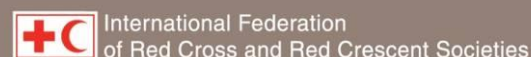




Emergency Plan of Action: Final Report

Cote d'Ivoire Ebola Preparedness



DREF Operation: MDRCI007	Glide n°: EP-2014-000039-CIV
Date of issue : 03 October 2016	
Operation Start date : 16 April 2015	Operation end date: 31 March 2016
Host National Society: Cote d'Ivoire Red Cross Society	Operation Budget : CHF360,000
Number of people affected: 3,000,000	Number of people assisted: 1,500,000
Presence of Host National Society (number of volunteers, employees, sections)	
5 staff from Headquarters, 15 NDRT and Heads of local Branches, 15 local committees and 300 Volunteers	
Red Cross and Red Crescent Movement partners actively involved in the operation: French Red Cross, Netherlands Red Cross, Finnish Red Cross, ICRC and IFRC	
Other organizations actively involved in the operation: WHO, UNICEF, NRC, IRC, MDM, Terres des Hommes, OCHA, CDC, DRC Ministry of Health of Côte d'Ivoire (INHP, SMIT, DHP, NPSP)	

Description of the Disaster

In March, 2013, there was an outbreak of the Ebola Virus Disease (EVD) in Guinea, Liberia and Sierra Leone, resulting in about 7,573 deaths of 19,463 cases by 24 December 2015, according to WHO. The prevalence of the epidemic affected countries like Mali, Nigeria, Senegal and even the United States of America. Given the ease of the spread of the disease across porous borders, strategies aimed at protecting the non-affected countries like Cote d'Ivoire were developed. The Red Cross of Côte d'Ivoire undertook preparedness and prevention measures from the beginning of the outbreak in the bordering countries. In a continuum of actions, it undertook further EVD preparedness activities, as from April 2015, with the technical and financial support of IFRC.

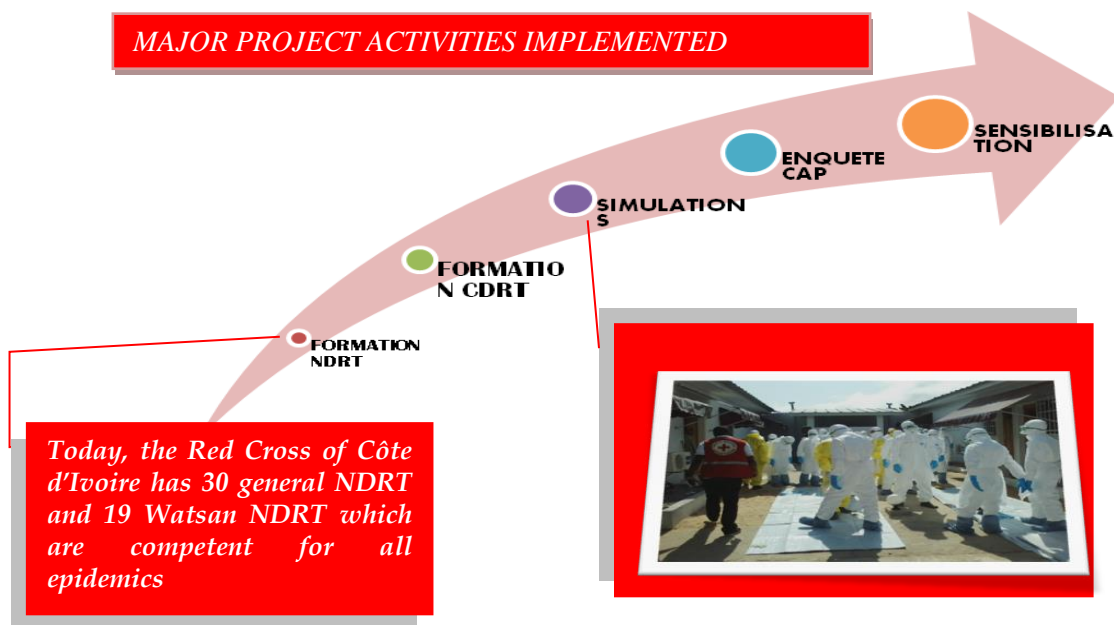
Summary of Interventions

National Society's Action

- Technical support and participation in the development of operational procedures and training modules in line with the national strategy for the fight against Ebola
- Training of 30 NDRT (National Disaster Response Team) members within the context of the epidemic and in the major regions of the country. Training took place at Jacquerville, from 5-14 October, 2015
- Training of 19 NDRT WASH members within the context of the epidemic, among which 14 were from the previous 30 NDRT training, with an addition of 4 WatSan field staff and a WatSan volunteer from Grand-Bassam. The training took place from 22-28 February, 2016 at Mondoukou, in Grand-Bassam.
- Training of 278 CDRT (Community Disaster Response Team) members in all the fourteen Ebola treatment centres in Côte d'Ivoire from 4-14 November, 2015

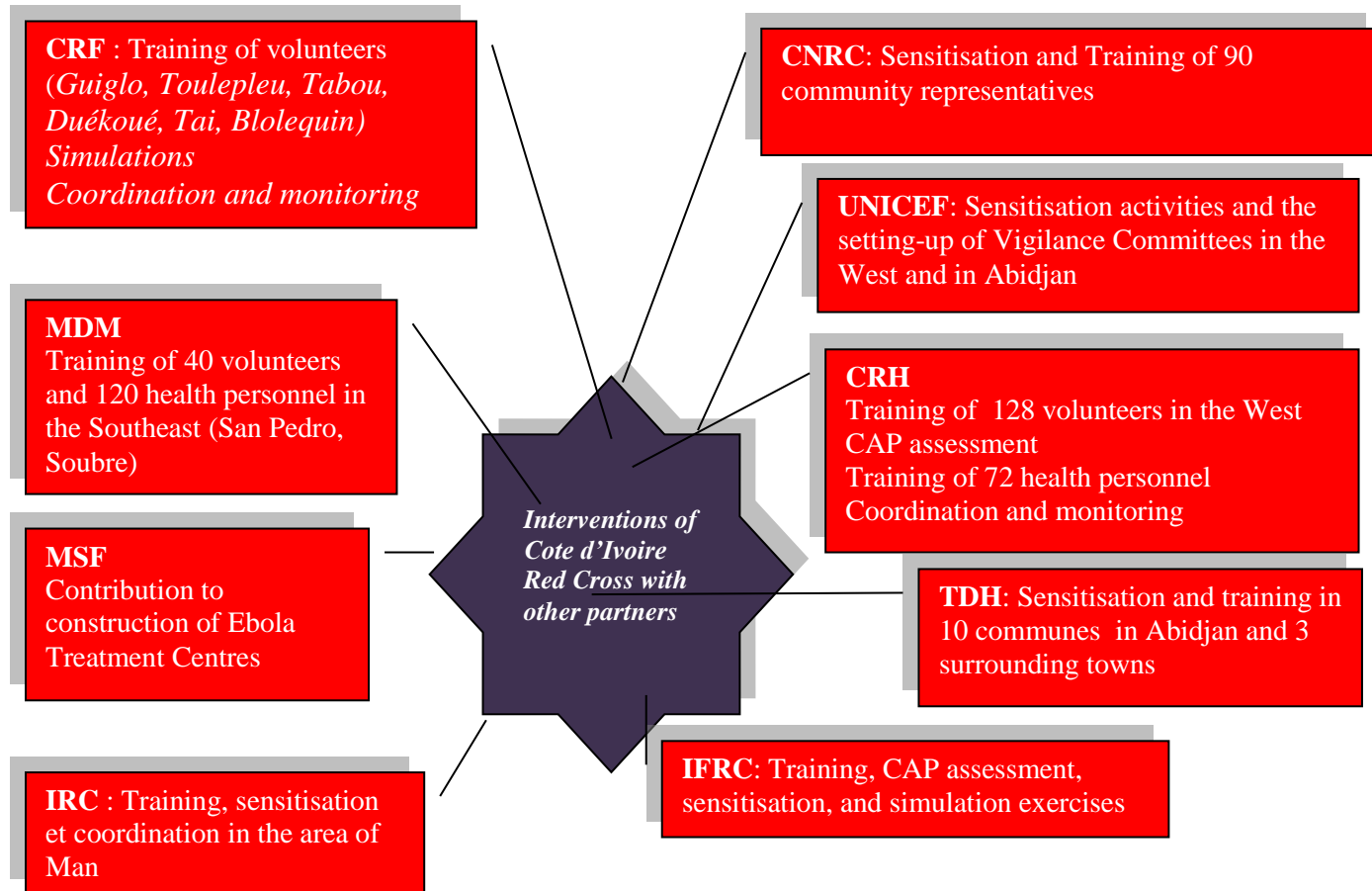
- Initial CAP assessment in 30 locations from 23- 27 November, 2015
- 3 Simulations at Man, Bouaké and San –Pedro from 7-13 March, 2016
- Social mobilisation in 14 locations in February and March, 2016

MAJOR PROJECT ACTIVITIES IMPLEMENTED



Today, the Red Cross of Côte d'Ivoire has 30 general NDRT and 19 Watsan NDRT which are competent for all epidemics

2014-2016 Summary of interventions of Red Cross and Red Crescent Movement and Cote d'Ivoire Red Cross with other in country partners



B. Operational strategy and plan

General Objective

- ✓ To complement the effort of Ivorian Government in its Ebola Virus Disease (EVD) preparedness and prevention plans by strengthening the capacity of the Red Cross of Cote d'Ivoire (RCCI)

In the Action Plan Framework, the RCCI identified the following beneficiaries:

- People living close to the 16 Ebola treatment centres (centres already built or yet to be built)
- Active volunteers of the Red Cross of Côte d'Ivoire in identified regions
- People living in the border towns neighbouring Guinea and Liberia

Proposed Strategy

The proposed plan was to build the capacity and resilience of communities against EVD in the west regions of Côte d'Ivoire, border areas of Guinea and Liberia (countries affected by EVD) as priority areas, as well as other areas surrounding the 16 government treatment centres. Community actions would, however focus more on the areas surrounding the 14 established treatment centres and those yet to be established as RCCI had already undertaken some actions within the Abidjan district with Terre Des Hommes, Italy (TDHi).

This project used a community-based mechanism starting with early warning/early action as an appropriate measure. The West region and around the Ebola Treatment Centres (ETC) were to be targeted for social mobilisation activities. It was planned to reach about 1.5 million people directly or indirectly.

The project was based on 3 strategic operational objectives which were fully achieved:

Strategic Objective 1: System centred on EVD preparedness approach:

This strategic objective comprised 3 holistic pillars: competencies, tools and resources.

The Ebola National Disaster Response Team (NDRT / Ebola), was made up of 30 persons from 7 communities in the west and areas around the ETCs. A total number of 19 WASH NDRT from 30 NDRT and WASH field staff equally benefitted from training on WASH in Emergencies within the epidemic context.

Strategic Objective 2: Preparedness approach for community empowerment

This approach was expected to contribute to surveillance and sensitisation which are indispensable for sustainability. An action plan was established by communities targeting key indicators relating to preparedness and building resilience.

A 20-member Community Disaster Response Team (CDRT) from local communities were trained in the areas around the ETCs where the CDRT had carried out community sensitisation and established Vigilance Committees.

Strategic Objective 3:

This section comprised lessons learnt and consolidation of experiences (deployment of an RDRT to support Eproject). Documented recommendations will serve as models for other regions.

Human Resources

For better project implementation, the RCCI involved various staff in the National Society. Thus, the following were involved in the implementation of the EVD preparedness project:

- ✓ Headquarters Community Health Officer
- ✓ 2 Regional Supervisors
- ✓ 3 Drivers

In addition to these project staff, 30 NDRT, 19 NDRT WASH specialists and 278 Operational CDRT were involved in carrying out the project.

Logistics and Supply Chain

To foster better working conditions for the field teams and project staff, in order to achieve the expected outcome, the following items were made available to them:

DESIGNATION	QUANTITY
Laptops	02
Printer	01
Tableau padex	05
Video projectors	02
Hand sanitisers	300
Boîte à image	30
IEC for hand washing	08
Polo T-shirts	300
T-shirts for communities	700
Caps	40
Dead body management kits	03
Dead body management starter kits	03
USB Flash drive	335
Office arm chair	01
Telephones for KAP Survey	18
Waterproofs	150
Pairs of boots	150
Pairs of household gloves	30
Chlorine HTH	20
1litre of bleach 12°	84
1litre of bleach 8°	72

Equally, 2 land cruisers (4X4) were rented for the IFRC logistics unit for field activities and a vehicle (4X4) with double cabin was bought by RCCI, making a total of 3 vehicles for the project.



A procurement plan for supply management was established in line with IFRC procedures and rules. All procurement was in coordination with the IFRC Regional Office to ensure compliance with rules and guidelines of the preparedness plan.

A. DETAILED OPERATIONAL PLAN

1- Capacity building

➤ Training of NDRT

General NDRT

To carry out the preparedness Project, it was pertinent to train a National Disaster Response Team to be deployed to epidemic at-risk communities. Thirty NDRT were trained at Jacqueville from 5-14 October, 2015. Although more general, the training did not detract from the focus of the project. It included modules on Disaster Management (DM), Water, Sanitation and Hygiene (WASH) in Emergencies, Rapid Assessment by Mobile Phone (RAMP), Logistics in Emergencies and on Ebola.

NDRT WASH

From the 30 General NDRT, the best 14 were selected, to which 4 WASH field staff and a WASH volunteer from Grand-Bassam were added. These 19 volunteers were trained specifically on topics of WASH in Emergencies. The training took place at Mondikou (Grand-Bassam) from 22-28 February, 2016.

It was planned to have an international training of 5 NDRT. Given the end of the epidemic in the affected countries, the funds were used for this training. This training was conducted by a pool of facilitators who were experienced in emergencies, particularly in the management of the Ebola epidemic. Other facilitators were WASH RDRT deployed to Côte d'Ivoire to support the project, 3 WASH RDRT of RCCI who carried out interventions in Guinea and Sierra Léone during the epidemic, in addition to the multi-disciplinary facilitators of RCCI who have given so much to ensure the RCCI has a pool of deployable NDRT.

Detailed Table on NDRT Trainings

Period and type of training	Number of participants	Participants origin by region	Lessons learnt	Facilitators
From 5-14 October 2015: Training of General NDRT	30 participants	<p>North <i>Kabadougou Region</i> : Odienné <i>Bafing Region</i>: Tabou <i>Poro Region</i> : Korhogo</p> <p>South <i>Abidjan District</i> <i>South-Comoé Region</i>: Aboisso <i>San-Pédro Region</i>: San-Pédro</p> <p>East <i>N’Zi Region</i> : Bondoukou,</p> <p>Ouest <i>Tonkpi Region</i> : Man, Sipilou, Danané <i>Cavaly Region</i>: Guiglo, Toulepleu, Bloléquin, Taï <i>Worodougou Region</i>: Séguéla <i>Haut-Sassandra Region</i> : Daloa</p> <p>Centre <i>Gbéké Region</i> : Bouaké, <i>Yamoussoukro District</i></p>	<ul style="list-style-type: none"> - Needs and vulnerability needs assessment in case of disaster - Ebola Virus Disease - Water purification at home - Construction of emergency latrines - Blanket standards - Disinfection of premises and safe and dignified burials - Monitoring of contacts - Psychosocial support - IT 	<ul style="list-style-type: none"> - M. Guédé Jean-Claude : Wash Coordinator RCCI - M. Guéhi : Assistant, Coordinator Wash RCCI - Dr Bélla : Coordinator, Community Health RCCI - Miss Marie-Louise N’Takpé : WASH RDRT, Ebola Focal Point RCCI - M. Kouadio Jean-Jacques : Monitoring and Evaluation Officer at RCCI - M. Komena Armel : DM IFRC - M. Zié Ouattara : IT RCCI - Dr Kouadio Arnaud : Regional Supervisor, Ebola Preparedness Project - M. Louloux Philippe : Regional Supervisor, Ebola Preparedness Project
From 22 to 28 February 2016: NDRT WASH Training	19 participants: - 14 from the 30 NDRT - 4 Wash field	<p>North <i>Kabadougou Region</i> : Odienné <i>Bafing Region</i> : Tabou</p> <p>South</p>	<ul style="list-style-type: none"> - EVD, Initial Assessments - Contingency Planning - Community Health: 	<ul style="list-style-type: none"> - M. Guédé Jean-Claude : WASH Coordinator RCCI - Dr Bélla : Community Health

<p>within the epidemic context and sharing of experience</p>	<p>staff</p> <p>- 1 volunteer from Grand-Bassam</p>	<p><i>Abidjan District</i></p> <p><i>Sud-Comoé Region: Grand-Bassam</i></p> <p><i>San-Pédro Region: San-Pédro</i></p> <p style="text-align: center;">East</p> <p><i>N’Zi Region : Bondoukou</i></p> <p><i>Indénié-Djuablin Region: Abengourou</i></p> <p style="text-align: center;">West</p> <p><i>Tonkpi Region : Man</i></p> <p><i>Gôh Region : Gagnoa</i></p> <p><i>Lôh-Djiboua Region: Divo, Guittry</i></p> <p><i>Worodougou Region: Séguéla</i></p> <p><i>Haut-Sassandra Region: Daloa</i></p> <p style="text-align: center;">Centre</p> <p><i>Gbéké Region: Bouaké, Yamoussoukro Region</i></p>	<p>PSSBC, epidemics management</p> <p>- Kit DELAGUA</p> <p>- Emergency water treatment</p> <p>- WASH in Emergencies</p> <p>- Infection Prevention and Control (IPC)</p> <p>- Safe and dignified burials</p> <p>- Sanitation in Emergencies</p> <p>- BENCOMS</p> <p>- Information Management</p> <p>- First Aid and Psychosocial Support</p> <p>- Quality data collection</p> <p>- Community Surveillance and Epidemiological Control for volunteers</p> <p>- Finance : Finance Procedures, justification and Working Advances</p> <p>- Logistics Procedures</p>	<p>Coordinator RCCI</p> <p>- Mlle Marie-Louise N’Takpé : WASH RDRT Focal Point, Ebola RCCI</p> <p>- M. Razzety Kouassi: WASH RDRT, RCCI</p> <p>- M. N’Guessan Albert : RDRT WASH RCCI</p> <p>- M. Zoundi Gérard: WASH RDRT, Focal Point for Ebola Project RCCI</p> <p>- M. Kouadio Jean-Jacques : Monitoring & Evaluation Officer, RCCI</p> <p>- M. Virgil Atchia : RDRT Bénin deployed in Côte d’Ivoire</p> <p>- M. Kodjo Franck : Communications Officer, RCCI</p> <p>- Mme Aka Pamela : Psychologist, RCCI</p> <p>- Mme Camara Ramata : Accountant, RCCI</p> <p>- M. Diarra Eric : Logistician, RCCI</p> <p>- Dr Yapi : PSSBC Specialist</p> <p>- Dr Kouadio Arnaud : Regional Supervisor, Ebola Preparedness Project</p> <p>- M. Louloux Philippe : Regional Supervisor, EVD Preparedness</p>
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➤ Training of CDRT

For effective community intervention, community representatives should be well trained. Knowing that the prevalence of the epidemic in Guinea, for example, was due to strong community resistance, this necessitated the training of CDRT in 14 local branches from 4-14 November, 2015, for implementation in the following communities: Odienné, Sipilou, Man, Toulepleu, Guiglo, Tabou, San-Pédro, Abengourou, Bondoukou, Korhogo, Bouaké, Bouaflé, Yamoussoukro and Aboisso.

The strategy adopted was to deploy 11 NDRT to support the local NDRT with the view to training the CDRT. In each local community, 20 volunteers were trained except in Tabou with 18 volunteers, making a total number of 278 trained CDRT able to:

- Identify an outbreak in the community
- Carry out sensitisation and set up a Vigilance Committee
- Carry out disinfection, dignified and safe burials
- Monitor contacts
- Offer psychosocial support
- Prepare chlorine for disinfection with good hand washing practice
- Promote hygiene and household water treatment
- Construct a tippy tap
- Carry out KAP survey using the RAMP tool

2- KAP Survey

Knowing and understanding the population's knowledge, attitude and practices (KAP) in relation to EVD enabled better adapting of activities to the communities. It is this idea that facilitated the success of the initial KAP survey conducted from 23-27 November 2015 in 30 locations in Côte d'Ivoire, and they were: Yopougon, Abobo, Bouake, Yamoussoukro, Korhogo, San-Pedro, Danané, Man, Bouaflé, Guiglo, Abengourou, Biankouma, Dabou, Zouan-Hounien, Bondoukou, Treichville, Aboisso, Tengrela, Tabou, Bloléquin, Odienné, Toulepleu, Sipilou, Touba, Koro, Bin-Houye, Doke, Minignan, Ouaninou and Zéaglo.

The large-scale survey gave the overview on the perception of the population throughout the regions of Côte d'Ivoire. It is important to say that this Survey was carried out under the Ebola Preparedness and the EU funded Beneficiary Communications (BENCOMS) projects, and that the two (2) projects share the same topic, though indicators and methodologies differ by locations.

The survey, the second of its kind, had the objective to evaluate the activities that the RCCI had carried out in the west of Côte d'Ivoire after the first KAP survey in 2014, with the financial and technical support from Netherlands Red Cross. In addition, it was important to get the opinion of the communities in which the RCCI had carried out activities.

The following were the results obtained:

- ✓ 98% of people had heard about EVD
- ✓ They did not have an in-depth perception of the risk (27% thought they could be contaminated in the next 6 months)
- ✓ During the first survey, 52% of the respondents thought the virus could be transmitted through mosquito bites and in this survey, 32% still thought so; one can say that there has been a clear improvement but this aspect still has to be considered during sensitisation
- ✓ The communities did not constitute obstacles to the specialists during disinfection of premises and safe and dignified burials of bodies
- ✓ The radio was the population's favourite means of communication

- ✓ The majority of the rural communities did not have Vigilance Committees and wanted the RCCI to help them establish them.

3- Social Mobilisation

One of the activities of the Ebola Preparedness project was community sensitisation and the establishment of Vigilance Committees. These activities were carried out in 14 locations in February and March 2016.

The community activities were the following:

- House-to-house sensitisation
- Sensitisation through group discussions
- Mass sensitisation
- ✓ Establishment of Community Vigilance Committees

Human Resources and Items

In each local community, the team comprised 10 CDRT and a local NDRT who was the team lead. There were a total of 154 persons, all well trained and operational.

Each team was provided with an IEC box, hand sanitisers, pairs of boots, cellophane, T-shirts and caps.

✓ Results achieved

This social mobilisation enabled RCCI to reach:

- A total number of 126,311 people directly and indirectly (women, children and men)
- 36,455 women directly
- 43,386 children directly
- 29,034 men directly

Table of persons reached through house-to-house visits

VISITE A DOMICILE							
N°	Local Committee	No of house holds	No of persons sensitised				No of persons in the household
			CHILDREN	WOMEN	MEN	TOTAL	
1	Odienné	1295	3217	2536	2330	8083	8751
2	Sipilou	1077	2166	1289	1953	5408	7492
3	Man	1167	3437	2128	1842	7407	8103
4	Guiglo	1424	3266	1763	1225	6254	8377
5	Toulepleu	1086	2371	1666	1840	5877	7569
6	Tabou	1408	1600	1736	1038	4374	7960
7	San-pédro	1375	3302	1635	1337	6274	8245
8	Abengourou	1367	4892	1760	933	7585	8951
9	Bondoukou	1946	3379	2175	1733	7287	9132
10	Korogho	1039	1985	1427	1664	5076	7267
11	Bouaké	1722	2876	2862	1752	7490	8276
12	Bouaflé	892	1045	537	442	2024	4215
13	Yamoussoukro	1378	2046	2192	1542	5780	9157
14	Aboisso	1521	2618	2369	2147	7134	8097
TOTAL		18697	38200	26075	21778	86053	103489

Table of persons reached through group discussions

GROUP DISCUSSIONS					
N°	LOCAL COMMUNITIES	Total number of people reached			NO OF PERSONS REACHED
		MEN	WOMEN	CHILDREN	
1	Odienné	84	28	19	131
2	Sipilou	96	187	79	362
3	Man	151	117	69	337
4	Guiglo	58	64	33	155
5	Toulepleu	112	92	95	299
6	Tabou	23	124	78	225
7	San-pédro	101	50	41	192
8	Abengourou	96	125	77	298
9	Bondoukou	45	60	34	139
10	Korogho	58	102	23	183
11	Bouaké	105	203	141	449
12	Bouaflé	45	82	76	203
13	Yamoussoukro	115	46	13	174
14	Aboisso	86	175	64	325
TOTAL		1175	1455	842	3472

Table indicating number of persons reached through mass sensitisation

MASS SENSITISATION					
N°	LOCAL COMMUNITY	Total persons sensitised			NO OF PEOPLE REACHED
		MEN	WOMEN	CHILDREN	
1	Odienné	358	665	144	1167
2	Sipilou	245	510	107	862
3	Man	657	438	560	1655
4	Guiglo	36	95	54	185
5	Toulepleu	123	120	113	356
6	Tabou	631	1127	501	2259
7	San-pédro	34	80	51	165
8	Abengourou	896	1058	72	2026
9	Bondoukou	1054	1285	682	3021
10	Korogho	852	1294	513	2659
11	Bouaké	124	557	260	941
12	Bouaflé	124	557	260	941
13	Yamoussoukro	60	66	907	1033
14	Aboisso	887	1073	120	2080

TOTAL	6081	8925	4344	19350
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- **Table of persons reached through mass mobilisation**

SETTING UP OF VIGILANCE COMMITTEES		
N°	LOCAL COMMUNITY	No of Vigilance Committees established
1	Odienné	40
2	Sipilou	8
3	Man	12
4	Guiglo	1
5	Toulepleu	6
6	Tabou	17
7	San-pédro	10
8	Abengourou	8
9	Bondoukou	5
10	Korogho	7
11	Bouaké	0
12	Bouaflé	0
13	Yamoussoukro	0
14	Aboisso	2
TOTAL		116

4- Simulation Exercises

A simulation exercise is a simulated training programme or a sequence of simulated events for the purpose of assessing plans and procedures. It places the participants in a simulated situation and obliges them to act as would be expected of them in a real situation. Simulations form an integral part of contingency planning. It offers the opportunity of assessing the efficiency and effectiveness of contingency plans and their components, and evaluate the means (facilities and equipment) and personnel involved in the implementation of the plans. In addition to the improvement of systems for emergency management, simulations equally help in training emergency staff by practising their roles and gaining experience.

Under this project, RCCI conducted 3 Ebola simulation exercises in Man, San-Pédro and Bouaké. Eight simulations were planned to have been conducted but due to time constraints and limited funds, only 3 exercises were carried out. Nevertheless, RCCI was able to achieve the objectives which were to prepare the intervention teams and to assess the national protocols.

Implementation Strategy

In addition to the RCCI, this stage involved the National Institute for Public Hygiene (INHP) branches, health districts, towns and municipalities. The villages chosen for the exercise were approved and designated by the prefecture. The Rapid Response Team (RRT) initiated by the INHP and the health districts were put in place by the INHP and the health districts were involved in the activity. With regards the RCCI team, it was made up of all WASH NDRT and CDRT members in the locations of the activities.

Lessons Learnt

- The field application of the Cote d'Ivoire protocol is a very long one
- The RCCI has no formal protocol for Safe and Dignified Burials (SDB); they relied on IFRC procedures which were experimented in other countries affected by Ebola epidemic
- RCCI adopted the IFRC SDB protocol
- The RCCI understands better national communication protocols in the management of EVD
- Issue of poor coordination between the RRT and the SDB Team of RCCI

Recommandations

- There is a need for good coordination between the RRT and the SDB team of RCCI; if need be, two Red Cross volunteers should be added to the RRT as in Man
- There should be periodic simulation exercises for both the RRT and the SDB to resolve coordination issues
- The RCCI should make recommendations to the INHP in relation to the challenges encountered in the practical application of national protocols

SUMMARY TABLE OF PLANNED AND IMPLEMENTED PROJECT ACTIVITIES

Outcome 1: Activity support for social mobilisation, surveillance and responsibilities of Ivorian Government in the fight against Ebola			
Output 1/1: Red Cross of Côte d'Ivoire is equipped/prepared for prevention, support, monitoring and control of EVD			
Planned Activities	Activities implemented	Rate of completion %	Justification
Training of 15 NDRT/National intervention teams of RCCI	Training of 30 NDRT	100%	
To train 200 CDRT to add to Ebola response teams	Training of 278 CDRT	100%	
International Training for 5 NDRT	National training of 19 NDRT Watsan within the epidemic context and sharing of experience	100%	At the end of the epidemic, an RDRT was deployed to share experience
To conduct 8 simulation exercises	3 simulations were conducted	40%	
To conduct 2 KAP Survey	One initial Survey was carried out	50%	
Monitoring, evaluation and support/mentoring	Implemented	50%	
Output 1/2: To raise awareness on Ebola Virus and personal hygiene in communities close to the Ebola Treatment Centres (ETC)			
To adapt the existing IFRC tools for standardised training materials and programmes for Ebola intervention in Côte d'Ivoire	Not carried out	0%	

Awareness sessions for CDRT in the communities (10 volunteers/8 local communities, 10 days/ for 3 months)	Completed in 2 month	70%	
Lessons learnt Workshop	Not carried out	0%	
Output 1/3: Strengthening of Epidemic Surveillance/Monitoring system around the potential at-risk communities and close to the Ebola Treatment Centres (ETC)			
Continuous monitoring, assessment, support to the learning process in the implementation of the Ebola Action Plan	Carried out	70%	

D. BUDGET AND EXPENDITURES

Please find attached the Final Financial Report for this DREF Operation, detailing the budget and expenditures. The remaining balance at the end of the operation, CHF 70,066, will be moved the Ebola Coordination project P60018.

CONTACT INFORMATION

For further information specifically related to this operation please contact :

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For Performance and Accountability (planning, monitoring, evaluation and reporting):

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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.

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Saving lives, changing minds.



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



During NDRT Trainings



Practical Session of making a tent



The resistance capacity of the NDRT is put to test under the hot sun



NDRT putting into practice construction of latrines in an emergency



Each team constructs an emergency latrine under a supervisor's supervision



Workshop on Water Treatment and the use of Del Agua kit





Class room Training



Volunteers carrying out advocacy in the house of a village head for his consent for mass sensitisation and group discussion with the villagers

Disaster Response Financial Report

MDRCI007 - Côte d'Ivoire - Ebola Preparedness

Timeframe: 23 Apr 15 to 31 Mar 16

Appeal Launch Date: 23 Apr 15

Final Report

Selected Parameters

Reporting Timeframe	2015/4-2016/8	Programme	MDRCI007
Budget Timeframe	2015/4-2016/3	Budget	APPROVED
Split by funding source	Y	Project	*
Subsector:	*		

All figures are in Swiss Francs (CHF)

I. Funding

	Raise humanitarian standards	Grow RC/RC services for vulnerable people	Strengthen RC/RC contribution to development	Heighten influence and support for RC/RC work	Joint working and accountability	TOTAL	Deferred Income
A. Budget			360,000			360,000	
B. Opening Balance							
Income							
<u>Other Income</u>							
<i>Other Funds for Operations</i>			360,000			360,000	
C4. Other Income			360,000			360,000	
C. Total Income = SUM(C1..C4)			360,000			360,000	
D. Total Funding = B + C			360,000			360,000	

* Funding source data based on information provided by the donor

II. Movement of Funds

	Raise humanitarian standards	Grow RC/RC services for vulnerable people	Strengthen RC/RC contribution to development	Heighten influence and support for RC/RC work	Joint working and accountability	TOTAL	Deferred Income
B. Opening Balance							
C. Income			360,000			360,000	
E. Expenditure			-289,934			-289,934	
F. Closing Balance = (B + C + E)			70,066			70,066	

Disaster Response Financial Report

MDRCI007 - Côte d'Ivoire - Ebola Preparedness

Timeframe: 23 Apr 15 to 31 Mar 16

Appeal Launch Date: 23 Apr 15

Final Report

Selected Parameters

Reporting Timeframe	2015/4-2016/8	Programme	MDRCI007
Budget Timeframe	2015/4-2016/3	Budget	APPROVED
Split by funding source	Y	Project	*
Subsector:	*		

All figures are in Swiss Francs (CHF)

III. Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance
		Raise humanitarian standards	Grow RC/RC services for vulnerable people	Strengthen RC/RC contribution to development	Heighten influence and support for RC/RC work	Joint working and accountability		
	A					B	A - B	
BUDGET (C)				360,000		360,000		
Relief items, Construction, Supplies								
Construction Materials				1,581		1,581	-1,581	
Clothing & Textiles	4,500			3,475		3,475	1,025	
Food				156		156	-156	
Water, Sanitation & Hygiene	1,940			1,015		1,015	925	
Medical & First Aid	5,885			6,537		6,537	-652	
Total Relief items, Construction, Sup	12,325			12,763		12,763	-438	
Land, vehicles & equipment								
Vehicles	35,500			35,606		35,606	-106	
Computers & Telecom	8,000			3,087		3,087	4,913	
Total Land, vehicles & equipment	43,500			38,693		38,693	4,807	
Logistics, Transport & Storage								
Storage				1,583		1,583	-1,583	
Distribution & Monitoring	10,000			3,316		3,316	6,684	
Transport & Vehicles Costs	37,600			35,615		35,615	1,985	
Logistics Services				2,500		2,500	-2,500	
Total Logistics, Transport & Storage	47,600			43,013		43,013	4,587	
Personnel								
International Staff				2,331		2,331	-2,331	
National Staff	25,500			10,607		10,607	14,893	
National Society Staff	45,313			42,139		42,139	3,174	
Volunteers	19,650			40		40	19,610	
Total Personnel	90,463			55,117		55,117	35,346	
Consultants & Professional Fees								
Consultants	1,000						1,000	
Professional Fees	10,000						10,000	
Total Consultants & Professional Fees	11,000						11,000	
Workshops & Training								
Workshops & Training	90,000			67,574		67,574	22,426	
Total Workshops & Training	90,000			67,574		67,574	22,426	
General Expenditure								
Travel	8,662			13,925		13,925	-5,263	
Information & Public Relations	12,700			7,434		7,434	5,266	
Office Costs	2,000			6,765		6,765	-4,765	
Communications	7,920			6,378		6,378	1,542	
Financial Charges	5,000			9,309		9,309	-4,309	
Other General Expenses	6,858			3,281		3,281	3,577	
Shared Office and Services Costs				7,987		7,987	-7,987	
Total General Expenditure	43,140			55,078		55,078	-11,938	
Indirect Costs								
Programme & Services Support Recover	21,972			17,696		17,696	4,276	
Total Indirect Costs	21,972			17,696		17,696	4,276	
TOTAL EXPENDITURE (D)	360,000			289,934		289,934	70,066	
VARIANCE (C - D)				70,066		70,066		

Disaster Response Financial Report**MDRCI007 - Côte d'Ivoire - Ebola Preparedness**

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Selected Parameters

Reporting Timeframe	2015/4-2016/8	Programme	MDRCI007
Budget Timeframe	2015/4-2016/3	Budget	APPROVED
Split by funding source	Y	Project	*
Subsector:	*		

All figures are in Swiss Francs (CHF)

IV. Breakdown by subsector

Business Line / Sub-sector	Budget	Opening Balance	Income	Funding	Expenditure	Closing Balance	Deferred Income
BL3 - Strengthen RC/RC contribution to development							
Health	360,000		360,000	360,000	289,934	70,066	
Subtotal BL3	360,000		360,000	360,000	289,934	70,066	
GRAND TOTAL	360,000		360,000	360,000	289,934	70,066	