

SURINAME

Continuing Disaster Risk Reduction During COVID-19

CASE STUDY

August 2020



SURINAME AND THE COMMUNITY RESILIENCE BUILDING PROGRAM

Suriname is a Caribbean country with a population of 610,000 bordering the Atlantic Ocean. The Caribbean region is twelve times more exposed to natural disasters than the world average. With most of its population located in coastal areas, Suriname faces significant risks due to hazards like flooding and strong winds. Climate change impacts only serve to worsen this situation, with various climate forecasts indicating that temperatures and sea levels in Suriname are expected to rise. The vast majority of the Surinamese population live in coastal regions, resulting in climate threats to the population, biodiversity and the economy.

Since 2018, Suriname has been a key country in the Community Resilience Building (CRB) Caribbean Region Program. Under this program, the Suriname Red Cross Society (SRCS), in partnership with the Canadian Red Cross (CRC) and the International Federation of Red Cross and Red Crescent Societies (IFRC), aims to strengthen the resilience of seven vulnerable communities to the impacts of climate change. The communities were selected in coordination with the National Coordination Center for Disaster Management (NCCR), local officials and village councils, and include Johanna Margaretha, Kronenburg, Galibi, Wanhatti, Tamarin, Akalekondre and Moengotapoe. The selected communities include Surinamese of Javanese, Indian and Maroon descent as well as indigenous Caribs/Kalina. The program aims to support these communities by raising awareness on disaster risks and provide training for various gender-specific and ecosystem-based tools. Ultimately, the program will empower communities to monitor risks and hazards, to self-identify and address their own vulnerabilities and gaps in capabilities by developing community resilience plans and continuing to conduct awareness meetings.

ADAPTING THE PROGRAM DURING COVID-19

Beginning in early 2020, the COVID-19 pandemic, and the measures imposed to halt it, have increased humanitarian needs and vulnerabilities, while simultaneously limiting the ability of National Societies to provide support. In March 2020, the government of Suriname imposed restrictions on movement to help curb the spread of the COVID-19 virus. These included a partial lockdown of the country and limits on group gatherings, with a maximum of 10 community members allowed to congregate at a time. As a result, the CRB team in Suriname was unable to visit communities targeted by the program and had to find creative solutions to continue critical Disaster Risk Reduction (DRR) activities despite the restrictions.

COMMUNITY RESILIENCE BUILDING (CRB) CARIBBEAN REGION PROGRAM

The Community Resilience Building regional program is a nearly four-year program funded by the Government of Canada and implemented by CRC in collaboration with IFRC. In partnership with the Red Cross National Societies of Suriname, Belize and Saint Vincent and the Grenadines, the program aims to strengthen the capacity of 20 Caribbean communities to respond to disasters through Climate Change Adaptation (CCA) and a focus on gender equality. The ultimate goal of the program is to increase the resilience of vulnerable populations in the Caribbean (including women, men, girls and boys) to reduce the impact of disasters and crises.



LESSONS LEARNED FROM COVID-19 ADAPTATIONS TO THE PROGRAM

Looking forward, SRCS, CRC and IFRC have learned valuable lessons about adapting DRR activities during pandemic conditions. Some of these lessons are listed below:

1. Community Engagement and Accountability (CEA) and COVID-19 Awareness

While some of the program communities had access to updates about the COVID-19 pandemic via radio, television and Facebook, others (Kronenburg, Akalekondre, and Moengo Tapoe) were requesting information from the SRCS. Community members wanted to know more about the modes of transmission and symptoms of COVID-19, how to access medical services and information on hand-washing, using sanitizer and face masks. The program team acted quickly and began to gather questions from community members using WhatsApp messaging. Answers to these questions were obtained from the National Society Health Officer and then shared back into communities using WhatsApp.

'[On WhatsApp] you have the option to send voice notes. In many communities, the literacy rate is not high, so they use the option of sending voice notes to ask their questions. It's a better way of having two-way communication. Very doable.' – Luciano Doest, Technical Field Officer, SRCS

In the communities of Wanhatti, Tamarin and Galibi, limited access to electricity, internet and availability of smartphones meant that phone calls were the best way for the National Society to stay in contact and remain updated on the situation in these vulnerable communities.

2. Community Disaster Response Team Training – Piloting a Virtual Modality

When the pandemic began, the program team was already busy planning a Community Disaster Response Team (CDRT) training for the community of Kronenburg. Most of the modules had already been completed; however, the disaster planning session remained outstanding. On top of government-imposed movement restrictions, many people in Kronenburg were reluctant to permit 'outsiders' entry to the community. Under these challenging circumstances, the program team rose to the occasion and managed to host a disaster planning training primarily covering theoretical aspects via Zoom. Despite some technical challenges, the training was attended by seven people (5 women and 2 men, between the ages of 10 and 35) and was largely a success. As a result, community focal points know how to create a disaster plan and will be able to develop their own community plan to reduce the risk of future climate-related disasters. Feedback on the remote CDRT training was mixed, but most respondents felt that it was a safe way to continue trainings and that they were open to using Zoom again in the future.

'We did not know how long this pandemic would last. We did not want to lose their enthusiasm and active participation, so we tried Zoom.'

– Luciano Doest, Technical Field Officer, SRCS

Follow-up sessions for a pre-planned Training of Trainers on Community Early Warning Systems (CEWS) were also facilitated via Zoom. The participants had already completed their theoretical CEWS training prior to the onset of the pandemic, so Zoom was used for them to practice their presentation skills with a facilitator at headquarters. Additional CEWS Zoom trainings are planned, building on the success of the initial ones.



3. Gender Training and Gender Strategy for the National Society

Gender training leading to the development of a Gender Strategy for the National Society is another important part of the CRB program. Throughout the pandemic, a local consultant has been working remotely via Zoom with SRCS leadership, staff and volunteers to move these activities forward. The process, which was not intended to be remote, has involved separate online training sessions for National Society leadership and blood bank staff, National Society staff and volunteers (including personnel associated with the CRB program) as well as youth volunteers. Remotely delivered modules included an introduction to gender and gender analysis. The final step is the development of a Gender Strategy for the National Society including a gender DRR analysis of the context, risks and vulnerabilities of specific groups. Gender and diversity recommendations will also be created for SRCS to include in their future DRR programmes and policies. The strategy will prioritize DRR as a sector to provide constant training for staff, volunteers and communities with a gender approach. In parallel to the gender component, the program team has continued to work with UNICEF to establish a cooperation framework on Child Protection. Despite COVID-19 delays, the process is still ongoing with positive results.

- People were adaptable and receptive to new ways of connecting, even when the circumstances were not ideal. While most participants would have preferred an in-person CDRT training, they would consider trying a remote modality again.
- Prior relationships and good reputation with the communities were essential to building trust and fostering engagement in remote activities once the COVID-19 pandemic began.
- WhatsApp messaging technology was useful in gathering information from multiple sources, checking schedules, and sending digital messages. This will likely be used by the National Society in future.
- Fewer people participated in the Zoom CDRT training compared to earlier in-person sessions. Face-to-face trainings are thus preferable both for attendance and ease of learning, when possible.
- Remote connection technologies are only possible in communities where there is relevant technological experience (often among youth), access to electricity and WIFI, and appropriate technological hardware (computers, projectors etc.).
- Where feasible, program teams should consider pre-emptively providing necessary technology to communities under medium- to long-term programs to prepare for the continuation of activities remotely in case of an epidemic or other access restrictions.
- Older community members were less engaged in activities that required the use of remote technologies.



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