches

Description	Budget	Expenditure	Variance
PO01 - Shelter and Basic Household Items		10,092	-10,092
PO02 - Livelihoods			0
PO03 - Multi-purpose Cash	61,238	57,570	3,667
PO04 - Health	19,649	18,474	1,175
PO05 - Water, Sanitation & Hygiene	44,198	21,156	23,041
PO06 - Protection, Gender and Inclusion			0
PO07 - Education			0
PO08 - Migration			0
PO09 - Risk Reduction, Climate Adaptation and Recovery			0
PO10 - Community Engagement and Accountability	3,195	3,809	-614
PO11 - Environmental Sustainability			0
Planned Operations Total	128,279	111,101	17,178
EA01 - Coordination and Partnerships	5,858	4,623	1,235
EA02 - Secretariat Services	10,970	17,633	-6,664
EA03 - National Society Strengthening	22,610	19,916	2,694
Enabling Approaches Total	39,437	42,172	-2,735
Grand Total	167,716	153,274	14,443

DREF Operation

FINAL FINANCIAL REPORT

Selected Parameters			
Reporting Timeframe	2022/4-12	Operation	MDREC019
Budget Timeframe	2022/4-7	Budget	APPROVED

Prepared on 03/Mar/2023

All figures are in Swiss Francs (CHF)

MDREC019 - Ecuador - Esmeralda Earthquake 6.0

Operating Timeframe: 07 Apr 2022 to 31 Jul 2022

III. Expenditure by budget category & group

Description	Budget	Expenditure	Variance
Relief items, Construction, Supplies	88,330	74,477	13,853
Shelter - Relief		7,451	-7,451
Clothing & Textiles	5,380	4,140	1,240
Water, Sanitation & Hygiene	24,500	7,258	17,242
Medical & First Aid	1,300	1,378	-78
Teaching Materials	7,150	5,918	1,232
Cash Disbursement	50,000	48,333	1,667
Logistics, Transport & Storage	19,320	20,135	-815
Storage	540	799	-259
Distribution & Monitoring	11,300	13,262	-1,962
Transport & Vehicles Costs	6,600	5,364	1,236
Logistics Services	880	711	169
Personnel	40,950	40,444	506
International Staff	9,000	14,745	-5,745
National Society Staff	14,600	9,850	4,750
Volunteers	17,350	15,848	1,502
Workshops & Training	2,000	1,838	162
Workshops & Training	2,000	1,838	162
General Expenditure	6,880	7,025	-145
Travel	2,000	991	1,009
Information & Public Relations	800	408	392
Office Costs	1,800	2,254	-454
Communications	1,380	1,309	71
Financial Charges	900	2,063	-1,163
Indirect Costs	10,236	9,355	881
Programme & Services Support Recover	10,236	9,355	881
Grand Total	167,716	153,274	14,443