



CEA intervention in the province of Puerto PLata. Source Dominican Red Cross

Appeal: MDRDO021	Hazard: Flood	Country: Dominican Republic	Type of DREF: Response
Crisis Category: Yellow	Event Onset: Sudden	DREF Allocation: CHF 497,829	
Glide Number: -	People Affected: 30,500 people	People Targeted: 10,000 people	
Operation Start Date: 21-04-2026	Operation Timeframe: 6 months	Operation End Date: 31-10-2026	DREF Published: 15-06-2026

Targeted Regions: **Distrito Nacional, Espaillat, Maria Trinidad Sanches, Puerto Plata, San Cristobal, Santo Domingo, Valverde**

Description of the Event

Date of event

12-04-2026

What happened, where and when?

Since 7 April 2026, a trough system has been affecting the Dominican Republic, generating intense rainfall and prolonged atmospheric instability across the national territory. As a result, the National Emergency Operations Centre (Centro de Operaciones de Emergencias – COE) issued alerts for 28 provinces (4 on red alert, 17 on yellow alert, and 7 on green alert) due to the risk of urban and flash flooding (COE, Situation Reports, latest update 16 April 2026).

The situation reached a critical point on 12 April 2026, resulting in 10 reported fatalities. In response, the Government declared a State of Emergency through Decree No. 234-26 in the provinces of Santo Domingo, National District, Puerto Plata, Espaillat, Valverde and Santiago, enabling the scaling up of response efforts in the most affected areas (Government of the Dominican Republic, Decree No. 234-26).

The intensity and duration of the rainfall, combined with saturated soils and the wide geographic spread of impacts, led to a complex, multi-sectoral emergency. According to COE Situation Report No. 3 (updated 16 April 2026), over 28 communities were cut off, five bridges were structurally affected, and approximately 30,500 people were evacuated, either to collective centres or hosted by relatives and friends.

The most affected areas include Santo Domingo, San Cristóbal, Puerto Plata, Espaillat, María Trinidad Sánchez, Valverde and the National District. Puerto Plata has been the most severely impacted province, particularly the municipality of Montellano, where the overflow of the Camú River affected 3,424 households and caused the closure of the municipal hospital, leaving approximately 20,753 people without access to health services (COE, 2026; local authorities reports).

These impacts are occurring in areas previously affected by recent hydrometeorological events, where communities have not yet fully recovered. This has increased their vulnerability and reduced their coping capacity to respond to new shocks.



Community recovering personal belongings. Source: DRC



DRC DANA Team. Source Dominican Red Cross



DDRC DANA Team. Source Dominican Red Cross



House affected in Montellano Municipality, Puerto Plata. Source: DRC

Scope and Scale

The impact of the event reflects a combination of densely populated urban areas and peri-urban settlements with structural drainage limitations—such as Santo Domingo Oeste, Los Alcarrizos, Pedro Brand and sectors of the National District—alongside rural and semi-rural areas highly exposed to river overflows and flooding, including Puerto Plata, Espaillat, María Trinidad Sánchez, Valverde. This territorial configuration has amplified the effects of the event across multiple sectors, including housing, health, water and sanitation, livelihoods, mobility and access to basic services.

Field evidence confirms the severity of the impact in specific locations. In Puerto Plata province, particularly in the municipalities of Montellano and Yásica, river overflow led to extensive flooding, directly affecting communities such as La Marina, La Chancleta, La Batata, Los Mellizos and Camú. In some of these areas, up to 100 per cent of households have been affected by floodwaters, alongside the collapse of critical infrastructure, including the Camú bridge, significantly restricting access and requiring alternative routes for humanitarian assistance.

Further disaggregated assessment data indicates that the most severe impacts are concentrated in the northern provinces, particularly Puerto Plata and Espaillat, where multiple communities report high levels of affectation. In municipalities such as Villa Montellano, Sabaneta de Yásica and Gaspar Hernández, several communities report between 300 and 600 households affected, with some areas experiencing near-total impact. Communities including Los Ciruelos, Boca Nueva, El Buen Pan and Los Cartones in Puerto Plata, and Gaspar Hernández, Flamboyán and Batey 3 in Espaillat, present some of the highest levels of impact, with extensive damage to housing, disruption of basic services and urgent needs related to water, hygiene and household items.

In contrast, other regions—including María Trinidad Sánchez, Valverde, Dajabón, San Cristóbal and Santo Domingo Oeste—show more localised but still significant impacts, with affected households ranging from small clusters to several hundred depending on the community. In urban and peri-urban areas such as Santo Domingo Oeste, communities including El Brugal and Juan Guzmán report between 150 and 350 households affected, highlighting the wide geographic spread of the emergency.

Damage and Needs Assessments (EDAN) indicate that more than 59 per cent of assessed households in the most affected communities experienced direct flooding, with additional cases of partially damaged or at-risk structures. These conditions are compounded by disrupted electricity supply, limited road access and the potential contamination of water sources, increasing both operational complexity and public health risks.

At the national level, the event has had a systemic reach. According to COE and INDOMET (latest update 16 April 2026), more than 95 per cent of the national territory has been affected by rainfall, with at least 126 municipalities exposed to significant precipitation. This indicates that the emergency is not localised but rather widespread, with simultaneous pressure across multiple provinces and response systems.

In addition, analysis from the World Food Programme (WFP) ANACAONA platform estimates that over 1.3 million people are exposed to varying levels of impact, including populations already facing high levels of socio-economic and climate vulnerability.

The scale of the event therefore goes beyond isolated or localised flooding. It represents a rapidly evolving, multi-provincial emergency characterised by widespread disruption of basic services, damage to housing and community infrastructure, and increased pressure on households resorting to evacuation in host family arrangements. The combination of concentrated severe impacts in provinces such as Puerto Plata and Espaillat, together with dispersed effects across other regions, significantly increases the operational complexity of the response.

Furthermore, the event is occurring in areas previously affected by recent hydrometeorological shocks, where recovery remains incomplete. This has reduced household coping capacity and amplified the cumulative impact of recurrent hazards.

Finally, the National Institute for Drinking Water and Sewerage (INAPA) has reported that 28 aqueducts are currently out of service, affecting approximately 113,000 people nationwide (INAPA, April 2026), further exacerbating vulnerabilities related to water access and public health. This has directly informed the prioritisation of WASH interventions within the operation.

These variations in impact have guided the targeting strategy of the operation, prioritising areas with the highest concentration of affected households and most critical needs.

Source Name	Source Link
1. COE	https://www.coe.gob.do
2. INDOMET	https://indomet.gob.do
3. WFP	https://dominicanrepublic.un.org/es/296321-rep%C3%BAblica-dominicana-y-pma-a%C3%BAnan-esfuerzos-preventivos-ante-impacto-de-huracanes-con-enfoque
4. INAPA	https://inapa.gob.do

Previous Operations

Has a similar event affected the same area(s) in the last 3 years?	Yes
Did it affect the same population group?	Yes
Did the National Society respond?	Yes
Did the National Society request funding form DREF for that event(s)	Yes
If yes, please specify which operation	MDRDO009, MDRDO010, MDRDO019



If you have answered yes to all questions above, justify why the use of DREF for a recurrent event, or how this event should not be considered recurrent:

Although the Dominican Republic is recurrently exposed to seasonal rainfall and flooding events, the current emergency cannot be considered a routine or recurrent event within normal patterns. The intensity, duration and geographical extent of the rainfall have generated impacts that exceed typical seasonal conditions, affecting multiple provinces simultaneously and causing significant damage to housing, livelihoods and access to basic services.

The scale of the impact—affecting more than 30,500 affected people, over 7,000 households impacted, more than 20,000 people without access to health services, and resulting in 10 fatalities—demonstrates that this event exceeds the response capacity of regular preparedness and contingency mechanisms.

Furthermore, while the current flooding has affected two provinces that were also impacted during the Hurricane Melissa DREF operation, the affected communities are geographically distinct. The areas currently impacted include Pedro Brand (Santo Domingo) and Villa Altigracia (San Cristóbal), whereas the Hurricane Melissa response focused on Santo Domingo Oeste, Norte and Este, as well as San Cristóbal municipality within San Cristóbal province.

This geographic differentiation ensures a clear separation of targeted populations, mitigating any risk of duplication of assistance or overlap between operations.

Given the scale, complexity and multi-sectoral nature of the impacts, the use of the DREF is fully justified to support a timely, targeted and effective humanitarian response, in line with Movement standards.

Lessons learned:

Previous operations implemented by the Dominican Red Cross (DRC) have informed key adjustments to improve the effectiveness of the current response, particularly in terms of timeliness, targeting and modality of assistance.

First, delays in the mobilisation of assistance were identified as a constraint in previous responses. In the current operation, this is being addressed through early activation of the supply chain, verification of available pre-positioned stocks and advance planning of distributions, reducing the time between assessment and delivery.

Second, the Damage and Needs Assessment (DANA) tool has been strengthened by incorporating a multi-sectoral approach, allowing for more efficient data collection and improved prioritisation of affected communities based on severity criteria.

Third, the use of cash assistance has been reinforced as a primary modality. Previous operations showed that in-kind assistance alone did not fully address household needs. Therefore, this response prioritises multipurpose cash assistance (MPCA), complemented by in-kind support (hygiene and kitchen kits) in cases where households have lost essential goods and immediate recovery capacity is limited. A feasibility study is planned early in the operation to ensure timely implementation.

In addition, community engagement has been strengthened based on lessons learned regarding limited feedback mechanisms in previous responses. This operation integrates more structured community engagement and accountability (CEA) mechanisms to ensure that the response is continuously adapted to the needs identified in the field.

The operation also incorporates the use of digital tools such as AccessRC to enhance data management and improve the efficiency of assistance delivery.

Previous flood response operations in the Dominican Republic have highlighted the importance of timely implementation of cash and voucher assistance (CVA), strengthened community engagement and improved coordination with local authorities. Delays in CVA delivery and challenges in reaching dispersed populations were identified as key constraints. This operation incorporates these lessons through early planning of CVA processes, prioritisation of household-level outreach and strengthened integration of health, mental health and psychosocial support (MHPSS) and CEA approaches.

Finally, the integration of Protection, Gender and Inclusion (PGI) approaches has been reinforced, ensuring that beneficiary identification and targeting are based on vulnerability criteria, including older persons, persons with disabilities, pregnant women, children and other at-risk groups.

Did you complete the Child Safeguarding Risk Analysis in previous operations, what was risk level?

Yes



What was the risk level for Child Safeguarding Risk Analysis?:

The safeguarding risk analysis conducted under the current DREF operation for Hurricane Melissa identified a Very High Risk level. In response, the National Society is actively developing a comprehensive and detailed safeguarding action plan, with technical support from both the Regional PGI focal point and the National Society's PGI focal point. As part of immediate risk mitigation measures, several preventive workshops and awareness sessions have already been conducted with staff and volunteers to strengthen understanding, reinforce safe practices, and ensure adherence to safeguarding standards across ongoing and future operations.

Current National Society Actions

Start date of National Society actions

09-04-2026

Coordination	<p>The Dominican Red Cross maintains strong internal coordination across its operational departments, supported by central-level decision-making processes that ensure a coherent and integrated response across affected provinces.</p> <p>At the national level, the National Society is actively engaged in the COE coordination structure, working alongside key actors such as Civil Defence, fire brigades, local authorities and other first responders. This coordination has facilitated continuous information sharing, validation of impact data and alignment of operational actions, reducing duplication and improving efficiency.</p> <p>The National Society also participates in the National Risk Management Forum, enabling coordination with NGOs and national and international partners.</p> <p>At the territorial level, branches are actively engaged in Municipal Prevention, Mitigation and Response Committees (CPMR), ensuring local-level coordination and timely implementation of response actions. In highly affected provinces such as Puerto Plata, joint operational coordination has been established between the Dominican Red Cross, Civil Defence, fire brigades and municipal authorities, including the activation of local EOCs, deployment of EDAN teams and coordinated response actions related to assessments, rescue operations and access to affected communities.</p> <p>Coordination is also maintained with the IFRC Country Cluster Delegation (CCD), ensuring technical support, operational alignment and integration with Movement coordination mechanisms.</p>
National Society Readiness	<p>The Dominican Red Cross maintains close coordination with the National Emergency Operations Centre (COE), ensuring continuous engagement and active participation in sectoral coordination mechanisms to strengthen inter-institutional alignment and collective response capacity.</p> <p>Through its Relief and Disaster Risk Management Directorate, the National Society has reinforced coordination with branches in provinces under alert, ensuring the availability and readiness of specialised response capacities. These include Damage and Needs Assessment teams (EDAN), the National Intervention Unit (UNIR) and the National Emergency Unit (UNEM), enabling a timely and integrated response to the evolving situation.</p>



	<p>Emergency Operations Centres (EOCs) have been activated at both national and branch levels, including provincial coordination centres in affected areas. In parallel, the National Society has pre-positioned relief items, including family hygiene kits, kitchen kits and other non-food items, within its humanitarian logistics corridor, as well as additional stocks at four provincial coordination centres to facilitate rapid deployment.</p> <p>During the initial phase of the response, the Dominican Red Cross mobilised search and rescue teams across three branches, with approximately 150 volunteers engaged in water-related rescue and evacuation activities, particularly in areas affected by strong currents and flooding during night-time hours.</p> <p>These operations required the intensive use of specialised equipment, including ropes, carabiners and flashlights. Due to the severity of the conditions—particularly high water flow and low visibility—part of this equipment was damaged, lost or rendered unusable during the response.</p>
<p>Assessment</p>	<p>The Dominican Red Cross has deployed four multidisciplinary teams, including EDAN, health and WASH specialists, to the municipalities of Villa Altagracia, Montellano, Gaspar Hernández and Santo Domingo Oeste to reinforce branch-level response capacities.</p> <p>To date, 62 Damage and Needs Assessments (EDAN) have been conducted across affected communities. Field teams continue to carry out both EDAN and sectoral assessments to further refine the understanding of needs and prioritisation.</p> <p>Preliminary findings indicate discrepancies between official data and field-level assessments, highlighting the need to consolidate a validated and harmonised dataset as assessments progress.</p>
<p>Resource Mobilization</p>	<p>The Dominican Red Cross has initiated engagement with strategic partners and donors, including ECHO, the Italian Red Cross, Plan International and the World Food Programme (WFP), to explore opportunities for technical and financial support to the response.</p> <p>In parallel, discussions are ongoing with private sector actors at the national level to identify potential contributions. These efforts aim to mobilise additional resources to sustain a multi-sectoral response, support operations across multiple territories and facilitate early recovery of affected households, in coordination with national authorities and humanitarian partners.</p>
<p>Activation Of Contingency Plans</p>	<p>The National Society has activated its National Emergency Plan, with interventions guided by established activation procedures at both branch and headquarters levels. Provincial coordination centres have been activated in areas under alert, with operational guidance provided from the National Crisis Management Room.</p>
<p>National Society EOC</p>	<p>The National Crisis Management Room of the Dominican Red Cross has been activated since the issuance of the initial alerts, ensuring continuous coordination, planning, operational direction and monitoring of the response.</p> <p>Daily coordination meetings are held at central level, involving key technical sectors including relief, health, WASH, logistics, PGI, CEA and information management. These meetings support data consolidation, operational analysis, decision-making and prioritisation of field actions.</p> <p>In addition, regular virtual coordination meetings are conducted with branches and provincial coordination centres, ensuring a continuous flow of information from community to national level, as well as validation of data and tracking of response activities.</p> <p>The Crisis Management Room operates as a multidisciplinary coordination platform,</p>



	guiding the deployment of teams, allocation of resources and operational response based on the evolving situation and identified needs.
Other	<p>In addition to assessment and coordination efforts, the Dominican Red Cross has provided immediate assistance to affected households using pre-positioned stocks during the initial phase of the response.</p> <p>To date, a total of 500 hygiene kits, 200 buckets with tap and 200 kitchen kits have been distributed in the most affected communities to address urgent needs related to hygiene, water storage and basic household conditions.</p> <p>These distributions were carried out through branch-level volunteer mobilisation and targeted the most affected and vulnerable households. As a result, existing stock levels have been partially depleted.</p> <p>This DREF operation will therefore support both the continuation of assistance and the replenishment of items already used, ensuring that the National Society maintains adequate preparedness capacity for future emergencies.</p>

IFRC Network Actions Related To The Current Event

Secretariat	<p>The IFRC Country Cluster Delegation (CCD) for the Dominican Republic has maintained continuous coordination with the Dominican Red Cross to ensure an effective and timely response. The Disaster Risk Management team has actively participated in coordination meetings held within the National Crisis Management Room, supporting operational planning, information analysis and alignment of response priorities.</p> <p>In parallel, the CCD has been coordinating with the IFRC Regional Office for the Americas to facilitate the preparation and potential allocation of DREF funding, ensuring compliance with technical standards and quality requirements. Ongoing technical support is being provided across key areas, including operations and CVA to strengthen the design and implementation of the response.</p>
Participating National Societies	<p>The Italian Red Cross maintains regular coordination with its headquarters in Rome, as well as with its traditional partners, including the French Red Cross and ECHO, to ensure information sharing and alignment of potential support actions.</p> <p>This coordination includes continuous exchange of operational updates, monitoring of the evolving situation and exploration of potential areas for technical or financial support to the Dominican Red Cross response.</p>

ICRC Actions Related To The Current Event

At present, no specific operational actions have been identified by the International Committee of the Red Cross (ICRC) in direct relation to this event. However, coordination channels remain open to ensure complementarity should the situation evolve.



Other Actors Actions Related To The Current Event

<p>Government has requested international assistance</p>	<p>No</p>
<p>National authorities</p>	<p>Through Decree No. 234-26, the President of the Dominican Republic declared a State of Emergency in the provinces of Santo Domingo, National District, Puerto Plata, Espaillat, Valverde and Santiago, with the aim of scaling up national response capacities to address the impacts of the flooding.</p> <p>The National Emergency Operations Centre (COE) is leading the overall coordination of the response, operating in permanent session and consolidating impact data while coordinating the actions of institutions within the National System for Prevention, Mitigation and Response. This includes the issuance of alerts, public guidance, evacuation coordination and continuous monitoring of affected areas.</p> <p>Multiple government institutions are actively engaged in response operations. The Ministry of Defence, through its armed forces, has conducted search, rescue and evacuation operations, including assistance to more than 150 people in Puerto Plata, supported by aerial, maritime and specialised response units.</p> <p>The Civil Defence has activated its Emergency Operations Centres at both national and provincial levels, coordinating evacuations, monitoring high-risk areas and supporting affected communities. The Ministry of Public Works and Communications (MOPC) has deployed technical brigades to assess damage to critical infrastructure, including roads and bridges, and to carry out debris removal and restoration of access in impacted areas.</p> <p>The National Institute for Drinking Water and Sewerage (INAPA) has reported disruptions in 28 aqueduct systems, affecting more than 113,000 people, and is conducting monitoring and technical assessments to restore water supply services.</p> <p>In the social sector, institutions such as the Social Plan of the Presidency and the Economic Kitchens Programme have been mobilised to provide food and water assistance to affected populations. The Ministry of Health has activated its health sector coordination mechanisms within the COE, including epidemiological surveillance and provincial-level health monitoring.</p> <p>While these actions demonstrate a strong national response, the scale, geographic dispersion and multi-sectoral nature of the impacts highlight the need for complementary humanitarian support to address the most urgent needs of affected populations.</p>
<p>UN or other actors</p>	<p>The World Food Programme (WFP) is maintaining coordination with national authorities and humanitarian actors and continues to share analytical updates through the ANACAONA platform, supporting situational awareness and response planning.</p> <p>Other humanitarian and development partners, including NGOs and international organisations, are engaged through national coordination platforms such as the National Risk Management Forum, contributing to information sharing and alignment of interventions.</p>



Are there major coordination mechanism in place?

The response is coordinated through the established mechanisms of the National System for Prevention, Mitigation and Response, led by the COE, which operates in permanent session and ensures inter-institutional coordination at national level.

Sectoral coordination tables—including health, WASH and social assistance—have been activated, bringing together government institutions, first responders and humanitarian actors to facilitate technical coordination, information sharing and alignment of interventions.

At the territorial level, Provincial and Municipal Prevention, Mitigation and Response Committees (CPMR) are active in affected areas, enabling operational coordination between local authorities, response agencies and the Dominican Red Cross.

In highly affected areas such as Montellano (Puerto Plata), a joint command centre has been established under COE coordination, with participation from all response institutions. Within this framework, the Dominican Red Cross is leading community-level interventions, including assessments and humanitarian assistance.

Needs (Gaps) Identified



Shelter Housing And Settlements

The territorial analysis shows a high concentration of impact in Puerto Plata and Espaillat, where approximately 5,011 and 2,477 households have been affected respectively, representing more than 90 per cent of the total affected households identified in preliminary assessments. In these areas, several communities report severe levels of impact, in some cases affecting nearly all households.

In contrast, provinces such as Santo Domingo (approximately 539 households affected), María Trinidad Sánchez (111), Valverde (30) and San Cristóbal (20) show more localised and less extensive damage.

Although approximately 30,500 people have been evacuated, most are staying with host families rather than in collective centres, largely due to limited conditions in shelters and cultural preferences for family-based support systems. This situation places additional pressure on host households, increasing vulnerability on both sides.

The main impacts relate to the loss of essential household items, deterioration of living conditions and accumulation of mud and debris inside homes, limiting households' ability to restore safe and habitable conditions independently.

The main identified gaps include:

1. Insufficient availability of cleaning and rehabilitation materials for affected households
2. Need for replacement of essential household items lost or damaged
3. Limited household capacity to restore safe living conditions without external support
4. Increased pressure on host families accommodating evacuated populations

These gaps highlight the need for targeted early recovery support to restore basic living conditions, particularly in areas with high concentrations of damage and low coping capacity.



Multi purpose cash grants

Flooding has significantly affected household economic capacity, impacting both rural and urban livelihoods. The loss of productive assets, disruption of income-generating activities and evacuation have resulted in an immediate reduction in household liquidity, limiting the ability to meet basic needs such as food, health, shelter recovery and essential goods.

Assessments conducted by the Dominican Red Cross indicate losses in agricultural production, poultry farming and small businesses, particularly local shops ("colmados"), where inventory losses have directly affected household and community-level income generation.

Given the nature of the emergency, there is a clear need for flexible and timely assistance modalities that allow households to prioritise



their most urgent needs in a dignified manner.

Key gaps include:

- Reduced household purchasing power
- Loss of productive assets and income sources
- Limited ability to cover basic needs independently
- Need for flexible, rapid and context-appropriate assistance mechanisms

A cash feasibility study will be conducted to inform the design of a multipurpose cash programme aligned with identified needs and market conditions.

Health

The Ministry of Public Health, through the Epidemiology Directorate (DIGEPI), has issued an epidemiological alert due to the increased risk of disease outbreaks in affected areas.

Flood conditions—including exposure to contaminated water, stagnant water accumulation and overcrowding—are increasing the risk of communicable diseases such as dengue, malaria, leptospirosis, diarrhoeal diseases and respiratory infections.

In addition, exposure to floodwaters and deteriorated living conditions increases the likelihood of skin infections and other environment-related illnesses. The psychological impact of the event is also affecting the well-being of affected populations.

Key gaps identified include:

1. Limited access to timely and clear risk communication and health information
2. Insufficient prevention practices in emergency contexts
3. Increased risk of vector-borne and water-borne diseases
4. Deterioration of psychosocial well-being due to stress and displacement
5. Limited access to health services and weakened community-level surveillance
6. Need to expand rapid health assessments in affected areas

Water, Sanitation And Hygiene

WASH has been identified as a priority sector in the early phase of the emergency. Field assessments highlight significant challenges in access to safe water, sanitation conditions and hygiene practices.

The disruption of water systems, combined with environmental contamination and stagnant water, is increasing public health risks in affected communities.

Key gaps include:

1. Limited access to safe drinking water
2. Deterioration of sanitation conditions at household and community level
3. Accumulation of solid waste and stagnant water contributing to environmental contamination
4. Poor hygiene practices due to lack of resources and information
5. Increased risk of water-borne and vector-borne diseases
6. Insufficient availability of potable water for affected populations

Protection, Gender And Inclusion

Overcrowding, stress and loss of assets have increased the risk of violence, abuse and protection concerns, particularly among women, children, older persons and persons with disabilities. There are also gaps in the timely identification and referral of protection cases.

In addition, some households face challenges in restoring family links and accessing information on available services and assistance mechanisms.

In Puerto Plata, particularly in Montellano, the closure of the municipal hospital has further exacerbated vulnerabilities, especially for pregnant women, older persons and individuals with chronic conditions who face increased barriers to accessing health services.

Key gaps include:

- Limited access to protection services and referral pathways
- Increased risks of gender-based violence and child protection concerns
- Barriers to accessing health services for vulnerable groups
- Limited access to clear and accessible information



Migration And Displacement

A significant number of migrants, particularly in irregular situations, are present in the affected provinces. These populations already face heightened vulnerability, including barriers to accessing services, information and state assistance mechanisms.

This creates additional risks of exclusion from humanitarian assistance.

Key gaps include:

- Barriers to accessing assistance and information
- Risk of discrimination or exclusion from support mechanisms
- Limited visibility of migrant needs within response systems

An inclusive and non-discriminatory approach is required to ensure equitable access to assistance.



Risk Reduction, Climate Adaptation And Recovery

The current event highlights the high exposure of communities to recurrent hydrometeorological hazards. The intensity of rainfall, soil saturation and river overflows have exceeded local response capacities and exposed gaps in community-level risk management.

In the short term, there is a need to restore safe living conditions and support early recovery of livelihoods. In the medium term, strengthening community resilience and preparedness is critical.

Key gaps include:

- Limited community-level preparedness and risk awareness
- Need for strengthened local risk reduction capacities
- Limited ability to recover livelihoods after repeated shocks



Community Engagement And Accountability

Assessments have identified gaps in access to clear, timely and reliable information regarding available assistance and prevention measures. There are also limitations in structured feedback mechanisms, reducing the ability of communities to express needs and concerns.

Key gaps include:

- Limited access to reliable and actionable information
- Weak feedback and complaints mechanisms
- Need for stronger community participation in decision-making



Strengthening communication channels and community engagement mechanisms is essential to ensure an effective and accountable response.

Any identified gaps/limitations in the assessment

Gaps and limitations in the assessment

While ongoing assessments conducted by the Dominican Red Cross have provided critical initial insights into the scale and impact of the event, several gaps and limitations remain that affect the completeness and precision of the analysis.

Unmet needs:

Preliminary findings indicate that needs across key sectors—including shelter, WASH, health and livelihoods—remain only partially assessed, particularly in hard-to-reach and recently affected communities. In some areas, sector-specific data is still being validated, limiting the ability to fully quantify the extent of unmet needs and prioritise interventions accordingly.

Resource limitations:

The scale and geographic dispersion of the emergency have placed pressure on available assessment capacities. Limitations in human resources, logistics and data management tools have constrained the speed and coverage of assessments, particularly in remote or highly affected areas requiring repeated visits.

Operational challenges:

Access constraints due to damaged infrastructure, including affected roads and bridges, as well as ongoing rainfall and unstable weather conditions, have limited the ability of assessment teams to reach certain communities. Additionally, the dynamic nature of the situation means that needs are evolving, requiring continuous reassessment and adaptation.

Data and information gaps:

Discrepancies between official data sources and field-level assessments persist, highlighting the need for further data harmonisation and validation. In some locations, incomplete or rapidly changing information has limited the ability to establish a fully consolidated picture of the impact.

Coordination challenges:

While coordination mechanisms are active, the simultaneous involvement of multiple actors across different territories has created challenges in data sharing and consolidation, potentially leading to gaps or overlaps in assessment coverage.

Vulnerable groups:

Although efforts have been made to incorporate Protection, Gender and Inclusion (PGI) considerations, the needs of certain vulnerable groups—including migrants, persons with disabilities, older persons and individuals with chronic health conditions—may not yet be fully captured. Additional targeted assessments are required to ensure that their specific needs are adequately reflected in the response design.

Overall, these limitations highlight the need for continued assessments, data validation and adaptive planning to ensure that the response remains aligned with the evolving needs of affected populations.

Operational Strategy

Overall objective of the operation

Through this DREF operation, the Dominican Red Cross aims to assist 10,000 people affected by flooding across the provinces of San Cristóbal, Santo Domingo, Puerto Plata, María Trinidad Sánchez, Montecristi, Valverde and Espaillat.

The operation seeks to improve immediate living conditions and support early recovery, by restoring access to essential services and basic needs, including shelter, water, sanitation and hygiene (WASH), health, and livelihoods, while integrating Protection, Gender and Inclusion (PGI) and Community Engagement and Accountability (CEA) approaches throughout the response.



Operation strategy rationale

The proposed response is designed to deliver timely, targeted and coordinated humanitarian assistance to the most affected and vulnerable households, based on the findings of ongoing assessments and the identified priority needs.

The flooding has resulted in significant damage to housing, loss of essential household items, disruption of livelihoods and deterioration of sanitary conditions. These impacts have increased public health risks and further exacerbated the vulnerability of affected populations, particularly those already facing socio-economic constraints.

In this context, the strategy prioritises rapid, cost-efficient and flexible interventions that enable households to meet their immediate needs while supporting early recovery. The approach focuses on:

Reducing immediate risks to health and well-being through WASH, health and risk communication interventions
Restoring minimum living conditions through support to shelter and essential household items
Supporting early recovery and household resilience through multipurpose cash assistance and livelihood-related actions
Summary by sector of intervention

Water, Sanitation and Hygiene (WASH)

The operation will prioritise access to safe water and improved hygiene conditions through the distribution of hygiene kits, cleaning kits, jerrycans and vector control supplies. These actions will be complemented by community-level interventions, including cleaning of water points and support for safe water supply through water trucking where required.

Health and Psychosocial Support (PSS)

Health interventions will be implemented through a community-based approach, primarily using household-level outreach and small group sessions led by trained Dominican Red Cross volunteers. Volunteers will conduct door-to-door visits and community engagement activities to deliver health promotion, disease prevention messages and basic risk communication, prioritising areas with higher levels of impact.

These activities will be implemented in close coordination with the Ministry of Health, ensuring alignment with national epidemiological priorities, health protocols and referral pathways. Community-based surveillance will be strengthened through volunteer reporting mechanisms, allowing for early identification of potential health risks and timely referral of suspected cases to local health services. The National Society will also coordinate with local health authorities to ensure that outreach activities complement ongoing public health interventions and facilitate access to care where needed.

Health interventions will include an integrated Mental Health and Psychosocial Support (MHPSS) component, delivered through a community-based approach led by trained volunteers. MHPSS will be embedded within household visits and community outreach activities, ensuring that psychological first aid (PFA) is provided alongside health promotion and risk communication.

This integrated approach will allow the National Society to reach a larger proportion of the affected population, particularly those experiencing stress due to displacement, loss of livelihoods and disruption of daily life. Individuals requiring additional support will be identified during outreach activities and referred to appropriate health or specialised services in coordination with the Ministry of Health.

The integration of MHPSS within health activities ensures efficiency, scalability and alignment with IFRC community-based health approaches.

Multi-purpose Cash Assistance (CVA)

Multipurpose cash assistance will be a key modality of the response, enabling affected households to prioritise their most urgent needs in a flexible and dignified manner. A feasibility study will be conducted early in the operation to inform programme design, targeting and delivery mechanisms.

Cash assistance will be complemented by community awareness activities led through CEA to promote informed and appropriate use of the support provided.

To ensure timely delivery of assistance, particularly for the CVA component, the operation will adopt an accelerated implementation approach, including early initiation of feasibility studies and parallel processes for beneficiary registration and FSP contracting.

The operation will provide unconditional multipurpose cash assistance to targeted households to support the coverage of their most urgent basic needs.

The multipurpose cash transfer value is currently estimated at approximately CHF 200 per household, based on preliminary analysis of local market prices, previous DREF operations in similar contexts and reference to the Minimum Expenditure Basket (MEB).



This amount is intended to support affected households in meeting priority needs such as food, hygiene and other essential items. The final transfer value may be adjusted following the completion of the cash feasibility study at the beginning of the operation, which will assess market functionality, price levels and household needs.

Community Engagement and Accountability (CEA)

Community Engagement and Accountability (CEA) will be central to the design and implementation of the operation, ensuring that affected populations are informed, consulted and able to actively participate in the response. The National Society will apply a people-centred approach by integrating two-way communication mechanisms across all sectors, including cash assistance, health and WASH interventions.

Community feedback and perceptions will be systematically collected through established channels, including face-to-face interactions, community meetings and phone-based mechanisms, and will be used to inform operational decision-making and adjustments throughout implementation. Particular attention will be given to communicating clear and accessible information on targeting criteria, assistance modalities and timelines, in order to manage expectations and reduce the risk of tensions.

CEA activities will be closely linked with Protection, Gender and Inclusion (PGI) to ensure that communication is inclusive, culturally appropriate and accessible to all groups, including vulnerable and hard-to-reach populations. Dedicated tools, including institutional communication channels supported by SIM cards, will be used to ensure confidentiality, data protection and safe engagement with communities.

Protection, Gender and INclusion (PGI)

Protection, Gender and Inclusion will be systematically integrated across all components of the operation to ensure that assistance is safe, equitable and accessible to all affected groups. Targeting and delivery approaches will prioritise the inclusion of women, children, older persons, persons with disabilities and other vulnerable populations, addressing potential barriers to access related to gender, age, disability and socio-economic status.

The operation will apply a “do no harm” approach, incorporating safeguarding measures to prevent sexual exploitation and abuse (SEA) and other protection risks. All staff and volunteers will adhere to the Code of Conduct and receive orientation on PGI and safeguarding prior to deployment. Risks will be continuously monitored, and mitigation measures adapted throughout implementation.

PGI will be closely linked with Community Engagement and Accountability (CEA) to ensure that communication is inclusive, culturally appropriate and accessible, and that feedback from affected populations informs decision-making. The operation will also utilise existing national protection referral mechanisms, enabling the safe identification and referral of cases related to gender-based violence (GBV), child protection and other vulnerabilities.

Through these measures, the operation aims to uphold the dignity, safety and rights of affected populations, in line with the Fundamental Principles of the International Red Cross and Red Crescent Movement.

Shelter (Housing support)

Support to shelter will focus on the provision of essential household items, including kitchen kits, to complement other interventions and support the restoration of basic living conditions for affected households.

Risk Reduction and Early Recovery

The operation will incorporate early recovery and risk reduction components, including the implementation of community-level vulnerability and capacity assessments (e.g., EVCA), to strengthen preparedness and resilience against future events.

NS Strengthening

The operation includes the replacement of essential search and rescue equipment used during the initial response phase. Items such as ropes, carabiners and flashlights were heavily utilised under challenging conditions, including strong water currents and night-time operations, resulting in damage and loss of critical equipment.

The replenishment of this equipment is necessary to ensure the continuity of ongoing response activities, as the emergency remains active, and to maintain the operational readiness and safety of volunteer teams in the event of further flooding or similar hazards.

The design of this operation builds on lessons learned from previous DREF operations implemented in response to flooding in the Dominican Republic, including recent responses to similar hazards. Key challenges identified in past operations included delays in the implementation of cash assistance due to market assessments and contracting processes, as well as limitations in reaching dispersed populations through centralised approaches.

In response, this operation incorporates several improvements, including the early initiation of the cash feasibility study and parallel implementation processes to ensure more timely delivery of assistance. In addition, a household-level outreach approach has been



prioritised to better reach affected populations, particularly those hosted by relatives or dispersed across communities. The integration of MHPSS within health and community-based activities also reflects lessons learned on the need to increase coverage and efficiency of psychosocial support interventions.

These adjustments aim to enhance the timeliness, effectiveness and coverage of the response, while strengthening alignment with community needs and operational realities.

Targeting Strategy

Who will be targeted through this operation?

The operation will target 10,000 people affected by flooding across the provinces of San Cristóbal, Santo Domingo, Puerto Plata, María Trinidad Sánchez, Montecristi, Valverde and Espaillat.

The response will prioritise households experiencing the highest levels of impact and vulnerability, based on the results of ongoing Damage and Needs Assessments (EDAN), sectoral assessments and community-level validation processes.

Targeting will focus on approximately the most severely affected households within priority communities, particularly those facing significant damage to housing, loss of livelihoods, limited access to basic services and reduced coping capacity.

Priority groups

Special attention will be given to groups with increased vulnerability and exposure to risk, including:

- Women and female-headed households
- Children and adolescents
- Older persons
- Persons with disabilities
- Individuals with chronic illnesses
- Pregnant and lactating women
- Migrants, particularly those in irregular situations

These groups will be prioritised due to their increased barriers to accessing assistance, higher exposure to protection risks and specific needs in emergency contexts.

Targeting approach

The identification of beneficiaries will be carried out through a combination of:

- Community-level censuses and EDAN assessments
- Coordination with branches and local authorities
- Engagement with community leaders and representatives

This approach will ensure that targeting is context-specific, evidence-based and locally validated, allowing for accurate identification of households with the greatest needs.

Explain the selection criteria for the targeted population

The operation will apply a combination of criteria to ensure that assistance is directed to the most affected and vulnerable households:

Severity of impact:

Households with significant damage to housing, loss of essential household items or unsafe living conditions

Livelihood impact:

Households that have lost income sources or productive assets, including small-scale farmers, livestock owners and small business operators

Access to basic needs:

Families facing difficulties in accessing food, safe water, hygiene conditions and basic services, particularly those in evacuation or host



family arrangements

Vulnerability factors:

Households including older persons, persons with disabilities, pregnant women, children, chronically ill individuals and migrants

Geographic prioritisation:

Communities with the highest concentration of impact, based on EDAN data and coordination with local actors

Application of targeting criteria

Beneficiary selection will be conducted through field-level verification, in coordination with branches and community leaders, ensuring accuracy and transparency.

A Protection, Gender and Inclusion (PGI) approach will be systematically applied to prevent exclusion and ensure equitable access to assistance for all population groups.

In parallel, Community Engagement and Accountability (CEA) mechanisms will be integrated to:

Clearly communicate targeting criteria

Enable community feedback and validation

Address complaints and reduce risks of exclusion or social tension

Total Targeted Population

Women	3,688	Rural	35%
Girls (under 18)	1,450	Urban	65%
Men	3,478	People with disabilities (estimated)	7%
Boys (under 18)	1,384		
Total targeted population	10,000		

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?	No
Does your National Society have child protection/child safeguarding policy?	No
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
Continued rainfall and new flooding events affecting operations	Continuous monitoring with COE and INDOMET; flexible micro-planning; prioritisation based on access windows; pre-positioning of relief items; adaptive operational planning
Limited access to affected communities	Use of alternative access routes; coordination with local authorities and first responders; decentralised planning through branches; prioritisation of accessible high-impact areas
Delays in implementation of assistance	Early activation of supply chains; use of pre-positioned stocks; simplified procurement processes; close coordination with IFRC logistics support
Data gaps and inconsistencies affecting targeting	Continuous data validation; harmonisation of datasets; strengthening of information management systems; use of digital tools (e.g. AccessRC)
Duplication or gaps in assistance delivery	Active participation in COE and coordination platforms; mapping of assistance; alignment of targeting criteria with government programmes (e.g. Supérate) and partners
Community tensions related to beneficiary selection	Clear communication of targeting criteria; engagement with community leaders; establishment of feedback and complaints mechanisms (CEA); staff and volunteer training in PGI and CEA
Safeguarding and protection risks (including SEA)	<p>Immediate mitigation measures are already in place and will be applied throughout the operation. These include mandatory adherence to the Code of Conduct for all staff and volunteers, safeguarding awareness briefings prior to deployment, and the integration of Protection, Gender and Inclusion (PGI) measures across all activities. In addition, confidential feedback and complaints mechanisms will be established and communicated to affected communities to enable safe reporting of any concerns.</p> <p>These measures aim to ensure that risks are proactively managed from the outset while the safeguarding action plan is being finalised and operationalised.</p>
Data protection risks in CVA implementation	Provision of institutional devices and SIM cards; enforcement of data protection protocols; staff training on data protection and responsible data management
Exclusion of vulnerable groups from assistance	Application of PGI criteria in targeting; inclusive communication strategies; targeted outreach to vulnerable groups; monitoring of inclusion indicator
Operational capacity constraints at branch level	Deployment of surge support from national level; targeted training (including search and rescue, PGI, CEA); reinforcement of branch-level coordination and supervision



Public health risks affecting staff, volunteers and communities	Provision of PPE; health and hygiene promotion; vaccination awareness where applicable; monitoring of health risks; integration of community-based surveillance
Reduced operational capacity of the National Society during concurrent or planned events (e.g. new emergencies, Semana Santa, end-of-year holidays)	Advance operational planning and prioritisation of activities; pre-identification and scheduling of surge capacity; reinforcement of branch-level human resources; flexible deployment plans; coordination with IFRC for potential surge support; adjustment of implementation timelines where necessary
Delays in CVA implementation	Delays in CVA implementation due to market assessments or contracting processes will be mitigated through early initiation of feasibility studies, pre-identification of service providers and parallel implementation of key processes.

Please indicate any security and safety concerns for this operation:

The operational environment remains relatively stable; however, several safety and security concerns must be considered due to the nature of the emergency and the conditions in affected areas.

Field teams may face access-related risks, including damaged roads, unstable terrain, flooded areas and the presence of debris, which increase the likelihood of accidents during movement and distribution activities. These risks may be exacerbated by ongoing rainfall and rapidly changing conditions.

There are also public health risks associated with exposure to contaminated water, stagnant water and poor sanitation conditions, increasing the risk of water-borne and vector-borne diseases for both affected populations and staff and volunteers.

In addition, community tensions may arise due to high levels of need compared to limited available assistance, particularly during beneficiary selection and distribution processes. This may increase the risk of verbal confrontations or dissatisfaction if expectations are not adequately managed.

Safeguarding risks, including sexual exploitation and abuse (SEA), have been identified as a priority for the operation. The National Society, with the support of the IFRC Regional PGI focal point, is currently developing a detailed safeguarding action plan, which is expected to be finalised within the first two months of the operation.

Furthermore, fatigue and stress among staff and volunteers represent an important safety concern, particularly given the intensity of the response, potential overlap with other national operations and extended working hours.

To mitigate these risks, the Dominican Red Cross will implement standard security protocols, including regular security briefings, use of personal protective equipment (PPE), adherence to safe movement procedures and close coordination with local authorities and response actors. Community engagement and clear communication strategies will be used to manage expectations and reduce tensions.

Safeguarding measures will be reinforced through awareness sessions, adherence to the Code of Conduct and the establishment of confidential reporting mechanisms. In addition, staff and volunteer well-being will be supported through structured rotations, rest periods and psychosocial support where needed.

The National Society will continuously monitor the operational context and adapt safety and security measures as required throughout the implementation of the operation.

Has the child safeguarding risk analysis assessment been completed?	Yes
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Planned Intervention



Shelter Housing And Settlements

Budget: CHF 44,730

Targeted Persons: 5,250

Indicators

Title	Target
Number of households receiving kitchen kits	1,050
Number of jerrycans distributed	2,100

Priority Actions

- Distribution of kitchen kits to affected households
- Distribution of jerrycans to support water storage
- Support to early recovery of household conditions



Multi Purpose Cash

Budget: CHF 190,331

Targeted Persons: 4,100

Indicators

Title	Target
Number of households receiving multipurpose cash assistance	800
Number of feasibility studies conducted	1

Priority Actions

- Conduct feasibility study (market and delivery mechanisms)
- Beneficiary identification, registration and verification
- Delivery of unconditional multipurpose cash transfers
- Payment through Financial Service Provider (FSP)
- Post-distribution monitoring (PDM)
- CEA-driven awareness on use of cash assistance

A phased implementation timeline will be followed to ensure timely delivery of assistance. The cash feasibility study will be conducted within the first two weeks of the operation. In parallel, beneficiary identification and registration will begin. Contracting of the Financial Service Provider (FSP) is expected within three weeks, with the first round of cash transfers delivered no later than four weeks after DREF approval. Measures to mitigate delays include pre-identification of FSP options and parallel implementation of key steps.



Budget: CHF 21,513

Targeted Persons: 10,000

Indicators

Title	Target
Number of people reached with health promotion and MHPSS activities	10,000
Number of volunteers trained in community-based health and PFA	80
Number of households reached through household visits	2,000
Number of people referred to health or specialised services	200

Priority Actions

- Conduct household visits (HH approach) for health promotion and outreach
- Provide Psychological First Aid (PFA) during household and community interactions
- Integrate MHPSS messaging into health and hygiene promotion activities
- Conduct targeted group sessions for vulnerable groups (e.g. caregivers, women)
- Identify and refer individuals requiring specialised mental health support
- Strengthen community-based surveillance (CBS) and referral pathways



Water, Sanitation And Hygiene

Budget: CHF 116,777

Targeted Persons: 10,000

Indicators

Title	Target
Number of hygiene kits distributed	1,050
Number of cleaning kits distributed	500
Number of vector control kits distributed	2,100
Number of people reached through hygiene promotion	10,000

Priority Actions

- Distribution of hygiene kits
- Distribution of cleaning kits
- Procurement and distribution of vector control kits
- Hygiene promotion campaigns

- Transport and mobilisation of WASH supplies
- Support to community-level sanitation activities



Protection, Gender And Inclusion

Budget: CHF 1,811

Targeted Persons: 10,000

Indicators

Title	Target
Number of people reached with RFL messages	10,000
Number of PGI sessions conducted	5

Priority Actions

- Development and dissemination of key PGI/RFL messages
- Strengthening inclusion and safeguarding practices
- The operation will support the mapping, strengthening and dissemination of existing national protection referral pathways. The Dominican Red Cross will rely on established national mechanisms to ensure that cases related to gender-based violence (GBV), child protection and other vulnerabilities are identified and safely referred to appropriate services.
- Volunteers and staff will be sensitised on the use of these referral pathways, and key information will be disseminated to communities through CEA activities, ensuring that affected populations are aware of available services and how to access them.



Risk Reduction, Climate Adaptation And Recovery

Budget: CHF 9,053

Targeted Persons: -

Indicators

Title	Target
Number of EVCA assessments conducted	5
Number of community risk maps produced	5

Priority Actions

- Conduct EVCA in selected communities
- Develop and distribute risk maps
- Strengthen community resilience awareness



Community Engagement And Accountability

Budget: CHF 3,195



Targeted Persons: 10,000

Indicators

Title	Target
Number of focus group sessions conducted	10
Number of feedback mechanisms established	1

Priority Actions

- Conduct community consultations
- Establish feedback and complaints mechanisms
- Strengthen two-way communication



Secretariat Services

Budget: CHF 44,996

Targeted Persons: -

Indicators

Title	Target
Monitoring visits	3
Surge personnel deployed	2
Vehicles rented	2

Priority Actions

- Deployment of Operations Coordinator
- Surge CVA and Operations support
- Logistics and fleet management
- Monitoring and technical oversight
- Post-distribution monitoring (PDM)



National Society Strengthening

Budget: CHF 65,423

Targeted Persons: 410

Indicators

Title	Target
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Lessons learned workshop conducted	1
Volunteers insured	410
Search and rescue kits distributed	5

Priority Actions

- Conduct lessons learned workshop
- Provide PPE for volunteers
- Strengthen operational readiness
- Provide search and rescue kits for volunteers involved in first response

About Support Services

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

The Dominican Red Cross will mobilise a combination of national staff, branch-level personnel and volunteers to implement the operation across the targeted provinces.

Staff (core operational team)

The operation will include at least:

- 1 Operations Coordinator (6 months)
- 1 Administrative Assistant (6 months)
- 1 Logistics Assistant (6 months)
- 2 Drivers (6 months)
- IFRC support staff (admin/finance support – 6 months)
- 1 Surge Operations Coordinator (short-term deployment)
- 1 Surge CVA specialist (short-term deployment)

Estimated staff involved: ~ 8–10 personnel

Volunteers

The operation will rely heavily on the National Society’s volunteer network for:

- Distributions (CVA and in-kind)
- Assessments (EDAN)
- Health promotion and WASH activities
- Community engagement (CEA)
- PGI integration and outreach

Based on the budget:

410 volunteers are covered under insurance

Estimated volunteers involved: ~ 400–450 volunteers

Total human resources

Staff: ~ 8–10

Volunteers: ~ 400–450



Total personnel involved: approximately 410–460 people

Does your volunteer team reflect the gender, age, and cultural diversity of the people you're helping? What gaps exist in your volunteer team's gender, age, or cultural diversity, and how are you addressing them to ensure inclusive and appropriate support?

The Dominican Red Cross maintains a diverse volunteer base that broadly reflects the communities it serves, including a balanced representation of women and men, as well as participation from youth and adults across different age groups. Volunteers are mobilised through branch structures, which facilitates cultural and contextual alignment with the affected populations in each locality.

However, some gaps remain. Female participation in certain operational roles—particularly those related to logistics, transport and search and rescue—remains lower compared to male participation. Additionally, while youth engagement is strong, there is comparatively less representation of older volunteers, and inclusion of persons with disabilities within active response roles is still limited. In areas with a higher presence of migrant populations, cultural and linguistic representation within volunteer teams may also be insufficient to fully meet communication and outreach needs.

To address these gaps, the National Society is taking steps to strengthen inclusive volunteer engagement. This includes promoting gender-balanced participation across all roles, encouraging the involvement of women in leadership and operational functions, and ensuring that volunteer mobilisation strategies prioritise diversity and inclusion. Targeted outreach is being conducted through branches to engage underrepresented groups, including older persons and individuals from migrant communities.

In parallel, all volunteers receive orientation on Protection, Gender and Inclusion (PGI), safeguarding and community engagement, ensuring that assistance is delivered in a respectful, inclusive and culturally appropriate manner. Communication approaches are adapted where necessary to improve accessibility, including the use of clear messaging and community-based channels.

These efforts aim to ensure that the volunteer workforce is not only representative but also equipped to deliver assistance that is inclusive, equitable and responsive to the diverse needs of affected populations.

Will surge personnel be deployed? If yes, please provide the role profile needed.

Yes

Surge support will be deployed to strengthen the operational capacity of the Dominican Red Cross, particularly in areas requiring specialised technical expertise and enhanced coordination.

The operation includes the deployment of:

- 1 Operations Coordinator (SURGE) for a short-term assignment to support overall coordination, planning, implementation oversight and alignment across sectors
- 1 Cash and Voucher Assistance (CVA) specialist (SURGE) for a short-term assignment to support the design, implementation and monitoring of the multipurpose cash programme

These surge deployments will complement the existing National Society capacity, ensuring timely implementation, quality assurance and adherence to IFRC standards, particularly in key technical areas such as CVA, PMER, coordination and operational management.

The surge personnel will work closely with the National Society's leadership and technical teams, as well as with the IFRC Country Cluster Delegation, to ensure effective integration into the operational structure and transfer of knowledge to national staff.

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

Procurement for this operation will be conducted through a combined approach between the Dominican Red Cross and IFRC, ensuring efficiency, quality and compliance with IFRC standards.



The Dominican Red Cross will manage local procurement processes, particularly for items and services available in the national market, including cleaning kits, vector control supplies and operational support services.

In parallel, the IFRC—through the Regional Logistics Unit (RLU) in Panama—will support international procurement for replenishment purposes, specifically for hygiene kits, kitchen sets and jerrycans. This will ensure standardisation, quality assurance and timely replenishment of pre-positioned stocks utilised during the response.

The IFRC Country Cluster Delegation will provide overall technical oversight and coordination, ensuring that all procurement processes adhere to IFRC procedures, as well as transparency, accountability and value-for-money principles.

local or international suppliers?

Yes, procurement will involve both, local and international suppliers:

Local suppliers, for items readily available in-country and for operational services

International suppliers, through the IFRC Regional Logistics Unit (RLU) in Panama, for the replenishment of standardised relief items (hygiene kits, kitchen sets and jerrycans)

This dual approach ensures both rapid response capacity and longer-term stock sustainability.

Procurement will serve both distribution and replenishment purposes:

Local procurement will support immediate distribution to affected populations

International procurement via the RLU will focus on replenishment of pre-positioned stocks used during the response

This approach ensures continuity of operations while maintaining preparedness for future emergencies.

For locally procured items intended for distribution, tendering and contracting processes are expected to be completed within 1 to 3 weeks, following emergency procurement procedures and using pre-identified suppliers where possible.

For international procurement through the RLU, lead times will depend on stock availability and shipping arrangements, but the use of pre-positioned regional stocks is expected to significantly reduce delivery timelines.

For Cash and Voucher Assistance, the Financial Service Provider (FSP) has been identified and budgeted within the operation. A cash feasibility study will be conducted at the outset to confirm the most appropriate delivery mechanism, considering market conditions, infrastructure and beneficiary preferences.

The contracting of the FSP will follow IFRC and National Society procedures, ensuring compliance with financial regulations, data protection standards and operational requirements. Coordination with national social protection systems (such as Supérate) will also be explored to enhance complementarity and efficiency.

How will this operation be monitored?

The operation will be monitored through a multi-layered approach combining field-level supervision, data collection, and regular review mechanisms to ensure timely implementation, quality assurance and accountability.

At the operational level, the Dominican Red Cross will conduct regular field monitoring visits through its headquarters and branch structures to track progress against planned activities, verify distributions and assess the quality and relevance of assistance. Monitoring visits will also be conducted jointly with the IFRC Country Cluster Delegation to ensure alignment with operational standards and provide technical support where needed.

A set of sector-specific indicators will be used to measure progress and performance across all interventions, including outputs (e.g. number of households assisted) and outcome-level indicators (e.g. beneficiary satisfaction and ability to meet basic needs). These indicators will be tracked through routine reporting by field teams and consolidated at national level.

Post-distribution monitoring (PDM) will be conducted for both in-kind and cash assistance to assess effectiveness, appropriateness and beneficiary satisfaction. In the case of CVA, monitoring will also include the use of funds, market functionality and any protection or inclusion concerns.



The operation will leverage digital tools such as AccessRC for data collection, beneficiary registration and information management, improving the accuracy, timeliness and traceability of data.

Community Engagement and Accountability (CEA) mechanisms will be integrated throughout the operation, including feedback and complaints systems, allowing affected populations to provide input and raise concerns. This information will be systematically reviewed and used to adjust the response as needed.

Regular coordination and review meetings will be held at national and branch levels to analyse progress, identify challenges and adapt operational plans in line with the evolving context.

In addition, monitoring visits by IFRC will be conducted to support oversight, ensure compliance with DREF requirements and strengthen operational quality.

At the end of the operation, a lessons learned workshop will be conducted to capture key findings, good practices and areas for improvement, contributing to organisational learning and future preparedness.

Please briefly explain the National Societies communication strategy for this operation

The Dominican Red Cross will implement a communication strategy focused on timely, accurate and transparent information sharing, both externally and with affected communities, to support an effective and accountable response.

Externally, the National Society will disseminate key updates on the situation and response through its official communication channels, including social media, press releases and coordination platforms, ensuring visibility of humanitarian actions while maintaining neutrality and respect for affected populations.

At community level, communication efforts will be closely aligned with Community Engagement and Accountability (CEA) approaches, ensuring that affected populations receive clear, accessible and actionable information regarding available assistance, eligibility criteria, distribution processes and key health and prevention messages.

Two-way communication will be prioritised through the establishment of feedback and complaints mechanisms, enabling communities to express concerns, ask questions and contribute to the continuous adaptation of the response.

All communication materials and messaging will integrate Protection, Gender and Inclusion (PGI) considerations, ensuring that information is inclusive, culturally appropriate and accessible to diverse population groups, including migrants and persons with specific needs.

The communication strategy will also support risk communication and community awareness, particularly related to public health risks, hygiene practices and disaster preparedness, contributing to safer behaviours and reduced vulnerability.

Overall, the approach aims to strengthen trust, promote community participation and ensure that the response remains responsive to the evolving needs of affected populations.



Budget Overview



DREF OPERATION

- Dominican Red Cross
Dominican Republic: Floods April 2026

Operating Budget

Planned Operations	387,410
Shelter and Basic Household Items	44,730
Livelihoods	0
Multi-purpose Cash	190,331
Health	21,513
Water, Sanitation & Hygiene	116,777
Protection, Gender and Inclusion	1,811
Education	0
Migration	0
Risk Reduction, Climate Adaptation and Recovery	9,053
Community Engagement and Accountability	3,195
Environmental Sustainability	0
Enabling Approaches	110,419
Coordination and Partnerships	0
Secretariat Services	44,996
National Society Strengthening	65,423
TOTAL BUDGET	497,829

all amounts in Swiss Francs (CHF)



Contact Information

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