

# HAITI HURRICANE MATTHEW 2016

## REVIEW OF SURGE PRACTICES

### TRANSFORMING SURGE CAPACITY PROJECT START NETWORK



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NOVEMBER 2017

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**International Medical Corps**

**ISLAMIC RELIEF**

**care**

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**UKaid**  
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**START**  
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**DISASTERS & EMERGENCIES**  
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**About the CHS Alliance:** The CHS Alliance is a technical partner on the Transforming Surge Capacity Project. The CHS Alliance improves the effectiveness and impact of assistance to crisis-affected and vulnerable people, by working with humanitarian and development actors on quality, accountability and people management initiatives. Formed in 2015 by the merger of HAP International and People In Aid, the Alliance brings together over two decades of experience supporting the sector in applying standards and good practices.

For more information visit [www.chsalliance.org](http://www.chsalliance.org).

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Cover photo, Helena Carpio: Carnival celebrations fill the streets of Les Cayes in Haiti with much-needed colour and festive spirits five months after Hurricane Matthew devastated the region.

## Executive summary

This report presents the results of the fourth tracking mechanism on the surge response to Hurricane Matthew that struck Haiti in October 2016, and is part of the Start Network Transforming Surge Capacity Project. The aim of the mechanism is to track changes to surge practices by examining instances of surge deployment by the 11 operational consortium members ("agencies") in the course of the project. Members of the project's research team, Lois Austin, Sarah Grosso and Glenn O'Neil, compiled this report, with the support of the consortium agencies.

The report draws on information derived from desk research, interviews with three people from agencies and online survey responses of eight agencies. For each instance tracked, the mechanism envisaged a rapid review focusing on the agencies' practices. As such, the report does not aim to cover the full scope of the surge response to Hurricane Matthew.

## KEY FINDINGS

### Context

One of the world's poorest countries, Haiti was highly vulnerable having suffered from a series of natural disasters, including the devastating 2010 earthquake. The situation was further exacerbated by the collapse of infrastructure in the disaster area and a climate of political instability.

### Deployment and response

The Haitian government led the disaster response and was rapidly joined by international actors. Nine agencies of the Transforming Surge Capacity Project actively responded to Hurricane Matthew. Many of these agencies were able to respond quickly owing to their pre-existing presence in the country, relationships with local partners and experience working on disaster preparedness following the previous disasters. Some were able to intervene before the Hurricane struck assisting with evacuation and pre-positioning materials. All the agencies surveyed mobilised international staff for the response, surging in a total of 74 staff from global rosters and teams.

Given the threat of cholera, nearly all agencies were active in water, sanitation and hygiene (WASH) projects and many also intervened in management/coordination and logistics. Funding for the response ranged from 100,000 to 3.4 million USD. Fundraising for the response was a challenge, in particular in the context of donor fatigue and political instability, although many agencies benefitted from support from their international networks.

### Collaboration

Only half of the agencies surveyed worked mainly in collaboration with others when responding to Hurricane Matthew. However, just one agency reported working entirely alone. The agencies underlined the importance of the existing relationships with local partners when responding, in particular in terms of understanding the needs of the local community, as well as with local authorities; the international response to the 2010 Earthquake had been criticised for marginalising local actors.

### Challenges

Resource management and policies and systems were the key challenges reported by the agencies. The frequent previous disasters and political instability led to donor fatigue. Rapid price inflation also placed a strain on financial resources. The agencies also highlighted the need for common cross-sectoral needs assessments and for improvements in the selection and training of appropriate surge staff who would be immediately operational. The destruction of infrastructure that effectively cut off the affected area from the mainland, issues with security (such as looting/ violence during the distribution of goods), chronic poverty and environmental threats (including soil erosion that destroyed crops) posed further challenges to the response.

## BEST PRACTICES AND RECOMMENDATIONS

Best practices and lessons learned were identified terms of resource management, needs assessment, collaboration and women-led responses.

Recommendations included:

### Deployment and response

- Agencies and other humanitarian actors should make better use of existing common assessment tools and approaches to produce multi-sectoral assessments of needs for surge responses.
- Agencies and other humanitarian actors should consider how they can better balance surging in large expatriate teams with available local, national and regional resources.
- Donors and agencies should prioritise women-led responses that increase the quality and effectiveness of the response and contribute to disaster preparedness and resilience in view of future emergencies.
- Agencies and other humanitarian actors should explore the potential for cross-sectoral work, such as using aid distribution as an opportunity to communicate on health and security issues to maximise the impact of responses.
- Agencies should pre-position supplies, pre-negotiate contracts with suppliers where possible and prepare local staff in disaster-prone areas to facilitate an immediate response.
- Donors should be flexible in their funding requirements for surge and allow agencies to adapt funding use as needs change.

### Staff and set-up

- Agencies should review the training provided for surge staff to include training in cultural awareness; improve the screening of staff to be included on the emergency rosters; and ensure that a sufficient number of Francophones are included on the roster in all job profiles.
- Agencies should strengthen the emergency response capacities in their field and national offices in disaster-prone countries by recruiting and retaining local staff with in-depth knowledge of the local setting, considering funding limitations.

### Collaboration

- Agencies should explore ways of building the capacity of their local partners sustainably, in particular their capacity for emergency response and disaster preparedness.
  - Agencies should seek ways of collaborating more effectively with the local authorities of affected areas.
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# 1. Introduction

This report presents the results of the fourth tracking mechanism<sup>1</sup> of humanitarian surge responses as part of the Start Network Transforming Surge Capacity (TSC) Project. The focus of the report is on the surge response to Hurricane Matthew in Haiti in October 2016.

This report focuses on the surge response of the 11 operational consortium member “agencies”<sup>2</sup> to Hurricane Matthew while making reference to other key surge actors, such as first responders, civil society, governments, the United Nations (UN) and the International Red Cross and Red Crescent Movement (RCRC).

For each instance tracked, the mechanism envisaged a rapid review focusing on the agencies’ surge responses. In this regard, the report does not aim to cover the full scope of the response to Hurricane Matthew.

# 2. Methodology

The tracking was carried out between March to July 2017, combining three data collection methods. Desk research was carried out to locate and analyse the relevant documentation on the surge response. An online survey was created and distributed to the 11 project agencies at the global (headquarters) level. Out of the nine agencies that were active in responding to the Hurricane, eight answered the survey.<sup>3</sup> In addition, to supplement these research tools, the project research team carried out interviews with three individuals from the agencies (see annex), in particular senior staff involved in the response to Hurricane Matthew.

# 3. Context

## 3.1. Hurricane Matthew

Hurricane Matthew, a category 4 storm, made landfall on Haiti on 4 October 2016<sup>4</sup>, causing the worst humanitarian crisis in the country since the 2010 earthquake.<sup>5</sup> The *départements* (counties) of *Sud* and *Grand’Anse* were worst affected and housing, plantations and livestock were destroyed with some 61,000 people displaced.<sup>6</sup> An estimated 2.1 million people were affected. Some people resisted an initial early attempt to evacuate them out of fear of losing their possessions, seeking shelter only after the storm had escalated.<sup>7</sup>

Extreme rainfall immediately after the hurricane compounded the damage. The number of casualties quickly rose; by 7 October, over 400 people were reported dead.<sup>8</sup> Shortly after the hurricane hit Haiti, UN OCHA estimated that some 1.4 million people would need humanitarian assistance (including 806,000 people in urgent need of food assistance<sup>9</sup>).

<sup>1</sup> Tracking mechanism reports are also available on the Nepal earthquake (2015), Bangladesh floods (2016) and slow onset crises (2016): <http://www.chsalliance.org/surge>.

<sup>2</sup> The 11 operational agencies are: Action Against Hunger, ActionAid, CAFOD, CARE, Christian Aid, International Medical Corps (IMC), Islamic Relief, Muslim Aid, Plan International, Save the Children UK, Tearfund.

<sup>3</sup> Eight responses were received to the survey: ActionAid, CAFOD, CARE, Christian Aid, International Medical Corps, Plan International, Save the Children UK and Tearfund. ACF also surged for Hurricane Matthew. Islamic Relief informed us that they had prepared a provisional surge deployment plan in anticipation of the hurricane (putting roster members on standby, liaising with partners in Haiti), but did not deploy due to their lack of presence in the region, the presence of other actors and the scale of the disaster. Muslim Aid was not active.

<sup>4</sup> UN News Centre, 4 October 2016.

<sup>5</sup> UN OCHA, October 2016.

<sup>6</sup> Jones & Holpuch; UN OCHA

<sup>7</sup> Jones and Holpuch

<sup>8</sup> BBC

<sup>9</sup> UN OCHA (d)

### 3.2. The context

Haiti is one of the world's poorest countries, ranking 163<sup>rd</sup> out of the 188 countries on the UN Human Development Index.

When the hurricane struck, Haiti was still highly vulnerable following a string of other natural disasters, including two cyclones, a tropical storm, two droughts and the devastating 2010 earthquake. This earthquake had left an estimated 55,000 IDPs living in temporary shelter and with persistent malnutrition and food insecurity.<sup>10</sup> In addition, limited access to sanitation (less than 20% of the people had access to proper sanitation) and the fact that flooding forced people to wade through contaminated water led to concerns that the hurricane would cause water-borne diseases to spread.<sup>11</sup> Cholera had been inadvertently introduced to Haiti in the response to the 2010 earthquake; there had been 27,000 suspected cholera cases in Haiti in 2016 prior to Hurricane Matthew.<sup>12</sup> Furthermore, the hurricane destroyed 23 cholera treatment centres.<sup>13</sup>

The collapse of infrastructure and communication made it difficult to assess the extent of the damage and to initiate the aid effort, leaving the affected south-western peninsular isolated; the destruction of a bridge cut off road access to the area, making access possible only via helicopter or sea.<sup>14</sup>

The country was also affected by political instability, not least as the disaster struck in the midst of an election campaign.



**Savener, a 41-year-old vendor, stands in front of the area where he worked and lived in Cavaillon, Haiti, before Hurricane Matthew destroyed it**

Bahare Khodabande/IRIN

<sup>10</sup> UN News Centre, 4 October 2016

<sup>11</sup> Ibid.

<sup>12</sup> Hones & Holpuch

<sup>13</sup> UN OCHA (c)

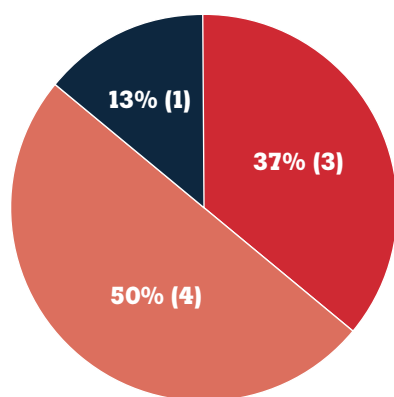
<sup>14</sup> Jones & Holpuch

## 4. Surge deployment

The Government of Haiti immediately called for international assistance after Hurricane Matthew hit on 4 October 2016. The government took the lead in coordinating the response and the humanitarian cluster system was not activated. International actors quickly moved in support of the Haitian government's response to the crisis, with emergency teams and military and civil defence assets dispatched from the US government, European Union and countries of the region. Early on, the UN mobilised an UNDAC team to support the response; WFP mobilised to provide food for 300,000 people and UNICEF also reacted to support 10,000 people. Lack of a common needs assessment—compounded by the implementation of competing initiatives—greatly limited the initial response. Furthermore, the absence of a national disaster law was seen as a hindrance to the response, which was also true for the 2015 Nepal earthquake response.<sup>15</sup>

### 4.1. Speed of response by consortium agencies

Most agencies that responded to the survey deployed immediately or within two–five days of Hurricane Matthew hitting Haiti.



**Figure 1: Speed of deployment for agencies**  
Hurricane Matthew 2016 – Haiti

- Immediately
- Within 2-5 days
- After 5 days

A pre-established presence in the country was a key reason cited for the ability of agencies to deploy so quickly after the hurricane. Action Against Hunger (ACF) reported that, having worked in Haiti for 30 years, “our existing programmes and expert teams on the ground allowed us to respond in the first 24 hours of the disaster.”<sup>16</sup> This enabled them to deploy immediately to initiate a needs assessment of those most vulnerable. ActionAid also explained that they were able to deploy quickly as they were already present in Haiti and had existing relationships with local partners and affected communities.<sup>17</sup> Equally, Save the Children had operated in Haiti for over 40 years, including in the most affected area.

In addition, many of the agencies had been involved in the response to the 2010 earthquake and were already working with communities on emergency response and preparedness. Some had a long-standing presence in the country, whilst others began their work there the year of the earthquake, for example International Medical Corps (IMC) in 2010. Plan International began their response a few days after the hurricane; the organisation had been present in Haiti since 1973 and was already involved in supporting people recovering from the 2010 earthquake.

A strong local presence allowed Christian Aid to begin responding before Hurricane Matthew struck; their country office and local partner – who were already present in the affected area –worked with the local authorities to evacuate people to safety prior to the hurricane. They were, therefore, already on the ground to offer assistance.

<sup>15</sup> UN News Centre; Grünwald & Schenkenberg; Nepal Earthquake Tracking Report.

<sup>16</sup> ActionAid (a)

<sup>17</sup> ActionAid (a)



## 4.2. Staff and set-up

The surge response to Hurricane Matthew relied mainly on international staff from surge rosters and emergency teams. These international surge staff were deployed for between 28 and 60 days (an average of 32 days).

All eight agencies that responded to the survey mobilised global staff in response to Hurricane Matthew. Together they mobilised 74 surge staff (an average of 9 staff per agency) from global rosters and teams. Only Plan International mobilised three staff from their regional office. In the case of IMC, for instance, the emergency response team led the response, whilst its Haiti office continued work on regular programming activities in the country.<sup>18</sup> By comparison, the RCRC (not part of the TSC project) deployed 170 staff from outside Haiti. Although volunteers from the Haitian Red Cross were seen as key first responders, the surge deployment was not seen as using fully national and regional RCRC resources and capacity<sup>19</sup>.

Three of the eight agencies mobilised local staff (3, 7 and 16 staff respectively). ACF mobilised their expert rapid response team from their Paris office; their Haiti team intervened in the worst-affected Southern region.<sup>20</sup> ActionAid worked mainly with local partners and integrated two global surge staff into their local team. Save the Children mobilised several surge humanitarian team members (in 24–48 hours). Save the Children estimated that around 150 people surged in to Haiti in total for Hurricane Matthew to support the country office for the initial surge response and consequent programme implementation. These included a wide range of roles: logistics, team leaders, shelter coordinators, WASH and health specialists, and epidemiologists. This trend could be partly explained by the lack of staff with suitable qualifications at the local level.

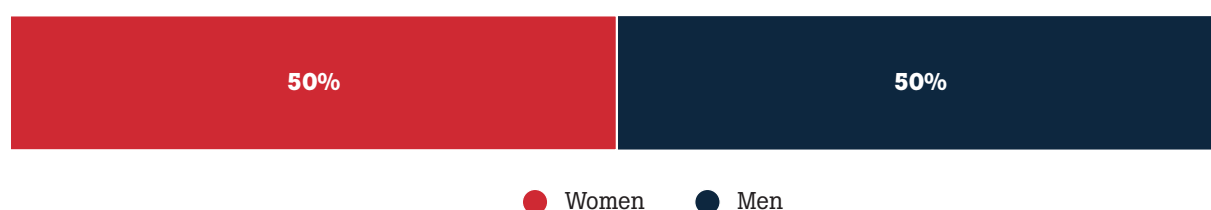
In contrast to this, only two international staff surged for Christian Aid (the regional humanitarian advisor and an administrative staff member). Christian Aid's Haiti office took the leading role in the response to Hurricane Matthew. Because the country office is entirely run by local staff (several local staff had family living in the affected areas), they benefitted from extensive local knowledge of the affected communities and their needs. The team having been involved in the 2010 earthquake response was equally beneficial.

Only one agency reported staff being surged from a regional office (Plan International). Save the Children explained, for instance, that while their regional office was involved in coordinating the response via a humanitarian coordinator and assistant humanitarian coordinator, their regional office in Panama does not have surge capacity.<sup>21</sup>

## 4.3. Role of women

Exactly half of the surge staff deployed to respond to Hurricane Matthew by the eight agencies surveyed were women:

**Figure 2: Approximate percentage of staff deployed by gender for surge response**  
Hurricane Matthew 2016 – Haiti



<sup>18</sup> IMC (b)

<sup>19</sup> IFRC

<sup>20</sup> ACF (a)

<sup>21</sup> Source : interview

ActionAid underlined the crucial role played by women as part of its community-driven response. Prior to Hurricane Matthew, ActionAid had carried out preparedness activities with women leaders and groups and emphasised women-led response, as well as a focus on households headed by women. Setting up safe spaces and protection awareness raising was a priority of the response.<sup>22</sup> ActionAid reported that, “the women we work with were put on the front line of the emergency response to Matthew. These women were so empowered after the response. We link the emergency response with sustainable development goals.” ActionAid also stressed the benefits of this approach for future emergency responses: “We had a women forum where women were able to have their say about the emergency response. You could feel that they could manage an emergency if something else happens again.”<sup>23</sup>

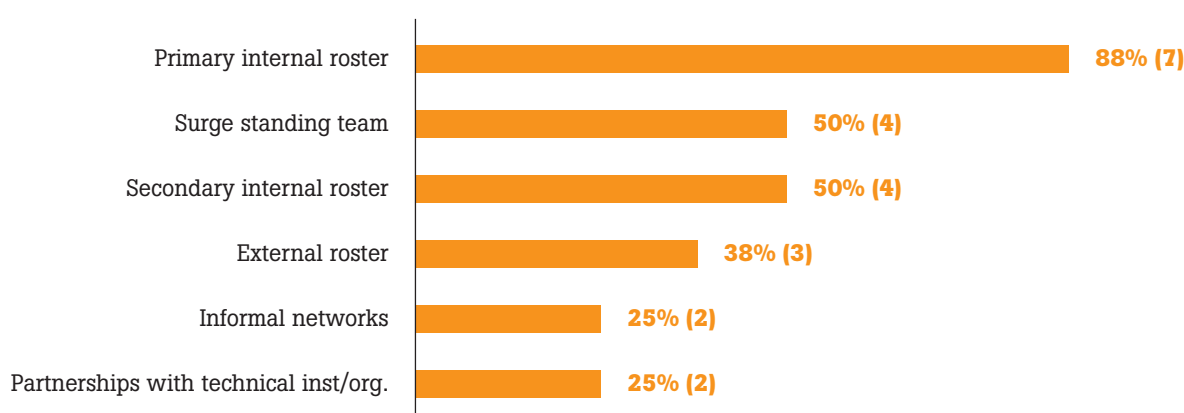
UN OCHA underlined the urgency of responding to the needs of the most vulnerable populations that disproportionately include women and girls: 44% of families in Haiti are female-headed and the majority of people living in poverty are women.<sup>24</sup> This included the need to incorporate Sexual and Gender-based Violence into the response. UN OCHA further stressed the role that women leaders and women’s groups had played as first responders to the disaster.<sup>25</sup>

#### 4.4. Rosters and registers

The agencies surveyed relied mostly on primary internal rosters for their surge response to Hurricane Matthew (seven agencies). Four agencies also used their surge standing team and secondary internal rosters. Only two agencies made use of their partnerships with technical institutions/ organisations and informal networks. For example, two medical staff travelled to Haiti via a partnership between the IMC and Massachusetts General Hospital.<sup>26</sup>

ActionAid’s international Emergency Fast Action Support Team provided support and some members of this team, with different areas of expertise, were deployed (for one week to two months). The main implementation, however, was driven by the country office.<sup>27</sup>

**Figure 3: Types of rosters/registers/teams activated by agencies**  
Hurricane Matthew 2016 – Haiti



#### 4.5. Sectoral approaches

In the context of the threat of a new cholera epidemic– posed by the severe flooding and the destruction of water infrastructure– and of the aftermath of El Nino, nearly all agencies who responded to the survey were active in WASH (seven out of eight agencies). The next most active sectors for the surge response were management/ coordination (six agencies) and logistics (four agencies). The least frequently mentioned sectors were reporting and administration (one agency each).

<sup>22</sup> ActionAid (a)

<sup>23</sup> Source : interview

<sup>24</sup> UN OCHA (a)

<sup>25</sup> UN OCHA (a)

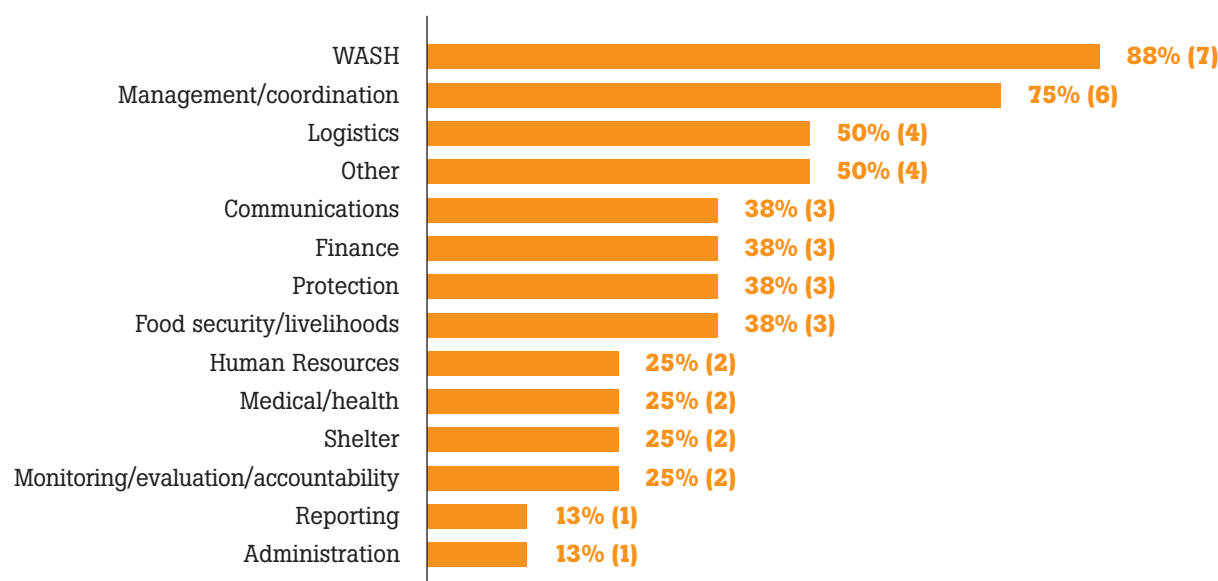
<sup>26</sup> IMC (b)

<sup>27</sup> Source: interview

WASH was considered a relative success by the inter-agency real-time evaluation carried out in November 2016. This was credited to a combination of the high priority given to WASH activities and the pre-existing work and, therefore, significant capacity (both in terms of resources and working partnerships).<sup>28</sup> ACF were a WASH partner for UNICEF and distributed hygiene supplies to 40,000 beneficiaries.<sup>29</sup> Plan International focussed on WASH, as well as child protection, in their initial response, via the distribution of non-food emergency kits.<sup>30</sup> CAFOD was also active in WASH via their partner, Catholic Relief Services (CRS), raising awareness about hygiene practices and rebuilding WASH facilities (wells, water pumps, latrines).<sup>31</sup>

Save the Children focussed on health, nutrition and child protection.<sup>32</sup> Christian Aid's focus on shelter and livelihoods drew on lessons learned during the response to the 2010 earthquake which led them to conduct a cross-sectoral needs assessment together with other agencies of the ACT Alliance.

**Figure 4: Percentage of agencies active per sector in surge response**  
Hurricane Matthew 2016 - Haiti



Four agencies mentioned that they were active in other sectors or activities, including needs assessment, training facilitation, nutrition, cash distribution, safety and security, proposal writing and information management.

In nutrition, Save the Children reached 742 beneficiaries (pregnant women, lactating women and caregivers) with breastfeeding counsellors via mobile clinics and 358 new-born kits were also distributed. Save the Children mobile team staff were also trained on the community management of malnutrition (November 2016).<sup>33</sup> Funding received from UNICEF also helped make this work on nutrition possible. Save the Children also provided 'child friendly spaces' for out-of-school children.<sup>34</sup>

Other agencies also highlighted the needs of the most vulnerable beneficiaries. Plan International highlighted the need to focus on child protection for the many children who were separated from their families during the hurricane, including the need to keep them safe after they have been reunited with their families.<sup>35</sup> Despite these efforts, in affected areas vulnerable groups, such as people with disabilities, reported having received no assistance since the hurricane hit.<sup>36</sup>

<sup>28</sup> Grünewald & Schenkenberg

<sup>29</sup> UN OCHA (b)

<sup>30</sup> Plan International (a)

<sup>31</sup> CAFOD (b)

<sup>32</sup> Source : interview

<sup>33</sup> UN OCHA (b)

<sup>34</sup> Save the Children (b)

<sup>35</sup> Plan International (a)

<sup>36</sup> RCRC real-time evaluation

CAFOD responded with partners CRS for WASH needs (as described above) and Caritas Haiti, who assisted by providing food, water and hygiene products to people in shelters.<sup>37</sup> ActionAid also began their response by providing emergency food and water for people who had been evacuated because of the hurricane. They also provided building materials and equipment (such as saws) and launched seeds and cash distribution programmes to reactivate planting, shelter construction and women's businesses. However, this agency highlighted the interconnectedness of work in different sectors. For instance, although not specifically working on WASH, ActionAid distributed hygiene kits and used this as an opportunity for awareness-raising activities on protection and the important role played by women in emergency response. This kind of approach echoes the emphasis on the need for holistic, inter-sectoral approaches that was highlighted in the real-time evaluation and supported the need for common needs assessments.<sup>38</sup>

The real-time evaluation also praised the shift from in-kind aid to cash in the response to Hurricane Matthew, citing the example of CARE's joint project with WFP that aimed to reach 800,000 people with food and cash distributions.<sup>39</sup>

IMC was one of the agencies active in the health sector, providing medical care by operating seven mobile medical units to reach isolated communities with health care and supplies.<sup>40</sup> By mid-October they had started establishing the first of two cholera treatment centres to replace those damaged by the hurricane to respond to the growing number of suspected cases of the disease.<sup>41</sup>

## 4.6. Resources

### Finance

Concerns were raised about the reduction in the number of humanitarian actors in Haiti since the 2010 earthquake (from 512 actors at the peak of that response to 84 in 2016) and to the financial constraints faced by these actors. Given the prevalence of humanitarian disasters in Haiti and the atmosphere of political instability and distrust, donor fatigue was also a concern and was believed to have affected the funding of the response to Hurricane Matthew.<sup>42</sup>

UN OCHA launched a flash appeal in October 2016 for 139 million USD to respond to the most urgent needs caused by Hurricane Matthew. However, by July 2017, only 61% of the necessary funds had been raised.<sup>43</sup>

Among the agencies surveyed, expenditure for responding to Hurricane Matthew ranged from 100,000 USD to 3.4 million USD with an average of 1.7 million USD (seven agencies provided financial information).

Fundraising emerged as a major challenge. Local offices welcomed the fundraising support received via their international networks. For instance, ActionAid Haiti benefitted from fundraising support from their Australian and US offices in addition to funding from DFID and Irish Aid. Save the Children International was able to provide some seed funding; this allowed them to deploy the initial surge staff and initiate their response rapidly. Plan International set aside resources of nearly 6 million USD (5 million EUR) immediately after Hurricane Matthew in an initial response fund.<sup>44</sup> Their international network supported fundraising efforts for Haiti with campaigns run in different national offices including in Canada, Hong Kong, the UK and the US. Christian Aid immediately released funds from their contingency fund before receiving funding from Irish Aid to finance a three-month project. IMC's work was supported by donations from in-kind partners (medical supplies, medicines, hygiene items).<sup>45</sup>

<sup>37</sup> CAFOD (a)

<sup>38</sup> Grünewalk & Schenkenberg : 10

<sup>39</sup> Grünewalk & Schenkenberg : 35

<sup>40</sup> IMC (a)

<sup>41</sup> IMC (b)

<sup>42</sup> UN OCHA (a)

<sup>43</sup> <https://fts.unocha.org/appeals/527/summary>

<sup>44</sup> Plan International (a)

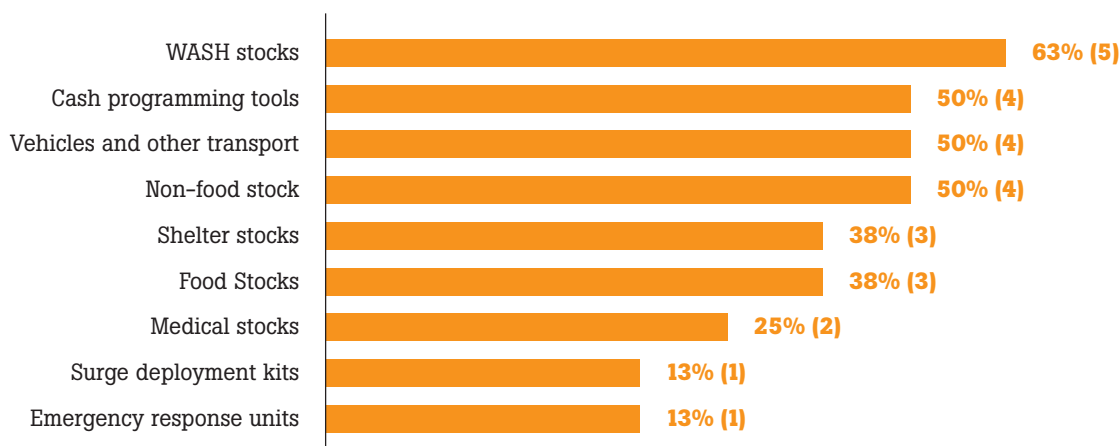
<sup>45</sup> IMC (d)

### Materials and equipment

Given the emphasis on WASH in the response to Hurricane Matthew, the materials most frequently used by the agencies who responded to the survey were WASH stocks (five agencies). The survey revealed the use of a diverse range of materials and equipment, including cash programming tools, non-food stocks, and vehicles and other transport (four agencies for each item). Surge deployment kits and emergency response units were the least popular, mobilised by only one agency in each case.

**Figure 5: Materials and equipment used by agencies in surge response**

Hurricane Matthew 2016 – Haiti



Tearfund aimed to cater for the urgent need for food and shelter, distributing food supplies via local partners and also seeds, as well as tents, metal roofing and WASH kits.<sup>46</sup> Alongside their approach of targeting water, sanitation and hygiene needs, Plan International indicated that they provided emergency kits of non-food items (including kitchen kits, mattresses and blankets) in the initial response. CAFOD also distributed food, drinking water and non-food items (cooking equipment, hygiene kits) via their local partners immediately after the crisis.<sup>47</sup> CARE's immediate response was to provide food and drinking water.<sup>48</sup> They distributed hot meals in the affected area and 500 hygiene kits, 2,500 plastic tarpaulins for temporary shelter, 6,000 water purification tablets and blankets.<sup>49</sup>

The materials and equipment used by Save the Children also mirrored their sectoral response. Save the Children deployed a large health unit that treated over 8,500 people for two months. Subsequent work, such as child protection, did not require substantial materials. School materials were also distributed to 8,400 children. Nonetheless, Save the Children also distributed emergency materials immediately after the hurricane; these included 5,000 water treatment kits.<sup>50</sup> ActionAid also provided emergency kits (food, water, hygiene), before switching their focus to protection and women's leadership.

ActionAid was able to listen and respond to feedback received via regular meetings with local communities concerning their evolving needs; this enabled them to channel their resources towards what the community required. For example, they had planned to provide wood and nails to build shelter, but these consultations revealed a preference for corrugated galvanised iron sheets instead.<sup>51</sup>

Agencies reported difficulties with the transportation and distribution of materials and equipment, including the looting of materials during transportation in the country.

ActionAid reported that working closely with local partners using community members shielded them from all problems concerning distribution; this contrasts with other INGOs who needed support from the police to secure the distributions

<sup>46</sup> Tearfund (c)

<sup>47</sup> Tearfund (a)

<sup>48</sup> CARE (c)

<sup>49</sup> CARE (a)

<sup>50</sup> Save the Children (a)

<sup>51</sup> Source: interview



The logistics of sourcing materials and equipment differed between agencies. According to the real-time evaluation, disaster preparedness interventions paid dividends and facilitated a faster response; CARE and Christian Aid, among others, had pre-positioned staff, resources and materials including tarpaulins, water purification tablets and equipment for road clearing in the affected area before the hurricane.<sup>52</sup> Plan International was able to draw on stocks available in the country as well as in neighbouring Dominican Republic where they are also operational. ACF also prepared pre-positioned stocks of emergency hygiene and safe water kits.<sup>53</sup> Others had to fly in supplies from outside the country. IMC chartered a flight to bring in medical and hygiene supplies.<sup>54</sup> ACF also flew in 20 tons of emergency relief supplies from their logistics base in France.<sup>55</sup> Save the Children brought in pre-positioned stocks from Dubai (including shelter, hygiene and water purification kits).<sup>56</sup>



**A woman at the entrance to what used to be her house in Les Cayes, Haiti before it was destroyed by Hurricane Matthew. She has five children and no means to rebuild.**

Bahare Khodabande/IRIN

<sup>52</sup> Grunewald & Schenkenberg

<sup>53</sup> ACF (a)

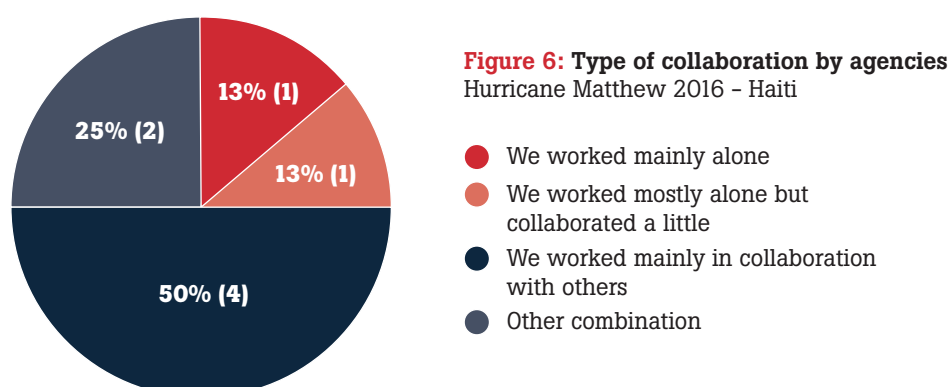
<sup>54</sup> IMC (b)

<sup>55</sup> ACF (a)

<sup>56</sup> Source: interview

## 5. Collaboration

Half of the agencies who responded to the survey worked mainly in collaboration with others when responding to Hurricane Matthew (four agencies). An additional two agencies reported collaborating in different ways: one through their network and another with local partners and alliance members. Only one agency reported working entirely alone and another worked mostly alone, but collaborated a little.



Agencies underlined the significant role that their relationships with local partners played in the intervention. In many cases, the most effective work appeared to be the product of well-established and long-standing partnerships with local organisations. CAFOD, for instance, responded via their local partners, CRS and Caritas Haiti. Christian Aid worked with different local partners on different issues; local partner KORAL worked with them on WASH and cholera prevention, whereas local partner MISSEH worked to rebuild livelihoods, distributing seed and livestock.<sup>57</sup> Christian Aid also worked closely with the ACT Alliance and their 11 other agencies, including on project-based collaborations and a needs assessment as described above.

For ActionAid, this close collaboration and relationships with local partners, established since 2007, were key to their success: “because we work directly in the field through partners, I think that we were able to have a larger and more sustainable impact in the communities.”<sup>58</sup>

ActionAid staff from the Haiti office went to support their partner’s local staff in Jérémie for the emergency response. This also enabled the agency to oversee the operation and ensure that their partner worked in line with ActionAid’s principles and values: “This enabled us to go further, also quicker and better. It allowed us to take into account the real needs of the communities,” commented ActionAid.<sup>59</sup> Additionally, it enabled them to continue work when other agencies left.

ActionAid also reported collaborating effectively with CARE (sharing strategy and avoiding duplication), UN Women (who provided funding to build protection centres for women) and IOM. They also stressed the need to collaborate closely with local authorities (such as mayors in affected areas) to avoid the duplication of actions.

Tearfund are a founding member of a local network (RIPHED) that was specifically created to respond collectively to disasters and work on disaster risk reduction and advocacy; Hurricane Matthew was the first time this network was used for a disaster response.

<sup>57</sup> Christian Aid (a)

<sup>58</sup> Source: interview

<sup>59</sup> Source: interview

Save the Children acknowledged that the absence of strong, working relationships with other INGOs in-country caused it difficulties in responding to Hurricane Matthew. They stressed the importance of ongoing work to maintain strong relationships with other agencies and donors.

Collaboration with the national and local authorities was also found to be of utmost importance. The international response to the 2010 earthquake was criticised for displacing local actors and making them feel side-lined. In the response to Hurricane Matthew, there was a conscious attempt to address these concerns. According to Christian Aid, international agencies and NGOs worked closely with Haiti's directorate of civil protection to improve communication and boost its capacity.<sup>60</sup> IMC worked alongside the Haiti Ministry of Public Health and Population for a cholera vaccination campaign.<sup>61</sup> They also worked closely with local health facilities whilst providing mobile medical services in order to identify areas of need and fill any gaps.<sup>62</sup> In terms of collaboration, the real-time evaluation found mixed results, with municipal authorities reporting that they felt marginalised by the international response.

<sup>60</sup> Jones & Holpuch

<sup>61</sup> IMC (a)

<sup>62</sup> IMC (c)

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## 6. Challenges

Resource management and policies and systems were the key challenges reported in the survey (five and four agencies respectively).

**Figure 7: Main challenges in surge response for agencies**

Hurricane Matthew 2016 – Haiti



### 6.1. Resource management

**Donor fatigue and restrictions:** Haiti had been hit by a stream of disasters at a time when an unstable political climate made donors more reticent to engage. As a result, the agencies commented that the Hurricane Matthew response did not receive the international funding that it warranted. Furthermore, some of the restrictions attached to funding (duration, sector) did not allow for agencies to adapt the response to changing needs or to a more accurate understanding of the needs.<sup>63</sup>

**Human resources:** One agency reported that not all surge staff were appropriate or qualified for deployment and were therefore a burden on the country team; they called for improved screening of staff before they are included on an emergency roster. This was similar to what the RCRC real-time evaluation found; “many delegate profiles lacked the appropriate disaster and socio-cultural adaption competencies for the Haitian and field context.”<sup>64</sup> Another request was made for training, including in cultural awareness. Difficulties obtaining visas for surge staff needing to transit through the US or Europe on their way to Haiti were also highlighted.

### 6.2. Policies and systems

**Price Inflation:** the prices for some items – and also for accommodation for surge staff – increased rapidly (sometimes becoming three or four times higher) placing serious strains on the budget for the response and making planning difficult.<sup>65</sup> One agency describes using unrestricted funds to absorb these costs in order to supply the required materials and fulfil their commitments to local communities.

**Information management/sharing and communication:** one agency raised the challenge of maintaining an updated national information-management system based on information from the field. Another agency highlighted the importance of communication and information sharing. On a practical level, the agency had no satellite phone and had difficulty communicating with partners at the outset of the crisis. The sharing of information via OCHA was seen as helpful. However, with the pressure of responding to the hurricane, one agency reported not having enough local staff. As such it was unable to regularly attend the frequent OCHA meetings in order to remain sufficiently informed about the overall response.

**Common needs assessments and coordination:** Although some agencies were able to carry out needs assessments in their sector or with their networks, they faced challenges owing to the lack of common cross-sectoral assessments. Coordination also varied from sector to sector and location to location.

<sup>63</sup> Source: interview

<sup>64</sup> IFRC, p. 47

<sup>65</sup> Source: interview

### 6.3. General

**Environment:** As stated above, Haiti is extremely vulnerable to natural disasters and their impact is worsened by poverty that increases the vulnerability of the population, and the deforestation and soil erosion that devastate agricultural production.<sup>66</sup> Food security was also a major issue; agricultural production had barely recovered from the previous drought when Hurricane Matthew destroyed crops.

**Access:** The destruction of infrastructure, including the bridge linking the South Peninsula to the mainland, and heavy rains, just after Hurricane Matthew hit, made it extremely difficult to access the affected areas, in particular remote locations; US military helicopters were used to bring in essential food supplies in the early days following the crisis. In the days after Hurricane Matthew, Christian Aid and CARE reported being unable to communicate with their teams in *Grand'Anse*.<sup>67</sup>

**Security:** two agencies reported problems with security, specifically looting, and losing some resources during the transportation and distribution of goods. These security issues were exacerbated by growing community-level frustrations with the slow delivery of food and relief supplies that led to the pillaging of aid convoys.<sup>68</sup>

### 6.4. Gap in responses

**The capacity of local partners:** There was a strong emphasis on the importance of working with local partners. However, these collaborations presented several challenges. In the survey, one agency specifically referred to the challenge of the 100% turnover in partner staff since the 2010 earthquake that meant that any learning had been lost. Two agencies reported that their local partners lacked the capacity and knowledge required for emergency response, which proved a challenge.

<sup>66</sup> ACAPS

<sup>67</sup> CBS News

<sup>68</sup> IMC (c)



## 7. Best practices and lessons learned

The tracking mechanism was able to identify the following examples of good practice and lessons learned:

**Better preparation leads to better response:** Conducting regular contingency planning over a long period of time strengthened the response to Hurricane Matthew. Preventative measures, such as the construction of disaster-proof housing, sped up the recovery process, enabling aid efforts to focus on rebuilding livelihoods as shelter needs were already provided for. Christian Aid stressed the value of having built 700 earthquake resistant homes following the 2010 earthquake. These also withstood the hurricane, leaving fewer families in need of shelter.<sup>69</sup>

**Working with local partners before, during and after the crisis:** In many cases, local partners were already on the ground helping people to safe shelters before the disaster struck, enabling them to be first to respond to the crisis as it unfurled.<sup>70</sup> These local partners already had a deep understanding of the needs of local communities, facilitating a more targeted and appropriate response. Disaster preparedness with partners after the 2010 earthquake proved invaluable in the response to Hurricane Matthew (for example by increasing the capacity of partners and local communities to manage risk). Building the capacity of local partners and their ability to manage the response and collaborate with local authorities was highlighted as being important.

**Women's empowerment:** Involving women in an active role in the emergency response helps ensure that communities' needs are addressed. Building the capacity of local women also works towards disaster preparedness for future emergencies.

**Community engagement:** Working through local partners with existing knowledge of and relationships with local communities and the use of cash-based approaches enabled people to determine their own priorities and served to boost community engagement. Close interaction with beneficiaries during their initial response work (mobile medical teams) enabled IMC to identify key priorities (prevention of sexual and gender-based violence, reproductive health, psychosocial support) that they were then able to incorporate in their programming moving forwards.<sup>71</sup>

**Pre-positioning resources:** Pre-positioning essential items in the field before the anticipated disaster facilitated a rapid response, even at time when communication and transportation were cut off from the affected area.

**Institutional support:** Support from the international networks of agencies was positive, whether in terms of communications, fundraising, monitoring or reporting, and perceived as crucial in delivering the response and submitting donor reports in a timely manner.



Helena Carpio/IRIN

<sup>69</sup> Christian Aid (a)

<sup>70</sup> Christian Aid (b)

<sup>71</sup> IMC (e)

## 8. Recommendations

The following key recommendations are drawn from the findings of this report:

### 8.1. Deployment and response

- Agencies and other humanitarian actors should make better use of existing common assessment tools and approaches to produce multi-sectoral assessments of needs for surge responses.
- Agencies and other humanitarian actors should consider how they can better balance surging in large expatriate teams with available local, national and regional resources.
- Donors and agencies should prioritise women-led responses that increase the quality and effectiveness of the response and contribute to disaster preparedness and resilience in view of future emergencies.
- Agencies and other humanitarian actors should explore the potential for cross-sectoral work, such as using aid distribution as an opportunity to communicate on health and security issues to maximise the impact of responses.
- Agencies should pre-position supplies, pre-negotiate contracts with suppliers where possible and prepare local staff in disaster-prone areas to facilitate an immediate response.
- Donors should be flexible in their funding requirements for surge and allow agencies to adapt funding use as needs change.

### 8.2. Staff and set-up

- Agencies should review the training provided for surge staff to include training in cultural awareness; improve the screening of staff to be included on the emergency rosters; and ensure that a sufficient number of Francophones are included on the roster in all job profiles.
- Agencies should strengthen the emergency response capacities in their field and national offices in disaster-prone countries by recruiting and retaining local staff with in-depth knowledge of the local setting, considering funding limitations.

### 8.3. Collaboration

- Agencies should explore ways of building the capacity of their local partners sustainably, in particular their capacity for emergency response and disaster preparedness.
  - Agencies should seek ways of collaborating more effectively with the local authorities of affected areas.
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**All linked documents accessed on 1 July 2017**



## List of interviewees and survey respondents

Organisation	Survey response	Interview	Document review
Action Against Hunger			•
ActionAid International	•	•	•
CAFOD	•		•
CARE International	•		•
Christian Aid	•	•	•
IMC	•		•
Islamic Relief	(not active)		•
Plan International	•		•
Muslim Aid	(not active)		•
Save the Children UK	•	•	•
Tearfund	•		•

## Persons interviewed

Organisation	Name	Position
ActionAid, Haiti	Marie Andrée Saint Aubin	Organizational effectiveness and governance manager
Save the Children, Haiti	Miriam Castaneda	Country Director
Christian Aid, UK	Kristina Flegg	Senior Humanitarian Advisor, Caribbean Region