

DREF OPERATION

Morocco Earthquake 2023



Photo depicting the impact of the earthquake

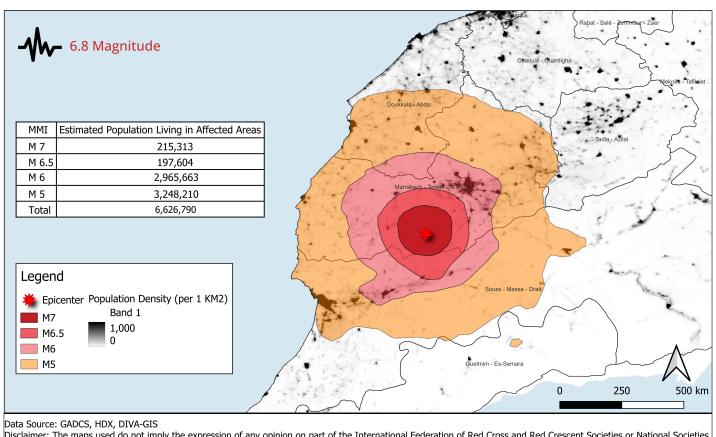
Appeal: MDRMA010	Country: Morocco	Hazard: Earthquake	Type of DREF Response
Crisis Category: Orange	Event Onset: Sudden	DREF Allocation: CHF 1,000,000	
Glide Number: EQ-2023-000166-MAR	People Affected: 360,662 people	People Targeted: 5,000 people	
Operation Start Date: 2023-09-11	Operation Timeframe: 3 months	Operation End Date: 2023-12-31	DREF Published: 2023-09-11
Targeted Areas:	Marrakeh - Safi		



Description of the Event

+(IFRC

Morocco EQ - Estimated Affected Population in Affected Areas



Disclaimer: The maps used do not imply the expression of any opinion on part of the International Federation of Red Cross and Red Crescent Societies or National Societies concerning the legal status of a territory or of its authorities.

What happened, where and when?

According to Morocco's National Seismic Monitoring and Alert Network an earthquake measured at 7 on the Richter scale, has hit the country, at 11:11 pm local time, and lasted several seconds. The U.S. Geological Survey said the quake had a preliminary magnitude of 6.8. The U.S. agency reported a magnitude of 4.9 aftershock that hit 19 minutes later. The epicenter was high in the Atlas Mountains roughly 43.5 miles south of Marrakech.

According to the GDACS report, approximately 360,000 people were directly exposed to the earthquake.

The remote villages nestled in the High Atlas Mountains, right at the earthquake's epicenter, suffered substantial losses. Due to the blocked roads and the challenging terrain, emergency services faced difficulties in reaching the wounded.

At least 2,000 people were killed, mostly in Marrakech and five provinces near the epicenter, and over 2,000 were injured, according to Morocco's Ministry of Interior on Saturday 9th of September. According to the Ministry, over 1,000 of the injured were in critical condition.







MRCS volunteers assisting the response on the ground

MRCS volunteers assisting the transportation of the inj

Scope and Scale

Historically, the last earthquake that affected Morocco of a magnitude close to the latest quake (6.5 magnitude) was in 2004 in the northern Rif Mountains. It killed about 600 people., and rendered more than 15,000 people displaced and 2,500 houses completely damaged. Tents, blankets, food, medicine, and clothes were the main needs for the affected. In addition, the government also needed to increase sanitation facilities in temporary displacement camps.

The latest earthquake was felt as far away as Portugal and Algeria, according to the Portuguese Institute for Sea and Atmosphere and Algeria's Civil Defense Agency.

This earthquake was the deadliest in Morocco since the one from 2004. In Marrakesh, several buildings have collapsed, and an unspecified number of buildings have been damaged. Power outages are also being reported across Marrakesh.

Damage to shelter and housing: Building damage evaluation is currently difficult due to the lack of detailed reports at this time. However, the Moroccan Red Crescent Society declared that almost 329 building were affected in 25 communities across the affected areas with a total affected people of 82 656. While the epicenter of the earthquake was not densely populated, the impact on local structures was significant. Aside from homes collapsing, other buildings sustained structural damage, rendering them unsafe for occupancy.

Impact on Health systems and structures: Access to healthcare became a struggle in the aftermath of the earthquake. The earthquake caused significant damage to Morocco's health infrastructure, with hospitals and clinics unable to function due to structural damage. The collapse of these structures worsened the situation, hindering the provision of immediate medical care to the injured. Blocked roads prevented ambulances from reaching the wounded, thus delaying immediate medical aid.

Damage to key infrastructure: The GDACS report raised significant concerns regarding the threat posed to vital infrastructure such as airports, ports, nuclear plants, and hydro dams. In Marrakesh, designated as a UNESCO World Heritage Site, there was notable structural damage, including the collapse of numerous buildings, as the city bore the brunt of the earthquake. Additionally, the remote villages situated at the earthquake's epicenter in the High Atlas Mountains suffered substantial losses.

Rescue operations were initiated immediately after the earthquake led by the Moroccan army. However, there are reports that the rescue efforts were hampered by blocked roads, risk of landslides, and the challenging mountainous terrain made more challenging by the earthquake. Despite these obstacles, rescue workers were tirelessly digging through the rubble in search of survivors. It is noted that most deaths occurred in hard-to-reach mountain areas near the epicenter.

The Moroccan Red Crescent teams are coordinating closely with the local authorities on the ground, assessing the situation and providing support to the affected people. The situation is subject to further development as the impact of the earthquake is still being assessed and the number of casualties is expected to rise amid search and rescue



operations

The Moroccan RCS deployed three national operations managers in the initial phase of the response. In Taroudant Province, 80 volunteers and 60 paramedics are on the ground. In addition, MRCS mobilized 60 volunteers in Marrakesh, 50 volunteers in Chichawa and 40 volunteers in Haouz. Services provided include evacuation, first aid, transporting the wounded to the hospital, dead body management, psychological support, organizing with the authorities. Some of the visitors to the city are doctors and are currently volunteering to support in providing medical support to the injured in the area

Previous Operations

Has a similar event affected the same area(s) in the last 3 years?	No
Did it affect the same population groups?	No
Did the National Society respond?	No
Did the National Society request funding from DREF for that event(s)?	No
If yes, please specify which operations	-

Current National Society Actions

Livelihoods And Basic Needs	MRCS has provided food to the families who have left their houses either due to damages incurred or in anticipation of aftershocks.
Health	MRCS has supported the authorities in providing first aid, transporting the injured to the health centers and in transporting fatalities. MRCS also provided PSS support to the people to help them cope with the psychological impact of the event.
Water, Sanitation And Hygiene	MRCS has provided drinking water to the affected families.
Assessment	Immediately after the earthquake, MRCS deployed its teams on the ground to assess the situation in the areas hit by the earthquake
Coordination	The national society is directly coordinating with the national authorities and different agencies on the response on the ground
Shelter, Housing And Settlements	MRCS has released tents from its stocks to the families whose houses were damaged by the event.

IFRC Network Actions Related To The Current Event



Secretariat	The IFRC has been in contact with the national society since the onset of the event to discuss the possible support to the national society in its response on the ground. Coordination and communication between the IFRC, the NS and the different partner national societies continue to ensure harmonized support.
Participating National Societies	Different PNS have reached out to support the response on the ground including the French RC, the Swedish RC, the Austrian RC, the Japanese RC, the NorCross, The Qatari RC, The Australian RC, the British RC, Canadian RC, Danish RC, Egyptian RC, Finnish RC, German RC, Iranian RC, Iraqi RC, Italian RC, Kuwaiti RC, Libyan RC, Monaco RC, NLRC, Norwegian RC, Palestinian RC, Saudi RC, Spanish RC, Swiss RC, Turkish RC, MDA, China RC, Emirates RC and the Belgian-Flanders RC.

ICRC Actions Related To The Current Event

The ICRC is working with the National Society in Restoring Family Links and in the Management of Dead Bodies. The IFRC is in close contact with the ICRC at country level.

Other Actors Actions Related To The Current Event

Government has requested international assistance	No	
National authorities	The Government authorities, including the Royal Armed Forces, are leading the rescue operations and aid delivery in the affected areas. The Moroccan Red Crescent is cooperating with the authorities and has presence in the affected areas through its branches and volunteers.	
UN or other actors	Some international organizations are already operational in Morocco such as UNOCHA, in addition to UNHCR and IOM which are mainly focusing on the response of needs for migrants, refugees, and asylum seekers. Other UN and INGO organizations such as MSF, Save the Children, MDM, CARE offered to support, send teams and conduct needs assessments. The United Nations continues close communication with the authorities to offer its support in the assessment, coordination, and response to the situation.	
Are there major coordination mechanisms in place?		



Needs (Gaps) Identified



Health

Health: the significant casualty count resulting from the earthquake poses a substantial challenge to the local healthcare system capacities. This challenge is particularly pronounced in Marrakesh, where the earthquake's impact has been most severe. In addition to the tragic loss of 2,122 lives, 2,421 individuals have been reported as injured. The accessibility of healthcare facilities for those in need within the affected areas is compromised due to the damage sustained by roads. This situation is expected to disproportionately affect the most economically vulnerable populations, including those residing in remote rural areas, far from healthcare facilities. As reported by Al Jazeera, the prevalent cases are transported to healthcare facilities include suffocation, fractures, bleeding, head injuries, and cardiac attacks. Following the earthquake, many people will likely suffer from trauma, especially children, and will need mental health support. The provision of child protection services, including psychosocial support will be essential in assisting children and their parents to cope with the distress of the earthquake. Activities for children including games and music were part of the response during the 2004 earthquake in

Inadequate sanitation in displacement sites can lead to disease outbreaks, being cholera and typhoid outbreaks amongst the most common in these cases in other countries, there have been no recent outbreaks of cholera, typhoid, or other diseases (except COVID-19) in recent years though.



Water, Sanitation And Hygiene

Fresh drinking water is reported as main priority for the affected people as they left their homes and the water networks are disrupted. More sanitation facilities are needed for displacement camps following the earthquake. There is a likelihood that water and sanitation facilities were also damaged or destroyed during this earthquake and that WASH assistance is needed for those who have lost their shelters.



Community Engagement And Accountability

There is an urgent need for a primary data source for our activities and intervention as mostly secondary data sources are being relied on. Primary data sources can be a rapid needs assessment or any other suitable data collection tool to be used for gathering and recording needs data from the communities throughout interventions (during distribution, health and shelter activities).

In addition, there is a gap in sharing information with the communities about the available services, what is being done, what other partners or humanitarian actors are doing or providing, rumors control, sharing updates and more information about the earthquake and what follows with the communities.



Shelter Housing And Settlements



Shelter needs are a priority need due to the large amount of destruction and damage to housing and temperatures drop a lot at this time of night in Morocco, the earthquake left survivors in a state of shock and fear, with many individuals losing their homes and family members. To escape the danger of aftershocks, survivors were forced to seek shelter in the open streets. These circumstances highlight the urgent need for immediate attention to shelter and support for those affected by this devastating event.

Tents and shelters are needed for at least 6,000 people who have lost their homes. A verified number of 329 buildings were heavily affected including schools, mosques, and hospitals. Some patients in the headquarters of Mohammed VI International University hospital were evacuated to a field hospital due to fears of the aftershocks. Similar to the impact of the last earthquake that affected Morocco in 2004, most people who lost their homes are living in open areas. They are likely to stay in mosques and makeshift shelters near the rubble of their homes and be vulnerable to hot temperatures during the day and cold temperatures during the night, especially those living in the mountains. Moroccan Civil Protection staff have already started delivering aid, including tents, to the people in need.

Hygiene items, kitchen kits, blankets, mattresses and clothing will likely be needed for displaced people. Those items were among basic needs during an earthquake that struck Morocco in February 2004.



Livelihoods And Basic Needs

Food: There is an urgent need for targeted humanitarian assistance to address food insecurity in Morocco post-earthquake.

According to WFP 7.1 M people in the country with insufficient food, so the earthquake will increase the food insecurity, particularly among vulnerable populations.

According to Al Jazeera, many individuals and families affected by the earthquake have lost their homes and livelihoods. This displacement has had a direct and immediate impact on their ability to access basic food items. The disruption of transportation routes and markets has made it difficult for them to procure food. Furthermore, the loss of income and assets has left them financially vulnerable, making it even harder to purchase food in a market where prices may be inflated due to increased demand and decreased supply.

Any identified gaps/limitations in the assessment

Operational Strategy

Overall objective of the operation

This DREF allocation aims to support 5,000 people in need in the areas affected by the earthquake, by providing health, shelter, wash, and basic needs support in Marrakech-Safi region most affected by the earthquake for 3 months

Operation strategy rationale

To address the needs of the targeted population, this DREF will aim at providing the needed essential services to cover the needs under the shelter, livelihoods and basic needs, WASH and health sectors, including: Shelter:



- Provide tents for 1,000 families
- Provide household items including, blankets, mattresses and kitchen sets for 1,000 families Livelihoods and basic needs:
- Provide 72 hours and 1 month food parcels to cover the needs of the affected families. Health:
- Provide First Aid, Psychological First Aid, Psychosocial services for the affected people
- Mobilize Mobile health clinic and referral services to the patient WASH:
- Provide safe drinking water for the affected people for one month.
- Distribute hygiene kits to maintain personal hygiene standards together with hygiene promotion messages

Targeting Strategy

Who will be targeted through this operation?

This DREF operation will target the people most affected by the earthquake in Marrakech-safi region.

Explain the selection criteria for the targeted population

The operation will prioritize the following categories:

- People whose households were completely or partially damaged
- People whose livelihoods have been significantly affected by the earthquake

Total Targeted Population

Women:	2,500	Rural %	Urban %
Girls (under 18):	-	%	%
Men:	2,500	People with disabilities (estimated %)	
Boys (under 18):	-	%	
Total targeted population:	5,000		

Risk and security considerations

Please indicate about potential operational risk for this operations and mitigation actions **Risk** Mitigation action Aftershocks and further damage of housing structure, continue to monitor situation and sensitize the commuand infrastructure, and injuries nity about aftershocks. Deterioration of non-communicable diseases and Continue assessment and monitoring of health risks spread of infectious diseases Provision of primary health care services including referral service Provision of health promotion and awareness activities Provision of hygiene promotion activities Coordination with local authorities together with Access to affected areas is limited due to infrastructure MRCS. damage and the mountainous nature of the areas. Take precaution measures during field visits.



Please indicate any security and safety concerns for this operation



Planned Intervention

National Society Strengthening	Budget	CHF 156,904	
	Targeted Persons		
Indicators		Target	
# of lessons learned workshop conducted		1	
Priority Actions:		 Conduct lessons learned workshop Provide Volunteer per diem for one me Provide Volunteer insurance 	onth

	Shelter Housing And Settlements	Budget	CHF 463,275	
		Targeted Persons	5000	
Indicators		Target		
# of families provided with shelter items		1000		
# of tents distributed		1000		
# of blankets distributed		5000		
# of household kits distributed		1000		
# of mattresses provided		5000		
	Priority Actions:	Provision of tentsProvision of blanketsProvision of household kitsProvision of mattresses		

Livelihoods And Basic Needs	Budget	CHF 74,550	
	Targeted Persons	5000	
Indicators		Target	
#of families parcel	provided with 72 hour food	1000	
		1000	



# of families provided with 1 month food parcel	
Priority Actions:	Provision of food parcels (1-month parcel)Provision of food parcels (72-hour parcel)

Health	Health	Budget	CHF 55,380
₹		Targeted Persons	5000
Indicators		Target	
# of people received First Aid by MRC vol- unteers			
# of people received Psychological First Aid by MRC volunteers			
# of patients referred to health facilities			
# of people received health promotion message			
 Provide First Aid and Psychological First Aid supposed Provide referral services according to the referral by the local health authorities Establish Psychosocial support services points to vulnerable people and survivors. Deploy mobile medical teams and units to provide healthcare services. Conduct health promotion activities on infection non-communicable diseases to prevent further healthcare. 		he referral mechanism set es points to serve most ts to provide essential on infectious disease and	

	Water, Sanitation And Hygiene	Budget	CHF 226,845	
		Targeted Persons	5000	
Indicators		Target		
# of water tanks and bottles distributed		120000		
# of secured portable latrines		20		
# of hygiene kits distributed		5000		
# of cleaning kits distributed		1000		



Priority Actions:

- Provision of clean drinking water to affected population.
- Provide portable latrines.
- · Distribute hygiene and cleaning kits
- Conduct hygiene promotion awareness sessions on relevant topics

	Protection, Gender And Inclusion	Budget	CHF 0
		Targeted Persons	
Indicators		Target	
# of child safeguarding analysis conducted		1	
Priority Actions:		•Conduct Child safeguarding analysis	

6	Secretariat Services	Budget	CHF 22,898	
		Targeted Persons		
Indicators		Target		
# of surge deployments supporting the operation		1		
Priority Actions:		 Deployment of rapid response- operations manager for 3 months Extend support through finance in emergencies for 1 month 		

About Support Services

How many staff and volunteers will be involved in this operation. Briefly describe their role.

The Moroccan RC 443 staff and 8565 volunteers. Under this operation, the MRCS has deployed 230 volunteers in this operation; 80 volunteers in Taroudant, 60 in Marrakech, 50 in Chichawa, and 40 in Haouz.

Will surge personnel be deployed? Please provide the role profile needed.

An operations manager profile will be deployed to support this operation for 3 months. Finance in emergencies profile will also extend support to this operation for one month.

If there is procurement, will it be done by National Society or IFRC?

Emergency local needs and Non-standard procurement items which are identified under DREF, NS can undertake the procurement by following IFRC procurement procedures with support of MENA RO.

Large scale needs – such as NFI, Hygiene Food, Tents, Sleeping Mats, Vehicles, IFRC RO team can take lead with placing of PO with Frame Agreement suppliers and / or mobilize the items from IFRC warehouse stocks (Dubai / Las Palmas).



How will this operation be monitored?

A monitoring plan will be created and put into action during this response in direct conjunction with the PMER and Quality assurance team at IFRC MENA RO. PMER, IM, and CEA capabilities are included in the PMER and Quality Assurance unit and will work directly with MRC. Planning, monitoring, data collecting, and analysis will all be supported, along with any necessary CEA activities.

Please briefly explain the National Societies communication strategy for this operation.



Budget Overview



DREF OPERATION

MDRMA010 - Moroccan Red Crescent Morocco Earthquake 2023

Operating Budget

Planned Operations	820,050
Shelter and Basic Household Items	463,275
Livelihoods	74,550
Multi-purpose Cash	0
Health	55,380
Water, Sanitation & Hygiene	226,845
Protection, Gender and Inclusion	0
Education	0
Migration	0
Risk Reduction, Climate Adaptation and Recovery	0
Community Engagement and Accountability	0
Environmental Sustainability	0
Enabling Approaches	179,802
Coordination and Partnerships	0
Secretariat Services	22,898
National Society Strengthening	156,904
TOTAL BUDGET	999,852

all amounts in Swiss Francs (CHF)

Internal #V2022.01





Contact Information

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

- National Society contact: Mohammad Bendali, Head of Disaster Management, Bendalimed2@gmail.com
- IFRC Appeal Manager:
- Hossam Faysal, Regional Head of Health, Disasters, Climate & Crises (HDCC) Unit MENA, hosam.faysal@ifrc.org
- IFRC Project Manager: Sami Fakhouri, Actin Head of IFRC Delegation, sami.fakhouri@ifrc.org
- IFRC focal point for the emergency: Sami Fakhoury, Head of IFRC Delegation, sami.fakhouri@ifrc.org
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Click here for the reference

