www.ifrc.org
Saving lives, changing minds.

Emergency Plan of Action Final Report

Ghana: Floods

International Federation of Red Cross and Red Crescent Societies

DREF operation n° MDRGH011	**Glide n°** FL-2015-000065-GHA
Date of Issue: 31 December 2015	**Date of disaster:** 3 June 2015
Operation start date: 4 June 2015	**Operation end date:** September 2015
Operation manager: Zakari Issa, Water, Sanitation and Hygiene Coordinator, West Coast	**Point of contact:** Zakari Issa, Water, Sanitation and Hygiene Coordinator, West Coast
Host National Society(ies): Ghana Red Cross - 5,000 volunteers, four staff members, one Regional Branch (Greater Accra)	**Operation budget:** CHF 108,115
Number of people affected: 46,370	**Number of people assisted:** 54,742 people
N° of National Societies involved in the operation: Finnish Red Cross, the International Committee of the Red Cross (ICRC) and Swiss Red Cross	
N° of other partner organizations involved in the operation: National Disaster Management Organisation	

A. Situation analysis

Description of the disaster

In early June 2015, the Greater Accra region of Ghana experienced flooding due to torrential rains which led to the widespread destruction to property and livelihoods, caused the displacement of people from their homes, and 200 deaths. According to rapid assessment figures (Ghana Red Cross Society (GRCS)), up to 46,370 people were affected in five communities (Adabraka, Alajo, Aworshie, Lower McCarty Hill and Nima), 187 houses have been partially or totally destroyed as a result of the disaster and 187 houses partially or totally destroyed. The Meteorological Services forecast indicated that more heavy rainstorms and rains were expected creating the fears that the situation could deteriorate even further. It was also anticipated that continuous use of stagnant/ contaminated water as observed during initial assessments, would pose serious public health problems, especially given the country continues to be endemic to cholera and other waterborne diseases.



A GRCS volunteer engaged in a hand washing education © GRCS.

On 11 June 2015, the International Federation of Red Cross and Red Crescent Societies (IFRC) released CHF 108,115 from the Disaster Relief Emergency Fund (DREF) to support the Ghana Red Cross Society respond to the needs of 5,096 people with emergency relief, health care services, water, and sanitation and hygiene promotion, for a period of three months.

This DREF has been partially replenished by the Canadian Red Cross / Govt. and DG ECHO. The major donors and partners of the DREF include the Red Cross Societies and governments of Australia, Austria, Belgium, Canada, Denmark, Ireland, Italy, Japan, Luxembourg, Monaco, the Netherlands, Norway, Spain, Sweden and the USA, as well as DG ECHO, the UK Department for International Development (DFID) the Medtronic and Zurich Foundations and

other corporate and private donors. The IFRC, on behalf of the Ghana Red Cross Society would like to extend many thanks to all partners for their generous contributions.

Please note that this Preliminary Report is issued in advance of the Final Report, which is expected to be issued by the end of January 2016 following the reconciliation of expenditures incurred.



Distribution of NFIs to targeted families © GRCS.



Hand washing demonstration by the RDRT © GRCS.

Summary of response

Overview of Host National Society

On 3 June 2015 following the activation of the national disaster plan, the GRCS activated 100 of its community based search and rescue and first aid team members to support immediate assistance. On 4 June 2015 in collaboration with the National Ambulance Service, 60 of these volunteers were engaged in rapid assessment to determine the following: life lost property status, disaggregated data of affected persons, and immediate needs. Following the launch of the DREF operation, the GRCS was able to achieve the following:

- Detailed assessment, which informed the identification/registration of beneficiaries;
- Refresher/orientation of 30 volunteers on the use of RAMP (Rapid Mobile phone based survey) and Epidemic Control for Volunteers (ECV) manual;
- In total, 54,742 people were reached through health and hygiene promotion campaigns; and distribution of 100 Household Water Treatment (HHWT) kits and 60 hygiene kits to the most vulnerable families;
- Five oral rehydration points (ORPs) and First Aid posts were established, which treated 167 casualties made 35 onwards referrals;
- Distribution of blankets, clothing and mosquito nets to 205 of the most vulnerable families.

Overview of Red Cross Red Crescent Movement in country

The IFRC West Coast regional representation (WCRR) based in Abidjan, Cote D'Ivoire, and Africa region office provided technical assistance throughout the DREF operation, ensuring that management and operational issues are directed and implemented with the principles and core values of the Red Cross movement to reach the needs of the most vulnerable. The IFRC WCCR has a focal point based in Accra, Ghana, which coordinated this support. On 5 June 2015, a Disaster Management Information System (DMIS) alert was issued, which was followed by an Operational Strategy Call involving participants from all levels (IFRC WCRR, Africa region and Geneva). It was agreed that an allocation should be made from the DREF to support the GRCS respond to the situation. Following the DREF allocation, a Regional Disaster Response Team (RDRT) member was deployed to support the effective implementation of the DREF operation for a period of two months. In addition, the Central Africa regional representation (CARREP) health coordinator also supported ECV training. Following the floods, GRCS established

contact and shared information with the Finnish Red Cross, the International Committee of the Red Cross (ICRC) and Swiss Red Cross.

Overview of non-RCRC actors in country

The NADMO (National Disaster Management Organization) in collaboration with key stakeholders (GRCS, United Nations agencies etc.) formed Rapid Assessment Teams to assess damage caused to infrastructure and personal belongings, the number of persons affected and also to conduct needs assessment.. A three-member team from the GRCS comprising, the regional manager, first aid coordinator and IFRC RDRT also paid a visit to NADMO office and held discussions with the Directors in charge of Relief and Reconstruction, and Fire and Lightening, to be informed of NADMO's intervention and further share information.

Needs analysis and scenario planning

Please refer to the original EPoA for information on the findings of the initial rapid GRCS assessment, which informed the design of the DREF operation. Following the launch of the DREF operation, the GRCS completed a detailed assessment, during the most vulnerable families were identified/registered for assistance.

B. Operational strategy and plan

Overall Objective

Improve the health status and shelter needs of some 5,096 community members affected by the floods disaster in Ghana.
The operation will provide basic relief items for immediate support as well as software (social mobilization and hygiene/health promotion) and epidemic control activities to 5,096 internally displaced people including children (targeting mainly on those in urban-self settlement and collective centres).

Proposed strategy

The initial DREF allocation was to serve as a start-up operation while further assessments and details were to inform on the decision and way forward based on the updated context; however following the completion of these exercises it was identified that there were no further need to expand the response and as such the proposed strategy remained mostly unchanged. Please refer to "Detailed Operational Plan" section for information on the implementation of the activities planned.

The GRCS ensured that the operation is aligned with the IFRC's commitment to realize gender equality and diversity, by adapting beneficiary selection criteria that targets the most vulnerable (e.g. lactating women, pregnant women, female headed families, the elderly and people with disabilities). Other aspects considered included programming that aims to promote prevention of sexual violence and gender-based violence and the protection of children. In addition, all activities were carried out in close collaboration with community leaders and stakeholders.

Operational support services

Human resources (HR)

The DREF operation mobilized the following personnel:

- 200 volunteers were mobilized for the response to the floods, all of which insured through the IFRC volunteer insurance programme.
- A RDRT (WatSan) was deployed to support the effective implementation of the DREF operation, for a period of two months.

Logistics and supply chain

Procurement of relief items was carried out locally by the NS of the relief items were procured locally by the National Society (NS) in accordance with the IFRC standard procurement procedures. For the items requesting international purchase, IFRC supported through it logistics unit based in Dubai, United Arab Emirates.

Communications

The GRCS ensured the visibility and publicity of the Red Cross during the DREF operation through the print and electronic media. Reports on the operation were also posted on the NS website. In addition, the distribution of relief items was attended and covered by the print and electronic media, notably, GTV, UTV, Peace FM and Graphic Newspaper (see image right)



Planning, monitoring, evaluation, & reporting (PMER)

The GRCS national headquarters (NHQ) maintained an overview of the management of the implementation of the DREF operation, and worked closely with its Greater Accra regional branch structure. The NS disaster management coordinator and focal point of the IFRC in country coordinated and monitored the implementation of the DREF operation in collaboration with other stakeholders, and one monitoring visit was planned as part of the operation. Monitoring of activities was effectively carried jointly by the region, NHQ and the RDRT. Regular reports and updates on the operation were produced and submitted to the IFRC. A lessons learned workshop was planned but carried out, however a beneficiary survey exercise was completed.

.

C. Detailed Operational Plan

Programming / Areas Common to all Sectors

Outcome 1: Continuous and detailed assessment and analysis is carried out during the operation	
Output 1.1: Initial and continuous needs assessment are updated following consultation with communities affected by floods.	
Activities planned	
1.1.1	Deployment of 10 volunteers for one day Rapid Assessment in 5 high affected communities
1.1.2	Deployment of 30 volunteers for 5 days detailed assessment in all affected communities including assessment in potentially affected areas by Dam water spillage
1.1.3	Re-orient additional 15 volunteers and follow refresher training for all 30 volunteers in RAMP Technology for continuous assessment in the affected area
1.1.4	Lessons Learned Workshop
Achievements	
1.1.1	As per the original EPoA an initial rapid assessment was completed in the five affected communities (on 4 June 2015), which informed the design of the DREF operation. Data was collected through community key informants, interviews of community representatives, victims and representatives of the affected people, district assembly members, as well as direct observation. Data cleaning and coherence confirmation continued with other sources outside the RC movement Desegregated data of the affected population was data collected by GRCS volunteers (on 7 June 2015) in the five most affected communities by the flood.
1.1.2	Following the launch of the DREF operation, the GRCS completed a detailed assessment during which 205 of the most vulnerable families were identified/registered for assistance, and issued with beneficiary cards for the collection of NFIs etc.
1.1.3	In total, 30 volunteers received refresher/orientation on the use of RAMP for assessment/mobile data collection,

which equates to 100 per cent of the intended target (30). 1.1.4 A lessons workshop was not carried out; however a beneficiary satisfaction survey was completed and the summarised findings of this exercise will be included in the Final Report, which is expected to be issued by the end of January 2016.
Challenges
None reported
Lessons Learned
None reported



ECV training of volunteers facilitated out by RDRT © GRCS



Orientation on RAMP for assessment/data collection © GRCS

Health and care

Outcome 1: Reduce health risks, morbidity and mortality on the affected population through the provision of health promotion, preventive, community-level and referral services to families in affected areas for three months.
Output 1.1: Primary health care and health sensitization campaigns is provided to 5,000 displace persons
Activities Planned
1.1.1 Training up to 30 community-based volunteers on health and hygiene promotion and ECV (Epidemics control for volunteers) proper utilization of mosquito nets as well as PSS.
1.1.2 Conduct health promotion campaigns within the affected population focusing on malaria and water-borne diseases, targeting total households in affected areas.
1.1.3 Acquire first aid kit for GRCS volunteers and affected communities
1.1.4 Set up 5 First Aid post to provide care to victims of explosion as well as affected communities
1.1.5 Provide first aid, psychosocial support and referral services for affected communities where required
1.1.6 Monitoring and reporting on activities
Achievements
1.1.1 In total, 30 community-based volunteers received a three-day training on the Epidemic Control for Volunteers manual tools and hygiene promotion to carry out house to house health education as well as referral services in the five targeted affected communities., which equates to 100 per cent of the intended target (30). Following the training, the volunteers. The ECV training was supported by the IFRC RDRT, IFRC CARREP health coordinator, and a facilitator from the Ghana Health Service, and covered topics including: social mobilisation, proper use of mosquito nets, psychosocial support, sanitation and waste management etc.

1.1.2 In total, 54,742 people across gender and age groups (adult male: 27.98%; adult female: 40.65% and children: 31.37%) were reached through health promotion campaigns, which were carried out through strategies including: house to house, and public spaces (churches, mosques, social gatherings etc.). Please refer to "Table 1: Population reached through health promotion campaigns by community.

Table 1: Population reached through health promotion campaigns by community

Community	Adult(Male)	Adult (Female)	Children	Total
Adabraka	2,836	3,772	3,880	**10,488**
Alajo	2,926	4,378	2,900	**10,204**
Aworshie	2,727	3,832	3,152	**9,711**
Lower McCarthy Hill	3,646	5,368	4,281	**13,295**
Nima	3,183	4,901	2,960	**11,044**
Total	**15,318**	**22,251**	**17,173**	**54,742**

1.1.3 Procurement of first aid kits for GRCS volunteers and the affected communities was completed.

1.1.4 In total, five first aid posts and ORPs were established, in collaboration with the chiefs and opinion leaders of these communities, which equates to 100 per cent of the intended target (Five). Each post was equipped with blankets, furniture, hand washing point, educational materials etc. The posts were managed by volunteers' who treated minor injuries, and made referrals to the nearest clinic or hospital, as well as educate people on personal hygiene. In total, 167 casualties were reported, and 35 referrals made. There was a strong collaboration between the GRCS and Heads of clinics and hospitals in the management of these posts in respect of referral cases. Please refer to "Table 2 - Summary of the data collected during the operation of the First Aid posts and ORPs".

Table 2: Summary of the data collected during the operation of the First Aid posts and ORPs

Community	Casualties	Gender		Sign/Symptoms / Action taken				Referrals
		Male	Female	Cold / feverish	Diarrhea	Vomiting	Wounds / rashes	
Adabraka	28	12	16	6	8	7	7	14
Alajo	74	27	47	19	13	15	27	8
Aworshie	25	11	14	6	7	3	9	5
Lower McCarthy Hill	21	9	12	5	8	3	5	2
Nima	19	8	11	3	5	5	6	6
Total	**167**	**67**	**100**	**39**	**41**	**33**	**54**	**35**

1.1.5 Please refer to "Activity 1.1.4".

1.1.6 Please refer to the "PMER" section.

Challenges

None reported.

Lessons learned

None reported.





Oral rehydration points and First Aid posts established in flood affected communities © GRCS

Water, sanitation and hygiene promotion

Outcome 1: The risk of waterborne and water related diseases is reduced through the provision of safe water, to 1000 families (5,000 people)in Nima, Adabraka, Aworshie, Alajo and Low McCarty Hill	
Output 1.1: At least 280 Household have access to water treatment kits (bucket and containers and/or Day one soap)	
Activities planned	
1.1.1	Procure and distribute 280 HHWT kits
1.1.2	Public demonstration on household water treatment using provided kits
1.1.3	Monitoring and reporting on activities
Achievements	
1.1.1	In total, 100 HHWT kits were distributed in communities where there was limited access to safe water supply, which equates to 36 approx. of the intended target (280). Please note that an explanation for this variance will be provided in the Final Report,
1.1.2	Public demonstration on the use of the HHWT kits was carried out by volunteers during health and hygiene promotion campaigns; and beneficiaries were able to show that they could use them. In total, 100 HHWT kits were hanged for beneficiaries in the communities where the water supply system had been disrupted as a result of the floods to ensure that they had access to safe drinking water. The HHWT kits also contained PUR and aqua tabs (water treatment chemicals)
1.1.3	Please refer to the “PMER” section.
Output 1.2: Appropriate temporary latrines are provided to cover the needs of 2038 affected people over three months, then dismantled.	
Activities planned	
1.2.1	Rapid evaluation and site selection to set up rapid latrines.
1.2.2	Local procurement of temporary prefabricated rapid latrines.
1.2.3	Installation of 41 temporary rapid latrines in collective centres and urban self-settlement areas.
Achievements	
1.2.1	No progress reported; and an explanation for this will be provided in the Final Report.
1.2.2	No progress reported; and an explanation for this will be provided in the Final Report.

1.2.3 No progress reported; and an explanation for this will be provided in the Final Report.
Output 1.3: All the affected community is provided with hygiene promotion sessions, of which 60 households receive hygiene kits
Activities planned
1.3.1 Procure and distribute 60 hygiene kits comprising soaps, sanitary and baby pads, tooth paste and brush, towel, razor
1.3.2 Hygiene promotion sessions & activities like personal and environmental sanitation promoted in communities
1.3.3 Coordinate with partners involved in watsan activities
1.3.4 Monitoring and reporting on activities
Achievements
1.3.1 In total, 60 hygiene kits were procured and distributed families comprising pregnant women and lactating mothers, which equates to 100 per cent of the intended target (60). 1.3.2 The volunteers effectively carried out the hygiene promotion and sanitation in all five affected communities. 1.3.3 During the implementation of the DREF operation, the NS coordinated the activities planned with partners including the Ghana Health Service. 1.3.4 Please refer to the “PMER” section.
Challenges
None reported.
Lessons learned
None reported.





Distribution of HHWT kits; and demonstrations on their use by volunteers © GRCS

Shelter and settlements

Outcome 1: The vulnerability of 205 flood-affected households is reduced through the provision of basic household items.
Output 1.1: 205 families receive non-food items including mosquito nets and clothing and bedding kits according to assessment and selection criteria.
Activities planned

1.1.1.	Select and train 40 volunteers on beneficiary targeting and selection
1.1.2.	Identify and register beneficiaries
1.1.3.	Procure and distribute 590 mosquito nets and 205 clothing and bedding kits to the targeted families
1.1.4.	Monitor, evaluate and report on the distribution activities and findings

Achievements

1.1.1. In total, 40 volunteers were selected and trained on beneficiary targeting and selection, which equates to 100 per cent of the intended target (40).

1.1.2. Identification and registration of beneficiaries was completed. In total, 260 beneficiaries were registered.

1.1.3. In total, 205 families received NFIs, which equates to 100 per cent of the intended targets (205); with prioritization of those that comprised pregnant and lactating mothers. During the distribution of the relief items, the President of the GRCS explained the mandate of the Red Cross, and volunteers also provided health and hygiene education (e.g. on hand washing) as well as how to properly hang the mosquito nets. Please refer to "Table 3: Summary of NFI distributions".

Table 3: Summary of NFI distributions

Item	Quantity
Mosquito nets	590
Mats	205
Blankets	205
Bed sheets	205
Clothing	250

1.1.4. Please refer to "PMER" section.

Challenges

None reported.

Lessons learned

None reported.



Demonstration on use of mosquito nets © GRCS



Distribution of NFIs to targeted families © GRCS

Contact information

For further information specifically related to this operation please contact:

- **In Ghana:** Kofi Addo, Secretary General, Ghana Red Cross Society, +233206983284, Email: redcrossghana@yahoo.com
- **IFRC West Coast:** Daniel Sayi, Regional Representative, West Coast, Abidjan, Côte d'Ivoire office phone; +225 66 775 261 ; email: daniel.sayi@ifrc.org
- **IFRC Africa Region – Disaster Management:** Farid Aiywar, Disaster Management Coordinator; mobile phone: +254 731 067 489, email: farid.aiywar@ifrc.org
- **IFRC Africa Region – Logistics:** Rishi Ramrakha; mobile phone: +254 733 888 022/ Fax +254 20 271 2777; email: rishi.ramrakha@ifrc.org
- **In IFRC Africa Region – Performance and Accountability:** Robert Ondrusek, PMER Coordinator; mobile phone: +254 731 067 277; email: robert.ondrusek@ifrc.org
- **In Geneva:** Christine South, Senior Quality Assurance Operations Officer, office phone: +41.22.730.4529, email: christine.south@ifrc.org

How we work

All IFRC assistance seeks to adhere to the Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGO's) in Disaster Relief and the Humanitarian Charter and Minimum Standards in Disaster Response (Sphere) in delivering assistance to the most vulnerable.

The IFRC's vision is to inspire, encourage, facilitate and promote at all times all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.



The IFRC's work is guided by Strategy 2020 which puts forward three strategic aims:

1. Save lives, protect livelihoods, and strengthen recovery from disaster and crises.
2. Enable healthy and safe living.
3. Promote social inclusion and a culture of non-violence and peace.