

## Rapid Response Fund

<b>Section 1: Overview of response</b>													
The Bahamas	Emergency Response to People Affected by Hurricane Dorian												
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Is there an updated ACT Forum EPRP?	There is no ACT Forum in the Bahamas.												
<b>Section 2: Narrative Summary</b>													
<p><b>Background</b></p> <p>In the afternoon of Sunday, September 1<sup>st</sup>, 2019, Category 5 Hurricane Dorian, made landfall in the Bahamas in Elbow Cay, east of Abaco Island and on Grand Bahama Island respectively with the same intensity several hours later. With an unprecedented behaviour, the hurricane moved slowly through the islands from 1 to 3 of September, The overall death toll from Hurricane Dorian has risen to 58, with roughly 600 people still reported missing. More than 54,000 people was affected in Bahamas and Abaco Islands.</p> <p>Abaco, the most severely affected island, suffered thousands of flattened homes, downed power lines and damaged roads and water wells. Abaco residents were left badly in need of water, electricity, sanitation and shelter. Dorian all but destroyed two Central Abaco settlements of mostly undocumented migrants, creating a set of vulnerabilities in those communities. Dorian also affected critical infrastructure in Abaco, causing varying degrees of damage to most of the Abaco's health centres and to Marsh Harbour, Abaco's main port, as well as the Marsh Harbour airport, which was left underwater. Dorian also levelled the Power and Light office and knocked out nearly all the Bahamas Telecommunications Company's (BTC) towers.</p> <p>As with Abaco, Dorian caused damage to Grand Bahama infrastructure. Freeport airport was completely flooded, various seaports in East Grand Bahama were rendered inoperable and most health centers suffered varying degrees of damage, including the total destruction of three health centres and flooding at the island's main hospital that prompted emergency evacuations.</p> <p>As many as 5,500 people from Abaco and Grand Bahama were evacuated to Nassau, with some 1,500 people now located across seven shelters. Some 52 people remain in two Grand Bahama shelters. Abaco shelters have been discontinued over lack of usage.</p>													
<b>Humanitarian Needs</b>													

Considering the extensive damages and access constraints, NEMA<sup>1</sup> and assessment teams established safe water, food, health care and shelter as priority needs. Authorities were especially concerned with water, due to the state of water supply systems after the storm, saltwater intrusion into freshwater supply networks brought on by storm surge and flooding and damage to water storage and distribution systems. Moreover, PAHO identified the high risk of diseases potentially brought on by the combination of stagnant floodwater, contamination from sewage and lack of access to safe water. Bahamas authorities were able to evacuate thousands of people from Abaco and Grand Bahama to the main island of New Providence, home to the national capital of Nassau. Evacuees in Nassau filled some 13 shelters to capacity, a scenario that generated its own set of needs including health, psychosocial support, WASH and protection.

The impact of the Hurricane caused adults and children showing signs of trauma as reported by the churches visited by ACT Members particularly with mental health issues prior to the disaster.

### Capacity

SSID have experience in emergency response since 1962 when OAS sanctions the Dominican Republic. SSID is an active ACT Alliance member in the Caribbean and have been responding to several emergencies in Haiti and Dominican Republic respectively, such as the earthquake in Haiti, Hurricane Mathew in Haiti and Dominican Republic, Hurricane Irma and María responses in 2017 for 18 communities, 200 families. Currently under an agreement with UMCOR, SSID is building 146 houses including water and sanitation in Cavaillon in southern Haiti. SSID also had been engaged to carried out assessment in Caribbean islands in order to build humanitarian capacities as ACT Caribbean sub-forum.

### Proposed response

Does the proposed response honour ACT's commitment to Child Safeguarding?  Yes  No

<b>Problems</b>	<p>The affected households have lost their household items, their homes and livelihoods are damaged, and are facing significant barriers in order to meet their basic needs such as access to food and safe water for consumption. The population is also at a risk of contracting water- and vector-borne diseases because of limited sanitation facilities, congestion and unhygienic practices.</p> <p>Many people have been affected in mental and psychological health as a result of Dorian's adverse effects, which need humanitarian support.</p>														
<b>Target beneficiaries</b>	<p>300 vulnerable households</p> <table border="1" style="width: 100%;"> <thead> <tr> <th></th> <th>Area</th> <th>Household</th> <th>Persons</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>Grand Bahama</td> <td>1200</td> <td>6000</td> </tr> <tr> <td colspan="2"><b>Total</b></td> <td><b>1200</b></td> <td><b>6000</b></td> </tr> </tbody> </table>				Area	Household	Persons	1	Grand Bahama	1200	6000	<b>Total</b>		<b>1200</b>	<b>6000</b>
	Area	Household	Persons												
1	Grand Bahama	1200	6000												
<b>Total</b>		<b>1200</b>	<b>6000</b>												
<b>Main activities</b>	<p>The activities are designed to provide direct assistance, but also to build local capacity in psychosocial support in order to reach more people for a longer time, in order to ensure adequate emotional recovery.</p> <p>The following activities will be carried out:</p> <ol style="list-style-type: none"> <li>1. Intersectoral meetings</li> <li>2. Assessment of the psychosocial situation of the affected population</li> <li>3. Meetings and training to volunteers</li> <li>4. Community organization and planning</li> </ol>														

<sup>1</sup> The National Emergency Management Agency in The Bahamas

	<p>5. Training in psychosocial support to local leaders to create local capacity</p> <p>6. provide psychosocial support to affected people</p> <p>7. Workshops in CHS and setup a complaint mechanisms</p>
Specific objective(s)/ Outputs	<ul style="list-style-type: none"> <li>• 6000 people improve their mental health and psychosocial well-being within 6 months.</li> <li>• 80 people with capacity to provide APBC in emergencies</li> </ul>
Overall objective	<i>To support affected people by Hurricane Dorian in the Bahamas with Psychosocial assistance.</i>

#### Reporting Schedule

Type of Report	Due date
Situation report	29 February 2020
Final narrative and financial report (60 days after the ending date)	30 June 2020
Audit report (90 days after the ending date)	31 July 2020

#### Monitoring and evaluation

SSID will lead the implementation of the project, in close coordination with the local authorities, communities and leadership respectively. Monitoring will include on-site accompaniment visits to achieve the results. Feedback from beneficiaries and other stakeholders will be collected throughout the implementation of the project.

#### Section 3: ACT Alliance coordination

Recognizing that there is no direct and long-term ACT member presence in the Bahamas, coordination will be established with the relevant churches, organizations and government entities to ensure efficient implementation, avoid duplication of efforts, and ensure synergies in the response. At local level, regular meetings will be held with the relevant local authorities and stakeholders, as well as with the beneficiaries. For local work, it will be coordination with the diaconal teams of "Ecclesiastic Grand Bahamas" and the ministry of the Churches of God of the Bahamas. The Council of Churches of Cuba will collaborate with SSID in the response.

#### Implementation arrangements

SSID will be directly responsible for the implementation of the response in coordination with volunteers from local communities and churches. SSID will have an office in Grand Bahamas from where the project will be coordinated in accordance with the criteria, policies and regulations established for this type of intervention. ACT code of conduct will be the basis of this coordination and implementation.

#### Human resources and administration of funds

The finances are managed by the Financial Manager and the Accounting Department with a manager responsible for creating a specific account for the project funds. SSID has a manual of administrative procedures that guides financial management at the institutional level, with internal regulations and other guidelines on management processes, such as personnel selection, development and performance evaluation. As an institutional standard, annual audits are carried out. The management will comply with the international standards established for this type of projects.

#### Communications

The activities will be properly identified with ACT Alliance logo; photos and life stories will be taken to document the Project and its impact on the lives of participants and will be published in social networks and other media. Regular reporting will be shared within the Alliance, as well as the life stories.

#### Section 4: Budget Summary

					RRF Budget	RRF Budget
<b>INCOME - Received by Requesting Member via ACT Secretariat, Geneva</b>						
Date	Donor Name	Donor code	Payment advice #			
	ACT Alliance RRF	D1			10,000	10,000
<b>TOTAL</b>					<b>10,000</b>	<b>10,000</b>
<b>TOTAL INCOME</b>					<b>10,000</b>	<b>10,000</b>
<b>EXPENDITURE</b>						
		Type of	No. of	Unit Cost	Appeal Budget	Appeal Budget
		Unit	Units	local currency	local currency	USD
<b>DIRECT COSTS</b>						
<b>National program staff</b>						
1.1.	General Coordinator	months	4	1,600	6,400	6,400
1.2.	Labor benefits (unemployment and royalty)	Global	1	936	936	936
1.3.					-	-
<b>TOTAL PROGRAM STAFF</b>					<b>7,336</b>	<b>7,336</b>
2.5.	Protection / Psychosocial support				30,664	30,664
2.5.1.	Intersectoral meetings	Meeting	1	500	500	500
2.5.2.	Meetings with volunteers.	persons	80	20	1,600	1,600
2.5.3.	assessment of the psychosocial situation of the affected population	Assessment	1	1,264	1,264	1,264
2.5.4.	Training of volunteers	persons	80	20	1,600	1,600
2.5.5.	Community organization and planning.	Meeting	2	750	1,500	1,500
2.5.6.	Workshops to train facilitators on Coomunity Based Psychosocial Support.	persons	80	100	8,000	8,000
2.5.7.	Psychosocial assistance	Families	1,200	14	16,200	16,200
<b>TOTAL PROGRAM ACTIVITIES</b>					<b>30,664</b>	<b>30,664</b>
<b>3 PROGRAM IMPLEMENTATION</b>						
3.1.	Local Partners	month	4	150	600	600
3.2.	Needs Assessment	Global	1	5,700	5,700	5,700
3.3.	Communication / visibility	month	4	200	800	800
3.4.	Complaint mechanisms	Global	1	300	300	300
3.5.	Air transport - boats	Viajes	2	2,500	5,000	5,000
3.6.	Food-diet per day	persons	2	1,500	3,000	3,000
3.7.	Accommodation	month	4	1,250	5,000	5,000
3.8.	CHS Training	Global	1	1,000	1,000	1,000
3.9.	Audit	Global	1	3,000	3,000	3,000
3.11.					-	-
<b>TOTAL PROGRAM IMPLEMENTATION</b>					<b>24,400</b>	<b>24,400</b>
<b>4 PROGRAM LOGISTICS</b>						
<b>Transport (of relief materials)</b>						
4.1.	Hire/ Rental of Vehicles	months	4	500	2,000	2,000
4.2.	Fuel	months	4	150	600	600
<b>Handling</b>						
4.4.	Salaries / wages for Drivers	months	4	450	1,800	1,800
4.4.1	Labor benefits (unemployment and royalty)	Global	1	250	250	250
<b>TOTAL PROGRAM LOGISTICS</b>					<b>4,650</b>	<b>4,650</b>
<b>TOTAL DIRECT COST</b>					<b>67,050</b>	<b>67,050</b>
<b>5. INDIRECT COSTS: PERSONNEL, ADMINISTRATION &amp; SUPPORT</b>						
<b>e.g. Staff salaries</b>						
5.10	Salaries e. g % for Programme Director)	Months	4	350	1,400	1,400
5.20	Salaries accountant	Months	4	300	1,200	1,200
5.6	Other					
5.6.1	Labor benefits (unemployment and royalty)	global	1	350	350	350
<b>TOTAL INDIRECT COST: PERSONNEL, ADMIN. &amp; SUPPORT</b>					<b>2,950</b>	<b>2,950</b>
					<b>4%</b>	<b>4%</b>
<b>TOTAL EXPENDITURE</b>					<b>70,000</b>	<b>70,000</b>
<b>BALANCE REQUESTED (minus available income)</b>					<b>60,000</b>	<b>60,000</b>

**ACTION**

The ACT Secretariat has approved the use of US\$70,000 (including the USD10,000 advanced to SSID for assessment and initial work) from the Global Rapid Response Fund (GRRF19) and would be grateful to receive contributions to wholly or partially replenish this payment. Should there be an appeal for this emergency, the RRF payment will be considered as an advance.

**For further information please contact:**

SSID Executive Director, Lorenzo Mota King, ( [lmotaking@yahoo.es](mailto:lmotaking@yahoo.es) )  
ACT Regional Representative, Carlos Rauda ( [Carlos.rauda@actalliance.org](mailto:Carlos.rauda@actalliance.org) )

ACT Alliance website: <http://www.actalliance.org>

**Alwynn Javier**

Head of Humanitarian Affairs  
ACT Alliance Secretariat, Geneva