

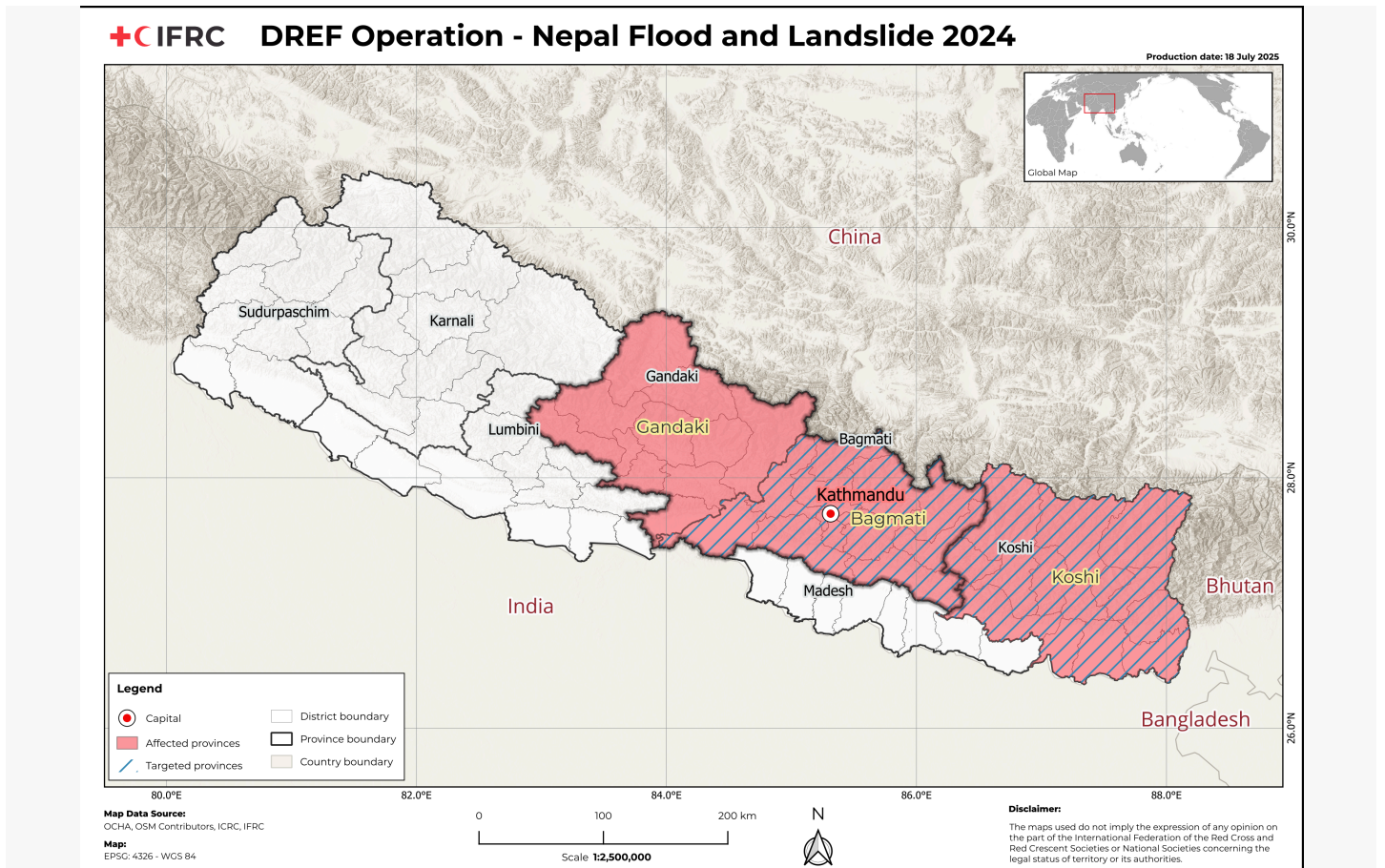


Cash transfer process in one of the affected districts. (Photo: NRCS)

Appeal: <b>MDRNP018</b>	Total DREF Allocation: <b>CHF 520,718</b>	Crisis Category: <b>Orange</b>	Hazard: <b>Flood</b>
Glide Number: <b>FL-2024-000177-NPL</b>	People Affected: <b>26,500 people</b>	People Targeted: <b>9,000 people</b>	People Assisted: <b>13,795 people</b>
Event Onset: <b>Sudden</b>	Operation Start Date: <b>02-10-2024</b>	Operational End Date: <b>30-04-2025</b>	Total Operating Timeframe: <b>6 months</b>
Targeted Regions: <b>Province 1, Bagmati</b>			

The major donors and partners of the IFRC-DREF include the Red Cross Societies and governments of Australia, Austria, Belgium, Britain, China, Czech Republic, Canada, Denmark, Germany, Ireland, Italy, Japan, Luxembourg, Liechtenstein, Malta, Norway, Spain, Sweden, Switzerland, Thailand, and the Netherlands, as well as DG ECHO, Mondelez Foundation, and other corporate and private donors. The IFRC, on behalf of the National Society, would like to thank all for their generous contributions

# Description of the Event



Targeted provinces where the operation was implemented.

## Date of event

27-09-2024

## What happened, where and when?

Nepal experienced one of the most intense rainfall events in its recorded history, starting on 26 September 2024, leading to widespread flooding and landslides throughout the country. The continuous three-day downpour caused multiple rivers to overflow, resulting in at least 250 fatalities, destruction of infrastructure (roads, bridges, public buildings, and health facilities), and severe damage to private homes across at least 58 districts. A tragic landslide in Dhading District buried three public buses, killing 35 people. In Kathmandu Valley, riverside areas were inundated, temporarily displacing many families. The rainfall on 26 and 27 September was the heaviest ever recorded in Nepal's history.

The most severely affected areas were in the eastern and central regions of Nepal, namely: Kavrepalanchok, Sindhuli, Lalitpur, Makwanpur, Ramechhap, Panchthar, and some parts of Kathmandu witnessed inundation, which receded after three days of the event. The Simplified Early Action Protocol (sEAP) by the Nepal Red Cross Society (NRCS) was initially activated for Babai and West Rapti river basins in the western part of the country based on forecasts of the Department of Hydrology and Meteorology of the Government of Nepal but the actual impact was more severe in the eastern and central districts. Hence, it was de-escalated after 48 hours of activation.

25 September 2024: The Department of Hydrology and Meteorology issued a special weather bulletin forecasting heavy rainfall.

26 September 2024: NRCS activated the sEAP based on the forecast.

26–28 September 2024: Continuous rainfall led to severe flooding and landslides.

28 September 2024: The sEAP was de-escalated after 48 hours, as the actual impact sustained in the central and eastern part of the country compared to the western part, where sEAP was activated.

2 October 2024: A DREF was launched targeting to reach out to 20,000 people from the most affected six districts, which was later revised to 9,000 people in November 2024 through Operation Update.



Volunteers conducting door-to-door visit. (Photo: NRCS)



Water scheme being constructed in one of the affected districts. (Photo: NRCS)

## Scope and Scale

As of 31 March 2025, the NRCS completed implementation of activities identified by a detailed assessment in six of the most affected and targeted districts, namely, Kavre Palanchowk, Sindhuli, Lalitpur, Makwanpur, Ramechhap, and Panchthar in October 2024. The teams on the ground reported that more than 5,300 households (approximately 26,500 people) across these districts were affected. Due to the severe impact of the floods and landslides, the affected families lacked access to basic services like water, transportation, as damaged water schemes and roads are not restored fully. The communication and electricity were restored in December 2024 in some of the worst-affected communities in Kavre and Sindhuli Districts. As of March 2025, many of the displaced families returned; however, many these displaced families are staying either in rented houses in nearby cities or living with their extended families.

## National Society Actions

Have the National Society conducted any intervention additionally to those part of this DREF Operation?	Yes
Please provide a brief description of those additional activities	Beside the DREF support, the NS received support from other other PNSs which coordinated through IFRC-wide one plan.

## IFRC Network Actions Related To The Current Event

### Secretariat

The IFRC Country Delegation supported NRCS to formulate the overall response strategy, where all in-country IFRC members (American Red Cross, British Red Cross, Danish Red Cross, Finnish Red Cross, and Swiss Red Cross) were invited to contribute, and Singapore Red Cross contributed bilaterally. Three intensive coordination meetings were held where an overall plan and budget were agreed with key roles and responsibilities. The IFRC Secretariat mostly focused on delivering immediate relief items, Multi-Purpose Cash (MPC), WASH, whereas American Red Cross supported MPC and WASH, British Red Cross supported MPC, WASH, and some recovery activities after March through bilateral support, Danish Red Cross supported for MPC, MHPSS and PGI, Finnish Red Cross supported for overall relief activities in Panchthar District, the Singapore Red Cross supported for WASH, Swiss Red Cross supported MPC, and WASH through shared engagement modality.

Based on the overall plan, the IFRC team supported NRCS to prepare the DREF application. Additionally, IFRC Country Delegation supported NRCS to produce situation reports and finalize field reports in the GO Platform. The IFRC Country Delegation



	supported the NRCS in formulating the overall response strategy, inviting all in-country IFRC Network—American Red Cross, British Red Cross, Danish Red Cross, Finnish Red Cross and Swiss Red Cross—to contribute.
<b>Participating National Societies</b>	The American Red Cross in Nepal approved activating its Quick Action Fund (QAF), a dedicated bilateral tool to provide immediate relief support. Furthermore, the Danish Red Cross, through their crisis modifier supported by ECHO and Swiss Red Cross teams in Nepal, allocated funding support. The Finnish Red Cross allocated funds from its crisis modifier-supported funds to NRCS to cover the response in Panchthar District. The PNSs contributed to the one plan of operation focusing on sectors such as shelter, MPC, health, WASH, and cross-cutting. The fund contributed by the Singapore Red Cross was utilized by NRCS in WASH. The British Red Cross continued to implement early recovery activities in Kavre District as a bilateral support to the NRCS beyond March 2025.

## ICRC Actions Related To The Current Event

The ICRC has been providing long-standing support to the NRCS for Restoring Family Links (RFL) services. NRCS designated RFL focal persons in all district chapters to support RFL, however, it was not needed during the DREF implementation period.

## Other Actors Actions Related To The Current Event

<b>Government has requested international assistance</b>	No
<b>National authorities</b>	<p>The Government of Nepal mobilized its security forces (Nepal Police, Nepal Army, and the Armed Police Force) to conduct an immediate search and rescue. The overall response was led by the Ministry of Home Affairs through the National Disaster Risk Reduction and Management Authority (NDRRMA). The Ministry of Home Affairs organized two high-level meetings immediately after the incident with the humanitarian organizations to expedite the search and rescue as well as relief distribution to the affected communities. At one of those meetings, the Government of Nepal decided to provide conditional cash support for transitional shelter, which was covered by the Government.</p> <p>The Government declared a state of emergency in 71 Municipalities of the affected districts. The NDRRMA implemented a one-door policy for the response, inviting humanitarian agencies to get their budget and plan approved by the authorities. The NRCS submitted its plan and budget and received approval from the Government on 22 October 2024. Upon this approval, NRCS started the implementation of DREF with close coordination with the local government.</p> <p>The NDRRMA conducted a detailed damage assessment (DDA) and finalized a recovery plan in March 2025 for the districts affected by the flood of 2024 and the Western Region Earthquake of October and November 2023. However, the recovery programme has not yet been started.</p>
<b>UN or other actors</b>	The UNRCO conducted three cluster meetings. In addition, the sector-specific cluster leads, like shelter, protection, health, recovery, food and nutrition, education, cash, WASH, etc. conducted sector-specific meetings and developed the response plan. The UNRCO activated its Central Emergency Relief Fund (CERF), and UNRCO sent out situation updates regularly. Some of the UN Agencies, such as UNICEF, WFP provided relief services as well as MPC to the affected families.

### Are there major coordination mechanism in place?

The UN Resident Coordination Office (UNRCO) conducted an emergency meeting of the humanitarian country team (HCT) immediately after the incident. The meeting suggested that all humanitarian agencies, as well as cluster co-leads and members, extend the humanitarian response in affected areas.



The coordination with the Shelter cluster was activated, which was chaired by the Department of Urban Development and Building Construction (DUDBC) under the Ministry of Urban Development (MoUD) while IFRC co-chaired in coordination with NRCS. IFRC Country Delegation liaised with the UN Resident Coordinator's office, and two situation reports were shared with the wider humanitarian community in the country. In addition, NRCS, together with the IFRC, coordinated with various line agencies of the Ministry of Home Affairs, including the National Emergency Operation Centre (NEOC) and the National Disaster Risk Reduction and Management Authority (NDRRMA). Also, NRCS coordinated with the Government Agencies at the provincial and local levels to provide relief support in the affected areas.

As of 31 March, three shelter cluster meetings were organized to share the HCT-wide Joint flood response plan and provide the response progress updates.

The NRCS also participated in other clusters such as WASH, health, logistics, cash working group, etc.

## Needs (Gaps) Identified



### Shelter Housing And Settlements

According to detailed assessment data of NRCS, more than 26,500 people (5,300 households) were affected by floods and landslides in September 2024. Many affected families lived outside their homes due to the extensive damage to their houses. According to the district chapter, the level of impact on various service sectors varied; however, the major needs of the communities were emergency shelter items (tarpaulin, blankets, and mattresses), as well as household items and clothing, especially for families whose homes became uninhabitable or were completely swept away by the flood.

Transitional shelter was also essential for families whose houses were fully destroyed, as it provided safety, dignity, and protection, particularly for vulnerable family members, including children, pregnant and lactating women, people with disabilities, the elderly, and those with chronic illnesses. This support was mostly provided by the local government based on the allocated budget in November 2024 to cover the overall need for transitional shelter through conditional cash grant support to the affected families. Therefore, the revised DREF plan removed activities, and the budget was allocated for other necessary sectors. All other activities in this sector remain unchanged.



### Multi purpose cash grants

The flood affected more than 5,000 households. Many houses were submerged, leaving residents without food, clothes, and other essential daily items. The displaced families were staying in rented houses, which created an additional economic burden. These households faced challenges in affording daily household needs, including food. Therefore, there was an urgent need to support these households by providing multi-purpose cash assistance. Volunteers on the ground reported functioning markets in the affected areas.



### Health

With the rains and flooding leading to limited WASH facilities, there was an increased risk of communicable diseases, the majority of which are waterborne. In addition, based on historical data, dengue cases were likely to rise dramatically in September and October, as the lack of proper sanitation measures might create an optimal breeding ground for mosquitoes. There was a need for promotional activities in order to create awareness on preventive measures.

At a time when communities were dealing with various issues, it was essential to ensure that they continued to prioritize their health, including mental health. Mental health and psychosocial well-being might not be prioritized immediately during a disaster, but neglecting them could lead to long-term negative effects if not addressed timely manner. In addition to psychosocial support, people needed health promotion activities addressing a wide range of health risks, including raising awareness to continue regular basic health services, such as child immunizations, antenatal care (ANC) visits, institutional delivery, and referral services, which were required for immediate operation.

Winter needs also needed to be considered in the operation, as many childhood illnesses, such as seasonal flu and pneumonia, were more prevalent during winter. As a result, people suffering from hypertension, heart disease, and other similar non-communicable



diseases require additional healthcare during the winter season. NRCS community volunteers were needed for community-based surveillance (CBS) of diseases to monitor and promptly report any possible outbreaks and track diseases like seasonal flu.



## Water, Sanitation And Hygiene

Based on the NRCS detailed assessment, the flood and landslide had a major impact on water facilities as sources of drinking water, pipelines, and taps were completely washed away in severely affected municipalities of the targeted districts. The entire population living in these areas lacked safe drinking water. Additionally, many families lost their homes, including toilet facilities, making them prone to various preventable diseases.

The September 2024 flooding in the Kathmandu Valley affected populations residing near rivers, particularly in slum areas, making them susceptible to waterborne diseases. However, the water started to recede on the third day of the incident, and things started to normalize after a week of the flooding.



## Protection, Gender And Inclusion

People displaced from their residences were compelled to remain in open spaces where people are bound to stay in close proximity, and there was an immediate need to create gender-friendly spaces as well as child-friendly spaces. This included providing psychosocial support (PSS) and raising awareness about the prevention of sexual and gender-based violence (SGBV), as well as promoting referral pathways among the population, particularly for children and women.

Furthermore, as a large number of households were displaced and affected, special care and attention were needed for the vulnerable groups, including children, pregnant and lactating women, people with disabilities, those with chronic illnesses, and the elderly, considering their heightened vulnerability. There was an urgent need to ensure menstrual hygiene and dignity for women and children through the distribution of dignity hygiene kits.



## Community Engagement And Accountability

When engaging with communities, it was critical to ensure that information was not only broadcast within the communities but that response teams also set aside time to listen to the needs and interests of affected populations, especially those who were most marginalized and least likely to have a public voice. A process must be established to ensure that information from communities is not only heard but also acted upon by providing various mechanisms to listen to and respond to those voices.

During this disaster, this approach emphasized a participatory response mechanism, supporting the community in recognizing needs, identifying recipients, and planning implementation. Regular consultations with stakeholders and communities were necessary to identify their needs, establish the beneficiary selection process, and coordinate the distribution of relief materials. Key messages and target population selection criteria of NRCS were shared with the local government and communities, and the selection process was agreed upon accordingly. Additionally, sector-specific key messages were contextualized so that communities could understand and act upon them through existing feedback mechanisms.

# Operational Strategy

## Overall objective of the operation

The objective of this operation was to address the immediate need of an estimated 30 per cent of the families (estimated 9,000 people) affected by floods and landslides. The needs of the targeted families in the affected districts (Kavre Palanchowk, Sindhuli, Ramechhap, Makwanpur, Lalitpur, and Panchthar) were addressed through immediate humanitarian relief services, including the provision of emergency shelter items, safe drinking water, health and hygiene, protection, and cash and voucher assistance (CVA) for an initial period of six months.



# Operation strategy rationale

## OVERALL APPROACH

1. All actions under this response operation were focus on the flood and landslide-affected districts, Kavre Palanchwok, Sindhuli, Lalitpur, Ramechhap, Makwanpur supported by the IFRC DREF and other in-country IFRC Members, and Panchthar will be supported by IFRC/Finnish Red Cross.
2. A total of 1,900 households were targeted for emergency shelter items based on the needs of the affected families.
3. Two packages of support were provided: (i) NRCS targeted 1,800 fully destroyed households with multipurpose cash, (ii) NRCS provided emergency shelter items, health, and hygiene promotion services to 1,800 households whose houses were impacted either partially or fully.
4. The operational team closely monitored the evolving situation and adapted the strategy to remain relevant. Likewise, changing weather may bring new needs and require various community engagement and/or health (including WASH) and protection interventions.
5. Optimum mobilization of local capacity and response: NRCS promoted localized action for this response operation. District chapters and sub-chapters were responsible for implementing the activities of the operation, while NRCS HQ coordinated the response operation vertically within the organizational structure and horizontally with the IFRC network, national authorities, and other partners. The NRCS province office were involved in coordinating with the provincial-level public authority as well as district chapters and NRCS headquarters.
6. The local government was at the forefront, and NRCS extended coordination and collaboration with other organizations working in the affected area for greater impact on the operation, avoiding duplication and amplifying efforts.
7. Other considerations: The following factors were considered while developing the response strategy:
  - Difficult geographical topography and remoteness of the areas affected by floods and landslides.
  - Cumulative negative impact on the people in the affected area due to floods and landslides.
  - The approaching winter season in relatively high-altitude settlements.

## SECTOR-WISE RATIONALE

### Shelter, Housing, and Settlements:

The emergency shelter and non-food item (NFI) distribution strategy was planned based on the level of destruction of houses and impact sustained by the household. Each household with a fully destroyed house was provided with two blankets, two tarpaulins, and two mattresses for which supported them in establishing emergency shelter. Several households were partially destroyed and needed some items like tarpaulins, blankets, etc. Such households were provided with either blankets, mattresses, or tarpaulins based on their actual needs.

In the case of transitional shelter, the Government committed to providing conditional cash support. Hence, the DREF and NRCS did not include conditional cash support for transitional shelter and reallocated the funding support to other response activities.

Considering the approaching winter, NRCS distributed blankets, mattresses to the affected families. In case of further need for such items during winter, NRCS provided additional items to protect them from winter to some extent.

### Health:

Health sector activities aimed at limiting and preventing possible diseases following flood and landslide situations. The response approach included capacity building of local NRCS volunteers for health promotion, as well as disease prevention and control. The mobilized ECV volunteers conducted health promotion activities and ensured access to basic healthcare services, especially those related to maternal and child health (MCH) and waterborne and vector disease prevention and control. Additionally, the volunteers worked closely with the Female Community Health Volunteers (FCHVs) to provide home-based health promotional activities, including mental health and psychosocial support (MHPSS), which was funded by IFRC in-country members. The health actions primarily targeted the affected vulnerable population—pregnant mothers and individuals with underlying health conditions requiring emergency referral and pre-hospital care services—to enhance access to health facilities. Health promotional activities were conducted jointly with the other sectoral activities as an integrated approach.

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



Considering the nature of dwelling, damage, WASH was one of the key components that needed to be addressed promptly in the emergency context. This helped to avoid disasters caused by a lack of safe water and proper hygiene practices. To address the immediate WASH needs of the affected communities, NRCS District Chapters mobilized WASH-trained volunteers. The volunteers worked with the community to carry out hygiene and sanitation promotion activities, covering the widespread population in the targeted operational area. Based on the needs of the affected households, NRCS District Chapters distributed dignified hygiene kits to fulfill both the dignity and hygiene needs of females.

The flood and landslide destroyed many water schemes in the targeted districts, and the community people did not have proper access to drinking water. Minor repairs and maintenance of the destroyed water schemes restored the water supply. Therefore, there was a revision in the plan, strategy, and budget for the renovation of the water schemes in November 2024. NRCS District Chapters, in coordination and collaboration with local municipalities, identified damaged water sources and contributed to the minor repair and maintenance/and renovation of damaged water schemes. The construction/renovation of latrines was supported by the Government of Nepal, integrating with the transitional shelter support, which has already been committed.

#### Multi-Purpose Cash (MPC):

Based on the targeting criteria, NRCS district chapters coordinated with local authorities to identify and select the 1,800 most vulnerable affected families. The IFRC transferred the cash directly to their bank accounts; those who did not have a bank account received cash in hand. The one-time cash support was worth NPR 15,000 (approximately CHF 107) as per the agreed-upon Minimum Expenditure Basket (MEB) for Nepal by the Cash Working Group.

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

The first objective of the PGI sector was to ensure that shelter, CVA, and WASH interventions target the most vulnerable among affected households, particularly people with disabilities, pregnant/lactating women, infants, and the elderly. PGI considerations were included while conducting assessments through gathering sex and age-disaggregated data (SADD), analyzing who was being reached and who was missing out, and providing constant reporting on protection issues for children, risks of gender-based violence, and sector-specific safety concerns to the Emergency Operation Centre (EOC) by all team members and volunteers.

For the stand-alone approaches, 1,800 women (compelled to stay in open spaces for long periods) and adolescent girls from fully and partially destroyed houses were targeted for "dignified hygiene kit" support. NRCS recently standardized a dignified hygiene kit that consisted of items useful for both hygiene and dignity perspectives. The Gender Equality and Social Inclusion (GESI) department of NRCS provided technical support to the respective sector leads, as well as district chapters, to ensure that the minimum standard commitments to PGI in emergency programming (published by IFRC and endorsed by NRCS) were applied throughout the planning and implementation of response activities.

All volunteers and staff received a pocket card with the Red Cross Hotline number and updated community-based gender-based violence (GBV) assistance information, as well as orientation on child protection reporting lines and practices. NRCS worked closely with women's groups to promote community-based initiatives on SGBV and protection. In addition, staff and volunteers signed the anti-harassment and child protection Code of Conduct before their deployment. Furthermore, child- and gender-friendly spaces were ensured in case of camp settings, as needed.

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

According to the response strategy, coordination was established with different sectors to integrate sectoral activities. The CEA technical team supported the sectoral team in developing sector-specific CEA approaches while formulating their implementation strategies. A variety of communication channels and methods were used during the response, including face-to-face communication and available media channels. As needed, information was adapted into local languages. Key messages were shared depending on the context, such as communication channels, timing, location, and likely audience reach. Communities (both targeted households and non-targeted households) had the opportunity to ask questions, make complaints, and appeal for their inclusion in distributions and other activities throughout the process. The NRCS District Chapters shared beneficiary selection criteria with local authorities and communities and applied a participatory beneficiary selection process. The District Chapters informed beneficiaries about the distribution beforehand. Feedback was collected by NRCS volunteers in the distribution points and responded to.

Furthermore, the district chapters and sub-chapters were readily available to hear and address community issues. NRCS is maintaining a register at the District Chapter and headquarters level to ensure proper documentation of feedback and responses at a minimum. All activities conducted were carried out with the knowledge of the local government and the willingness of the community, ensuring their engagement according to relevant guidelines of the national society to ensure transparency and accountability toward the community, government, partners, and stakeholders.

To identify the exact needs of the communities, a detailed assessment was conducted with the participation of community members. Community feedback mechanisms were set up by NRCS and were enhanced through this DREF operation with support and coordination



from IFRC. The Humanitarian Values and Communication Department of NRCS, in coordination with the NRCS EOC, was responsible to collect and respond to feedback/queries/complaints received through the feedback mechanisms (feedback collection form, via hotline 1130, and social media access). The CEA approach somehow helped prevent and address misinformation and rumors, especially regarding the distribution of relief items and cash assistance, through the development of appropriate feedback systems.

Major approaches and activities are as given below:

- Community consultation for identifying the information needed.
- Strengthening multi-sectoral feedback mechanism channels, including information and feedback booths (Feedback collection, recording, responding, and reporting using a feedback form.
- Support sectors to develop and disseminate key messages in the communities, social media platforms, and door-to-door campaigns.
- Door-to-door visit for software activities.
- Media mobilization to disseminate sectoral messages (jingle, radio program, etc.). At least one local FM at the districts.
- Collect/capture success stories/interventions for evidence-based advocacy and dissemination (capturing, documentation, videography, publication of stories, learning, good practices).

## Targeting Strategy

### Who was targeted by this operation?

Since November 2024, the NRCS targeted to cover 9,000 of the most affected individuals with the IFRC DREF support, which aligned with its overall capacity in the country and the anticipated support from other stakeholders, including municipalities and humanitarian actors who were still planning their interventions at the time of DREF Request Approval and its revision in November 2024. In addition, another 6,000 most-affected individuals were supported by the in-country members (American Red Cross, British Red Cross, Danish Red Cross, Finnish Red Cross, and Swiss Red Cross). Regarding emergency shelter items support integrated with other sectors, the operation planned to support vulnerable households from the estimated affected population, considering the associated costs and budget limitations.

NRCS applied the standard beneficiary selection criteria in coordination with local public authorities. NRCS ensured that relief efforts adhered to government standards and addressed the actual needs of the affected population. Additionally, NRCS applied gender- and diversity-sensitive analyses in targeted population selection as well as prioritizing women-headed households, households with pregnant and lactating women, single women-headed households, households with persons living with disabilities, elderly individuals, children, survivors of sexual and gender-based violence (SGBV), and displaced persons.

### Explain the selection criteria for the targeted population

The selection criteria for the targeted population were:

1. Families whose houses were fully and partially damaged by floods and landslides.
2. Households headed by children below 18 years and the elderly above 65 years of age.
3. Households headed by women and single women.
4. Death of an earning member of the family due to flood and landslide.
5. Households comprising pregnant and lactating women, people with disability and Chronic illness
6. SGBV survivors and community people from low income/displaced families.
7. Migrant/stateless people who are not able to access other support due to legal or social issues



# Total Assisted Population

Assisted Women	6,759	Rural	78%
Assisted Girls (under 18)	-	Urban	22%
Assisted Men	7,036	People with disabilities (estimated)	2%
Assisted Boys (under 18)	-		
Total Assisted Population	13,795		
Total Targeted Population	9,000		

## Risk and Security Considerations (including "management")

Does your National Society have anti-fraud and corruption policy?	Yes
Does your National Society have prevention of sexual exploitation and abuse policy?	Yes
Does your National Society have child protection/child safeguarding policy?	Yes
Does your National Society have whistleblower protection policy?	No
Does your National Society have anti-sexual harassment policy?	Yes

Please analyse and indicate potential risks for this operation, its root causes and mitigation actions.

Risk	Mitigation action
Remoteness for transportation	Coordinated with security forces and the private sectors for transporting and mobilizing local volunteers or community members.
Possible rainfall resulting in flooding and landslide	NRCS kept its local trained volunteers on standby and mobilized locally to provide an immediate response. Continuous monitoring of the rainfall status and implementation of anticipatory actions where applicable. Mobilized relief items at the local level.
Market price fluctuation for the purchase of construction materials	Cash and voucher assistance was implemented and jointly monitored the market condition in coordination with the local government.

Please indicate any security and safety concerns for this operation:

For personnel under IFRC security's responsibility, the existing IFRC country security plans was applicable. All IFRC must, and RC/RC staff and volunteers are 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 applied to all IFRC-deployed personnel. The National Society enjoys a 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 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 is in place and the general safety and security situation in country is constantly monitored. The security officer disseminated Security Advisories, 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. All teams had access to first aid kits, a hard copy road map with alternative routes, contingency supplies of water, food and funds to enable them to be self-sufficient in the event they become stranded.

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 were 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.

Has the child safeguarding risk analysis assessment been completed?

Yes

## Implementation



### Shelter Housing And Settlements

**Budget:** CHF 147,853

**Targeted Persons:** 9,000

**Assisted Persons:** 7,970

**Targeted Male:** 3,905

**Targeted Female:** 4,065

### Indicators

Title	Target	Actual
# of people (and households) provided with conditional cash support for transitional shelter that is safe and adequately enables essential household and livelihoods activities to be undertaken with dignity	0	0
# of households provided with emergency shelter, who subsequently occupy shelter that is safe and adequately enables essential household and livelihoods activities to be undertaken with dignity	1,800	1,594

### Narrative description of achievements

The NRCS provided emergency shelter items—including blankets, tarpaulins, and mattresses—to 1,594 affected families across six districts, reaching a total of 7,970 people, including 4,065 females. Many of the affected individuals had migrated to nearby cities, either renting homes or staying with relatives. Consequently, the NRCS prioritized the distribution of relief items to families who remained in the affected areas and were in greater immediate need of shelter support.

Meanwhile, the government mobilized resources to address transitional shelter needs through a conditional cash grant mechanism. In response to this development, the operational plan was revised, and the budget was reallocated to enable the provision of multipurpose cash (MPC) assistance to additional households. However, as the IFRC Network also extended bilateral support for MPC, the number of households supported directly by the IFRC Secretariat was adjusted accordingly to avoid duplication and ensure complementary efforts.



## Lessons Learnt

NRCS HQs/DC should regularly check the stock of items at the HQs and District Chapter level and make sure this information is kept up to date in the Management Information System (MIS). This would help improve readiness and make it easier to send out supplies quickly during emergencies.

## Challenges

- The lessons learnt exercise organized in March 2025 identified below challenge faced by the district chapter while implementing the operation:
  - The LLW participants (DC governance and operation volunteers, representatives of the targeted population, and DC operation staff) pointed out that the emergency shelter items were distributed in a way that was not in accordance with the NRCS Response Manual nor was aligning with the shelter cluster standard kit.
  - Due to a lack of NRCS Central and other regional and district-level warehouse stock data on the digital platform, it was challenging to manage the ever-increasing needs of the communities during a disaster.



## Multi Purpose Cash

**Budget:** CHF 182,664

**Targeted Persons:** 9,000

**Assisted Persons:** 4,225

**Targeted Male:** 2,070

**Targeted Female:** 2,155

## Indicators

Title	Target	Actual
# of households who successfully received cash for basic needs after being identified and processed for transfer	1,800	845

## Narrative description of achievements

A total of 845 households (4,225 people: 2,070 males and 2,155 females) were reached by the IFRC Secretariat through the DREF, while 1,570 households (7,850 people: 3,846 males and 4,003 females) received support from IFRC Membership, in line with the agreed minimum expenditure basket for one month, as determined by humanitarian actors in Nepal. The overall IFRC-wide target was 3,193 households, with the IFRC Secretariat aiming to reach 1,800 households through MPC support. However, there was a notable variance between the planned and actual achievement. Following the approval of the DREF, in-country IFRC members confirmed their own funding contributions, which enabled the majority of targeted households to be supported through bilateral mechanisms rather than the Secretariat's allocation.

In parallel, other humanitarian agencies also provided MPC assistance in the affected areas. Close coordination was maintained with these actors to avoid duplication in household coverage. As a result of these overlapping efforts and reduced need for Secretariat-led cash disbursement, the budget allocated for MPC under the DREF was not fully utilized. The remaining balance will therefore be returned to the IFRC DREF pool.

Most of the cash was transferred through bank accounts. However, in a few exceptional cases where households had lost their identification cards due to the flood, received cash in hand. This was done after a verification process conducted by the local government, based on the targeted population selection criteria developed by the NRCS together with the local government and approved by the latter.

## Lessons Learnt

- Establish a fast-track targeted household selection procedure and data management system to ensure timely support



## Challenges

- Targeted household selection process took, verifying their bank account, as well as the process taken to operate a new account for a few targeted households, caused delays in cash transfer.



**Budget:** CHF 1,076

**Targeted Persons:** 9,000

**Assisted Persons:** 4,039

**Targeted Male:** 1,979

**Targeted Female:** 2,060

## Indicators

Title	Target	Actual
# of volunteers mobilized to conduct health promotion and ECV activities	100	54
# of people reached with health promotion and ECV activities	9,000	4,039

## Narrative description of achievements

A total of 4,039 people, including 2,060 females, were reached through health promotion activities supported by the DREF. The NRCS conducted over 200 orientation sessions on epidemic control, focusing on communicable diseases such as cholera and dengue. These sessions engaged 3,985 people, including 2,032 females, across six affected districts. To support these efforts, 54 NRCS volunteers were trained on the Epidemic Control for Volunteers (ECV) approach in late 2024. These trained volunteers were later mobilized to conduct health promotion sessions within the communities.

Given the massive damage to the drinking water schemes of affected districts, NRCS shifted its focus toward completing water scheme construction by engaging both volunteers and local skilled labour. Most of the affected population was displaced and temporarily migrated to nearby cities, making it difficult for NRCS volunteers to reach out to them. As a result, fewer awareness events were conducted in some of the affected areas.

The Mental Health and Psychosocial Support (MHPSS) component of the operation was led by the Danish Red Cross under the shared leadership model. As of March 2025, MHPSS activities had reached 3,202 individuals, including 1,633 females, in affected communities. Additionally, 72 NRCS volunteers were oriented on basic psychosocial first aid and subsequently deployed to provide MHPSS services to those impacted by the disaster.

## Lessons Learnt

- Recruitment of fresh volunteer in time of emergency and mobilization in the field seems less effective and time consuming. Therefore, it is realized that the pool of PSS/CEA/PGI (sector-specific) volunteers needs to be developed with proper training on respective field prior disaster.
- The impact in health and hygiene infrastructure was comparatively high and because of the remoteness, the affected population had less limited access to those facilities. Therefore, it is realized organizing mobile health clinics are more effective in such remote areas.

## Challenges

- Due to a lack of trained volunteers in health, mainly in ECV and MHPSS, there was a slight delay in thematic volunteer mobilization in the affected communities right after the incident.





# Water, Sanitation And Hygiene

**Budget:** CHF 102,292  
**Targeted Persons:** 9,000  
**Assisted Persons:** 13,795  
**Targeted Male:** 6,960  
**Targeted Female:** 6,835

## Indicators

Title	Target	Actual
# of people (and households) reached by hygiene promotion activities in the response period	9,000	6,846
# of people reached by the RCRC for improved water source in emergency	1,600	13,795
# of people reached with dignified hygiene kits	9,000	1,190

## Narrative description of achievements

The IFRC Network supported NRCS District Chapters to reconstruct/renovate 100 water schemes. As of March 2025, the IFRC DREF supported to construction of 52 schemes (Kavre- 22, Sinduli-16, Ramechhap- 6, Makwanpur- 12, and Lalitpur- 17) reaching out to 13,795 people, including 6,835 females. Initially plan was to support 1,600 people by renovating damaged water facilities. However, the flood damaged water collection chamber, water pumps and pipelines in massive scale in terms of geographical locations. However, the renovation of such damaged facilities could be achieved with small amount of money for each schemes restoring drinking water facilities within short period. Therefore, target for the maintenance of such scames was increased up to 56 reaching out to 13,795 people. In addition, the IFRC Network supported NRCS to construct 54 schemes (American Red Cross- 1, British Red Cross- 16, Swiss Red Cross- 14, Singapore Red Cross- 17) through their bilateral emergency tools, reaching out to 17,558 people, including 8,955 females.

Additionally, 86 staff and volunteers were mobilized to conduct hygiene promotion orientation/sessions in the communities, reaching out to 6,846 people, including 3,491 females from the communities. The sessions focused on the water treatment procedures at the household and institutional levels as part of the hygiene promotional activities. Due to the massive damage to the drinking water schemes of affected districts, NRCS focused more on completing the construction schemes, mobilized volunteers. Most of the affected population was displaced and temporarily migrated to nearby cities, making it difficult for NRCS volunteers to reach out to them. As a result, fewer awareness events were conducted in some of the affected areas.

Additionally, 238 dignified hygiene kits were distributed to 1,190 people of 238 households in the affected communities. NRCS revised its previous kits, combining the hygiene kit and dignity kit, and developed a dignified hygiene kit, aiming to support one family per kit during a disaster. Only 238 kits were distributed as later the target population were able to buy such items from the multipurpose cash received.

## Lessons Learnt

- The NRCS operation team at all levels needs to explore alternative solutions, such as the deployment of water treatment equipment, water trucking and quick establishment of water storage tank for immediate supply of clean drinking water rather than waiting for a long time to complete the reconstruction.
- According to the Post Distribution Monitoring Survey report, the NRCS needs to strengthen the mechanism to ensure the timely distribution of the dignified hygiene kits and ensure that they are aware of the proper use of the dignified hygiene kits.

## Challenges

- Restoration of drinking water facilities was delayed because the roads were washed away making them inaccessible for months.





## Protection, Gender And Inclusion

Budget: CHF 0

Targeted Persons: 9,000

Assisted Persons: 10,091

Targeted Male: 4,945

Targeted Female: 5,146

### Indicators

Title	Target	Actual
# of child safeguarding risk analysis conducted	1	1

### Narrative description of achievements

A child safeguarding risk analysis was conducted as part of the operation to ensure the protection of vulnerable groups, especially children, during the response. In addition to this, at least 10,000 information, education, and communication (IEC) materials related to sexual and gender-based violence (SGBV), hygiene promotion, health awareness, and NRCS hotline services were disseminated through door-to-door visits by volunteers. These efforts reached approximately 10,000 people across the targeted communities, raising awareness and promoting safe and informed practices.

To strengthen the integration of PGI into the operation, a total of 91 staff and volunteers from Ramechhap (27), Sindhuli (34), and Kavre (30) were oriented on PGI in December 2024. This orientation equipped them with knowledge on protection issues, referral mechanisms, and inclusion strategies. As a result, the volunteers were able to incorporate PGI messages and practices into their household visits and community sessions, especially those related to health and hygiene promotion.

### Lessons Learnt

- N/A

### Challenges

- N/A



## Community Engagement And Accountability

Budget: CHF 6,765

Targeted Persons: 9,000

Assisted Persons: 10,900

Targeted Male: 5,341

Targeted Female: 5,559

### Indicators

Title	Target	Actual
# of methods established to communicate with communities about what is happening in the organisation/programme/operation, including selection criteria if these are being used	4	4
# of radio programme/jingle produced and aired through local FM	6	7



% of feedback collected that has been addressed	85	100
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## Narrative description of achievements

A total of 10,900 people were reached through various CEA activities during the operation. This included 124 individuals who accessed the NRCS hotline, 776 people who visited the NRCS help desks, and approximately 10,000 community members who received information through the distribution of IEC materials.

The NRCS hotline remained active throughout the operation, enabling 124 people to provide feedback and register concerns. These were addressed by the relevant NRCS sector leads in coordination with the Emergency Operations Centre (EOC). Most queries were related to multi-purpose cash grants and requests for the renovation of water schemes. To complement the hotline, NRCS also established five help desks in the districts of Sindhuli, Kavre, Lalitpur, Makwanpur, and Panchthar. These desks provided direct information on available relief services to 776 people. A total of 42 volunteers were mobilized to operate the help desks in the five districts.

Additionally, at least 10,000 information, education, and communication materials related to SGBV, hygiene, and health promotion, NRCS hotline services were disseminated through door-to-door visits by the volunteers reaching out to the same number of the population from the targeted communities.

To further expand outreach, public service announcements (PSAs) and jingles promoting health, hygiene, and available support services from NRCS and government actors were broadcast through local radio stations. Within the reporting period, more than 20 episodes of the radio programmes were broadcast through one national and other local FM stations within the response operating districts.

As part of accountability and learning, a post-distribution monitoring (PDM) survey was conducted as part of the operation to capture the evidence on targeted households' satisfaction, relevancy, and effectiveness of the assistance. One of the key components assessed was the Community Engagement and Accountability of the operation. The PDM report is published and is available on the IFRC public website.

## Lessons Learnt

- One of the CEA-specific lessons learnt identified by the PDM report was that face-to-face communication emerged as the most preferred method of feedback among communities during emergencies, highlighting its critical role in building trust and ensuring clarity. However, there remains an opportunity to increase awareness and use of alternative channels such as the NRCS hotline number and help desks, which could improve the overall efficiency and responsiveness of the programme.

## Challenges

- Some of the challenges faced during the operation specific to CEA were:
  - Lack of skilled volunteers and staff at all levels on CEA resulted in the hiring of new volunteers who needed orientation on CEA, resulting in a delay in the deployment of the volunteers. To overcome this, NRCS mobilized existing volunteers as much as possible and also provided orientation to new volunteers simultaneously and were mobilized.



## Secretariat Services

**Budget:** CHF 43,168  
**Targeted Persons:** 0  
**Assisted Persons:** 0  
**Targeted Male:** -  
**Targeted Female:** -

## Indicators

Title	Target	Actual
% of financial reporting compliance to IFRC procedures	100	100



# of Post Distribution Monitoring Survey Conducted	1	1
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## Narrative description of achievements

The IFRC Operations and PMER provided key support to the NRCS EOC while developing the one plan. The PMER team also collaborated to generate data regularly from the affected districts. The team comprising NRCS and IFRC Network conducted a field visit to conduct a three-day orientation on PMER, CEA, and PGI, which was helpful to include the SADD data collection from districts.

In terms of communications, the IFRC Comms team, in coordination with the National Societies' communication team, facilitated a team from the IFRC/Danish Red Cross to generate comms products, including two exposure stories and high-resolution photos of the impact and NRCS support were captured during the operation period. Most of the comms products, if not all, are available in the IFRC SHARED, collaborative space designed for sharing resources, knowledge, and media among the Red Cross and Red Crescent community.

To enhance operational implementation, a surge (field coordinator) was mobilized for three months to support the implementation of the operation and was based in the Kavre District. In addition, a PMER surge was mobilized by the Hong Kong Red Cross- Branch of Red Cross Society of China through the Danish Red Cross, who was stationed in the NRCS EOC and worked together with the IFRC and NRCS PMER to finalize NRCS sit reps and the first operation update of the DREF. In addition, Danish Red Cross mobilized a communications surge to collect the communications product. The comms focal point supported the operation in close coordination with the IFRC Secretariat and NRCS Communication team to generate comms products, including an exposure story.

## Lessons Learnt

- NRCS should be prepared with a curriculum on short orientation and/or crash courses on PMER, CEA, PGI, etc., so that the volunteers are aware of these components and their incorporation in the reporting.

## Challenges

- The lack of proper training for the volunteers to be mobilized for emergency response resulted in some confusion among the district chapter response team. It was minimized by organizing orientation on PMER, CEA, and PGI, including the templates, data tracking procedures, minimum standards for data collection, etc.



## National Society Strengthening

**Budget:** CHF 36,899

**Targeted Persons:** 100

**Assisted Persons:** 128

**Targeted Male:** 63

**Targeted Female:** 65

## Indicators

Title	Target	Actual
# of volunteers insured	100	117
# of lessons learnt workshop conducted	1	1

## Narrative description of achievements

A total of 117 volunteers were mobilized throughout the operation, contributing approximately 650 person-days of support. These volunteers were actively engaged in a range of sectoral activities at the community level, including door-to-door visits, conducting initial rapid assessments, supporting MHPSS orientations, and managing help desks. All mobilized volunteers were insured in line with standard procedures to ensure their safety and well-being.

In addition to volunteer mobilization, 14 technical staff members were deployed to support the operation—11 trained Emergency



Response Team (ERT) members from NRCS Headquarters and three personnel from the IFRC Network. These staff members were stationed in the affected districts and provided critical support to District Chapter teams in conducting assessments, relief distributions, and cash distribution activities.

To capture operational learning and strengthen future response mechanisms, a Lessons Learned Workshop was organized in March 2025. The workshop brought together participants from NRCS District Chapters, municipal authorities, provincial chapters, the IFRC Network, and community representatives. The sessions facilitated intensive discussions on the operation's achievements, areas for improvement, and key recommendations to enhance the effectiveness of future emergency response efforts.

### **Lessons Learnt**

- N/A

### **Challenges**

- N/A



# Financial Report

## DREF Operation

### FINAL FINANCIAL REPORT

#### MDRNP018 - Nepal - Floods

Operating Timeframe: 02 Oct 2024 to 30 Apr 2025

Selected Parameters			
Reporting Timeframe	2024/10-2025/8	Operation	MDRNP018
Budget Timeframe	2024/10-2025/4	Budget	APPROVED

Prepared on 26/Sep/2025

All figures are in Swiss Francs (CHF)

### I. Summary

<b>Opening Balance</b>	<b>0</b>
<b>Funds &amp; Other Income</b>	<b>520,718</b>
DREF Response Pillar	520,718
<b>Expenditure</b>	<b>-313,308</b>
<b>Closing Balance</b>	<b>207,410</b>

### II. Expenditure by planned operations / enabling approaches

Description	Budget	Expenditure	Variance
PO01 - Shelter and Basic Household Items	139,450	72,765	66,685
PO02 - Livelihoods			0
PO03 - Multi-purpose Cash	171,522	89,911	81,611
PO04 - Health	1,010	934	76
PO05 - Water, Sanitation & Hygiene	96,050	67,868	28,182
PO06 - Protection, Gender and Inclusion		20,458	-20,458
PO07 - Education			0
PO08 - Migration			0
PO09 - Risk Reduction, Climate Adaptation and Recovery	43,781	172	43,609
PO10 - Community Engagement and Accountability	5,082	2,473	2,609
PO11 - Environmental Sustainability			0
<b>Planned Operations Total</b>	<b>456,895</b>	<b>254,580</b>	<b>202,314</b>
EA01 - Coordination and Partnerships			0
EA02 - Secretariat Services	32,390	40,412	-8,022
EA03 - National Society Strengthening	31,433	18,316	13,118
<b>Enabling Approaches Total</b>	<b>63,823</b>	<b>58,727</b>	<b>5,096</b>
<b>Grand Total</b>	<b>520,718</b>	<b>313,308</b>	<b>207,410</b>

[Click here for the complete financial report](#)

## Please explain variances (if any)

The allocated DREF amount was CHF 520,718, out of which CHF 313,308 was spent, and the remaining balance of CHF 207,410 will be returned to the DREF pool.

The IFRC in-country members, except the American Red Cross, were still in the process of exploring the funding when the DREF was launched in October 2024. Later on, additional funding of CHF 364,796 was confirmed from other IFRC members. Since the operation plan was developed as an IFRC-wide plan, the target and activities were subsequently divided among IFRC members by utilizing their contributions mainly for MPC and renovation/reconstruction of damaged water facilities reducing the need for DREF funding.



## Sector and Enabling Approaches Variances:

PO01 – Shelter and Basic Household Items: Initially, budget was allocated to provide conditional cash grant for transitional shelter. Since the government allocated funding to cover all households with support for transitional shelter, the DREF budget was revised through operational update, taking out budget allocated for transitional shelter and re-allocating it to MPC. In addition, less emergency shelter items were distributed due to affected population migrating to nearby cities.

PO03 - Multi-purpose Cash: Underspent by CHF 81,611. The variance is due to MPC being covered largely through bilateral funding as well as coordination to avoid duplication with MPC being also provided by other humanitarian organisations.

PO05 – Water, Sanitation & Hygiene: Underspent by CHF 28,182. The NRCS distributed less dignified hygiene kits than targeted quantity due to the migration of affected population to nearby cities. The IFRC procured and replenished these items equivalent to the distributed quantity, resulting in a saving in the allocated budget.

PO06 – Protection, Gender and Inclusion: Overspent by CHF 20,458 as the IFRC DREF supported MPC for vulnerable households as part of the PGI. A total of 192 households, as a result the overspending was recorded under the PGI sector.

PO09 - Risk Reduction, Climate Adaptation and Recovery: Underspent by CHF 43,609, in which the variance is observed due to some system coding issues.

EA03 – National Society Strengthening: Underspent by CHF 13,118. The NRCS had planned to deploy ERT but was not done to the extent as it was planned. Due to time limitations, no communication products were printed as planned as a result an underspent is recorded in this sector.



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