



# OPERATION UPDATE (18 MONTHS)

## Morocco, MENA | Morocco Earthquake 2023

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| <b>Emergency appeal №:</b> MDRMA010<br><b>Emergency appeal launched:</b> 12/09/2023<br><b>Operational Strategy published:</b> 07/11/2023<br><b>Revised Operational Strategy published:</b> 14/11/2024 | <b>Glide №:</b><br>EQ-2023-000166-MAR                                     |
| <b>Operation Update #6</b><br>Date of issue: 30/04/2025                                                                                                                                               | <b>Timeframe covered by this update:</b><br>From 12/09/2023 to 31/03/2025 |
| <b>Operation timeframe: 28 months</b><br>(08/09/2023 – 31/12/2025)                                                                                                                                    | <b>Number of people being assisted:</b><br>125,000                        |
| <b>Funding requirements (CHF):</b><br>CHF 75 million through the IFRC Emergency Appeal<br>CHF 100 million Federation-wide                                                                             | <b>DREF amount initially allocated:</b><br>CHF 1 million                  |

To date, this Emergency Appeal, which seeks CHF 75,000,000 is 50 percent funded.



Photo 1 – Chichaoua – Shelter activity – concrete pocket anchoring, TSU installation, flooring and insulation – Nov. 2024 (Photo: MRC / IFRC)

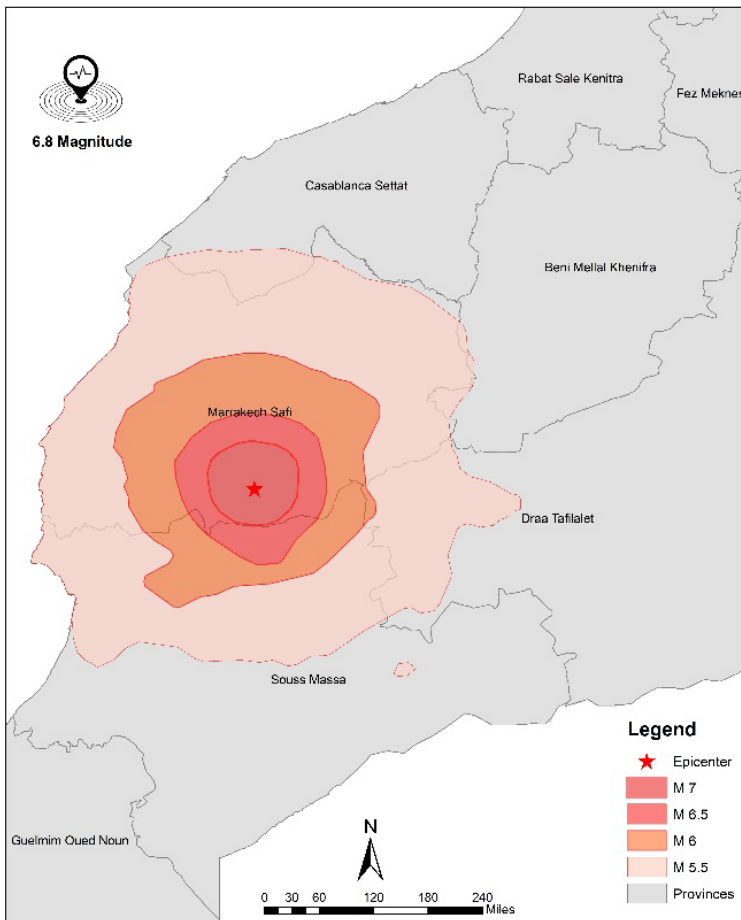
## A. SITUATION ANALYSIS

### I. Description of the crisis



#### Morocco Earthquake

September 8, 2023



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

On 8 September 2023, Morocco was struck by a 6.8 magnitude earthquake, centered in the High Atlas Mountains, 71km southwest of *Marrakesh*<sup>1</sup>. Followed by a 4.9 magnitude aftershock, the earthquake caused extensive damage to buildings and critical infrastructure throughout the provinces of *El-Haouz/Marrakesh*, *Chichaoua* and *Taroudant* as well as *Quarzazate* and *Azilal*.

Remote villages near the epicentre in the Atlas Mountains have suffered substantial damage and emergency services faced difficulty reaching affected people due to damaged roads and challenging terrain.

Authorities have reported some 3,000 human casualties, and some 6,000 people injured as well as almost 60,000 houses destroyed or damaged in urban, peri-urban and rural areas. Schools, health facilities and other public amenities have also suffered severe damage.

Damage to houses and critical infrastructure was extensive in all affected areas, resulting in an urgent need for shelter and household essential support. For months, many people continued living in tent settlements close to their damaged homes, and others were crowded in communal 'displacement' sites or informal shelters which lack electricity, proper water and sanitation, security and privacy. Today, we see

varying levels of completion of house reconstructions depending on the villages, but progress is noticeable everywhere.

Water and sanitation facilities have been greatly damaged or destroyed in many communities, exacerbating the risk and spread of diseases stemming from untreated water sources, poor hygiene practices and open defecation. Communicable diseases, in particular, threaten people living in cramped tented settlements. The affected areas, as

<sup>1</sup> A recently published study on the earthquake reveals the exact location of the epicentre in the Tizi'N'Test commune, Taroudant province. [Séisme d'El-Haouz : la faille Tizi N'Test reconnue responsable, une réaction en chaîne redoutée - Le Desk](#), consulted in March 2025.

well as other regions in the country, face a measles epidemic since late 2023 with around 25,000 measles cases and 120 deaths<sup>2</sup>.

Primary health care services have been disrupted in affected areas, posing a significant risk to people requiring services for chronic diseases and preventive care, including children and pregnant women. Medical, rehabilitation, and psychosocial services are also limited, especially for those in rural areas. At the same time, interaction with affected people has shown a necessity to provide mental health and psychosocial support services together with other forms of humanitarian assistance. The long-term impact on the mental health of affected communities resulting from the trauma of the earthquake is evident.

Considerable damage to houses, buildings and infrastructure has also limited access to livelihoods in affected communities. Many people in remote areas rely on barter trade for survival and have found their resources destroyed or made inaccessible under the rubble of their damaged homes. Destruction of schools has also caused many children, especially girls, to temporarily stop their primary education, and for those who have returned to school, conditions were often very difficult or sometimes putting them at risk.

#### *18 months update*

A year and a half after the earthquake, many families still live with the devastating consequences of the earthquake and trauma is still very present. For many households, moving to a proper house remains their priority. Official data from the prefecture highlights significant progress in the reconstruction efforts following the *El-Haouz* earthquake<sup>3</sup>. Over 15,100 homes have been rebuilt or rehabilitated, representing 60% of the total target. The number of tents has been reduced to 3,211, down from more than 35,500 initially. Reconstruction is expected to reach 80% completion within two months, reflecting the achievements within less than a year since work began.

The reconstruction process faced initial delays due to the need to prioritize rescue operations in difficult terrain, conduct population census surveys, and clear debris from more than 23,500 collapsed homes. Construction permits have been issued under strict technical standards, ensuring compliance with anti-seismic and culturally appropriate designs<sup>4</sup>. Financial assistance has been consistently provided to affected families, including 2,500 MAD (225 CHF) per month, and reconstruction grants of either 140,000 MAD (12,600 CHF) or 80,000 MAD (7,200 CHF), depending on individual circumstances. Alternative housing solutions have been implemented for areas where construction is prohibited or requires special measures.

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<sup>2</sup> [Morocco scrambles to contain measles outbreak blamed on global anti-vax campaign](#), France 24, March 2025.

To be noted that data from the World Health Organisation (WHO) shows that in Morocco, the measles-containing-vaccine second-dose (MCV2) immunization coverage by the locally recommended age has improved from 91% in 2004 to 99% in 2023. (<https://data.who.int/indicators/i/B17F8BC/BB4567B>, April 2025).

<sup>3</sup> [Ministry of Interior reveals updates on the reconstruction of areas affected by the Al-Hawz earthquake – Kech24: Morocco News – Ksh24 : Moroccan online newspaper](#), March 2025.

<sup>4</sup> However, more than 10% of families have yet to begin rebuilding due to inheritance disputes or delays despite receiving state-funded support. Local authorities have issued warnings and are prepared to enforce legal measures if needed.

In December 2024, the Head of Government<sup>5</sup> chaired the inaugural meeting of the Strategic Orientation Council of the High Atlas Development Agency<sup>6</sup>. The program aims to address earthquake damage through financial aid, housing and infrastructure rehabilitation, and socio-economic development in affected areas<sup>7</sup>.

In March 2025, the Moroccan government held an interministerial commission meeting providing an overview on the status of reconstruction and development programmes for the areas affected by the *El-Haouz* earthquake. Key governmental public updates included<sup>8</sup>:

- **Housing:** Progress has been significant, with 33'636 families completing the construction or rehabilitation of homes that were completely or partially destroyed. Work has also commenced on 52'669 houses, and 14'463 of these have reached over 50% completion. For 4'633 homes located in challenging terrain across 12 villages, tailored solutions have been implemented, including the relocation of 1'378 families to areas with available land for rebuilding.
- **Emergency financial support:** For the past 17 months, families whose homes were fully or partially destroyed have received financial aid set at 2'500 MAD per month (225 CHF), in addition to 140' 000 MAD (12'600 CHF) or 80'000 MAD (7'200 CHF), depending on the level of home damages, which the state provided to the beneficiaries to rebuild their homes.
- **Education:** Reconstruction and upgrades have been completed for 165 schools, ensuring their readiness for use. Meanwhile, work on 763 additional educational institutions is ongoing, with an expected completion date ahead of the next school year.
- **Health:** Upgrades have been finalised for 42 health centres, and rehabilitation is nearing completion for an additional 17 centres. Beyond this, progress has been made on 92 further rehabilitation projects to enhance healthcare accessibility in affected areas.
- **Agriculture:** A dedicated action plan valued at 611 million MAD (55 million CHF) has been completed, addressing the restoration of agricultural and economic infrastructure. This includes the repopulation of livestock through the free distribution of animals and barley to farmers to support agricultural recovery.
- **Road Infrastructure:** Rehabilitation efforts have focused on four sections of National Road (N7), covering a total of 64 kilometres, improving connectivity and access for communities in the impacted regions.
- **Water Sector:** Repairs to drinking water supply networks and 43 hydrological stations are underway to ensure the restoration of reliable water systems in affected areas.

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<sup>5</sup> , Mr. Aziz Akhannouch

<sup>6</sup> Created under the directives of His Majesty King Mohammed VI, the agency is tasked with overseeing the reconstruction and rehabilitation program for areas affected by the El-Haouz earthquake. Key outcomes of the meeting included the approval of the agency's action plan, 2025 budget, organizational structure, and staffing framework. The agency will ensure coordination between economic and social development projects and prioritize reconstruction efforts while respecting environmental considerations, local traditions, and seismic standards.

<sup>7</sup> [Le Chef du gouvernement préside la réunion du premier Conseil d'Orientation Stratégique de l'Agence de Développement du Haut Atlas | Chef du Gouvernement - Royaume du Maroc, December 2024.](#)

<sup>8</sup> [The Head of Government chairs a meeting of the Interministerial Commission in charge of the deployment of the reconstruction and development program for the areas affected by the El-Haouz earthquake | Head of Government - Kingdom of Morocco, March 2025.](#)

- **Commerce and Industry:** A total budget of 127 million MAD (11 million CHF) has been allocated to support 1'408 traders whose businesses were disrupted by the earthquake. These measures aim to facilitate economic recovery for small and medium enterprises.

The recovery efforts following the *El-Haouz* earthquake reflect substantial progress across key sectors, addressing immediate needs while laying the groundwork for long-term resilience. Although challenges remain, the achievements to date highlight the dedication of all involved stakeholders in improving living conditions and supporting the affected populations. Continued efforts will be crucial to sustain this progress and ensure communities can rebuild their lives effectively.

## II. Summary of response

### Overview of the host *National Society*

#### *Creation and mandate*

The *Moroccan Red Crescent* society (*MRC*) was established by the *Dahir* (royal decree) No. 1-57-311 of December 24, 1957, in concordance with the Geneva Conventions. The decree stipulates the *MRC* as an autonomous voluntary aid society, auxiliary to the public authorities of civil and military health.

The *MRC* was recognized by the *International Committee of the Red Cross (ICRC)* in 1958 and became a full member of the *International Federation of Red Cross and Red Crescent Societies (IFRC)*. As an auxiliary to the public authorities in the humanitarian field, the *MRC* supports state actors while maintaining its neutrality and independence, adhering to the principles and values of the *International Red Cross and Red Crescent Movement*.

The *Moroccan Red Crescent (MRC)*, under its mandate, delivers vital support to vulnerable populations affected by disasters and exceptional circumstances. Its efforts include emergency response and relief, capacity-building initiatives, *First Aid* training, disaster preparedness, risk reduction, and community-based awareness campaigns. Through its comprehensive range of interventions, the *MRC* has established itself as a key actor in Morocco's humanitarian and social landscape.

#### *Organisational structure*

The *MRC* is structured through central organs: a General Assembly, Central Committee, Board of Directors, and General Secretariat. It operates across a provincial and/or prefectural and local network, comprising: 12 regional branches, 77 branches out of 86 provinces, 28 local units.

- *Number of staff:* 925 (across branches, clinics, training centres), including 144 recruited for the earthquake operation
- *Number of volunteers:* Up to 15'000 volunteers trained, and over 4'000 volunteers active yearly
- *Number of MRC branches:* 77<sup>9</sup>
- *Number of local units:* 28<sup>10</sup>

The *Moroccan Red Crescent* was presided over by Her Royal Highness the late Princess Lalla Malika until September 2021. The organization's major directions are determined by its General Assembly, with the most recent meeting held

<sup>9</sup> Discrepancies across available data, between registered / active / inactive. To be verified via a new data aggregation system as part of the NSD plan.

<sup>10</sup> *Id.*

on July 20, 2020. Between General Assembly meetings, the Board of Directors serves as the deliberative body, guiding and implementing governance decisions. Notably, all members of the governance bodies, including the General Assembly, Board of Directors, and Central Committee, contribute their time and expertise as volunteers.

The central administration oversees the daily operations of the *National Society*, ensuring the implementation of decisions made by the Central Committee and the Board of Directors. It also plays a key role in coordinating the activities of provincial and local committees. However, the capacity of branches varies significantly in terms of training, structures, and infrastructure.

#### *Humanitarian Response and Strategic Priorities*

In light of the challenges posed by the *COVID-19* pandemic and the devastating earthquake that struck Morocco on September 8, 2023, the *Moroccan Red Crescent* has been actively involved in humanitarian response efforts. The *MRC* has mobilized resources to assist affected communities, providing emergency aid, medical support, and long-term recovery initiatives.

Through its ongoing efforts, the *Moroccan Red Crescent* continues to play a vital role in enhancing the resilience of vulnerable populations and addressing the pressing humanitarian needs arising from both natural disasters and public health crises, as per the priority pillars set out in the [National Society Strategic Plan 2021-2025](#) (Disaster Risk Management, Natural Crises and Climate Change, Organisational development of the *National Society*, and Humanitarian Diplomacy and Partnerships), as well as the Strategic Priorities outlined in the [Unified Plan 2025-2027](#).

- *RCRC Partners in country – Membership coordination*

*RCRC* Movement partners support *MRC* in coordinating and implementing the response: *IFRC* (now active with 53 staff), *German Red Cross (GRC)* - currently with seven staff in-country<sup>11</sup>), *French Red Cross (FRC)* - which deployed its first staff in February 2024, now with a team of six in-country<sup>12</sup>) and *Spanish Red Cross (SpRC)* - which deployed its first and sole staff in March 2024). The *Qatari Red Crescent (QRC)* delegated a head of programmes in *Rabat*. All partners are engaged in a harmonised approach to the response and aim at further strengthening *MRC's* capacity to respond to humanitarian crises.

The *German Red Cross* has maintained an office in Morocco for several years, primarily focusing on Disaster Risk Reduction (*DRR*), Health, and *National Society* Development (*NSD*) activities. Prior to the earthquake response, other *PNSs* were not present in the country. The *FRC* co-leads Mental Health and Psychosocial Support (*MHPSS*) and *First Aid* (*FA*) activities, while the *GRC* co-leads technical guidance on *Community-Based Disaster Risk Reduction (CB-DRR)* and *Community-based Health and First Aid (CB-HFA)*. The *SpRC* supports *DRR*, *NSD*, and other cross-cutting activities, while the *QRC* contributes to the Livelihoods and Health sectors. The *MRC*, *IFRC*, and *PNSs* meet regularly to ensure that operational strategies are aligned and complementary. As part of Federation-wide coordination, all partners have contributed towards the *Emergency Appeal's* operational strategies and subsequently participate in Federation-wide reporting to track progress and address shared challenges under this operation.

## Ongoing response

- *Immediate response*

<sup>11</sup> Four staff based in *Rabat* (Head of Office, Operations Manager, Logistics Coordinator, Health Coordinator), 2 in *Marrakesh* (*DRR* Delegate, Program Coordinator), 1 in *Chichaoua* (Field Coordinator seconded to *IFRC*).

<sup>12</sup> 1 Program Coordinator in February 2024, 1 Head of Delegation in March, 1 Logistics Coordinator and 1 Admin-Fin Coordinator in April; 1 *First Aid* Delegate and 1 *MHPSS* Delegate in June.

Following its immediate deployment of volunteers to the affected areas in the first days following the earthquake, MRC has since worked closely with IFRC and its partners to respond to the needs of the people affected. In the initial phase of the response, 300 volunteers quickly transported the injured to medical facilities and distributed non-food items (NFIs) and tents from pre-positioned stocks and *Partner National Societies (PNS)*. The MRC also provided psychosocial *First Aid (PFASS)* to both affected communities and their volunteers. Following the Search & Rescue phase, MRC continued offering *First Aid* in community shelters and distributed essential supplies. Additionally, MRC, with ICRC's technical support, facilitated the *Restoration of Family Links (RFL)*<sup>13</sup>.



Photo 2 - Moroccan Red Crescent volunteer assists with search and rescue activities in September 2023.

#### ▪ *Emergency phase*

During the first year, the response primarily focused on providing emergency assistance through an integrated programmatic approach across three of the most affected provinces: *El-Haouz/Marrakesh*, *Taroudant*, and *Chichaoua*. This primarily materialised through sites and emergency WASH response complemented by in-kind relief distributions. The main objectives being to improve the safety of the shelter sites and provide essential health and hygiene items, safe water, and secure sanitation facilities for the affected population.

#### *Sites and WASH interventions*

As outlined in the previous report, initial efforts during the response phase focused on site planning and improvements, alongside the establishment of Water, Sanitation, and Hygiene (WASH) infrastructure to support the affected sites. Site planning and improvement activities included measures for reducing fire and flood risks,

<sup>13</sup> See previous publications for more details on the early steps of the response - [Morocco: Earthquake | IFRC](#)

enhancing site conditions (such as drainage, levelling, pathways, and lighting), and providing management support to local and traditional village authorities. These efforts continued until the end of March 2024, after which the focus shifted to procuring kits required for ongoing site planning and improvement work.

Within the WASH intervention, primary activities involved setting up temporary WASH facilities, such as toilets, showers, water points, and incinerators, while integrating Hygiene Promotion and community engagement initiatives. In recent months, WASH teams have maintained existing infrastructure and carried out regular monitoring activities (field visits, monitoring the infrastructures and their use, etc). They have also collaborated with Shelter teams to assess sites, provide WASH infrastructure, and facilitate the installation of *Transitional Shelter Units (TSUs)* within the targeted communities.

#### *Relief distributions*

In addition to those, this immediate relief assistance firstly consisted in distributing essential items for immediate relief such as hygiene items (hygiene kits, sanitary pads, dignity kits), household NFIs (buckets, jerrycans, blankets, kitchen sets) and later food parcels. Most distributions employed a blanket approach, whereby once relief teams identified and assessed a village or community in need in coordination with authorities, the entire population was targeted as recipient of the distributions.<sup>14</sup> The distributions, which mostly took place between December 2023 and September 2024 reached 16 *douars* in *Chichaoua*, 41 *douars* in *Taroudant*, 46 *douars* in *El-Haouz* and 13 schools in *Marrakesh*. Recently 10 *douars* in the newly added province of intervention, *Azilal*, benefitted from food parcels distributions in February and March 2025:

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<sup>14</sup> Some communities received multiple distributions at different times, according to identified needs. See previous publications for more details on the distributions. - [Morocco: Earthquake | IFRC](#)



Photo 3 - Food parcels distribution, Demnate (Azilal province), February 2025

|              | # Villages/douars                    | # Households            | # Individuals             | # Relief items                      |
|--------------|--------------------------------------|-------------------------|---------------------------|-------------------------------------|
| Chichaoua    | 16                                   | 1,045                   | 4,365                     | 19,810                              |
| Taroudant    | 41                                   | 1,937                   | 7,355                     | 21,263                              |
| El-Haouz     | 46                                   | 3,021                   | 12,633                    | 38,091                              |
|              | 1 school                             | 125                     | 500 (students)            | 500                                 |
| Marrakesh    | 12 schools                           | 570                     | 2,487 (students)          | 2,487                               |
| Azilal       | 10                                   | 487                     | 2,750                     | 487                                 |
| <b>TOTAL</b> | <b>113 villages<br/>+ 13 schools</b> | <b>7,185 households</b> | <b>29,590 individuals</b> | <b>82,638 distributed<br/>items</b> |

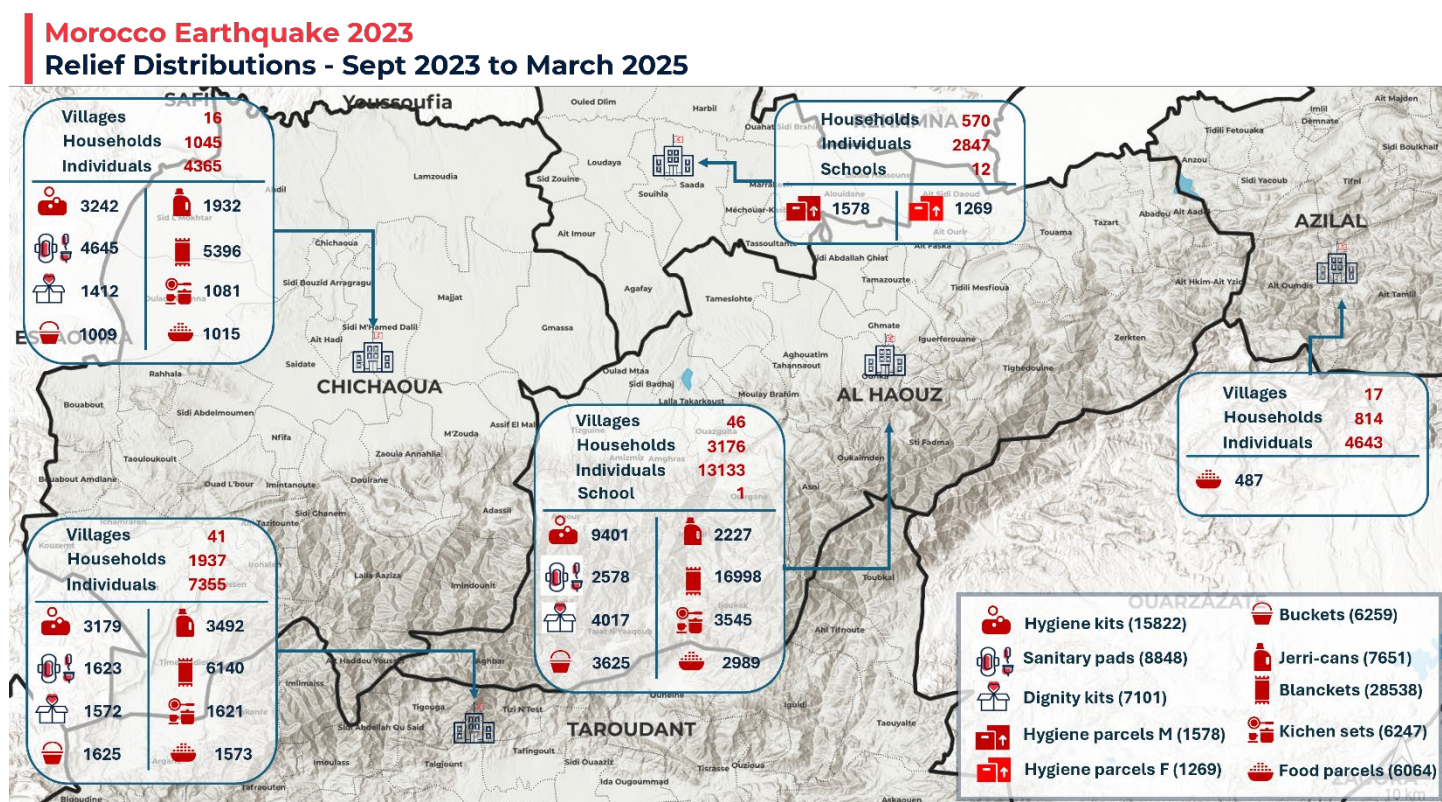
Table 1 - Relief distributions and people reached

Disaggregated figures on the different relief items can be found under the related sectoral interventions<sup>15</sup>. In lieu of in-kind support, the response moved towards cash-based assistance, initiated with a pilot in *Taroudant* in August 2024 (see dedicated *Cash and Voucher Assistance* section for further details).

The 103 villages (*douars*) located in the three first provinces (16 *douars* in *Chichaoua*, 41 in *Taroudant* and 46 in *El-Haouz*) constituted the base of targeted intervention for a major part of the operation until the end of 2024, where the multi-sectoral package of activities has been implemented. Some activities nonetheless were implemented outside of this geographical scope, mainly being the shelter-led installation of *TSU* (*Transitional Shelter Units*) as a

<sup>15</sup> Up until summer 2024, the mission benefitted from successive Relief Coordinators dedicated to the emergency distributions. Since then and with the majority of in-kind distributions seeing completion, the mission no longer has dedicated staff. Consequently, the relief items have been reassigned under their relevant operational sector, e.g. Shelter and NFI household's items under shelter, health and hygiene kits under WASH, food parcels under Food Security and Livelihoods.

support to the Ministry of Education. Recently, new *douars* have been integrated in the response (see below section 'Areas of intervention and beneficiaries' for further details).



Map 1- Relief Distributions – Dec. 2023 to March 2025

#### ▪ Early recovery phase (current response)

From the end of summer 2024 onwards, the scope of the intervention evolved towards integrating early recovery programming and addressing longer-term needs. This shift has been reflected in the revision of the Operational Strategy (See Section B. Operational Strategy for more details). In summary, the status of the operational response is now as follows:

#### Shelter

Over the past six months, Shelter interventions have mostly been focusing on the installation of *TSU* (Transitional Shelter Units) in the three targeted provinces. Initially, *TSUs* were solely dedicated to providing shelter solutions for the affected communities. However, the Shelter team followed authorities' prerogatives and new uses of *TSUs* were requested. The first additional need expressed by the authorities was to install *TSU* as temporary classrooms to support the Ministry of Education with the start of the school year in September 2024. In the beginning of 2025, *TSUs* were installed to support the *Ministry of Health* (MoH) and the *Department of Civil Protection*<sup>16</sup>.

<sup>16</sup> Civil Protection: *TSUs* used as sleeping areas for staff and as office spaces; MoH: *TSUs* used as temporary health centre, primarily serving as maternity centre. Further details in the dedicated Shelter intervention section.

In terms of support to reconstruction efforts, a pilot programme in partnership with Miyamoto International, is set to launch a pilot programme in April 2025 in *Taroudant*. This initiative aims to facilitate light to medium earthquake-resistant repairs, conduct detailed damage assessments, and provide technical support to families for reconstruction. It will also tentatively include training for local workers, remediation of temporary settlements, and support for water and sanitation systems. By engaging the community and collaborating with authorities, the programme will enhance shelter and livelihood conditions, offering valuable insights into long-term recovery efforts. In addition, recent developments included the beginning of cash-based shelter programmes to assist communities in reconstructing and repairing their homes.

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

Over the past 18 months, WASH interventions have focused on improving access to essential water resources, and improved hygiene practices alongside the installation of critical infrastructure such as toilets, showers and waste incinerators. Efforts also included hygiene promotion and waste management activities to enhance community well-being. In recent months, the focus has shifted towards planning for the rehabilitation of water sources, supply, and storage systems, with an emphasis on sustainability through the establishment or support of water and sanitation facilities management committees. These initiatives aim to ensure long-term access to safe water and sanitation for affected communities.

#### *Cash and Voucher Assistance (CVA)*

Following the success of the multi-purpose cash pilot in *Taroudant* in July and August 2024, significant advocacy efforts were undertaken to scale up the cash modality across the response and branch operations. By the end of 2024, groundwork was laid for various cash programmes, resulting in the launch of two additional multipurpose cash programmes aiming to support communities cover their basic needs while continuing their efforts towards the reconstruction of their house.

#### *Food Security and Livelihoods (FSL)*

In 2024, a livelihoods study led to the definition of the initial sectoral strategy. In terms of activities, the food parcel distributions across all targeted areas constituted the sole intervention in this sector. With the recent recruitment of a Livelihoods Delegate, field scoping visits were conducted to refine and advance the draft Livelihoods Strategy initiated last year. Recent efforts have focused on assessing community needs to design impactful interventions that complement existing relief operations by fostering resilience. The Livelihoods strategy and action plan are scheduled to be presented for endorsement to the *MRC* management in May 2025.

#### *Disaster Risk Reduction (DRR)*

Since the deployment of a *German Red Cross (GRC)* Disaster Risk Reduction (*DRR*) Delegate in February 2024, coordinated efforts with the *Moroccan Red Crescent (MRC)* and Movement partners have driven the implementation of the Roadmap to Community Resilience (*R2CR*) using the enhanced Vulnerability and Capacity Assessment (*eVCA*) approach. Key milestones include establishing a technical working group, contextualizing the *eVCA* package, and completing cascade training and roll-out field activities with the communities across *Chichaoua*, *El-Haouz*, and *Taroudant* provinces from August 2024 to date. Community-based *DRR* activities are set to expand in the recently added province of *Azilal* early May. Activities also included the provision of risk reduction materials such as emergency boxes and fire extinguishers, along with trainings with communities on their composition and use.

#### *Mental Health and PsychoSocial Support (MHPSS):*

The *MHPSS* intervention was launched in June 2024 with the recruitment of an *MHPSS* Delegate by the *FRC* and later supported by a national *MHPSS* Coordinator (October 2024) and *MHPSS* Officers (January 2025) for branches in *El-*

*Haouz, Taroudant, and Chichaoua.* Volunteer teams were also established to ensure continuity of activities. Field activities began with a pilot in *Taroudant* in October 2024 and expanded to *Chichaoua* and *El-Haouz* in February 2025, covering nine villages. An integrated approach was prioritized, incorporating *MHPSS-PGI* components into community-focused tools and training.

#### *MRC First Aid capacity strengthening (FA):*

The *First Aid* programme officially launched in May 2024, beginning with a review and enhancement of training methodologies to improve quality and impact. The national *First Aid* strategy was revised, and Master Educators were updated with the latest approaches. Training of Trainers (ToT) sessions strengthened branch focal points' capacities to replicate training at the local level, an effort that will continue.

Alongside training, *MRC* is being equipped with resources and a structured framework to integrate *First Aid* into broader operations. Awareness-raising sessions are being conducted for the general public, schools, and affected communities. Institutional capacity-building efforts are also underway to ensure long-term sustainability. Additionally, the plan aims to increase recognition of *MRC's First Aid* programmes by engaging the private sector and enhancing visibility among the public.

#### *Community-Based Health (CBH):*

The intervention supported by the *German Red Cross* focuses on raising awareness about health in targeted communities and schools through door-to-door campaigns and group outreach activities. To support these efforts, *Moroccan Red Crescent (MRC)* staff and volunteers receive training on approaches and topics related to Disease Prevention and Health Promotion. Additionally, Community Committees will be established to foster community-based health interventions, guided by *eVCA* findings and community feedback.

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

Over the past nine months, significant progress has been made following the arrival of a dedicated *PGI* Delegate in September 2024 and subsequently of an *MRC National PGI Coordinator* in March 2025. The activities firstly focus on building *PGI* capacity in staff, volunteers and leadership in operational branches and beyond, embedding *PGI* into policies and processes, and ensuring effective implementation with trained staff and clear coordination. Activities like establishing safe spaces and creating referral pathways are planned to help addressing the needs of marginalized groups.

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

Since the beginning of the response, the *Moroccan Red Crescent (MRC)* has embedded Community Engagement and Accountability (*CEA*) into its operations, ensuring that the voices and needs of affected communities are both heard and addressed. Over the past 18 months, *CEA* principles have been integrated across Relief, Shelter, WASH, Disaster Risk Reduction (*DRR*), health, and Cash and Voucher Assistance (*CVA*) programmes. The *MRC CEA* team has grown to include four officers, four assistants, and a national coordinator, with support from the *IFRC CEA* coordinator. Collaborating closely with *MRC* leadership, the team has worked to institutionalize *CEA*, train volunteers, bridge training gaps, and strengthen communication and participation with communities. Current efforts continue to focus on deepening *CEA* integration within *MRC* processes and enhancing feedback mechanisms to better serve those affected.

#### *Enabling approaches*

Alongside the operational response, extensive efforts have been made behind the scenes to support the *Moroccan Red Crescent (MRC)* and ensure the effective functioning of the response. Key advancements have been achieved across Secretariat, support, and membership services, including *National Society Development (NSD)*, Human

Resources (HR), Supply Chain Management (SCM), Finance and Administration, Information Management (IM), Planning, Monitoring, Evaluation, and Reporting (PMER), Strategic Partnerships and Resource Mobilization (SPRM), Operations Management and Coordination. These departments have played a critical role in facilitating the execution of operations presented in this report.

#### ▪ *Areas of intervention and beneficiaries*

Beyond the initially targeted areas outlined in the relief distributions table (*Table 1 - Relief distributions and people reached*), where the 103 *douars* were benefitting from the same package of assistance, the scope of activities has expanded to encompass a larger number of locations and beneficiaries. The response has evolved into a more heterogeneous landscape, where some of the original locations benefited from a comprehensive multi-sectoral package of assistance. Meanwhile, upon specific requests from authorities, other *douars* received as hoc interventions such as *Transitional Shelter Units (TSUs)* for the *Department of Education*, cash assistance, *First Aid* awareness sessions, WASH initiatives for schools, etc. While some of these *douars* are planned to be fully integrated into the multi-assistance approach, others will continue to receive one-off support as necessary. The *Moroccan Red Crescent (MRC)* has remained committed to addressing the evolving needs of affected communities as they arise, provided that operational capacity allows. This adaptability reflects the *MRC's* intention to respond effectively to the shifting priorities and circumstances within the affected regions.

|                           | # Communes | # Villages/ <i>douars</i> | # Households  | # Individuals |
|---------------------------|------------|---------------------------|---------------|---------------|
| <i>Chichaoua</i>          | 21         | 93 (26 + 67)              | 2'355         | 9'421         |
| <i>Taroudant</i>          | 7          | 45 <sup>17</sup>          | 2'126         | 8'075         |
| <i>El-Haouz/Marrakesh</i> | 28         | 106 (46 + 60)             | 4'817         | 19'266        |
| <i>Azilal</i>             | 2          | 20 (17 + 3) <sup>18</sup> | 814           | 4'643         |
| <b>TOTAL</b>              | <b>58</b>  | <b>264 (134 + 127)</b>    | <b>10'112</b> | <b>41'404</b> |

*Table 2 - Areas of intervention and beneficiaries*

The table above reflects the reached locations and beneficiaries thus far, grounded in the method of counting all residents of the *douars* when those *douars* were reached with multi-sectoral package of assistance (first figure in the brackets), to which are added the *douars* and beneficiaries reached through specific activities outside of those initial *douars* (second figure in the brackets), thus preventing double-counting of the same individuals.

#### *Chichaoua*

In *Chichaoua*, the initial areas of intervention benefitting from the multisectoral package of assistance are spread over 2 communes (Adassil and Imindounit) and 17 villages.

Overtime, additional locations were reached and cover now a total of 93 *douars* across 21 communes through the following assistance<sup>19</sup>: 17 villages targeted with full package assistance (depending on the needs), 9 villages added to targeted with *MPCA* but aimed at being targeted with other support (bringing to total of villages for the multi-sectoral approach to 26), 76 villages targeted for the installation of *TSUs* in schools, 11 villages targeted by WASH in school.

#### *Taroudant*

In *Taroudant*, the response has reached 7 communes (*Ida Ougmad, Imoulass, Oneine, Tafingoult, Talgjount, Taroudant, Tizi N'tast*) and 41 *douars* and are the initial targeted areas of responsibility in which multi-sectoral packages (shelter,

<sup>17</sup> Including 4 villages with ongoing registration for beneficiaries but not yet reached with the activity.

<sup>18</sup> Including 7 villages with ongoing registration for beneficiaries but not yet reached with the activity

<sup>19</sup> Some villages are included in several types of support.

wash, CEA, PGI, MHPSS, FA, CVA, DRR, Community health) of assistance are delivered. The targeted scope is currently under review for expansion with CVA, Shelter and WASH activities.

In the upcoming months, 1 additional douar is targeted in *Oneine* commune for the Miyamoto repairs pilot; 130 additional *douars* in 12 additional communes are targeted by Shelter for the Cash for repairs project which will start in April 2025.; 50 new *douars* in 13 communes are targeted for Shelter and WASH activities with the Department of Education (DoE).

#### *El-Haouz/Marrakesh*

In *El-Haouz* province, a multisectoral package is delivered in the same 46 *douars* located within 7 communes (*Ijoukak*, *Talat N'Yacoub*, *Siti Fadma*, *Oukaimden*, *Aghbar*, *Imgdal*, and *Azgour*). In addition, Shelter and CVA activities have expanded beyond those.

Notably, 52 additional *douars* were reached through the installation of *TSU* supporting the Department of Education (for a total of 60 villages, amongst which 8 were already targeted with previous support); *TSUs* were also installed in two new locations in the centre of the communes (i.e. not in the *douars* – namely *TSU* used by the Ministry of Health in *Talat N'Yacoub* and *TSUs* used by the Civil Protection in *Amizmiz*); a pilot cash-for-shelter intervention is set to take place in 6 *douars* of *Talat N'Yacoub* commune (including 4 *douars* already targeted with previous support), and a CVA program planned in 4 communes (amongst which 3 already targeted – *Azgour* (*already targeted douars*), *Talat N'Yacoub* (*new douars*), *Ijoukak* (*new douars*)- and a new commune, *Ighil*).

#### *Azilal*

In *Azilal* province, 20 *douars* located in two communes, (*Ait Tamlil* and *Ait Oumdis*) are currently targeted under the response. 10 *douars* have been already reached with blanket food distributions, 7 more are being registered and will receive the food parcels in April, and 2 others had *TSUs* (3 in total) installed as classrooms in support of the Department of Education. 1 boarding school was supported with NFI (bunkbeds).

### III. Needs analysis

As presented in the *I. Description of crisis* and *II. Summary of the response* above sections, a year and half after the *El-Haouz* earthquake, government-led progress in reconstruction is steadily advancing, though many families still struggle with its aftermath. Over 15,100 homes, or 60% of the target, have been rebuilt or rehabilitated, and tent numbers have decreased significantly (official figures). Communication from the Moroccan government set the expectation towards reconstruction to reach 80% completion within the two upcoming months. Government financial aid, housing solutions, and reconstruction grants have supported affected families, while construction permits adhere to strict anti-seismic and culturally appropriate standards.

Moroccan government's efforts span multiple sectors. Housing reconstruction has benefited over 33,636 families, with tailored solutions for challenging terrain. Education projects have seen 165 schools rebuilt, with ongoing work on 763 institutions. In health, 42 centres have been upgraded, and rehabilitation is progressing in additional facilities. Agricultural recovery includes livestock repopulation and support for farmers. Road infrastructure, water systems, and commerce initiatives are also being restored, with substantial budgets allocated for these efforts<sup>20</sup>.

The recovery efforts following the *El-Haouz* earthquake reflect substantial progress across key sectors, addressing immediate needs while laying the groundwork for long-term resilience. Although challenges remain, the achievements to date highlight the dedication of all involved stakeholders in improving living conditions and supporting the affected populations. Continued efforts will be crucial to sustain this progress and ensure communities can rebuild their lives effectively.

- *Needs assessment with communities*

Preliminary findings from a multi-sectoral needs assessment conducted by the *MRC* and *IFRC* in February 2025 across targeted communities allowed updated insights into their current situation<sup>21</sup>.

#### *(A) Priority challenges*

When asked about their primary challenges, surveyed households identified the following:

1. **Shelter/NFI:** *lack of a suitable living space/housing* (mentioned by **37%** of respondents – 57% in *Chichaoua*, 27% in *El-Haouz*, 32% in *Taroudant*),
2. **Health:** *lack of access to adequate healthcare* (mentioned by **34%** of respondents – 21% in *Chichaoua*, 43% in *El-Haouz*, 36% in *Taroudant*)
3. **WASH:** *lack of access to enough safe water for drinking* (mentioned by **33%** of respondents – 39% in *Chichaoua*, 26% in *El-Haouz*, 37% in *Taroudant*),
4. **Food security & Livelihoods:** *lack of access to sufficient quantity or quality of food* (mentioned by **32%** of respondents – 33% in *Chichaoua*, 34% in *El-Haouz*, 31% in *Taroudant*),

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<sup>20</sup> [Over 33,600 Families Rebuild Homes After El-Haouz Earthquake](#) [Over 33,600 Families Rebuild Homes After El-Haouz Earthquake](#) (March 2025)

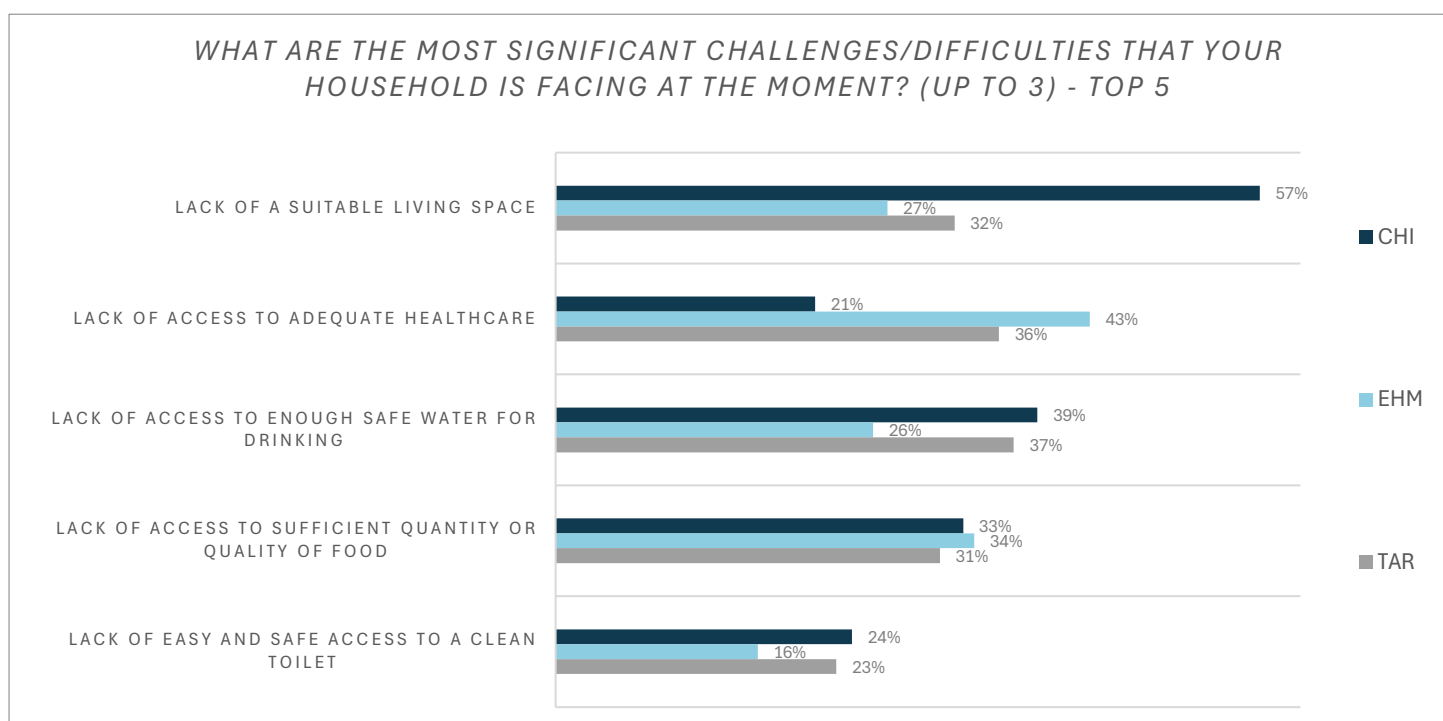
[Rapport de Transparence Maroc sur la reconstruction post-séisme d'El-Haouz](#) (February 2025)

[The Head of Government chairs a meeting of the Interministerial Commission in charge of the deployment of the reconstruction and development program for the areas affected by the El-Haouz earthquake | Head of Government - Kingdom of Morocco](#) (March 2025)

[Ministry of Interior reveals updates on the reconstruction of areas affected by the Al-Hawz earthquake – Kech24: Morocco News – Ksh24 : Moroccan online newspaper](#) (March 2025)

<sup>21</sup> Data collection was conducted through a quantitative household-level survey using a multiple-choice questionnaire. The survey targeted a statistically representative sample at the provincial level across the douars covered by the multi-sectoral assistance package of the earthquake response as of the end of 2024. The final survey report is expected to be presented later in Q2-2025 (See *PMER* dedicated section for further details).

5. **WASH:** *lack of easy and safe access to a clean toilet* (mentioned by **21%** of respondents – 24% in *Chichaoua*, 16% in *El-Haouz*, 23% in *Taroudant*)
6. **WASH:** *lack of soap, water, or suitable washing place* (mentioned by **12%** of respondents – 6% in *Chichaoua*, 13% in *El-Haouz*, 15% in *Taroudant*)
7. **MHPSS:** *Feeling very distressed, upset, sad, worried, scared or angry* (mentioned by **11%** of respondents – 12% in *Chichaoua*, 13% in *El-Haouz*, 8% in *Taroudant*)
8. **Shelter/NFI:** *lack of access to adequate clothing, footwear, bedding, or blankets* (mentioned by **9%** of respondents – 7% in *Chichaoua*, 13% in *El-Haouz*, 7% in *Taroudant*)

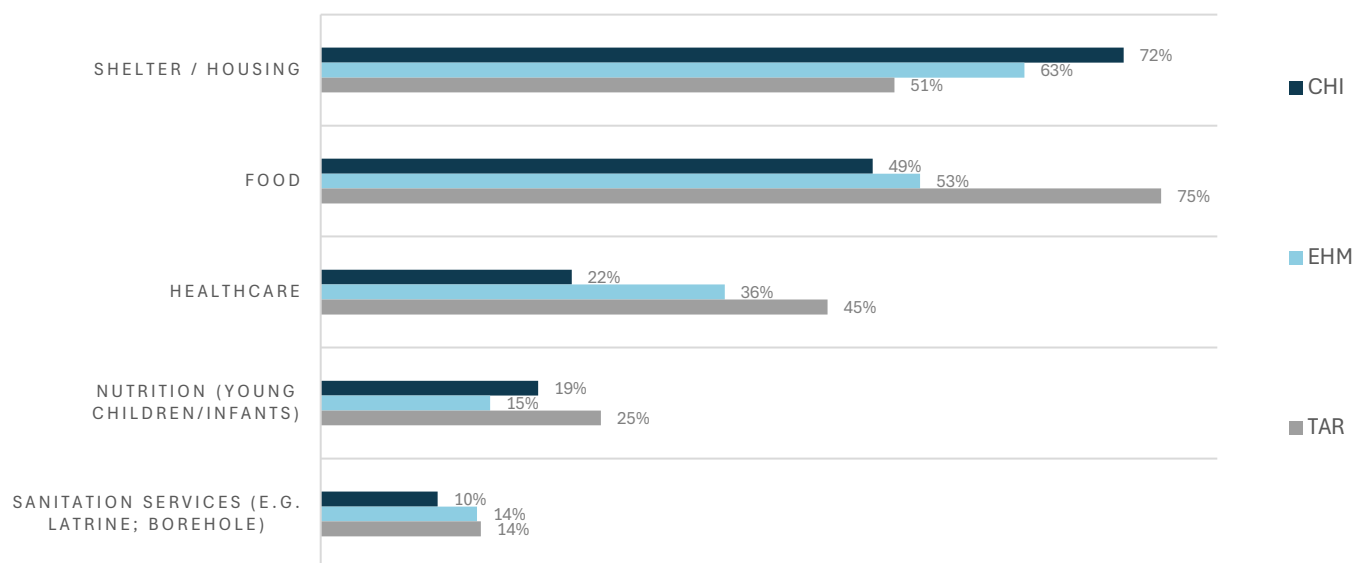


*Graph 1 - Main challenges reported by the communities*

#### *(B) Priority support preferences*

Respondents outlined a range of preferences for humanitarian assistance, with priorities varying across regions. **Shelter, particularly housing**, was the most requested form of support, mentioned by 61% of respondents, with the highest demand in *Chichaoua* (72%) and *El-Haouz* (63%) and, compared to 51% in *Taroudant*. **Food assistance** followed closely, identified by 60% of respondents, with *Taroudant* showing the greatest wish (75%).

WHAT SUPPORT (IF ANY) WOULD YOUR HOUSEHOLD LIKE TO RECEIVE FROM HUMANITARIAN ACTORS TO HELP MANAGE THESE ISSUES/CHALLENGES?  
(UP TO 3) - TOP 5



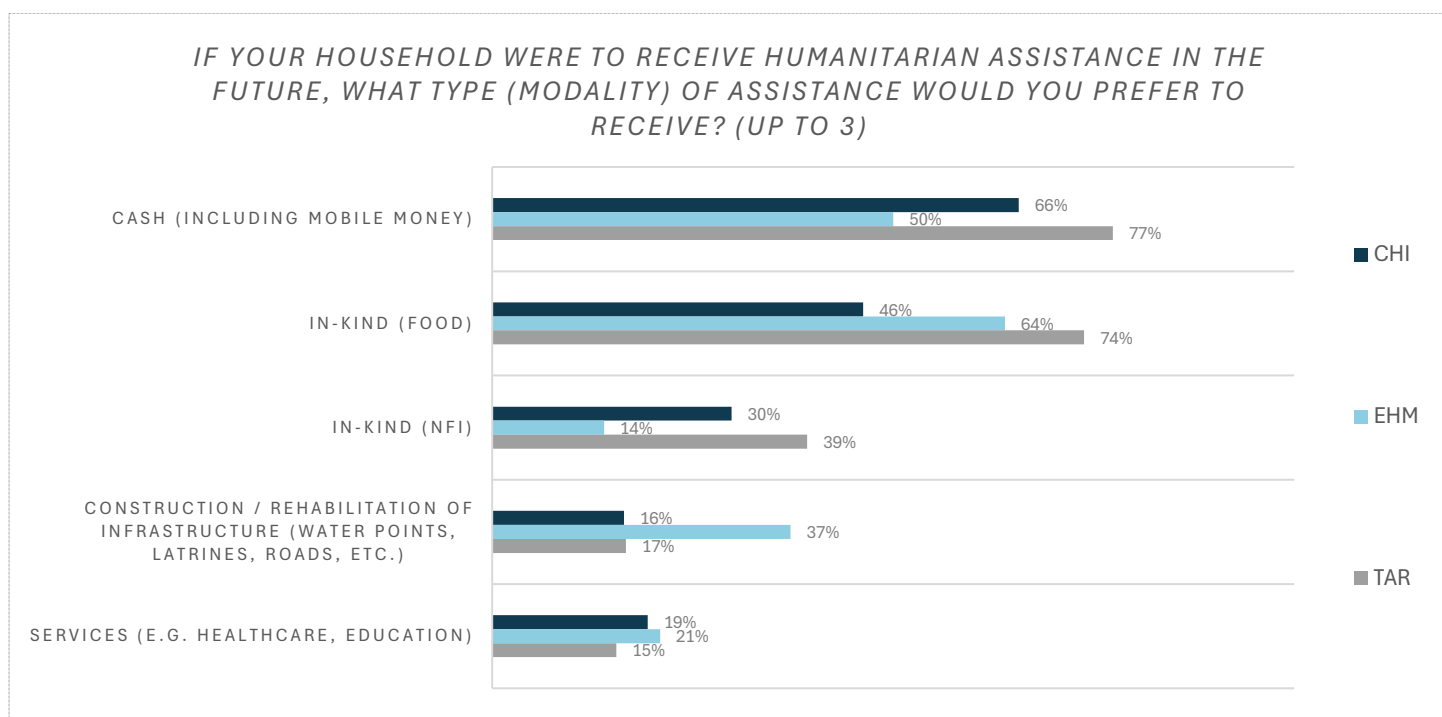
Graph 2 - Main support wishes expressed by the communities

**Healthcare needs** were expressed by 35% of respondents, with significant demand in *Taroudant* (45%) and similar levels in *El-Haouz* (36%). **Nutrition support**, such as specialized food for children and infants, formula milk, and supplements, was mentioned by 20%, with *Taroudant* again showing the highest demand (25%). **Sanitation services**, including latrines and boreholes, were prioritized by 13%, with consistent demand across *El-Haouz* (14%) and *Taroudant* (14%) but slightly lower levels in *Chichaoua* (10%).

**Essential household items** like clothing, blankets, and cooking supplies were highlighted by 10%, with *Taroudant* (14%) and *El-Haouz* (10%) showing higher needs. **Access to drinking water** was mentioned by 10%, with *Chichaoua* showing the greatest need (12%). **Livelihoods support and employment opportunities** were identified as a priority by 8%, with *Taroudant* leading at 11%. **Psychosocial support** was expressed as a need by 5% of respondents, with similar demand across all regions.

### (C) Modality preferences

In addition, respondents expressed clear preferences regarding the modalities of support they wished to receive through humanitarian assistance to address their needs. **Cash assistance**, including mobile money, was identified as the most preferred options by 64% of respondents, with notable variations across regions: 66% in *Chichaoua*, 50% in *El-Haouz*, and 77% in *Taroudant*. This indicates strong support for financial aid as a flexible tool to meet diverse household needs. **In-kind food** comes second, mentioned by 62% of respondents, with higher demand in *Taroudant* (74%) and *El-Haouz* (64%) compared to *Chichaoua* (46%). Non-food items (NFIs) were highlighted by 27% of respondents, with significant interest in *Taroudant* (39%) and slightly lower levels in *Chichaoua* (30%) and *El-Haouz* (14%).



*Graph 3 - Modality of support preferences expressed by the communities*

Other priorities included construction and infrastructure rehabilitation, such as water points, latrines, housing, and roads, which were mentioned by 24% of respondents. Support in this area was most needed in *El-Haouz* (37%) compared to *Chichaoua* (16%) and *Taroudant* (17%). Finally, services such as healthcare and education were identified by 19% of respondents, with fairly consistent demand across regions: 19% in *Chichaoua*, 21% in *El-Haouz*, and 15% in *Taroudant*.

### *Conclusions*

These findings support the ongoing necessity for humanitarian assistance to address both immediate and long-term needs through tailored interventions that align with the priorities and preferences of the affected communities. While significant progress has been made in meeting emergency needs in the aftermath of the earthquake, many communities still require substantial support to advance their recovery.

A critical priority remains in enabling families to rebuild their homes and ensuring they can sustain access to basic necessities, including water, sanitation, food, healthcare, and school access for children. At the same time, it remains essential to focus on strengthening community resilience and improving preparedness to address future risks, as well as provide solutions to improve communities' psychosocial well-being.

These acknowledgments and objectives are aligned with the current response and the overarching goal of the Revised Operational Strategy of the Emergency Appeal, which seeks to empower the *Moroccan Red Crescent (MRC)* to address the needs of communities affected by the earthquake, enhance their resilience to future disasters, and strengthen the *National Society's* capacity to deliver accountable and effective humanitarian services.

## IV. Operational risk assessment

The security situation in Morocco is generally stable. However, the risk of natural disasters such as earthquakes, droughts, floods, cold/heat waves provoked by extreme weather conditions is prevalent in different regions of the country.

A risk management framework has been in place since the beginning of the operation and is being regularly updated by the *IFRC* delegation.

| Risk                                                                                                                                                                                                           | Likelihood    | Impact           | Mitigation Steps                                                                                                                                                                                                                                                                                                                                                                                                                      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Possibility of secondary large-scale disaster in affected areas, or elsewhere in the country (cold waves, heat waves, floods, droughts, earthquakes, tsunamis etc) affecting the delivery of ongoing operation | <b>Medium</b> | <b>Very High</b> | <p>Preparedness efforts to increase MRC's and IFRC's readiness to respond to disasters.</p> <p>Close monitoring of weather forecast and contextual situation.</p> <p>Contingency planning for emergency response assistance.</p> <p>Regular review of operational planning based on anticipation for the season ahead.</p> <p>Support <i>MRC</i> to strengthen its work on defining its auxiliary role and Disaster Law strategy.</p> |
| Lack of Legal Status in country for IFRC resulting administrative challenges                                                                                                                                   | <b>High</b>   | <b>High</b>      | <p>Ongoing discussion towards Legal Status Agreement with the Kingdom of Morocco for IFRC.</p> <p>Regular engagement with different level of Government and different Ministries to showcase the work of MRC and support provided by the IFRC network.</p> <p>Delegation receiving support from the IFRC Geneva legal team.</p>                                                                                                       |

|                                                                                                                                                                                                                                                                                                               |                  |               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|---------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Lack of attractiveness of <i>IFRC</i> for suppliers due to complex procurement processes and payment conditions, resulting in difficulty identifying local suppliers and increased unattractive proposed offers to the local market. This leads to limited local suppliers wanting to work with <i>IFRC</i> . | <b>High</b>      | <b>High</b>   | <p>Use a country-wide approach to local procurement rather than a localised one.</p> <p>Propose to adjust and contextualise procurement processes to better match the practices in country.</p> <p>Ensure quality assurance of products by <i>IFRC</i> technical experts to meet the highest available standards.</p> <p>Coordination with <i>MRC</i> and other <i>PNS</i> to facilitate the acquisition of products based on their respective procedures.</p>                                                                     |
| Limited multilateral coordination systems for humanitarian actors and low awareness of interventions by non-traditional organizations.                                                                                                                                                                        | <b>Medium</b>    | <b>Medium</b> | <p>Conduct bilateral coordination with government representatives at all levels as well as with UN agencies and other non-traditional organizations at field level.</p> <p>Continue Humanitarian Diplomacy with the Government of Morocco.</p> <p>Engage with Grand Atlas Development Agency established to coordinate the Earthquake response even though not fully operational yet.</p> <p>Attend all informal coordination meeting and ensure consistent representation of <i>MRC</i> and <i>IFRC</i> in coordination fora.</p> |
| Limited capacity to meet earmarked partner requirements on funding pledges due to initial delays on implementation and overlapping or sometimes conflicting priorities                                                                                                                                        | <b>Very High</b> | <b>Medium</b> | <p>Scale up operation's human and logistical resources to increase delivery pace.</p> <p>Continue advocacy with partners on importance of unearmarked contributions.</p> <p>Request for extensions of pledge timeframes and flexibility from donors.</p>                                                                                                                                                                                                                                                                           |
| Limited systems are in place for safeguarding                                                                                                                                                                                                                                                                 | <b>High</b>      | <b>High</b>   | <p>Support <i>MRC</i> in the development and rollout of <i>PGI</i> and <i>PSEA</i> policies.</p> <p>Set up safeguarding systems, and appropriate, safe and confidential referral mechanisms for protection cases.</p> <p>Put in place internal and community reporting, complaint, and feedback mechanisms together with the <i>CEA</i> team. A confidential channel for reporting via a hotline is being established.</p>                                                                                                         |

|                                                                                            |             |               |                                                                                                                                                                                                     |
|--------------------------------------------------------------------------------------------|-------------|---------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                                                                            |             |               | Regular trainings conducted for the IFRC and MRC teams on the Code of Conduct, Safeguarding, PSEA.                                                                                                  |
| Shift to ERP for IFRC financial management system leading to delays in financial reporting | <b>High</b> | <b>Medium</b> | <p>Maintain close communication with donors to inform of delays in financial reporting.</p> <p>Develop manual parallel systems for tracking of expenditures to ensure minimum budget follow up.</p> |

*Table 3 - Risk matrix*

## B. OPERATIONAL STRATEGY

### Update on the strategy

Since the launch of the Morocco Earthquake [Emergency Appeal](#) in September 2023, two operational strategies have been developed and published. The [first Operational Strategy \(OS\)](#), released in November 2023 shortly after the onset of the crisis, focused on delivering a multisectoral package of emergency assistance in the three most affected provinces: *Chichaoua*, *Taroudant*, and *El-Haouz*. This assistance was mainly characterised by the provision of relief in-kind distributions, emergency shelter and emergency WASH interventions and CEA as a cross-cutting approach.

By summer 2024, as the planned in-kind relief distributions across all targeted provinces were nearing completion, the scope of the operation expanded to incorporate greater efforts towards resilience building and early recovery. This shift from emergency assistance to early recovery led to the revision of the Operational Strategy. The process concluded with the publication of a [Revised Operational Strategy \(ROS\)](#) in November 2024, one year after the initial strategy. This revised strategy introduced additional sectors and activities, addressing pre-existing or emerging needs, and integrated them into the response plan.

**Over the past nine months, the operation has experienced a notable increase in both scale and scope.** In addition to reinforcing some of the original sectors such as Shelter and WASH and ensuring their focus progressed towards support to the reconstruction, new sectors of intervention have been launched or further developed. These notably include Community Based Risk Reduction and Health prevention initiatives, Mental Health and Psychosocial Support (*MHPSS*), *First Aid* strengthening interventions, the scaling-up of Cash programming, further mainstreaming of Protection, Gender, and Inclusion (*PGI*), the emergence of Livelihoods programming. The Revised Operational Strategy also outlines the geographical expansion of the operation, which now includes the province of *Azilal*, in addition to *Chichaoua*, *Taroudant*, and *El-Haouz/Marrakesh*. *Azilal*, which experienced damage in two communes, has the highest pre-existing poverty levels in the country, making it a priority for extended recovery activities. This decision was enabled thanks to strengthened response capacities of the *Moroccan Red Crescent (MRC)* and donor support.

Outside of the operational interventions, a primary objective of the Red Cross and Red Crescent (RCRC) partners within the response is to enable the *MRC* to become disaster-ready, well-functioning, and well-positioned to support populations facing disasters or other humanitarian emergencies in the future. The *IFRC*, *MRC*, and partners are collectively dedicating efforts to these aspects. With the support of the *IFRC* and *Partner National Societies (PNSs)*, the *MRC* is simultaneously developing plans to strengthen the *National Society Development (NSD)* component of the response. This focus includes logistics, human resources, volunteer management, digitalization, communication, and the visibility and dissemination of the Movement's principles. 18 months after the earthquake, a stronger institutional perspective has emerged, aiming to foster greater convergence and a unified approach to addressing the *National Society* support needs at both operational and institutional levels.

The detailed operational report presented below outlines the achievements across the (I) Strategic sectors of intervention, (II) Enabling approaches and (III) Secretariat services as defined in the Revised Operational Strategy, which will continue to guide the response throughout its remaining course.

The *MRC* together with its partners envisage a continued response operation into 2026 due to the initial delays, the time it has taken to scale up, and the vast ambition of the operational strategy. As such, revised operational planning and a budget revision exercise are to be conducted by September 2025, and will be released before the end of 2025.

This revised response plan will be integrated under the *Unified Plan 2025-2027*. Further details on this process will be shared with partners in a timely manner.

Both Operational Strategy documents can be found at the following:

- [Initial Operational Strategy](#), IFRC, November 2023.
- [Revised Operational Strategy](#), IFRC, November 2024.

## C. DETAILED OPERATIONAL REPORT

### I. STRATEGIC SECTORS OF INTERVENTION

|                                                                                   |                                                                                                                                                                                                                                                                                                                                                                |                                    |  |
|-----------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|--|
|  | <b>SHELTER, HOUSING AND SETTLEMENTS</b>                                                                                                                                                                                                                                                                                                                        | People reached: 32'623 individuals |  |
| Objectives:                                                                       | 1. Emergency phase: affected communities restore and strengthen their safety and dignity through emergency shelter and household item provision<br>2. Early recovery: affected communities have safe and dignified mid-term transitional shelter solutions<br>3. Recovery: affected communities have access to a durable solution of repair and reconstruction |                                    |  |
| Key indicators                                                                    |                                                                                                                                                                                                                                                                                                                                                                |                                    |  |
| Indicator                                                                         | Actual                                                                                                                                                                                                                                                                                                                                                         | Target                             |  |
| # Number of NFI-Household-Shelter items distributed                               | 38,948 <sup>22</sup>                                                                                                                                                                                                                                                                                                                                           | /                                  |  |
| # Number of households provided with essential NFI-Household-Shelter items        | 7,638 <sup>23</sup>                                                                                                                                                                                                                                                                                                                                            | 5,000                              |  |
| # Total number of TSUs installed <sup>24</sup>                                    | 877                                                                                                                                                                                                                                                                                                                                                            | 1,494                              |  |
| # Number of winterised tents distributed                                          | 61                                                                                                                                                                                                                                                                                                                                                             | 1,300                              |  |
| # Number of MRC staff and volunteers trained on Shelter activities                | 130                                                                                                                                                                                                                                                                                                                                                            | 180                                |  |
| # Number of households provided with assistance for repairs or construction       | Ongoing                                                                                                                                                                                                                                                                                                                                                        | 1,000                              |  |

<sup>22</sup> 29,034 Blankets, 6,247 Kitchen Sets, 3,562 Tarps, Heaters 105

<sup>23</sup> Total households registered as NFI distributions' beneficiaries across the three branches.

<sup>24</sup> All uses combined: to communities, to Department of Education, as communal spaces, to Ministry of Health

## (A) SHELTER/NFI RELIEF DISTRIBUTIONS

### (A.1) Distribute essential NFI-Household-Shelter items (blankets, kitchen sets, mattresses, tarps, heaters, etc)

From early in the response, communities have been provided with NFI-household essential items, benefiting 115 villages across the three initially targeted provinces. These initiatives played a crucial role in improving the daily living conditions and dignity of the affected populations. The tables below provide detailed figures of distributed items by branch during both the emergency and transitional phases.

- *Non-Food and essential household items*

|                  | Blankets      | Kitchen Sets |
|------------------|---------------|--------------|
| <i>Chichaoua</i> | 5,396         | 1,081        |
| <i>Taroudant</i> | 6,140         | 1,621        |
| <i>El-Haouz</i>  | 16,998        | 3,545        |
| <i>Marrakesh</i> | 500           | -            |
| <i>Azilal</i>    | -             | -            |
| <b>TOTAL</b>     | <b>29,034</b> | <b>6,247</b> |

*Table 4 - Non-Food and essential household items distributed*

Blankets and tarps have been crucial for protecting people as temperatures in higher elevations dropped below zero at night, while kitchen sets distributed early on enabled families to cope with the loss of cooking items post-earthquake. No distribution of *non-food items (NFIs)* is planned for *Azilal*, as it is no longer deemed necessary. Only hygiene and dignity kits, accompanied by hygiene promotion activities, are being considered

- *Household-Shelter materials*

|                            | Tarps        | Heaters    | Fans      |
|----------------------------|--------------|------------|-----------|
| <i>Chichaoua</i>           | 1,756        | -          | -         |
| <i>Taroudant</i>           | 1,036        | 90         | -         |
| <i>El-Haouz /Marrakesh</i> | 770          | 15         | 15        |
| <i>Azilal</i>              | -            | -          | -         |
| <b>TOTAL</b>               | <b>3,562</b> | <b>105</b> | <b>15</b> |

*Table 5 - Household-Shelter materials distributed*

To improve living conditions, tarps were distributed as part of the *non-food item (NFI) kits* to provide families with proper insulation. Additionally, heaters and fans were purchased to address seasonal temperature challenges. The distribution of heaters was carefully coordinated with community focal points and local authorities to ensure safety and proper usage. The heaters, designed as electrical oil radiators, required reliable access to electricity and safe electrical networks. As a result, efforts were focused on enhancing the electricity infrastructure, and 105 heaters were successfully distributed to families meeting the set criteria.

Fans were provided to improve ventilation and reduce heat during sunny days. Both heaters and fans were primarily allocated for *Transitional Shelter Units (TSUs)* and premises used by authorities and communities. These

items are part of a broader adaptability approach, which also includes measures like installing second doors in *TSUs* to enhance ventilation, adding wooden flooring, and implementing full insulation where feasible. The overarching goal remains to ensure adequate and safe temporary shelter for families until they can transition to permanent housing.

## (B) TRANSITIONAL SHELTER SUPPORT (WINTERISED TENTS, *TSUs* AND MATERIALS TO IMPROVE BOTH)

### (B.1) Provide improved/winterized tents

In early 2024, the *MRC*, supported by the *German Red Cross (GRC)* and *IFRC*, procured 1,000 winterized tents as a temporary shelter solution. So far, 33 of these tents (3 in *Chichaoua* and 30 in *Taroudant*) were distributed in 2024, along with wooden flooring. Initially, winterized tents were intended to complement *TSUs* or replace damaged tents. However, authorities limited tent distribution to families who had already received one, prompting *MRC* to focus on installing *TSUs* from *Better Shelter Organization*.

In 2025, *MRC* distributed 28 winterized tents in *Chichaoua* to be used as kitchen space within, those tents were provided with 1 *Oriented Strand Board (OSB)* floor kit (wood), 1 Floor kit installation (Tools and nails), 1 Tent repair Kit per each winterized tent provided, in addition to community tool kits that were used for the preparation of the land where the tent is being installed. *MRC* shelter team did the demonstration of the installation of tents and let the community manage the work while support and monitoring are being provided. A total of 61 winterized tents have been provided; the remaining quantity (1,239 tents) will be available in stock to cover sudden needs and emergencies.

### (B.2) Provide materials for repairing and winterizing tents

In January 2024, tarpaulin distributions were removed from the general relief package and have been more specifically used to assist villages needing tent repairs and reinforcement. Communal awareness sessions were conducted to help households improve their tents and temporary shelters.

- *Tent repair kits, tent floor kits and tool kits*

Across the three provinces, a total of 364 households received floor kits designed to protect against cold and damp conditions. These kits consisted of plywood sheets, pallets, and a floor tool kit that included essential items such as a hammer, a saw, and nails. Distribution was accompanied by installation instructions provided during sessions led by trained *Moroccan Red Crescent (MRC)* volunteers. The flooring modality was later updated to include wood lumber and oriented strand board (*OSB*), both readily available in the warehouse. As part of this improved approach, 28 winterized tents were equipped with the updated flooring along with tent repair kits and floor tool kits. In addition to the winterised tents, this wood flooring purchased by the *German Red Cross (GRC)* has also been used to improve the *Transitional Shelter Units (TSUs)*, enabling the installation of elevated flooring that improves living conditions significantly. To date, 94 *TSUs* have been upgraded using kits composed of *OSB* and wooden slats, ensuring better insulation and protection.

In terms of tent repair kits, 356 kits have been distributed to support families based on their specific needs. The first phase was carried out at the household level in *Chichaoua* during the emergency response, benefiting 249 households with 246 kits. In March 2025, the *MRC* Shelter team provided 110 tent repair kits to 817 families across 21 villages in *Taroudant*, integrating this intervention with ongoing Disaster Risk Reduction (*DRR*) activities. The tent

repair kits were distributed alongside Emergency Response kits provided by the *DRR* team. Additionally, 196 shelter tool kits were delivered to 1,600 households across 40 villages in Taroudant, further supporting families in their recovery efforts.

### (B.3) Install *Transitional Shelter Units (TSUs)*

Over the past six months, the *Transitional Shelter Units (TSUs)* have demonstrated significant progress in field implementation. The *Moroccan Red Crescent (MRC)* has gained even greater expertise in planning and execution. Despite this progress, the team has encountered challenges and restrictions in certain provinces, particularly regarding the installation of additional *TSUs* or their enhancement to withstand the harsh and unpredictable environment.

Communities have been able to utilize their *TSUs* for extended periods due to prolonged reconstruction efforts, which have been marked by delays and increased resource demands. Consequently, the *MRC* has seen a surge in requests from the *Ministry of Health (MoH)*, the *Department of Education (DoE)*, *Civil Protection*, and other entities seeking additional shelter support.

With the backing of the *International Federation of Red Cross and Red Crescent Societies (IFRC)* and in close coordination with local authorities and community leaders, the *MRC* has consistently ensured that the project extends beyond a single intervention, addressing temporary needs in a sustainable manner. This initiative has been recognized as one of the most effective forms of assistance provided to communities and government agencies, delivering immediate support from the outset. The *MRC* Shelter team has successfully adapted to diverse contexts and challenges, gaining extensive expertise in installation, distribution, planning, ownership certification, monitoring and tracking tools, insulation, wood flooring installation, and the provision of critical adaptability components—including heaters, fans, additional doors, and electrical cords.



Photo 4 - TSU insulation and flooring in Chichaoua (November 2024)

| Transitional Shelter Units (TSUs) - Installed |             |                               |            |          |                  |            |
|-----------------------------------------------|-------------|-------------------------------|------------|----------|------------------|------------|
| Provinces                                     | Communities | Communities (Communal Spaces) | DoE        | MoH      | Civil Protection | Total TSUs |
| Chichaoua                                     | 99          | 4                             | 166        | -        | -                | 269        |
| Taroudant                                     | 297         | 1                             | -          | -        | -                | 298        |
| El-Haouz/Marrakesh                            | 6           | 2                             | 281        | 7        | 11               | 307        |
| Azilal                                        | -           | -                             | 3          | -        | -                | 3          |
| <b>TOTAL</b>                                  | <b>402</b>  | <b>7</b>                      | <b>450</b> | <b>7</b> | <b>11</b>        | <b>877</b> |

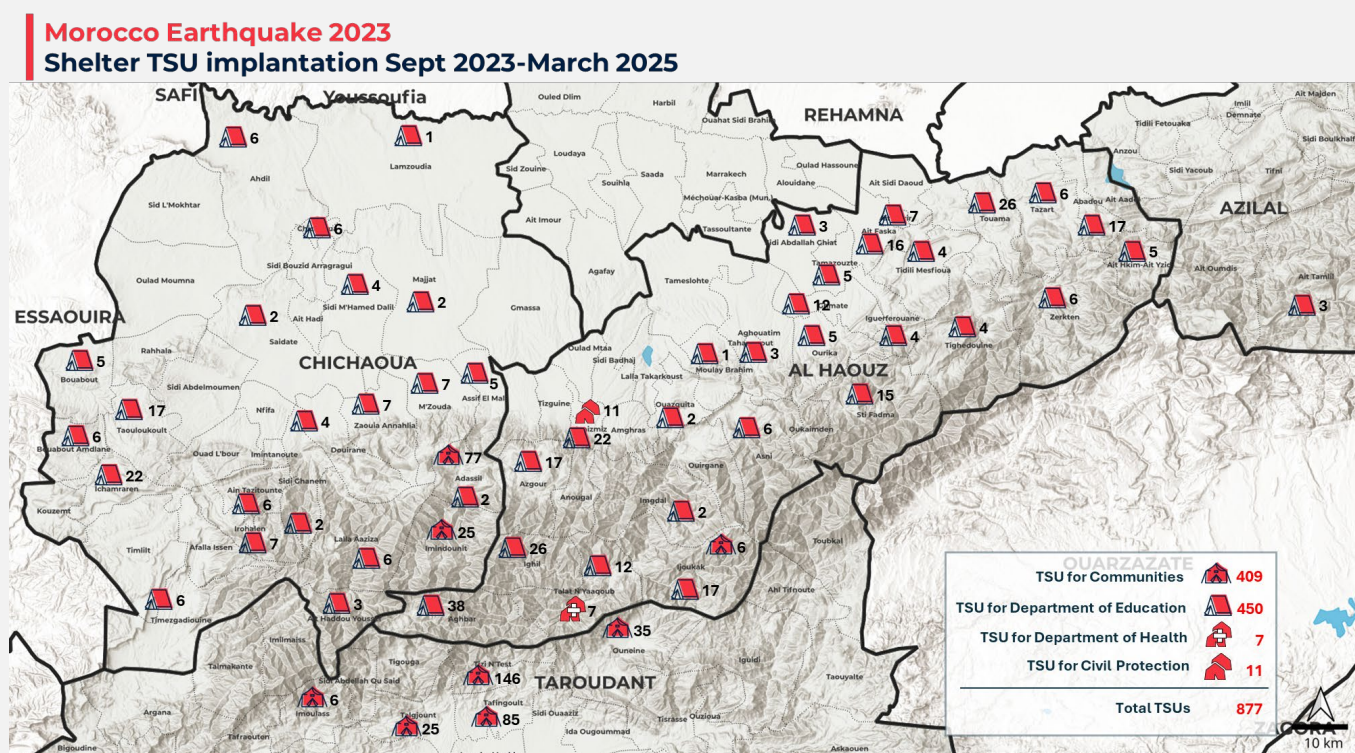
Table 6 - TSU installed (all uses combined)

In response to the growing demand, the team has proactively planned for the acquisition of additional *TSUs* to ensure timely support for emerging needs. As a result, 494 *TSUs* have been procured and delivered to Morocco. To date, 877 units have been installed, and based on current estimations and official commitments, the remaining available *TSUs* have been strategically allocated to the different provinces based on potential needs.

- *TSU (all uses combined)*

|                      | # TSUs (all) | # Villages | # Households  | # Individuals <sup>25</sup> |
|----------------------|--------------|------------|---------------|-----------------------------|
| Chichaoua            | 269          | 87         | 2'564         | 2'880                       |
| Taroudant            | 298          | 21         | 296           | 1'050                       |
| El-Haouz / Marrakesh | 307          | 103        | 7'421         | 18'633                      |
| Azilal               | 3            | 1          | 54            | 54                          |
| <b>TOTAL</b>         | <b>877</b>   | <b>212</b> | <b>10'335</b> | <b>22'617</b>               |

Table 7 - TSUs installed (all used combined) II



Map 2 - Transitional Shelter Units (TSUs) installed, per type of use

MRC observed various approaches across its branches but worked diligently to maintain harmonization among programmes and replicate good practices from different provinces.

The **El-Haouz** branch continued to provide assistance to the *Department of Education* by installing TSUs as temporary units until school reconstruction is completed. In coordination with the *Ministry of Health* and local authorities, MRC successfully implemented a project for a temporary health centre in *Talat N'Yakoub*, primarily serving as a maternity centre. This included installing TSUs with necessary insulation work, wood flooring kits, and additional doors for each unit.

<sup>25</sup> For affected communities benefitting from TSU-Department of Education, a generic number of student estimates per classroom is based on the size of the classroom (adjustable size of TSUs). In case of a TSU used as a living space for a teacher, only the teacher is counted as one individual and one household.

Additionally, the Civil Protection requested support due to the demolition and reconstruction of their main centre. Following the required assessments, *MRC* established a temporary centre in *Amizmiz*, with *TSUs* designated as sleeping areas for staff and office spaces. All units were properly insulated and delivered to the Civil Protection.

In the first quarter of 2025, approval was granted to support affected communities. *MRC* closely coordinated with authorities, who provided a list of families. Teams conducted initial assessments in villages, informing communities about the required works to install *TSUs*. This intervention is expected to provide 500 *TSUs* to affected communities in *El-Haouz*, enabling families to transition from emergency tents received during the early stages of the crisis. These tents are increasingly vulnerable to rain, wind, and floods. Authorities prioritized families most in need of temporary safe housing, considering the time required for implementation. *MRC*, with support from *IFRC*, is conducting thorough assessments, planning, and mobilizing resources to ensure smooth implementation and transition.

In ***Chichaoua***, efforts centred on supporting communities and assisting the *Department of Education* in a manner similar to the ongoing project in *El-Haouz*. *TSUs* were provided and installed as temporary classrooms and living spaces for teachers. The team swiftly adapted to urgent requests while authorities limited additional efforts in community interventions to encourage families to focus on reconstructing their houses amid other challenges.



Photo 5 - *TSU* serving as a classroom in *Chichaoua*

In ***Taroudant***, *MRC* supported affected communities, nearly completing planned figures. However, authorities restricted further progress to focus on reconstruction and relocation to permanent shelters. Meanwhile, the *MRC* team worked closely with local authorities to explore potential solutions for other forms of assistance, including temporary units for governmental entities until reconstruction is completed.

In ***Azilal***, *MRC* installed three *TSUs* to serve as temporary classrooms. This intervention was supported by the experienced *MRC* team from various branches.

The breakdown of the number of *TSUs* installed, along with their respective classifications, is presented in the following tables.

- *TSU for affected communities*

|                             | # <i>TSUs</i><br>(communities) | # Villages | # Households | # Individuals |
|-----------------------------|--------------------------------|------------|--------------|---------------|
| <i>Chichaoua</i>            | 99                             | 9          | 98           | 414           |
| <i>Taroudant</i>            | 297                            | 21         | 296          | 1'050         |
| <i>El-Haouz / Marrakesh</i> | 6                              | 1          | 6            | 14            |
| <i>Azilal</i>               | -                              | -          | -            | -             |
| <b>TOTAL</b>                | <b>402</b>                     | <b>31</b>  | <b>400</b>   | <b>1'478</b>  |

Table 8 - *TSU for communities*

- *TSU for DoE*

|                             | # <i>TSUs</i> (DoE) | # Villages | # Households | # Individuals |
|-----------------------------|---------------------|------------|--------------|---------------|
| <i>Chichaoua</i>            | 166                 | 74         | 2'462        | 2'462         |
| <i>Taroudant</i>            | 0                   | -          | -            | -             |
| <i>El-Haouz / Marrakesh</i> | 281                 | 74         | 3'553        | 3'553         |
| <i>Azilal</i>               | 3                   | 1          | 54           | 54            |
| <b>TOTAL</b>                | <b>450</b>          | <b>149</b> | <b>6'069</b> | <b>6'069</b>  |

Table 9 - *TSU for Department of Education (classrooms and teachers' living spaces)*

- *TSU for MoH*

|                             | # <i>TSUs</i> (MoH) | # Villages | # Households | # Individuals |
|-----------------------------|---------------------|------------|--------------|---------------|
| <i>Chichaoua</i>            | -                   | -          | -            | -             |
| <i>Taroudant</i>            | -                   | -          | -            | -             |
| <i>El-Haouz / Marrakesh</i> | 7                   | 6          | 304          | 1'128         |
| <i>Azilal</i>               |                     |            |              |               |
| <b>TOTAL</b>                | <b>7</b>            | <b>6</b>   | <b>304</b>   | <b>1'128</b>  |

Table 10 - *TSU for Ministry of Health*

- *TSU for Civil Protection*

|                             | # <i>TSUs</i> (Civil Protection) | # Villages | # Households | # Individuals |
|-----------------------------|----------------------------------|------------|--------------|---------------|
| <i>Chichaoua</i>            | -                                | -          | -            | -             |
| <i>Taroudant</i>            | -                                | -          | -            | -             |
| <i>El-Haouz / Marrakesh</i> | 11                               | 1          | 3'460        | 13'840        |
| <i>Azilal</i>               | -                                | -          | -            | -             |
| <b>TOTAL</b>                | <b>11</b>                        | <b>1</b>   | <b>3'460</b> | <b>13'840</b> |

Table 11 - *TSU for Civil Protection*

- *TSU improvements (flooring, insulation, second doors, heaters, fans, etc)*

|                             | Flooring   | Insulation | Second doors | Heaters   | Fans      |
|-----------------------------|------------|------------|--------------|-----------|-----------|
| <i>Chichaoua</i>            | 69         | 42         | 45           | -         | -         |
| <i>Taroudant</i>            | 77         | -          | 246          | -         | -         |
| <i>El-Haouz / Marrakesh</i> | 28         | 30         | 210          | 23        | 15        |
| <i>Azilal</i>               | -          | 0          | 3            | -         | -         |
| <b>TOTAL</b>                | <b>174</b> | <b>72</b>  | <b>504</b>   | <b>23</b> | <b>15</b> |

Table 12 - TSU improvements

The team has contributed to the structural expansion necessary to deliver timely and high-quality assistance. Alternative solutions and training have been provided for insulation, flooring, maintenance, and regular user check-ups. Once the *TSU* is installed, it is handed over to the respective beneficiary along with a certificate of ownership. This assistance will remain ongoing and will be adapted to align with government needs and strategies until a permanent solution is achieved.

## (C) SITE IMPROVEMENT AND DECONGESTION (SHELTER & DRR)

The site improvement and decongestion activities are closely linked with Disaster Risk Reduction (*DRR*) efforts. The distribution of community tool kits, fire extinguishers and related awareness sessions (C.1), along with initiatives for participatory shelter and settlement methods (C.2), are integrated into community-based risk reduction activities co-led by the *German Red Cross*.

### (C.1) Distribution and awareness sessions on site improvement items

As part of the Site Improvement and Decongestion activities, the *MRC* staff and volunteers delivered community-based participatory hazard identification and planning in *Taroudant*, *Chichaoua* and in *El-Haouz*, as described below:

- Community tool kits (including digging and levelling tools, construction tools and personal protective equipment) were provided to 39 villages to facilitate work to reduce risks, improve accessibility and permit the decongestion of the tents.
- Awareness sessions on fire hazards mobilized the community to separate tents to prevent fires from propagating between them.
- Fire extinguishers have been distributed in *Taroudant*, and some were installed on latrine blocs in *Chichaoua*.

At the community level, fire extinguishers have been distributed alongside instruction sessions facilitated by local civil protection teams. These sessions included guidance on the proper use of fire extinguishers and awareness activities aimed at reducing fire-related risks. The Civil Protection has played an integral role in building team capacity and reinforcing the Fire Risk Reduction guidelines developed by the *IFRC* and updated by the Disaster Risk Reduction (*DRR*) sector. In *Chichaoua* and *Taroudant*, the distribution of fire extinguishers and training on their safe use were integrated into Community-Based Risk Reduction activities led by the *German Red Cross*. In other branches, these distributions were conducted as standalone initiatives.

|                  | # Fire extinguishers | # Villages | # Households | # Individuals |
|------------------|----------------------|------------|--------------|---------------|
| <i>Chichaoua</i> | 80                   | 15         | 982          | 4'147         |
| <i>Taroudant</i> | 131                  | 20         | 590          | 2'360         |

|                            |            |           |              |              |
|----------------------------|------------|-----------|--------------|--------------|
| <i>El-Haouz /Marrakesh</i> | 14         | 4         | 151          | 604          |
| <i>Azilal</i>              | -          | -         | -            | -            |
| <b>TOTAL</b>               | <b>225</b> | <b>39</b> | <b>1'723</b> | <b>7'111</b> |

Table 13 - Fire extinguishers distributed

|                            | # Community tool kits | # Villages | # Households | # Individuals |
|----------------------------|-----------------------|------------|--------------|---------------|
| <i>Chichaoua</i>           | 20                    | 9          | 665          | 2'660         |
| <i>Taroudant</i>           | 36                    | 27         | 1'395        | 5'606         |
| <i>El-Haouz /Marrakesh</i> | 2                     | 2          | 167          | 705           |
| <i>Azilal</i>              | -                     | -          | -            | -             |
| <b>TOTAL</b>               | <b>58</b>             | <b>38</b>  | <b>2'227</b> | <b>8'971</b>  |

Table 13 - Community tool kits distributed

## (C.2) Support participatory shelter & settlement approach and awareness

Under this section, MRC/IFRC is exploring for the opportunity to implement the *Participatory Approach for Safe Shelter Awareness (PASSA)* to empower the communities in the post-disaster context, developing sustainable shelter solutions. Activities include community mapping to identify hazards and safe zones, workshops on safe construction practices, and historical profiling of past disasters to understand risks and resilience patterns. Action plans are created collaboratively, with communities taking the lead in disaster preparedness and shelter improvement. Monitoring and evaluation systems are established to ensure progress and adaptability. The approach raises awareness about shelter safety, enhances resilience, and equips communities with tools to implement their own sustainable, culturally sensitive solutions. Outputs include safer shelters, actionable resilience strategies, and strengthened community capacity for disaster risk reduction. *PASSA* bridges gaps between traditional practices and modern safety standards, fostering collaboration and long-term recovery.

This activity is planned to be implemented in coordination with the Disaster Risk Reduction (*DRR*) department. However, it has not yet started, as many villages have not reached the stage where permanent mitigation measures can be considered.

## (D) REPAIR & RECONSTRUCTION SUPPORT

Returning to their pre-earthquake homes and begin repairs or rebuild is a complex process for many vulnerable families. While government authorities have provided financial support to assist families with damaged or destroyed homes, additional support is needed for clearing rubble, conduct safe repairs, securing permits, contracting builders, and overcoming the psychological barrier of seismic danger. In some cases, geotechnical assessments have identified hazards that necessitate resettling to a new area in some cases.

Preliminary findings from the February 2025 baseline survey<sup>26</sup> highlight ongoing shelter challenges among affected communities. Across all targeted areas, 36% of respondents continue to rely on emergency tents as their primary shelter, with *El-Haouz* reporting the highest proportion at 51%. An additional 20% are housed in *Temporary Shelter Units (TSUs)*, while 10% reside in other transitional structures such as containers or portacabins. Meanwhile, 19% of respondents remain in traditional houses that have sustained damage, with regional disparities—30% in

<sup>26</sup> For further details, see dedicated section under PMER - (C.4) Conduct a base/midline survey of operational sector.

*Chichaoua*, 12% in *El-Haouz*, and 15% in *Taroudant*. These findings underscore the need for continued shelter support and longer-term recovery solutions to ensure safe and sustainable housing for affected populations.

The *MRC* is well-positioned to leverage the strength of its volunteers to support families through the next steps of the shelter process. The team is developing a social-technical support programme, which includes a crucial partnership with seismic engineering experts, offering the following support activities:

- Seismic risk and reconstruction information campaigns, providing essential information on understanding earthquake risks, safe repairs, and available government financial support.
- Assistance for families in applying for subsidies, addressing grievances, accessing services, and referrals to organizations that can support them in specific areas
- In addition, *MRC*, with the support of *IFRC*, has been conducting coordination meetings with authorities to support the reconstruction process through the shelter department, where a positive relationship is built and the progress towards a new type of assistance is under development and implementation (in-kind or cash).

#### (D.1) Repair and community-driven reconstruction and improvement of earthquake-resistant local building technologies

*MRC* and *IFRC* maintained the plan to conduct a pilot programme in partnership with Miyamoto International to facilitate light to medium repairs in one community. The programme aims to:

- Conduct detailed damage assessments and provide technical recommendations in coordination with government offices.
- Offer technical support, guidance, and assistance to families for repairs and reconstruction.
- Enhance local skilled worker capacity through training and contracts for daily labour.
- Assist households in returning to their homes once they are inspected and deemed safe and support them in transporting their belongings. Given the potential trauma of this return, PSS-trained volunteers will be essential.
- Remediate temporary settlement sites.
- Provide technical support for water supply and sanitation in residences

In collaboration with Miyamoto International, the *IFRC* and *MRC* have navigated various challenges to identify a suitable location for conducting the pilot project. After thorough assessments and coordination with local authorities, it has been decided to launch the initiative in *Tagnit*, (*Ounaine* commune in *Taroudant*). Scheduled to begin in April 2025, the project aims to provide a comprehensive understanding of community conditions and evaluate how the intervention can support families from both shelter and livelihood perspectives. Throughout this process, the *MRC* and *IFRC* will play a central role, emphasizing community involvement and fostering coordination among community members, local authorities, and various sectors to ensure the project's success.

#### (D.2) Advocate for Red Cross Red Crescent positioning and support for long-term rehabilitation and reconstruction.

The *Moroccan Red Crescent (MRC)*, supported by the *International Federation of Red Cross and Red Crescent Societies (IFRC)*, is actively advocating at various levels. This involves conducting meetings with affected communities, responsible entities, technical departments, and authorities to better understand the context, identify challenges

faced by each party, and collaboratively propose solutions to bridge existing gaps. These gaps are currently preventing affected communities from relocating to permanent, safe housing.

This approach is essential for implementing a humanitarian and strategic project that addresses the actual needs of families and facilitates their return to a normal life. *MRC* remains committed to organizing the necessary coordination meetings with the mentioned parties, while *IFRC* plays a crucial supporting role. *IFRC* contributes as a key participant in these meetings and assists with proposal development, tool creation, monitoring processes, budgeting, and other critical details, in collaboration with relevant departments such as Community Engagement and Accountability (*CEA*), Protection, Gender, and Inclusion (*PGI*), Water, Sanitation, and Hygiene (*WASH*), among others.

### (D.3) Provide cash-based shelter support where possible and appropriate.

Significant progress has been made in advocating at the authorities' level for *MRC*, with the support of *IFRC*, to provide assistance to affected communities through cash-based shelter programmes for the reconstruction and repair of damaged houses. This coordination has enabled the development of internal projects with positive outcomes, allowing affected communities to complete reconstruction efforts, conduct repairs, and relocate to permanent housing.

In *El-Haouz*, collaboration with authorities has led to the initiation of a pilot project designed to support families who have received government assistance for reconstruction but were unable to complete the process due to various challenges. These challenges include restricted access to villages, which has driven up transport and material costs, inaccurate budget assessments, and shortages of materials and contractors in different locations.

The pilot project involves conducting a detailed technical assessment to identify key factors, such as the current level of construction and encountered obstacles. Based on this assessment, eligible families will receive cash assistance in two payments—one upon signing the *Memorandum of Understanding (MoU)* and the second after the agreed-upon work is completed. This structured approach ensures that families can efficiently finalize reconstruction efforts. The pilot will be implemented in Talat N'Yakoub, with close monitoring to assess its feasibility for expansion across the region and other provinces.

For this new initiative, *IFRC* has worked closely with the *MRC* team to develop necessary guidelines and tools, as well as to train the shelter team to ensure compliance with internal regulations and agreed-upon implementation modalities. This process includes the involvement of the Community Engagement and Accountability (*CEA*) and Cash and Voucher Assistance (*CVA*) teams, along with other relevant departments. Assistance may be extended to up to 500 households in El Haouz.

In *Chichaoua*, coordination meetings with authorities have focused on identifying community needs and challenges. Discussions will continue until a viable approach is established to support families in completing the repair and reconstruction of their homes.

In *Taroudant*, coordination meetings were conducted in the first quarter of the year, during which possible assistance programmes were presented to authorities. As a result, authorities opted to initiate support for families in completing the third phase of reconstruction, covering external walls, painting, doors, and windows. This assistance will enable families to move forward with the reconstruction process. More than 1,000 households in

*Taroudant* may benefit from this assistance. The shelter team is currently preparing tools and resources to launch the first phase of the project by mid-April 2025.

In *Azilal*, discussions are ongoing to define overall programming and priority interventions. Shelter has been identified as a potential area of focus, with considerations for a support to reconstruction programme. However, these plans remain tentative, with further discussions scheduled for the second half of 2025 to refine strategies and next steps.

Ongoing coordination and technical meetings will be held to monitor field conditions, refine the approach, and facilitate smooth implementation and transition. This initiative is regarded as a key step toward providing a permanent housing solution for affected communities. *MRC* and *IFRC* remain flexible in adjusting proposals as necessary to ensure objectives are achieved and suitable shelter solutions are delivered.

## (E) *MRC* SHELTER STAFF AND VOLUNTEERS CAPACITY BUILDING

### (E.1) *MRC* Shelter staff and volunteers' capacity building

| Training Topic                                                                   | Location, date & duration |          |         | Participants |              |            |           |                      |
|----------------------------------------------------------------------------------|---------------------------|----------|---------|--------------|--------------|------------|-----------|----------------------|
|                                                                                  | Branch /national          | Duration | Date    | # Staff      | # Volunteers | # Men      | # Women   | # Total participants |
| Shelter                                                                          | Chichaoua                 | 1 day    | Nov-23  |              |              | 9          | 1         | 10                   |
| Shelter – <i>TSU</i> Installation                                                | Chichaoua                 | 2 days   | Feb-24  |              |              | 12         | 18        | 30                   |
| Better Shelter Training – <i>TSU</i> Installation                                | All                       | 3 days   | May-24  |              |              | 20         | 4         | 24                   |
| Better Shelter Training – <i>TSU</i> Insulation                                  | All                       | 2 days   | July-24 |              |              | 12         | 2         | 14                   |
| <i>TSU</i> – Concrete foundation single                                          | Taroudant, Chichaoua      | 2 days   | Nov-24  | 10           | -            | 8          | 2         | 10                   |
| <i>TSU</i> Installation Training for <i>MRC</i> Shelter Staff                    | Taroudant                 | 1 day    | Sep-24  | 12           | -            | 12         | -         | 12                   |
| <i>TSU</i> Insulation Training for <i>MRC</i> Shelter Staff                      | Taroudant                 | 3 days   | Oct-24  | 12           | -            | 12         | -         | 12                   |
| Cash for Shelter – Rebuilding and Repairing support programme – General approach | All                       | 1 day    | Feb-25  | 10           | -            | 9          | 1         | 10                   |
| Cash for Shelter – Rebuilding and Repairing support programme                    | El Haouz                  | 2 days   | Feb- 25 | 8            | -            | 7          | 1         | 8                    |
| <b>TOTAL</b>                                                                     |                           |          |         |              |              | <b>101</b> | <b>29</b> | <b>130</b>           |

Table 14 - Shelter trainings



## FOOD SECURITY AND LIVELIHOODS

People reached: 24,938 individuals (6,034 households)

### Objectives:

- (A) Food Assistance: Ensure immediate food security for affected households by distributing food parcels
- (B) Food production and income-generation: Enhance food production and income-generation capabilities by distributing goat restocking packages and supporting various livelihood activities.
- (C) Improvement of income sources: Provide skills development and vocational training to community members to improve their income-generation activities.
- (D) Community Risk Reduction and protection of livelihoods: Integrate climate-smart *Disaster Risk Reduction* and climate change adaptation into livelihood protection strategies.
- (E) Livelihood *MRC* awareness and capacity building: Strengthen *MRC*'s capacity in livelihoods programming through targeted training and capacity-building initiatives.

### Key indicators

| Indicator                                                                                    | Actual      | Target    |
|----------------------------------------------------------------------------------------------|-------------|-----------|
| # Number of food parcels delivered                                                           | 6,034       | 6,500     |
| # Number of households receiving goat restocking packages (TBD)                              | Not started | 100 (TBD) |
| # Number of IGA vocational trainings-skills development delivered to community members (TBD) | Not started | 36 (TBD)  |

## (A) FOOD ASSISTANCE

### (A.1) Distribute food parcels to target households

The food security component was introduced to support the Moroccan government in addressing the urgent food needs of the affected population. Initially, challenges in identifying a suitable supplier delayed the procurement process, but an agreement was finalized in June 2024. This delay required adjustments to the *Moroccan Red Crescent's (MRC)* assistance strategy; however, the branch later consulted with authorities to approve the distribution strategy and targeting approach. The primary aim of *MRC* was to provide aid to all villages that had benefited from the relief operation, enabling them to focus their resources on rebuilding homes or livelihoods rather than on meeting immediate food needs. By June 2024, the procurement of 6,600 food parcels was successfully completed, allowing deliveries from suppliers to commence. These parcels contain the following items:

|                        |                          |                           |
|------------------------|--------------------------|---------------------------|
| Wheat flour – 25kg     | White sugar – 1kg        | Long white rice - 1kg     |
| Canned tuna - 125g     | Concentrated milk - 410g | Tomato concentrate – 850g |
| Canned sardines - 125g | Green tea                | Beans -500 g              |

|                              |                             |                   |
|------------------------------|-----------------------------|-------------------|
| Dates - 1kg                  | Extra virgin olive oil – 1L | Dry lentils - 1kg |
| Vegetable sunflower oil – 5L | Dry white beans - 1kg       |                   |

Table 15 - Composition of food parcels



Photo 6 - Food parcels distribution in Demnate (Azilal), Feb. 2025

Distributions took place during the summer of 2024 in *Chichaoua*, *Taroudant* and *El-Haouz*, while 1,000 parcels were set aside to be delivered in *Azilal* as part of the initial activities after the targeting was approved by provincial authorities in February 2025. The distributions in *Azilal* were carried out in February and March and are scheduled to continue into April, reaching seven additional *douars*. As of now, the food parcel distributions have successfully reached the following:

|                  | # Food Parcels | # Villages | # Households | # Individuals |
|------------------|----------------|------------|--------------|---------------|
| <i>Chichaoua</i> | 1,015          | 16         | 1,015        | 4,101         |

|                           |              |            |              |               |
|---------------------------|--------------|------------|--------------|---------------|
| <i>Taroudant</i>          | 1,573        | 38         | 1,573        | 6,292         |
| <i>El-Haouz/Marrakesh</i> | 2,959        | 46         | 2,959        | 11,836        |
| <i>Azilal</i>             | 487          | 10         | 487          | 2,750         |
| <b>TOTAL</b>              | <b>6,034</b> | <b>110</b> | <b>6,034</b> | <b>24,938</b> |

*Table 16 - Food parcels distributed*

The remaining 450 food parcels are scheduled for distribution in April 2025 across seven newly targeted *douars* in *Azilal*, following the completion of the registration process. Additionally, a Post-Distribution Monitoring (PDM) exercise is planned for April to evaluate emerging needs. Considering the ongoing vulnerabilities and the hunger period, a second food distribution is likely to be considered.

## (B) LIVELIHOODS

Food security and livelihoods initiatives have primarily concentrated on providing direct food assistance through food parcel distributions, which have been implemented across all regions. In late February 2025, the *IFRC* appointed a Livelihoods Delegate who, in collaboration with the *Moroccan Red Crescent (MRC)*, began engaging in consultations with the branches to assess existing data and revisit the draft strategy developed in spring 2024. These efforts aim to assess the current economic needs of affected communities, align with governmental priorities, coordinate with the *Qatari Red Crescent (QRC)*—which expressed strong interest in supporting livelihoods’ interventions—and shape interventions geared towards long-term recovery while connecting them to the resilience phase.

While the operation has largely emphasized relief and interventions within other sectors, livelihoods activities are designed to complement and reinforce these efforts by focusing on building community resilience. The Livelihoods Strategy and Action Plan are expected to be finalized in May 2025.

At the end of 2023, a technical assessment was carried out by the *IFRC* to inform the development of a robust livelihoods approach by the *MRC* with the joint support of the *IFRC* and the *Qatari Red Crescent (QRC)*. Several possible livelihood activities were identified to support the recovery process of communities living in very different geographical zones. A livelihood scoping study on vocational training and skills development for income-generating opportunities was conducted from mid-April to the end of May 2024. The study was led by a team of *British Red Cross (BRC)* and *Moroccan Red Crescent (MRC)* staff. Almost a year on, the Delegate has begun the process of revising the Livelihoods Strategy by reviewing existing information and undertaking further consultations and field assessments. The revision of the Livelihoods Strategy is in the data collection and consultation phase, the Delegate has finalised the briefing and supported all branches with quarterly meetings to understand all the interventions implemented as well as the challenges. The research of primary data (*baseline*, *PDMs*, recovery assessment 2023 and draft strategy 2024) but also of secondary data. The consultation with the branches will continue in April 2025 after a meeting with the national *MRC* to share the results and define the action plan.

To date, the primary objectives outlined in the previous draft strategy remain aligned with the populations’ needs as verified in an initial rapid assessment conducted in March 2025 by the Livelihoods Delegate. These objectives focus on enhancing existing activities in the villages, incorporating climate-smart techniques, and diversifying household income sources to strengthen economic resilience.

The earthquake has significantly exacerbated livelihood vulnerabilities, particularly due to rising market prices, which hinder efforts to restore primary sources of income. This situation is further compounded by the prolonged

drought driven by climate change, the economic setbacks in tourism caused by COVID-19, and the longstanding challenges faced by remote mountain villages. The upcoming action plan will be developed with a focus on addressing identified needs and leveraging market opportunities, while carefully considering associated risks and feasibility.

Much of the population in the affected areas relies heavily on agropastoralism for their livelihoods. However, production levels have significantly declined, not only due to the earthquake but also because of ongoing drought, which has drastically reduced livestock numbers across the country<sup>27</sup>. Following extensive consultations within the communities, planned interventions include the distribution of adapted livestock, training in animal husbandry, and the organization of veterinary campaigns. Additionally, identifying and managing green pastures will be critical to preventing soil erosion and sustaining livestock.

The drought has also had a severe impact on agricultural production, affecting both food crops and fruit trees. To address these challenges, efforts will focus on increasing productivity through the distribution of seeds, tree planting, and training programs for farmers. Furthermore, to diversify food production, the rehabilitation of irrigation systems and training on efficient water management practices will be essential. These combined actions aim to strengthen the resilience of agropastoral and farming communities in the affected regions.

There is a need to link the psychosocial well-being to *Income Generating Activity (IGA)* and be developed in the safe spaces. It has also been identified that there is a need to include financial literacy and association training within these women's groups. More in-depth assessments of viable income-generating activities, community grants and vocational training opportunities to strengthen community livelihoods will take place in the coming months.

The WASH and Shelter sector are developing their support in the communities through the local community workforce; these men left their jobs in the cities to develop the reconstruction. To help them regain opportunities in the future, the recommendation is to enhance employment opportunities for earthquake-affected people, through the certification of their skills and provide specific training in earthquake-resistant construction.

The *Community-Based Disaster Risk Reduction (CB-DRR)*, that includes a climate-smart livelihoods component through *enhanced Vulnerability and Capacity Assessments (eVCA)* has identified as key issues lack water access and livelihoods. The reports are being analysed and, once selection criteria have been established, support will be provided to village civil society organisations through microprojects. The Livelihoods Delegate is also supporting the review of the financial management and governance of these associations through the training and tools.

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<sup>27</sup> Notably factoring into a decision to reduce sheep consumption for Eid al-Fitr.



## MULTI-PURPOSE CASH

People reached: 2'203 households  
(9'179 individuals)

### Objectives:

1. Advocate for and deliver *MPCA*/sectoral cash (e.g shelter, livelihoods, protection) assistance to support immediate needs and recovery
2. Develop the capacities and systems of the *MRC* to make appropriate use of cash-based intervention

### Key indicators

| Indicator (number)                                                                                                                                        | Actual                                  | Target                                   |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|------------------------------------------|
| # Number of households/individuals supported with <i>MPCA</i><br>(3 <i>MPCA</i> programs <sup>28</sup> )                                                  | 2,203 households<br>(9,179 individuals) | 4,816 households<br>(19,264 individuals) |
| Total amount of cash transferred to beneficiaries (MAD)<br>(3 <i>MPCA</i> programs <sup>29</sup> )                                                        | 4,013,971 MAD <sup>30</sup>             | 13,482,949 MAD <sup>31</sup>             |
| % Percentage of assisted household/individual beneficiaries reporting that <i>MPCA</i> is their preferred modality of assistance<br>(vs. <i>in-kind</i> ) | 93.1 % <sup>32</sup>                    | 80%                                      |
| # Number of <i>MRC</i> staff trained in <i>CVA</i>                                                                                                        | 46                                      | 36                                       |
| # Number of framework agreements signed by the <i>MRC</i> with Financial Service Providers (FSPs)                                                         | 0                                       | 1                                        |

<sup>28</sup> *MPCA I (Pilot), MPCA II (Cash for Winter), MPCA III (Cash for Ramadan)*

<sup>29</sup> *MPCA I (Pilot), MPCA II (Cash for Winter), MPCA III (Cash for Ramadan)*

<sup>30</sup> 346,997 CHF approx. (exchange rate 17/04/2025).

<sup>31</sup> 1,176,847 CHF approx. (exchange rate 18/04/2025)

<sup>32</sup> Findings from the Post-Distribution Monitoring survey.

## (A) CVA IMPLEMENTATION

Since mid-2024, three Cash and Voucher Assistance programmes have been implemented. The first was an MPCA pilot in Taroudant in July-August 2024, followed by advocacy efforts to expand cash-based interventions. A second programme launched in late December 2024 to support vulnerable households during winter, and a third was introduced in spring 2025 for Ramadan assistance.

The below table presents the targets under three programs:

|                                    | Target # Households                     | Target # Individuals | Target amount         | Status    |
|------------------------------------|-----------------------------------------|----------------------|-----------------------|-----------|
| <b>MPCA I</b> (Pilot)              | 228                                     | 912                  | 241,680 MAD           | Completed |
| <b>MPCA II</b> (Cash for Winter)   | 1,520 HH                                | 6,304                | 9,551,619 MAD         | Ongoing   |
| <b>MPCA III</b> (Cash for Ramadan) | 4,816 HH                                | 19,264               | 3,689,650 MAD         | Ongoing   |
| <b>TOTAL</b>                       | <b>4,816 HH</b><br>unique beneficiaries | <b>19,264</b>        | <b>13,482,949 MAD</b> |           |

Table 17 - Cash programs (1/2)

The below table presents the beneficiaries already reached over the reporting period and the amounts transferred:

|                                     | # Households              | # Individuals              | Branches  | Communes                         | # Vil-lages | # Amount transferred      |
|-------------------------------------|---------------------------|----------------------------|-----------|----------------------------------|-------------|---------------------------|
| <b>MPCA I</b><br>Pilot              | 228                       | 912                        | Taroudant | 1 ( <i>Chafarni</i> )            | 6           | 241,680 MAD <sup>33</sup> |
| <b>MPCA II</b><br>Cash for Winter   | 1,429                     | 6,304                      | Chichaoua | 2 ( <i>Adassil, Imindounit</i> ) | 25          | 2,254,752 MAD             |
| <b>MPCA III</b><br>Cash for Ramadan | 1,342                     | 5,440                      | Chichaoua | 2 ( <i>Adassil, Imindounit</i> ) | 25          | 1,108,039 MAD             |
|                                     | 546                       | 1,963                      | El-Haouz  | 1 ( <i>Azgour</i> )              | 6           | 409,500 MAD               |
| <b>TOTAL</b>                        | <b>3,545<sup>34</sup></b> | <b>14,619<sup>35</sup></b> |           | <b>4 communes</b>                | <b>47</b>   | <b>4,013,971 MAD</b>      |

Table 18 - Cash programs (2/2)

**Note:** In *Chichaoua*, the same group of beneficiaries—across 25 douars in two communes—received assistance under both the *MPCA II (Cash for Winter)* and *MPCA III (Cash for Ramadan)* programs. To ensure accurate reporting of unique individuals reached and avoid duplication, the 1'342 beneficiaries who received *Cash for Ramadan* support in *Chichaoua* have been excluded from the total count of unique beneficiaries. Additionally, although *Taroudant* was targeted for assistance, distributions in that location have not yet taken place and fall outside the scope of reporting period of this report (see narrative section below for further details).

At present, no multipurpose cash assistance (*MPCA*) is planned for *Azilal*. However, cash modality is envisaged to support other sectors, including livelihoods, disaster risk reduction (*DRR*), and shelter. As of the first trimester of 2025, activities in *Azilal* are at an early stage, focusing on integrating the branch into the earthquake response, conducting assessment in order to define priorities, and building team capacities to ensure effective implementation.

(A.1) Conduct *Cash and Voucher Assistance (CVA)* feasibility study and market assessment to ensure that affected communities have access to markets and that cash is a feasible option.

The response to the *El-Haouz* earthquake strongly justified the use of Cash and Voucher Assistance (CVA) as an effective aid modality. Initially, the earthquake disrupted local markets, but assessments showed rapid recovery, with markets returning to nearly normal functionality within a few months. These assessments further demonstrated that local markets could adequately meet most priority needs, reinforcing CVA as a viable solution for recovery. However, several financial inclusion barriers emerged as significant challenges:

- Limited access to formal banking services in rural areas, with few households possessing bank accounts.
- Underdeveloped mobile money systems, making digital cash transfers impractical.
- Regulatory constraints, as Moroccan authorities initially limited non-governmental CVA to maintain oversight of cash-based aid.

Despite these barriers, financial service providers (FSPs), such as *MoneyGram* and *Western Union*, were widely available and well-known in affected communities. Moreover, the government's own adoption of cash transfers in its earthquake response facilitated a supportive environment for the CVA modality.

#### *MRC/IFRC Advocacy and Pilot Implementation:*

Leveraging its auxiliary role to public authorities and through sustained advocacy efforts, the *Moroccan Red Crescent (MRC)*, supported by *IFRC*, successfully secured approval for a CVA pilot in *Taroudant* province. A feasibility study and market assessment conducted in June 2024 in *Oulad Berhil* (the primary marketplace for *Chafarni* commune) identified over 20 *MoneyGram* outlets with adequate liquidity, directly shaping the program design and strengthening advocacy for broader CVA acceptance. The pilot demonstrated cash transfers as practical and scalable within Morocco's unique context, overcoming initial limitations.

#### *Scaling up: Chichaoua and El-Haouz provinces:*

Subsequent assessments in *Adassil* and *Imindounit* communes confirmed market functionality and adequate FSP coverage, validating the phased rollout of *Multi-Purpose Cash Assistance (MPCA)*. Following initial successes, a dedicated market assessment was conducted in January 2025 for the "*Cash for Ramadan*" initiative. This assessment specifically evaluated food markets in *Adassil* and *Imindounit* communes to ensure they could meet Ramadan-specific demands. Key findings indicated:

- Sufficient stocks of staple foods available locally.
- Stable prices despite anticipated seasonal demand fluctuations.
- Adequate physical accessibility of markets for target communities.

These insights directly shaped the "*Cash for Ramadan*" intervention, ensuring that transfer values aligned with local prices, distribution timings matched market readiness, and community sensitization addressed specific Ramadan purchasing behaviours. The iterative process of market assessment and response planning in *Chichaoua* highlighted the program's adaptability and commitment to context-sensitive CVA implementation.

33 21'221 CHF approx. (exchange rate 16/04/2025).

<sup>34</sup> Out of those, 1'342 households are benefitting from both MPCA II and III in Chichaoua.

<sup>35</sup> Out of those, 5'440 are benefitting from both MPCA II and III in Chichaoua.

Building upon lessons learned in *Taroudant* and *Chichaoua*, additional assessments in *Talat N'Yakoub* and *Azgour* communes (*El-Haouz* province) evaluated market capacities, financial access, and community preparedness. These assessments confirmed:

- Market accessibility and responsiveness to increased demand.
- Sufficient operational FSP coverage in key locations.
- Beneficiaries' familiarity and readiness to utilize formal cash transfer services, despite previous limited banking experience.

These findings further affirmed CVA as a suitable and scalable approach in rural, financially underserved contexts. Moreover, the assessments supported ongoing engagement with authorities by clearly demonstrating the feasibility and effectiveness of CVA aligned with local market conditions and community practices.

## (A.2) Pilot CVA on a small scale aiming to scale up CVA in multiple locations.

- *MPCA programme I: pilot*

The CVA pilot conducted by the *Moroccan Red Crescent (MRC)* in Chafarni commune in July 2024 aimed to assist 228 vulnerable households impacted by the earthquake. The objectives were to assess the effectiveness of cash transfers, identify operational challenges, build *MRC's* capacity in cash assistance management, and demonstrate the effectiveness of CVA to local authorities. A market assessment confirmed stable market conditions, and a *CALP* training enhanced *MRC* staff capabilities. Beneficiaries expressed strong support for cash assistance, with most familiar with *MoneyGram* services, and mitigation measures were put in place to manage potential risks.

Beneficiaries received 1,060 MAD (approximately 100 CHF), per household via *MoneyGram*, facilitated by the *RedRose* platform, and distributed in two instalments of 530 MAD each<sup>36</sup>. Community Engagement and Accountability (*CEA*) were central, including a helpline, helpdesks, and feedback channels. Post-distribution monitoring showed high beneficiary satisfaction, preference for cash over in-kind assistance, effective communication, and no reported community conflicts.

| Branch    | Commune      | # Villages/<br>douars | # Households | # Individuals     | # Amount per<br>household | # Total amount<br>transferred |
|-----------|--------------|-----------------------|--------------|-------------------|---------------------------|-------------------------------|
| Taroudant | 1 (Chafarni) | 6                     | 228          | 912 <sup>37</sup> | 1'060 MAD                 | 241,680 MAD <sup>38</sup>     |

Table 19- Cash pilot (MPCA Program I)

The pilot achieved its goals by increasing *MRC's* expertise, demonstrating *CVA's* viability to authorities, and receiving positive community feedback. Despite the success, authorities remained hesitant regarding a larger scale CVA implementation, prompting revisions in advocacy strategy using pilot data, with further advocacy conducted through targeted meetings and events.

## (A.3) Provide multipurpose cash grants to provide basic needs assistance to target communities

- *MPCA programme II (Winter)*

<sup>36</sup> The grant amount was 500 MAD per instalment, with an additional 30 MAD per transfer to cover transport costs to *MoneyGram* offices.

<sup>37</sup> Generic count of 4 members per household.

<sup>38</sup> 21'221 CHF approx. (exchange rate 16/04/2025).

Following the successful pilot, the CVA team designed a *Multipurpose Cash Assistance (MPCA)* programme to support vulnerable earthquake-affected households across various branches. The program aims to help these households meet basic needs while living in temporary shelters, especially during the harsh winter. *MPCA* complements government support, offering flexible financial aid for necessities such as food, fuel, clothing, healthcare, education, and winter-specific items, thereby promoting resilience and recovery.

This approach empowers households by allowing them to prioritize their expenditures, enhancing their dignity and decision-making capabilities. The program aligns closely with local market conditions to ensure sustainability and relevance. Targeting the most vulnerable households, the implementation starts in the most remote areas facing severe winter conditions and early stages of reconstruction. Branch-specific programming requires approval from local authorities. After the winter period and considering reconstruction progress, further *MPCA* phases may be proposed for authorization.

As of March 2025, the *MPCA programme II (Winter)* project was successfully implemented in *Chichaoua*, completing its first round reaching 1,429 households comprising 6,304 individuals. The second round has commenced, targeting 445 households covering 1,986 individuals, and is currently ongoing. In total, 4 rounds are planned. Each household receives 1,150 MAD per round. However, 386 households across six particularly remote and underserved douars—which had not previously benefited from any form of assistance—are receiving an increased transfer amount of 2,150 MAD per round, in recognition of the heightened needs and inaccessibility of their locations.



Photo 7 - Cash beneficiaries' registration in Chichaoua (douar Tindri), December 2024.

Despite the pilot project's demonstrated success in *Taroudant* Province, efforts to expand the *Multipurpose Cash Assistance (MPCA)* encountered significant hurdles. In *Taroudant*, local authorities exhibited reluctance in granting the necessary approvals for scaling up the programme. This hesitancy ultimately led to the suspension of further

MPCA implementation within the province. Following recent discussions, new avenues for programming through the cash modality are being explored.

Similarly, in *El-Haouz* Province, the programme faced substantial delays. Initially, it was agreed that beneficiary lists would be provided by local authorities. However, obtaining these lists required multiple verification stages designed to prevent duplication with assistance provided by other NGOs. This extensive verification process resulted in notable delays in launching the MPCA interventions in *El-Haouz*, impacting the timely support to vulnerable communities.

| Branch       | Communes   | # Villages/<br>douars | # Individuals | #Households<br>(1 <sup>st</sup> round) | # Households<br>(2 <sup>nd</sup> round) | # Total amount<br>transferred |
|--------------|------------|-----------------------|---------------|----------------------------------------|-----------------------------------------|-------------------------------|
| Chichaoua    | Adassil    | 8                     | 1,712         | 456                                    | 153                                     | 700,350 MAD <sup>39</sup>     |
|              | Imindounit | 17                    | 4,592         | 973                                    | 292                                     | 1,554, 402.MAD                |
| <b>Total</b> |            | <b>25</b>             | <b>6,304</b>  | <b>1,429</b>                           | <b>445</b>                              | <b>2,254,752 MAD</b>          |

Table 20 - MPCA Programme II (Winter)

#### ▪ MPCA programme III: (Ramadan)

Building upon the experiences and lessons learned during the MPCA implementation, the *Cash for Ramadan* project was strategically developed to provide timely and targeted assistance, specifically addressing increased household expenses for food and essential items during the holy month of Ramadan. Understanding the additional financial pressures faced by households during this period, the project placed significant emphasis on detailed market assessments, extensive beneficiary consultations, and close coordination with local authorities to ensure alignment with both community needs and local market capacities.

| Branch       | Commune    | # Villages/<br>douars | # Households | # Individuals | # Amount per<br>household | # Total amount<br>transferred |
|--------------|------------|-----------------------|--------------|---------------|---------------------------|-------------------------------|
| Chichaoua    | Adassil    | 8                     | 456          | 1,712         | 800 MAD                   | 364,800 MAD                   |
| Chichaoua    | Imindounit | 17                    | 929          | 3,728         | 800 MAD                   | 743,239 MAD                   |
| El-Haouz     | Azgour     | 6                     | 546          | 1,963         | 750 MAD                   | 409,500 MAD                   |
| <b>TOTAL</b> |            | <b>32</b>             | <b>1,931</b> | <b>7,403</b>  |                           | <b>1,517,539 MAD</b>          |

Table 21 - MPCA Programme III (Ramadan)

The table above reflects the reached beneficiaries thus far, the MPCA programme III (Ramadan) still needs to reach additional 2'928 households (1'619 in *Taroudant*, 168 in *Chichaoua*, 1'098 in *El-Haouz*) with one installment of 750 MAD per household (*Taroudant* and *El-Haouz*) and 800 MAD in *Chichaoua*. This programme is a one-off instalment (only one round).

#### A.4) Advocate for the use of the CVA modality when feasible.

An advocacy strategy has been developed and consistently implemented throughout the project duration, with the pilot project serving as a central component. This strategy aimed primarily at Moroccan authorities, focusing on securing authorizations for Cash and Voucher Assistance (CVA) programmes to support vulnerable earthquake-

<sup>39</sup> 61'697'203 CHF approx. (exchange rate 17/04/2025).

affected populations, while simultaneously strengthening the *Moroccan Red Crescent's (MRC)* position as a trusted and capable partner for local authorities.

To achieve these objectives, several advocacy actions were carried out. Key messages were systematically crafted and disseminated through diverse channels, including stakeholder meetings, advocacy documents such as brochures and leaflets, and targeted events like the commemoration event held in September 2024. These efforts emphasized the positive impacts demonstrated during the pilot, highlighting CVA's effectiveness in meeting immediate community needs.

Throughout the implementation period, numerous additional meetings were organized with local authorities in *El-Haouz*, *Taroudant*, and *Chichaoua* provinces. These meetings aimed to clearly communicate the purpose, methodology, and community-level impacts of the cash assistance programmes. Authorities were regularly updated on programme progress and informed about the tangible benefits experienced by beneficiaries.

Furthermore, regular and continuous meetings were held with local community leaders, including the *muqaddams* of each douar and community members. These meetings focused on clearly explaining the CVA program's objectives, operational procedures, and beneficiary selection criteria, ensuring transparency and enhancing community buy-in and trust.

Additionally, to promote effective external coordination, an informal CVA coordination cluster was established and jointly led by the *IFRC* and *MRC CVA* teams. This cluster, meeting monthly, facilitated refinement of advocacy messaging and enabled information sharing among humanitarian actors. It should be noted that the limited number of organizations implementing CVA pilots within the earthquake response context significantly influenced the dynamics and discussions within this cluster.

Overall, this comprehensive advocacy and coordination approach contributed significantly to the project's acceptance and facilitated the successful expansion of CVA activities, despite the encountered challenges.

## (B) CVA SYSTEMS & CAPACITY BUILDING

### (B.1) Establish operational data management system for registration, de-duplication and distribution to be scaled up.

*RedRose* was selected as the data management platform for registering beneficiaries in the CVA programme due to its existing utilization by the *Moroccan Red Crescent (MRC)* for volunteer allowance payments, ensuring both relevance and sustainability. The platform securely manages beneficiary data and integrates directly with *MoneyGram*, streamlining payment processes.

Currently, *RedRose* and *MoneyGram* are utilized under *IFRC* framework contracts for earthquake response operations. However, discussions are ongoing between *MRC* and *RedRose* to establish a separate platform exclusively managed by *MRC*. This dedicated platform would leverage *RedRose's* capabilities, providing *MRC* with enhanced autonomy and greater control over cash transfer operations.

Parallel to this initiative, the process of contracting a local *Financial Service Provider (FSP)* has commenced, enabling direct and autonomous cash transfers managed by *MRC*. The *IFRC* continues to support this transition through targeted training and technical assistance to relevant *MRC* departments. This strategic approach aims to solidify *MRC*'s independent operational capacity and ensure the long-term sustainability and effectiveness of cash-based assistance.

## (B.2) Build the capacity of *MRC* volunteers and staff on *CVA*

Throughout 2024, a series of structured trainings were delivered to strengthen the capacity of *MRC* staff and volunteers in *Cash and Voucher Assistance (CVA)* programming. In May 2024, a five-day *CALP Level II* training was conducted in *Taroudant*, with the participation of 11 *MRC* staff. This was followed by a one-day "*CVA Fundamentals*" training held in *Chichaoua* in July 2024, engaging 12 volunteers.

In September 2024, a three-day training focused on the management of *CVA* operations via the *RedRose* platform took place in *Taroudant*, training 5 staff members in managing digital cash assistance tools. To build on this momentum, another five-day *CALP Level II* training was organized in *Chichaoua* in November 2024, training 18 participants. In total, 46 individuals participated in *CVA*-related trainings over the year, including 30 staff and 16 volunteers, with strong gender balance: 18 men and 28 women.

To reinforce classroom training, a structured coaching system was implemented under the guidance of the *IFRC CVA Delegate*, based in *Marrakesh*. Regular visits to the *Chichaoua* and *Taroudant* branches ensured hands-on support for capacity development across all programme phases, including market assessments, beneficiary registration and validation, distribution, and post-distribution monitoring.

In addition to training, three new *MRC CVA* staff members were recruited and trained: two *CVA* assistants (one each in *Chichaoua* and *Taroudant*), and one *CVA* officer in *El-Haouz*, ensuring enhanced field-level capacity for ongoing and future *CVA* implementation.

| Training Topic                                                  | Location, date & duration |          |            | Participants |                   |           |              |                         |
|-----------------------------------------------------------------|---------------------------|----------|------------|--------------|-------------------|-----------|--------------|-------------------------|
|                                                                 | Branch/<br>national       | Duration | Date       | # Staff      | # Volun-<br>teers | # Men     | # Wo-<br>men | # Total<br>participants |
| <i>CALP</i> Level 2                                             | <i>Taroudant</i>          | 5 days   | May 2024   | 11           | 0                 | 5         | 6            | 11                      |
| <i>CVA</i> the Fundamentals                                     | <i>Chichaoua</i>          | 1 day    | July 2024  | 0            | 12                | 4         | 8            | 12                      |
| Management of <i>CVA</i> operations via <i>RedRose</i> platform | <i>Taroudant</i>          | 3 days   | Sept. 2024 | 5            | 0                 | 2         | 3            | 5                       |
| <i>CALP</i> Level 2                                             | <i>Chichaoua</i>          | 5 days   | Nov. 2024  | 14           | 4                 | 7         | 11           | 18                      |
| <b>TOTAL</b>                                                    |                           |          |            | <b>30</b>    | <b>16</b>         | <b>18</b> | <b>28</b>    | <b>46</b>               |

Table 22 - *CVA* trainings

## (B.3) Implement a cash preparedness programme to support *MRC* in becoming "cash ready"

The CVA intervention—particularly through activities B.1 and B.2—continues to play a critical role in supporting the *Moroccan Red Crescent (MRC)* toward achieving “cash-ready” status. A key milestone in this process is the ongoing facilitation of a framework contract between *MRC* and a financial service provider, which will enable *MRC* to independently manage and deliver cash transfers. This development is aligned with the broader institutional strengthening efforts under the *National Society Development (NSD)* plan, which has been formally endorsed by *MRC* leadership. The design and operationalisation of this detailed programme is scheduled for mid-2025, with the CVA components positioned as a central pillar in *MRC*’s long-term preparedness and response capacity.



## HEALTH & CARE

(Mental Health and psychosocial support / Community-Based Health / *First Aid* / Medical Services)

People reached:  
MHPSS: 541 individuals  
FA: 1'739 individuals  
CBH: 9'165 individuals

**Objectives:**

**First Aid:** MRC provides quality *First Aid* training, recognized nationally and regionally, and will fully implement the IFAA Improvement Plan, increase profits from EQ area branches, and expand FA trainers and public trainings by the end of the project.

**MHPSS:** MRC offers targeted, evidence-based *MHPSS* programs to reduce psychological and psychosocial difficulties in earthquake-affected populations, improving well-being and reducing suffering.

**CB-HFA:** Target population are provided with integrated and appropriate support in health, shelter and *Disaster Risk Reduction*, with MRC enhancing its response capacities.

**Health Care Centers:** Communities have access to rehabilitated and equipped health care centers

### Key indicators

| Indicator                                                                                                                                | Actual      | Target |
|------------------------------------------------------------------------------------------------------------------------------------------|-------------|--------|
| # Number of <i>MHPSS</i> training sessions delivered to MRC staff and volunteers                                                         | 8           | 9      |
| # Number of people who have benefited from a group psychosocial support session                                                          | 224         | 540    |
| # Number of national <i>First Aid</i> policy designed and approved                                                                       | 1           | 1      |
| # Number of branches equipped with the necessary <i>First Aid</i> materials ( <i>i.e.</i> : <i>FA Kits</i> and <i>FA Training Kits</i> ) | 0           | 4      |
| # Number of communities ( <i>douars</i> ) reached with community-based health activities                                                 | 45          | 105    |
| # Number of participants (MRC staff/volunteers) trained on implementation Disease Prevention and Health Promotion activities             | 208         | 300    |
| # Number of awareness raising campaigns (door-to-door sensitization)                                                                     | 157         | -      |
| # Number of health care centres rehabilitated                                                                                            | Not started | TBC    |

## (A) MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT

The launch of the *MHPSS* intervention began in June 2024 with the arrival of an *MHPSS* Delegate recruited by the *French Red Cross (FRC)* to support the *Moroccan Red Crescent (MRC)* in this sector. A national *MHPSS* Coordinator joined the *MRC* team in October 2024. *MHPSS* Officers have been recruited in January 2025 for the 3 branches of *El-Haouz*, *Taroudant* and *Chichaoua*. Fixed cells of dedicated *MHPSS* volunteers (6 to 7 persons), and a pool of volunteers (5 to 8 persons) have also been formed for the three branches to ensure implementation in case of turnover or absence, based on precise identification criteria and under cover of capacity building.

The *MHPSS* field activities started in October 2024 with a pilot project in the province of *Taroudant*. The activities have expended in *Chichaoua* and *El-Haouz* provinces in February 2025. Activities are currently ongoing in a total of 9 villages. During this phase and throughout all of the project, an integrated approach is prioritized, allowing the incorporation of *MHPSS-PGI* components into training modules, *eVCA* and *CBH* tools for the affected communities.

To better understand the needs of the affected populations and develop appropriate psychosocial support responses in the frame of the pilot and dissemination phases, thematic discussions were held in 21 villages in total, 6 villages in the province of *Taroudant*, 8 villages in the province of *Chichaoua* and 7 in the province of *El-Haouz*, with separate groups of men (269 men in total) and women (347 women in total) of varying ages – a total of 616 persons have participated to the assessment. In these communities, both men and women are very open to discussions and have expressed a strong need for emotional support for themselves and their loved ones. The main issues identified relate with symptoms of psychological trauma, anxiety, stress, depressed mood, which translate to irritability, withdrawal, avoidance, ruminations and sleep issues in both men and women.

Men, in particular, reported medically unexplained physical symptoms, social isolation, loss of appetite, irritability and increased aggressiveness, and sleep disturbances. Anxious about the future, they sought to improve their living conditions and work on rebuilding, which reflected positive coping strategies. The women, on the other hand, described a loss of interest and joy in life, significant concerns about the future that affected their mood and sleep, and somatic symptoms such as dizziness. The communities also reported traumatic reactions disrupting their daily lives, including flashbacks, hypervigilance, and avoidance behaviors. Additionally, emotional issues were observed in children, manifesting as difficulty concentrating, bed-wetting, fears, nightmares, and increased agitation.

Preliminary findings from the February 2025 multi-sectoral baseline survey<sup>40</sup> highlight significant psychological distress among affected communities. Since the earthquake, 47% of respondents reported that at least one household member experiences frequent nightmares, with 17% stating this occurs "*always*" and 30% "*often*." Additionally, 44% noted heightened alertness or excessive startle responses, while 43% actively avoid memories, thoughts, or sensations related to the event. These findings underscore the urgent need for continued mental health support and psychosocial interventions to aid recovery and resilience.

In the newly targeted province of *Azilal*, the *French Red Cross (FRC)*, currently leading *MHPSS* interventions, has expressed interest in expanding its programs to this region. Plans are underway for further discussions to define the strategy, establish clear timelines, and outline the next steps for implementation

### (A.1) Strengthen the capacities of *MRC* in the field of mental health and psychosocial support

As planned, PFA topics have been integrated within the *Mental Health and Psychosocial Support Services (MHPSS)* intervention led by the *French Red Cross*. *Psychological First Aid (PFA)* had been identified as a priority by MRC to support target communities and volunteers. A total of eight 2-day training sessions on *Psychological First Aid* (Basic PFA, module 2), were conducted for a total of 69 MRC staff (mostly volunteers). The training sessions were organized in October 2024 and February 2025 in *El-Haouz*, *Chichaoua* and *Taroudant* branches. PFA aims to support the on-going response, ensure identification, emotional support and orientation to the affected population. The approach aligns with the *IFRC* standards and good practices, and with the MRC collaboration as it seeks to strengthen MRC's ability to respond to the urgent needs of the disaster-stricken population, as well as its capacity to care for its teams and volunteers.

An additional 8 sessions of 3 days training on providing psychosocial support were provided to the MHPSS volunteers, equipping them with the skills needed to launch the first package of activities, including basic helping skills, facilitation of PSS group sessions, mental health awareness-raising, stress management skills and strengthening social support. The training program is based on the *IFRC MHPSS* Standards and tools.

| Training Topic       | Location, date & duration |          |           | Participants |                   |           |           |                         |
|----------------------|---------------------------|----------|-----------|--------------|-------------------|-----------|-----------|-------------------------|
|                      | Branch/<br>national       | Duration | Date      | # Staff      | # Volun-<br>teers | # Men     | # Women   | # Total<br>participants |
| Module 2 - Basic PSP | Taroudant                 | 2 days   | Oct. 2024 | 10           | 13                | 10        | 13        | 23                      |
| Soutien Psychosocial | Taroudant                 | 4 days   | Oct. 2024 | -            | 13                | 4         | 9         | 13                      |
| Module 2 - Basic PSP | Taroudant                 | 2 days   | Feb. 2025 | -            | 17                | 7         | 10        | 17                      |
| Soutien Psychosocial | Taroudant                 | 3 days   | Feb. 2025 | -            | 17                | 7         | 10        | 17                      |
| Module 2 - Basic PSP | Chichaoua                 | 2 days   | Feb. 2025 | -            | 16                | 7         | 9         | 16                      |
| Soutien Psychosocial | Chichaoua                 | 3 days   | Feb. 2025 | -            | 16                | 7         | 9         | 16                      |
| Module 2 - Basic PSP | El-Haouz                  | 2 days   | Feb. 2025 | -            | 13                | 4         | 9         | 13                      |
| Soutien Psychosocial | El-Haouz                  | 3 days   | Feb. 2025 | -            | 13                | 4         | 9         | 13                      |
| <b>TOTAL</b>         |                           |          |           | <b>10</b>    | <b>118</b>        | <b>50</b> | <b>78</b> | <b>128<sup>41</sup></b> |

Table 23 - MHPSS trainings

## (A.2) Raise awareness of mental health and psychosocial support issues among people in the affected regions.

The first activity proposed in the communities consists of awareness-raising sessions. This is a crucial first step to normalize common and frequent reactions to adversity, foster adapted coping strategies and encourage the recourse to further psychosocial support. The trained volunteers follow a structured discussion and frame of work

<sup>40</sup> See dedicated section for further details under PMER - (C.4) Conduct a base/midline survey of operational sectors.

<sup>41</sup> These are the total participants of the trainings. However, some volunteers participate in multiple trainings. Unique individuals trained amount to 69.

to ensure quality and impact. There are no one-off sessions, and regular interventions are a priority to enable better knowledge of mental health, help-seeking behavior and increased well-being. So far, 539 beneficiaries have attended mental health awareness sessions through the 3 provinces.



*Photo 8 - MHPSS awareness session with communities in Tizi'N' Tast, Taroudant (October 2024)*

(A.3) Provide individuals, families and communities affected by the earthquake with psychological/psychosocial support tailored to their situation and needs.

In order to respond to the specific issues identified during the Focus Group Discussions and the awareness sessions at community-level, group psychosocial support is provided to adults and adolescents including the following specific themes: stress management and social support. These topics aim at supporting people facing stress, anxiety and depressed mood and follow a specific frame, including evidence-based cognitive and behavioral strategies. The participants are strongly encouraged to participate in all the sessions of a structured curriculum, designed to respond to their specific needs and in continuous adaptation. So far, 224 beneficiaries have been provided with psychosocial support group sessions.

Overall, for awareness-raising activities and psychosocial groups, 91% of the people reached report a better understanding of MHPSS issues, and 86% of MHPSS beneficiaries have experienced an improvement in their well-being due to psychological or psychosocial care (results of a subjective unit of distress scale completed at the beginning and the end each PSS session).

#### (A.4) Support *MRC* volunteers with measures to prevent PsychoSocial Risks (PSR) associated with their work

The frame of the staff care response is designed as well as the Terms of References. Service providers are being identified to support the volunteers and staff of the 3 branches (*Taroudant*, *El-Haouz* and *Chichaoua*), to be launched in early May. The main objectives and interventions are as follows:

These psychologists would be in charge of 4 types of activities:

1. Identify the PSS support needs of *MRC* volunteers and employees (including managers) and propose an action plan
2. Train managers and team leaders in the prevention of psychosocial risks for themselves and their teams, according to the branch's action plan
3. Organize monthly themed information sessions on PSR and mental health for both volunteers and staff. This helps build the teams' confidence in psychologists, normalizes their presence, and fosters open discussions on the topic, ultimately encouraging individuals to seek psychosocial support when needed.
4. Offer emotional support to address stress and other psychosocial issues, to increase wellbeing at the workplace, prevent and address emotional distress.

#### (A.5) Support and develop mental health/psychosocial support on a more global level

*Activity not started yet.*

The National Mental Health and Psychosocial Support (MHPSS) Strategy for 2025–2030 is in progress. A draft plan has been prepared and is now at the stage where it requires validation and inclusion into comprehensive national health strategy which is under discussion.

#### (A.6) Support and advocate for the sustainability of *MRC*'s MHPSS activities

A strategic reflection in the healthcare sector is underway, involving the MHPSS teams in thematic sub-groups. A 5-year national strategic framework document (2025-2030) has been proposed to *MRC* management, including 3 priority areas of intervention with a view to ensuring the sustainability of community awareness-raising, PFA training and psychosocial risk prevention initiatives.

### (B) *MRC FIRST AID* CAPACITY STRENGTHENING

Strengthening *First Aid* services remains a key priority in response and recovery efforts, focusing on the most affected provinces—Taroudant, El-Haouz/Marrakesh, Chichaoua, and Azilal. Since May 2024, the deployment of a *First Aid* delegate has driven progress, with updated methodologies and manuals developed in collaboration with the IFRC's Global *First Aid* Reference Centre (GFARC).

Major milestones include drafting the *First Aid* Strategy 2030 and Action Plan 2025–2027, as well as reinforcing the *First Aid* department with a national coordinator and five branch-level coordinators. Training activities have begun, with a *Training of Trainers (ToT)* workshop in January 2025, followed by national and volunteer-level training sessions.

Further advancements include an agreement with *GFARC* to localise and launch the Universal *First Aid* App in Morocco and a consultancy to assess *MRC's* commercial *First Aid* potential, aiming to enhance workplace safety and ensure service sustainability. Despite challenges, teams remain committed to strengthening *First Aid* as a core pillar of *MRC's* mandate.

#### (B.1) Provide materials, innovative resources and a comprehensive framework to ensure *First Aid* is supported and well-integrated within *MRC's* system

Significant progress has been made in strengthening the *MRC's First Aid* framework, particularly in strategic planning and in laying the groundwork for future resource integration and innovation:

##### *First Aid Action Plan development*

A 3-day national workshop held in *Marrakesh* in October 2024 marked a key milestone in shaping the *MRC's First Aid Strategy 2030*. The event led to the successful development of a detailed *First Aid* Action Plan for 2025–2027, jointly facilitated by the *French Red Cross* with technical support from *GFARC*. It brought together key stakeholders, including representatives from 14 *MRC* branches, the *National Training Committee*, and partners such as the *GRC* and *IFRC*. Discussions focused on aligning with *IFRC's Vision 2030*, tackling challenges around trainer retention, improving trainer management systems, and promoting inclusivity—particularly by enhancing access to *First Aid* training in rural areas and among women and people with disabilities. The integration of innovative tools such as *First Aid* apps was also explored. The finalised plan was formally validated by *MRC's* leadership in November 2024.

##### *Acquisition of equipment:*

By the end of September 2024, a comprehensive assessment of equipment needs was completed, covering items such as mannequins (adults, babies, and children), *Automatic External Defibrillator (AED)* simulators, interlocking heads, data shows, and other teaching materials. Additional supplies—including splints, stretchers, and immobilisation belts—were identified for remote and underserved areas. Procurement processes began in November 2024, following the validation of the proposed list by the *MRC* in coordination with *GFARC*, the tender was initiated, and the supplier is selected pending delivery end of May 2025.

##### *Digital tools*

The integration of digital tools into the *Moroccan Red Crescent's First Aid* training system, initially planned for late 2024, began in early 2025. This decision was made to allow the necessary time for completing the revision of *First Aid* manuals and finalizing the recruitment of the national *First Aid* coordinator, as well as provincial focal points in the target branches—ensuring strong coordination and effective implementation.

Since the beginning of the year, key milestone in this process was the signing of an agreement between the *MRC* and *GFARC*, granting the *MRC* the rights to use and adapt the Universal *First Aid* Application to the Moroccan context. A national focal point has been appointed and is currently receiving training on how to manage, implement, and promote the app locally. Once contextualization is finalized, the app will be launched nationwide, offering accessible, user-friendly digital support for both *First Aid* education and emergency response. By combining innovation and training, the app will allow users to access emergency protocols instantly, learn life-saving skills remotely, and benefit from AI-powered features designed to anticipate risks and raise awareness. This initiative will help make *First Aid* knowledge and tools available to everyone—anytime, anywhere—and significantly strengthen community preparedness and response capacities.

(B.2) Review and improve the technical and educational aspects of the *MRC First Aid* training methodology

The *MRC's First Aid* training methodology has been thoroughly reviewed and significantly improved in both its technical content and pedagogical approach. Over sixty late-night online meetings were held to accommodate participants across different regions, culminating in the delivery of three fully revised *First Aid* manuals aligned with *GFARC* Levels A, B, and C.

- *Level A (General Public Manual)*: Fully updated and validated with new content on stroke, chest pain, heart attacks, and more. The manual now includes structured course formats, updated illustrations, and contextual adaptations for remote areas.
- *Level B (Trainers' Manual)*: Revised and validated to include interactive methods, case studies, and practical exercises. A strong participatory approach guided the update process.
- *Level C (Trainers of Trainers Guide)*: Updated and validated to align with advanced adult learning principles and *GFARC* Level C standards. Enhancements include participatory approaches, use of technology, and conflict resolution techniques.

Printing process and implementation initiated in February 2025. These updates reflect a major step forward in ensuring the delivery of high-quality, learner centred *First Aid* training nationwide.

(B.3) Conduct *First Aid* trainings for the general public, schools and communities (with specific focus on affected zones)

▪ *First Aid awareness session*

|           | # of sessions | # beneficiaries            |
|-----------|---------------|----------------------------|
| Chichaoua | 25            | 1,246 (30% men, 70% women) |
| El-Haouz  | 11            |                            |
| Taroudant | 15            |                            |

Since September 2024, a total of 51 community-based first aid awareness sessions were conducted in *Chichaoua* (25 sessions), *El-Haouz* (11), *Taroudant* (15—reaching 1,246 beneficiaries with a gender distribution of 30% men and 70% women. Each session lasted an average of 4 to 6 hours, with interactive learning combining both theoretical instruction and hands-on exercises. Trainers adapted their methods to meet local challenges, respected cultural norms and privacy, and ensured active participation *through* realistic simulations of emergency situations.

▪ *School-Based awareness sessions*

|           | # of sessions | # students reached       |
|-----------|---------------|--------------------------|
| Chichaoua | 4             | 508 (42% men, 58% women) |
| El-Haouz  | 8             |                          |
| Marrakesh | 11            |                          |
| Taroudant | 14            |                          |

In parallel, awareness sessions were also held in schools, totaling 37 sessions and reaching 508 students—42% boys and 58% girls. These were distributed across *Chichaoua* (4), *El-Haouz* (8), *Taroudant* (11), and *Marrakech* (14).

- *Road safety awareness sessions*

Complementing the *First Aid* activities, six road safety awareness sessions were also organized, benefiting 774 students (65% boys and 35% girls), further enhancing students' knowledge and safety both in and outside the school environment.

The initiative has laid a solid foundation for future community-based *First Aid* outreach by equipping participants—especially women and youth—with the knowledge and confidence to respond effectively in emergencies. These efforts not only raise awareness but also promote community resilience and inclusivity across the target areas.

- *General public training program (level A)*

|                  | Training type            | # of sessions | # of participants |
|------------------|--------------------------|---------------|-------------------|
| <i>El-Haouz</i>  | Level A - teachers       | 1             | 100               |
| <i>Marrakesh</i> | Level A – general public | 3             | 60                |
| <i>Taroudant</i> | Level A – general public | 2             | 42                |

Table 24 - *First aid - Level A trainings*

On the other hand, public full training program has recently been launched, following the graduation of trainers who completed their training on updated manuals and pedagogies. In this initiative, several training courses have been conducted. A Level A training session was held for teachers in El-Haouz, benefiting 100 individuals. Furthermore, three Level A trainings took place in Marrakesh, with a total of 60 participants. Lastly, two Level A trainings were conducted in Taroudant, gathering 42 participants. This comprehensive training effort reflects a commitment to enhancing educational practices within the community.

#### (B.4) Support *MRC* to sustainably strengthen its *First Aid* capacities at national and local level.

##### *Identifying the Needs of Level C and B Trainers*

From June to October 2024, a comprehensive assessment of the training needs of *Trainers of Trainers (ToTs)* and *First Aid Trainers (FATs)* was successfully conducted. The assessment identified skill gaps and areas for improvement, particularly in advanced teaching techniques and adherence to international guidelines. Based on the findings, the activity plan was revised to expand the trainer pool, deliver refresher sessions, and provide stronger support to volunteer trainers. The updated schedule is currently under implementation to ensure trainers are fully prepared to deliver *First Aid* training aligned with the updated manuals<sup>42</sup>.

##### *Level C ToT Workshops*

A national *Training of Trainers (ToT)* workshop for *Level C trainers*, accredited by *GFARC*, took place in January 2025 with 16 selected participants<sup>43</sup>. Recognized as a pivotal component of the training cascade, this workshop was designed to prepare experienced *First Aid Trainers* and future national *Trainers of Trainers* in alignment with current international guidelines.

The workshop was conducted using a variety of learner-centered approaches and tools, following the *GFARC*

<sup>42</sup> It is important to note that while the assessment gathered valuable insights, its national representativeness remains limited due to the small number of branches and trainers surveyed compared to the Moroccan Red Crescent's 77 branches nationwide.

<sup>43</sup> From 108 applications received, the Moroccan Red Crescent (MRC) initially shortlisted 30 candidates. Following consultations between *GFARC* and the MRC, 16 candidates were selected to participate. Of these, 12 successfully passed the workshop, meeting all the requirements, and two participants were identified as potential Master Educators, eligible for further development at the international level.

Trainer of Trainers facilitation guide, with local adaptations to the Moroccan context. Graduates of the programme are expected to subsequently cascade *First Aid* knowledge to broader audiences across the country.

### Level B Trainings

Following the Level C workshop, two Level B training sessions were delivered by four newly certified Level C trainers. Each session benefited 10 participants, resulting in the expansion of the trainer pool by 20 new trainers<sup>44</sup>. This strengthened the continuity of the training cascade and built a stronger foundation for expanding *First Aid* training coverage. Full-scale national *Level B* training workshops are scheduled to continue and are expected to be completed by June 2025.

| Training Topic                                   | Location, date & duration |          |           | Participants |                   |           |           |                         |
|--------------------------------------------------|---------------------------|----------|-----------|--------------|-------------------|-----------|-----------|-------------------------|
|                                                  | Branch/<br>national       | Duration | Date      | # Staff      | # Volun-<br>teers | # Men     | # Women   | # Total<br>participants |
| Level C – <i>First Aid</i> Trainer-of-Trainers I | National                  | 5 days   | Jan. 2025 | -            | 16                | 11        | 5         | 16                      |
| Level B – <i>First Aid</i> trainers I            | National                  | 5 days   | Feb. 2025 | 3            | 7                 | 5         | 5         | 10                      |
| Level B – <i>First Aid</i> trainers II           | National                  | 5 days   | Mar. 2025 | -            | 10                | 5         | 5         | 10                      |
| <b>TOTAL</b>                                     |                           |          |           | <b>3</b>     | <b>33</b>         | <b>21</b> | <b>15</b> | <b>36</b>               |

Table 25- *First Aid* - Levels B and C trainings

(B.5) Support *MRC* in having its *First Aid* training engaged by the private sector for commercial services and recognized by the public.

To support *MRC* in developing a sustainable commercial *First Aid* programme, discussions with management are underway, and *Terms of Reference (ToRs)* are being drafted for a market analysis. This study will examine consumer needs, workplace accident regulations, training trends, competitor mapping, and *MRC*'s capacities through a *SWOT* analysis. Findings will inform a sales and marketing strategy for expansion, resource mobilization, and partnerships. A marketing research firm is expected to be recruited between July and August 2025, with the final report due by October 2025.

Strengthening the *Moroccan Red Crescent's* visibility during key national and international events is essential to positioning it as a leader in *First Aid* training and ensuring the long-term success of its commercial *First Aid* initiatives. Notably, *World Heart Restart Day* on 16 October 2024 was successfully celebrated across earthquake-affected branches, particularly in *Taroudant*, where *CPR*<sup>45</sup> training sessions reached over 400 students, parents, and teachers across seven schools. The high engagement, especially among first-time learners, highlighted the strong community interest in *First Aid*.

Looking ahead, *MRC* is planning activities for the *World Day for Safety and Health at Work* (28 April 2025), including sessions with women's cooperatives in *El-Haouz*, physical education teachers in *Marrakesh* and *Demnate* (*Azilal* province), companies and the municipality in *Chichaoua*, and a large company in *Taroudant*. Preparations are also underway for *World First Aid Day*, *Moroccan Red Crescent National Week* (7–15 May), and *World Red Cross and Red*

<sup>44</sup> 10 male and 10 female

<sup>45</sup> Cardio-Pulmonary Resuscitation

*Crescent Day* (8 May). These efforts will further consolidate *MRC*'s national role and expand its reach in *First Aid* services.

## (C) COMMUNITY-BASED HEALTH

The community-based health programme for the earthquake response started in January 2024, when a scoping mission by the *German Red Cross* (GRC) Regional Health Advisor was conducted to identify, together with *MRC* and other partners, the CBHFA topics to be adapted and implemented in the Moroccan context. A work plan outlining clear next steps was then developed.

Since May 2024, *GRC* has supported the community-based health programme through a delegate based in-country, working in close coordination with the *MRC* Health Department. In August 2024, *MRC* presented and shared with partners a community-based health strategy for the earthquake response, officially launching the programme.

Since September 2024, teams of trained volunteers have been visiting communities to deliver key messages on health promotion and disease prevention. Activities began in *Taroudant*, following a CBHFA training in early September, and continued in *Chichaoua* after a training held in early October. Since then, 45 villages have been directly reached—representing approximately 1,300 households and more than 9,100 people. In March 2025, a training was also organized for the branch of *El-Haouz*.

Although challenges remain in enabling the approximately 63 Community-Based Health volunteers to reach remote villages, the teams are gradually gaining experience and confidence.

### (C.1) Implement awareness raising campaigns on Health and *DRR*, outreach activities in targeted schools and communities

Since September 2024, more than 9,100 people have been reached with health promotion and disease prevention messages—primarily focused on communicable diseases, and in particular on measles, following the outbreak declared by the *Ministry of Health* in early 2025. Activities are ongoing in the branches of *Taroudant* and *Chichaoua* and will soon begin in the branch of *El-Haouz*.

In *Taroudant*, as of March 2025, approximately 103 door-to-door visits and 130 group awareness sessions have been conducted across 28 villages, reaching around 6,500 people. A team of about 20 trained volunteers works alongside the CBHFA branch team to deliver key health messages to remote communities.

In *Chichaoua*, around 20 CBHFA-trained volunteers have been active since October 2024. By March 2025, community-based health activities have been carried out in 17 villages, reaching approximately 2,700 people through 57 door-to-door awareness campaigns and around 35 group awareness sessions.

### (C.2) Train staff and volunteers on approaches and/or topics for implementation of Disease Prevention and Health Promotion activities

Up to March 2025, four formal community-based health trainings have been conducted. The first was held in July 2024 at national level, training 21 participants from earthquake-affected branches, as well as health focal points from other branches across Morocco. This training was later replicated in the three target branches: in *Taroudant* (September 2024), *Chichaoua* (October 2024), and finally in *El-Haouz* (March 2025).

The content of the trainings has remained consistent, covering core modules of the CBHFA approach, the specific module on communicable diseases, and key information from the Psychosocial *First Aid* (PFA) module.

| Training Topic                      | Location, date & duration |          |            | Participants |                   |       |         |                         |
|-------------------------------------|---------------------------|----------|------------|--------------|-------------------|-------|---------|-------------------------|
|                                     | Branch/<br>national       | Duration | Date       | # Staff      | # Volun-<br>teers | # Men | # Women | # Total<br>participants |
| PSS                                 | <i>Marrakech</i>          | 1 day    | Sep. 2023  | 0            | 20                | 11    | 9       | 20                      |
| PSS                                 | <i>Marrakech</i>          | 1 day    | Oct. 2023  | 0            | 10                | 6     | 4       | 10                      |
| Multi-sectoral emergency response   | <i>Chichaoua</i>          | 3 days   | Oct. 2023  | 0            | 29                | 19    | 10      | 29                      |
| Multi-sectoral emergency response   | <i>Chichaoua</i>          | 3 days   | Nov. 2023  | 14           | 0                 | 4     | 10      | 14                      |
| Multi-sectoral emergency response   | <i>Marrakech</i>          | 3 days   | Nov. 2023  | 24           | 0                 | 16    | 8       | 24                      |
| Multi-sectoral emergency response   | <i>Marrakech</i>          | 3 days   | Jan. 2024  | 0            | 27                | 11    | 16      | 27                      |
| CBHFA / communicable diseases / PFA | National                  | 6 days   | July 2024  | 21           | 0                 |       |         | 21                      |
| CBHFA / communicable diseases / PFA | <i>Taroudant</i>          | 4 days   | Sept. 2024 | 0            | 22                |       |         | 22                      |
| CBHFA / communicable diseases / PFA | <i>Chichaoua</i>          | 4 days   | Oct. 2024  | 1            | 19                |       |         | 20                      |
| CBHFA / communicable diseases / PFA | <i>El-Haouz</i>           | 4 days   | Mar. 2025  | 0            | 21                |       |         | 21                      |
| <b>TOTAL</b>                        |                           |          |            | <b>60</b>    | <b>148</b>        |       |         | <b>208</b>              |

Table 26 - Community-based Health - Trainings

### (C.3) Form Community Committees to foster CB-Health interventions

As part of the ongoing community-based health programme, branch teams are increasingly engaging with communities—identifying and training local individuals in basic health messages so they can serve as health focal points within their own communities. As of the end of March 2025, at least three villages in *Taroudant* and two in *Chichaoua* have established community health focal points who work closely with the *CBHFA* teams from *MRC*.

Community committees are intended to function as local structures comprising individuals capable of continuing to disseminate *Community-Based Disaster Risk Reduction (CB-DRR)* and *Community-Based Health and First Aid (CB-HFA)* messages after volunteers cease their visits. The strategy involves volunteers, who visit these communities, identifying and gradually building the capacities of local individuals willing to undertake this responsibility. Typically, a community committee is led by the community leader and includes members with expertise in various areas such as *Disaster Risk Reduction (DRR)*, health, and *Water, Sanitation, and Hygiene (WASH)*.

## (D) HEALTH CARE CENTRES REHABILITATION

### (D.1) Conduct a needs assessment to identify the 20 Health Centres and assess their needs in terms of equipment and rehabilitation

A coordination meeting focused on the health component for the earthquake response was held on 16<sup>th</sup> February amongst *MRC* and their partner which led to the decision to conduct an assessment of health centres in the 4 provinces of intervention (*Chichaoua, El-Haouz/Marrakesh, Taroudant and Azilal*) to assess needs and guide the programmatic support strategy for the health sector. *French Red Cross* will be the co-lead for this assessment and will provide resources and technical support to *MRC* for this undertaking.

### (D.2) Rehabilitate and provide medical supplies and equipment for 20 health care centres

Following on from the assessment which is to be conducted around mid-2025 the priority health centres will be identified together with the delegations of the *Ministry of Health*. Different partners will be able to financially support the provision of medical equipment and supplies (*Qatari Red Crescent, French Red Cross and IFRC*). The material support might be complemented by other activities and specific trainings when relevant.



## WATER, SANITATION AND HYGIENE

People reached: 26,680 individuals

### Objectives:

Contribute to enhancing sustainable water, sanitation, and hygiene infrastructures and resilient behaviours in communities and institutions to promote well-being and dignity.

### Key indicators

| Indicator (number)                                                                                            | Actual | Target |
|---------------------------------------------------------------------------------------------------------------|--------|--------|
| # Number of water points installed / rehabilitated                                                            | 222    | -      |
| # Number of toilets installed / rehabilitated                                                                 | 252    | -      |
| # Number of showers installed / rehabilitated                                                                 | 160    | -      |
| % Percentage of beneficiaries that are satisfied with the implemented <i>WASH</i> infrastructure works        | TBC    | 80%    |
| # Number of health and hygiene kits (hygiene kits, dignity kits, packs of sanitary pads, buckets) distributed | 37,928 | 43,414 |
| # Number of safe water storage items distributed (jerry cans) distributed                                     | 7,729  | -      |
| # Number of <i>MRC</i> staff/volunteers trained in the implementation/operation of <i>WASH</i> activities     | 309    | 300    |

## (A) INCREASE ACCESS TO HEALTH AND HYGIENE ITEMS

### (A.1) Distribute health, hygiene and dignity kits

As the operation transitions into the recovery phase, efforts are focused on completing the in-kind distributions of hygiene and dignity kits, along with other non-food items (NFIs), by the end of May 2025. The distribution strategy has been carefully structured to address specific needs, with dignity kits allocated at one per woman aged 12 to 59 years. Hygiene kits are distributed based on household size: one kit for households with up to five persons, two kits for households with five to ten persons, and three kits for households exceeding ten persons. Buckets or jerrycans are provided at one per household with up to five persons and two per household with more than five persons. These distributions are conducted alongside hygiene promotion sessions to ensure awareness and encourage proper usage. Since we are now in the reconstruction phase, no additional kit distribution will happen after May 2025.

- *In-kind modality: health/hygiene items*

|                      | Hygiene & Dignity Kits                    |                          |             |              |                        | Other NFI |
|----------------------|-------------------------------------------|--------------------------|-------------|--------------|------------------------|-----------|
|                      | Hygiene Kits for households <sup>46</sup> | Hygiene Kits for schools |             | Dignity Kits | Packs of Sanitary Pads | Buckets   |
| Chichaoua            | 3,242                                     | -                        | -           | 1,412        | 4,645                  | 1,009     |
| Taroudant            | 3,179                                     | -                        | -           | 1,572        | 1,623                  | 1,625     |
| El-Haouz / Marrakesh | 6,554                                     | Girls: 1,269             | Boys: 1,578 | 4,017        | 2,578                  | 3,625     |
| Azilal               | -                                         | -                        | -           | -            | -                      | -         |
| TOTAL                | 12,975                                    | 2,847                    |             | 7,001        | 8,846                  | 6,259     |

Table 27 - Health and hygiene kits (hygiene kits, dignity kits, packs of sanitary pads) and buckets distributed

### (A.2) Conduct hygiene/health promotion sessions [topics: handwashing or use of health and hygiene items distributed]

Hygiene Promotion sensitization took place along with the distributions of items. As for handwashing, hygiene promotion sessions were held in 15 villages in Taroudant and 14 in Chichaoua. Preliminary findings from the baseline show that 67% of beneficiaries know at least 3 out of the 5 critical moments to wash their hands.

|                      | # Villages reached by HP / items distribution | # Households reached by HP / items distribution | # Individuals reached by HP / items distribution |
|----------------------|-----------------------------------------------|-------------------------------------------------|--------------------------------------------------|
| Chichaoua            | 16                                            | 1,028                                           | 4,285                                            |
| Taroudant            | 41                                            | 1,913                                           | 7,031                                            |
| El-Haouz / Marrakesh | 46                                            | 3,015                                           | 12,657                                           |
| Azilal               | -                                             | -                                               | -                                                |
| <b>TOTAL</b>         | <b>103</b>                                    | <b>5,956</b>                                    | <b>23,973</b>                                    |

Table 28 - Hygiene promotion on the items distributed

(A.3) Scale up menstrual health project

In early 2024, a pilot project in Ait-Youssef (*Taroudant*) introduced reusable sanitary pad production through community workshops, engaging 17 women who sewed and tested the pads. Following positive feedback, the initiative was expanded to six additional villages, reaching 116 more participants. To date, 133 women have taken part in the activity, supported by Focus Group Discussions (FGDs) that emphasize menstrual hygiene education and proper pad maintenance. The project further extended its impact through volunteer training in *Chichaoua*, where 17 individuals learned pad-making techniques.

Plans are underway to scale up efforts across three regions, offering sustainable menstrual hygiene solutions. The WASH team aims to collaborate with partner NGO to enhance its approach using best practices from previous menstrual health projects.

(B) INCREASE ACCESS TO SAFE WATER

(B.1) Distribute water storage items

WASH teams in *El-Haouz*, *Chichaoua*, and *Taroudant* distributed jerrycans to households in *douars* affected by the earthquake, to ensure a safe transport and storage of drinking water. This was done jointly with hygiene awareness sessions.

- *Distribution / In-kind modality: water storage items*

|                            | Jerry cans   |
|----------------------------|--------------|
| <i>Chichaoua</i>           | 2,010        |
| <i>Taroudant</i>           | 3,492        |
| <i>El-Haouz /Marrakesh</i> | 2,227        |
| <i>Azilal</i>              | -            |
| <b>TOTAL</b>               | <b>7,729</b> |

Table 29 – Jerrycans distributed

(B.2) Rehabilitate water sources and facilities

- *Water sources (spring catchment, borehole, well)*

*Activity not started yet.* This activity is planned for development during the upcoming semester, following assessments conducted in *El-Haouz*, *Chichaoua*, and *Taroudant* by the Moroccan Red Crescent (MRC) Disaster Risk Reduction teams. These assessments highlighted needs expressed by affected communities, primarily within the WASH sector. The MRC strategy focuses on reinforcing and repairing existing water sources (spring catchments, boreholes, wells\_ and water supply infrastructure rather than constructing new ones. Local communities and water users' associations will carry out this work wherever possible, with financial and technical support provided by MRC and IFRC WASH teams.

- *Water supply systems*

<sup>46</sup> Families with more than five members received two hygiene kits.

WASH teams in *El-Haouz* and *Taroudant* have connected and rehabilitated existing gravity water supply systems to new water points as well as sanitation modules, for a total of 47 (32 in *El-Haouz/Marrakesh* and 15 in *Taroudant*).

- *Water storage systems*

The WASH team in *Taroudant* installed two poly tanks to facilitate storage of water in two *douars* in *Taroudant*. Later on, the team explores the possibility to construct/rehabilitate concrete tanks as well.

- *Water points*

WASH teams in *El-Haouz*, *Chichaoua*, and *Taroudant* have built new concrete water points. Additionally, new water points were directly connected to the sanitation modules (one water point / tap per shower, one water point / tap per toilet).

|                            | # Number of water points installed | # Number of water points rehabilitated |
|----------------------------|------------------------------------|----------------------------------------|
| <i>Chichaoua</i>           | 80                                 | -                                      |
| <i>Taroudant</i>           | 99                                 | 1                                      |
| <i>El-Haouz /Marrakesh</i> | 42                                 | -                                      |
| <i>Azilal</i>              | -                                  | -                                      |
| <b>TOTAL</b>               | <b>221</b>                         | <b>1</b>                               |

*Table 30 - Water points installed /rehabilitated*

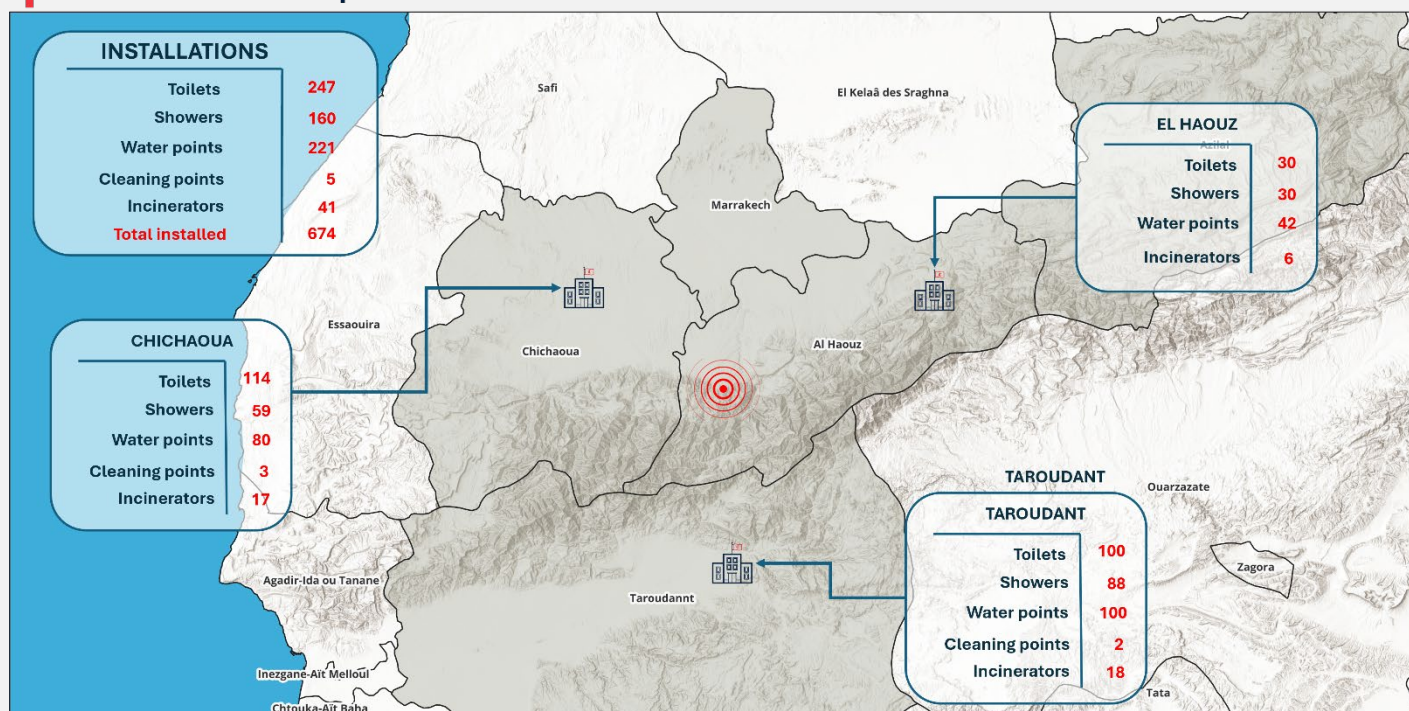
### (B.3) Ensure water quality through frequent monitoring

The monitoring component of this activity has not yet started. However, six *DelAgua* water analysis kits and reagents have been ordered at regional level: one *DelAgua* kit for MRC Office in *Rabat*, one for *Marrakesh*, one for *El-Haouz*, one for *Chichaoua*, one for *Taroudant*, and one for *Azilal*. MRC staff and volunteers will receive a proper training in May 2025 on how to use these water analysis kits and interpret the results for chemical, biological, and physical water quality indicators.

## (C) IMPROVE ACCESS TO SECURE SANITATION FACILITIES

### Morocco Earthquake 2023

Wash installations sept. 2023-March 2025



Map 3 - WASH installations

### (C.1) Install/rehabilitate toilets and bathing facilities

The WASH teams in *El-Haouz*, *Chichaoua*, and *Taroudant* installed sanitation modules (Turkish toilets and showers) in the *douars* affected by the earthquake based on the needs expressed by the communities during field assessments. In *Taroudant*, some sanitation modules were relocated at the request of communities that moved back to locations where they reconstructed their house.

- *Toilets (Turkish toilets or English seats for Persons with Reduced Mobility / PRM)*

WASH teams have taken in consideration the specific needs of persons with reduced mobility (PRM) by installing English seat toilets instead of Turkish toilets, to facilitate their access and usage.

|                             | # Number of Turkish toilets<br><i>installed</i> | # Number of Turkish toilets<br><i>rehabilitated</i> | # Number of English seat<br>toilets (for PRM)<br><i>installed</i> |
|-----------------------------|-------------------------------------------------|-----------------------------------------------------|-------------------------------------------------------------------|
| <i>Chichaoua</i>            | 114                                             | -                                                   | -                                                                 |
| <i>Taroudant</i>            | 98                                              | 5                                                   | 2                                                                 |
| <i>El-Haouz / Marrakesh</i> | 32                                              | -                                                   | 1                                                                 |

|               |            |          |          |
|---------------|------------|----------|----------|
| <i>Azilal</i> | -          | -        | -        |
| <b>TOTAL</b>  | <b>244</b> | <b>5</b> | <b>3</b> |

*Table 31 - Toilets installed*

In *Taroudant*, the teams installed the 98 toilet modules across, 18 villages, reaching 3,171 individuals.



*Photo 9 - Photo - Installation of toilets modules for Chichaoua schools (November 2024)*

#### ▪ *Bathing facilities (showers, hammams, etc)*

An assessment conducted by MRC Hygiene Promotion Officers revealed that women in the *douars* affected by the earthquake in *El-Haouz*, *Chichaoua*, and *Taroudant* strongly prefer traditional hammams over showers for personal hygiene. This preference is rooted in cultural habits and the sense of privacy that hammams provide, aligning closely with their values and practices.

|                             | # Number of showers<br><i>installed</i> | # Number of showers<br><i>dismantled</i> <sup>47</sup> | # Number of showers<br><i>relocated</i> <sup>48</sup> |
|-----------------------------|-----------------------------------------|--------------------------------------------------------|-------------------------------------------------------|
| <i>Chichaoua</i>            | 59                                      | -                                                      | -                                                     |
| <i>Taroudant</i>            | 85                                      | 6                                                      | 5                                                     |
| <i>El-Haouz / Marrakesh</i> | 30                                      | -                                                      | -                                                     |

<sup>47</sup> Installed then requested to be dismantled by community/authorities)

<sup>48</sup> Dismantled from one place, reinstalled in another)

|               |            |          |          |
|---------------|------------|----------|----------|
| <i>Azilal</i> | -          | -        | -        |
| <b>TOTAL</b>  | <b>172</b> | <b>6</b> | <b>5</b> |

Table 32 - Bathing facilities installed

The *Moroccan Red Crescent (MRC)* is exploring a partnership with local organizations to support the construction of traditional hammams in *douars* affected by the earthquake in *El-Haouz*, *Chichaoua*, and *Taroudant*. These hammams will be equipped with solar water heater systems as a sustainable alternative to wood-burning for heating water.

Grey water from the hammams will undergo a two-step treatment process: first, through a grease trap, and then through a constructed wetland. Once treated, the water will be repurposed based on community preferences, such as irrigating community gardens, orchards, crops, or providing water for livestock.

The operation and maintenance of the hammams will be managed by the community, with particular emphasis on engaging a group of women who will oversee daily operations. Their efforts will be funded through user fees, fostering local ownership and sustainability of the initiative.

## (C.2) Support Sanitation Modules Management Committees (SMMC)

The WASH teams in *El-Haouz*, *Chichaoua*, and *Taroudant* organize Sanitation Modules Management Committees jointly with the implementation of sanitation modules for the communities. These committees oversee the operation and maintenance of the modules, ensuring its cleanliness.

Community participation is an essential component of *WASH* activities, as demonstrated by mapping exercises guiding the selection of sites for sanitation facilities, fostering a sense of ownership; or by the creation and training of Hygiene Clubs, which will ensure the proper maintenance of facilities and the spread of key messages in the community.

## (D) IMPROVE MANAGEMENT OF SOLID WASTE

### (D.1) Install/rehabilitate Solid Waste Management (SWM) storage/facilities

In *El-Haouz*, *Chichaoua*, and *Taroudant*, *MRC* Hygiene Promotion Officers have installed incinerators and conducted awareness sessions on solid waste management, addressing a significant issue in the earthquake-affected *douars*. Due to their remote locations, these *douars* lack solid waste collection services, leading to the improper disposal or open-air burning of waste, which poses serious health and environmental risks.

|                           | # Number of incinerators <i>installed</i> | # Number of landfills /<br>solid waste pits <i>dug</i> |
|---------------------------|-------------------------------------------|--------------------------------------------------------|
| <i>Chichaoua</i>          | 17                                        | -                                                      |
| <i>Taroudant</i>          | 18                                        | 4                                                      |
| <i>El-Haouz/Marrakesh</i> | 6                                         | -                                                      |
| <i>Azilal</i>             | -                                         | -                                                      |
| <b>TOTAL</b>              | <b>41</b>                                 | <b>4</b>                                               |

Table 33 - Solid Waste Management facilities installed/rehabilitated

The hygiene promotion sessions emphasize the importance of reducing, reusing, and recycling solid waste. Waste that cannot be reused or recycled is safely managed by burning it in the incinerators or burying it in solid waste pits. To ensure safety, MRC activities include fencing off incinerators and waste pits to prevent hazards to children and the community. Access to these facilities is restricted to members of a solid waste management committee, selected by the community, to oversee and maintain proper waste management practices.

## (D.2) Organise clean-up campaign and raising awareness on SWM (Solid Waste Management)

- *Clean-up campaigns*

|                             | # Number of clean-up campaigns<br>(organised by MRC) | # Number of cleaning-up campaigns<br>(initiated and organised by<br>communities) |
|-----------------------------|------------------------------------------------------|----------------------------------------------------------------------------------|
| <i>Chichaoua</i>            | 5                                                    | -                                                                                |
| <i>Taroudant</i>            | 12                                                   | 10                                                                               |
| <i>El-Haouz / Marrakesh</i> | -                                                    | -                                                                                |
| <i>Azilal</i>               | -                                                    | -                                                                                |
| <b>TOTAL</b>                | <b>17</b>                                            | <b>10</b>                                                                        |

Table 34 - SWM - Clean-up campaigns

WASH teams in *Chichaoua* and *Taroudant* organized cleaning up campaigns to raise awareness about the importance of a clean environment to mitigate health and environmental hazards. In *Taroudant*, most cleaning up campaigns were consequently initiated and organized by the communities, following efficient solid waste management sessions by MRC HP officer in the *douars* of intervention. 21 villages in Taroudant benefited from hygiene awareness sessions on solid waste management, reaching 326 individuals.

## (E) WASH CAPACITY BUILDING

| Training Topic                         | Location & date  |           | Participants |               |       |         |                      |
|----------------------------------------|------------------|-----------|--------------|---------------|-------|---------|----------------------|
|                                        | Branch /national | Date      | # Staff      | # Volun-teers | # Men | # Women | # Total participants |
| Basic Hygiene Promotion                | Chichaoua        | Oct. 2023 | -            | 5             | 3     | 2       | 5                    |
| Hardware SHERE Standards               | Chichaoua        | Nov. 2023 | -            | 10            | 7     | 3       | 10                   |
| Basic WASH/HP Training                 | Taroudant        | Nov. 2023 | -            | 34            | 20    | 14      | 34                   |
| Basic WASH/HP Training                 | Taroudant        | Nov. 2023 | -            | 21            | 7     | 14      | 21                   |
| Hygiene Promotion                      | Chichaoua        | Dec. 2023 | -            | 11            | 5     | 6       | 11                   |
| Hygiene Promotion refresher            | Chichaoua        | Jan. 2024 | -            | 11            | 6     | 5       | 11                   |
| Hygiene Promotion updated second level | Chichaoua        | Jan. 2024 | -            | 8             | 2     | 6       | 8                    |

|                                                                                            |                      |           |           |            |            |            |            |
|--------------------------------------------------------------------------------------------|----------------------|-----------|-----------|------------|------------|------------|------------|
| Module installation and water supplier training                                            | Chichaoua            | Feb. 2024 | -         | 13         | 9          | 4          | 13         |
| Hygiene Promotion training of trainers                                                     | Chichaoua            | Feb. 2024 | -         | 5          | 2          | 3          | 5          |
| Basic WASH/HP Training                                                                     | Taroudant            | Feb. 2024 |           | 15         | 7          | 8          | 15         |
| Basic WASH/HP Training                                                                     | Taroudant            | Mar. 2024 |           | 45         | 29         | 16         | 45         |
| Basic Hygiene Promotion training                                                           | Taroudant            | Mar. 2024 | -         | 45         | 17         | 28         | 45         |
| Basic Hygiene Promotion Training for new volunteers and use of walkie-talkies in the field | Taroudant            | Mar. 2024 | 1         | 27         | 17         | 11         | 28         |
| Basic WASH Training for new volunteers                                                     | Taroudant            | Mar. 2024 | 1         | 27         | 17         | 11         | 28         |
| CTED training                                                                              | Taroudant            | Apr. 2024 | -         | 11         | 2          | 9          | 11         |
| Training on the making of re-usable sanitary pads                                          | Taroudant            | Apr. 2024 | -         | 18         | 3          | 15         | 18         |
| Global and HH Water treatment training                                                     | Chichaoua            | Apr. 2024 | -         | 12         | 6          | 6          | 12         |
| Production of reusable sanitary pads                                                       | Chichaoua            | Apr. 2024 | -         | 17         | 3          | 14         | 17         |
| Fields Activities reporting                                                                | Chichaoua            | May 2024  | 1         | 10         | 5          | 6          | 11         |
| Hygiene Promotion                                                                          | El-Haouz             | May 2024  | -         | 16         | 9          | 7          | 16         |
| WASH in Emergency training                                                                 | El-Haouz             | May 2024  | -         | 30         | 15         | 15         | 30         |
| IFRC training - The 8 Steps for Hygiene Promotion in Emergencies (French) (online)         | Taroudant            | May 2024  | 1         | -          | 1          | -          | 1          |
| Hygiene Promotion during distribution training                                             | Taroudant            | June 2024 | -         | 16         | 3          | 13         | 16         |
| SPHERE minimum WASH standards                                                              | Taroudant            | June 2024 | 3         | -          | 2          | 1          | 3          |
| Hygiene Promotion basic training                                                           | Taroudant            | July 2024 | 3         | 12         | 4          | 11         | 15         |
| IFRC training - The 8 Steps for Hygiene Promotion in Emergencies (online)                  | Taroudant            | July 2024 | 1         | -          | -          | 1          | 1          |
| Hygiene Promotion training                                                                 | Taroudant            | July 2024 | -         | 13         | 2          | 11         | 13         |
| Regional Emergency WASH Training in Syria                                                  | Chichaoua /Taroudant | Aug. 2024 | 2         | -          | 2          | 0          | 2          |
| WASH and HP needs assessments and reporting training                                       | Taroudant            | Aug. 2024 | 3         | 14         | 3          | 14         | 17         |
| WASH in Emergencies (online)                                                               | Taroudant            | Aug. 2024 | 1         | -          | 1          | -          | 1          |
| <b>TOTAL</b>                                                                               |                      |           | <b>17</b> | <b>446</b> | <b>209</b> | <b>254</b> | <b>463</b> |

Table 35 - WASH trainings and capacity building

A WASH training and workshop anticipating 20+ participants from *MRC*, *IFRC*, *German Red Cross*, and *GIZ* is being organised early May. The agenda will include the following topics: NRC WASH Strategy, Partnership with *GIZ*, Water Analysis (Theory and Practice with *DeAgua* Kit), Ecological Sanitation Solutions, Water resources (springs, boreholes, rivers, wells), water supply systems, hygiene promotion in schools and communities (general hygiene, handwashing, solid waste management, home food and water storage, Diagram F.) The aim will be for all participants to gain a common understanding of the WASH operational strategy and next steps as well as practical skills.

Efforts to build WASH capacity for staff and volunteers in Azilal are dependent on completing key preliminary steps, including team recruitment. The recruitment of a WASH Officer and an HP Officer for *Azilal* requires approval from

the president of the *MRC Azilal* branch and overall *MRC* management. This matter will be addressed during an upcoming visit by *MRC* management to *Demnate (Azilal)* in May 2025. Also in May, a field visit is planned for the during which the *El-Haouz* WASH Officer will assess the state of water, sanitation infrastructure, and hygiene in the area.



## RISK REDUCTION, CLIMATE ADAPTATION AND RECOVERY (DRR)

People reached: 15,793 individuals

### Objectives:

Strengthen resilience and capacities of disaster and crisis-affected communities through climate-smart community-based risk reduction actions informed by enhanced Vulnerability Capacity Assessments and advanced planning

Support *MRC* to improve its *Disaster Risk Management* and Disaster Preparedness capacity

### Key indicators

| Indicator                                                                      | Actual                       | Target            |
|--------------------------------------------------------------------------------|------------------------------|-------------------|
| # Number of national Trainings of Trainers (ToT) is conducted on R2CR via eVCA | 1                            | 1                 |
| # Number of participants to cascade trainings R2CR via eVCA                    | 21                           | 60                |
| # Number of communities with eVCA-Plan of Action finalised                     | 87 (initiated) <sup>49</sup> | 112 <sup>50</sup> |
| # Number of individuals (communities) reached by <i>CB-DRR</i> activities      | 15,793 <sup>51</sup>         | 35,000 (TBC)      |

### (A) ROADMAP TO COMMUNITY RESILIENCE (R2CR) VIA ENHANCED VULNERABILITY CAPACITY ASSESSMENT (eVCA)

A German Red Cross (GRC) Disaster Risk Reduction (DRR) Delegate, who serves as the Federation-wide technical co-lead for community-based DRR, was deployed in February 2024. Since then, coordinated efforts with the Moroccan Red Crescent (MRC) and other Movement partners have significantly advanced the implementation of the Roadmap to Community Resilience (R2CR) via the enhanced Vulnerability and Capacity Assessment (eVCA) approach.

Several key preparatory and implementation steps were achieved:

- Establishment of the technical working group on community-based DRR.
- Contextualization and adaptation of the eVCA package, including revised R2CR steps, eVCA tools, and reporting formats.
- Delivery of a 2-day eVCA contextualization workshop (April 2024).
- Preparatory work for integration with *Community-Based Health* training (June 2024).
- Implementation of the one-week eVCA Training of Trainers (ToT) (July 2024).
- eVCA cascade training in: *Chichaoua* (August 2024), *El-Haouz* (October 2024), *Taroudant* (November 2024)

<sup>49</sup> eVCA process is ongoing. Activities have not yet reached the final step of having a Plan of Action finalised.

<sup>50</sup> 17 Chichaoua, 38 Taroudant, 40 El-Haouz/Marrakesh, Azilal 17.

<sup>51</sup> This figure represents the residents of the 87 reached communities (villages) across the three provinces.

- Roll-out of *eVCA* activities in: *Chichaoua* (September 2024), *El-Haouz* (October 2024), *Taroudant* (November 2024)
- *eVCA* reporting finalization and next steps (March 2025)

In addition, activities have recently started in a fourth province, where community-based *DRR* has been incorporated into the upcoming intervention portfolio. A recruitment process is currently ongoing for a Community Resilience Officer (CRO), who will be based in this new province to ensure the quality and consistency of implementation.

#### (A.1) Roll out *R2CR* via *eVCA ToT* for *MRC* staff and volunteers

No additional updates since the last reporting period. The *eVCA Training of Trainers (ToT)* was successfully conducted in July 2024 at the *MRC Training Centre* in *Mehdia*. The training involved 21 staff and volunteers from more than ten branches, along with five representatives from the *Ministry of Interior*. This *ToT* laid the foundation for the cascade trainings in the three initial target provinces.

#### (A.2) Train *MRC* staff and volunteers in *eVCA* and Risk Reduction

|                                         | Location, date & duration |          |              | Participants |               |                      |
|-----------------------------------------|---------------------------|----------|--------------|--------------|---------------|----------------------|
| Training Topic                          | Branch/national           | Duration | Date         | # Staff      | # Volun-teers | # Total participants |
| <i>eVCA</i> Training of Trainers (ToT)  | National                  | 5 days   | July 24      | 9            | 16            | 25                   |
| Fire management training                | <i>Chichaoua</i>          | 1 day    | August 24    | 2            | 13            | 15                   |
| <i>eVCA</i> branch cascade training I   | <i>Chichaoua</i>          | 4 days   | September 24 | 4            | 17            | 21                   |
| <i>eVCA</i> branch cascade training II  | <i>El-Haouz</i>           | 4 days   | October 24   | 4            | 18            | 22                   |
| <i>Kobo Toolbox</i>                     | National                  | 1 day    | August 24    | 3            | 23            | 26                   |
| <i>eVCA</i> branch cascade training III | <i>Taroudant</i>          | 4 days   | November 24  | 4            | 18            | 22                   |
| <i>Sketchmap</i> tool                   | National                  | Half day | March 25     | 10           | 16            | 26                   |
| Fire management training                | <i>El-Haouz</i>           | 1 day    | March 25     | 3            | 14            | 17                   |
| Fire management training                | <i>Taroudant</i>          | 1 day    | March 25     | 0            | 19            | 19                   |
| <b>TOTAL</b>                            |                           |          |              | <b>41</b>    | <b>167</b>    | <b>208</b>           |

Table 36 - *DRR* trainings

Cascade trainings were completed in all three initial provinces of operation: these sessions ensured that each operational branch has a locally based team of trained facilitators capable of delivering the *eVCA* process in targeted communities. A fourth cascade training is planned to take place in the province of *Azilal* as soon as the branch will be ready to implement, and the team identified.

### (A.3) Conduct eVCA in targeted communities to evaluate hazards, risks, and vulnerabilities

Implementation of the eVCA process has significantly progressed since the last reporting period, with activities being carried out across all three original provinces:

- *Taroudant*: The eVCA was completed in 38 targeted communities (*douars*) by the end of February 2025. Four communities were removed from the initial target list due to the population having returned to their original housing, with no ongoing recovery activities.
- *Chichaoua*: All 17 originally planned communities (*douars*) have been successfully assessed.
- *El-Haouz*: The eVCA has been conducted in 32 out of 41 targeted communities (*douars*). Further roll-out in the remaining communities is planned.



Photo 10 - eVCA session with communities in El-Haouz province

Each assessment involved participatory community engagement, led by the *Community Resilience Officers* and trained volunteers, using the standardized eVCA tools. These assessments have enabled a comprehensive understanding of local risks, vulnerabilities, and capacities.

As of March 2025, the three branches are finalizing the analysis and documentation of eVCA findings. The resulting community-level reports will inform the development of local action plans, which are scheduled to be presented to relevant authorities by early April 2025. These plans are expected to guide the next phase of recovery and resilience programming.

## (B) STRENGTHENING COMMUNITY RESILIENCE THROUGH *COMMUNITY-BASED DISASTER RISK REDUCTION (CB-DRR)* ACTIVITIES

*Community-Based Disaster Risk Reduction (CB-DRR)* activities have continued to scale across targeted areas, building on the outcomes of the eVCA process. Equipment distributions, trainings, and planning for micro-projects and school-level interventions are advancing as the programme transitions into its resilience phase.

### (B.1) Provide CB-DRR equipment and trainings to local communities and schools

In *Chichaoua*, the distribution of emergency safety kits and the accompanying training have been completed across all 17 targeted *douars*, including one additional community added during the reporting period. A total of 59 emergency kits were distributed.

In *Taroudant*, the same emergency safety boxes have been distributed across 38 communities, with a total of 96 kits delivered. These distributions were supported by fire management and basic emergency preparedness trainings aimed at strengthening household- and community-level response capacities.

The standardised emergency kits include fire extinguishers and other key items and will be progressively distributed to remaining provinces in line with operational planning, ensuring consistency in support across all targeted communities.

#### (B.2) Support communities in implementing (*Risk Reduction*) micro-projects [post *eVCA*]

The implementation of *community-led Risk Reduction (RR)* micro-projects remains dependent on the completion of the *eVCA* reports and the development of corresponding community action plans. Based on current planning, implementation is expected to begin in mid-2025, starting with selected pilot communities that have completed the *eVCA* process.

#### (B.3) Support schools in implementing *Risk Reduction* measures

Pilot activities with schools are planned to begin before the end of the 2024/2025 academic year. During the summer period, volunteers will be trained to support the implementation of school-based risk reduction measures. Full roll-out of activities is anticipated to begin with the start of the 2025/2026 school year, in close collaboration with local education authorities and based on the priorities identified through the *eVCA* process.

### (C) IMPROVE *MRCs DISASTER RISK MANAGEMENT* AND DISASTER PREPAREDNESS CAPACITY

#### (C.1) Support *MRC* to implement its *Preparedness for Effective Response (PER)* Plan of Action

From 7 to 11 October 2024, a *Preparedness for Effective Response (PER)* orientation workshop was held in *Marrakesh*. This workshop aimed to familiarise *MRC* teams with the *PER* approach and use the lessons learned from the earthquake operation to implement a short-term action plan to improve readiness for imminent interventions and prepare for the official revision of the *PER* scheduled for the end of 2025. Indeed, *MRC* needed to revise its *PER Plan of Action*, since the last revision was held in 2021.

23 participants from headquarters and the national team were present, as well as representatives from the *Taroudant*, *Chichaoua*, *Marrakech*, *El-Haouz*, *Rabat*, *Oujda*, *Safi*, and *Errachidia* branches and representatives from *IFRC*, the *French* and *German Red Cross*.

The first two days were devoted to explaining the *PER* approach (objectives, benefits, mechanisms, methodology, etc.). This was followed by a review of the results of the 2021 *PER* process. The categories and sub-categories of the response mechanism were evaluated, taking into account the actual capacity present, especially everything that has been done since the earthquake operation started. The main issues and gaps identified, and therefore the prioritisation of the resulting categories, are relatively close to those of 2021. At the end of the workshop, an action plan for the next nine months was drawn up and validated. This action plan, which was intended to be as

realistic as possible, includes activities aimed at improving readiness for imminent action and preparing for the official revision of the *PER* at the end of 2025. The action plan included the set-up of a *PER* committee, which was effectively carried out. The committee has since met monthly to support and monitor the progress of the action plan.

#### (C.2) *MRC's* staff and volunteers' capacity strengthening on support services (FIN, IM, and LOGS) for Disaster Management

Since the beginning of the earthquake operation, the support services department has been focusing on putting in place reliable, efficient systems to guarantee the implementation of activities. From mid-2025 onwards, the support services departments will be able to focus part of their efforts on preparedness activities relying on day-to-day implementation mechanisms that the teams have mastered after months of training and practice. However, all the capacity-building activities that have taken place over the last 18 months have always included an approach and objectives aimed at improving disaster preparedness. For example, the logistics training held in *Rabat* was opened to the national level to train the earthquake branches, and other branches that might need to organise a response in the future.

#### (C.3) Work on *MRC's* scenario planning, contingency planning and simulation exercises

The review of the *PER* scheduled for the end of 2025 will result in a specific programme to implement the action plan, which will most certainly include simulation and scenario exercises.

*This approach will be adapted at branch level within the scope of the branch development work.*

#### (C.4) Procure and preposition relief items in 4 provinces affected by the earthquake

Currently, no contingency stock has been allocated, as all available resources are designated for use during the ongoing operation. (See *Supply Chain Management* section for further details regarding logistical stocks). A contingency stock will be included Within the disaster preparedness process taking place alongside the operation.

#### (C.5) Support the development of *MRC's* branch level preparedness capacity

In 2025, *MRC* plans to conduct assessments at branch level based on the *PER* approach adapted to branches to provide a diagnostic and initiate the work on branch development in the branches supported by the operation. A methodology is being developed to guide this work which is expected to be initiated in the second quarter of 2025.

#### (C.6) Collaborate with local public authorities to strengthen their Disaster Response plans

During meetings with the *Direction des Affaires Intérieures (DAI)* in *El-Haouz* province, discussions were initiated to explore the prerequisites for supporting authorities in developing or updating disaster risk management tools. Subsequently, engagement with the head of the *Asni* district identified the *Talat N'Yacoub* commune as a priority for targeted support.

Currently, the possibility of assisting this commune in designing a contingency plan or communal development plan is under review, with final decisions to be made in consultation with local authorities. Additionally, preparations are underway for a pilot project to integrate *MRC's* efforts within local response frameworks, ensuring

a structured approach to disaster preparedness at the commune level. This initiative is expected to begin in the second quarter of 2025, in collaboration with municipal leadership.

#### (C.7) Support *MRC* in their *Disaster Law* advocacy to authorities

Meetings took place between the *MRC* and the *IFRC* regional Disaster Law Coordinator to discuss Disaster Law advocacy with authorities. A mission is to be scheduled in Q2-2025 to meet jointly (*MRC* & *IFRC*) with the relevant authorities' stakeholders and start the discussions.



## COMMUNITY ENGAGEMENT AND ACCOUNTABILITY

### Objectives:

Improve community trust and program and operation quality and sustainability by institutionalizing CEA in the *National Society*.

Integrate meaningful community participation, open and honest communication, and mechanisms to listen to and act on feedback throughout all stages of the programme cycle.

Ensure that selection criteria and targeting are discussed, agreed, and explained to communities, including how questions, complaints and issues will be managed

### Key indicators

| Indicator (number)                                                                                                                                                            | Actual               | Target |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|--------|
| # Total number MRC staff, volunteers and leadership trained/briefed on CEA                                                                                                    | 504                  | 400    |
| # Number of CEA trainings delivered                                                                                                                                           | 21                   | 30     |
| # Number of consultations/participatory planning sessions made with authorities and community leaders                                                                         | 72                   | 80     |
| # Number of functional feedback mechanisms established <sup>52</sup>                                                                                                          | 3                    | 4      |
| # Number of community feedback comments collected                                                                                                                             | 1'251                | 2'400  |
| # Number of community feedback reports produced                                                                                                                               | 4                    | 18     |
| # Number of feedback mechanism SOP (Standard Operating Procedures) document produced                                                                                          | 1                    | 1      |
| % Percentage of individuals (community members, including marginalized and at-risk groups) who report knowing how to provide feedback or make a complaint about the operation | 51,58% <sup>53</sup> | 80%    |
| # Number of information dissemination channels established by the <i>National Society</i>                                                                                     | 6                    | 6      |

<sup>52</sup> Mechanisms: hotline, Focus Group Discussion, Help desk, Face to face with volunteers. Hotline still to be implemented (see dedicated section (B)).

<sup>53</sup> Findings from preliminary results of the baseline multi-sectoral survey implemented in February 2025. See PMER dedicated section for further information.

The *MRC* has integrated Community Engagement and Accountability (*CEA*) into its humanitarian response, ensuring that the needs of affected communities guide its activities. Over the past 18 months, *CEA* principles have been included in Relief, Shelter, WASH, *DRR*, health, and *CVA* programming. The *MRC CEA* team has expanded with four *CEA* Officers, four assistants, and a national *CEA* Coordinator, supported by the *IFRC CEA* coordinator. The team has worked with *MRC* management to mainstream *CEA*, train volunteers, address training gaps, and improve community participation and communication. Ongoing efforts focus on further institutionalizing *CEA* within *MRC* and enhancing feedback channels for affected communities.

## (A) TRAINING AND CAPACITY BUILDING

### (A.1) Train *MRC* staff and volunteers on *CEA* approach and feedback mechanism

To enhance the knowledge and capacity of staff and volunteers for effective engagement with affected people and to build trust with communities, the *CEA* team has conducted various training sessions at both the branch and national levels since the beginning of the response. A total of 504 *MRC* staff and volunteers (258 men and 246 women) have been trained on the *CEA* approach and feedback mechanisms. Topics covered included communication, community participation, *CEA* integration in emergencies, feedback mechanisms, community understanding, Kobo Collect, and the Code of Conduct for staff and volunteers. The duration of the training sessions gradually increased from 3 to 5 hours (7 sessions), 1 day (3 sessions), 2 days (3 sessions), and up to 3 days (8 sessions), depending on the evolution of the response and emerging needs.

| Training Topic                                    | Branch /national | Duration | Date         | # Staff | # Volunteers | # Men | # Women | # Total participants |
|---------------------------------------------------|------------------|----------|--------------|---------|--------------|-------|---------|----------------------|
| Integration of <i>CEA</i> in emergency operations | <i>Chichaoua</i> | 3-5 h    | Oct. 23      | -       | 32           | 18    | 14      | 32                   |
| Integration of <i>CEA</i> in emergency operations | <i>Taroudant</i> | 3-5 h    | Nov. 23      | -       | 33           | 20    | 13      | 33                   |
| Integration of <i>CEA</i> in emergency operations | <i>El-Haouz</i>  | 3-5 h    | Nov. 23      | -       | 24           | 16    | 8       | 24                   |
| Integration of <i>CEA</i> in emergency operations | <i>Taroudant</i> | 3-5 h    | Nov. 23      | -       | 30           | 12    | 28      | 30                   |
| Integration of <i>CEA</i> in emergency operations | <i>Chichaoua</i> | 3-5 h    | Nov. 23      | -       | 14           | 4     | 10      | 14                   |
| 1 day <i>CEA</i> training                         | <i>Chichaoua</i> | 1 day    | Oct. 23      | -       | 10           | 5     | 5       | 10                   |
| 1 day <i>CEA</i> training                         | <i>Taroudant</i> | 1 day    | Nov. 23      | -       | 14           | 3     | 11      | 14                   |
| Integration of <i>CEA</i> in emergency operations | <i>El-Haouz</i>  | 3-5 h    | Jan. 24      | -       | -            | 11    | 18      | 29                   |
| 2 days <i>CEA</i> training                        | <i>Chichaoua</i> | 2 days   | Jan. 24      | 3       | 7            | 5     | 5       | 10                   |
| 2 days <i>CEA</i> training                        | <i>Marrakesh</i> | 2 days   | Jan. 24      | -       | -            | 6     | 12      | 18                   |
| 3 days <i>CEA</i> and Code of Conduct training    | <i>Chichaoua</i> | 3 days   | May-24       | -       | -            | 21    | 12      | 33                   |
| 3 days <i>CEA</i> and Code of Conduct training    | <i>Marrakesh</i> | 3 days   | May-24       | -       | -            | 8     | 16      | 24                   |
| 1 day <i>CEA</i> training                         | <i>Taroudant</i> | 1 day    | Jun-24       | -       | -            | 9     | 6       | 15                   |
| 3 days <i>CEA</i> and Code of Conduct training    | <i>Taroudant</i> | 3 days   | Jul – Aug 24 | -       | -            | 11    | 21      | 32                   |

|                                                   |                           |        |          |   |   |            |            |            |
|---------------------------------------------------|---------------------------|--------|----------|---|---|------------|------------|------------|
| 3 days <i>CEA</i> and Code of Conduct training    | <i>Chichaoua</i>          | 3 days | Sept. 24 | - | - | 15         | 9          | 24         |
| 3 days <i>CEA</i> and Code of Conduct training    | <i>Taroudant</i>          | 3 days | Sept. 24 | - | - | 11         | 21         | 32         |
| 2 <i>CEA</i> training for leaders                 | <i>Taroudant</i>          | 2 days | Sept. 24 | - | - | 7          | 2          | 9          |
| 3 days <i>CEA</i> and Code of Conduct training    | <i>Marrakesh/El Haouz</i> | 3 days | Oct. 24  | - | - | 9          | 11         | 20         |
| Integration of <i>CEA</i> in emergency operations | <i>Azilal</i>             | 3-5 h  | Nov. 24  | - | - | 23         | 12         | 35         |
| 3 days <i>CEA</i> and Code of Conduct training    | <i>Azilal</i>             | 3 days | Feb. 25  | - | - | 19         | 12         | 31         |
| <i>CEA</i> Workshop for leaders                   | National                  | 3 days | Feb. 25  | - | - | 25         | 10         | 35         |
| <b>TOTAL</b>                                      |                           |        |          |   |   | <b>258</b> | <b>246</b> | <b>504</b> |

Table 37 - *CEA* trainings



Photo 11 - *CEA* National workshop, Rabat (February 2025)

#### (A.2) Roll-out *CEA* briefings to senior leadership, including the Board and Governance

To further institutionalize the Community Engagement and Accountability (*CEA*) approach within the *Moroccan Red Crescent (MRC)*, particularly in the *Taroudant* branch, a two-day leadership workshop was held in the commune of *Ouled Berhil*. This workshop was attended by nine local committees and branch leaders<sup>54</sup> from *Oulad Tima*, *Taroudant*, *Ouled Berhil*, and *Talioum*. In addition, individual *CEA* briefing sessions were organized for a senior leadership team member and four branch presidents.

A national *CEA* workshop was organized in February 2025, involving the Board and Governance, with 35 participants from 18 provinces. Restitution sessions were also conducted in several branches, including Safi, to ensure the broader dissemination of *CEA* principles.

<sup>54</sup> 2 women and 7 men

To build on these efforts, a *CEA* capitalization and strategy workshop will be held for senior leadership, including the Board and Governance, in June 2025. The institutionalization of *CEA* is progressing steadily, with the *CEA* team expanding from 5 to 14 members, including hotline assistants. The implementation of the *CEA* plan is ongoing, and numerous branches outside the earthquake-affected areas are requesting *CEA* training for their volunteers, demonstrating a growing commitment to integrating *CEA* practices across the *MRC*.

### (A.3) Integrate *CEA* into all other relevant *National Society* trainings

Integrating Community Engagement and Accountability (*CEA*) principles into sector-specific training programmes, including those focused on Emergency Response, has been a key priority (as outlined under activity (A.1)). *CEA* sessions were successfully included in more than five WASH training programmes across *Chichaoua*, *El-Haouz*, and *Marrakesh*. This approach ensured that participants gained not only essential WASH knowledge but also an understanding of the critical role of community engagement and feedback in the effective implementation of these initiatives. Additionally, *CEA* was incorporated into the *PGI* national workshop held in December 2024.

### (A.4) Carry out regular field visits to support and mentor branches and programmes

Field visits are conducted by the *MRC-CEA* National Coordinator and/or the *IFRC CEA* Coordinator based on the *CEA* plan of action and expressed needs of the branches.

## (B) COMMUNITY FEEDBACK MECHANISM

### (B.1) Establish feedback mechanisms for the response operation<sup>55</sup>

The establishment of feedback mechanisms for the response operation has seen significant progress since November 2023. A pilot feedback system was implemented in the *Taroudant* and *Chichaoua* branches using a Kobo form, designed with *CEA* volunteers to collect feedback during distributions via face-to-face interactions. Reactive and proactive systems are now operational in three branches, with a proactive system also launched in *Azilal*. Capacity-building sessions were organized for *CEA* teams to improve feedback closure. *CEA* discussions are a regular part of operational meetings, addressing community concerns and needs. A finalized distribution FAQ list is now in use, helping volunteers respond effectively to community questions. The feedback tool has been revised and translated with the IM team, and decentralized logbooks have been implemented in each branch. *MRC* is also working to launch a national feedback hotline during the second quarter of 2025, establishing an anonymous feedback channel with the recruitment of a Community Feedback Delegate and hotline assistants.

In addition, the hotline initiative has made significant progress with the development of technical documents, including the Standard Operating Procedure. Job descriptions for Hotline Assistants were created, and three assistants were recruited. Trainings on *PGI*, *SMPSS*, and the feedback mechanism were conducted with the new assistants. The hotline office space has been rehabilitated and is now ready for office materials and equipment. Additionally, the Netherlands Red Cross' data and digital unit 510 has been selected as the data management provider, with an initial meeting held. Plans are in progress to develop a comprehensive feedback dashboard, enhance communication through banners, and finalize a communication plan for the hotline.

<sup>55</sup> In consultation with affected people, branch staff and volunteer leaders.

### (B.2) Advertise the feedback mechanism to communities through preferred channels

During the emergency phase of the operation, as well as during the baseline survey in February and March 2025 and the recent development of the descriptive sheet for new Douars, questions on the community's preferred channels for sharing feedback with the *Moroccan Red Crescent (MRC)* were integrated into the assessments. The preliminary results of the baseline survey indicated that 78% of respondents preferred face-to-face communication with *MRC* staff or volunteers, 17% preferred using the phone, 1.5% preferred community leaders.

A comprehensive communication plan is currently being developed to inform and engage affected communities and key stakeholders about the launch of a free and confidential hotline. This plan will include targeted outreach strategies to ensure widespread awareness and encourage community participation.

Community awareness campaigns were organized by *CEA* volunteers through community meetings, door-to-door outreach, social mobilization, and focus group discussions (FGDs). A banner for the help desk was also created and displayed during various distribution activities. During the pilot phase of the Cash programme in *Taroudant*, communities were informed about the available phone numbers for feedback. While awaiting the setup of Hotline, populations in *Taroudant*, *Chichaoua*, and *Marrakesh* were made aware of the phone numbers for Cash for Winter and Cash for Ramadan programmes. The increasing number of feedback received through active and proactive channels, along with community complaints, demonstrates the effectiveness of our communication efforts in engaging the community and raising awareness about the feedback mechanism.

### (B.3) Assess awareness and comfort with the feedback mechanism.

*CEA* sections have been included in multiple data collection efforts such as Focus Group Discussions (FGDs), Post-Distribution Monitoring (*PDMs*), and surveys that have been conducted by volunteers and staff of the *Moroccan Red Crescent (MRC)*, with support from the *IFRC*, to assess whether community members are aware of and comfortable using the feedback mechanism. An exit survey was conducted after the relief distribution during the emergency response period, up until April 2024, which revealed that 38.8% of respondents knew how to file complaints, suggestions, or claims with the *Moroccan Red Crescent*.

A follow-up baseline survey, conducted in February-March 2025, showed a notable improvement. Preliminary results indicated that 51.58% of participants reported knowing how to share feedback with the *MRC*. This demonstrates an increase in awareness of the feedback mechanisms over time. Among these respondents, 80.74% indicated that they were familiar with the option to provide feedback face-to-face with *MRC* volunteers, 16.3% knew they could use the telephone, and 1.48% were aware of contacting community leaders. 56.56% of respondents said they would report inappropriate behaviour from aid workers, indicating trust in feedback mechanisms. However, efforts should continue to address barriers to reporting and increase confidence.

The increase in awareness between 2024 and 2025 highlights the effectiveness of outreach and communication efforts by the *MRC* to educate the community about available feedback channels. However, while awareness has improved, the use of other feedback methods such as the telephone and community leaders remain relatively low. This suggests that further efforts may be needed to encourage broader use of these alternative channels, ensuring that all community members feel comfortable and confident in accessing feedback mechanisms.

### (B.4) Analyse, respond to, and act on feedback, to adjust and improve operations.

Feedback was gathered through a proactive system where volunteers and staff actively solicited opinions during face-to-face interactions in the field (53%), focus groups (15%), and community meetings (5.19%). A reactive system was also established, allowing community members to contact the *National Society* via a help desk (2.55%), phone calls (9.51%), or WhatsApp.

A total of 1,251 feedbacks were collected, with 42% coming from men, 41% from women, and 16% from mixed groups. Geographically, the province of Taroudant accounted for 49% (618) of the collected data, followed by the province of Chichaoua with 35% (449), while the province of El Haouz contributed 14% (184) of the data.

Nearly 50% of the feedback consisted of support requests and suggestions, highlighting a significant need for assistance. 23% were positive comments, expressing gratitude for the actions taken, while 20% raised concerns or complaints. A small percentage (0.32%) was related to beliefs or observations, and 0.72% were questions seeking clarification. 98% of the feedback was non-sensitive, while 1.3% was sensitive. Sensitive feedback primarily received through face-to-face interactions, often related to the administrative or judicial situations of women and mothers in divorce proceedings, seeking legal support and assistance in obtaining birth certificates for children.

Responses to the community are provided directly during field activities, or afterwards through follow-up meetings, messages, or phone calls. To analyze, respond to, and act on feedback in order to adjust and improve operations, one *CEA* assistant has been recruited for each branch. Their role is to manage the daily handling of feedback and ensure the closure of feedback loops. Despite facing numerous technical challenges, the teams have managed to respond to approximately 53% of the feedback collected. Initially, the reports produced were shared internally with *IFRC* and *MRC* management. The resulting recommendations were discussed at the branch level and with the relevant technical sectors. In addition, feedback data has been regularly shared during various Movement partner calls, as well as monthly meetings with donors,

The current dissemination strategy has evolved to ensure broader and more structured sharing of reports and recommendations with the *MRC* operational team, the *IFRC* team, and all *NS* partners involved in the response. In this context, the *CEA* team was invited to an operational coordination meeting at the end of April 2025 to present updated data from the feedback mechanism. A *CEA Working Group* will also be established to serve as a platform for sharing *CEA* activities, lessons learned, and key findings from feedback analysis. As for the reporting process, each branch maintains a local feedback register. At the national level, this information is consolidated in a central feedback register and visualized through a dashboard, enabling efficient data analysis and the drafting of consolidated reports.

#### (B.5) Update Standard Operational Procedures (*SOPs*) for community feedback and management to guide *CEA* integration in operations.

A Standard Operating Procedures (*SOP*) document for the Community Feedback Mechanism has been developed and is yet to be finalised by *MRC*, providing a structured approach to managing community feedback. The hotline *SOP* is currently under development and will be submitted to senior management by April 2025. Furthermore, the *MRC CEA* strategy will be developed during a capitalization workshop in June 2025, involving the *CEA* team, branch leaders, and members of the board and governance.

## (C) INFORMATION PROVISION AND COMMUNITY PARTICIPATION

### (C.1) Ensure a constant flow of information towards earthquake-affected people about the operations

To ensure a constant flow of information to earthquake-affected people, *MRC* established six communication channels: Focus Group Discussions, flyers, Community Meetings, house-to-house outreach, SMS and information help desks. Additional methods like radio broadcasts and mobile cinema are planned to expand outreach. *MRC* recognized that communities understand their needs and ensured the selection of aid recipients was consultative, transparent, and equitable, fostering community acceptance. Leaders and women representatives participated in registration and distribution. Community meetings are regularly held with them to discuss selection criteria and distribution plans. The *CEA* team worked with the Shelter team to align household selection criteria, participated in CVA beneficiary registration, and supported *TSU* program implementation. The *CEA* teams are at the forefront, supporting other sectors and activity programs (CASH, Relief, Shelter, Livelihoods, *EVCA*, etc.) in terms of communications, registrations, and distributions. The flyers were designed and used as part of the awareness campaign on CRM, its activities, and its principles.

The baseline survey conducted in January-February 2025 assessed whether respondents had been consulted by the *Moroccan Red Crescent* regarding their needs prior to receiving assistance. The results showed that 79% felt fully engaged in the consultation process, answering 'Yes, completely,' while 9% responded with 'Mostly yes.' Although the majority expressed satisfaction with their involvement, a small percentage may have felt less included. These insights will help enhance future community engagement efforts.

### (C.2) Hold regular community meetings to assess communication effectiveness and ensure information is accessible and useful.

The *CEA* team regularly holds community meetings to assess the effectiveness of communication channels, approaches, and languages used to reach various groups, ensuring the information provided is both received and useful. We ensure that the inclusion of volunteers who speak *Tamazight* is systematic in the team composition, and that the preferred communication channels of the communities are utilized. This linguistic aspect is, in fact, one of the key competencies required in the recruitment of *CEA* staff. By prioritizing linguistic diversity and community preferences, we aim to enhance the effectiveness of our communication and ensure that information reaches all members of the community in an accessible and meaningful way.

According to the baseline survey, 59% of respondents feel completely well-informed about the support available to them from the *MRC*, while 23% feel mostly informed. These results indicate that most people are receiving adequate information, but there is a need to improve outreach to the remaining individuals who may not feel fully informed. This feedback highlights areas where communication strategies can be refined to ensure that all community members are effectively reached and have access to vital support information.

### (C.3) Involve authorities and community leaders in planning and implementation.

Over the course of the earthquake response, more than 72 consultations and participatory planning sessions have been conducted with authorities and community leaders. These sessions involved key figures such as governors, chefs de cercles, *qaid*s, *cheikhs*, *muqaddams*, presidents of associations, and imams. The discussions

covered a wide range of critical topics, including shelter, cash assistance (such as Cash for Winter, Cash for Ramadan, and Cash for Shelter), and health, with a particular focus on the measles outbreak.

A key finding from the baseline survey highlights that 79% of participants felt that their needs were completely considered when consulted by the *Moroccan Red Crescent* prior to receiving aid. Additionally, 78.73% of respondents expressed confidence that their opinions were fully taken into account when the *Moroccan Red Crescent* planned the support and services provided to their community.

These figures demonstrate the strong engagement and active participation of the community in the planning process. The high level of positive feedback reflects the effectiveness of the consultations and participatory planning sessions in ensuring that the community's needs and perspectives are addressed in the delivery of aid and services.



## PROTECTION, GENDER AND INCLUSION

People reached: 137 individuals

### Objective:

The *MRC* is a safe and inclusive organization that ensures dignity, access, participation, and safety for people of all identities through its organizational structure, working processes and service delivery.

### Key indicators

| Indicator                                                                                                 | Actual      | Target |
|-----------------------------------------------------------------------------------------------------------|-------------|--------|
| # Number of <i>MRC</i> national policies and relevant documents aligned with RCRCM <i>PGI</i> commitments | 0           | 3      |
| # Number of individuals ( <i>IFRC</i> , <i>MRC</i> , employees, volunteers) trained on <i>PGI</i> .       | 137         | 300    |
| # Number of employees able to mainstream <i>PGI</i> activities in their sectors                           | 37          | 90     |
| # Number of 'Child-Friendly spaces' and 'women safe spaces' set up                                        | Not started | 5      |

## (A) BUILD LEADERSHIP CAPACITIES IN *PGI*

### (A.1) Conduct *PGI* session with *IFRC* and *MRC* governance/leadership /senior management

| Training Topic           | Location, date & duration |          |          | Participants         |           |              |           |           |                      |
|--------------------------|---------------------------|----------|----------|----------------------|-----------|--------------|-----------|-----------|----------------------|
|                          | Branch/national           | Duration | Date     | # Governance members | # Staff   | # Volunteers | # Men     | # Women   | # Total participants |
| <i>PGI</i> core concepts | National                  | 3 days   | Dec-2024 | 27                   | 11        | 7            | 25        | 20        | 45                   |
| <b>TOTAL</b>             |                           |          |          | <b>27</b>            | <b>11</b> | <b>7</b>     | <b>25</b> | <b>20</b> | <b>45</b>            |

Table 38 - *PGI* leadership sessions

### (A.2) *PGI* Organogram Review

The *MRC* has integrated the position of national *PGI* coordinator into the organisation chart. In addition, it was decided to identify focal points in the branches involved in the earthquake response. These focal points are employees already in post who have been given additional responsibilities. This is to ensure cross-functionality and sustainability (post-earthquake response).

## (B) *PG*/CONSIDERATIONS ARE EMBEDDED IN ALL PROCESSES, POLICIES, STRATEGIES AND TOOLS

### (B.1) Strengthening *PG*/Legal Framework and Internal Policies

*Activity not started yet.*

### (B.2) Development and Endorsement of the Protection from Sexual Exploitation and Abuse (*PSEA*) Policy

In preparation for the development of the *PSEA* policy, a *PSEA* assessment framework has been developed and a specific safeguarding plan of action developed.

### (B.3) Development and Endorsement of the Child Safeguarding Policy

*Activity not started yet.*

### (B.4) Enhancing *HR* Procedures and Policies with a Focus on Protection, Gender, and Inclusion (*PG*)

*Activity not started yet.*

### (B.5) Communication materials on Protection Policies for Staff and Volunteers

*Activity not started yet.*

## (C) QUALIFIED STAFF AND SOLID INTERNAL AND EXTERNAL COORDINATION MECHANISMS ARE IN PLACE TO SUPPORT *PG*/ACTIONS

*Note: (C.1) and (C.2) activities are related to *PGI* staff recruitment and under this report, covered under (A.2)*

### (C.3) Identify *PG*/focal points per sector/branch

The job description has been finalised, and the identification of two focal points per branch involved in the EQ response is in process.

### (C.4) Establishment and Coordination of the *PG*/Working Group

*Activity not started yet.*

### (C.5) Participation in Civil society Protection cluster

*MRC/IFRC* is very active within the Protection cluster related to the earthquake response. This cluster gathers the civil society organizations (*CSOs*) implementing activities on Child protection, Women protection and empowerment. The *CSOs* are facing funding issues to expand their programmes and therefore the cluster has been less dynamic in 2025. The *MRC/IFRC* has participated in 4 meetings, has developed the cluster's

Terms of Reference (ToR) with *Alianza Por la Solidaridad (APS)*, and has participated in the capitalisation process of the protection good practices led by APS.

## (D) STRENGTHEN THE CAPACITY OF STAFF AND VOLUNTEERS TO MAINSTREAM *PGI*

### (D.1) Implementation and Analysis of the *PGI* Survey

A chapter on *PGI* indicators was included in the baseline survey conducted in Jan-Feb 2025. It has been decided to use this general survey to get *PGI* data to be analysed.

### (D.2) Conduct *PGI* Training for staff and volunteers

| Training Topic                            | Location, date & duration |          |            | Participants |                      |           |            |                         |
|-------------------------------------------|---------------------------|----------|------------|--------------|----------------------|-----------|------------|-------------------------|
|                                           | Branch/<br>national       | Duration | Date       | #<br>Staff   | #<br>Volun-<br>teers | #<br>Men  | #<br>Women | # Total<br>participants |
| <i>PGI</i> Introduction                   | <i>El-Haouz</i>           | 0,5 day  | Oct-24     | 22           | 0                    | 10        | 12         | 22                      |
| <i>PGI</i> Introduction                   | <i>Chichaoua</i>          | 0,5 day  | Nov-24     | 8            | 0                    | 4         | 4          | 8                       |
| <i>PGI</i> Introduction                   | <i>Taroudant</i>          | 0,5 day  | Nov-24     | 12           | 19                   | 16        | 15         | 31                      |
| <i>PGI</i> basic training (core concepts) | <i>Taroudant</i>          | 3 days   | Dec-24     | 1            | 15                   | 10        | 6          | 16                      |
| <i>PGI</i> Intro and safeguarding         | <i>Chichaoua</i>          | 1 day    | Jan-25     | 7            | 0                    | 7         | 0          | 7                       |
| <i>PGI</i> basic training (core concepts) | <i>Taroudant</i>          | 3 days   | Jan-25     | 12           | 2                    | 11        | 3          | 14                      |
| <i>PGI</i> basic training (core concepts) | <i>Chichaoua</i>          | 3 days   | Jan-Feb 25 | 16           | 1                    | 12        | 5          | 17                      |
| Sensitive feedback training               | <i>Taroudant</i>          | 3 days   | Feb-25     | 3            | 3                    | 3         | 3          | 6                       |
| <i>PGI</i> basic training (core concepts) | <i>Chichaoua</i>          | 3 days   | Mar-25     | 5            | 12                   | 7         | 10         | 17                      |
| <i>PGI</i> basic training (core concepts) | <i>Taroudant</i>          | 3 days   | Mar-25     | 6            | 8                    | 3         | 11         | 14                      |
| <b>TOTAL of participants</b>              |                           |          |            | <b>92</b>    | <b>60</b>            | <b>83</b> | <b>69</b>  | <b>152</b>              |
| <b>TOTAL of individuals</b>               |                           |          |            | <b>83</b>    | <b>54</b>            | <b>76</b> | <b>61</b>  | <b>137</b>              |

Table 39 - *PGI* trainings for staff and volunteers

### (D.3) Conduct training on *PGI* guidelines and *SOPs*

Activity not started yet.

## (E) IMPLEMENT *PG*/MAINSTREAMING ACTIVITIES THAT APPLY TO ALL MARGINALIZED GROUPS

### (E.1) Collect and analyse SADD data

A tool to support the field teams to identify people with disability was developed with the *Taroudant* branch. The questionnaire of the Washington Group has been used and translated in Darija and Amazigh, and the teams are trained on its use during the basic *PGI* training.

### (E.2) Conduct *PGI* minimum standards assessments of all sectors and adapt programmes accordingly

Through ten field visits with ten sectoral teams (representing six different sectors), nine activities implemented in the *douars* were observed with the *PGI* lens during the reporting period. The observations resulted in a report with recommendations for improving the *PGI* mainstreaming in the sectoral activities.

## (F) SPECIALIZED *PG*/ACTIVITIES ARE IMPLEMENTED FOR ALL MARGINALIZED GROUPS IN *MRC* PROGRAMMING

### (F.1) Set-up safe spaces initiatives

Several meetings with provincial stakeholders implementing child friendly spaces in the targeted *douars* took place to share the best practices and avoid duplication.

### (F.2) Development and Facilitation of *PGI* Information, Education, Communication (IEC) sessions

*Activity not started yet.*

### (F.3) Establishing and Communicating *PGI* Referral Pathways

A stakeholders mapping is currently developed to obtain a detail actors directory. Twenty meetings with national, provincial and local public actors and civil society organisations took place. A sensitive *PGI* and safeguarding feedback mechanism has been drafted (which is integrated in the Ligne verte SOPs).

### (F.4) Direct support for prevention and response.

*Activity not started yet.*

Following the detection of cases of violence or at-risk-of-violence, and based on the needs identified, the plan is to be able to cover individual health, protection and education costs to prevent and respond to these risks and violence. The modality of this support will be defined at later stage.

## (G) DEVELOPING AND IMPLEMENTING A *PG*/LEARNING AND RESEARCH STRATEGY

### (G.1) Conduct qualitative research

According to the developed ToR, the main objective of the research will be to understand how the earthquake and the response to the earthquake by institutions and civil society organisations impacted the social

organization of communities. The research will aim at analysing in a comparative manner the social contexts and human relationships before the earthquake, immediately after and 18 months later.

(G.2) Develop structures and systems to collect, manage and disseminate data and information on *PGI*

*Activity not started yet.*

(G.3) Document and disseminate *PGI*/best practices and case studies

*Activity not started yet.*

(G.4) Conduct participative and community evaluation of the safe spaces

*Activity not started yet.*

## II. Enabling approaches



### NATIONAL SOCIETY STRENGTHENING

|             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|-------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Objectives: | <p><i>MRC can provide quick, effective and inclusive response to people in emergencies through quality service delivery by trained staff and volunteers.</i></p> <p><i>The Auxiliary Role of MRC in Disaster Risk Management is clearly defined and widely recognized, supported by the International Disaster Response Law (IDRL)</i></p> <p><i>MRC can respond effectively to a wide spectrum of evolving crises through enhanced Preparedness and Response Capacity</i></p> |
|-------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

#### Key indicators

| Indicator                                                                                | Actual          | Target |
|------------------------------------------------------------------------------------------|-----------------|--------|
| # Number of volunteers insured or equipped                                               | 720             | 720    |
| # Number of Volunteer Policy developed                                                   | 0 (Draft ready) | 1      |
| # Total number of trainings for MRC volunteers and staff                                 | 115             | -      |
| # Number of MRC branches or warehouses supported with infrastructure repair or equipment | 2               | 2      |

Since the beginning of the EQ Operation 2023 MRC, with the support of IFRC and PNSs, developed plans to strengthen the NSD (National Society Development) component of the operation in the Branches affected by the earthquake. This primarily focused on logistics, HR, Volunteer Management, digitalization, and communication, as well as the visibility and dissemination of the RCRC Movement Fundamental Principles.

Twelve months after the earthquake a stronger institutional perspective emerged. In August 2024 an FRC NSD Delegate was recruited to foster greater convergence and a unified approach to address NSD support needs at operational and institutional levels.

Between September and October 2024, MRC established its development priorities for the period 2025 - 2027. The first draft of the MRC NSD Plan was established in November 2024 and shared with the PNSs present in country

(GRC, FRC, SRC and QRC) to support MRC. In January 2025 MRC established the NSD Steering Committee<sup>56</sup> composed by Members of Governance from 5 regions, serving as governance and oversight body for the MRC Country Plan 2025 - 2027 and NSD programme. In December 2024, the MRC National Society Development Country Plan 2025 - 2027 was validated and in February 2025 presented officially within the Morocco Partners' Call.

Several trainings for MRC Governance and Management members were carried out in late 2024 and early 2025, in particular: Introduction to MIC Course in November 2024 and January 2025 covering 12 Branches, followed by a full MIC Course in February 2025, covering 15 MRC Branches (13 Provincial Committees and 2 Regional Committees: Marrakesh and Errachidia), including the four MRC Branches involved in the EQ Operation.

## (A) SUPPORT AND PROVIDE TRAINING FOR MRC STAFFS-VOLUNTEERS IN THE 4 PROVINCES AFFECTED BY THE EARTHQUAKE

From the onset of the response, the IFRC and its partners have provided staff and volunteers with a series of training and capacity-building sessions. These sessions have covered sectoral-technical topics such as Shelter and WASH initially, and more recently CVA and DRR. Additionally, cross-cutting approaches and support services, including CEA, PGI, IM, Finance, and Logistics, have been addressed. *(Further details on the trainings can be found under each sectoral section.)*

The MRC NSD Country Plan 2025 - 2027 established by MRC with the support of the NSD Delegate incorporates a more structured capacity-building plan, which interest those branches and sectors where the National Society aims to enhance its capacities. Sectoral planning of activities will also enable the branches to evaluate their existing staffing capacities and identify gaps, ensuring that the training plan addresses future capacity-building needs.

As of March 2025, sectoral capacity building towards MRC staff and volunteers is as follows *(summary of capacity building sections):*

| Trainings to MRC staff and volunteers | # participants <sup>57</sup> | # trainings |
|---------------------------------------|------------------------------|-------------|
| Shelter                               | 130                          | 9           |
| CVA                                   | 46                           | 4           |
| WASH                                  | 463                          | 30          |
| DRR                                   | 208                          | 9           |
| MHPSS                                 | 128                          | 8           |
| FA                                    | 36                           | 3           |
| CBH                                   | 208                          | 10          |
| CEA                                   | 504                          | 21          |
| PGI                                   | 197                          | 11          |
| IM/PMER                               | 68                           | 10          |
| <b>Total</b>                          | <b>1,988</b>                 | <b>115</b>  |

Table 40 - Trainings for MRC staff and volunteers

<sup>56</sup> Its role is to ensure alignment with strategic priorities, foster accountability, sustainability and integrity, and guide the programme towards achieving its humanitarian and development objectives. The Steering Committee provides strategic leadership and decision-making for Planning and Projects.

<sup>57</sup> The figures present the number of cumulated participants in the different trainings and do not represent individual staff count. Further integration of volunteer and staff management will be required to track capacity building efforts per individual staff and volunteer.

## (B) REINFORCE *MRC*'S AUXILIARY ROLE AND STRENGTHEN *MRC*'S DISASTER MANAGEMENT STRATEGY AND RESPONSE CAPACITY

Since the beginning of the operation, institutional *Disaster Risk Management* to increase preparedness to respond to potential future disasters has been at the core of the *IFRC* support. A one-week workshop to revise the 2021 *PER* (*Preparedness for Emergency Response*) plan was carried out in September 2024, engaging *MRC* and its *RCRC* Movement partners in this Disaster Risk Management-readiness effort. A full *PER* workshop is planned for late 2025 – early 2026. With regards to the reinforcement of the *MRC* Auxiliary Role, the internal training component has been carried out in the framework of the two Introduction to Movement Induction Courses (*MIC*) carried out in *Marrakesh* and *Errachidia* regions respectively in November 2024 and January 2025, and the first National full *MIC* carried out in *Taroudant* in February 2025. The revision of the *MRC* Disaster Management Strategy and Response Capacity is planned for late 2025, to be based on the results of the lessons learned workshop from the earthquake operation, which will be organized in December 2025.

In support to *MRC*, a visit focused on *Disaster Response Law (DRL)* and *International Disaster Response Law (IDRL)* from the *IFRC* Regional Office Disaster Law Programs (*DLP*) Coordinator is planned for the month of April 2025, and will include meetings with the relevant public authorities' representatives.

## (C) VOLUNTEER MANAGEMENT AND DUTY OF CARE

Since the beginning of the earthquake operation *MRC*, *IFRC* and *PNSs* exerted particular attention on the health and well-being of Volunteers. In the framework of duty of care, the *IFRC* Volunteering insurance was subscribed in 2023 for the number of Volunteers involved in the *MRC* rescue and emergency efforts towards the population affected by the earthquake and extended in 2024 and 2025 to cover the 720 Volunteers active on a regular basis.

### (C.1) Support the development of Volunteer Management Systems (i.e. administrative processes: enrolment, onboarding & trainings, reimbursement of volunteers)

The *MRC Volunteer Policy* has been developed with the *GRC* technical support and input from other partners. The policy aims to enhance volunteer enrolment and ensure that all activities align with the national legislation on Volunteering and the *IFRC* Volunteering Policy.

After a year and a half of the platform being managed by *IFRC*, *MRC* adopted the *RedRose* software management system, designed primarily to gather data for Community Management, to accelerate the implementation of reimbursement of expenses for Volunteers assigned in the field. At this scope a focal point was recruited and 6 finance, programme and volunteer management staff were trained in the administration of the platform with the aim to extend the system to other branches outside the operation framework, during 2025. Ad hoc procedures for enrolment, onboarding, trainings, incentivisation and retention of Volunteers are planned to be drafted in the first half of 2025, with the aim to complement and complete the *Volunteer Management Policy*.

### (C.2) Enrolment and onboarding & trainings of *MRC* volunteers

The onboarding of *MRC* Volunteers in the branches involved in the earthquake operation was guaranteed by *MRC* managers and *IFRC* Field coordinators and *PNSs* Delegates in the wait of the recruitment of a *MRC* Volunteers

National Coordinator. Several trainings for *MRC* volunteers were ensured by the *IFRC* and *PNS* sectors (see dedicated capacity building sub-chapters throughout the report.).

As of March 2025, the number of volunteers registered in the *RedRose* platform is as follows:

- *Chichaoua*: 240 (115 female, 125 male)
- *El-Haouz/Marrakesh*: 44 (14 female, 30 male)
- *Taroudant*: 324 (184 female, 140 male)
- *Azilal*: 44 (14 female, 30 male)

## (D) *MRC* INTERNAL SYSTEMS AND PROCESSES

The *MRC NSD* Country Plan 2025 – 2027 includes the revision and/or development of guidelines, policies, procedures and processes planned to be drafted in the first half of 2025, to ensure the institutionalisation and implementation at national level by the end of 2025/ early 2026.

### (D.1) Support set up of a robust financial management and reporting system for *MRC*

The *MRC* Finance Coordinator continues to work closely with her *IFRC* counterpart towards robust financial management of funds received through this Emergency Appeal. A roving Finance Delegate was recruited to work from the operating branches and support in capacity strengthening. In addition, the process of developing the financial procedures in close coordination with *MRC* Finance Coordinator is ongoing and an orientation session will be organized for *MRC* staff to familiarize them with the importance of following the rules, regulations and guidelines to ensure due diligence.

### (D.2) Provide support in *HR* management and recruitment, and an efficient standardized payroll system.

The *MRC HR* National Coordinator was recruited and inducted with the support of the *IFRC HR* team members. *IFRC* provided support to *MRC* for the recruitment of over 15 staff.

Additional support was provided in regard to the *MRC* recruitment process by including a written test for technical positions and by adding the reference check as additional and crucial step in the selection process, in compliance with the *IFRC Child Protection* and *PSEA* Policies. Additionally, some of the *MRC* vacancies were published on the *IFRC* Jobs website and *ReliefWeb* to obtain a larger pool of qualified candidates.

A review of the *MRC* salary grid is ongoing with the support of the *IFRC HR* department from the Regional Office.

### (D.3) Draft a staff regulation policy

Within the framework of the *MRC NSD* Country Plan 2025 – 2027, the *IFRC HR* team supported the *MRC HR* National Coordinator with the drafting of *MRC* Staff Regulation (in progress).

### (D.4) Map, revise and verify current *SOPs* and command chains within *MRC*

Within the framework of the *MRC NSD* Country Plan 2025 - 2027, Technical Committees composed by *MRC*, *IFRC* and *PNS* staff, are being formed to revise and/or draft procedures and processes for *HR*, Volunteering, Finance, Supply chain management, Logistics, Procurement and Fleet.

## (E) MRC GOVERNANCE AND LEADERSHIP

### (E.1) Conduct governance workshops (incl. Movement induction Course) for MRC

Two Introduction to MIC' Courses were held in November 2024 and January 2025 respectively in *Marrakesh* and *Errachidia*, particularly focused on the *MRC* Auxiliary Role, Integrity and accountability for the Governance and Management of 12 *MRC* Branches (70 participants). A full MIC revised course was held in *Taroudant* in February 2025 for the Presidents, Secretaries General and Treasurers of 15 *MRC* Branches, including the regional committees of *Marrakesh* and *Errachidia* (45 participants).

In February 2025 five members of *MRC* (Director of Operations and (Disaster Risk Management, Youth and Volunteering) DRM-YV, National *PMER*, National Programme Coordinator and the Vice-President of *Rabat* Branch) achieved the *IFRC* MIC Certification for Facilitators, training organized by the *IFRC* MENA Region, along with two *IFRC* Delegates (*NSD* Delegate and *WASH* Delegate), empowering and habilitating them to facilitate MIC Courses for the whole RCRC Movement.

Also, two national workshops included *MRC* Governance members among their participants—the *PGI* National Workshop in December 2024 and the *CEA* National Workshop in February 2025. Further details on these sessions are provided in the respective sections on *PGI* and *CEA* interventions.

### (E.2) Support development of MRC policies, procedures and business continuity plans to support continued service delivery and effective risk management.

*IFRC* and *PNSs* in country supported the development of the *MRC* Volunteer Policy draft. A *MRC* Business Continuity Plan development is planned to be achieved by June 2025 together with all other Policies, Procedures and Processes included in the *MRC NSD* Country Plan 2025 – 2027.

### (E.3) Conduct OCA-C and support MRC towards self-development and enhanced service delivery

With the support of *IFRC* and *PNSs*, during 2023 – 2024 *MRC* identified and developed activities to strengthen the *National Society*. Within the framework of the *MRC NSD* Country Plan 2025 – 2027 validated in December 2024, an *OCA-C* will be planned for late 2025 early 2026.

## (F) RESOURCE MOBILISATION AND DEVELOPMENT

*IFRC* provided support to *MRC* to engage with their donor-base in country, especially through Embassies in *Rabat*. Regular donor visits have been organized by *MRC* and meetings frequently held with some key partners. Following the one-year commemoration event held in September 2024, in November 2024 *MRC*, with the support of *IFRC*, held an institutional meeting with several Embassies and diplomatic representatives accredited to the Morocco Government in *Rabat* to illustrate the Operational Strategy, its revision and achievements. The operational team is planning to host another event around the 18-month mark of the operation to present achievements to date and invite embassy partners and other donors.

#### (F.1) Support resource mobilisation and donor engagement, including on strategizing and planning, NS systems, and core cost policy.

Joint reflections with the *MRC's* leadership led to the realisation that a dedicated *MRC* Partnership and Resource Mobilisation staff should be recruited to join *MRC's* HQ. Resource Mobilisation strategy, NS systems and Core Cost Policy, are planned in the framework of the *MRC NSD* Country Plan 2025 – 2027 and prioritized according to *MRC* forecasted timeline.

The *IFRC* plays a pivotal role in supporting resource mobilisation and donor engagement, focusing on strategizing and planning to ensure long-term sustainability. A recent joint reflection with the *MRC's* leadership revealed the need for dedicated staff focused on *MRC* Partnership and Resource Mobilisation, prompting the decision to recruit such personnel to join *MRC's* HQ.

This move aligns with *IFRC's* approach to strengthening national societies capacities. It will allow to develop a resource mobilisation strategy and donor relationship management. The development of a Resource Mobilisation strategy is directly linked to HNS systems and the Core Cost Policy. These strategies are incorporated into the *MRC NSD* Country Plan for 2025–2027, ensuring that resource mobilisation efforts are aligned with *MRC's* forecasted timelines and priorities. Through this comprehensive planning, *IFRC* with the support of the other *PNS*, ensures that the HNS are better equipped to secure funding, build lasting partnerships, and sustainably manage core operational costs beyond the Emergency Appeal.

### (G) COORDINATION CAPACITY BUILDING

#### (G.1) Conduct 12-month workshop and commemorative event

*MRC* intended to bring together their staff, governance members and volunteers actively engaged in the response every 6 months since the beginning of the EQ Operation 2023, to take stock on the progress of the operation, reassess the relevance of its plans and activities based on changes in the context and encourage experiences sharing around good practices. An event was held to mark the 6 months after the earthquake aimed at looking back on the first phase of the response and initiating the thinking around the recovery.

A 12-month workshop and commemorative event was held on 14<sup>th</sup> and 15<sup>th</sup> September 2024 in *Marrakesh* gathering *MRC* governance, staff and volunteers, *IFRC* and *PNS* staff and RCRC Movement partners at the presence of National Authorities, UN Agencies and NGOs, and diplomatic representatives. The event displayed presentations and achievements for the 1<sup>st</sup> year of Operation, the Operational Strategy and plans for the upcoming phase, which engaged new support from partners. On this occasion *MRC* officially acknowledged the engagement of its teams and volunteers, thanking them all for their incredible dedication and work.

*MRC* decided to hold commemoration events for the 18 months since the beginning of the EQ Operation. This strengthened its image as a primary humanitarian actor and highlighted its Auxiliary Role in country, emphasising the communication about the response. On the 8<sup>th</sup> April 2025, a half day event is set in *Rabat* at the presence of national level representatives from key RCRC Movement partners, of relevant Moroccan Ministries and General Directorates; and on 10<sup>th</sup> and 11<sup>th</sup> April 2025 will take place over 2 days in *Marrakesh* with internal and external parts.

These events will also provide the opportunity for *MRC* staff from the different branches to come together with their partners to take stock of progress, discuss challenges and agree on the priorities for the way forward.

### (G.2) Conduct 24-month workshop

The 24-month commemoration event is to be planned for September 2025.

### (G.3) Conduct lessons learned workshop

A lesson learned workshop is to be planned for the end of the operation.

## (H) INFRASTRUCTURES AND EQUIPMENT UPGRADE

### (H.1) Strengthen capacity for *MRC* HQ and branches on infrastructure and equipment (including repair and maintenance, management of assets, management of systems, IT and Telecom).

The *IFRC* IT Officer supported key infrastructure improvements for the *Moroccan Red Crescent (MRC)*. These upgrades have focused on enhancing IT systems and telecommunications across headquarters in *Rabat* and branches in *Marrakesh*, *Taroudant*, and *Chichaoua*. Wireless network infrastructure was updated to provide high-speed access and ensure optimal coverage, while multifunction printers were standardized and installed to streamline workflows and reduce operational costs. Meeting rooms at *MRC* headquarters and branches have been equipped with advanced, high-quality tools to facilitate seamless communication and enhance efficiency, connectivity, and usability. Office 365 licenses were upgraded, providing staff with access to the latest productivity tools like Teams, Word, Excel, and Outlook. Training sessions and remote support were also introduced to strengthen technical capacity, enabling branch staff to handle minor issues independently<sup>58</sup>.

The *Taroudant* branch has put in place IT equipment to launch the Feedback mechanism call centre from the branch that will later be shifted to each branch. For this, specific electrical and IT infrastructure was added to create an adequate office for the call centre and make it secure for the information management and data protection.

In addition to IT enhancements, building maintenance projects were launched to improve the preparedness and operational capacity of the *MRC*. Permanent offices are being constructed for the *Taroudant* and *Chichaoua* provincial branches, the local branch in *Demnate*, and the expansion of the *Marrakesh* branch is underway. Plans are in place to establish a training centre and warehouse in *Marrakesh*, which aligns with the *MRC National Society Development (NSD) Country Plan* for 2025–2027. These initiatives aim to strengthen the *MRC*'s infrastructure and ensure its readiness for future responses. *IFRC* and the *French Red Cross* are providing both funding and technical expertise to support these efforts.

To oversee these construction projects, the *MRC* has initiated the recruitment of a construction engineer or manager who will act as the focal point for liaising with the consultancy firm responsible for developing standardized building plans for the organization.

### (H.2) Offices upgrades

<sup>58</sup> Three training sessions on Office 365 were conducted for branch staff (1 in *El-Haouz/Marrakech*, 1 in *Taroudant*, and 1 in *Chichaoua*). Additionally, ongoing daily support has been provided, addressing IT requests or tickets from various sites, with direct face-to-face assistance concentrated in *Marrakesh*.

In January 2025, in Demnate, a fully equipped office has been established to support the branch overseeing the response in the province of *Azilal*. This office will serve as a key hub for staff and volunteers deployed in the area, ensuring streamlined operations and effective coordination.

In *Tahanaout, El Haouz*, an office has been set up to establish the provincial branch of *El-Haouz* and facilitate the transition toward decentralizing the response from *Marrakesh*. This development marks a significant step in enhancing proximity and responsiveness in the field. While overall coordination remains centralized at the regional level, the establishment of a local presence in *El-Haouz* strengthens operational support and fosters improved collaboration with local authorities and communities. Two offices have been established for this purpose: the *El-Haouz* Provincial Directorate and the Regional Training and Capacity-Building Center—*El-Haouz* Annex. Completed in early March 2025, the first activity conducted on-site was a community-based health and *First Aid* training session, which inaugurated the start of localized capacity-building efforts.

The Taroudant branch has received new furniture in order to complete the needed requirements and accommodate the newly added staff members.

### (H.3) Warehouses upgrades

The MRC warehouses in *Agadir* and *Rabat* have recently been renovated and a new temporary warehouse in *Marrakesh* is being rented, with the scope to adapt them to the current needs of the operation.

The MRC branch in Taroudant rented a warehouse in front of the office in order to store the needed items and equipment needed for the materials and distributions.



## COORDINATION AND PARTNERSHIPS

### Objective:

Ensure a well-coordinated emergency operation and availability of funding.

### Key indicators

| Indicator                                                                                                         | Actual | Target |
|-------------------------------------------------------------------------------------------------------------------|--------|--------|
| # Number of (Movement Coordination Agreement) MCA agreement signed between <i>IFRC</i> - <i>ICRC</i> - <i>MRC</i> | 1      | 1      |
| # Number of <i>Partner National Societies</i> in-country                                                          | 4      | -      |
| # Number of partners' calls (partners not in-country) held                                                        | 6      | -      |
| # Number of sectoral working groups/clusters in place                                                             | 5      | -      |

4

### (A) MEMBERSHIP COORDINATION

(A.1) Engage the *IFRC* membership to ensure a well-coordinated response to the earthquake through the in-country coordination mechanisms: membership, strategic, operational, and technical, reflecting *IFRC's* Way of Working

A Movement Coordination Agreement is in place since May 2024 and outlines the different coordination platforms held at country level.

Regular meetings are taking place, at the strategic, operational, and technical levels, led by the *MRC* and co-led by *IFRC*. Meetings with, and visits by, *IFRC* members took place on several occasions during the reporting period. They visited the *MRC* HQ, branches, and some of the *MRC* work in the affected areas.

(A.2) Conduct regular team coordination meetings with affected branches and coordination of the response

Weekly operational coordination meetings are organised with the branches responding to the earthquake. Each branch holds a weekly planning meeting to review the planning of the upcoming weeks and ensure alignment with the monthly planning methodology in place.

(A.3) Schedule regular coordination meetings with partners supporting the operation (but not present in the country) through partners' calls

To maintain transparency and ensure strong communication, regular Partners' calls are held to keep donors and partners updated on the latest developments and progress of ongoing initiatives. These calls serve as an essential platform for sharing project updates, addressing questions or concerns, and discussing future plans and strategies. By fostering open dialogue, these sessions keep partners actively engaged and aligned with organizational goals, further strengthening collaboration and support.

Additionally, the calls provide an opportunity for donors and partners to share valuable feedback, enabling the refinement of approaches and maximizing the impact of efforts. Through consistent updates, trust is reinforced, and the foundation of partnerships is solidified, ensuring that collective efforts remain effective and focused. To date, six operational calls have been conducted, the latest was held end of February 2025.

#### (A.4) Maintain a Federation-wide approach through harmonized planning, implementation, monitoring, reporting and evaluation among *IFRC* members

Since the outset of the earthquake response, the *International Federation of Red Cross and Red Crescent Societies (IFRC)* has ensured the inclusion of *Partner National Societies' (PNS)* strategies and planned activities in its appeals and operational strategies. Close coordination with the *German, French, and Spanish Red Cross Societies* has been integral to building a complementary and unified response.

Following the November 2024 revision of the Operational Strategy, significant efforts have been made to establish a harmonized approach to planning, monitoring, evaluation, and reporting. A response-wide framework now underpins all activities, ensuring alignment and consistency in reporting and documentation as outlined in section (C.1) on *Planning, Monitoring, Evaluation, and Reporting (PMER)*.

#### (A.5) Ensure funding and implementation of the *IFRC* appeal and regularly produce information material, in close collaboration with *IFRC Regional Office* as well as the Geneva Secretariat *SPRM* department.

The *IFRC* ensures the successful funding and implementation of its appeals through a collaborative and well-coordinated approach with its regional offices and the Geneva Secretariat's *SPRM* department. By working closely with these key stakeholders, *IFRC* is able to align its appeal efforts with strategic priorities, identify funding opportunities, and mobilize resources effectively.

Regular and high-quality information materials are produced, including reports, fact sheets, and updates, to keep donors and partners informed about the progress and impact of ongoing appeals. These materials are developed in close coordination with the *IFRC* Regional Office, ensuring that regional insights and local needs are accurately reflected. Additionally, the Geneva Secretariat's *SPRM* department plays a crucial role in supporting resource mobilization and facilitating communication between the *IFRC* and global donors. This collaborative approach ensures that *IFRC*'s appeals are adequately funded, and that the information shared is both timely and comprehensive, reinforcing the transparency and accountability needed for effective implementation and continued support.

## (B) MOVEMENT COORDINATION

(B.1) Further to signing the Movement Coordination Agreement, collect *PNS* endorsement as signatories of the annexes

In Morocco, the Federation-Wide approach was implemented through the earthquake response, enabling *MRC*, with *IFRC*'s support as co-convener, to develop a unified operational strategy and logical framework. This serves as the primary reference document under which all operational support from various partners is coordinated.

To ensure effective coordination, a structured system was established, beginning with the development and signing of the *Movement Coordination Agreement (MCA)* in May-June 2024. In line with the *MCA* and *Seville 2.0*, the framework includes strategic, operational, and technical platforms. The *MCA* was officially signed between May and June 2024 by *IFRC*, *ICRC*, and *MRC*, while *Partner National Societies* maintaining a presence in Morocco—the *French Red Cross*, *German Red Cross*, *Qatari Red Crescent* and *Spanish Red Cross*—signed the annex.

Additionally, *IFRC* coordinates with *ICRC* through its Senegal Regional Office, which covers Morocco, to support the management of the deceased and ensure the continued delivery of *Restoring Family Links (RFL)* services.

## (C) INTERAGENCY COORDINATION

(C.1) Support *MRC*'s existing engagement with country-level coordination structures, to identify gaps and facilitate collaboration at the national level.

*IFRC* and *MRC* take part in the informal coordination groups with other *NGOs* active in the earthquake affected areas. In addition, *IFRC* and *MRC* engage bilaterally with relevant actors to ensure alignment of approaches when working in the same locations or in similar sectors of interventions. Some opportunities for partnership are arising from this coordination effort.

(C.2) Engage with coordination structures to inform assessments, gap analysis and response.

A mapping exercise has been undertaken by the informal coordination groups and *IFRC-MRC* contribute with data when relevant. In addition, *MRC* is engaging with the *Grand Atlas Development Agency* that is currently being established.

## (D) HUMANITARIAN DIPLOMACY AND INFLUENCING

(D.1) Support *MRC* to carry out humanitarian diplomacy, including support to influence, negotiate, communicate and advocate as an integral part of daily actions both inside and outside Morocco.

The *MRC* supported by the *IFRC* has been constantly advocating to access the people affected by the earthquake and provide complementary services to them in addition to the ones provided by the Moroccan State. These advocacy efforts led to many programmes being implemented in support of affected people.

(D.2) Work with *MRC* and partners to advocate for the establishment of a robust governance structure within *MRC*

The *IFRC* and members *National Societies* take every opportunity of meeting officials in Morocco and outside (Moroccan embassies staff) to remind them of the *MRC* presidency void, and the need to nominate a president so that the Governance elections take place.

(D.3) Ensure quality assurance and accountability including *Planning, Monitoring, Evaluating and Reporting (PMER)*, *Information Management (IM)*, *Risk Management (RM)*, and *Community Engagement and Accountability (CEA)*.

Risk management regular updates with support of Regional Risk Management delegate. (*For more details on PMER and IM, please refer to dedicated sections (or above A.4 - Maintain a Federation-wide approach through harmonized planning, implementation, monitoring, reporting and evaluation among IFRC members)*).

## (F) GRANTS MANAGEMENT

(F.1) Ensure adherence to donor requirements and conditions.

The *IFRC* takes a proactive approach to ensure strict adherence to donor requirements and conditions. This is achieved through a robust system of monitoring, reporting, and compliance checks integrated into the Emergency Appeal response framework. *IFRC* works closely with partners to ensure that all activities are aligned with donor earmarking and guidelines. Additionally, *IFRC* provides continuous training and support to staff and to the HNS to ensure they are well-versed in donor conditions and compliance standards.

(F.2) Responding to donor queries

The *IFRC* is committed to maintaining open and responsive communication with its donors. When queries or requests for clarification arise, *IFRC* ensures a prompt and thorough response. *SPRM* (Strategic Partnerships and Resource Mobilisation) with the support to the *PMER* and Programme teams within the organization is tasked with addressing donor inquiries, providing clear explanations and supporting documentation as needed. Whether related to project updates, financial reports, or compliance issues, *IFRC* prioritizes transparency and accuracy in all communications. To facilitate this process, *IFRC* has established streamlined channels for donors to submit their questions, ensuring that responses are timely and in-depth. Additionally, *IFRC* actively engages in discussions with donors to clarify complex issues, ensuring mutual understanding and continued collaboration. This responsiveness supports effective decision-making, and fosters a constructive partnership based on trust and clear communication.

(F.3) Ensure quality and timely reporting to donors.

Despite the migration from the ERP tracking platform, the *IFRC* remained fully committed to ensure quality and tried its best to timely report to donors. During this transition period, *IFRC* has implemented interim measures to maintain the integrity and consistency of reporting. Dedicated teams worked to ensure that data collection, analysis, and reporting processes continue seamlessly. This commitment to transparency and reliability strengthens donor trust, even in the face of system changes, and demonstrates *IFRC's* ability to adapt while maintaining high standards of accountability. The migration is finally over, and we are committed to a full return to normalcy by the end of April 2025.



## SECRETARIAT SERVICES

### Objective:

*MRC continues to improve its service delivery, organizational capacity and accountability for large-scale programming with the support of IFRC and PNS in country.*

### Key indicators

| Indicator                                                                                                                            | Actual | Target |
|--------------------------------------------------------------------------------------------------------------------------------------|--------|--------|
| <i>SUPPLY CHAIN</i><br># Number of vehicles in the fleet                                                                             | 42     | -      |
| <i>INFORMATION MANAGEMENT</i><br>#Number of <i>RedRose</i> trainings with <i>MRC</i> staff and volunteers                            | 3      | -      |
| <i>PLANNING, MONITORING, EVALUATION AND REPORTING</i><br># Number of joint M&E framework established                                 | 1      | 1      |
| <i>HUMAN RESOURCES</i><br># Number of staff currently in function with <i>IFRC</i> (international, staff on loan, seconded national) | 53     | -      |

## (A) SUPPLY CHAIN MANAGEMENT

(A.1) In coordination with *MRC*, support the overall coordination and management of country and regional supply chain in line with the Federation's GLS Strategy.

Close collaboration with the *Moroccan Red Crescent (MRC)* and its partners has been a key priority to ensure alignment and the effective execution of activities aimed at managing the flow of goods and services across the affected region. This collaboration has encompassed several critical areas, including the procurement of essential supplies, the storage and management of inventory through warehousing, and the transportation of goods between various locations. Additionally, efforts have been directed towards ensuring the timely distribution of supplies to end users, while maintaining rigorous inventory tracking and management to optimize resource utilization and ensure operational efficiency.

(A.2) Support *MRC* with the replenishment of stocks that were delivered to affected populations.

Efforts have been directed towards supporting the *Moroccan Red Crescent (MRC)* in replenishing stocks that were provided to affected populations. These activities include coordinating the transportation of replenished supplies to designated warehouses or distribution points, as well as strategically pre-positioning stocks in key locations, primarily *Rabat* and *Marrakesh*. Additionally, meticulous management of replenishment budgets has been prioritized to ensure effective resource allocation and sustainability.

### *Logistics requisitions*

Over 425 logistics requisitions were initiated and managed during this period. Additionally, 643 deliveries were successfully executed, ensuring the receipt and dispatch of essential relief items. A total of 284 goods receipt notes (GRNs) were processed, confirming the delivery and condition of all incoming goods. The mobilization table has been finalized and closed, ensuring effective coordination and utilization of resources.

### *Distributions*

The distribution efforts have been effective, with 95% of received items successfully delivered to priority zones. Shelter assistance was prioritized for the most impacted areas, ensuring beams, tarpaulins, and *Temporary Shelter Units (TSUs)* reached those in need. Hygiene and dignity kits were provided to vulnerable populations to support basic health and sanitation needs. In response to food security challenges, over 6,814 food parcels and 6,821 wheat flour sacks were procured. Additionally, stock reallocation helped optimize resources across warehouses, ensuring continued access to essential supplies.

### *Stock movements*

A summary of stock movements, including national and international shipments, and deliveries to distribution points (as of March 2025) is as follows: the emergency response has facilitated the delivery of essential relief supplies across multiple priority areas. A total of 6,212 *Temporary Shelter Units (TSUs)* were received from *IFRC* and *Red Cross* partners sources, alongside critical items such as 6,781 wooden beams, 4,746 repair tents, and 9,571 tarpaulins to support shelter needs in affected communities. Hygiene assistance remained a priority, with 15,822 hygiene parcels and 7,001 dignity kits distributed, ensuring access to essential sanitation resources.

To support basic household needs, 6,200 kitchen sets, 2,334 plastic buckets, and 9,407 sanitary pads were supplied. Food security was addressed with 6,814 food parcels and 6,821 sacks of wheat flour. Other key items included 600 fire extinguishers, 14,681 jerrycans, and 620 heaters to assist households in harsh conditions. *First Aid* support was reinforced with 510 kits from the *French Red Cross*, ensuring communities had access to basic emergency medical resources.

Distribution efforts were carefully coordinated across multiple regions, including *Marrakesh*, *Demnate (Azilal)*, *Chichaoua*, *Taroudant*, *Agadir*, and *El-Haouz*. Shelter materials such as wooden beams and insulation panels were allocated based on priority needs, with 1,869 beams and 4,300 insulation panels distributed to support reconstruction efforts. Hygiene items, including 3,000 dignity kits and 6,000 hygiene kits for women, were delivered to vulnerable groups. Food parcels, heaters, repair tents, and *First Aid* kits were strategically deployed across different zones to ensure equitable access.

To maintain efficiency in relief operations, transport movements in March 2025 facilitated the transfer of essential supplies to crisis-affected regions. A total of 927 units were transported, including 329 to *Taroudant* and *El-Haouz*, and 196 to *Chichaoua* and *El-Haouz*, ensuring continued delivery of critical resources to communities in need.

#### (A.3) Ensure procurement objectives are met to optimize service quality and cost-effectiveness, while adhering to *National Society* procedures and *IFRC* standards.

Procurement activities have been conducted with a strong emphasis on ethical procurement principles and procedures, ensuring accountability and transparency throughout the process. Risk management has been a key focus, with efforts directed towards identifying and mitigating potential risks associated with procurement operations. Significant attention has also been given to capacity building through training and development initiatives for procurement staff, fostering enhanced expertise and efficiency. Effective communication with stakeholders has been maintained at every stage of the procurement process to ensure alignment and collaboration, complemented by meticulous documentation of all activities for record-keeping and compliance.

The allocation of 4.15 million CHF in procurement funds has been managed with great care, utilizing a combination of purchase orders and framework agreements to address diverse categories of needs. These include expenditures for shelter and construction, hygiene and relief supplies, technology and communication equipment, vehicles, office furniture, training and services, as well as other essential purchases

#### (A.4) Support rapid light fleet deployment for the operation

In March 2025, after 18 months of operation, significant progress was made in harmonizing *MRC*'s fleet management through the holistic integration of *GRC*-procured vehicles. By the end of September 2024, 35 drivers were deployed for the earthquake response, with 8 assigned to *Chichaoua*, 10 to *Taroudant*, 1 to *Azilal (Demnate)*, and 15 to *El-Haouz/Marrakesh*. The operation utilized a total of 42 vehicles, distributed across branches and vehicle types as follows:

| Branch           | Car - City | Car - Defender | Minibus / Van | Pick-up / 4x4 | Truck / Small truck | Grand Total |
|------------------|------------|----------------|---------------|---------------|---------------------|-------------|
| <i>Chichaoua</i> | 4          | 1              | 1             | 2             | -                   | 8           |
| <i>Marrakesh</i> | 7          | 3              | 3             | 3             | 3                   | 19          |

|                    |           |          |          |          |          |           |
|--------------------|-----------|----------|----------|----------|----------|-----------|
| <i>Rabat</i>       | 3         | -        | 1        | -        | -        | 4         |
| <i>Tanger</i>      | 1         | -        | -        | -        | -        | 1         |
| <i>Taroudant</i>   | 4         | 3        | 1        | 1        | -        | 9         |
| <i>Azilal</i>      | -         | -        |          | 1        | -        | 1         |
| <b>Grand Total</b> | <b>18</b> | <b>7</b> | <b>6</b> | <b>7</b> | <b>3</b> | <b>42</b> |

Table 41 - Fleet capacity

The recently finalised procurement processes will soon deliver three vans, two trucks, and three camionettes to support operational needs. In response to the growing scope of activities, an additional procurement process has been initiated for 12 pickups to ensure adequate logistical capacity and efficiency.

The total number of vehicle movements has exceeded 6,800 transport requests, covering a total of 700,000 km, with five recorded accidents over the 18-month operational period.

#### (A.5) Provide personal protection equipment for warehouse staff and other employees

Personal protective equipment, including helmets, goggles, gloves, high-visibility vests, and boots, has been provided to warehouse personnel.

## (B) COMMUNICATIONS

Since the beginning of the emergency, several items have been received, such as: Since day one, the *IFRC* has been highlighting the *MRC* response, supported by the *IFRC* Secretariat and membership. *IFRC* MENA was the first to provide updates on the situation on the ground and the *MRC*'s response, serving as a key information source for UN agencies and the media. The *MENA* Communications unit, in collaboration with the Global Communication team in Geneva and the *IFRC* Head of Delegation to Morocco, drafted key messages and conducted several media interviews with international and regional outlets such as *CNN*, *BBC*, *France 24*, and *Aljazeera*.

These efforts highlighted the needs and response of the *MRC* at the one-month, three-month, and six-month marks of the earthquake. Key messages were updated, press releases disseminated, social media content posted, articles published on *IFRC.org*, and media interviews conducted. For the one-year commemoration of the earthquake, the *MENA* communications team worked closely with the *MRC* communications team to ensure that audiovisual materials and updated key messages are available for use by *Partner National Societies* in their fundraising campaigns. This collaboration amplified the voice of the *MRC* and continually remind people of the impact achieved. *MRC* is to organise an event to present achievements of the response at the 18-month mark, and the event is expected to benefit from significant media coverage.

Additionally, *UN* press briefings and *X (Twitter)* spaces were tailored to address the needs of earthquake-affected populations and the progress of the operation.

#### (B.1) Support visibility, advocacy and positioning of both *MRC* and the *IFRC*-wide support to humanitarian activities in Morocco.

To commemorate the one-year anniversary of the earthquake (September 2024), a communication plan was implemented to highlight the contributions of the *Moroccan Red Crescent (MRC)*, supported by *IFRC* and *Partner National Societies*. This included updated messaging, media outreach, a press release, social media content, and an

event video produced by MRC volunteers. Brochures were distributed, and key interviews with *IFRC* leadership were conducted. The *IFRC* Regional Communications team provided technical support and long-term planning. Future initiatives will focus on building the capacity of the MRC communications team to strengthen their role as first responders.

In April 2025, a two-day event marking 18 months of response efforts will take place, providing an opportunity to assess achievements and outline future plans and strategies. This event will follow a similar format to the 12-month milestone gathering, bringing together both internal and external participants, including Red Cross and Red Crescent staff, volunteers, and external guests for specific sessions. The Moroccan media is expected to cover the event, releasing various press materials.

Articles and press releases from *IFRC* can be found at the following: [News, press releases and speeches | IFRC](#)

## (C) PLANNING, MONITORING, EVALUATION AND REPORTING (PMER)

### *Planning*

#### (C.1) Support the development of the Operational Strategies

Within the framework of *Emergency Appeals*, the *IFRC* produces *Operational Strategy* documents. The first one was developed at the onset of the response and published in November 2024<sup>59</sup>. One year later, a *Revised Operational Strategy (ROS)*<sup>60</sup> was developed and published in November 2025. As mentioned in the *B. Operational Strategy*, this revision formalises the evolution of the response from an emergency response - primarily based on relief assistance - moving towards an early-recovery phase. It is expected that a revision of the operational strategy will be conducted in the last quarter of the year to outline plans for the 2026 operation's extension.

*Operational Strategies* are publicly available on [Morocco: Earthquake | IFRC](#).

#### (C.2) Support the development of the *MRC* Unified Plan

From mid-2024, the *MRC* has developed its first Unified Plan, with support from the *IFRC* MENA Regional Office. The Unified Plan within the *Red Cross and Red Crescent Movement* refers to a coordinated framework that aligns the priorities and actions of National Societies, the *IFRC* (*International Federation of Red Cross and Red Crescent Societies*), and other partners. It aims to streamline efforts, avoid duplication, and maximize the impact of humanitarian initiatives.

Within the *Unified Plan 2025 – 2027*, the *MRC* centres its projected plans of action around four Strategic Priorities (SPs): *Climate and environment*, *Disasters and crises*, *Health and Wellbeing*, and *Values, Power and Inclusion*, in line with (and building on) the *Strategic Plan 2021-2025*.

With the advent of the earthquake, and in order to scale up learnings, frameworks, and practices from the response programme, the *MRC* leadership is pushing for a global overhaul based on *IFRC*-developed self-assessments of the *National Society's* strengths and weaknesses and the extent of its organisational and operational capacities. Thus, the Unified Plan will be supported by an overarching *National Society Development (NSD)* Plan that the *MRC* commits to delivering and implementing. The *MRC* will be presenting its achievements, ongoing efforts, as well as gaps and

<sup>59</sup> [Operational Strategy \(initial\)](#), *IFRC*, November 2023

<sup>60</sup> [Revised Operational Strategy](#), *IFRC*, November 2024

constraints in the Unified Reporting phase. It shall serve as a course-correction step, to adjust its goals for the remaining two years of the Unified Plan.

*The full Country Plan will be publicly available soon on the IFRC platform. In the meantime, the extract is available on [Morocco 2025 Unified Plan](#).*

## Monitoring & Evaluation

### (C.3) Establish a M&E framework in collaboration with MRC and in-country PNS

As part of the revision of the *Operational Strategy*, a comprehensive, response-wide logical framework (*logframe*) has been developed, forming the foundation for the *Monitoring & Evaluation* system in the response. This has been further strengthened by the creation of an *Indicator Tracking Table (ITT)*, which facilitates monthly tracking of sectoral activities. The *Monitoring and Evaluation (M&E)* system implemented for the earthquake response encompasses all sectors of intervention and operational branches. It is designed to provide a comprehensive overview of response activities and their levels of achievements. Each sector, along with support services, is systematically organized within a logframe structure. This framework categorizes sectors and services under specific objectives, corresponding activities, and measurable indicators, ensuring alignment and clarity in achieving the overall response goals.

During the first quarter of 2025, notable progress was achieved in the implementation and capacity-building efforts for these systems. These advancements were further strengthened by the introduction of *Standard Operating Procedures (SOPs)* documentation. The initiatives are focused on bolstering the operation's capacity to efficiently monitor activities, track beneficiaries, and maintain accountability and quality standards across all aspects of the intervention. In the months ahead, priority will be given to supporting all sectors in developing tailored activity trackers, which will serve as means of verification for measuring progress towards achieving set indicators.

### (C.4) Conduct a base/midline survey of operational sectors

Over a year into the earthquake response, a comprehensive multisectoral and response-wide survey was conducted to formally reassess the situation of the affected communities and their evolving needs. Following the completion of the research design, branch teams—comprising IM and CEA MRC staff and volunteers—were trained on the survey questionnaire and field data collection methodology.

Data collection took place in January and February 2025 across the three initial target provinces, utilizing a sampling design ensuring statistical representativity of results for beneficiaries at the provincial level, for a total of 220 surveys<sup>61</sup>. The survey employed a quantitative, multiple-choice questionnaire (MCQ) designed on *Kobo Collect*, which was administered at the household level by MRC volunteer enumerators. Subsequent data cleaning and analysis efforts are currently underway.

The survey aims to support each sector of intervention by providing data on key sectoral indicators. This assessment forms a critical component of the broader *Monitoring & Evaluation (M&E)* and accountability framework, contributing directly to an evidence-based approach for enhancing the response. Some preliminary findings were used in the *III. Needs analysis* section of the present document, while final findings will be presented later in the second quarter of 2025.

<sup>61</sup> Two communes in El-Haouz await local authority approval (expected in April 2025).

### (C.5) Conduct an end-line survey of operational sectors (end of the operation)

*Activity not started yet.* At the conclusion of the earthquake response, an endline survey will be conducted, building upon the baseline survey. This will facilitate the measurement of progress and the impact of the intervention across key aspects of sectoral activities.

### (C.6) Conduct sectoral impact evaluation and perception measurement activities

The addition of a second *PMER* Delegate enabled further support for surveys and assessments in the response. In Demnate, *Azilal* province, the *PMER* department took part in rapid assessments of newly targeted *douars*, producing "identity card" type fiches with multisectoral topline insights—a task formerly managed by the *CEA* and Resilience teams. The *PMER* Delegate also contributed to developing *Post-Distribution Monitoring* tools for recent food parcel distributions.

Similarly to the progress made in developing the monitoring system outlined under (C.1), the *PMER* department aims at harmonising approaches and systems for assessments and survey methodologies within the response. These efforts also include strengthening the capacity of the *MRC Information Management (IM)* staff in this area.

### (C.7) Commission external evaluations

A *Real-Time Evaluation (RTE)* was conducted in May 2024 to assess the effectiveness and efficiency of the earthquake response up until then. The evaluation aimed to identify lessons learned and provide decision-makers with actionable recommendations. These recommendations focused on the evaluation serving as a key resource for shaping evidence-based improvements to operational frameworks and future disaster response strategies.

An additional external evaluation is scheduled for the conclusion of the operation. Its objective will be to complement the quantitative endline survey conducted by internal teams, which focuses on assessing the operational response. The external evaluation will provide a broader qualitative perspective. The scope of this evaluation will be further defined at a later stage.

## Reporting

Throughout 2024, reporting activities constituted a core priority for successive *PMER* Delegates. These included pledge-based donor reports, Operational Update reports, and support *MRC* in monthly internal reporting. By the end of the 2024 year, over 26 pledge-based reports were produced and shared with donors. The recruitment of a *Strategic Partnerships and Resource Mobilisation (SPRM) Delegate* in January 2025 has further streamlined donor liaison and donor reporting workstreams, which are since managed directly in-country<sup>62</sup>.

### (C.8) Operation Update Reports (Emergency Appeal reports)

Since the beginning of the Emergency Appeal, *PMER* Delegates have led the production of the Operation Update reports. Including this one, six reports have been produced<sup>63</sup>, recapitulating the operation comprehensively. The

<sup>62</sup> See dedicated sections (F) Grants management in "Coordination and Partnerships".

<sup>63</sup> [Operation Update #1](#), published in December 2023.

main audiences are general public and external stakeholders such as donors and partners. All Operation Update reports are published on [IFRC's Morocco Earthquake webpage](#).

### (C.9) MRC Internal reports

Since April 2024, monthly internal reports have been produced. These reports are structured by branch of operation and then operational sectors. They are drafted by the branches' coordinators, under the lead of the MRC PMER Manager. The main audience is MRC and IFRC country management.

### MRC capacity building

### (C.8) Conduct on-the-job training with MRC PMER/IM branch staff/volunteers

| Training Topic                                                                            | Location, date & duration |          |            | Participants |              |           |           |                      |
|-------------------------------------------------------------------------------------------|---------------------------|----------|------------|--------------|--------------|-----------|-----------|----------------------|
|                                                                                           | Branch/national           | Duration | Date       | # Staff      | # Volunteers | # Men     | # Women   | # Total participants |
| IM tools (Excel, Kobo, PowerBI, etc.)                                                     | All                       | 3 days   | June 2024  | 4            | 0            | 0         | 4         | 4                    |
| Quantitative multisectoral survey– field data collection (Baseline)                       | Chichaoua                 | 2 days   | Jan. 2025  | 2            | 8            | 4         | 6         | 10                   |
| Quantitative multisectoral survey– field data collection (Baseline)                       | Taroudant                 | 2 days   | Jan. 2025  | 1            | 8            | 3         | 6         | 9                    |
| Quantitative multisectoral survey– field data collection (Baseline)                       | El-Haouz                  | 2 days   | Feb. 2025  | 1            | 13           | 5         | 9         | 14                   |
| Quantitative data cleaning session (Baseline)                                             | All                       | 2 h      | Feb. 2025  | 2            | 0            | 0         | 2         | 2                    |
| M&E and accountability for Shelter                                                        | All                       | 2 h      | Feb. 2025  | 9            | 0            | 9         | 2         | 11 <sup>64</sup>     |
| Initial douar assessments – qualitative and quantitative – field data collection training | Demnate                   | 2 h      | March 2025 | 3            | 1            | 1         | 3         | 4                    |
| <b>TOTAL</b>                                                                              |                           |          |            | <b>22</b>    | <b>30</b>    | <b>24</b> | <b>30</b> | <b>54</b>            |

Table 42 - IM/PMER trainings

## (D) INFORMATION MANAGEMENT (IM)

### RedRose

### (D.1) Conduct RedRose training with MRC staff and volunteers

| Training Topic | Location, date & duration | Participants |
|----------------|---------------------------|--------------|
|----------------|---------------------------|--------------|

[Operation Update #2](#), published in February 2024.

[Operation Update #3](#), published in May 2024.

[Operation Update #4](#), published in August 2024.

[Operation Update #5](#), published in November 2024.

<sup>64</sup> Includes 2 IFRC staff.

| Training Topic                            | Branch /national | Duration | Date      | # Staff   | # Volunteers | # Men    | # Women   | # Total participants |
|-------------------------------------------|------------------|----------|-----------|-----------|--------------|----------|-----------|----------------------|
| RedRose Administration                    | National         | 3 days   | Sept-2024 | 5         | -            | 1        | 4         | 5                    |
| RedRose/Leading CVA operations            | National         | 3 days   | Sept-2024 | 5         | -            | 2        | 3         | 5                    |
| Responsible data analytics and management | National         | 3 days   | Sept-2024 | 4         | -            | -        | 4         | 4                    |
| <b>TOTAL</b>                              |                  |          |           | <b>14</b> | <b>-</b>     | <b>3</b> | <b>11</b> | <b>14</b>            |

Table 43 - RedRose trainings

### (D.2) Review and renew *RedRose* contract and service fees

As the former contract and extensions expired, a new Global Framework Agreement (GFA) between *IFRC* and Red Rose has been signed and is effective as of January 1, 2025, for 24 months. This agreement aims to support and strengthen cash and vouchers and cash for work assistance using Red Rose's solutions and services. It also allows the components of the *Red Cross and Red Crescent Movement* to benefit from the negotiated terms and pricing by signing a Supplementary Service Agreement or a separate service agreement.

According to the *Annex 2* of the *GFA*, some fees have been reviewed. As example service fees for remittance, banks, direct cash, prepaid cards and mobile money have been decreased from 1% to 0.85% of the amount. By lowering the service fees associated with these key transfer methods, we can now reach a greater proportion of the population in need, ensuring that more people receive the critical support they require.

To strengthen the capacity of the *Moroccan Red Crescent*, a process has been initiated to create a dedicated Red Rose platform. This process consists in signing a supplementary agreement based on the global framework agreement between *IFRC* and *RedRose* to request the new platform to be available.

At term, this new platform will allow the *MRC* to be in full control of *CVA* and *CFW* management process and address issues and strengthen access granting.

## Data Management and Data Protection

### (D.3) Develop/enforce data management and data protection policies

#### *SharePoint new structure*

A comprehensive SharePoint structure was designed and implemented as a first step to serve as the central data management system for the Morocco Earthquake Response. The platform was built to support full data protection while ensuring compliance with *IFRC* data protection policies.

The SharePoint was organized by sectors, cross-cutting functions, and operational pillars, with clearly defined folders reflecting each stage of the response workflow. This structure allowed for seamless integration of incoming data (e.g. field reports, assessment results), processed outputs (dashboards, maps, sitreps), and reference documents (SOPs, contact lists, strategies). To align with data protection principles, access permissions were configured at both folder and document levels based on user roles and responsibilities. Sensitive files, particularly those containing personally identifiable information (PII), were stored in restricted folders accessible only to designated staff. This setup ensured that data remained secure throughout its lifecycle. The structured environment also supported institutional memory

and promoted responsible data use. By centralizing data flows and embedding protection measures directly into the platform's design, SharePoint became a key enabler of both operational efficiency and compliance with *IFRC's* data management and protection standards.

#### (D.4) Support *IFRC-PNS-MRC* staff in developing their data storage / activities' trackers / databases

Technical assistance has been provided to *MRC* staff to enhance data management practices. Several field missions were conducted in the branches to address critical issues related to systems utilization. These missions focused on offering direct, individualized support to Information Management officers and Cash and Voucher personnel. A primary objective was to improve data quality by mitigating beneficiary duplication within the platform, thereby supporting more effective and efficient program delivery.

##### *Data pipeline*

Data management practices were reinforced through structured collaboration with technical teams across the operation. As part of it:

- In coordination with *CEA* and Shelter teams, Excel trackers and logbooks were reviewed and enforced to ensure uniform data entry on branches, improve traceability, and enhance reporting accuracy. Regular feedback mechanisms supported adherence and promoted consistency in field-level data collection.
- With the *CVA* team, beneficiary and volunteer lists were systematically reviewed to validate population data prior to payments. The process aimed to ensure data completeness, eliminate duplications, and reduce the risk of undue payments. This contributed to a more secure and efficient cash transfer process through the dedicated platform (*RedRose*).

These measures supported the standardization and reliability of critical operational data, enabling timely decision-making and reinforcing data accountability across the response.

##### *Areas of intervention database*

Under the leadership of the Information Management (IM) team, a unified database of intervention areas is being developed to standardize administrative levels and intervention zones across all response actors, including the *Moroccan Red Crescent (MRC)*, *IFRC*, and *Partner National Societies (PNS)*. This initiative aims to foster coordination and shared understanding.

As intervention areas continue to expand, the rollout of harmonized geographic databases has become essential to accurately track response activities. Efforts are underway to obtain official administrative boundaries and shapefiles from Moroccan authorities.

##### *Data Visualisation*

#### (D.5) Develop data visualisation products (maps, dashboards, etc).

From the beginning of the response, diverse visuals have been produced to help in supporting the activities as well as showing up key trends to partners. As of it, maps related to main in demand sectors as WASH, Shelter, Relief coordination and an overview of targeting populations.

One dashboard has been developed to share key insights of the feedback collected. Another one is meant to give an overview of information for each reached douar across branches to better analyze and address population needs.

## MRC Capacity Building

### (D.6) Conduct in-person training for MRC IM staff

See "(C.8) Conduct on-the-job training with PMER/IM branch staff"

## (E) HUMAN RESOURCES

During the reporting period, human resources support was provided at national, regional, and *IFRC*-HQ levels, as well as remotely, ensuring that specialized surge personnel were available to meet the evolving needs of the operation and initiate long-term workforce planning. Although the surge window closed in January 2024, surge Delegates were extended until March to cover key positions in Shelter, Administration, WASH, Logistics, *PMER*, IM, *CEA*, and other areas.

This ensured that the *IFRC* maintained staff capacity during the transition period until long-term positions were filled. Short-term positions were covered through staff on loan and fast-track recruitment, while long-term positions were being recruited to replace surge Delegates and avoid discontinuity in support to *MRC*. Recruitment for long-term Delegate positions is almost complete, according to the approved organogram. With *IFRC*'s assistance, the *MRC* completed the planned recruitment of over 388 national staff in *Rabat*, *Taroudant*, *Chichaoua*, *Demnate* and *Marrakesh*, with some recruitment still underway, including the national *HR* Coordinator who started on 1 November 2024 and was inducted with the support from the *HR* department in the *IFRC* Regional Office.

In April 2024, the *IFRC* Human Resources (*HR*) Delegate joined the team remotely. Her primary focus is on capacity-building support for *MRC*. Since May 2024, *MRC*, with support from its partners, has been working to establish a clear initial organogram for the response and clarify the funding sources for each position. The *IFRC HR* Coordinator, focused on *National Society* Development and the *HR* Delegate, supported the *MRC HR* Coordinator with the drafting of the staff regulation policy which is still ongoing. Other *HR* procedures within *MRC* were put in place such as recruitment guidelines which were prepared and on which a training still needs to be conducted, a process related to annual leave requests, sick leave requests and accidents, the design and implementation of a salary scale and a compensation grid which are being finalized, as well as the legal compliance of national contracts.

In July 2024, several new starters joined the team, including the *El-Haouz MRC* Programme Coordinator, drivers, and technical assistants for *TSUs*. Recruitment efforts continued for HP Officers, additional drivers, a Finance & Admin Coordinator, and more technical assistants for *TSUs*. The team also supported preparations for the *IFRC* staff team-building event. In September 2024, the *IFRC* organogram was reviewed, and a visit of the *IFRC* Regional *HR* Manager MENA to Morocco was concluded as well as a second visit which happened in February 2025.

In March 2025, two sessions were conducted by the Senior Regional Staff Health Officer - *MENA* to all Morocco staff, in regard to staff health.

(E.1) Ensure that staffing needs are met through timely and fast-tracked recruitment, immediate surge support, contract management and *HR* support to the delegation and operation.

| Type of <i>IFRC</i> staff | # Number of Staff |
|---------------------------|-------------------|
| International             | 39                |

|                   |           |
|-------------------|-----------|
| Staff on Loan     | 2         |
| Seconded National | 12        |
| <b>Total</b>      | <b>53</b> |

Table 44 - IFRC staffing

(E.2) Ensure the safety of *IFRC* personnel through acceptable and reliable protective measures and enhance access to affected persons and communities.

Safety and protective measures have been implemented to ensure compliance with key *IFRC* policies. All staff members are required to sign an acknowledgment of mandatory instruments, which include: *IFRC Policy Prevention and Response to Workplace Harassment and Discrimination*, *IFRC Child Safeguarding Secretariat Policy*, *IFRC Policy on Prevention and Response to Sexual Exploitation and Abuse*, *IT Policy*, *Staff Code of Conduct*, *Acknowledgment of Risk Form*, and *Fraud Policy*. Mandatory training courses are enforced, and staff are encouraged to access the integrity line as needed. The required courses include *Saying No to Sexual Misconduct*, *Corruption Prevention 101*, *Stay Safe Levels 1 and 2*, and *Targeted: An Introduction to Cybersecurity*.

(E.3) Using *MRC* security guidance, provide adequate security for all personnel, assets and operations under *IFRC* responsibility by ensuring that safety and security risks are identified and treated.

A security briefing is conducted by the designated security focal point for each delegate upon arrival in Morocco. This measure was implemented to uphold the duty of care and ensure the safety of staff at the duty station.

## (F) ADMINISTRATION AND CORPORATE SERVICES

The Administration Unit is concluded with the recruitment of two staff members: an administration officer and an administration assistant.

(F.1) Together with *MRC*, ensure the effective and efficient provision of administrative and welcome services (transport, accommodation, visas, IT and office facilities).

The obtaining of visas, extensions of stay, and residency continues to be a challenge in ensuring the physical presence of staff in the country. A "Travel for Visa Policy" is now in place to organize the travel of delegates for visa purposes.

(F.2) Oversee business continuity at *IFRC* Cluster delegation and facilitate advice to *MRC*, as needed, including support from the *Regional Office* when required.

Efforts have been made to equip newly established offices in *Demnate (Azilal)* and *El-Haouz* with all the necessary equipment, ensuring operational efficiency. Additionally, workstations have been procured for the *Taroudant* field office to provide staff with proper workplaces. Plans are ongoing to equip the *Emergency Operation Center (EOC)* in *Rabat*, with rehabilitation work on the location already underway and material purchases in progress.

Offices in *Rabat*, *Marrakesh*, *Taroudant*, and *Chichaoua* have been upgraded with teleconference equipment and multifunctional advanced printers/photocopiers. Backup communication devices and Radio Channel Communication Devices have also been provided to enhance communication capabilities. The *IFRC* has supplied *MRC* units with smart tablets for various activities, and it is currently procuring computers and other essential materials for existing and newly recruited *MRC* staff across multiple locations. This initiative aims to ensure that all personnel have access to professional tools to carry out their work effectively.

## (G) SAFETY AND SECURITY

(G.1) Based on *MRC* and *IFRC* security arrangements, update and ensure compliance with Minimum Security Requirements and Duty of Care, including specific security guidelines for select regions as needed.

*Minimum Security Requirements (MSR)* were completed for Morocco in May 2024 following the visit of the Regional Security delegate. Regular updates are to be made to the *MSR* documents. Incoming *IFRC* staff receive a welcome pack and security guidelines document prior to their arrival in country and then they are provided a security briefing on arrival. The *IFRC* Operation Manager acts as the Security Focal Point for the *IFRC* Morocco delegation.

(G.2) Using *MRC* security guidance, provide adequate security for all personnel, assets and operations under *IFRC* responsibility by ensuring that safety and security risks are identified and treated.

A system of monitoring of security risk is in place with the support of the *IFRC* regional office and the *MRC*. Communication on risks is being made towards *IFRC* staff when relevant. *IFRC* has faced a few security incidents in this operation mostly related to road traffic which led to additional recommendations being formulated and followed to adjust movement protocol and regulations.

## FUNDING

To date, **50.47% percent** of the *IFRC* Emergency Appeal's funding needs have been covered. The *IFRC* and the *MRC* express their gratitude to the generous donors who support this Emergency Appeal in order to enable the *Moroccan Red Crescent* to continue providing support to meet immediate, medium, and long-term needs of the populations affected by the earthquake.

# Operational Strategy

## INTERIM FINANCIAL REPORT

| Selected Parameters |               |           |          |
|---------------------|---------------|-----------|----------|
| Reporting Timeframe | 2023/9-2025/2 | Operation | MDRMA010 |
| Budget Timeframe    | 2023/9-2025/2 | Budget    | APPROVED |

Prepared on 22 Apr 2025

All figures are in Swiss Francs (CHF)

### MDRMA010 - Morocco - Earthquake

Operating Timeframe: 11 Sep 2023 to 31 Dec 2025; appeal launch date: 12 Sep 2023

## I. Emergency Appeal Funding Requirements

|                                    |            |
|------------------------------------|------------|
| Total Funding Requirements         | 75,000,000 |
| Donor Response* as per 22 Apr 2025 | 37,853,947 |
| Appeal Coverage                    | 50.47%     |

## II. IFRC Operating Budget Implementation

| Planned Operations / Enabling Approaches               | Op Budget  | Expenditure | Variance   |
|--------------------------------------------------------|------------|-------------|------------|
| PO01 - Shelter and Basic Household Items               | 675,577    | 4,264,576   | -3,588,999 |
| PO02 - Livelihoods                                     | 363,910    | 32,175      | 331,736    |
| PO03 - Multi-purpose Cash                              | 0          | 153,929     | -153,929   |
| PO04 - Health                                          | 957,465    | 288,063     | 669,403    |
| PO05 - Water, Sanitation & Hygiene                     | 4,188,071  | 1,374,603   | 2,813,468  |
| PO06 - Protection, Gender and Inclusion                | 51,989     | 119,305     | -67,316    |
| PO07 - Education                                       | 0          | 0           | 0          |
| PO08 - Migration                                       | 0          | 10,048      | -10,048    |
| PO09 - Risk Reduction, Climate Adaptation and Recovery | 4,742,164  | 3,173,007   | 1,569,157  |
| PO10 - Community Engagement and Accountability         | 92,989     | 168,243     | -75,254    |
| PO11 - Environmental Sustainability                    | 56,153     | 6,021       | 50,132     |
| Planned Operations Total                               | 11,128,318 | 9,589,968   | 1,538,350  |
| EA01 - Coordination and Partnerships                   | 0          | 97,231      | -97,231    |
| EA02 - Secretariat Services                            | 3,012,073  | 2,556,351   | 455,722    |
| EA03 - National Society Strengthening                  | 2,945,799  | 2,013,148   | 932,651    |
| Enabling Approaches Total                              | 5,957,872  | 4,666,731   | 1,291,142  |
| Grand Total                                            | 17,086,190 | 14,256,699  | 2,829,491  |

## III. Operating Movement & Closing Balance per 2025/02

|                                                 |             |
|-------------------------------------------------|-------------|
| Opening Balance                                 | 0           |
| Income (includes outstanding DREF Loan per IV.) | 37,495,665  |
| Expenditure                                     | -14,256,699 |
| Closing Balance                                 | 23,238,966  |
| Deferred Income                                 | 120,776     |
| Funds Available                                 | 23,359,742  |

## IV. DREF Loan

|                                  |        |           |              |           |               |   |
|----------------------------------|--------|-----------|--------------|-----------|---------------|---|
| * not included in Donor Response | Loan : | 1,000,000 | Reimbursed : | 1,000,000 | Outstanding : | 0 |
|----------------------------------|--------|-----------|--------------|-----------|---------------|---|

# Operational Strategy

## INTERIM FINANCIAL REPORT

| Selected Parameters: |               |           |          |
|----------------------|---------------|-----------|----------|
| Reporting Timeframe  | 2023/9-2025/2 | Operation | MDRMA010 |
| Budget Timeframe     | 2023/9-2025/2 | Budget    | APPROVED |

Prepared on 22 Apr 2025

All figures are in Swiss Francs (CHF)

### MDRMA010 - Morocco - Earthquake

Operating Timeframe: 11 Sep 2023 to 31 Dec 2025; appeal launch date: 12 Sep 2023

## V. Contributions by Donor and Other Income

| Opening Balance                                    |           |              |                  |              |           | 0               |
|----------------------------------------------------|-----------|--------------|------------------|--------------|-----------|-----------------|
| Income Type                                        | Cash      | InKind Goods | InKind Personnel | Other Income | TOTAL     | Deferred Income |
| ABB                                                | 102,730   |              |                  |              | 102,730   |                 |
| Accenture Inc.Foundation                           | 223,740   |              |                  |              | 223,740   |                 |
| Adidas                                             | 11,528    |              |                  |              | 11,528    |                 |
| Adobe Systems, Inc.                                | 16,043    |              |                  |              | 16,043    |                 |
| Amadeus IT Group                                   | 1,472     |              |                  |              | 1,472     |                 |
| Amazon                                             | 9,844     |              |                  |              | 9,844     |                 |
| American Red Cross                                 | 2,294,288 |              |                  |              | 2,294,288 |                 |
| Andorran Red Cross                                 | 3,829     |              |                  |              | 3,829     |                 |
| APPLE                                              | 13        |              |                  |              | 13        |                 |
| Australian Red Cross (from Australian Government*) | 279,570   |              |                  |              | 279,570   |                 |
| Austrian Red Cross                                 | 228,275   |              |                  |              | 228,275   |                 |
| Austria - Private Donors                           | 223       |              |                  |              | 223       |                 |
| Autodesk                                           | 6,453     |              |                  |              | 6,453     |                 |
| Avanade                                            | 11,418    |              |                  |              | 11,418    |                 |
| Bank Lombard Odier Darier Hentsch                  | 78,118    |              |                  |              | 78,118    |                 |
| Belarus Red Cross                                  | 135       |              |                  |              | 135       |                 |
| Belgian Red Cross (Francophone)                    |           |              | 102,120          |              | 102,120   |                 |
| Benevity, Inc                                      | 12,408    |              |                  |              | 12,408    |                 |
| Bloomberg                                          | 12,908    |              |                  |              | 12,908    |                 |
| Boeing                                             | 270       |              |                  |              | 270       |                 |
| British Red Cross                                  | 548,833   |              | 22,065           |              | 570,897   |                 |
| British Red Cross (from British Government*)       | 534,023   |              |                  |              | 534,023   |                 |
| Bulgaria - Private Donors                          | 143       |              |                  |              | 143       |                 |
| ByteDance Ltd                                      | 2,922     |              |                  |              | 2,922     |                 |
| California Community Foundation                    | 35,700    |              |                  |              | 35,700    |                 |
| Ceridian                                           | 981       |              |                  |              | 981       |                 |
| Charitable Giving                                  | 45,434    |              |                  |              | 45,434    |                 |
| Charities Aid Foundation                           | 91,877    |              |                  |              | 91,877    |                 |
| Charities Aid Foundation (from Dow Chemical Compar | 35,700    |              |                  |              | 35,700    |                 |
| CHEP Espana                                        | 1,816     |              |                  |              | 1,816     |                 |
| Coca-Cola                                          | 165       |              |                  |              | 165       |                 |
| Coca Cola Foundation                               | 899,620   |              |                  |              | 899,620   |                 |
| COFRA Foundation                                   | 279,822   |              |                  |              | 279,822   |                 |
| Cyprus Red Cross                                   | 4,708     |              |                  |              | 4,708     |                 |
| Czech Red Cross                                    | 7,248     |              |                  |              | 7,248     |                 |
| Danaher Corporation                                | 670       |              |                  |              | 670       |                 |
| Danish Red Cross                                   | 241,886   |              |                  |              | 241,886   |                 |
| Danish Red Cross (from Danish Government*)         | 954,812   |              |                  |              | 954,812   |                 |
| DELL Technologies                                  | 56,672    |              |                  |              | 56,672    |                 |
| Deloitte Global Services Limited                   | 65,314    |              |                  |              | 65,314    |                 |
| Deloitte NSE Services Ltd                          | 47,959    |              |                  |              | 47,959    |                 |
| Dr Dokali Megharief Charity Foundation             | 44,583    |              |                  |              | 44,583    |                 |
| DXC Technology                                     | 801       |              |                  |              | 801       |                 |
| eBay Inc                                           | 335       |              |                  |              | 335       |                 |
| Electronic Arts                                    | 1,117     |              |                  |              | 1,117     |                 |
| Eli Lilly Export SA                                | 8,602     |              |                  |              | 8,602     |                 |
| Equinix, Inc                                       | 56        |              |                  |              | 56        |                 |
| Erawan Group                                       | 523       |              |                  |              | 523       |                 |
| Ericsson                                           | 38,777    |              |                  |              | 38,777    |                 |
| Estee Lauder                                       | 19        |              |                  |              | 19        |                 |

# Operational Strategy

## INTERIM FINANCIAL REPORT

| Selected Parameters |               |           |          |
|---------------------|---------------|-----------|----------|
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Prepared on 22 Apr 2025

All figures are in Swiss Francs (CHF)

### MDRMA010 - Morocco - Earthquake

Operating Timeframe: 11 Sep 2023 to 31 Dec 2025; appeal launch date: 12 Sep 2023

| Income Type                                        | Cash      | InKind Goods | InKind Personnel | Other Income | TOTAL     | Deferred Income |
|----------------------------------------------------|-----------|--------------|------------------|--------------|-----------|-----------------|
| Estonia Government                                 | 48,392    |              |                  |              | 48,392    |                 |
| Estonian Red Cross                                 | 2,668     |              |                  |              | 2,668     |                 |
| European Commission - DG ECHO                      | 191,359   |              |                  |              | 191,359   |                 |
| Fidelity                                           | 20        |              |                  |              | 20        |                 |
| Finnish Red Cross                                  | 98,640    | 34,729       |                  |              | 133,369   |                 |
| Finnish Red Cross (from Finnish Government*)       | 533,666   |              |                  |              | 533,666   |                 |
| French Government                                  | 5,727     |              |                  |              | 5,727     |                 |
| French Red Cross                                   |           | 259,721      |                  |              | 259,721   |                 |
| Givaudan                                           | 200,000   |              |                  |              | 200,000   |                 |
| Google                                             | 1,312     |              |                  |              | 1,312     |                 |
| Gordon Brothers Foundation                         | 21,729    |              |                  |              | 21,729    |                 |
| Government of Malta                                | 47,278    |              |                  |              | 47,278    |                 |
| Grainfeed Trading Ltd                              | 4,784     |              |                  |              | 4,784     |                 |
| Hong Kong Red Cross, Branch of the Red Cross Socie | 22,574    |              |                  |              | 22,574    |                 |
| IBM                                                | 116,128   |              |                  |              | 116,128   |                 |
| Icelandic Red Cross                                | 33,000    |              |                  |              | 33,000    |                 |
| Icelandic Red Cross (from Icelandic Government*)   | 67,000    |              |                  |              | 67,000    |                 |
| Irish Government                                   | 1,923,990 |              |                  |              | 1,923,990 |                 |
| Irish Red Cross Society                            | 596,680   |              |                  |              | 596,680   |                 |
| Italian Red Cross                                  | 191,835   |              |                  |              | 191,835   |                 |
| Japanese Government                                | 1,733,481 |              |                  |              | 1,733,481 | 88,777          |
| Japanese Red Cross Society                         | 1,548,560 |              |                  |              | 1,548,560 |                 |
| Johnson & Johnson foundation                       | 918,591   |              |                  |              | 918,591   |                 |
| KPMG International Cooperative(KPMG-I)             | 89,325    |              |                  |              | 89,325    |                 |
| Liechtenstein Red Cross                            | 51,394    |              |                  |              | 51,394    |                 |
| Lithuania Government                               | 48,125    |              |                  |              | 48,125    |                 |
| Luxembourg Government                              | 287,588   |              |                  |              | 287,588   |                 |
| Luxembourg Red Cross                               | 128,477   |              |                  |              | 128,477   |                 |
| Malaysia - Private Donors                          | 1,287     |              |                  |              | 1,287     |                 |
| Maldives Red Crescent                              | 4,126     |              |                  |              | 4,126     |                 |
| Marriott International Inc.                        | 23,958    |              |                  |              | 23,958    |                 |
| McKinsey & Co                                      | 1,229     |              |                  |              | 1,229     |                 |
| Medtronic Foundation                               | 88        |              |                  |              | 88        |                 |
| Microsoft                                          | 4,928     |              |                  |              | 4,928     |                 |
| Morningstar                                        | 667       |              |                  |              | 667       |                 |
| Moroccan Red Crescent                              | 28,229    |              |                  |              | 28,229    |                 |
| Netherlands - Private Donors                       | 48        |              |                  |              | 48        |                 |
| New Zealand Government                             | 542,062   |              |                  |              | 542,062   |                 |
| New Zealand Red Cross                              | 34,687    |              |                  |              | 34,687    |                 |
| Nike Foundation                                    | 230,196   |              |                  |              | 230,196   |                 |
| Norwegian Red Cross                                | 16,212    |              |                  |              | 16,212    |                 |
| Norwegian Red Cross (from Norwegian Government*)   | 808,157   |              |                  |              | 808,157   |                 |
| Novartis                                           | 4,327     |              |                  |              | 4,327     |                 |
| Ocean Network Express                              | 24,105    |              |                  |              | 24,105    |                 |
| On Line donations                                  | 2,418     |              |                  |              | 2,418     |                 |
| Oracle Corporation                                 | 62,525    |              |                  |              | 62,525    |                 |
| Other                                              | -189,937  |              |                  |              | -189,937  |                 |
| PAYPAL                                             | 2,093     |              |                  |              | 2,093     |                 |
| Philanthropia Foundation                           | 20,000    |              |                  |              | 20,000    |                 |
| Polish Red Cross                                   | 12,549    |              |                  |              | 12,549    |                 |
| PPG Industries Europe Sarl                         | 8,715     |              |                  |              | 8,715     |                 |
| Red Cross of Monaco                                | 94,822    |              |                  |              | 94,822    |                 |
| Red Cross of The Republic of North Macedonia       | 1,408     |              |                  |              | 1,408     |                 |
| Republic of Korea Government                       | 874,737   |              |                  |              | 874,737   |                 |

# Operational Strategy

## INTERIM FINANCIAL REPORT

| Selected Parameters |               |                  |                   |
|---------------------|---------------|------------------|-------------------|
| Reporting Timeframe | 2023/9-2025/2 | Operation Budget | MDRMA010 APPROVED |

Prepared on 22 Apr 2025

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### MDRMA010 - Morocco - Earthquake

Operating Timeframe: 11 Sep 2023 to 31 Dec 2025; appeal launch date: 12 Sep 2023

| Income Type                                          | Cash              | InKind Goods   | InKind Personnel | Other Income   | TOTAL             | Deferred Income |
|------------------------------------------------------|-------------------|----------------|------------------|----------------|-------------------|-----------------|
| Ritz-Carlton                                         | 319               |                |                  |                | 319               |                 |
| Robert Half                                          | 48                |                |                  |                | 48                |                 |
| SAP                                                  | 653               |                |                  |                | 653               |                 |
| Saudi Arabian Red Crescent Society (from Saudi Arab  | 500,000           |                |                  |                | 500,000           |                 |
| ServiceNow                                           | 11,766            |                |                  |                | 11,766            |                 |
| Singapore Red Cross Society                          | 201,686           |                |                  |                | 201,686           |                 |
| Slovenia Government                                  | 193,265           |                |                  |                | 193,265           |                 |
| Societe Fonciere Lyonnaise Group                     | 22,985            |                |                  |                | 22,985            |                 |
| Spanish Government                                   | 955,803           |                |                  |                | 955,803           |                 |
| Spanish Red Cross                                    | 2,180,329         | 355,176        |                  |                | 2,535,505         |                 |
| SPGlobal                                             | 4,578             |                |                  |                | 4,578             |                 |
| Swedish Red Cross                                    | 419,269           |                |                  |                | 419,269           |                 |
| Swiss Government                                     | 1,000,000         |                |                  |                | 1,000,000         |                 |
| Swiss Humanitarian Foundation, SRK                   | 60,000            |                |                  |                | 60,000            |                 |
| Swiss Red Cross                                      | 1,799,965         |                |                  |                | 1,799,965         |                 |
| Swiss Red Cross (from Switzerland - Private Donors*) | 30,449            |                |                  |                | 30,449            |                 |
| Taiwan Red Cross Organisation                        | 108,569           |                |                  |                | 108,569           |                 |
| Thailand - Private Donors                            | 6,187             |                |                  |                | 6,187             |                 |
| The Canadian Red Cross Society                       | 643,707           |                |                  |                | 643,707           |                 |
| The Canadian Red Cross Society (from Canadian Gov    | 3,251,149         |                |                  |                | 3,251,149         |                 |
| The Netherlands Red Cross                            | 12,371            |                |                  |                | 12,371            |                 |
| The Netherlands Red Cross (from Netherlands Govern   | 4,716,558         |                |                  |                | 4,716,558         |                 |
| The OPEC Fund for International Development          | 435,174           |                |                  |                | 435,174           |                 |
| The Red Cross Society of Bosnia and Herzegovina      | 8,601             |                |                  |                | 8,601             |                 |
| The Republic of Korea National Red Cross             | 629,853           |                |                  |                | 629,853           |                 |
| The Travel Corporation                               | 44,631            |                |                  |                | 44,631            |                 |
| TPG Global, LLC                                      | 22,463            |                |                  |                | 22,463            |                 |
| United States Government - USAID                     | 662,186           |                |                  |                | 662,186           | 31,999          |
| United States - Private Donors                       | 2,787             |                |                  |                | 2,787             |                 |
| UN Staff Council / UNOG                              | 12,765            |                |                  |                | 12,765            |                 |
| Write off & provisions                               |                   |                |                  | -39,431        | -39,431           |                 |
| WTO - World Trade Organization                       | 5,570             |                |                  |                | 5,570             |                 |
| Yardi                                                | 45,515            |                |                  |                | 45,515            |                 |
| Zimmer Biomet                                        | 1,752             |                |                  |                | 1,752             |                 |
| <b>Total Contributions and Other Income</b>          | <b>36,761,286</b> | <b>649,626</b> | <b>124,184</b>   | <b>-39,431</b> | <b>37,495,665</b> | <b>120,776</b>  |
| <b>Total Income and Deferred Income</b>              |                   |                |                  |                | <b>37,495,665</b> | <b>120,776</b>  |

Please note: The financial report provided covers data through February 2025. Figures for March 2025 are not included, as the financial books for that month remain open at the time of this publication.

## Contact information

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

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- Yara Yassine, Regional Head, Strategic Partnerships and Resource Mobilisation, [yara.yassine@ifrc.org](mailto:yara.yassine@ifrc.org)

### Reference documents



Click here for:

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

## How we work

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