

## **DREF FINAL REPORT**

Far Western Earthquake Response in Nepal



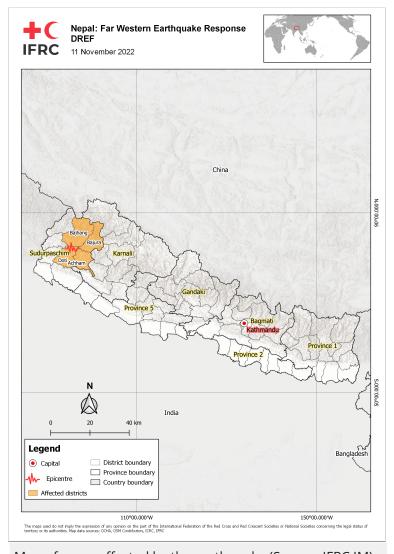
Nepal Red Cross personnel engaging in a conversation with an individual who received transitional shelter support. (Photo: NRCS)

Appeal: MDRNP013	Total DREF Allocation CHF 449,479	Crisis Category: Yellow	Hazard: <b>Earthquake</b>
Glide Number: <b>EQ-2022-000358-NPL</b>	People Affected: 30,000 people	People Targeted: 11,000 people	
Event Onset: Sudden	Operation Start Date: 2022-11-17	New Operational end date:	Total operating timeframe: <b>6 months</b>
Targeted Areas:	Sudurpashchim		

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 and Blizzard Entertainment, Mondelez International Foundation, and Fortive Corporation and other corporate and private donors. The IFRC, on behalf of the National Society, would like to extend thanks to all for their generous contributions.



## **Description of the Event**



Map of areas affected by the earthquake (Source: IFRC IM)

#### What happened, where and when?

An earthquake measuring 6.6 Richter scale struck far western Nepal on 9 November 2022. The epicentre was located in the wildlife conservation area of Khaptad Chhana Rural Municipality of Bajhang District, which adjoins Doti and Achham districts. The tremor was felt in neighbouring districts (Bajhang, Kailali, Kanchanpur, Banke, Western Rukum), as well as in various parts of India. Furthermore, many aftershocks occurred in the affected areas. The earthquake occurred at 2 A.M. while people were sleeping in their homes, resulting in many houses and families affected in Achham, Bajura, Bajhang and Doti districts.

According to the Ministry of Home Affairs (MoHA), six people lost their lives when they were buried under the rubble of their collapsed houses. Moreover, eight people were injured in Purbichauki Rural Municipality of Doti District. Many houses collapsed, and most houses in municipalities adjoining to the epicentre had cracks. Almost all residents of these areas in the four districts immediately evacuated their houses and sought refuge in open spaces. There was an immediate need of lifesaving support, including tarpaulins for emergency shelter, safe drinking water, ready-to-eat food, psychosocial support (MHPSS - Mental Health & Described Psychosocial Support Service), and protection services.

Note:□



Picture 1: NRCS volunteer providing relief item in the affected district. (Photo: NRCS)

Picture 2: Healt worker examining a baby during RCEC camp. (Photo: NRCS)



Picture 1 Picture 2

#### **Scope and Scale**

According to the NRCS situation report, a total of 10,732 households (approximately 53,660 people, including 27,367 females) were affected in Doti, Achham, Bajura and Bajhang districts. Among these, 1,882 houses were completely destroyed, and an additional 6,181 houses were partially damaged. Due to the national-level elections planned for 20 November 2022, Government authorities were more focused on election preparations, which caused some delays in data collection and conducting post-disaster impact assessments. NRCS scaled up the relief distribution (non-food items) to the affected families to protect them from the harsh winter in one of Nepal's remote rural settings. NRCS conducted its response operation in two phases:

- 1. The first phase involved providing immediate relief items such as tents, tarpaulins, blankets, mattresses, and food immediately after the earthquake.
- 2. The second phase encompassed offering integrated services, including support for constructing transitional shelters, WASH facilities, health promotion services, and PGI-related services, a few weeks after the earthquake.

## **National Society Actions**

Have the National Society conducted any intervention additionally to those part of this DREF Operation?	No
Please provide a brief de- scription of those additional activities	Nepal Red Cross has implemented a community-based disaster risk reduction programme in Doti district with the bilateral support from the American Red Cross.

### **IFRC Network Actions Related To The Current Event**

The IFRC Country Delegation (CD) in Nepal provided technical support in responding to the earthquake. In addition, the IFRC CD further coordinated with the IFRC Asia Pacific Regional Office (APRO) for DREF allocation and



Secretariat	supported for the coordination with emergency shelter cluster. IFRC allocated CHF 499,479 for the support of the affected households after earthquake. In addition, IFRC participated in National Emergency Operation Centre (NEOC) along with NRCS and of the Humanitarian Country Team (HCT) meetings and provided required input on response. IFRC CD procured relief items such as tarpaulins, blankets, mattresses, dignity kits, and buckets for replenishment. following IFRC procurement guideline. IFRC provided technical support to NRCS to produce situation reports of the response and published field report in GO Platform.
Participating National Societies	IFRC CD team, as well as in-country members closely monitored the situation on a regular basis. The merican Red Cross and Danish Red Cross provided financial support for construction of transitional shelter, toilet construction and distribution of multi-purpose cash. Danish Red Cross allocated CHF 248,276 (2 million DKK) for NRCS.   Furthermore, the American Red Cross allocated 50,000 USD through IFRC, which was used for multi-purpose cash grant assistance. Similarly, the Canadian Red Cross supported funds to procure medicines for the Red Cross Emergency Clinic (RCEC) operation. The IFRC and its members worked collectively, using the plan developed for the IFRC-DREF allocation as an IFRC-wide plan.

## **Other Actors Actions Related To The Current Event**

Government has requested international assistance	No
National authorities	The Ministry of Home Affairs (MoHA) and National Disaster Risk Reduction and Management Authority (NDRRMA) took the lead role in coordinating the response operation at the central and local level, conducting rescue, evacuation, rapid assessment, and relief distribution. The government mobilized security forces for search and rescue of the people in earthquake affected districts.   Furthermore, Emergency meetings were held in MoHA where NRCS and IFRC participated on regular basis. Likewise, NRCS is a member of the Disaster Management Committees at all levels (provincial, district and municipalities) and worked closely with respective authorities in responding to the needs of affected people. The NDRRMA deployed technical teams in affected areas of Doti, Achham and Bajhng districts for conducting damage and need assessment. The teams in close coordination with respective District Administration Offices, conducted the assessment.
UN or other actors	UNICEF, UNDP and UNFPA coordinated with local NRCS units in the targeted districts. The Lutheran World Federation dispatched tarpaulins to 100 most vulnerable households for Sayal and Purbichauki municipalities of Doti District. The World Food Program (WFP) supported for transportation of non-food items (family tent- 40, tarpaulin-150, and blanket-100) from Kailali to Doti district.
Are there major coordination r	nechanisms in place?



Coordination with the Shelter cluster was activated after the earthquake, chaired by the Department of Urban Development and Building Construction (DUDBC) under the Ministry of Urban Development (MoUD). IFRC is co-chair for the national level shelter cluster coordination, in coordination with NRCS. NRCS organized a virtual meeting on 14 November 2022 to foster a common understanding of the shelter strategy and prevent activity duplication among various shelter actors. Chaired by DUDBC with support from NRCS/IFRC, the meeting endorsed the design and cost estimation developed by NRCS for transitional shelter.

IFRC Delegation also liaised with the UN Resident Coordinator Office and shared NRCS situation reports on a regular basis. In addition, NRCS and IFRC coordinated with various MOHA line agencies, including the National Emergency Operation Centre and National Disaster Risk Reduction and Management Authority.  $\square$ 

NRCS also coordinated with government agencies at the provincial and local levels to provide relief support in the affected areas. Regular coordination with the District Administration Offices and municipalities continued throughout the operation. The coordination meetings supported NRCS district chapters in beneficiary selection, beneficiary list endorsement, and the smooth implementation of field-level activities, with minimal challenges.

The earthquake destroyed 1,882 houses, while NRCS could support 333 households in addressing their shelter needs. Since there remained a gap in covering the remaining affected households, IFRC and NRCS collaborated with the Lutheran World Federation (LWF) in Nepal. LWF adopted the design and cost rates developed by NRCS to provide transitional shelter support for 150 households in Doti district. Both organizations focused on distinct municipalities to prevent redundancy and overlap.



## **Needs (Gaps) Identified**



### **Protection, Gender And Inclusion**

As people from different families were living in open spaces and under tarpaulins with proximity, there was a need for awareness of sexual and gender-based violence. The assessment conducted by NRCS revealed that there was a need to promote the menstrual hygiene among the displaced female population to ensure their dignity while staying in the temporary shelters. In addition, there was a need to established child friendly spaces. Most of displaced families had small children, pregnant/lactating mothers, elderly people and few families have member with disability. These group of people were in need for supplementary foods, additional basic items required for daily needs. However, the economic condition of the families was very poor and there was need for external support for these families to manage these basic needs. NRCS supported multi-purpose cash for most vulnerable families during the operation.



### **Community Engagement And Accountability**

As envisaged in the IFRC-DREF application and the plan, the community engagement for the planning to the implementation phases very much required. A process was needed to ensure that information from communities is not only listened to, but also acted on, by providing various mechanisms to listen to and respond to those voices. During the operation, the CEA need was to focus on a participatory response mechanism, supporting the community in recognizing their needs, identifying recipients, etc. The major focus of the operation was to support the transitional shelter, and there was need of engaging beneficiaries and local communities for construction.



### **Shelter Cluster Coordination**

Coordination with Shelter Cluster members agencies is one of the regular activities of NRCS and IFRC at the country level, as part of the wider Humanitarian Country Team (HCT) and under the leadership of the Ministry of Urban Development (MoUD). Initial activation started from 14 November 2022 and the coordination was continued throughout the operation, particularly in relation to transitional shelter.



#### Multi purpose cash grants

Based upon the assessment report, the market in the affected areas was functional. However, the affected families lost commodities including food stock, hygiene products, warm clothes for the upcoming winter and other daily household items. Therefore, the multi-purpose cash was provided to meet their immediate basic needs. A surge personnel with the generous support from the Sri Lanka Red Cross was deployed for two months in the affected areas to support the multi-purpose cash grant initiative and community engagement and accountability.





#### **Shelter Housing And Settlements**

The families displaced by the earthquake found refuge in open spaces, with some seeking shelter in the homes of relatives. The assessment report highlighted an immediate need for tarpaulins, blankets, and mattresses to provide emergency shelter support, particularly for the most vulnerable who had been residing in the open for an extended period. According to NRCS's assessment report, families whose homes were completely destroyed had an urgent need for building transitional shelters. This necessity was especially topmost for families considered most vulnerable, including those with children, pregnant and lactating women, people with disabilities, the elderly, and those with chronic illnesses.

Additionally, the affected families were anticipating the provision of CGI sheets to construct temporary shelters. The needs identified during the development of the response operation plan were highly relevant, and NRCS fulfilled these needs for the most vulnerable throughout the operation.



#### Health

The families that had been displaced found shelter in open spaces, and given the onset of the winter season, there was a heightened risk of various diseases due to the extreme weather, particularly affecting vulnerable groups such as children, the elderly, and pregnant women. Furthermore, there was a risk of water-borne diseases, notably diarrhea outbreaks. Therefore, there was a need to carry out health promotion activities, including awareness raising about basic health services, including child immunization, antenatal care (ANC) visits, institutional delivery, and referral services.

Moreover, the level of stress among the affected population, including survivors, was on the rise. Addressing this concern, psycho-social support was deemed crucial to help people cope with stress and facilitate their return to normalcy. In addition, referral services were designed and integrated into the health interventions. These services were not only crucial for ensuring access of care for people requiring emergency services, but they also played a vital role in maintaining uninterrupted access to health facilities for those with chronic diseases and non-communicable diseases (NCDs).



# **Water, Sanitation And Hygiene**

All displaced families were living in emergency shelter in open spaces and in relatives' houses with limited access to safe water, user friendly sanitation and hygiene (including menstrual hygiene). Because of which, there was possibilities of deterioration of health condition, specially of vulnerable groups such as children, pregnant and lactating women, elderly and people living with disability. There were no major damages on sources of drinking water and water supply was not disrupted. To address the minimum WASH needs in emergencies, there was need of construction/installation of safe water supply facilities in households receiving transitional shelter support. In addition, user friendly latrines with hand washing platform were needed. Because of the poor hygiene practices in the communities, various behaviour changing awareness activities (hygiene promotion, menstrual hygiene, hand washing demonstration, etc.) were needed.



## **Objective and Strategy Rationale**

#### Overall objective of the operation

The operation objective was to address the immediate needs of an estimated 36 per cent of the total affected families (10,732 households) by earthquake. The response operation aimed to support targeted most vulnerable families to meet their needs in earthquake affected districts: Doti, Achham and Bajhang by providing transitional shelter support, basic household non-food relief items as well as health, WASH, protection services, both in-kind as well as Cash and Voucher Assistance (CVA) support.

#### Response strategy implementation

The overall strategy of the response operation was formulated in two phases i) providing immediate relief items (tents, tarpaulin, blankets, mattress, food etc.) right after the earthquake and ii) providing integrated services such as support to construct transitional shelter, WASH facilities, health promotion services and PGI related services after few weeks of the earthquake. Second phase of the operation included integrated packages related to i. transitional shelter, ii. WASH and iii. Health and iv. Protection, Gender and inclusion related activities in three districts. Community engagement and accountability was integrated as a common approach in all these sectors. The IFRC developed a comprehensive plan for the IFRC-DREF application, which was considered as IFRC-wide plan, applied by in-country members for their response to cover additional beneficiaries.

Localized action was promoted by NRCS promoted for the operation. District chapters and sub-chapters were engaged in implementing the activities, while NRCS headquarters was coordinating the response operation as well as coordinating with IFRC Networks national authorities and other partners. Local government was at the forefront and NRCS extended coordination and collaboration with other organizations working in the affected area for greater impact, avoiding duplication and amplifying the efforts. Effective coordinated approaches with the authorities and other stakeholders were one of the key strategies for the operation.

#### SECTOR-WISE RATIONALE:

#### Shelter, Housing and Settlements:

The emergency shelter and NFI distribution strategy was planned based on the level of damage of houses. Each household with fully destroyed house was provided with blankets, tarpaulins and mattresses according to their need. Each household with partially destroyed houses was provided with blanket and tarpaulins.

Beyond the emergency shelter support, 333 most vulnerable households among the ones having fully destroyed house were supported to build transitional shelter. The transitional shelter was designed in coordination with the government, taking into consideration previous practices among the shelter cluster member agencies. The one bedroom with kitchen space was most appropriate to have consistent approach among all the families supported. Local resources and human resources was used to build all the transitional shelters was one of the foremost considerations in the process.

Bamboo, iron pole or wooden pole were used as per beneficiary choice, promoting the local materials either salvaged or procured from the local market. CGI sheets were used for the roofing. NRCS organized Participatory Approach for Safe Sheter Awareness (PASSA) orientation to volunteers who were mobilized in the communities for transitional shelter construction. Conditional cash grant was provided in two instalments for the targeted family, transferring directly in their bank account.

The above-mentioned strategies which were envisaged in the plan was very much relevant and applied in the operation.



#### Health:

NRCS mobilized its local NRCS volunteers for health promotion as well as prevention and control of diseases along with their capacity building. They mobilized ECV volunteers to conduct health promotion activities, ensure the access and coverage of basic healthcare services especially related to maternal and child health (MCH) and disease prevention and control. Additionally, the volunteers also worked closely with the NRCS health service department, hospitals and local health service centres to provide health services, including mental health and psychosocial support (MHPSS). The health actions primarily targeted the affected vulnerable population- pregnant mothers and people with underlying health conditions requiring emergency referral, pre-hospital care services in order to enhance the access to health facilities. In addition to conducting Red Cross Emergency Clinics (RCEC) in the affected areas, referral services to bridge the potential gap between health service access and utilization was done for targeted group of people on a need basis.

#### Water, Sanitation and Hygiene (WASH):

The WASH interventions were developed based on the initial assessment was carried out. Local volunteers/staff were oriented/trained, especially on construction/installation of sanitation including menstrual hygiene management (MHM) and handwashing facilities to ensure quality construction. Standard model latrines, and hand washing facilities were constructed for the affected households. The household level sanitation with hand washing platform were constructed/installed to selected fully damaged houses to ensure immediate access to WASH. In addition, these houses were reached with hygiene promotion activities. While constructing the sanitation facilities, local context was considered together with available source and time of delivery.

#### Protection, Gender and Inclusion (PGI):

One of the key implementing strategies includes incorporating the inclusion components in Shelter CVA and WASH intervention. While implementing the activities, most vulnerable households among the affected were targeted particularly people with disabilities, pregnant/lactating women, infants and elderly. Affected female population staying in the emergency shelter received dignity kits, cash grants, etc. to cope the emerging situation. In addition, the affected population were oriented on the information against Gender Based Violence (GBV). NRCS ensured the sex and age disaggregated data was collected throughout the operation period. The issue related to child safeguarding was taken into consideration from planning to implementation phase, by conducting child safeguarding risk analysis and developing the action plan. The operation also prioritized it activities in supporting children to recover from the shock of earthquake by establishing child friendly spaces.

#### Community Engagement and Accountability (CEA):

During the response, numerous communication channels and methods were utilized, including face-to-face communication, IEC materials dissemination, miking and public service announcements (PSAs) from Radio. The necessary information was adapted and developed according to demand. Beneficiary selection was done by local government and community consultation based on selection criteria. The key messages were disseminated based on context factors such as communication channel, timing, location, and audience size. Furthermore, communities (both recipients and non-recipients) could ask questions, make complaints and appeal for their inclusion in distributions and other activities using NRCS feedback mechanisms. NRCS ensured the integration and mainstreaming of community engagement and feedback mechanisms.

Planning, monitoring, evaluation, reporting (PMER) and information management (IM) practice: Stronger PMER-IM systems were practiced in the operation. The PMER Unit of NRCS maintained regular communication with affected districts and updated the data tracking sheet frequently and disseminated it to wider Red Cross Red Crescent stakeholders. A participatory and bottom-up planning approach was applied based on the findings of detailed assessment to determine the specific needs of the affected communities. Post Distribution Monitoring (PDM) was conducted to ensure effectiveness for future operations. Likewise, regular situation updates and information bulletins were developed for documentation and sharing.

#### Cash-based assistance:

Cash and Voucher Assistance (CVA) approach was used in transitional shelter, toilet construction, and multi-purpose cash for basic needs. The multi-purpose cash was provided for i. households targeted for transitional shelter and ii. Additional households for meeting the basic needs (most vulnerable families for the PGI perspective).



Report of detailed assessment and coordination with local governments including beneficiaries' interactions revealed a high preference for cash, thus cash assistance had been promoted. Beneficiaries had their own bank account therefore cash was provided through their bank account.

Rapid market survey was conducted to identify the availability of required commodities, price and accessibility nearby to the targeted area. Survey result indicated that the market was functional.

#### Security:

Enabling safe and secure programme delivery is a top priority for the IFRC, and a standard IFRC security framework and country security plan that applies to all IFRC-deployed personnel are in place. With well-established networks of community-based volunteers, NRCS have widespread community acceptance throughout the country. The National Society's security framework was applied to staff and volunteers for the operation. There is recognition and respect for the Red Cross Red Crescent emblem and comprehension of the Movement's activities. In addition to coordinating with other partners of the Red Cross Red Crescent Movement, regular contact with local security networks was maintained. IFRC CD also participated in various stakeholder meetings where safety and security issues were discussed.

The IFRC country security team is in place, and the country's general safety and security situation was continuously monitored. When appropriate, the security officer disseminated Security Advisories, which included temporary restrictions. SMS messages were also used to send Safety and Security alerts. All new and visiting international personnel were given a security welcome pack and were required to attend a security briefing within 24 hours of their arrival. The identified safety and security threats had a minor impact on the staff's ability to implement programme activities. Difficult terrain, geographical isolation, severe weather, and deteriorating infrastructure (roads and bridges) all contributed to the dangers in the field. As necessary, ongoing risk mitigation measures, such as safety and protection equipment, field movement tracking, and communication tools, were updated to reduce the likelihood of incidents. Volunteers and staff who participated in the operation adhered to the necessary security measures and field travel was closely monitored via phone communications.

#### Communications:

NRCS and IFRC communication teams worked together to promote volunteer work on the response's frontline. Communications highlighted the humanitarian needs of affected people to further position the NRCS as a partner of choice in humanitarian actions, while also relaying the voices of people at risk via national and international Red Cross social media and other digital channels, as well as the news media.

Proper visibility of the Red Cross was maintained during community-level activities and printing of communications materials. Similarly, to cover the implementation of the response, exposure story was also developed and published by IFRC in coordination with NRCS. Some of the national and social media coverage (with high engagement) of earthquake response operation are as follows:

- Social media: WASH PGI Shelter RCEC
- National media coverage: Satyapati, Annapurna, Ratopati, Reporters Nepal

## **Targeting Strategy**

#### Who will be targeted through this operation?

NRCS targeted to cover 36 per cent of estimated affected population, responding to its overall capacity in the country as well as the expected support coming from other actors in the affected areas of four districts. As for the transitional shelter interventions, the operation considers only 20 per cent of the estimated affected population given the associated costs and budget limitations, where the operation targeted those families most at risk of the complications related to the winter season.



#### Explain the selection criteria for the targeted population

NRCS relief efforts were in accordance with the established standards of the GoN and cluster system. A gender and diversity sensitive analysis was applied while selecting beneficiaries, including the targeting of women-headed households, pregnant or lactating women, single women, people with disabilities, the elderly, those facing caste-based exclusion.

Beneficiary selection criteria for transitional shelter:

1st Families whose houses are fully damaged by earthquake

2nd Families whose houses are fully collapsed by earthquake

Below criteria for further screening among 2nd priority.

3rd Households headed by women and single women

4th Death of an earning member of the family due to earthquake

5th Households headed by children below 18 years of age

6th Households comprising of pregnant and lactating women, people with disability and Chronic illness

7th Households headed by elderly above 65 years of age and houses which has senior citizens

8th SGBV survivors and community people from low income/displaced families

9th Marginalized (daily wages, socially excluded etc.)

Beneficiary selection criteria for transitional shelter:

1st Families whose houses are fully/partially damaged by earthquake

Below criteria for further screening. This will be final target

2nd Households headed by women and single women

3rd Households headed by children below 18 years of age

4th Households comprising of pregnant and lactating women, people with disability and Chronic illness

5th Households headed by elderly above 65 years of age and houses which has senior citizens

6th SGBV survivors and community people from low income/displaced families

## **Total Targeted Population**

Women:	4,150	Rural %	Urban %
Girls (under 18):	1,450	35.00 %	65.00 %
Men:	4,080	People with disabilities (estimated %)	
Boys (under 18):	1,320	2.20 %	
Total targeted population:	11,000		

## **Risk and security considerations**

#### Please indicate about potential operational risk for this operations and mitigation actions

Risk	Mitigation action
Challenges to conduct timely assessment and select beneficiaries due to sociopolitical interests.	NRCS with local government, DDMC conducted assessment.  The assessment was completed on time. Beneficiaries' selection was also done in coordination with local government.



Nepal Election 2022 affect the response operation	Mobilized NRCS staff and volunteers, continued coordination with the Government at all levels.
Market price fluctuation for purchase of construction materials	Used local materials to construct transitional shelter and volunteers continuously carried out informal market monitoring.
Difficult geographical areas (remoteness) for transportation	Local people transported constructed materials by themselves and coordinated local levels for road clear- ance during road blockage conditions.

#### Please indicate any security and safety concerns for this operation

The National Society's security framework was applicable for the duration of the operation to their staff and volunteers. For personnel under IFRC security's responsibility existing IFRC country security plans were applicable. All IFRC must, and RC/RC staff and volunteers were encouraged, to complete the IFRC Stay Safe 2.0 e-learning courses.

Enabling safe and secure programme delivery was a priority for IFRC and a standard security framework as well as a country security plan was in place which applies to all IFRC-deployed personnel. NRCS has very good level of community acceptance countrywide, with established networks of community-based volunteers. There is recognition of and respect for the RC emblem and understanding of the activities carried out by the Movement.

Regular contact was maintained with local security networks. IFRC Country Delegation (CD) also participated in a range of stakeholder meetings in which safety and security matters were considered and discussed, including Humanitarian Country Team (HCT) meetings convened by the UNRC office. An IFRC country security team was in place and the general safety and security situation in country was constantly monitored. The security officer disseminated Security Advisories in weekly manner, including any necessary temporary restrictions when appropriate. Safety and Security alerts were also sent via SMS messages.

All new and visiting international personnel were provided with a security welcome pack and attended a security briefing within 24 hours of arrival in-country. Field movement monitoring was in place, with field travel monitored closely through radio contact and phone communications. The security team had local networks in the areas of operation and was ready to put in place security contingency plans if necessary.

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Finally, it was noted that when military and/or other security actors were present in the same humanitarian space, the guidance in the Principles and Rules for Red Cross and Red Crescent Humanitarian Assistance 2013 Section 6 – Relations with Public Authorities: Civil-Military Coordination and the IFRC Stay Safe – Guide to a Safer Mission was applied. Operations and programme managers/coordinators adhered to the IFRC Stay Safe – Guide to Managers in Chapter 5 – Working with the military to ensure principled humanitarian action.



## **Implementation**



### Community Engagement And Accountability

Budget	CHF 2,246
Targeted Persons	10000
Persons Assisted	56156

Indicators	Target	Actual
# of people reached through awareness activities	10000	56156
# of radio programme/jingle produced and aired through local FM	84	10
# of community feedback collected	2000	254

#### Narrative description of achievements

The operation aimed to reach 10,000 people, including 5,100 through CEA and risk communication-related activities. NRCS conducted various activities, such as awareness through radio programs, door-to-door visits, IEC materials distribution, and the collection of community feedback during the operation, which reached 56,156 people, including 28,639 females. CEA was integrated into all sectors throughout the operation. The CEA mechanism was activated in the communities, involving the collection of feedback and responding to it. According to the PDM report, respondents were aware of NRCS's existing feedback mechanism, including the toll-free number 1130 and complaint boxes placed in key locations. The feedback mechanism was widely used as well.

#### Multi-sectoral Feedback Mechanism Channels:

During the earthquake response, to ensure two-way communication with the communities, various feedback mechanism channels were established in the response districts, including the Red Cross hotline 1130, public announcements via miking and radio/FM, face-to-face communication, telephonic communication, and feedback/suggestion boxes. Initially, NRCS provided orientation to 29 volunteers, including 17 female volunteers, on the KOBO mobile app for feedback collection in Doti, Bajhang, and Achham districts. Participants were oriented on the feedback mechanism while also keeping suggestion boxes. During the orientation, NRCS hotline number 1130 pocket cards were distributed to the participants.

In total, 195 volunteers, including 80 females, were mobilized during the response period for feedback collection. To better capture community voices, feedback boxes and help desks were established in three RCEC camps and relief distribution points. All activities were carried out with the local government's knowledge and community consent, ensuring their participation in alignment with relevant national society guidelines. Transparency and accountability were maintained toward the community, government, partners, and stakeholders. Information was adapted and developed based on demand, with door-to-door visits and community meetings conducted as needed.

While the operational plan initially aimed to collect 2,000 feedbacks from the community, a total of 254 feedbacks (198 related to shelter, 26 to health, 3 to WASH, 12 to PGI, and 15 to CEA) were received through NRCS hotline 1130 and feedback boxes. NRCS's field-level staff and volunteers engaged in daily visits to communities and



targeted populations, engaging in discussions to address concerns and provide suggestions. As a result, fewer feedbacks were received at NHQs through established mechanisms. After receiving feedback, NRCS promptly addressed queries through various mediums. They posted response-related activities on official social media platforms like Facebook and Twitter (45 posts), garnering engagement from 45,721 people during the response operation period.

#### Dissemination of Key Messages:

NRCS's operation team crafted 10 types of messages (2 related to shelter, 2 to WASH, 3 to PGI, 1 to health, and 2 to earthquake) for radio broadcasting. Collaboration with five local FM radios through NRCS district chapters ensured the daily broadcasting of these messages from January to March 2023 (total of 950 broadcasts). Radio messages played a vital role in sensitizing the broader population, especially within the response communities.

Furthermore, NRCS reprinted IEC materials related to WASH, health, and PGI-related information to increase awareness among the targeted populations. According to data from the NRCS communication department, approximately 56,156 people, including 28,639 females, were reached through door-to-door visits, IEC materials distribution, and radio programs. Additionally, NRCS district chapters deployed volunteers who disseminated awareness messages using handheld microphones during this period. Reports from district chapters indicated that the information reached 20,000 people, including 15,708 females.

An exposure story was collected and prepared by the IFRC and NRCS team, highlighting the story of a single woman constructing her transitional shelter after the earthquake. The story also captured best practices in utilizing locally available and scrap materials for the construction of transitional shelters in different locations across the affected districts.

#### **Lessons Learnt**

- Community-driven communication approach is more effective and efficient and enhances community ownership.
- Mobilization of local volunteers in the community helps to reach target groups easier.
- Appropriate beneficiary communication mechanism helps to ensure meaningful participation of the local community including women and build better understanding among beneficiaries and NRCS.
- Use radio PSA and IEC material based on local context and adapting local languages as much as possible.
- Mainstreaming CEA approach in all activities (including grass-root level) will ensure quality programming.

#### **Challenges**

• Community people were resistant to understand the process of community engagement for temporary shelter construction in instalments.

	Protection, Gender And Inclusion	Budget		CHF 37,400
		Targeted Persons		750
		Persons Assisted		1485
Indicators		Target	Actual	
	ulnerable people supported urpose cash grant	750	1485	
		500	500	



# of women and adolescent girls receiving dignity kits		
# of child and gender friendly spaces are functional	3	4

#### Narrative description of achievements

The PGI-related initiatives were considered common action points to be integrated across all other sector-related interventions. NRCS primarily supported targeted groups of people by distributing dignity kits, establishing child-friendly spaces, providing multi-purpose cash, and closely monitoring and promoting safeguarding activities to mitigate any form of violence or abuse.

Throughout the response operation period, 49 NRCS staff and volunteers signed the Code of Conduct (Anti-harassment and child protection) and underwent orientation on anti-harassment and child protection. In total, 2,005 people in affected communities were reached with SGBV and child protection messages.

#### Distribution of Dignity Kits:

NRCS district chapters distributed 500 sets of dignity kits (250 in Doti, 125 in Bajhang, and 125 in Achham) from their stock, which were subsequently replenished. The IFRC Delegation procured 500 sets of dignity kits and provided them to NRCS NHQs to replenish the items previously distributed in the affected districts.

#### Child Friendly Spaces:

The NRCS technical team guided all targeted District Chapters' staff and volunteers to identify the need for establishing child-friendly spaces and to assist the local community in setting up three such facilities. Following this guidance, district chapter and field operation teams procured necessary items, such as sliding boards, swings, and playing balls, required for child-friendly spaces. These spaces were established in four basic schools in the affected areas (2 in Doti, 1 in Achham, and 1 in Bajhang). A total of 460 children (178 boys and 282 girls) were reached through these spaces, benefiting from the equipment provided by the operation. In line with suggestions from the regional IFRC PGI Coordinator, the NRCS operation team developed a child safeguarding risk analysis, leading to the formulation of a risk mitigation plan. NRCS staff assigned to field offices as well as district chapters conducted targeted activities in accordance with this risk mitigation plan. There were no reported cases of abuse or misuse of children during the response operation.

#### Multi-purpose cash assistance:

The Initial Rapid Assessment conducted by NRCS within 48 hours of the earthquake revealed that many vulnerable groups, including children, pregnant women, and senior citizens, resided in the affected areas and required external support to meet their specific needs, such as supplementary food, routine medicines, and warm clothing. The operational plan aimed to provide multi-purpose cash assistance to address these needs. As multi-purpose cash was also provided to 333 households that received transitional shelter support, IFRC and NRCS established clear criteria for selecting beneficiaries for multi-purpose cash with a PGI perspective. Consequently, the beneficiaries selected for this assistance were distinct from the transitional shelter beneficiaries.

Based on the set criteria, NRCs district chapters (Achham, Bajhang and Doti), selected 397 households - 103 households in Achham, 97 households in Bajhang and 197 households in Doti, in close coordination with concerned Municipal offices. The list of beneficiaries was approved by the municipalities and DDMC. NRCS team collected bank details and also assisted some selected people to open their bank account for those who did not have one. After collecting all details of the beneficiaries, district chapters sent the list to IFRC Delegation and Danish Red Cross. The American Red Cross provided USD 50,000 for IFRC to provide multi-purpose cash, both for beneficiaries as per PGI perspective and transitional shelter support.

In total, 397 households (1,985 people) received this assistance, with IFRC covering 297 households (1,485 people) - 197 households in Doti, 50 in Achham, and 50 in Bajhang - and the Danish Red Cross supporting 100 households



(50 in Achham and 50 in Bajhang). Each family received NPR 15,000 (approximately CHF 107), directly transferred to their bank accounts by IFRC and Danish Red Offices.

#### **Lessons Learnt**

- Most vulnerable people (pregnant/lactating women, adolescent girls, people with disability, etc.) have better opportunities to manage their basic items as per their need to sustain their living conditions, if cash and voucher assistance is applied in these types of response operation.
- In order to enhance the effectiveness of response, the collaboration and mobilization of local community groups (existing mother groups, women's groups, water user committees, child clubs, etc.) need to be strengthened.

#### **Challenges**

• Despite having specific criteria for beneficiary selection for cash support, community expectation was very high, and all affected families were expecting support from NRCS. This caused challenge for beneficiary selection, so NRCS operation team had to put extra effort to screen intended beneficiary as per the planned target.

National Society Strengthening	_	Budget		CHF 93,290
	Strengthening	Targeted Persons		150
_		Persons Assisted		195
Indicators		Target	Actual	
# of lessons learned workshop conducted		1	1	
# of volunteers insured		150	195	

#### Narrative description of achievements

#### Mobilization of Volunteers:

NRCS mobilized total of 195 volunteers including 99 female volunteers during the response period for initial assessment, NFI materials distribution, trained on ECV, MHPSS, and KOBO for feedback data collection and for response activities implementation. District chapter staffs were supported, trained and monitored by thematic leads from the NRCS headquarter such as shelter construction, health and WASH, multi-purpose cash support, CEA and PGI. IFRC supported NRCS during the planning of the DREF and also ensured the timely implementation of the response.

#### Lessons Learned Workshop:

One event of lesson learning workshop was conducted in Doti districts with the participation of 43 people including seven females representing four district chapters, local authorities, NRCS Headquarter and IFRC Nepal CD. The workshop was organized in July 2023. Participatory methodology was applied in the workshop.

Key recommendation of the workshop includes:

- 1. Enhancing the coordination and capacity of local level government on Initial Rapid Assessment (IRA) process and prompt availability of the IRA and detail assessment format would make the data collection process smooth and enable timely response.
- 2. Beneficiary selection process should be implemented timely and in close collaboration with local government to provide the timely support to affected people and also to meet the response planned duration.



- 3. The lack of emergency response plan in local authorities affected the faster intervention therefore the facilitation on development of emergency response plans and enhancing their capacities is needed. Identification of the local, provincial and federal level agencies to collaboratively develop an action plan for preparedness and response in coordination with partners should also be done.
- 4. Many community members still lack access to banking transactions and require orientation on its operations. While bank-provided cash support has increased some digital literacy, challenges like geographical distance and limited bank access remain. Promoting banking habits would be useful for cash assistance in response operation. As there are people who lack bank access, there should be alternatives like direct cash handouts during disasters. Collaborations with banks to facilitate account openings and increase digital literacy among the community are also important.• •

#### **Lessons Learnt**

N/A

#### **Challenges**

N/A

	Secretariat Services	Budget		CHF 38,939
	Targeted Persons		0	
<b>V</b> -		Persons Assisted		0
Indicators		Target	Actua	al
% of financia procedures	al reporting compliance to IFRC	100	100	
# of surge deployed for the operation		1	1	

#### Narrative description of achievements

#### Surge Deployment:

A CVA/CEA surge delegate was deployed during the initial phase of the response operation to provide a detailed assessment and support for CVA. The delegate supported the operation from December 2022 to January 2023 and played a pivotal role in assessing both conditional and unconditional cash support in the response areas. The IFRC Delegation consistently provided support in planning, implementing, and monitoring the response activities, including the communication and documentation of best practices and exposure stories.

#### Technical Support:

Field-level activities were very slow to begin, so the IFRC Delegation deployed a response focal person to the Doti field office for one month to expedite planned activities. The IFRC Health Officer visited targeted districts almost monthly and supported NRCS in conducting the RCEC, as well as assisting the field team in implementing health-related activities. Similarly, the Communication Officer, PMER Officer, and CEA Officer of IFRC visited the district chapters to support field teams.

#### Visibility:

IFRC maintained high visibility throughout the field movement and the implementation of response activities. Moreover, the NRCS field team upheld the visibility of the Red Cross in every activity in the field.



#### **Lessons Learnt**

• Regular situation updates and effective communication within the team ensure timely delivery of assistance to those in need.

#### **Challenges**

• The language barrier experienced by the CVA/CEA surge delegate hindered direct communication with the beneficiaries and the ability to fully grasp their perspectives and opinions. The operation team in the ground support the CVA/CEA surge with translation.

# **Shelter Housing And Settlements**

Budget	CHF 218,325
Targeted Persons	11000
Persons Assisted	10635

Indicators	Target	Actual
# of households supported by transitional shelter solution	200	233
# of households supported by partial shelter support/NFI	2000	2127
# of households supported by technical orientation and awareness	200	233

#### Narrative description of achievements

Under this sector, the operation aimed to support 2,200 households (11,000 people). The approach of the operation was to provide emergency shelter items immediately after the earthquake to enable displaced households to manage their emergency shelter and provide additional support for the most vulnerable households to construct their transitional shelter in the second stage. By the end of the operation, 2,127 families (10,635 people, including 5,424 females) were reached through emergency shelter items support.

#### Emergency Shelter/Relief Items Assistance:

NRCS utilized its existing stocks and distributed relief items such as tarpaulins, blankets, and mattresses in affected communities. All four district chapters of NRCS held stocks of 50 sets of tarpaulins and blankets in each chapter office prior to the earthquake. District chapters immediately mobilized their volunteers within six hours, who participated in rescuing people from damaged houses. The district chapters distributed tarpaulins, blankets, and mattresses from their stock, and volunteers aided displaced people in setting up emergency shelters. In Purbichauki Rural Municipality of Doti, where six people died and many houses collapsed, DDMC provided 40 family tents. NRCS NHQs dispatched additional items from its regional warehouse located in the Far-Western region (Sudur-Paschim Province), and these four district chapters continued distributing items to the remaining families. During the response operation, NRCS distributed 4,082 pieces of tarpaulin, 2,663 pieces of blankets, 250 pieces of mattresses, and 31 sets of kitchen utensils in Doti, Bajhang, Bajura, and Achham districts. A total of 68 volunteers and staff from NRCS were mobilized for relief material distribution in the earthquake-affected districts.



IFRC procured 5,000 pieces of tarpaulins, 5,000 pieces of blankets, and 400 pieces of mattresses to replenish the items distributed by NRCS. The tarpaulins and blankets were procured through the Regional Logistic Units based in Kuala Lumpur, while the mattresses were procured by the IFRC CD in Nepal. The entire procurement process and item delivery were completed by the end of May 2023.

#### Transitional Shelter Assistance:

Furthermore, the operation aimed to assist 200 households in constructing transitional shelters. The plan included orientation for these households on safer construction based on the PASSA approach and tools. NRCS recruited an engineer for the field office based in Doti district as a roving officer. Similarly, one sub-engineer was recruited in each district chapter of Doti, Achham, and Bajhang districts. The Seti Technical Institute requested NRCS to involve their students in the construction work as part of their internship. As a result, NRCS engaged 19 students studying assistant civil engineering or sub-engineering, who were fully embedded in the communities and significantly contributed to completing construction works.

NRCS conducted 14 PASSA (Participatory Approach to Safe Shelter Awareness) orientation sessions (4 in Doti, 5 in Bajhang, and 5 in Achham) for the targeted households before initiating construction work. A total of 144 people, including 42 females, participated in the training sessions. Technical staff provided on-site orientations for 333 households while conducting regular monitoring visits. Construction began in mid-February 2023, with the orientations taking place from mid-January to end-February 2023. Though the initial plan was to support 200 households in constructing transitional shelters, the operation eventually provided support to 333 households across three districts (233 shelters in Doti, 50 in Achham, and 50 in Bajhang) through collaboration between IFRC and its members.

IFRC's in-country members, primarily the Danish Red Cross, provided additional funds to NRCS, and the IFRC-DREF plan was considered a one plan (or unified approach) for the operation. Danish Red Cross covered transitional shelter support in Bajhang and Achham (50 shelters each), while IFRC-DREF supported 233 households in Doti. NRCS NHQs technical team developed beneficiary selection criteria, which were shared with senior officials of the Ministry of Home Affairs, the Chief District Officer of Doti, and respective municipal authorities. NRCS applied these criteria, which were acknowledged by government authorities.

The NRCS NHQ-level technical team also developed the design, cost estimation, and bill of quantity (BoQ) for each shelter. Each shelter included two rooms (one for a kitchen and the other for accommodation), with a total cost of NPR 73,600 (approximately CHF 525). The design allowed beneficiaries to use local materials such as bamboo, wooden poles, and iron poles for pillars, CGI sheets for roofing, and local materials (bamboo, wooden stripes) for side walls, as per their choice and availability. As a co-lead of the shelter cluster, IFRC and NRCS organized a national-level shelter cluster meeting chaired by the cluster lead, the Department of Urban Development and Building Construction (DUDBC), where the design and BoQ were shared and acknowledged. The meeting also recognized the transfer value for transitional shelter construction.

Given the onset of winter and the proximity of the affected areas to snow lines, the operation aimed to initiate shelter construction work as soon as possible, starting in January 2023, to safeguard the targeted population from extreme cold. However, construction work faced slight delays due to extended time needed for beneficiary selection, the opening of bank accounts for beneficiaries (affected by constituency elections), and the scattered location of houses in challenging geographical locations. To accelerate field-level activities, IFRC and NRCS NHQs deployed their response focal staff to the field office in Doti for one month in January 2023. This deployment substantially expedited beneficiary finalization, account opening, fund transfer, field measurement, layout completion for shelter construction, and the commencement of superstructure-level construction work.

NRCS district and field-level technical staff conducted almost daily visits to targeted households and prepared the layout of the shelter in February 2023. Simultaneously, NRCS staff assisted beneficiaries in opening bank accounts in their respective municipal banks for those without existing accounts. They compiled detailed information and sent it to IFRC. Conditional cash grants for transitional shelter were provided in two installments. The first installment of NPR 23,600 (approximately CHF 169) was transferred to the beneficiaries' bank accounts. With this support, beneficiaries collected local materials to fix pillar and wall fencing.



Upon completing their superstructures, beneficiaries underwent inspections conducted by NRCS technical staff. Inspection reports were prepared, and recommendations were forwarded to NRCS NHQs and the IFRC Delegation for releasing the second installment of NPR 50,000 (approximately CHF 357). Beneficiaries coordinated with local vendors for the procurement of CGI sheets, which were supplied to their home areas. Payment was made using the second installment. The construction of all 333 transitional shelters was finalized by the end of April 2023.

Accordingly, field technical staff carried out final inspection reports. The majority of the targeted households used either wooden poles or bamboo for pillars and other local materials for walls. A few households used iron poles. All households utilized CGI sheets for roofing, while some also used CGI sheets for wall fencing, and most employed local materials (bamboo, wooden stripes) for walls. Furthermore, all households successfully connected electricity lines in the shelters.

NRCS district chapters procured 30 sets of basis shelter tool kits (Doti-20, Bajhang-5 and Achham-5) that were provided to households for constructing transitional shelters. One shelter tool kit was provided to cover 10 transitional shelter households. Each tool kits box included hand saw, shove, machete, combination plier, claw hammer, gall (crowbar), woven sack and pickaxe.

#### **Lessons Learnt**

- Application of flexible layout design of transitional shelters according to available land size ensures minimum quality benchmarks and beneficiary satisfaction.
- Use of local resources (materials and manpower) ensures timely and quality work with a higher level of beneficiary satisfaction and promotes the local economy.
- PASSA group, formed among community people, effectively enhances local community participation and quality construction
- Application of conditional cash grant for transitional shelter construction provides opportunities for beneficiaries to construct shelter on-time by using construction materials as per their choice, available in the communities.
- Involvement of sectoral experts in the communities leads the operation to meet minimum quality benchmarks. For instance, collaboration with Seti Technical School that mobilized their students for on-the-job-training.

#### **Challenges**

- Transportation and distribution of non-food relief items to the affected area(s) was challenging due to road closures and scattered settlements. This applies for the transportation of construction materials as well.
- In some cases, available size of the land was less than the standard to fit the shelter design as per SPHERE standard. So, minor adjustment, reducing spaces for porch and kitchen but keeping space for accommodation same, was applied.
- Delay in construction work due to longer time spent for beneficiary selection, bank account opening, as well as migration of most of the male members of the families in India for employment.
- Expectations of community people were high from Red Cross and all the affected families wanted transitional shelter.

	Health	Budget		CHF 29,828
*		Targeted Persons		3250
		Persons Assisted		8634
Indicators		Target	Actu	al



# of people receiving MHPSS services	1250	2005
# of people referred to health facilities	250	2
# of people reached with health promotion activities	3000	8634

#### Narrative description of achievements

The operation aimed to support 3,250 people, including 1,657 females, under the health sector. NRCS carried out various health promotion activities in targeted communities, integrating these activities with shelter and other sectoral initiatives. During the operation, health service support reached 8,643 people, including 4,403 females. Intensive volunteer mobilization for door-to-door visits and community sessions, coordinated with local authorities, resulted in surpassing the initial target reach.

#### ECV/MHPSS Orientation and Volunteer Mobilization:

NRCS NHQs organized six orientation sessions: three on ECV and three on MHPSS, specifically for NRCS staff and volunteers in Achham, Bajhang, and Doti districts. A total of 69 volunteers, including 32 females, were trained on ECV. An additional 43 volunteers were trained on MHPSS, including 24 females.

Out of these trained volunteers, NRCS district chapters consistently mobilized 26 ECV volunteers (10 in Doti, eight in Achham, and eight in Bajhang), including 11 female volunteers. These volunteers regularly visited communities and targeted households, actively participating in community-based awareness-raising activities that focused on disease prevention, epidemic control, and healthy behavior promotion. Similarly, NRCS district chapters engaged 26 MHPSS volunteers (eight in Doti, eight in Achham, and 10 in Bajhang), including nine female volunteers. These volunteers provided mental health and psychosocial support, including specific PFA assistance on a needs basis.

Overall, a total of 8,634 people, including 3,567 females, were reached through health awareness sessions, including ECV and MHPSS. Of these, 2,005 people, including 943 females, were provided MHPSS services during the operation.

#### Referral Services:

Two individuals, including a male child with physical disability, received referral services from NRCS, along with two-way travel and health check-up support valued at NPR 8,000 (approximately CHF 57). The initial plan targeted to assist 250 people who might require referral services if they were unable to access hospitals for treatment. The variance between the target and achievement is as follows:

- The number of people seeking health services was lower than anticipated due to the organization of multiple health camps (including RCEC) in the affected areas, which brought services closer to the community.
- No significant aftershocks resulting in major injuries or trauma were recorded, thus the planned referral services were not required.

Referral services were designed as a crucial component of the health interventions, ensuring access to care for individuals needing emergency services while maintaining continued access to health facilities for those with chronic diseases and non-communicable diseases (NCDs). Standard criteria were established. The primary criterion for referral services was "unavailability of referral services in the concerned health facilities and earthquake-affected areas," in addition to any of the following criteria:

- For institutional delivery: the last trimester of pregnancy OR
- Elderly individuals aged 65+ requiring emergency referral support OR
- Cases requiring emergency health services due to RTA/Injuries, life-threatening conditions, etc. OR
- Special cases: People with disabilities, pregnant women requiring tertiary healthcare services, etc.

Red Cross Emergency Clinic (RCEC):



A total of 439 people, including 196 females, received health services at the RCEC. Canadian Red Cross supported NRCS in purchasing the necessary medicines for the clinics. RCECs were organized in Doti district to deliver essential health services to targeted communities. The clinics were established in response to requests from local health authorities and were closely coordinated and collaborated with district hospitals, District Health Offices (DHOs), Municipal-level Health Sections, local communities, and stakeholders. NRCS's Health Department had a prior agreement with three hospitals in Kathmandu and established RCEC teams at these hospitals (Tribhuwan University Teaching Hospital-TUTH, Patan Hospital, and Kathmandu Model Hospital). District hospitals provided doctors (Gynaecologist, Paediatrician, and general physician), while NRCS engaged one nurse from TUTH.

The healthcare services provided were based on data from the Health Information Management System (HMIS) of the district, enabling essential and in-demand healthcare services to be provided to the community. The health services focused on maternal and child health, geriatric health conditions, and non-communicable diseases (NCDs), considering the existing burden in the district. These services were aimed at the most vulnerable and hard-to-reach populations, with the goal of bringing services closer to the community and bridging the potential gap in access, coverage, and utilization of healthcare services due to the earthquake.

#### **Lessons Learnt**

- Maintaining a close relationship with local health authorities aided in the delivery of an effective response services.
- Conducting the RCEC camps in different and difficult geographical locations can contribute immensely to reaching the most vulnerable and people in need.
- Sudurpaschim province is unique in terms of language, culture and traditions. Partnering with local bodies and district hospital for RCEC can ensure human-centred health services through people who understand the language and context. Hence, provided services can be more efficient as well as cost-effective.

#### **Challenges**

- Communities have high expectation on received in-kind support rather than participating in behaviour change and health promotion activities.
- Health seeking behaviour and health care utilization practices remained relatively low among affected communities.

### Water, Sanitation And Hygiene

Budget	CHF 54,490
Targeted Persons	10000
Persons Assisted	8860

Indicators	Target	Actual
# of people reached with hygiene promotion	10000	8860
# of sanitary facilities constructed/installed	290	300
# of people provided with safe drinking water services	1500	1669

#### Narrative description of achievements



The operation aimed to support 10,000 people, including 5,100 females, under the WASH sector. NRCS and IFRC conducted various WASH promotion activities, such as handwashing demonstrations, environmental sanitation, personal hygiene, and menstrual hygiene management. They also provided support to targeted households for establishing WASH facilities. By the end of the operation, 8,860 people had been reached through WASH support, with the highest number of people reached through hygiene promotion.

#### Safe Drinking Water:

NRCS provided NPR 4,000 per household (approximately CHF 28) to 300 households who later purchased water collection tanks (500-litre capacity) and installed them in their handwashing stations, ensuring water availability as needed. Through the construction of 22 shared water supply facilities after the earthquake, 8,805 people, including 4,490 females, gained access to safe drinking water, covering 345 households.

#### Sanitation Services:

NRCS Doti chapter swiftly deployed volunteers to Purbichauki Rural Municipality, establishing emergency shelters for displaced families and constructing 10 emergency toilets within 2-3 days. They utilized squatting plates available in NRCS warehouses for the immediate construction of shared emergency toilets after the earthquake. When transitional shelters were constructed, the plan also included the construction of household toilets. Out of 333 households, NRCS provided NPR 10,000 per household (approximately CHF 71) to 300 households who built toilets (200 in Doti, 50 in Achham, and 50 in Bhajhang). These targeted households used local materials and CGI sheets for roofing in the construction of their toilets. The remaining 33 households did not require toilets, as they had functioning ones. A total of 1,669 people, including 829 females, were served by the constructed toilets. Additionally, 32 sanitary pad disposal sites (12 in Doti, 9 in Bajhang, and 11 in Achham) were established across 27 locations in the response districts, and 103 handwashing stations (70 in Doti, 18 in Bajhang, and 15 in Achham) were set up. These handwashing stations were constructed exclusively for transitional shelter beneficiaries without pipe connections in their homes.

#### Hygiene Promotion:

Throughout the operation, a total of 8,860 people, including 4,519 females, benefited from sanitation and hygiene promotional activities. District chapters mobilized 42 volunteers, including 21 female volunteers, to conduct WASH promotional activities in the affected districts. These volunteers consistently visited communities, sharing knowledge and skills regarding safe water usage, hygiene promotion, and community-level sanitation activities. They also demonstrated proper handwashing methods alongside distributing IEC materials. In total, 600 buckets were distributed, providing 2 buckets for every 300 households.

#### **Lessons Learnt**

- Close monitoring and follow-ups needed in the communities to facilitate hygiene behaviour change. Chances of diseases post-disaster was high, so behaviour change practices related to hand hygiene was promoted.
- Constructing the community toilets immediately after the earthquake was useful to provide immediate sanitation services to the affected households thereby reducing the risk of disease transmission.

#### Challenges

• Difficult to reach all affected population through hygiene promotion orientation due to scattered settlements (especially in hilly districts) and remoteness/lack of road accessibility. Hence, NRCS mobilized local volunteers as much as possible to reached the scattered communities.

Multi-purpose Cash	Budget	CHF 24,961
	Targeted Persons	1000
	Persons Assisted	1165



Indicators	Target	Actual
# of households with fully damaged houses supported with CVA	200	233

#### Narrative description of achievements

The operation targeted to support 1,000 people including 510 females (200 households) the under multi-purpose cash sector. NRCS and IFRC supported conditional cash to these households for the construction of transitional shelters. However, these households were in need further support to manage their daily basic needs. Therefore, the operation plan also targeted to provide multi-purpose cash for these households. During the operation, a total of 333 households (1,665 people) were reached through this support, of which 233 households (1,165 people) were supported by the IFRC, with American Red Cross funding, and another 100 households supported by the Danish Red Cross.

#### Cash Assistance:

The field team and district team conducted Rapid Market Assessment which indicated that markets were functional in all districts and basic items were available in local markets. As mentioned in the above section, the NRCS selected beneficiaries based on the set criteria and list of beneficiaries with their full bank details were sent to IFRC country delegation and Danish Red Cross operation team.

IFRC Delegation transferred NPR 15,000 (approximately CHF 107, which is the MEB as agreed by HCT mechanism) to each of 233 households, which covered all households in Doti. The American Red Cross allocated USD 50,000, which was used through IFRC to provide multi-purpose cash for these households in Doti. Likewise, the Danish Red Cross transferred NPR. 15,000 (approximately CHF 107) to each of 100 households (Bajhang-50 and Achham-50) to meet their immediate basic needs. In addition, 200 households were affected in Bajura district by an aftershock in January 2023. Accordingly, the Danish Red Cross contributed additional funds bilaterally for these households through bank transfer. All the multi-purpose cash transfers were done in one instalment. Similarly, multi-purpose cash was provided to additional 397 households (Doti-197, Achham-103 and Bajhang-97) from PGI perspective. Further updates are available in PGI section below.

As noted in the PDM findings, beneficiaries effectively utilized the NPR 15,000 cash assistance for various immediate household needs, such as purchasing food, clothing, and medicines. This flexible approach allowed households to address their most pressing requirements and adapt to the changing circumstances they faced throughout the disaster's aftermath.

The feedback mechanism was set for the multi-purpose cash transfer. Selected beneficiaries would receive SMS before the cash was transferred to their bank account. After each transfer, the CEA team in headquarter would randomly call a beneficiary to ensure the right person had received the right amount of cash support. All the beneficiaries were well informed about the process and amount. This process helped to enhance the transparency and accountability of NRCS toward the communities.

#### Surge Deployment:

Deployment of CVA/CEA surge delegate was done by IFRC for providing support on cash interventions across all sectors from December 2022 to January 2023. The delegate was deployed in Doti and worked closely with the response team and provided support on cash distribution. The CVA surge officer mission ended in mid-February and NRCS assigned one CVA officer for the field to cover the remaining works.

#### **Lessons Learnt**

• Coordination with local government to link beneficiaries with their social security account could strengthen the intervention and eliminate the need for NRCS to open new bank accounts for beneficiaries.



- NRCS district chapters must begin mapping financial service providers, identify potential service providers, and sign a memorandum of understanding with a financial institution to open bank accounts for beneficiaries by mobilizing their staff in the beneficiary's household. This may assist the operation team in expediting the transfer of cash grants to beneficiaries' accounts.
- CVA promoted digital literacy learning among the beneficiaries for the use online banking as required, and allowed their bank accounts to be accessed during future disasters.

#### **Challenges**

- NRCS and IFRC agreed to transfer funds through bank accounts, but in the affected areas, some of the families did not have their bank account. It took long time to open the bank account causing delay in cash transfer.
- Some beneficiary's accounts were in dormant status and took time to reactivate account delaying cash transfer. IFRC finance team identified this issue and informed District Chapters whereas District Chapter team coordinated with the respective bank and beneficiaries to reactivate the account.



# **Financial report**

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### **DREF Operation**

FINAL FINANCIAL REPORT

 Selected Parameters

 Reporting Timeframe
 2022/11-2023/07
 Operation
 MDRNP013

 Budget Timeframe
 2022/11-2023/05
 Budget
 APPROVED

Prepared on 18/Aug/2023 All figures are in Swiss Francs (CHF)

#### MDRNP013 - Nepal - Far Western Earthquake Response

Operating Timeframe: 17 Nov 2022 to 31 May 2023

#### I. Summary

Opening Balance	0
Funds & Other Income	499,479
DREF Response Pillar	499,479
Expenditure	-469,970
Closing Balance	29,509

#### II. Expenditure by area of focus / strategies for implementation

Description	Budget	Expenditure	Variance
AOF1 - Disaster risk reduction			0
AOF2 - Shelter	218,325	251,915	-33,590
AOF3 - Livelihoods and basic needs	24,961	109	24,852
AOF4 - Health	29,828	12,114	17,714
AOF5 - Water, sanitation and hygiene	54,490	33,198	21,291
AOF6 - Protection, Gender & Inclusion	37,400	20,923	16,476
AOF7 - Migration			0
Area of focus Total	365,004	318,261	46,743
SFI1 - Strenghten National Societies	95,536	104,248	-8,712
SFI2 - Effective international disaster management			0
SFI3 - Influence others as leading strategic partners	1,498	1,144	354
SFI4 - Ensure a strong IFRC	37,441	46,317	-8,876
Strategy for implementation Total	134,475	151,709	-17,233
Grand Total	499,479	469,970	29,510

+CIFRC





### Please explain variances (if any)

The reasons for financial variance in two heading ~ (1) Relief Items (Supplies) and (2) Logistics & Transport are explained as follows: □

1. Cost of Blankets and Tarpaulins (Relief Items) were budgeted under the heading of Relief Supplies using account code 5001 and 5100. However, while booking the costs, APRO Logistics team has split the actual cost into 3 different accounting heads - (1) cost of Blankets & Tarpaulins under supplies, (2) cost of transport and (3) Procurement fees were booked under Logistic & Transport head using account code 5924 and 5993. This resulted in under-spending in Relief Items and overspending in Logistics & Transport head.

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- 2. Some expenses relating to (a) Distribution costs and (b) Monitoring costs have also been booked under Logistics and Transport head using account code 5929 to 5943, this resulted an overspending in logistic and transport head. 

  □
- 3. The explanations provided at point 1 and 2 above in preceding para are due to the Accounting Structure we have in IFRC for element 1 (Account Code).  $\Box$

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4. Regarding Consultants costs of CHF 13,287/-, earlier the operation had a different plan, but as the American Red Cross supported with USD 50,000/- and Danish Red Cross supported with in-kind goods to reach to a larger community, it was decided to conduct an IFRC-wide Post Distribution Monitoring (PDM) survey. For this survey, a consultant was hired with the right skills and experience. This resulted in an overspending under the heading of consultant.

5. With regard to underspending in Cash Disbursement line and mentioned in para 4 above, the American Red Cross contributed USD 46,512 (USD 50,000-7.5% PSSR) for cash distribution to beneficiaries.

### **Contact Information**

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Click here for the reference

