



Philippines: Typhoon Haiyan

Three-year progress report

November 2016

 International Federation
of Red Cross and Red Crescent Societies




ICRC

The Fundamental Principles of the International Red Cross and Red Crescent Movement

Humanity The International Red Cross and Red Crescent Movement, born of a desire to bring assistance without discrimination to the wounded on the battlefield, endeavours, in its international and national capacity, to prevent and alleviate human suffering wherever it may be found. Its purpose is to protect life and health and to ensure respect for the human being. It promotes mutual understanding, friendship, cooperation and lasting peace amongst all peoples.

Impartiality It makes no discrimination as to nationality, race, religious beliefs, class or political opinions. It endeavours to relieve the suffering of individuals, being guided solely by their needs, and to give priority to the most urgent cases of distress.

Neutrality In order to enjoy the confidence of all, the Movement may not take sides in hostilities or engage at any time in controversies of a political, racial, religious or ideological nature.

Independence The Movement is independent. The National Societies, while auxiliaries in the humanitarian services of their governments and subject to the laws of their respective countries, must always maintain their autonomy so that they may be able at all times to act in accordance with the principles of the Movement.

Voluntary service It is a voluntary relief movement not prompted in any manner by desire for gain.

Unity There can be only one Red Cross or Red Crescent Society in any one country. It must be open to all. It must carry on its humanitarian work throughout its territory.

Universality The International Red Cross and Red Crescent Movement, in which all societies have equal status and share equal responsibilities and duties in helping each other, is worldwide.

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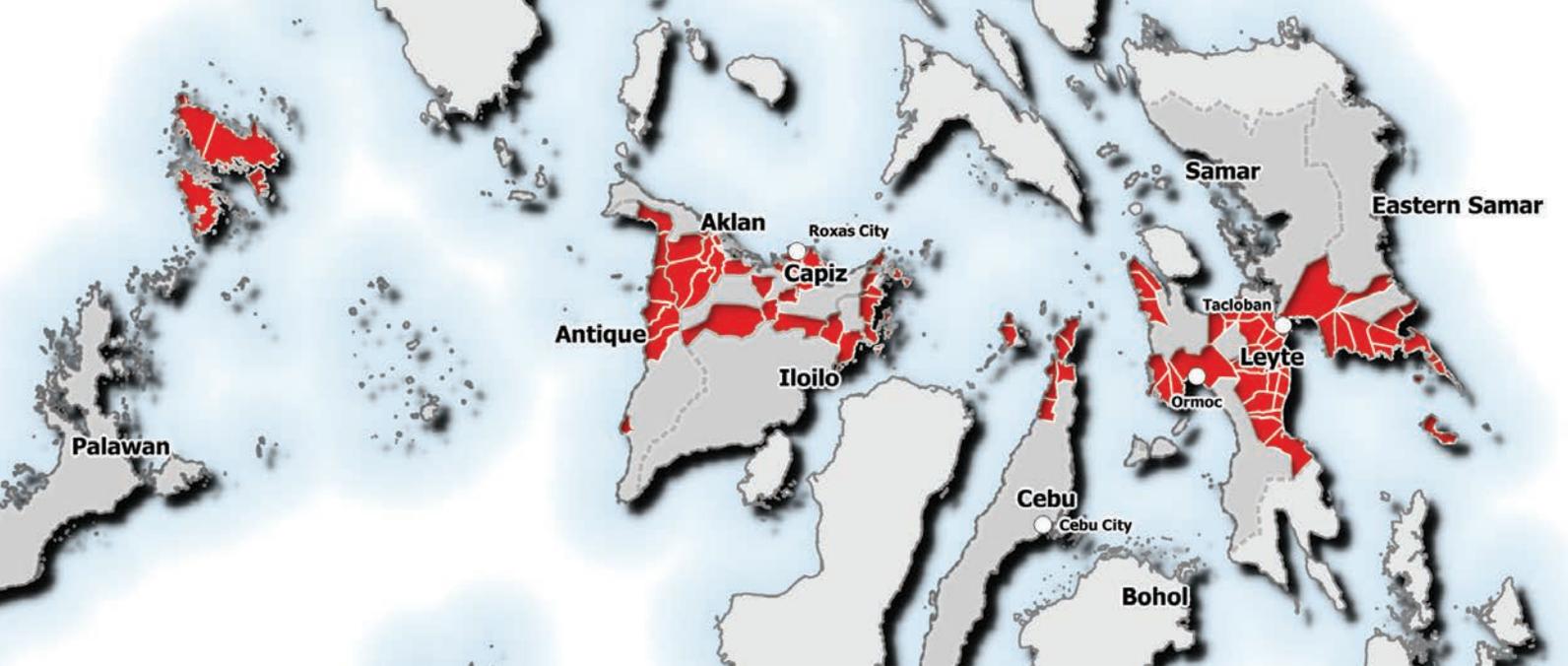
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Haiyan three-year progress report

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Number of Municipalities



Number of Movement partners



Income vs expenditure in CHF



Shelter assistance
75,973



Livelihood grants
63,221



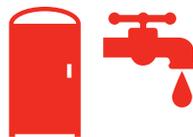
Health facilities
70



Classrooms
490



Water and sanitation facilities
29,843



Logistics centres established
6



People and students reached through hygiene promotion (PHAST/CHAST)



Number of communities with Philippine Red Cross 143 programme



Welcome note

Three years after Typhoon Haiyan (locally known as Yolanda) swept across the Central Visayas region leaving a trail of unprecedented destruction, the Philippine Red Cross, together with the Red Cross and Red Crescent Movement (the Movement) partners, continue to support the longer-term recovery of communities.

The Philippine Red Cross was among the first responders on the ground. Ceaseless efforts were made in reaching inaccessible areas to not only provide relief items, but also clearing pathways and main road networks from debris. Psychosocial support was also provided to ensure the overall health and well-being of the affected communities. During the first three months, families were provided with essential items such as hygiene kits, jerry cans, and sleeping kits.

The life and lifeblood of the Philippine Red Cross has been its volunteerism, which played a vital role in alleviating the suffering, while upholding human dignity of the affected families during the emergency and relief phase of operations. Displaced families received hot meals. Emergency field hospitals were set-up to assist in meeting the overwhelming health needs of the sick and injured. In the early months, hundreds of thousands of households were reached by the Red Cross and Red Crescent support, made possible through deployment of experts from around the world and the active mobilization of Philippine Red Cross staff and volunteers from across the country.

By contributing to strengthen community resilience, the long-term recovery programme aims to have a sustainable and long-lasting impact. To ensure access to basic health-care services, healthcare units and hospitals have been rehabilitated. Health education activities are being carried out to raise awareness and empower communities to take charge of their own health. Communities now have access to safe water sources, supported with hygiene promotion activities, to help raise awareness of good hygiene practices, including hand-washing, and waste disposal.

To re-establish livelihood, individuals and communities received grants, and trainings to acquire new skills, to help enhance income generating opportunities. Houses have been built using build back safer techniques that conform even above the national-building standards. Shelters have also been fitted with toilets to ensure that families have access to proper sanitation facilities and where needed, improvements have been made to cater to the needs of persons living with disabilities, to ensure safe and mobile access to their homes.

To ensure a conducive learning environment for children, damaged schools have been rebuilt or rehabilitated, including sanitation facilities. Schools have been equipped with essentials, such as desks, chairs or other required materials.

With a focus on strengthening community resilience, the disaster risk reduction programme, including prevention, preparedness, mitigation and disaster response activities, continue to take place in communities across the affected areas.

The intensity of this experience Haiyan has often challenged the organization, and tested the limits of our staff and volunteers, but it has made us even stronger. The Philippine Red Cross, together with its network of more than 100 chapters, is now better equipped, and has enhanced capacities to respond to different types of emergencies, ensuring a Red Cross for the country, region, and even world, that is *always first, always ready, and always there*.

This Movement-wide report highlights the progress made over the past three years, through the collective effort of Movement and private and public stakeholders, in support of the Philippine Red Cross' realizing the overall emergency and recovery plans for those affected by Typhoon Haiyan.

The Philippine Red Cross would like to extend its appreciation to the International Federation of the Red Cross and Red Crescent Societies, the International Committee of the Red Cross and the 137 Participating National Societies. The continuous and relentless support provided by different agencies, foreign and local, in the recovery programmes and capacity enhancement has been awe-inspiring. The collective presence and work of the Movement has resulted in protecting and saving lives.

Thank you to all the donors in the Philippines and abroad, the governments, private sector, and individuals who have extended their support through cash, in-kind donations, and prayers. Without this collective generosity, it would not have been possible for communities to advance so quickly on the road to recovery. Such kindness from around the world has been a humbling and uplifting experience.

Thank you.



A handwritten signature in black ink, appearing to read 'R. J. Gordon'.

Richard J. Gordon
Chairman and Chief Executive Officer
Philippine Red Cross
Manila

Recovery is an ongoing process. Over the past three years, the Red Cross and Red Crescent Movement partners have provided the affected communities with access to safe drinking water, improved sanitation facilities, houses built using the build back safer principles, vocational training and cash grants to re-establish their livelihoods.



Foreword

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Three years have passed since the strongest typhoon to hit the Philippines left 6,300 people dead and affected more than 16 million lives. Typhoon Haiyan packed winds of up to 300 kph and caused storm surges and five- to six-metre high waves at its peak, destroying economic assets and infrastructure, especially in coastal villages across the Central Visayas region.

Led by the Philippine Red Cross, the Red Cross and Red Crescent Movement launched emergency relief operations, providing food, water, emergency shelter, psychosocial support and welfare services to hundreds of thousands of families. Through a Movement-wide coordinated framework, the operational strategy guided the implementation of programmes and focused on providing support to the most affected communities, while upholding dignity.

A total of 75,973 households have been provided with shelter repair assistance, and 3,833 carpenters and craftspeople have been trained in safe shelter construction. Livelihoods assistance has been provided to 63,221 households and 2,100 youth have been enrolled in training, with 1,912 graduating in vocational courses under the skills training and enterprise development programme. Sixty-one per cent of those who have graduated are now employed.

Seventy health facilities were repaired or reconstructed and equipped to provide improved health services to the communities. Hundred and twelve schools have been built or improved and 490 classrooms rehabilitated; latrines have also been provided, including hand-washing stations. To ensure better hygiene practices, 65,295 households and 29,273 school children have been reached through hygiene promotion activities.

To build capacity, the Philippine Red Cross volunteers have also received training in different sectors. The Movement partners continue to support the development of the Philippine Red Cross and its capacity to prepare for and respond to disasters, and implement recovery programmes. Several of its chapters have also been provided with equipment and received support for the repair or reconstruction of their offices.

The Movement remains transparent in the implementation of its programmes. Accountability to stakeholders, especially the target population, remains key in achieving outcomes. Engaging the communities to provide appropriate, timely and sustainable assistance ensures that programmes will have a long lasting impact.

Three years on, through the combined efforts of the Red Cross and Red Crescent Movement, affected families are well on their way to recovery. They are better equipped to prepare for and respond to future disasters and crises. The Movement is proud to serve and are humbled by the courage and ability of the affected communities to rebuild their lives and recover from the impact of this disaster.



Atty. Oscar P. Palabyab
Secretary General
Philippine Red Cross
Manila



Xavier Castellanos
Director, Asia Pacific
IFRC Asia Pacific regional office
Kuala Lumpur



Boris Michel
Regional Director, Asia Pacific
ICRC
Geneva

Chairman Richard J. Gordon with community members. The Red Cross and Red Crescent Movement partners are empowering communities to build back their lives and their livelihood in a sustainable manner, thus contributing towards increasing their overall safety and resilience.



Rumolo Godines/Philippine Red Cross

A note on reading this report

Typhoon Haiyan swept across central Philippines on 8 November 2013, leaving behind a trail of damage and destruction never witnessed before. Prior to and since then, the Philippine Red Cross has been working relentlessly not only in providing assistance to those affected by Typhoon Haiyan but also is running simultaneous operations in response to disasters and crises, such as, the Bohol earthquake, Zamboanga siege, Typhoon Rammasun, Typhoon Hagupit, Manila Fire Incident, Typhoon Maysak, Typhoon Koppu and Typhoon Melor. The collective effort of the Red Cross and Red Crescent Movement (Movement) partners in response to Typhoon Haiyan has by far been unparalleled and is soon to be successfully completed.



8 November 2013

Typhoon Haiyan (Yolanda) sweeps across central Philippines. Strong winds and heavy rainfall trigger floods, mudslides and storm surges, wiping out coastal villages and towns. More than 16 million people are affected, 6,300 lives lost and 1.1 million homes damaged or destroyed.

Mark Munkel/Danish Red Cross

November 2013

Red Cross and Red Crescent deploy 12 emergency response units to provide non-food relief supplies, mass sanitation, water treatment, basic health services, logistics services, and emergency telecommunications infrastructure.

Cheryl Gaglac/IFRC



Guided by the Movement-wide operational framework (the framework), which was conceptualized and agreed upon by the Movement partners, the operation continues to move forward in a positive direction towards recovery. The framework has served as an effective operational guide for partners in ensuring quality and a well-coordinated response.

This report comprises programme and financial information provided by the Philippine Red Cross, International Federation of Red Cross and Red Crescent Societies (IFRC), International Committee of the Red Cross (ICRC) and the respective Participating National Societies, reflecting a consolidated portrait of the data obtained from all parties. Programme indicators have been set to report against progress and achievements of the Movement during the relief and recovery phases until mid-September 2016. The financial data in this report presents an overview of the Movement's contribution in response to Typhoon Haiyan from 8 November 2013 to 31 August 2016.

The programme data for this report was provided by 13 Participating National Societies, the Philippine Red Cross, IFRC and ICRC. The programme indicators illustrate key activities carried out across different sectors during the emergency relief and recovery phases. These do not, however, reflect the complete portfolio of each Movement partner, given the magnitude of this operation and the broad spectrum of support being provided.

The programme indicators in this report encompass two phases of the operation: (i) the emergency phase (8 November 2013 through 28 February 2014), and (ii) the recovery phase (1 March 2014 onwards). Given the National Society's continuous presence throughout the operation, figures reported during the relief phase are largely based on Philippine Red Cross data. This data has been used to cross-reference figures provided by partners.

Data collection for the recovery phase of the operation is more clearly defined and accurately recorded. Again, the Philippine Red Cross' data has been used to cross-reference figures reported by the partners. The use of more systematic and focused data collection methods during this phase is helping to provide a clearer picture of reach and impact from the recovery activities in comparison to the relief phase. Data methodology continues to be refined to accommodate the evolving operational context, and may lead to the alteration of several indicators in this report, and subsequently, to changes in future figures reported.

10 November 2013

Red Cross and Red Crescent Movement Response to Humanitarian Needs after Typhoon Haiyan, a joint statement between the Philippine Red Cross, IFRC and ICRC is signed.

11 November 2013

The Philippine government declares a state of national calamity and calls for international humanitarian assistance. The Inter-Agency Standing Committee categorizes Haiyan a level-3 disaster, requiring global mobilization and response.



November 2013

Shelter Cluster is activated with the Government of Philippines as the lead and IFRC as the co-lead. The cluster coordinates the shelter response of more than 100 partners to work effectively and provide families with adequate and safe shelter.

Werner Lechner/Shelter Cluster Philippines

The financial data reported as of 31 August 2016 shows an analysis of funds received and spent for the operation. The financial information presented is reflective of the number of Movement partners reporting on it. IFRC, ICRC and 29 Participating National Societies, including the Philippine Red Cross, has provided unaudited financial data. Hence, these figures may change, and as such, respective annual reports should provide reference for an overview of the final financial information.

This report begins with an overview of the operation followed by progress made in service delivery across sectors. Indicators on programme achievements follow with a financial overview, supplemented with annexes that provide more detail on both programme and financial indicators. A list of Red Cross and Red Crescent members who have contributed to the overall Typhoon Haiyan relief and recovery effort is included in Annex 3.

International Federation of Red Cross and Red Crescent Societies (IFRC) refers to the IFRC secretariat and all members National Societies collectively.

International Committee of the Red Cross (ICRC) refers to ICRC's headquarters in Geneva and delegations around the world.

Red Cross Red Crescent Movement (Movement) refers to ICRC in addition to the IFRC secretariat and members National Societies.

IFRC secretariat refers to the coordinating entity that represents the IFRC members. In the Typhoon Haiyan operation in the Philippines, the secretariat also performs an operational role in the implementation of programmes. For the purpose of Movement-wide reporting, the secretariat reports the income, expenditure and programme results of its operations in support of the Philippine Red Cross.



12–13 February 2014

A Movement-wide operational framework is agreed upon to ensure a single concerted approach among all partners to enable information-sharing, effective harmonization of activities and maintain overall quality and accountability.

Japanese Red Cross Society

15–17 July 2014

Starting from the island of Samar and northern Leyte and progressing to Metro Manila, Typhoon Rammasun (Glenda) cuts a wide swath of destruction from eastern to southern Luzon.

Philippine Red Cross



Operational overview

The Philippine Red Cross together with the Movement partners, guided by a coordinated approach and the Movement-wide framework, has supported thousands of households across different provinces affected by the strongest typhoon to make landfall in country's recorded history.

The emergency relief operation was launched immediately to provide assistance to the people affected across the Central Visayas region. Food, water, clothes and emergency shelter materials were dispatched and more than 8,000 volunteers were mobilized.

To support recovery efforts of the affected people, Movement partners contributed to the operational plan of the Philippine Red Cross. Coordination was maintained to ensure efficient and effective utilization of resources, and to reach the affected communities with quality service and appropriate assistance.

The recovery of households entailed support for shelter repair and reconstruction, recovery of livelihoods and income generation activities, construction of water and sanitation facilities, rehabilitation of health infrastructure and health promotion initiatives, and improved educational facilities. Awareness raising sessions were also carried out with the communities to improve their knowledge of disaster preparedness.

Shelters were built using the build back safer techniques. The government mandated no-build zone in areas that are susceptible to landslides, floods or storm surges was observed. Households were engaged to contribute in the construction of their homes, creating a sense of ownership. Some members of the communities were also employed in cash-for-work programmes to support the construction process.

Individuals and communities were provided livelihood assistance in the form of cash grants. Young people were provided with formal vocational trainings on welding, dressmaking, food and beverage handling, among others, to enhance their skills. Communities were also provided with the opportunity to manage livelihood projects that are economically and environmentally sustainable and beneficial to the members of the community.



8 November 2014

One year on, more than 145,000 households have received emergency shelter materials and 6,081 households' core shelters. 91,200 households have received unconditional cash grants and 17,421 people provided with cash-for-work opportunities.

American Red Cross

6 December 2014

Typhoon Hagupit (Ruby), the second most intense typhoon to hit the Philippines in 2014 sweeps over the same part of the country devastated by Typhoon Haiyan the year before.

IFRC





Forty-six-year old Corazon Sabroso from Palawan province lives with her husband Jarou and their four children. From the cash grant she received, Corazon bought kitchenware and ingredients to set-up a small eatery. She now earns 300 Philippine pesos a day. Her kids are going to school and she is able to put aside savings and will be able to proceed with the construction of their new house.

Swiss Red Cross

May 2015

The Red Cross and Red Crescent Movement has raised almost 430 million Swiss francs in support of its relief and recovery efforts. The majority of the funds received are from the general public and corporates.

Swiss Red Cross



May 2015

18 months on, 40,296 households have received shelter repair assistance and 13,157 families, core shelters. 21 medical facilities have been repaired and re-equipped. 7,728 volunteers and community members received training in disaster risk reduction.

Swiss Red Cross



Water and sanitation facilities were provided to households and schools to ensure access to safe water and improved sanitation to reduce risks of waterborne, water-related and other communicable diseases. These facilities were complemented with hygiene and sanitation transformation activities for community members and students to improve their knowledge on the importance of maintaining good personal hygiene and health.

Health facilities were constructed and re-equipped to provide quality service to the population. Through facilities and improved knowledge, communities have better access and opportunities to prevent and address health problems.

Classrooms and educational facilities were repaired to provide a safe learning space for school-going children. In the event of a disaster these facilities will be used as evacuation centres. Children also received psychosocial support to ease the trauma of their experience during the typhoon.

In a country that is highly susceptible to disasters, the communities' ability to prepare for, cope with and respond to disasters is crucial in saving lives and property. Proper knowledge, training and sufficient support from Red Cross chapters empowers the community in identifying risks and implementing mitigation measures and response plans. Trained Philippine Red Cross volunteers are at the frontline to respond during emergencies and act as advocates of health and disaster risk reduction principles within the communities.

The Movement remains committed to being accountable to funding agencies, stakeholders and the communities. Monitoring and evaluation activities are being implemented to gauge the appropriateness and impact of the programmes.



18 October 2015

Typhoon Koppu (Lando), a powerful and devastating typhoon with sustained winds of 185kph strikes Luzon, killing 48 people, injuring 83 and affecting 3.13 million people.

Philippine Red Cross

8 November 2015

Red Cross and Red Crescent assisted 62,296 households with livelihood support and 1,510 youth with an opportunity to enrol in vocational schools for skills and enterprise development.

Japanese Red Cross Society



Social inclusion – raising awareness and working collaboratively across sectors

Danny Egot and his wife Wilma now live with their three children, two daughters and a son, in their new home in *barangay* Tagharigue, municipality of Calubian. Their youngest, five-year-old Rinnah was born with a birth defect Meningocele.¹ Danny and Wilma share that as a result of this condition, “She suffers from epileptic attacks three times a day”.

In January 2016, the Australian Red Cross conducted an assessment of households that have members living with disabilities. The *barangay* recovery committee identified Danny’s household as one of the most vulnerable in the community – Rinnah being a child with special needs. This was followed by a home visit in coordination with the Municipal Social Welfare Development (MSWD) officer to further develop targeted assistance and discuss referral options for Rinnah.

Following the household assessment, the Philippine Red Cross submitted Rinnah’s case to MSWD. In July 2016, the family was requested by MSWD to visit their office and recommended that Rinnah visits the Divine Word Hospital in Tacloban, province of Leyte for further consultation with a neurologist. MSWD and the Philippine Red Cross worked closely to support the family. MSWD provided financial support for transportation of the family to the hospital, whilst consultations and free medication were coordinated with the support of the Municipal Health Office.

The Philippine Red Cross further conducted disability awareness sessions with the municipal and *barangay* government units. These sessions, along with identifying other cases similar to Rinnah’s were critical in developing new approaches and improved methods of municipal level support for persons living with disabilities.

In August 2016, during the Calubian Municipal Councillor’s Meeting, a resolution was proposed to designate a disability affairs focal point to be seated in MSWD. This outcome is an important step and reinforces Calubian’s commitment to provide ongoing support to those living with disabilities.

1. Protrusion of the membranes that cover the spine and part of the spinal cord through a bone defect in the vertebral column. Meningocele is due to failure of closure during embryonic life of bottom end of the neural tube, the structure which gives rise to the central nervous system (the brain and spinal cord)



13 December 2015

Typhoon Melor (Nona), makes landfall after rapidly intensifying in strength. At least 42 people were killed, 98,000 houses destroyed and 180,000 houses damaged, mostly in the provinces of Oriental Mindoro and Northern Samar.

Philippine Red Cross

11 September 2016

Severe Tropical Storm Meranti (locally known as Ferdie) entered the Philippine Area of Responsibility with maximum sustained winds of 105 kph near the centre causing damage to property and livelihoods and interrupting communication and electricity lines.

Philippine Red Cross



Shelter – safer homes, secure communities

The coordinated approach of the Movement partners in regard to repair and construction of hundreds of thousands of houses across several provinces ensured that best practices towards building back safer is observed by all the partners. Efficient and effective delivery was made possible by the leadership of Philippine Red Cross, with thousands of volunteers serving communities.

Community members were engaged and encouraged to participate in the construction of their homes. Members of the affected households were employed in cash-for-work programmes to augment their income, while also learning safer shelter repair and construction techniques from Red Cross engineers and staff. These skills have since become a valuable asset for the trained community members in the local labour force.

Water facilities and latrines fitted with septic tanks were constructed with the shelters to provide households and communities with access to sanitation facilities, greatly reducing the risks of water-borne and water-related diseases, improving their quality of life and leaving a lasting and positive effect.

Building adequate and resilient shelters after the devastation caused by Typhoon Haiyan required extensive resources and meant bringing together an array of men and women of different nationalities and backgrounds.



Carpenters and craftspeople trained

3,833



Communities reached with build back safer orientation

809



Core shelter

29,047



Shelter repair assistance

46,926

19 October 2016

Super Typhoon Haima makes landfall in the central Luzon, bringing torrential rain and winds of 225kph with gusts of 315kph. Volunteers and staff of the Philippine Red Cross are hard at work assessing the damage across the island.

Cheryl Gagalac/IFRC



8 November 2016

Red Cross and Red Crescent Movement members have assisted 63,221 households with livelihood support and 2,100 youth with an opportunity to enroll in vocational courses for skills and enterprise development.

Jes Aznar/ICRC



On the road to recovery, the Movement partners have promoted the use of locally available materials and empowered communities to build their lives and livelihoods in a sustainable manner. Traditional construction methods have been enhanced using build back safer techniques to improve safety and reduce vulnerability to disasters.



Spanish Red Cross

Building back safer and storm-resilient houses

For people affected by Typhoon Haiyan, the reconstruction of their shelter represented the most pressing priority after food, water and healthcare needs. Following an assessment, the ICRC together with the Philippine Red Cross, supported 4,462 families across eight municipalities of Samar to build storm-resilient houses and sanitation facilities.

The design of the houses incorporated the key build back safer principles – solid foundation, bracing, strong joints, roofing, among others and used high-quality and long-lasting local construction materials. More than 1,000 carpenters were trained in applying these principles in construction.

In December 2014, when Typhoon Hagupit (locally known as Ruby) made landfall in Eastern Samar, the construction of the houses was put to test. Of all the houses built, only four were damaged – two due to landslides and two because of weak coco lumber. The families protected their houses by temporarily dismantling windows and doors; adding additional bracing; and reinforcing their houses with supporting columns or tension cables.

The four damaged houses were consequently repaired the following month.

The permanent core shelters were fitted with latrines. To promote better hygiene practices, reduce the incidences of diarrhoea and encourage community management of water and sanitation facilities, the Philippine Red Cross raised awareness in communities by using the participatory hygiene and sanitation transformation approach. The communities developed plans to improve the overall situation including ending open defecation.

Livelihoods – towards economic security

Typhoon Haiyan destroyed livelihoods and local economies, intensifying food insecurity and poverty, both factors that further contribute to greater social and economic instability. This had a disproportionate impact on the lives and livelihoods of the affected population, and heightened existing vulnerabilities.

In its efforts to help with the recovery of families affected by Haiyan, the Movement's livelihoods programme has directly contributed in allowing people to take control of their lives and regain some normalcy.

During the emergency phase, 91,282 households were provided with unconditional cash grants and 27,447 households with cash-for-work activities. The unconditional cash grants aided in meeting families' immediate needs just after the disaster.

Looking ahead at the long-term recovery of communities, skills training and enterprise development (STED), and community-managed livelihood projects (CMLP) were implemented. The STED approach provides skills training which diversifies the employment opportunities and prepares the youth for setting-up small scale business. Youth enrolled in vocational courses such as, but not limited to, automotive, cookery, dressmaking, electrical installation, food and beverages, housekeeping, and shielded metal arc welding. Many of these youth are now putting their newly acquired skills to use and have been able to secure employment and generate an income.

The concept of community-unity in advancing recovery has been translated through CMLP. Most of the projects focus on agriculture, aquaculture/fishing, food processing and poultry farming. More than 153 communities were supported and able to establish community-based projects.

The livelihoods effort of the Red Cross and Red Crescent Movement has not only allowed vulnerable families and communities to meet their basic needs but also has supported people in getting back on their own feet.



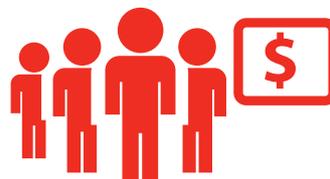
Youth reached
with STED

2,100



Individuals employed
after STED

1,291



Community-managed
livelihood projects

153



The livelihoods programme is designed to provide families and communities with the opportunity to become self-reliant and to engage in activities that will foster growth with lasting benefits.

Newly acquired skills opens the door to opportunities

Nilda Altenejo used to work as a housemaid for her neighbour, earning 2,000 Philippine pesos (PHP) a month to supplement her husband's income. Despite the two sources of income, Nilda and her husband could not make ends meet.

"I worked as a housemaid for five years and earned PHP 2,000 a month but sometimes I did not earn enough money for my children to go to school", says Nilda.

Following the damage and destruction caused by Typhoon Haiyan, Nilda and her family benefitted from the American Red Cross-Philippine Red Cross shelter and livelihood programme. They not only received a new and safer house but also were recipients of grants that covered the tuition fee for the children and a vocational course of Nilda's choice.

When Nilda first heard of the skills training and enterprise development (STED) programme, she submitted an application hoping to receive training for a hairdressing and cosmetology course.



Thyjiacirith Ylia Mavoumreen D. de Ocampo/ American Red Cross

"At first, I wanted hairdressing but only because I thought that it comes with the make-up training, but it did not. I found out that I had to take a different course (cosmetology) for the make-up training. I wanted to take a course from which I could learn and benefit a lot. My mother encouraged me to take dressmaking instead since there are only a few tailors here in our municipality and they are expensive. I had no tailoring experience but I took a chance", shares Nilda.

After completing an intensive three-month training at the Asian Development Foundation College, Nilda received a cash grant of PHP 10,000 with which she bought a sewing machine, a black and gold Singer.

Soon she was accepting orders from her neighbours. She is also making use of her new skills to tailor her son's uniform.

"Our life has changed a lot. Before, I had to do extensive and laborious chores in someone else's house for a whole day. When I got home, I still had to do our chores at home. Now, I stay at home the whole day, making money from the tailoring business. I can spend more time cleaning our house and bonding with my children. Also, I can already give pocket money to my sons for going to school", says Nilda.

In addition to tailoring and altering clothes, Nilda makes footrags, a household slipper to keep floors free of dirt, from used clothing which she sells for PHP 25 a pair. She is even able to save money to buy an automatic electric machine.

"I will do my best to keep this tailoring business going because I can also help other people from it. Sometimes when someone needs some tailoring services and they do not have money, I do it for free because I know what it feels like to have nothing", says Nilda.

Healthcare – healthy communities, less vulnerable, more resilient

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In the aftermath of Typhoon Haiyan, the Movement partners' response was immediate and they started providing first aid to the injured. The disaster had a significant impact on people's health. Many lives were lost. Emergency field hospitals were set-up and medical personnel were deployed.

To ensure long-term impact, health promotion initiatives were carried out in communities using the community-based health and first-aid (CBHFA) approach. Construction and rehabilitation of health stations/clinics served as an entry point in promoting health among community members. Seventy healthcare facilities have already been rehabilitated and reconstructed while another 12 are underway. These health stations have been equipped with medical supplies and equipment. Given the importance of being able to access healthcare services in a timely way, priority was given to communities that are not easily accessible.



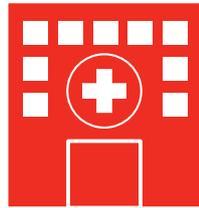
Cheryl Gaglac/IFRC

The Red Cross and Red Crescent Movement partners have rehabilitated and constructed health facilities. To improve health services, these facilities have also been upgraded and equipped. Some facilities now include a birthing clinic.

CBHFA is an integrated community-based approach that focuses on disease prevention, health promotion, first aid and disaster preparedness and response. Communities are mobilized and empowered to take charge of their own health. Through dialogue, community members are able to identify and address their health priorities and needs, thus creating healthy and resilient communities.

Through CBHFA, 1,636 community health volunteers have been trained to support health programmes and augment the healthcare services in their own communities. Trained community health volunteers serve as first responders in their own neighbourhoods in a timely and effective way. During epidemic outbreaks, the same network of trained volunteers can be activated and mobilized to help in disease prevention and response through disseminating key messages.

Communities can realize their development goals better if they are healthy and less vulnerable to diseases.



Health facilities rebuilt /
repaired / re-equipped handed over

70



People trained
as community
health volunteers

1,636



Women of reproductive age
reached with maternal
and childcare promotion

5,982

Towards building healthy communities – a letter from a community health volunteer

Dear Sir/Madam,

First of all, I regret that I will not be able to say the following in person – only through this letter.

I am truly grateful for all the help the Red Cross extended to our town and to me as a volunteer. It helped me become more involved in my community as a health volunteer.

At the moment, we are concentrating on the third priority health issue in our town, acute respiratory infection. We have completed our first visits in some sitios but there are areas we are yet to reach – visits were on hold due to the national elections.

The household visits and health sessions we conducted to decrease the problem in hypertension have been of great help. The residents have become more aware of how to better take care of their health, especially those who suffer from high blood pressure at a young age.

During one of our household visits to monitor blood pressure, one resident recorded high blood pressure (140/100). Initially, he did not really listen to us, but when his blood pressure did not go down, he started to get worried and decreased his alcohol intake, smoking, and even stopped eating oily and fatty food. This lifestyle change has helped in bringing his blood pressure back to normal. There have been many cases like this where residents at first did not care about their health, but eventually changed their habits. Of course, there are still some of those who refuse to change, but we are not one to force them.

While I am very happy in my role as a volunteer, there are concerns that I would like to share with you. We conduct household visits almost every day in our community. Many of us, community health volunteers, are working mothers here in Rosario. While we manage to strike a balance in our family and working lives, volunteering is time consuming and we have had to make sacrifices – less time with family and giving up our side jobs. We are tired by the end of the day and have little energy. There are times when we ask store owners to prepare noodles for us with a promise to pay them later. My plea to you is to reconsider the decision to discontinue the food allowance since it is a big help to us.

Thank you.

Jean Rollo

Community health volunteer
Philippine Red Cross, Aklan



Water, sanitation and hygiene promotion – access to safe water and sanitation for all

.....

Typhoon Haiyan left communities without access to proper water and sanitation facilities, worsening the situation and further exposing the population to water-borne and water-related diseases. In response, the Philippine Red Cross, supported by Movement partners, constructed shelters fitted with latrines and septic tanks. Schools have also been rehabilitated with improved water facilities and toilets to serve children day-to-day and evacuees during disasters.

The water and sanitation programme comprised of two components: hardware and software. Construction of water and sanitation facilities for shelters and schools were coupled with promotion activities on personal hygiene, hand-washing, diarrhoea prevention and environmental sanitation.

Hygiene promotion sessions using the participatory hygiene and sanitation transformation (PHAST) and children hygiene and sanitation transformation (CHAST) approaches were carried out with communities and school-going children. PHAST and CHAST approaches were used to raise understanding on the link between personal hygiene and environmental sanitation on both individual and community health.



Access to safe water, improved sanitation and increased knowledge and good hygiene practices all contribute in preventing the spread of diseases.

John Dx Lapid/Japanese Red Cross Society

The Movement partners continue to advocate for the prevention of the spread of diseases through serviceable water and sanitation facilities and by improving the knowledge of communities on the link between personal hygiene and health.



Water systems
repaired or
constructed

1,493



Latrines for
core shelters

28,093



Schools and community facilities
provided with improved water
and sanitation facilities

257

Access to safe water and improved sanitation lead to healthier families and communities

Twenty-six-year-old Margie Sarco and her husband Marlon live with their two children Mia Catrina and Mark Wizan in the municipality of Barugo, province of Leyte. Previously, they lived in a house without access to sanitation facilities. They would usually ask a neighbour if they could use their latrine. In instances when they couldn't, they admit that they would practice open defecation.

"It's very hard to ask a neighbour always to use their latrine. There is no privacy – not only for me but also for the neighbour", shares Margie.

Margie and her family are one of the many households to benefit from the community-based water and sanitation programme and now have a latrine of their own. The provision of a latrine has given the family access to a sanitation facility, a sense of privacy and restored their dignity.

Margie is also reaching out to her community as a health volunteer. She shares that she learnt a lot from the various trainings she attended prior to becoming a volunteer. Margie not only applies what she has learnt at home but also actively works towards sharing and spreading hygiene promotion messages in her community.

"Before my children often got diarrhoea, especially my daughter. When she was sick, I went to our health centre and asked for medicine", says Margie. "Now, I boil water first before letting my family drink it", she adds.

Since she has been giving the family boiled water, Margie noticed that her children no longer get diarrhoea. "Before my children got diarrhoea almost every month, but now, since I learnt to boil water before drinking, my children do not get sick that often", shares Margie. She goes on to add, "We did not just benefit from the latrine provided but also from the messages shared about proper hygiene. Once learnt and practiced, this will be continued".

Education – every child's right

In the wake of Typhoon Haiyan, it was estimated that 90 per cent of the educational facilities in affected areas suffered from considerable damage. Close to 3,200 schools and day care centres were damaged or destroyed. It is estimated that the damage to education facilities amounted to PHP 2.3 billion.

The lack of functioning education facilities hampered the education for many school-going children, making the teaching-learning process a struggle. Classes were carried out in the open – mostly under trees. This set-up deprived the students of conducive learning spaces that led to loss in attention span and enthusiasm to learn and to do more in school.

Following the disaster, classes were held in open air, under trees and in damaged buildings. Hence, bringing children and youth back to a conducive learning environment was seen as a priority.



The Movement partners helped in rehabilitating and re-equipping school facilities with basic materials to ensure that children could continue with their education in a safe environment. During the emergency phase, 192 classrooms in 20 schools were rehabilitated. As the construction progressed during recovery, a total of 490 classrooms were rehabilitated or reconstructed. Further, to ensure the well-being of children, psychosocial support through play and art therapy was introduced to help them deal with and overcome the trauma they experienced.

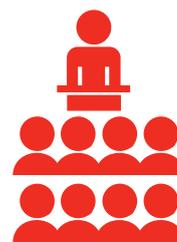
Schools were also provided with water and sanitation facilities. Hygiene promotion activities included a range of hygiene-exercises and games to educate children on personal hygiene and good health. This activity aimed to encourage positive behaviour change in promoting healthy lifestyle among children.

A disaster risk reduction management programme in schools was also implemented. The programme focuses on safe learning facilities, school disaster management, and disaster risk reduction in education. This is to raise awareness and better prepare students to deal with potential risks of disasters, promoting a culture of safety in schools and community.



Number of school kits distributed

8,375



Students with access to rehabilitated classrooms

57,553

Students attend classes in rehabilitated classrooms that are safe and conducive for learning

Post Typhoon Haiyan, a common scenario seen across different schools in affected areas was students attending classes in tents, prefabricated classrooms and under trees. Quality education serves as a medium to attain a better future and establish a more resilient society. Lack of access to proper learning space can put the quality of education of a learner at stake.

Bearing this in mind, the Philippine Red Cross with support from the Japanese Red Cross Society embarked on a project to rehabilitate and refurbish classrooms in schools that were damaged or destroyed in the affected areas.

The head of the Tanauan School of Craftsmanship and Home Industries, Mr Richard Laurente expressed his relief and shared his gratitude. “I will not be worried anymore since my students will have new classrooms that are safe and conducive for learning”, says Laurente.

Teachers and class advisers also express similar emotions and rejoice to see that their students are back in a normal environment and able to focus on their lessons.

Disaster risk reduction – strengthening community safety and resilience

The Disaster Risk Reduction and Management Act of 2010 continues to guide the Philippine Red Cross to engage communities to better prepare for and cope with the impact of disasters and health hazards. Acting as auxiliary to the government, the Philippine Red Cross, supported by the Movement partners, conducts capacity building sessions for chapter staff and volunteers and is equipping action teams to address needs and mitigate the impacts of earthquakes, volcanic eruptions and typhoons – disasters that are frequently faced by the country.

The Movement partners have supported the Philippine Red Cross in developing approaches and methodologies to further develop its disaster risk reduction and management framework. A community-based approach has been used wherein communities are engaged to make decisions on which risks and hazards pose the biggest threat to their community and the best way to mitigate the possible impacts.

“We do know now what to do during disasters, where to go to secure safe places and also have knowledge on risk reduction”, shares the 48-year-old Avenjie Bulambao from Lambusan, San Remegio, Cebu.



The Philippine Red Cross' Red Cross 143 programme – 44 trained volunteers per community (one team leader and 43 volunteers) – has been an important link for implementing disaster risk reduction activities. During trainings, a special focus is given on catering to the needs of vulnerable groups such as children, older people and persons living with disability so that staff and volunteers are able to identify and address their different needs. The Movement partners have also supported trainings for national disaster response teams, allowing the Philippine Red Cross to deploy technically proficient staff members to respond to specific sectorial needs during disasters. Over the past three years, the Movement partners have supported 533 training sessions.

The Philippine Red Cross remains at the forefront of advocating disaster management in communities by actively engaging community members. With the Movement support, households and communities are now better equipped to understand the risks and develop plans to prepare for and respond to disasters.

Healthy, sustainable and resilient communities

“If you want one year of prosperity, grow grain.

If you want ten years of prosperity, grow trees.

If you want hundred years of prosperity, grow people.”

Volunteers are the backbone of the Red Cross. Their valuable time, efforts, and skills keep the organization going. In Eastern Samar, the Philippine Red Cross together with the Norwegian Red Cross is delivering a health programme using the community-based health and first aid (CBHFA) approach that aims to build healthy, sustainable and resilient communities with empowered volunteers. The volunteers come from their respective communities. Community-based volunteers are trained in CBHFA and given knowledge and skills to carry out the activities to contribute towards improving the health situation in their communities.

Forty-year-old Avelina Caranza, is married and a mother of two. Since 15 months, Avelina or Ate Ave as she is usually called, works as a Red Cross community health volunteer in *barangay* Anislag, Quinapondan, Eastern Samar. Her *barangay* is difficult to access and among one of the most vulnerable communities. Only ten per cent of the community members are trained in first aid and four per cent know how to stop bleeding.

Looking back, Ate Ave shares that she has always wanted to help her community. Prior to her training as a community health volunteer she did not know much about health and was worried as to whether or not she could live up to the role and responsibilities.

Ate Ave's willingness and dedication to what she does and commits to is invaluable. When the three-day CBHFA training was organized, the timing was not the best for her since her husband had just undergone a surgery. However, Ate Ave still opted to attend the training. It took her a four-hour car ride and an hour habal-habal ride from and to their upland *barangay*, in travel.



Volunteers/community members organized or trained

13,793



Training sessions for Red Cross staff and volunteers

533



Students trained in disaster risk reduction activities in school

6,772



Philippine Red Cross chapter or sub-chapter offices established and/or rehabilitated

10

She was asked, “Ate, bakit niyo po mas nais na umuwi araw-araw kung pwede naman po kayo mag stay-in”? She answered, “Kailangan ko lang mag-uwian kasi kailangan ako ng pamilya ko”. She had to go home in order to take care of her family. She had to fetch water, do other household chores, and care for her kids and husband. It crossed her mind not to attend the second and third day of the training because it was logistically and physically demanding. But her husband motivated and supported her being a volunteer.

Red Cross’ effort to build the capacities of the volunteers is boosting them to take a lead on health activities and address the health issues in their community. As a community health volunteer, Ate Ave has gathered data to identify health issues in her community. She attends and co-facilitates community meetings and works with them to draft health action plans. She raises awareness on family planning, safe motherhood, newborn care, breastfeeding, nutrition, first aid, among others which she agrees will help improve the community’s health and well-being.

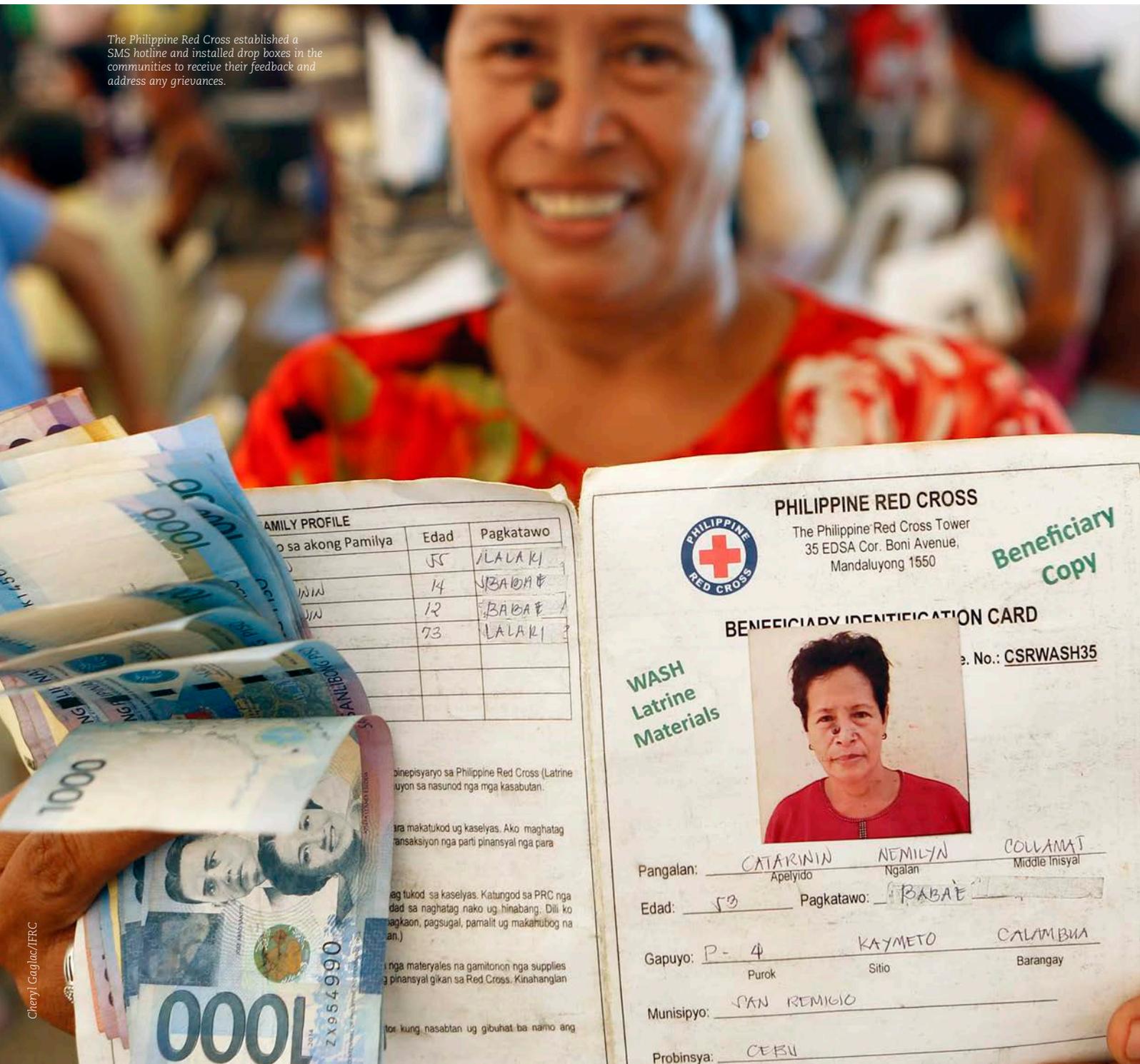
She does not regret that she continued attending the training even though it was not easy for her. There are challenges in being a volunteer especially in advocating behaviour change. Ate Ave has expressed her gratitude, “Nagpapasalamat po ako sa Red Cross, sa lahat ng kanilang tulong na ibinibigay sa amin, sa pagtuturo sa amin sa mga kaalamang dapat naming matutunan para sa ikabubuti ng aming barangay”. With the knowledge and skills imparted to her, she’s now able to be at the front in advocating for change through community health activities.

She gains something in being a volunteer – and that is happiness – happiness every time she and her co-community health volunteers accomplish activities despite challenges and this is what she will be holding on to continue helping others.

Accountability to stakeholders

The Philippine Red Cross and its partners are in the process of assessing the impact of the assistance provided and identifying areas for improvement. The lessons learnt and best practices from the Haiyan operation will be applied to improving future programmes.

The Philippine Red Cross established a SMS hotline and installed drop boxes in the communities to receive their feedback and address any grievances.



FAMILY PROFILE

Age sa akong Pamilya	Edad	Pagkatawo
50	50	LALAKI
14	14	BABAE
12	12	BABAE
73	73	LALAKI

PHILIPPINE RED CROSS
The Philippine Red Cross Tower
35 EDSA Cor. Boni Avenue,
Mandaluyong 1550

Beneficiary Copy

WASH Latrine Materials

BENEFICIARY IDENTIFICATION CARD

Case No.: **CSRWASH35**

PHILIPPINE RED CROSS

PHOTO

Pangalan: CATARININ NEMILYN COLLAMAT
Apelyido Ngalan Middle Inisyal

Edad: 50 Pagkatawo: BABAE

Gapuyo: P- 4 KAYMETO CALAMBUA
Purok Sitio Barangay

Munisipyo: SAN REMIGIO

Probinsya: CEBU

The Philippine Red Cross has welcomed partners and donors for regular dialogues and field visits. Reports and updates have been submitted in a timely manner, as per requirements and both internal and external auditors have carried out financial audits. The Philippine Red Cross has also provided the public with frequent updates.

During the initial stages of the operation, the Philippine Red Cross, with support from IFRC, conducted real-time evaluations. A mid-term review was also conducted in July 2015. Results of these activities have shaped operational and exit plans of the Philippine Red Cross and Movement partners.

Impact surveys have been carried out for shelter and livelihood programmes using open data kit systems. Online surveys were also conducted using social media. As some of the programmes are coming to an end, final evaluations are also planned.

Baseline surveys were conducted for the disaster risk reduction programmes. These will be used for comparisons with end-line surveys to ensure that the programmes reached the right communities with the appropriate assistance that will reduce and mitigate risks posed by disasters and health hazards.

To ensure that the target population had the opportunity to voice their opinions and concerns, community engagement remained central throughout programme implementation. Starting from the selection process, wherein the *barangay* recovery committees validated selected households to receive assistance, the Philippine Red Cross providing adequate information to the selected families regarding selection criteria and the type of assistance each will receive to maintaining a line of communication for feedbacks, complaints or suggestions from households.

Philippine Red Cross' experience with community engagement with Haiyan-affected population

Fifty-eight-year-old Marisa Limapat is the *barangay* secretary of Capinahan, municipality of San Isidro and is a member of the *barangay* recovery committee. The *barangay* recovery committees were established following Typhoon Haiyan to contribute directly to the local recovery planning, selection process and prioritization of activities, together with the implementation and monitoring of the assistance. Each *barangay* recovery committee typically comprises five to ten community members. Within the Capinahan *barangay* recovery committee, Marisa has been involved in setting the vulnerability criteria, selecting the most vulnerable through community consensus and validating the feasibility of the household level proposed assistance for both core shelter construction and livelihood.

In the first quarter of the project implementation, project staff had difficulties in efficiently managing complaints and questions from the community, especially from people who did not meet the selection criteria and were not eligible for assistance. To improve this process in March 2015, the Haiyan Recovery Project of the Philippine Red Cross supported by the Australian Red Cross, established a SMS hotline to receive complaints and queries from the community. The Philippine Red Cross project team leader was assigned to collate, validate and provide appropriate responses to each SMS based on the degree of the complaint. In addition, to further strengthen the communication structure and system, the Australian Red Cross provided technical support in July 2015 to work with the project staff and volunteers in order to understand the problems being faced and strengthen the existing SMS approach being used.

Following this technical support, two addition approaches were added to strengthen the system – suggestion box (one per *barangay*) and establishing a community forum. The community forum became an avenue to raise and clarify issues about the project and provided both the community and the project staff with an opportunity to discuss and find solutions. In the community forums, the *barangay* recovery committee took the lead with the support from the project staff. In September 2015, these three initiatives were implemented across all three-project municipalities in Leyte.

Jemimah Bureres, technical project assistant for livelihood in Capinahan, San Isidro, Leyte, shares, “The suggestion box was opened twice a month and we recorded the complaints in our log sheet. We submitted the log sheet to our team leader if the complaints for project implementation were from my target community, we immediately discussed it in a community meeting with the volunteers. The community meetings are also an avenue to discuss and clarify project implementation processes”.

To ensure transparency, the assigned staff in the area and a representative from the *barangay* recovery committee jointly opened the suggestion box and addressed any issues and concerns.

When the complaints and feedback system was started, in September 2015, there were initially ten messages per month. This number is now reduced to one sms per month. The majority of messages provided positive feedback.

In Capinahan, the community has been using the communication system to provide appreciation of the work being done. “At the moment we are only receiving positive feedback from the community, we are hoping to have negative feedback from the community so we can continue to improve. I’m supportive to this innovation, thank you Red Cross”, says Marisa.



Voices from the community

“We worked together with Red Cross right after Yolanda (Haiyan) and they were a very big help in giving us a chance to recover. From the beginning we received relief goods and help in cleaning up, and now the Red Cross is also helping to restore our health facilities, which we badly need to serve pregnant women and their children. It has been a real morale booster for Timpas. I hope we can continue to work fruitfully together”.

Liberato Dagonés, Timpas' barangay captain and community health worker, municipality of Timpas, province of Capiz

“I can now support our needs, including my son's education. I no longer need to apply for loans to survive. We are able to consistently put savings in our micro-savings group”.

Liberty Gonzaga, barangay Zaragosa, municipality of Balasan, province of Iloilo

“There aren't many women working in construction in the Philippines. People are surprised at the work I do”.

Charo Langeró, Skills and enterprise development graduate

“I lost my livelihood when my motorboat was damaged. All that was left was a bag of my children's clothes. We received rice, essential household items and cash assistance. It was a start to getting back to work as a fisherman. The cash grant was used to repair my boat and buy fishing gear”.

Flores Elacion, Fisherman, municipality of Balangiga, province of Eastern Samar

“Through the community-based health and first aid training we had, I gained knowledge about health and how to care for people. I have learnt about giving first aid to victims, and about safety. I have learnt more about the diseases, illnesses and other health issues my community is facing. There was also a discussion about how we are going to prevent these health issues, like cleaning our environment and proper waste segregation”.

Jovy Canales, municipality of Daanbantayan, province of Cebu

“Because the Philippine Red Cross provided us with the knowledge and awareness on health, disaster preparedness and response, we are grateful and hopeful that we can make a change in the lives of our community and our people especially in terms of dealing with health problems”.

A group of community health volunteers,
municipality of Malinao, province of Aklan

“From the PHAST training and my experience I learnt that awareness is important, powerful, and more valuable than any of the material things”.

Jennifer Solaño, municipality of Isabel,
province of Leyte

“Before, we used a shallow hole dug near the house which had sacks and wood as walls. Now, it is so much better – cleaner and more comfortable – with this latrine”.

Erlinda del Monte, municipality of Basey,
province of Samar

“We are happy that our school was provided with LEGO toys. Kids here have never seen this toy. Most of our students would walk very far to get home. Now instead of going home, they spend their lunch break and play here. Even our secondary level students come and play; they compete on who can build the blocks faster or build new things using their imagination”.

A teacher in Ortega Integrated School,
province of Aklan

“Our houses were badly damaged. We didn’t have food right after the typhoon. It was very difficult for several days. I am now working as a Red Cross carpenter. It is my only source of income. Four of us built my new home – my cousin, my son, a hired labourer and me. We learnt a lot from the typhoon. Our houses were not resilient enough, so they were destroyed. I have now made sure that our new house is strong enough. I even bought additional nails to make it sturdy”.

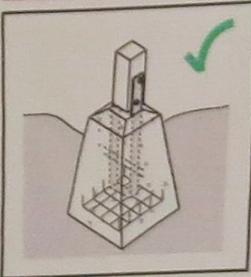
Edmundo Pabello, Farmer/Carpenter, Marabut, Eastern Samar

“Now I sit on the landing (of the house) some days when it is hot. I get some air and see what my neighbours are doing”.

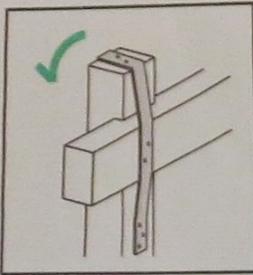
Mr Tabom, municipality of San Isidro, province of Leyte

8 BUILD BACK SAFER KEY MESSAGES

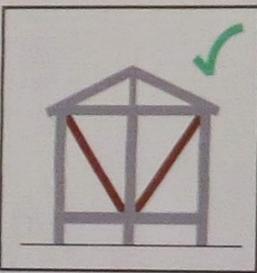
1 BUILD ON STRONG FOUNDATIONS



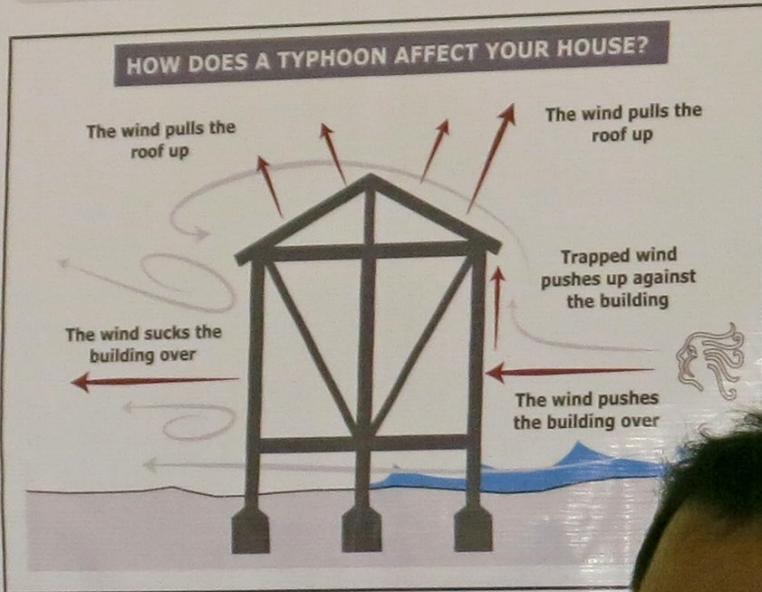
2 TIE-DOWN FROM BOTTOM UP



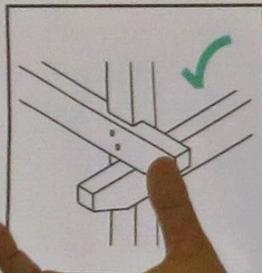
3 BRACE AGAINST THE STORM



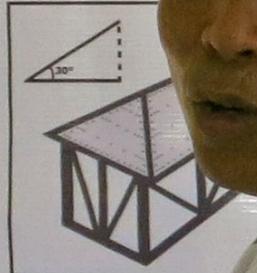
Yolanda showed us that the way we build houses needs to be stronger. These are 8 key messages on how to repair your house and build back safer.



4 USE STRONG JOINTS



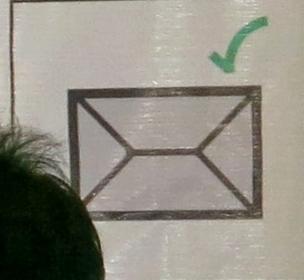
5 A GOOD HOUSE IS A GOOD INVESTMENT



8 BE PREPARED

- EVACUATION
- COMMUNICATION
- GRAB BAG

7 A SIMPLE SHAPE WILL KEEP YOU SAFE



6 REPAIR YOUR HOUSE SAFELY



Programmatic analysis

This section provides a summary of the Red Cross Red Crescent's collective performance data for the Typhoon Haiyan operation in the Philippines. It reports cumulative data from the start of the operation to mid-September 2016.

	Programme progress indicators	Total
Shelter	Households provided with at least one type of emergency shelter material	145,081
	Households reached with at least one type of essential non-food item	170,968
	Households provided with shelter repair assistance	46,926
	Households supported with a core shelter	29,047
	Households relocated and provided a shelter solution	287
	Carpenters and craftspeople trained in shelter construction	3,833
	Communities reached with participatory approach to safer shelter awareness and <i>build back</i> safer orientation and/or training	809
	Livelihoods	Households provided with food assistance
Households reached with unconditional cash grants		91,282
People supported through the provision of cash-for-work activities		27,447
Households that have claimed their livelihoods support grant		63,221
Households surveyed as part of programme impact and beneficiary satisfaction analysis		10,357
Individuals who have started a skills development training programme		2,100
Individuals who have successfully completed a skills development training programme		1,912
Individuals who have been successfully placed in jobs following completion of skills development training		1,291
Community-managed livelihood project proposals granted support		153

	Programme progress indicators	Total	
Healthcare	Patients who have received emergency healthcare	28,076	
	Households reached with essential health-related non-food items	179,629	
	Health facilities that have begun rehabilitation or reconstruction	73	
	Health facilities with repairs or construction completed	62	
	Health facilities with rehabilitation and construction completed, and/or equipped and successfully handed over	70	
	People trained as facilitators or as community health volunteers (using the community-based health and first aid approach)	1,636	
	Women of reproductive age reached with maternal and childcare promotion	5,982	
	Health and dignity kits distributed	0	
	Psychosocial support programme sessions conducted for community members and humanitarian workers	92	
	Volunteers trained as facilitators for psychosocial support programmes and restoring family links	43	
	People reached with psychosocial support	31,539	
	Water, sanitation and hygiene promotion	Volume of debris and rubble removed (cubic metres)	1,190
		Amount of drinking water distributed (in litres)	24,299,467
Water systems repaired, rehabilitated or constructed		1,493	
Latrines constructed for core shelter or relocation sites		28,093	
Community facilities (schools and early childhood care and development spaces) provided with improved water and sanitation facilities		257	
Households reached using the participatory hygiene and sanitation transformation approach		65,295	
Students reached using the child hygiene and sanitation transformation approach		29,273	
Hygiene kits distributed		40,196	
Education	Students with access to rehabilitated or constructed classrooms	57,553	
	Classrooms that have been fully rehabilitated, constructed and/or equipped	490	
	School kits distributed	8,375	

	Programme progress indicators	Total
Disaster risk reduction	Communities with a Philippine Red Cross 143 programme in place	274
	Volunteers and community members organized or trained	13,793
	Schools with disaster risk reduction in their school programme	120
	Students organized or trained in disaster risk reduction activities in school	6,772
	Training sessions for Red Cross staff and volunteers	533
	Philippine Red Cross chapters or sub-chapter offices established and/or rehabilitated	10
	Logistics centres established	6
Restoring family links	People who have been traced and/or reunited with their families	779
Cross-cutting issues	Project, programmes and other related evaluations completed for the Typhoon Haiyan operation	19
	Projects or programmes actively promoting beneficiary feedback mechanisms	19
Movement support	Field assessment coordination team staff who supported the operation in-country since the beginning of the operation until the end of the reporting period	17
	Emergency response unit staff who supported the operation in-country since the beginning of the operation until the end of the reporting period	271
	Regional disaster response team members who supported the operation in-country since the beginning of the operation until the end of the reporting period	12
	Participating National Societies present in the Philippines during this reporting period	15
	Red Cross Red Crescent National Societies supporting the Typhoon Haiyan operation (human resources cash or in-kind)	137

Financial overview

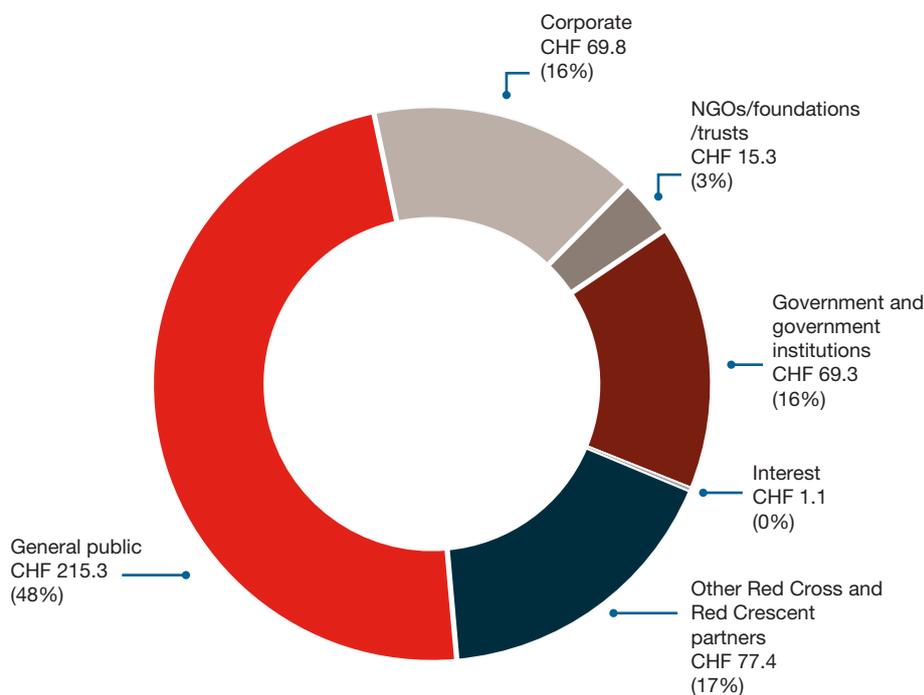
As of 31 August 2016,¹ the Philippine Red Cross, IFRC² and ICRC have raised a total of 448.2 million Swiss francs (CHF) in support of its response operation to Typhoon Haiyan in the Philippines. Thus far, CHF 277.6 million, i.e. 62 per cent of the total income has been spent.

Of the total expenditure, 43.4 per cent has been spent on relief, 56.3 per cent on recovery and the remaining 0.3 per cent for the long-term on disaster preparedness and capacity building. It is anticipated that the projected expenditure from 1 September 2016 will be spent on completing shelter and community infrastructure and in supporting Philippine Red Cross' capacity building.

Figure 1 reflects the breakdown of the total income of CHF 448.2 million, raised by the Red Cross and Red Crescent Movement, as of 31 August 2016 by sources of origin. The majority of the funds received are from the general public and corporates.

Figure 1. Total funds received by the Red Cross and Red Crescent Movement by original sources

in millions of CHF



¹ Financial reporting was received in local currencies and converted to CHF, which is the official reporting currency of the IFRC secretariat. The foreign exchange rates used were derived in the following way: the exchange rate to translate the expenditure is the average rate from 8 November 2013 through 31 August 2016; and the rate as of 31 August 2016 is used for projected expenditure. The summary table of rates used is included in the financial reporting methodology notes (refer to Annex 2).

² Twenty-nine National Red Cross and Red Crescent Societies, including the Philippine Red Cross, submitted financial information for this report. The financial information in this report combines unaudited data from these National Societies, ICRC and IFRC that conducted relief and recovery support through the Philippine Red Cross.

Figure 2 reflects total expenditure through 31 August 2016 by programme areas. The largest amount spent by the Movement members by category is on shelter and community infrastructure, which stands at CHF 128.8 million (46 per cent), followed by food and livelihoods at CHF 53.1 million (19 per cent).

Figure 2. Total expenditure by category

in millions of CHF

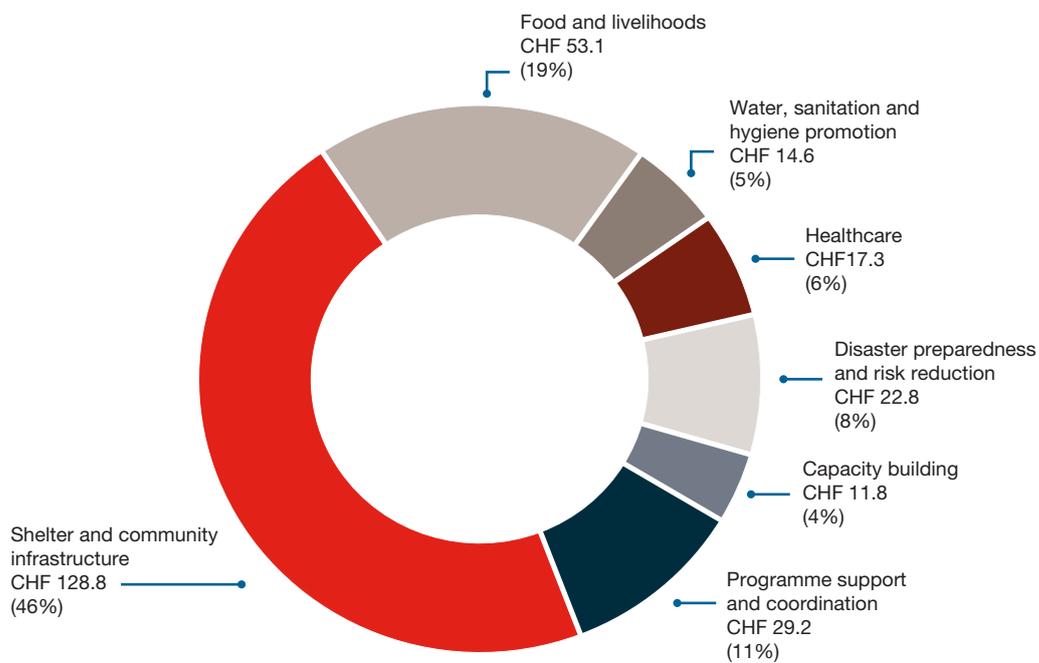
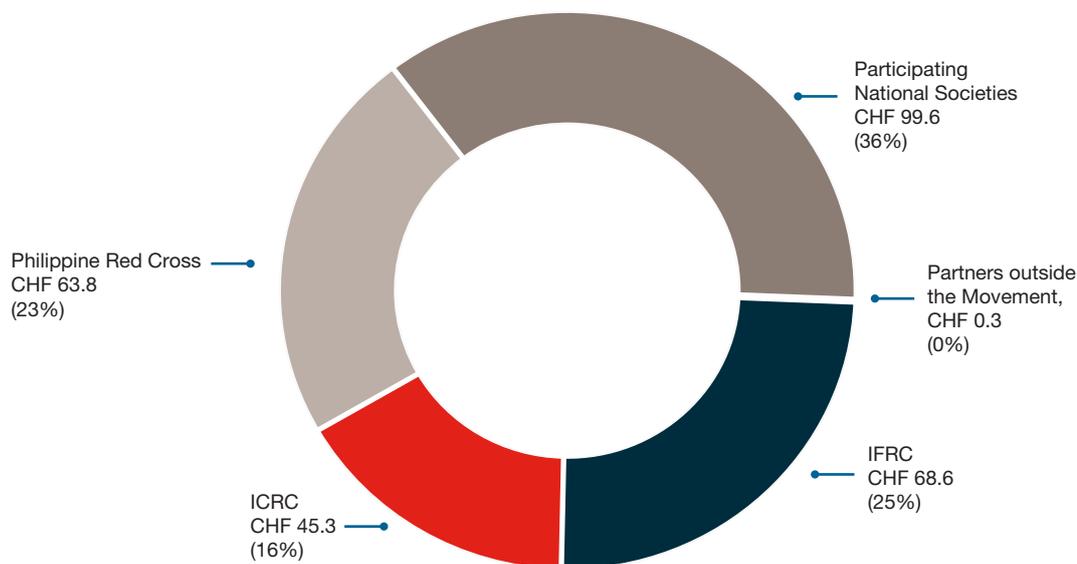


Figure 3 reflects the split of the expenditure among the partners in the Movement: the Philippine Red Cross, IFRC, ICRC and the 29 Participating National Societies. A small percentage of this expenditure is being channelled through partners outside the Movement, namely to trade organizations and universities. Thirty-six per cent of the expenditure can be attributed to the Participating National Societies. The IFRC coordinates relief and recovery efforts through other humanitarian actors in the field and government agencies to avoid duplication or gaps in the provision of assistance.

Figure 3. Implementers of the Red Cross and Red Crescent Movement funding

in millions of CHF



Many of the member National Societies report that the recovery programming will continue into the year 2018 and beyond. The estimated spending projections are shown in **Figure 4**. Ninety-three per cent of the balance from the recovery and long-term phases is allocated primarily towards implementing shelter and community infrastructure, food and livelihoods, disaster preparedness, risk reduction and capacity building. The remaining seven per cent has yet to be allocated towards further expenditure.

Figure 4. Red Cross and Red Crescent Movement expenditure and forecast combined (2013 to 2018+)

in millions of CHF

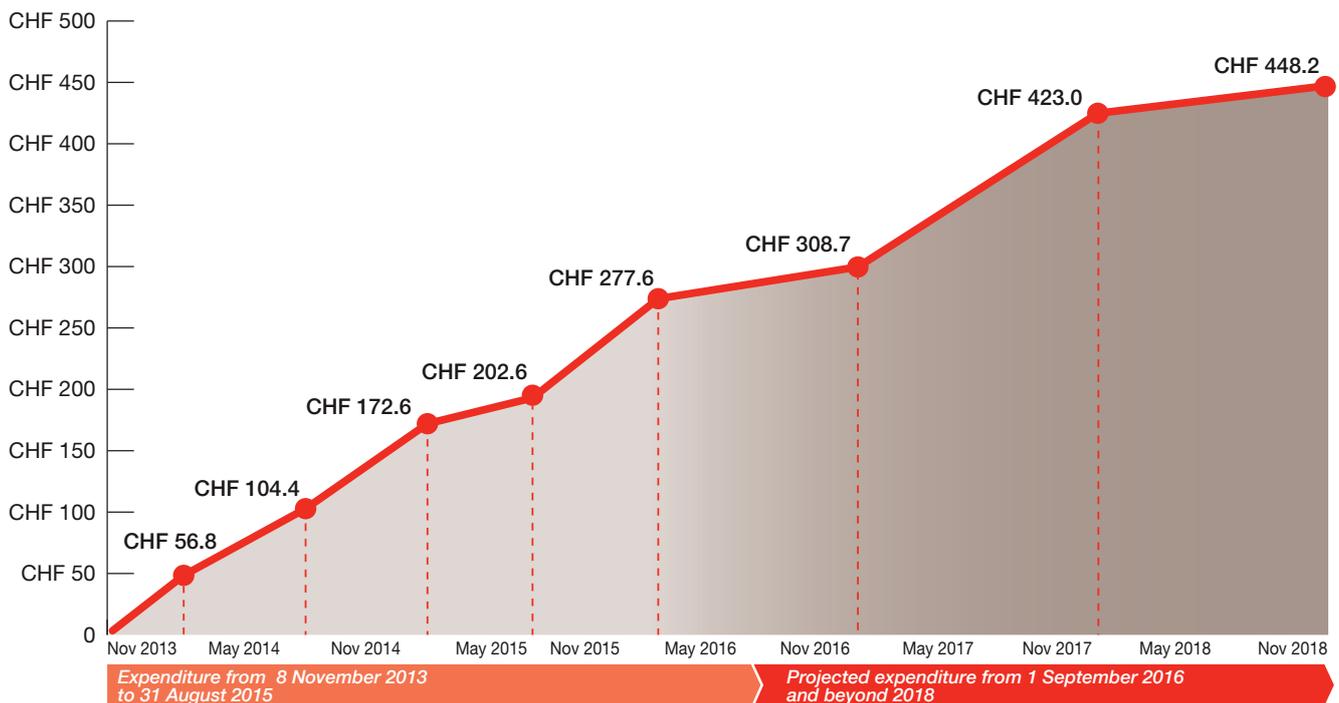


Figure 5 reflects the estimated spending projections by sector starting from 1 September 2016 continuing into 2018 and beyond.

Figure 5. Planned final expenses by category

in millions of CHF

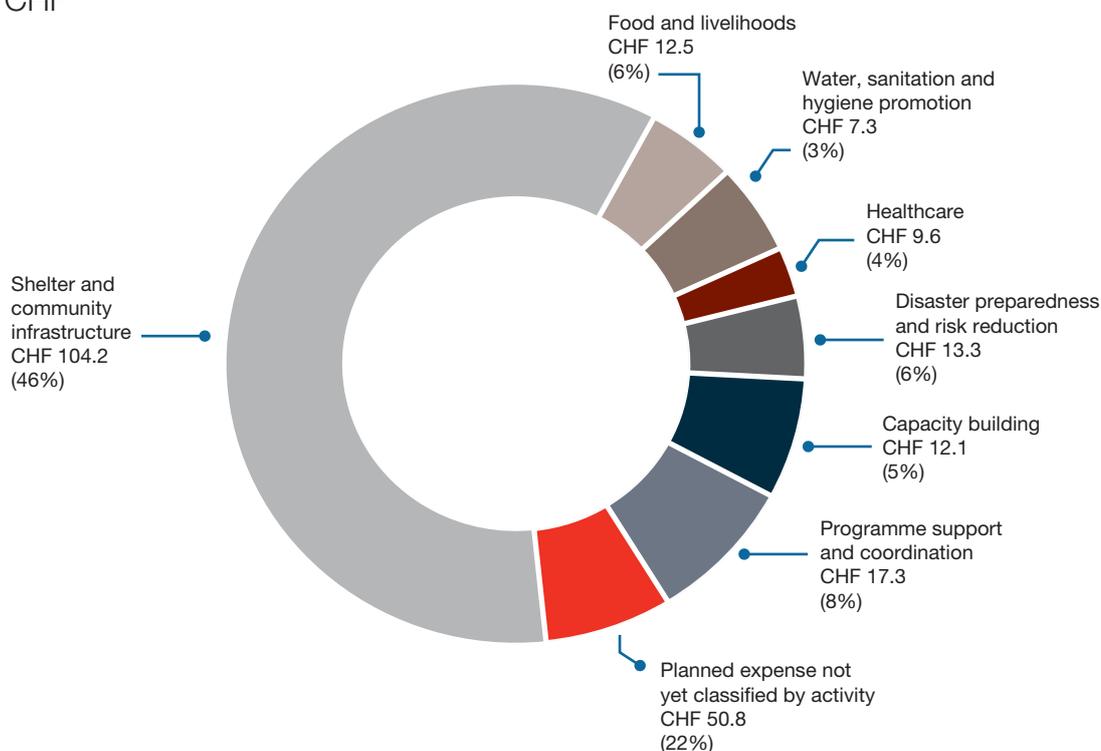


Table 1 highlights the split of the overall expenditure of the income, i.e. CHF 448.2 million, across seven categories based on the total spent (CHF 277.6 million) and projected, beyond 2018 (CHF 170.6 million). It is projected that by the end of the operation, CHF 230.4 million (51 per cent) will be spent on shelter and community infrastructure.

Table 1. Red Cross and Red Crescent expenditure and projected expenditure by category 2013 to 2018

Expenditure category	Actual expenditure	Projected expenditure	Total in millions of CHF
Shelter and community infrastructure	128.8	101.6	230.4
Food and livelihoods	53.1	8.6	61.7
Water, sanitation and hygiene promotion	14.6	9.0	23.6
Healthcare	17.3	4.9	22.2
Disaster risk reduction	22.8	8.1	30.9
Capacity building	11.8	11.9	23.7
Programme support and coordination	29.2	14.3	43.5
Planned expenses not yet classified by activity		12.1	12.1
Grand total			448.2

In providing assistance, the Red Cross and Red Crescent Movement give priority to the most vulnerable members of the community.



Annex 1 Notes and methodology on the programmatic indicators

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The following is a summary of the methodology used to report against all the programme indicators developed for this operation. The programme analysis (listed in the table) presents only those indicators for which information is up-to-date.

1. Shelter

1.1 Number of households that have received shelter relief assistance

- **Number of households provided with emergency shelter materials**
This refers to all households that have received at least one type of emergency shelter material (tarpaulins, tent or shelter toolkit). If a household received several of one or different types of emergency shelter materials, it is counted only once.
- **Number of households reached with non-food items**
This refers to all households that have received at least one of the following non-food items: kitchen sets, sleeping mats, jerry cans (10-litre and 20-litre) or blankets.

1.2 Number of households that have received shelter repair assistance

- **Number of households that have claimed the cash grant component of the shelter repair assistance**
This refers to the total number of households that have claimed either the 1st and/or 2nd cash grant amounting to a total of 10,000 Philippine pesos (PHP).
- **Number of households that have received corrugated galvanized iron sheets**
This refers to the total number of households provided with corrugated galvanized iron sheets.
- **Number of households provided with shelter repair assistance**
This refers to the total number of households that have completed the shelter repair assistance process with the 1st and/or 2nd cash grant amounting to a total of PHP 10,000 and corrugated galvanized iron sheets, or at least one of these. This number includes households that received cash grants which were later discontinued due to violation of agreement.

1.3 Number of households provided with a core shelter

This refers to the total number of households provided with a core shelter (i.e. wood and half-concrete model and other types) provided by the Red Cross and Red Crescent Movement.

1.4 Number of households relocated and provided with a shelter solution

This refers to the total number of households that have been relocated to identified and approved relocation sites, and given a house to live in.

1.5 Number of carpenters and craftspeople trained in shelter construction

This includes all skilled labour, carpenters, and craftspeople who have been trained in shelter construction techniques.

1.6 Number of communities reached with participatory approach to safe shelter awareness

This includes the total number of *barangays* (villages) reached with a participatory approach to safe shelter awareness and build back safer orientation and training.

2. Livelihoods

2.1 Number of households that have received livelihood assistance to cover their immediate needs

• **Number of households provided with food assistance**

If any member of the family receives food rations for up to two to three days, it is considered that the household has been provided with food assistance. Food assistance is supplementary food (hot meals or dry rations) provided during an emergency situation, and is normally distributed only once.

• **Number of households that have received unconditional cash grants**

This refers to all households that have received unconditional cash grants to meet their immediate needs during the relief phase.

2.2 Number of people supported through the provision of cash-for-work activities

This refers to the total number of people who have participated in cash-for-work activities in community-driven projects such as debris removal and shelter construction, among others.

2.3 Number of households that have received support through livelihoods recovery programme

• **Number of households that have been provided with livelihoods support grants**

This refers to the total number of households that have received conditional cash grants after their individual proposals to support their livelihood was received and approved through a community selection process. The proposals are submitted by individuals to support the start-up of an alternative means of livelihood, enhance previous livelihood assets (e.g. boats, nets, quick growing seeds, replacement tools, fertilizer, etc.) or inputs to diversify income sources (such as small-scale agriculture, animal husbandry, tailoring or other income generating activities).

• **Number of households surveyed to establish programme impact and conduct beneficiary satisfaction analysis**

This includes all households that are interviewed to establish the impact of the project and gauge overall satisfaction of the communities served.

2.4 Number of people reached through skills development training programme during emergency and recovery phases

- **Number of people who have started a skills development training programme**

This refers to the total number of people who have started training and skill development activities to improve their livelihoods. In principle, one member per affected household is selected for this training. This includes vocational training to acquire or enhance skills in carpentry, welding, heavy equipment operations and construction.

- **Number of people who have successfully completed a skills development training programme**

This includes the total number of those who have completed their skills development training course.

- **Number of people who have been successfully placed in jobs following completion of skills development training**

This includes all those who have found jobs as a result of their newly acquired skills.

2.5 Number of community-managed livelihood project proposals granted support

This refers to projects for livelihood enhancement collectively managed by community members.

3. Health

3.1 Number of households reached with emergency health assistance

- **Number of patients who have received emergency healthcare**

This includes the number of patients who have received medical or health-care assistance either at a fixed or mobile healthcare facility supported or managed by the Red Cross and Red Crescent Movement.

- **Number of households reached with health-related non-food items**

This particularly includes two types of items, namely hygiene kits and mosquito nets.

3.2 Number of health facilities that have been rehabilitated or reconstructed and equipped

- **This refers to the typhoon-affected *barangay* health facilities and rural health units that are being rehabilitated or reconstructed, and re-equipped with medical supplies and equipment as per the basic standards set by the Department of Health. Three indicators to better show progress achieved over time are:**

- Number of health facilities that have begun rehabilitation or reconstruction work
- Number of health facilities with repairs or reconstruction completed
- Number of health facilities with rehabilitation or reconstruction completed, and/or equipped that have been handed over

3.3 Number of people trained using the community-based health and first aid approach

- **Number of people trained as facilitators or as community health volunteers**
This includes the total number of facilitators or community health volunteers trained in the community-based health and first aid, Red Cross and Red Crescent's integrated primary health care approach to community health promotion.

- **Number of women of reproductive age reached with maternal, new-born and child health promotion**
This includes the total number of women of reproductive age who have been reached with maternal, new-born and child health related information and promotion activities.

- **Number of dignity kits distributed**

This refers to the total number of dignity kits distributed to pregnant and lactating women.

3.4 Total number of groups and people who have benefited from the psychosocial support programme

- **Number of psychosocial support programme group or individual sessions conducted for community members and humanitarian workers**
This includes the total number of psychosocial support group or individual sessions that have been conducted for community members as well as humanitarian workers.

- **Number of volunteers trained as facilitators for the psychosocial support programme and restoring family links (RFL)**
This includes the total number of volunteers who have received training to become psychosocial support and RFL facilitators.

- **Number of people reached with psychosocial support**
This includes the total number of people reached with psychosocial support either through group or individual sessions.

4. Water, sanitation and hygiene promotion

4.1 Water and sanitation-related relief support provided

- **Total volume of debris and rubble removed**
This includes the total volume of debris and rubble removed (in cubic metres) from affected common spaces and living areas.
- **Total amount of drinking water distributed (in litres)**
This refers to the cumulative amount of drinking water distributed since the beginning of the operation.
- **Number of water systems repaired or constructed**
This refers to the total number of water systems destroyed or damaged by Typhoon Haiyan that have been repaired, rehabilitated or constructed.

4.2 Number of latrines constructed for core shelters and on relocation sites

This refers to the total number of latrines that have been constructed for core shelters and on relocation sites.

4.3 Number of community facilities provided with improved water and sanitation facilities

During the relief phase, this includes the number of community facilities provided with access to improved sanitation facilities (latrines with access to hand-washing area) for community use in a single plot, compound or building. In the recovery phase, this refers to improved water and sanitation infrastructure linked to schools or early childhood centres for development.

4.4 Number of people reached with hygiene promotion activities during emergency and recovery phases

This includes total number of people reached through hygiene promotion to raise awareness within communities during the emergency and recovery phases. During the recovery phase, the participatory hygiene and sanitation transformation methodology will be used to increase hygiene awareness within communities. This methodology enables communities to examine existing hygiene behaviour and understand how transmission of disease takes place and how it can be prevented at a household level.

4.5 Number of students reached with child hygiene and sanitation transformation

This refers to the total number of students reached with hygiene and sanitation promotion using the child hygiene and sanitation transformation methodology.

4.6 Total number of hygiene kits distributed

This refers to the total number of hygiene kits distributed. These kits include hygiene items to enable disaster-affected population to take care of their personal hygiene and toiletry needs.

5. Education

5.1 Number of students with access to rehabilitated or constructed classrooms

This refers to the total number of students (calculated at an average of 41.5 students per class) accessing and benefitting from rehabilitated or new classrooms.

5.2 Number of classrooms that have been rehabilitated or constructed and/or equipped

This refers to the total number of classrooms that have been rehabilitated or constructed, and provided with basic school equipment including furniture, educational tools, books, stationery, etc.

5.3 Number of school kits distributed

This refers to the total number of school kits distributed (e.g. schoolbags, crayons, pens, drawing and exercise books).

6. Disaster risk reduction

6.1 Number and type of disaster risk reduction related initiatives delivered at community level

- **Number of communities with Red Cross 143 programme in place**

Red Cross 143 is Philippine Red Cross' flagship volunteer programme that recruits and trains 44 volunteers in every *barangay*. The Philippine Red Cross is expanding this programme in the Haiyan-affected *barangays* wherein volunteers are being recruited, trained and given the opportunity to apply their newly acquired skills in the field.

- **Number of volunteers and community members trained to support the Red Cross 143 programme**

This includes the total number of volunteers and community members trained to support the Red Cross 143 programme.

6.2 Disaster risk reduction in schools

- **Number of schools that have included disaster risk reduction in their curriculum**

This refers to the total number of schools that have included disaster risk reduction in their curriculum.

- **Number of students organized or trained**

This includes the total number of students participating in disaster risk reduction activities in their schools.

6.3 Strengthening the Philippine Red Cross' capacity

- **Number of disaster risk reduction training sessions conducted for staff and volunteers**

This refers to the total number of disaster risk reduction training sessions held for Red Cross staff and volunteers.

- **Number of Philippine Red Cross chapters or sub-chapter offices established and/or rehabilitated**

This refers to the total number of Philippine Red Cross chapters and facilities to be built, rebuilt or rehabilitated. This may also include the software and hardware components acquired to support programme implementation.

- **Number of logistics centres established**

This refers to the establishment of regional disaster management and logistics centres with prepositioned disaster preparedness stocks.

7. Restoring family links

7.1 Number of people who have been traced and/or reunited with their families through RFL services

This refers to the total number of people who have been traced and/or been reunited with their families following Typhoon Haiyan.

8. Cross-cutting issues

8.1 Number of projects, programmes and other related evaluations completed for the Typhoon Haiyan operation

Evaluation refers to systematic assessment of an ongoing or completed project or programme, its design, implementation and results. Evaluations generally look at a combination of some of the standard criteria commonly used by the international community: relevance, appropriateness, effectiveness, efficiency, coverage, impact, coherence, sustainability and connectedness. An evaluation is considered completed once the report is ready.

8.2 Number of projects or programmes actively promoting beneficiary feedback mechanisms

These include but are not limited to, short message services (text messages), complaint mechanisms, information sharing media, and beneficiary satisfaction surveys.

Annex 2 Notes and methodology regarding presentation of combined financial data

1. The combined income and expenditure data in this report was generated based on unaudited financial data collected from the IFRC secretariat, ICRC and 29 National Red Cross and Red Crescent Societies. The data presented in this report covers the period from 8 November 2013 to 31 August 2016. The method developed to obtain financial data considered the flows of income and expenditure and eliminated multiple counting (within the Red Cross and Red Crescent network).
2. This report provides a combined cumulative portrait of the Red Cross and Red Crescent Movement's financial information. All reports received from the National Red Cross and Red Crescent Societies and organizations, IFRC and ICRC, used to generate this collective portrait, reflects data through 31 August 2016, with the following exceptions: 18 National Red Cross or Red Crescent Societies that have not submitted updated data for this reporting period.
3. Included in the reporting of income are in-kind goods and services (non-cash contributions). Due to variations in the way that in-kind goods are treated by Red Cross and Red Crescent Movement members, the value of income and expenditure related to in-kind goods and services (non-cash contributions) may not be fully represented in this consolidation, due to the different accounting treatments of these non-cash items. As a result, the report possibly under-reports the income and expense values for these in-kind goods and services. However, these values are estimated to be small, and do not have an impact on the overall report.
4. The exchange rates used to combine the financial data during this round of reporting are reflected in the table below.

Currency	Income	Expenditure	Projection
Australian dollar	0.792	0.792	0.691
Canadian dollar	0.810	0.810	0.730
Danish krone	6.448	6.448	6.926
Euros	1.229	1.229	1.078
Great Britain pound	1.470	1.470	1.484
Hong Kong dollar	0.115	0.115	0.124
Japanese yen	111.7	111.7	126.3
South Korean wan	1,157.5	1,157.5	1,223.9
Norwegian krone	6.852	6.852	8.579
New Zealand dollar	1.3	1.3	1.6
Philippine peso	0.021	0.021	0.021
Swedish Krona	7.4	7.4	8.8
Singapore dollar	0.713	0.713	0.684
Taiwan new dollar	33.0	33.0	34.0
United States dollar	0.895	0.895	0.963

5. Some National Red Cross and Red Crescent Societies and organizations report operating on a cash accounting basis, while others work on an accrual basis. Cash basis means that the reported financial income and expenditure include only income received and expenditure paid at 31 August 2016. Accrual basis means that the reported financial income and expenditure include all income received and receivable and expenditure paid or payable as of 31 August 2016.
6. Treatment of interest income: Each National Red Cross or Red Crescent Society or organization's treatment of interest earned on donations is governed by their own financial policies. In cases where interest is not allocated back to the Haiyan operation, National Red Cross and Red Crescent Societies report interest being allocated to future international and emergency operations or to general headquarters operations.
7. The financial reporting has been restricted to seven categories. Each National Red Cross and Red Crescent Society and organization has its own, unique financial accounting and coding structures. Therefore, for the purpose of consolidating the financial figures, the data were simplified. The following categories and definitions have been used for the classification of expenditure:

Shelter and community infrastructure

- Costs associated with the deployment of field assessment and coordination team (FACT) members
- All aspects of emergency response unit (ERU) deployments, i.e. staff, travel, transport, supplies, cash etc.
- Costs of supply distribution during the emergency phase
- Shelter supplies for immediate or temporary use, tools and kits, tarpaulins, tents, sheeting, rope, etc.
- Training and support to improve emergency shelter solutions
- Temporary shelters
- Staff costs associated with these projects, if not included in the programme support and coordination category.

Food and livelihoods

- Costs associated with the deployment of FACT members
- All aspects of ERU deployments, i.e. staff, travel, transport, supplies, cash etc.
- Costs of supply distribution of food, including hot meals
- Asset replacement programmes, if not already included in the other categories
- Cash disbursement for cash-for-work and/or as conditional cash grant
- Staff costs associated with these projects, if not included in the programme support and coordination category

Water, sanitation and hygiene promotion

- Costs associated with the deployment of FACT members
- All aspects of ERU deployments, i.e. staff, travel, transport, supplies, cash etc.
- Water trucking and other temporary water supply activities
- Construction of sanitation facilities (latrines) in evacuation centres or transitional centres
- Hygiene promotion, if not included in health activities
- Environmental sanitation interventions: vector control, solid waste management, drainage and trainings
- Operations support and assessment (staffing, transport, etc.) in relation to these defined activities or time period, if not included in the programme support and coordination category

Healthcare

- Costs associated with the deployment of FACT members
- All aspects of ERU deployments, i.e. staff, travel, transport, supplies, cash etc.
- Costs of supply and distribution for hygiene kits and mosquito nets during the emergency phase
- First aid and emergency clinical services
- Psychosocial and disaster mental health
- Disease control, diarrhoea and vaccination programmes
- Staff costs associated with these projects, if not included in the programme support and coordination category

Disaster preparedness and risk reduction

- All mitigation activities in any sector related to typhoon preparedness: building drainage ditches, community mobilization and awareness raising
- Evacuation centres, if not included in shelter or community and social infrastructure rehabilitation and construction
- Tracing services and capacity building of tracing staff if not included in other categories
- Prepositioning of stocks
- Community engagement
- Staff costs associated with these projects, if not included in the programme support and coordination category

Capacity-building of the Philippine Red Cross

- Costs related directly to supporting the Philippine Red Cross operation response
- Volunteer support, if not reflected in other categories
- Short-term support to the Philippine Red Cross for salary, equipment, supplies, transportation, rent, etc.
- Rehabilitation of the Philippine Red Cross chapters' offices and facilities
- Staff costs associated with these projects, if not included in the programme support and coordination category

Restoring family links

- Costs related to tracing and reuniting the affected population with their families

Programme support and coordination

- Operations support and assessment (staffing, transport, etc.), if not included in the other categories
- Headquarters and field management and staff costs such as local or international staff costs
- Coordination and direction, planning, reporting staff and associated costs like workshops and trainings
- Monitoring and evaluation (surveys, assessments, etc.) and other quality and accountability activities
- Communications and advocacy staff, publications, etc.
- Human resources – recruitment and support
- Logistics functions
- Accounting, audit, and other financial services including foreign exchange loss and gain
- Cross-cutting themes such as gender, environment, sustainability, community participation and risk reduction
- Fundraising costs and donations processing
- Head office costs (service fees and similar) and other indirect support

Annex 3 National Red Cross and Red Crescent Societies and organizations involved in Typhoon Haiyan relief and recovery efforts

The information portrayed in this report is reflective of contributions made by the following National Red Cross and Red Crescent Societies and organizations:

- Albanian Red Cross
- Algerian Red Crescent
- American Red Cross
- Andorran Red Cross
- Angola Red Cross
- Antigua and Barbuda Red Cross Society
- Argentine Red Cross
- Armenian Red Cross Society
- Australian Red Cross
- Austrian Red Cross
- Red Crescent Society of Azerbaijan
- The Bahamas Red Cross Society
- Bahrain Red Crescent Society
- Bangladesh Red Crescent Society
- The Barbados Red Cross Society
- Red Cross Society of Belarus
- Belgian Red Cross
- Belize Red Cross Society
- The Red Cross Society of Bosnia and Herzegovina
- Botswana Red Cross
- Brazilian Red Cross
- British Red Cross
- British Red Cross, Cayman Islands Overseas branch
- Brunei Darussalam Red Crescent Society
- Bulgarian Red Cross
- Cambodian Red Cross Society
- The Canadian Red Cross Society
- Chilean Red Cross
- Red Cross Society of China
- Red Cross Society of China, Hong Kong branch
- Red Cross Society of China, Macau branch
- Colombian Red Cross
- Costa Rican Red Cross
- Croatian Red Cross
- Cyprus Red Cross Society
- Czech Red Cross
- Danish Red Cross
- Dominican Red Cross
- Ecuadorian Red Cross
- Egyptian Red Crescent Society
- Estonia Red Cross
- Fiji Red Cross Society
- Finnish Red Cross
- French Red Cross
- The Gambia Red Cross Society
- Red Cross Society of Georgia
- German Red Cross
- Ghana Red Cross Society
- Grenada Red Cross Society
- Guatemalan Red Cross
- Hellenic Red Cross
- Honduran Red Cross
- Hungarian Red Cross
- Icelandic Red Cross
- Indian Red Cross Society
- Iraqi Red Crescent Society
- Indonesian Red Cross Society
- Red Crescent Society of the Islamic Republic of Iran
- Irish Red Cross Society
- Magen David Adom (Israel)
- Italian Red Cross
- Jamaica Red Cross

Japanese Red Cross Society
Jordan National Red Crescent Society
Kazakh Red Crescent
Kenya Red Cross Society
The Republic of Korea National Red Cross
Kuwait Red Crescent Society
Red Crescent Society of Kyrgyzstan
Latvian Red Cross
Lebanese Red Cross
Libyan Red Crescent
Liechtenstein Red Cross
Lithuanian Red Cross Society
Luxembourg Red Cross
The Red Cross of The Former Yugoslav Republic of Macedonia
Malaysian Red Crescent Society
Maldivian Red Crescent
Malta Red Cross Society
Mauritius Red Cross Society
Mexican Red Cross
Moldova Red Cross Society
Red Cross of Monaco
Mongolian Red Cross Society
Red Cross of Montenegro
Moroccan Red Crescent
Myanmar Red Cross Society
Namibia Red Cross
Nepal Red Cross Society
The Netherlands Red Cross
The Netherlands Red Cross, Aruba branch
New Zealand Red Cross
Nicaraguan Red Cross
Nigerian Red Cross Society
Norwegian Red Cross
Oman National Red Crescent
Pakistan Red Crescent Society
Red Cross Society of Panama
Paraguayan Red Cross
Peruvian Red Cross
Philippine Red Cross
Polish Red Cross
Portuguese Red Cross
Qatar Red Crescent Society
Romanian Red Cross
The Russian Red Cross Society
Saint Vincent and the Grenadines Red Cross
Salvadorean Red Cross Society
Red Cross of the Republic of San Marino
Sao Tome and Principe Red Cross
Saudi Red Crescent Authority
Senegalese Red Cross Society
The Red Cross of Serbia
Seychelles Red Cross Society
Singapore Red Cross Society
Slovak Red Cross
Slovenian Red Cross
The South African Red Cross Society
Spanish Red Cross
The Sri Lanka Red Cross Society
Swedish Red Cross
Swiss Red Cross
Taiwan Red Cross Organisation
Tanzania Red Cross National Society
The Thai Red Cross Society
The Trinidad and Tobago Red Cross Society
Tunisian Red Crescent
Turkish Red Crescent Society
The Uganda Red Cross Society
The Red Cross Society of Ukraine
Red Crescent Society of the United Arab Emirates
Uruguayan Red Cross
Venezuelan Red Cross
Viet Nam Red Cross Society
Yemen Red Crescent Society
Zambia Red Cross Society
Zimbabwe Red Cross Society

The Red Cross and Red Crescent Movement would like to express its gratitude to all the people, corporations and partners for committing to and supporting this operation.

Philippine Red Cross

www.redcross.org.ph

**International Federation
of Red Cross and Red Crescent Societies**

www.ifrc.org/typhoon-haiyan

International Committee of the Red Cross

www.icrc.org



International Federation
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ICRC