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# Emergency Plan of Action Final Report

## Sierra Leone: Mudslides/Floods

 International Federation  
of Red Cross and Red Crescent Societies

<b>Emergency Appeal</b>	<b>Operation n° MDRSL007</b>
<b>Date of Issue:</b> 18 August 2017	<b>Glide number:</b> MS-2017-000109-SLE
<b>Date of disaster:</b> 14 August 2017	
<b>Operation start date:</b> 18 August 2018	<b>Operation end date:</b> 17 March 2019
<b>Host National Society:</b> Sierra Leone Red Cross	<b>Operation Funding Requirement:</b> CHF <b>4,631,088</b>
<b>Number of people affected:</b> 11,816 directly affected and 20,000 indirectly affected	<b>Number of people assisted:</b> <b>Direct beneficiaries:</b> 1,000 households (6,000 individuals); and <b>Indirect beneficiaries:</b> 20,000 individuals
<b>National Societies involved in the operation:</b> Sierra Leone Red Cross	
<b>Other partner organizations involved in the operation:</b> SLRCS collaborated with Office of National Security (ONS), and other government ministries, such as: Ministry of Health and Sanitation, Ministry of Social Welfare, Ministry of Agriculture, Ministry of Water Resources, and other non-governmental partners including CRS, Care International UNICEF, UNDP, WFP, Save the children, Concern worldwide, Oxfam and other stakeholders in WASH and DRR.	

As per the financial information attached, this operation closed with a balance of CHF 2,045. The International Federation seeks approval from its donors to reallocate this balance to the COP 2019 Livelihoods Programme to the women's voluntary savings and loans groups whose support was incomplete under the Mudslides Emergency Appeal. Partners / Donors who have any questions in regard to this balance are kindly requested to contact Younos Abdul Karim Head of Country Office at [younos.karim@ifrc.org](mailto:younos.karim@ifrc.org), within 30 Days of publication of this final report. Past this date the reallocation will be processed as indicated.

## A. SITUATION ANALYSIS

### Description of the disaster

In the early hours of 14th August 2017, torrential rains caused parts of Mount Sugar Loaf, a range of hills surrounding Freetown, to slide into the Regent Village vicinity. This led to heavy loss of life and property at the epicenter and downstream at Juba, Lumley, Kaningo/Kamayama axis. The communities affected included Juba, Regent, Matome, Bambaira Culvert, Kamayama, Jah kingdom Kaningo and Dwazark. The site of the mudslide on the hill at Regent is adjacent to a squatter settlement on a restricted and high-risk area. On the foot of the same hill, a permanent stream was interfered with by the mudslide, the saturated and highly mobile debris flow carrying soft clay (mud), boulders altered the width of the river causing it to change its course and increasing its volume exacerbating the effect in terms of scope of coverage and destruction.

According to the Public Health National Emergency center, 413 bodies were conveyed to the central morgue between 14-15 August 2017. Of these, only six bodies were identified by family members. Upon request from the family members, two bodies were handed over to the families and the rest of the bodies were buried at Waterloo cemetery. The search and rescue continued at the site, the Office of the National Security (ONS) confirmed 502 deaths and 600 more classified as missing. Response teams, led by the Sierra Leone Armed Forces and SLRCS volunteers, conducted evacuation, search & rescue, removed dead bodies and provided medical care to the injured. The role of the Red Cross was well recognized in the media such as Reuters, AFP, ABC, CNN, BBC (various), EFE, DPA, CTV (Canada).

The floods caused widespread destruction of at least 1,245 properties with over 300 houses being destroyed. According to ONS information, the mudslides rendered 11,816 people displaced of which over 7,000 were sheltered in temporary camps in Freetown. Moreover, the livelihoods of the affected people were completely disrupted. According to primary ONS assessments: 52% of the populations were living on small trade whereas 18% relied on physical labour skilled or non-skilled and 6% were in formal transport business including motor cyclists with 7% formally salaried. Apart from those directly affected, over 20,000 more were at risk due to increased demand on the already poor water and sanitation services.

The government established IDP camps in Freetown. Temporary shelters and other basic services such as water, sanitation, health was provided to the displaced families. Food was provided by WFP in a wet ration of three meals a day. During this period, Sierra Leone Red cross provided hygiene promotion and psychosocial support with ambulance referral service on daily basis to the camp population.

On the 15th of August 2017, the Government of Sierra Leone declared a state of emergency requesting for International assistance. In response to the declaration, on the 15th of August 2017, the Sierra Leone Red Cross with support from the IFRC launched an Emergency Appeal to the tune of CHF 4.6 Million to assist at least 4,800 people affected by the floods for a period of 10 months. Due to the need to urgently conduct immediate search and rescue activities and provide lifesaving services to the affected communities, a DREF of CHF 271,032 was granted to the National society.

As the Appeal was developed, the greatest need was mainly on the provision of shelter to the affected communities whilst in a camp setting. As such almost 60% of the requested funds was focusing on the provision of temporary shelter. However, the Government policy was against the settling of affected people in camps as their strategy was to remove people from the flood prone communities. This policy hence demanded a shift in the focus of the Appeal and a delay in implementation of operational activities. Based on this, a revision of the Emergency Appeal was done on the 17<sup>th</sup> of December 2017. Through the Appeal, the IFRC and Sierra Leone Red Cross Society aimed towards assisting vulnerable communities that were directly affected by the mudslide by targeting some 1,000 families (6,000 individuals) through provision of basic needs and early recovery support for reintegration. The support extended to 20,000 individuals at risk through DRR support and awareness activities until March 2019.

## **Summary of response**

### **Overview of Host National Society**

The Sierra Leone Red Cross Society (SLRCS) was established in July 1962 by the Government of Sierra Leone by an Act of the Parliament. SLRCS is a “nationwide society of members and volunteers empowered by the difference they

make in the lives of vulnerable communities in partnership with their stakeholders”. The SLRCS played crucial role in the massive government and multi-agency response to the Landslide during the response and early recovery phase. The importance of SLRCS’ contribution to the response was widely recognized. SLRCS with support from IFRC and partners, embarked on an early recovery programme and commenced transition activities to long-term programming.

The National Society has organizational structures at the national and district level organized around departments managing programmes and support units, finance, logistics and procurement and resource mobilization. This has been instrumental in planning, coordination and implementation of the operation.

### **Overview of Red Cross Red Crescent Movement in country**

IFRC Sierra Leone Country Office was committed in playing its vital coordination role in four Areas of focus WASH, DRR, HEALTH, Livelihood and Basic needs. The plan was focused on comprehensive actions during the recovery phase and community-based actions that foster resilience building.

Throughout the operation, IFRC supported the national society in key technical program areas especially in the implementation of transformational plan and contributed to strengthening the organizational capacity of the NS. SLRCS has also been receiving support from the British Red Cross, which has established a presence in-country supporting CBHP and DM activities, as well as organizational development, finance management development, and program management.

SLRCS is also receiving support from other partner National Societies including the, Swedish on a CEA project, Finnish and Icelandic Red Cross on a CBHP and from ICRC on RFL.

### **Overview of non-RCRC actors in country**

When the landslide struck, government deployed the Ministry of Defense and Ministry of Health and Sanitation personnel on the mudslide and floods sites to conduct search and rescue activities and medical care. With the support of SLRCS, the government provided ambulance services for transportation of dead bodies and wounded persons to hospitals. The response was structured into thematic clusters of shelter, health and psychosocial, water and sanitation, food and NFIs. The camp management, coordination and administration were carried out by the Office of National Security.

The National Society throughout the implementation of the emergency plan of action maintained a permanent cooperation framework with the office of National security; a body responsible for the coordination of all disasters in the country. SLRCS worked closely with several government ministries including the ministry of Health and Sanitation, in implementation of the health component of the project, the Ministry of Water Resource and the Ministry of Social Welfare, Gender and Children’s Affairs in psychosocial support programming. It also collaborated with Ministry of Agriculture in implementation of food security and livelihoods projects; especially providing technical support in purchasing and planting of 20,000 trees in disaster prone communities in the capital city as part of the disaster risk reduction strategy. A joint partners Disaster Management coordination meeting was conducted once every month, hosted and chaired by Office of the National Security (ONS) to share updates on mudslide recovery implementation, and other disaster management activities undertaken by different partners.

## **Needs analysis and scenario planning**

The mudslide and flood disaster impacted severely on the lives of the 6 communities. As such there was a need to address not only their immediate needs but also to focus on their long-term recovery needs. The following were the key needs that were identified and addressed during the operation:

- **Search and Rescue:** There was a need to immediately remove people from the sites to places of safety and designated camping areas. The initial focus of response efforts was directed towards search and rescue, including evacuation. Injured people were transported to hospitals and support was provided to the government in dead body management. In addition, 7,000 people including women and children of the affected population were transferred to safe holding locations in several tented camps.
- **Safe and Dignified burial:** A total number of 506 bodies were recovered from the site, of those only 2 were identified by their relatives. There was a need for support to ensure that all bodies were transported to mortuaries, provision of proper burial materials and the final burial of the bodies.
- **Shelter:** as noted earlier, the floods resulted in the destruction of property and left almost 11,000 individuals homeless and settled in camps. Hence provision of immediate temporary shelter as well as semi-permanent shelter was required for the safety of the affected population. However, this strategy was challenged by unforeseen policy limitations from the government. Most of the directly affected population are poor squatters residing in undesignated land within city pockets. The government classified the settlement sites as risky and would not allow any permanent presence and / or any intent to live in the original villages classified as undesignated places. The government opted for relocation to a site designated “six-mile” on the condition that all shelter support was to be permanent / concrete housing as it was already constructing public housing units to decongest the city and to provide dwellings for the homeless.
- **Water and Sanitation:** The mudslide and flash flood affected areas were mainly urban and peri-urban areas with many informal settlements. The existing water supply system in the affected areas was either an extension of the city water supply network or based on ground water extraction through dug wells or borehole. The water sources were seriously affected by the mudslide; almost all the water networks covering the affected areas and all the boreholes and dug-wells either destroyed or contaminated. As such the risk of cholera, diarrheal diseases, malaria and respiratory tract infection was elevated after wide-scale contamination of water sources which forced communities to resort to accessing water from unprotected shallow wells. The floods also affected the existing sanitation facilities in the communities. This posed a great health risk as open defecation became common. There was also a need for provision of basic hygiene education to promote good practices and reduce the incidences of potential diarrheal diseases.
- **Food and Basic needs:** Most of the affected families lost all their property, source of livelihoods and crops were destroyed. There was a need to ensure that the families have access to their immediate food needs as well as basic non-food items such as buckets, jerry cans, blankets and kitchen sets for their basic survival. Livelihood recovery was also key for the long-term needs of the families
- **Health:** The risk of diarrheal diseases in the affected areas was high due to stagnant water, lack of proper sanitation facilities and poor hygiene practices. It was thus important to provide psychosocial support to affected families and community members as well as provision of first aid to the injured.
- **Disaster Risk Reduction:** Due to the nature of the communities that the affected families resided in, it was important to address the key factors that put the families at risk to floods and other potential disasters. Provision of knowledge to help communities identify their risks was important. The lack of early warning systems was also

key hence there was indeed a need to focus on the establishment of community early warning systems in the communities.

Based on the identified needs, the SRLCS Humanitarian efforts were geared towards supporting the remaining displaced population and plans for the transition and reintegration of people back to their everyday lives through the provision of livelihood and basic needs, water, sanitation and hygiene, health (community-based health and psychosocial support), and disaster risk reduction / community resilience.

### **Operation Risk Assessment**

A significant percentage of affected communities in Freetown comprise of residence with poor economic means that live in squatter and weak constructed houses. These residential areas are situated on collapsible soils increasing risk of hazards from flooding. Collapsible soils appear to be strong and stable in their natural (dry) state, but rapidly consolidate under wetting. This can yield disastrous consequences for structures unwittingly built on deposits. As these structures and communities are located on hillsides and coastlines, the integrity of the buildings is further challenged by poor drainage systems, ineffective waste management and lack of town planning. The indiscriminate depletion of the forest cover for settlement and other economic reasons occasioned by intense rainfall increase vulnerability of those communities to landslides and flooding. Consistently, in the last two years, these hillside and coastal communities have had incidents of mudslide, flooding and windstorm with fatalities, injuries and forced displacements.

However, government efforts to evacuate or relocate these communities have proved unsuccessful. For instance, after the September 16th, 2015 landslide and flooding incidents, affected communities were relocated to `Mile 6` on the outskirts of Freetown but by November 2015, those relocated returned and began new settlements in the same localities. This suggests weakness on the part of the Lands and Environment Ministry and law enforcement agencies to ensure appropriate government's actions are adhered to and sustained. The severity of the recent mudslide and flooding in Freetown reawakens the necessity for action to prevent or mitigate a reoccurrence of similar disaster. The scale and impact of the disaster could be attributed to limited knowledge of disaster risk reduction strategies and resilient capacities by affected population. Without adequate emergency response to the current crisis, there is an increased likelihood of opportunistic disasters from possible outbreak of water-borne diseases such as cholera, typhoid etc. Therefore, this requires collective effort from the Disaster Management Department of the Office of National Security (ONS), emergency management and aid agencies.

### **Beneficiary selection**

Beneficiary information was compiled by registration pillar lead by Ministry of Social Welfare, with support from Red Cross volunteers and other partners. The Ministry data was then shared with all organizations participating in the response operations. SLRCS/IFRC targeted 1,000 households (6,000 individuals) in 6 communities i.e. Juba, Dwazark, Kamayama, Kaningo, Regent and Culvert. In addition, 20,000 people at risk benefited from disaster risk reduction/community resilience and awareness activities.

The Red Cross direct intervention was focusing on the provision of basic needs at household level (food, NFI and cash transfer) categorically targeted special vulnerability segment of the mudslide directly affected populations. These populations were those captured in the registration pillar as totally displaced. Special preference was given to less advantaged; including female headed households and households with special needs due to their age or disability of

household head. However, the risk reduction and capacity development interventions covered the direct affected communities who were lacking quality water access, live in poor sanitation, and with poverty and meagre livelihoods. The table below highlights the breakdown of beneficiaries:

Area of Focus	Activity	Number of people reached	Male	Female
Livelihoods and basic needs	Women`s groups	450		450
	CTP	6,000	3,294	2,706
	Food Items	6,000	3,294	2,706
Shelter including household NFIs	NFIs	6,000	3,294	2,706
WASH	Aqua tabs and ORS	6,000	3,294	2,706
	Hygiene Promotion	6,280	3,077	3,203
Health	PSS	6,208	2,301	1,695 & 2,212 children
	First Aid training	46	34	12

## B. OPERATIONAL STRATEGY

### Overall Objective

The Objective of the operation was to deliver emergency services to improve the condition and reduce risk of health of affected populations in the six communities of Culvert, Kamayama, Kaningo, Juba, Regent and Dwazark.

### Proposed strategy

The operational strategy was aimed at reaching out to the people affected and providing basic needs, as well as implementation of recovery activities in the six affected areas. The interventions were organized into three gradual facets:

- 1. Emergency lifesaving response activities:** this area focused on immediate live saving activities, such as search and rescue, casualty management, provision of first aid, provision of Psychosocial Support (PSS), referral and Restoration of Family Links (RFL).
- 2. Support to IDP camps:** provision of basic needs including NFI, food, psychosocial support, health and WASH.
- 3. Early recovery and DRR activities:** to reduce vulnerability to potential hazards in the communities.

The Operation also included a component on National Society capacity development and institutional preparedness to improved response capacities for any future humanitarian action.

### Operational support services

#### Human resources

In response to the needs of vulnerable people affected by the mudslide, IFRC was quick to mobilize the surge capacity (FACT and RDRT) required to enhance planning, coordination and implementation and to deploy essential equipment and materials.

An Operations Manager was deployed engage in the process, mobilize, manage and carry on implementation with the overall responsibility for timely progress, financial management and reporting responsibilities of the operation. IFRC Country Office in Sierra Leone ensured that relevant technical delegates were available to support SLRCS in the implementation of planned recovery activities. The recovery operation was supported by technical delegates in DRR, WASH, PSS, Finance and Administration and Logistics. The operation recruited additional capacity through the recruitment of national staff; WASH Officer, DRR Officer and PMER Officer.

The IFRC staff also worked closely with National Society staff under each Area of Focus. The NS DM coordinator supported all DRR activities under the mudslide operation whilst a Livelihoods officer supported all the livelihoods activities. The NS also engaged CEA and PSS focal points to support the operation.

At community level, the operation engaged volunteers who were key to the implementation of the Areas of focus. A total number of 160 volunteers were recruited: under PSS - 30 volunteers and 4 supervisors, health - 30 volunteers and 6 supervisors, DRR - 40 volunteers and 8 supervisors, CEA - 30 volunteers and 12 supervisors.

The local stakeholders and community Chiefs also provided a supporting role through the monitoring of activities at community level. This was key for continuity and sustainability of key development activities under the Emergency Appeal.

## **Logistics and supply chain**

The IFRC logistics team provided support to SLRCS to manage effectively the supply chain, including procurement, customs clearance, fleet, storage and transport to distribution sites, in accordance with the operation's requirements and aligned to IFRC's logistics standards, processes and procedures. A procurement plan was developed and a plan of action, that guided the procurement process, to ensure effective and timely support for the operational activities. Local procurement was managed by the IFRC Country Office and SLRCS in accordance with IFRC procurement procedures and processes.

## **Security**

The IFRC Security Unit in Geneva and Regional Security Coordinator in Nairobi worked closely with the IFRC Country Office to monitor the security situation and provide support when required. Volunteers' security was a priority. Volunteers received appropriate security briefings before all activities in the communities.

## **Planning, Monitoring, Evaluation, and Reporting (PMER)**

The performance of the operation was monitored through a robust system of accountability and reporting. Emphasis was placed on tracking the progress of outputs to inform operational planning and decision making. The PMER structures at HQ was enhanced, contributing to staff and volunteers collecting viable data, that was timely and trusted. PMER Officer for the country office supported the National Society to use data collection tools effectively to improve data management.

The PMER officer was responsible for performance-based management systems and the overall quality and effectiveness of the planning, monitoring, evaluation and reporting systems in the country office. This contributed to improving the impact of IFRC in building the capacity of the national society, strengthen planning and management decisions, and promote accountability and learning.


IFRC worked in close coordination with British RC to ensure that baseline information was collected at sector levels to develop and implement needs-based programmes. In addition, IFRC with support from BRC PMEAL delegate carried out KAP survey to ascertain the knowledge, attitude and practices with regards the WASH intervention in the operational communities. A baseline Survey was conducted however late in the implementation of the operation. An end of implementation evaluation was also conducted by an external evaluator hired by the IFRC. The reports for all assessments are attached as Annexes to this report.

## Community Engagement and Accountability

The project captured key grassroots stakeholders to work together with a long-term vision. Community engagement was innovative with community members being involved in various local capacities including dissemination, co-ordination and networking.

Community Engagement and Accountability (CEA) was used as an approach to reach out people living in disaster prone areas on disease outbreak and preparedness. The IFRC supported the training of 30 community-based volunteers in affected communities. The training capacitated volunteers on how to use forum theatre as a means of engaging and educating their communities about disaster outbreaks and adverse environmental practices. The training was followed by drama performances in the affected communities concentrating on the effect of selling protected areas and subsequent effect of building in disaster prone zones. This will also serve as a medium for early warning call to stop activities that would endanger their communities.

## C. DETAILED OPERATIONAL PLAN

 <p><b>Disaster Risk Reduction</b>  <b>People reached: 24,731</b>  Male: 12,613  Female: 12,118</p>		
<b>Outcome 1: Communities in high risk areas are prepared for and able to respond to disaster.</b>		
<b>Indicators:</b>	<b>Target</b>	<b>Actual</b>
<b># of countries with national and local disaster risk reduction strategies</b>	<b>1</b>	<b>0</b>
<b>Output 1.1: Communities take active steps to strengthen their preparedness for timely and effective response to disasters</b>		
<b>Indicators:</b>	<b>Target</b>	<b>Actual</b>
<b># of community contingency plans in place.</b>	<b>6</b>	<b>6</b>
<b># of community early warning systems established or improved and linked with local or national meteorological systems</b>	<b>6</b>	<b>6</b>

# people reached with public awareness and education campaigns using harmonized messages to reduce, mitigate and respond to identified risks	26,000	24,731 (Direct: 6,105) Indirect (18,625)
<b>Outcome 2: Communities in disaster and crisis affected areas adopt climate risk informed and environmentally responsible values and practices</b>		
<b>Indicators:</b>	<b>Target</b>	<b>Actual</b>
# of NS supporting communities to develop longer term risk reduction plans that address long-term adaptation needs and unexpected climate related risks	1	1
<b>Output 2.1: Community awareness raising programmes on climate changing risks and environmentally responsible practices are conducted in target communities</b>		
<b>Indicators</b>	<b>Target</b>	<b>Actual</b>
# of people reached by climate change mitigation and environmental sustainability awareness raising campaigns	6,000	720
Narrative description of achievements		
<p><b>Outcome 1: Communities in high risk areas are prepared for and able to respond to disaster.</b></p> <p><b>Output 1.1: Communities take active steps to strengthen their preparedness for timely and effective response to disasters.</b></p> <ul style="list-style-type: none"> <li>• <b>First-Aid TOT:</b> Twenty-six (21 male / 5 female) staff and volunteers from the 14 Branches of SLRCS went through a 9-day First-Aid TOT. This training strengthened the nationwide response capacities of SLRCS with trainers who can cascade the first aid training to branch volunteers and communities. Trainers are also responsible for organizing and conducting commercial first aid training with other institutions to raise fund for their respective branches.</li> <li>• <b>First-Aid training for volunteers and Staff:</b> A total number of Twenty (13 male / 7 female) SLRC staffs and volunteers were trained on first aid to build their readiness to respond to emergency. The training has created awareness of applying First Aid in emergency situations and has built the ability to respond promptly and appropriately to a range of situations and incidents to preserve life and protect casualties until specialist aid is available.</li> <li>• <b>Training of Trainers on Community Early Warning Systems (CEWS) Toolkit:</b> Forty (40) (12 Female / 28 Male) participants (10 Associate trainers and 30 volunteers) were trained on community early warning systems. In addition to this training, 180 (72 Female / 108 Male) community-based beneficiaries were trained on Early Warning System. During the training, Early Warning points in relation to flooding were identified in the target communities, and EWS points established. Six (6) Rain Gauges were also donated by Meteorological Department for monitoring rainfall and updating Red Cross and Met offices. Volunteers from operational communities were assigned to monitor the EWS signs, raise alarm on observations, update the Red Cross office through the community focal persons. These volunteers were supported with rain gears and lights to work in night and rainy condition. More community members are now conscious of Early Warning Systems in the different recovery communities</li> <li>• <b>Community Managed Disaster Risk Reduction Committees (CMDRR):</b> During the operation a total number of CMDRR committees were set up. These committees are responsible for DRM activities within the community. The 6 Community Managed Disaster Risk Reduction committee (CMDRR) training was provided to 157 (84 male / 73 female) participants, supported by CEWS trained community participants and trainers. This has strengthened the preparedness capacities of six mudslide communities.</li> </ul>		

- **Search and Rescue:** The SRLCS through the Emergency Appeal trained 24 (18 male / 6 female) volunteers to become trainers on light search and rescue technics with the support of Maritime Wing of Sierra Leone army and the National Fire force. This activity contributed to the strengthening of the preparedness of SLRC by building the capacities to respond to disaster with lifesaving technical skills. This pilot training is the first of its kind in Sierra Leone. The National Society now has trainers in Search and Rescue, who can help replicate such trainings to other volunteers. About 40 (32 male / 8 female) SLRCS volunteers received training on light search and rescue technics, with support of 4 new SLRCS trainers. These volunteers now form the standby team that can be deployed to contribute to search and rescue operation in case of disasters in Sierra Leone.
- **National Society Response Capacity:** To contribute to the strengthening of the NS capacity to respond to disasters and to ensure they are better prepared, the operation contributed to prepositioning of relevant equipment that could help improve response. A total number of 200 Megaphones with batteries were procured and two pieces have been distributed to Red Cross volunteers in each target communities to support mobilization and conduct awareness activities on flood early warning system. A total number of 250 First aid kits were procured and pre-positioned in the warehouse to be deployed and used by SLRCS volunteers to respond to emergencies. 1,000 Personal Protection Equipment's was procured and prepositioned in SLRCS warehouse, to be distributed and used by SLRCS volunteers and CMDRR to protect themselves when responding to disaster.
- **Vulnerability and Capacity Assessment:** About 30 participants from each community amounting to 180 (115 male / 65 female) were trained on conducting VCA between 27th September to 3rd October 2018. The training covered leadership skills and Development of proposal at community level. The outcome of the training supported the identification of risks in the communities, the development of the VCA report for each community and the development of Community Action Plans for the 6 affected communities. Based on the Community action plans developed by the community members, support in terms of tools and materials were provided for the community risk reduction activities. The support enhanced the community to work towards the mitigation of the impact of future unforeseen disaster in relation to their identified hazards.
- **Refresher training for DM technical working group:** Thirty (4 Female / 26 Male) National Society staff and volunteers were trained based on roles and knowledge on DM as Technical Working Group members. The trained staff and volunteers will serve as additional human resource personnel to support the implementation of Disaster Management activities at National level.

**Outcome 2: Communities in disaster and crisis affected areas adopt climate risk informed and environmentally responsible values and practices.**

**Output 2.2: Community awareness raising programmes on climate changing risks and environmentally responsible practices are conducted in target communities.**

- **Tree Planting technics:** A total number of 120 (104 male / 16 female) community people from the 6 communities were trained in seedlings management, planting technics and maintenance of seedlings, with the support of the government forestry division. The trained community volunteers are forming the tree planting committee that will be responsible to coordinate and supervise the seedlings planting in their communities.
- **Tree planting the Flood Prone Areas:** Through the operation, the SLCS was able to support the procurement of 20,000 seedlings as well as donated tools and equipment to plant the seedlings. The tools were donated to the tree planting committees and this was witnessed by community chiefs and the ministry of agriculture for

sustainability purpose. During the planting process, mudslide affected individuals (around 600 people participated – 350 male / 250 female), during the months of June and July which is the best period to plant seedlings. The 20,000 seedlings were planted in water catchment, deforested area, along rivers and sea embankment. In addition, students of local schools were involved in the planting and maintenance of seedlings around their houses. The reforestation will help to reduce the water run off that contribute to flood and landslide risks in the city.

#### Challenges

- There was high expectation of the beneficiaries from Red Cross during implementation as opposed to the available fund, this in some cases led to their request for financial benefit after participating in community-based activities
- Restriction of key activities that are new to the NS (e.g. SAR, NDRT) to only operational area did not allow the National Society to extend its capacity building programme to other parts of the country for subsequent emergency response.

#### Lessons Learned

- Working in partnership with line Government Ministries and DRR actors added quality to the operation. However, there is need to conduct a stakeholder mapping to know who is doing what, and their capacities to avoid duplication of efforts and ensure minimum coordination.
- Involvement of community-based volunteers in planning and implementation of the appeal enhanced successful outcome.



### Livelihoods and basic needs

**People reached: 4,950 individuals**

Male: 2,205

Female: 2,745

**Outcome 1: Communities, especially in disaster and crisis affected areas, restore and strengthen their livelihoods**

**Output 1.1: Basic needs assistance for livelihoods security including food is provided to the most affected communities**

Indicators:	Target	Actual
# of people targeted/reached	5,010	4,950

Narrative description of achievements

**Outcome 1: Communities, especially in disaster and crisis affected areas, restore and strengthen their livelihoods**

**Output 1.1: Basic needs assistance for livelihoods security including food is provided to the most affected communities**

- **Cash disbursements:** Through the operation, the SRLCS was able to reach out to a total number of 750 HH (4,500 individuals) through Cash based intervention. The Cash transfer modality adopted for the CTP was the Direct cash. However, for this process the IFRC and the SLRCS contracted a bank to support with the handling



Photo: Cash distribution to affected people

of the cash. The banks were selected through a tendering process. The SLRCS and IFRC coordinated with the bank, provided the list of the beneficiaries as well as the instruction to pay the beneficiaries. The SLRCS was also responsible through its branches to ensure that dates and venues were adequately communicated to the targeted populations.

Distribution points which were located within the areas where the targeted populations were located were selected to ensure safety and reduce the distances walked by the beneficiaries. During the disbursement of funds, the IFRC and SLRCS were also present ensuring that a complaints and feedback mechanism system was available and to ensure that beneficiaries queries were addressed. The total amount that was given per household was SLL 2,280,000 which was at that time equivalent to USD 300. This was meant to prevent beneficiaries from selling the relief items they received. The money was meant to cover food needs, basic NFI, accommodation and a bit of livelihoods recovery.

- **Food vouchers:** The Red Cross supported the transition and reintegration of the IDPs through the provision of food vouchers to some 750 households to cater for up to 3 months ration per household. The contents of the parcel supplied to the beneficiaries were: Rice (2 Bags per Household), Cooking oil (Gallons per Household), Palm Oil (1 Gallon per Household) and Sugar (2Kg per Household).



- **Livelihood Groups:** Fifteen (15) women's group were supported to recover and strengthen their livelihood in the target communities. Prior to the support, an assessment was conducted to identify vulnerable women's groups to be supported to undertake livelihood and Income Generating Activities (IGAs) in the six communities. This was followed by a two days training for 90 participants (6 per community) to locally initiate and develop business plans, build their capacities in management of their respective income generation activities, making

better spending of their income, and investment schemes that can lead to the increase in their earnings and improve on their household and community livelihood drive for business sustainability. Local stakeholders and Chiefs were engaged in the assessment process and support to the groups to ensure that there is continued monitoring of the groups after the end of the operation. The involvement of the stakeholders in the assessment process will ensure commitment and ownership of the project. After the training, the groups developed project proposals which were reviewed by a technical team comprising of the IFRC and the NS. Each group based on their proposal was given a grant to kick start their project ranging between 5 million to 6.5 million SLL.

#### Challenges

- Registration of beneficiaries in camp was done by the government, the registration tool used was not a multi-sectoral tool, this was a challenge for the NS when it comes to sharing information with other partners on affected sectors that have not been covered;
- Registration was challenging as the number of beneficiaries was erratic as the people from host communities flocked to the camps for registrations and distributions.

#### Lessons Learned

- The use of financial institutions is a good practice for cash transfer as it helps to transfer the risk to the other party hence allowing the project staff to concentrate on other project operational arrangements. Also, the use of cash in envelopes is one of the best options in the delivery of cash transfers after emergency. This was evidenced by having all beneficiaries receiving their cash in each distribution as opposed to some victims supported by other organizations where mobile phones were used as some beneficiaries were left without receiving cash due to varying reasons related to the use of mobile phones.
- Capacitating women's group in writing their business proposals for the IGA support give them the opportunity to discuss and come up with the actual business they want to undertake that will give them profit and enhance sustainability



### Health

**People reached: 6280**

Male: 3077

Female: 3203

**Outcome 1: The immediate risks to the health of affected populations are reduced.**

Indicators:	Target	Actual
# of people reached by NS with services to reduce relevant health risk factors	6,000	6,280
<b>Output 1.1: Community-based disease prevention and health promotion is provided to the target population</b>		
# of people reached with community-based disease prevention and health promotion programming	6,000	6,280
<b>Output 1.2: Psychosocial support provided to the target population</b>		
Indicators:	Target	Actual
# of people reached by psychosocial support	6,000	6,208
Narrative description of achievements		

**Outcome 1: The immediate risks to the health of affected populations are reduced.**

### **Output 1.1: Community-based disease prevention and health promotion is provided to the target population**

- **CBHFA Training:** A total number of Twenty volunteers received training on Community Based Health and First Aid (CBHFA). The training covered topics around, The Red Cross, Red Crescent Movement, Community Based Health and First Aid (CBHFA) in Action, Community mobilization, Communicating and building relationships, Organizing Communities, Assessment-based action in my community, Performing the community assessment: learning by doing, and Reporting on Community Based Health and First Aid (CBHFA) activities within the community. The Operation used the Community Based Health First Aid (CBHFA) approach to increase health promotion. Volunteers were working with their communities to promote and enhance health education and behaviour change through messages on disease prevention and control related to poor personal or environmental hygiene or lack of appropriate shelters.
- **First-Aid Kits:** Procurement of 250 First Aid Kits was done and these were distributed to affected communities for first aid support during an emergency. First aid kits were also pre-positioned at the SLRCS 13 branches in the country to be used by SLRCS volunteers to respond to emergencies
- **Health Promotion:** House-to-house visits by volunteers and health promotion activities on priority diseases were carried out. The house to house visits done by the volunteers enhanced communities' responses in detecting diseases early and thus reporting them to the local authorities including health facilities.
- Oral Rehydration Salts (ORS) have been Procured and pre-positioned at the respective communities

### **Output 1.2: Psychosocial support provided to the target population**

- **Psychosocial Support Training:** About 30 new community-based volunteers were trained on PSS. The activity supported the strengthening of volunteers in skills and knowledge of PSS to provide psychological first aid to individuals, and communities affected by disasters and other crises. The psychosocial well-being and resilience of individuals, families, and communities affected by disasters, and other crises were improved through the PFA trainings and counselling sessions. Targeted recipients included affected families, communities that are prone to disasters or epidemics, vulnerable children in- and out-of-schools. A five (5) day ToT for 20 volunteers was conducted on psychosocial support in emergencies. These volunteers were to cascade, and replicate knowledge gained to selected volunteers on stress management skills
- **Community Dialogue:** Ten sessional community healing dialogues for seven communities were carried out. The activity (Community healing Dialogue) was conducted to bring together most traumatized community members who were mostly hit by the mudslide disaster. Victims were given the chance to express their emotions on how they feel since they lost their loved ones as a result of the disaster. PSS was provided to them to continue their normal mode of behaviour and interaction with other people in the absence of their past relatives. A total number of 25 PSS volunteers were deployed and provided Psychological First Aid, one to one and group PSS talks with survivors and other distressed persons in affected communities.
- **PSS in Schools:** Ten schools were identified, and 40 teachers provided with PSS training focusing on PFA. The activity was conducted to capacitate the teachers and enable them to improve the well-being of affected children in their schools within the flood/mudslide communities and to increase their knowledge on physiological First Aid (PFA) and management skills to provide PFA as and when necessary.
- **Recreational Materials for Schools:** Recreational materials were distributed to fourteen schools in order to improve the well-being of the affected children in the selected schools and to reset their mind for them to

bounce back to normalcy since some of these survivors had been experiencing significant depression and anxiety, playing with those materials helped them forget about their stressful situation. Among the items distribute were; Footballs, (FIFA standard size), Volleyballs, Volleyball Vest, Football Vest, Hand Tennis Ball, Rolls of Skipping rope, Boxes of Drawing Books, Boxes of Pencils, Cartons of Crayons, Boxes of Pens, First Aid Kits among others.

- **Psycho-education and stress management:** The Training was conducted for seventy 70 pupils (35 Boys and 35 Girls 35 pupils). This was preceded by the training of 14 teachers (9 male / 5 female) that served as focal teachers. This activity was conducted to improve children’s well-being in and out of school. The psycho-education and stress management training are some of the many designed activities to help children to recover from their stressful situation and bounce back to normalcy. According to some of the teachers who were interviewed during monitoring visits, the intervention of Psychosocial support on psycho-education and Stress management has improved performance of children greatly.

#### Challenges

- Though there were PSS activities in schools and community, but provision to conduct Skill Session for parent in dealing with Stress amongst their children for positive parenting and life choices at home was not made part of the operation. This activity would have contributed in reducing trauma in children at home especially when service is provided by their parents.

#### Lessons Learned

- Timely provision of psychosocial support to affected victims after an emergency will reduce stress and provide strong coping mechanism which will help them bounce back to normalcy.
- Supporting schools in affected communities with recreational materials after an emergency provide children the platform to play with their peers, this will reduce their stress and increase their level of concentration in class.



## Water, sanitation and hygiene

**People reached: 10,000**

Male: 4,900

Female: 5,100

**Outcome: Immediate reduction in risk of waterborne and water related diseases in targeted communities.**

**Output 1.1: Continuous assessment of water, sanitation, and hygiene situation is carried out in targeted communities.**

# of people targeted / reached (Continuous assessment of water, sanitation, and hygiene situation is carried out in targeted communities)	6,000	6,000
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**Output1.2. Daily access to safe water which meets Sphere and WHO standards in terms of quantity and quality is provided to target population for Immediate reduction in risk of waterborne and water related diseases in targeted communities.**

Indicators:	Target	Actual
# of people provided with safe water (according to WHO standards)	6,000	10,000
% of target population with access to an improved water source	100	60

**Output 1.3: Adequate sanitation which meets Sphere standards in terms of quantity and quality is provided to target population**

Indicators	Target	Actual
% of constructed sanitation facilities maintained by target population	30	30

# of people with access to an improved sanitation facility	6,000	7,500
<b>Output 1.4: Hygiene promotion activities which meet Sphere standards in terms of the identification and use of hygiene items provided to target population.</b>		
Indicator	Target	Actual
# households reached with key messages to promote personal and community hygiene	1,000	1,000
# of volunteers involved in hygiene promotion activities	40	40
<b>Output 1.5: Hygiene-related goods (NFIs) which meet Sphere standards and training on how to use those goods, are provided to the target population</b>		
Indicator	Target	Actual
# of households provided with a set of essential hygiene items	1,000	1,000
Narrative description of achievements		
<p><b>Output 1.1: Continuous assessment of water, sanitation, and hygiene situation is carried out in targeted communities</b></p> <ul style="list-style-type: none"> <li>• <b>Community assessments:</b> To ensure a coordinated approach in Wash activities, a coordination mechanism was initiated with other WASH actors including the MoWR, MoHS, UNICEF, Freetown WASH Consortium (FWC) made of up OXFAM, Concern international. Assessments were done in targeted communities to identify the existing water points for improvement//rehabilitation and construction of facilities. Prior to the assessment, community focal points were trained on carrying out WASH and DRR rapid needs assessments. This has capacitated the SLRCS volunteer focal points to conduct the assessment within their respective communities. A total number of 40 volunteers were trained on health, water, sanitation and hygiene services in emergencies.</li> </ul> <p><b>Output 1.2: Daily access to safe water which meets Sphere and WHO standards in terms of quantity and quality is provided to target population.</b></p> <ul style="list-style-type: none"> <li>• <b>Household water treatment:</b> The SRLCS Trained 40 Community based volunteers on household water treatment and safe storage (HWTSS). This has built the capacity of the SLRCS volunteers to cascade and support to the affected community to improve household water quality.</li> <li>• <b>Distribution of Aqua tablets:</b> Activities towards the improving the daily access to safe, adequate water of good quality for the target population were carried out. The operation distributed aqua tabs to 800 families to ensure water purification at household level. The Aqua tabs procured were 67 mg, each tablet was sufficient to treat up-to 10 litres of water. An Initial distribution of 108,000 Aqua tablets was done followed by an additional distribution of 75,000 tablets. The SLRCS volunteers were trained on how to use aqua tabs. They went out providing training on the use of the tablets and conducted house to house monitoring on the use of the tablets during the hygiene promotion activities in the community. The provision of Aqua tabs contributed towards the improving the daily access to safe and ensured adequate water of good quality for the target population.</li> <li>• <b>Water Quality Testing:</b> About 20 community-based volunteers were trained on water quality testing using pool testers. This has built the capacity of the SLRCS to implement water quality monitoring for safe water access by affected/target communities. Water testers were also procured and distributed to local authorities for continued monitoring of water sources.</li> </ul>		

- **Drilling of water points and Hand Dug wells:** The operation supported the drilling and installation of 9 boreholes in the affected communities. The drilling and development of the initial 6 boreholes included the construction of the 10 meters high water towers with 20,000 litres PE water tanks (each tank is 5,000 litres). These new were drilled in Juba, Kamayama and Kaningo communities with each community receiving two



boreholes. Three more boreholes equipped with bush pumps were drilled in Regent community. Due to the topography of Culvert and Dwazark communities which did not allow the drilling of boreholes, a total number of 4 hand dug wells were constructed to ensure provision of water in the targeted communities. The provision of safe water sources will ensure the reduction of water borne disease and ensure sustainable access to water to the communities.

- **Community based management:** Eleven (11) community volunteers were trained in pump operation system to ensure constant monitoring and maintenance of the water

points. To support their work, an operation and Maintenance manual was developed; as a basic tool to guide operators on basic maintenance of the waterpoints. Community pump operators were advised to follow information presented in the manual for sustainability of the system and smooth operation.

- **Rainwater Harvesting:** In an effort to make use of the rainwater and to ensure access to water at household level, a total number of 400 water tanks of 200 litres were procured to support households in 3 communities i.e. Culvert, Regent and Dwazark. The Operation also supported with the installation of the tanks at household level in preparation of the rain season. A total number of 200 families benefited in Culvert whilst 100 benefitted in both Regent and Dwazark city districts.

**Output 1.3: Adequate sanitation which meets Sphere standards in terms of quantity and quality is provided to target population.**

- **Clearing of Storm Drainage systems:** Through the EA, the SLRCS contributed towards creating a safer environment especially focusing on Culvert Community. The SLRCS supported the affected communities



through the distribution of **one hundred clean up kits (100 kits)** to support the community to carry out household cluster level clean-up activities intended to improve the storm water drainage systems within the community. Secondly, **an excavator** was used to dredge the bed of the main storm water stream, clearing the accumulated silt, and/ debris, garbage, washed by the floods from the hills to this drainage

channel.

Community members in Culvert were also engaged to improve gutters and drainage channels within the community clusters through Cash for work arrangements. A total number of 50 volunteers were engaged in the cash for work activities, working for 5 days a week. The volunteers received a stipend of 30,000 SLL per day. This activity helped to improve environmental sanitation conditions in Culvert community by mitigating potential flooding and reducing incidents of water borne diseases from the leachate emanating from the nearby solid waste dump site.

- **Provision of Institutional Latrines:** The Revised Emergency Plan of Action supported the construction of a



total number of thirty (30) institutional latrines were in the targeted communities. Of the latrines constructed 28 were at schools whilst 1 was at a community sports centre and another one at community health post. The latrines were all equipped with a rain harvesting system as well as a handwashing facility to make use of the rainwater as well as to promote the culture of hand washing.

#### **Output 1.4: Hygiene promotion activities which meet Sphere standards in terms of the identification and use of hygiene items provided to target population.**

- **Hygiene promotion:** Eight hundred Information Education and Communication (IEC) materials on hygiene promotion for the mass awareness campaign were produced in collaboration with the Ministry of Health. The SLRCS communications team in coordination with the Community Engagement and Accountability (CEA) Team consulted with community to get their views on the areas that required more education on and developed the IEC materials. The materials were used to support awareness activities and visibility for the project. Provision of education by the volunteers has helped to reach out not only to affected families but also even host communities. The education has helped in the improvement of personal hygiene and in turn contributing to the reduced incidences of diarrhoeal diseases
- **Hygiene Promotion Training:** A total number of 40 SLRCS volunteers were trained in hygiene promotion in collaboration with Ministry of Health and sanitation. The volunteers conducted house to house visits, educating the community on good hygiene practice and the use of the distributed hygiene materials. The use of volunteers was key as they could communicate in local languages and were able to reach out to more people easily through community meetings and the house to house activities within their localities.
- **PHAST Training:** A Refresher training on PHAST for volunteers was conducted during the operation in June 2018. This was a 10 days TOT training workshop conducted for 20 facilitators from 14 districts.

#### **Output 1.5: Hygiene-related goods (NFIs) which meet Sphere standards and training on how to use those goods is provided to the target population**

- **Hygiene kits:** A total number of 800 mudslide affected families were issued with Hygiene Kits (1 per family) and jerrycans to support early recovery efforts. Each hygiene kit consisted of soap, shaving stick, sanitary

pads, tooth brush and the tooth paste. These were important items which helped the families maintain personal hygiene and in turn contributing to the overall goal of the operation.

#### Challenges

- Government policy does not permit construction of permanent structures in one of the affected communities (Culvert), this deprived them benefiting from the construction of boreholes and institutional latrines which was meant to increase access to safe drinking water and improve sanitation respectively.
- Some communities' members were reluctant to use the aqua tabs. Despite the volunteers' demonstration on how to use them, some beneficiaries feared it might affect their health. SLRCS volunteers continued with their intense information dissemination to explain the community member who have doubts how the aqua tabs works.

#### Lessons Learned

- Having existing community-based volunteers trained on hygiene promotion is critical for disease prevention during emergencies as they could be mobilised right away to do community awareness and improving sanitation in affected communities.
- In the mudslide communities there is a need for a long-term solution on latrines. Only a minority of community members are using them, but the leaders want to be assisted to construct more institutional latrines to improve sanitation situation.

## Strengthen National Society

**S1.1: National Society capacity building and organizational development objectives are facilitated to ensure that National Societies have the necessary legal, ethical and financial foundations, systems and structures, competences and capacities to plan and perform**

**Output S1.1.4: National Societies have effective and motivated volunteers who are protected**

Indicators:	Target	Actual
# of insured volunteers	100	0
# of trained NDRT members	20	24

**Output S1.1.7: NS capacity to support community-based disaster risk reduction, response and preparedness is strengthened**

Indicators:	Target	Actual
#. of NS branches provided with technical support and equipment in disaster preparedness	13	13

Narrative description of achievements

**S1.1: National Society capacity building and organizational development objectives are facilitated to ensure that National Societies have the necessary legal, ethical and financial foundations, systems and structures, competences and capacities to plan and perform**

**Output S1.1.4: National Societies have effective and motivated volunteers who are protected**

- **National Disaster Response Team:** SLRCS staff and volunteers were trained in National Disaster Response. The training which included senior management staff was conducted from 17th to 22nd November 2018 in Freetown attended by twenty-four (24) participants. The training was conducted with support from the Caribbean Disaster Risk Management Reference Centre (CADRIM) with the aim to strengthen the NS

disaster preparedness and response capacity. Those trained have now become members of the DM technical working group for the National Society.
Challenges
Funding limitations as well as change in SLRCS leadership and management in 2018 slowed down and for a certain period made limitations on the capacity enhancement initiatives.
Lessons Learned
SLRCS is open to capacity development action on a wide variety of areas. Taking into consideration the new structure of the SLRCS and turnover of staff – future intensified operational capacity building is required in the field of DM, logistics and procurement, financial systems and processes.

<b>International Disaster Response</b>		
<b>Outcome S2.1: Effective and coordinated international disaster response is ensured</b>		
<b>Output S2.1.1: Effective response preparedness and NS surge capacity mechanism is maintained</b>		
<b>Indicators:</b>	<b>Target</b>	<b>Actual</b>
ratio of people reached by the IFRC disaster response operations to the people affected by these emergencies	100%	51%
<b>Output S3.1.2: IFRC produces high-quality research and evaluation that informs advocacy, resource mobilization and programming</b>		
<b>Indicators</b>	<b>Target</b>	<b>Actual</b>
% of evaluation which are followed up by a management response	1	0
<p>Narrative description of achievements</p> <p>A final evaluation which aim at reviewing the effectiveness of the EA operations in meeting the planned objectives and outputs in the EPoA and expenditure against the agreed budget was conducted at the end of the operation. The evaluation aimed at providing a means of identifying key results achieved/successes, lessons learnt from the operation in order to inform recommendations for future EA operations, specifically to the challenges and major setbacks in an emergency operation; and make recommendations for sustainability and ownership by the National Society. The method use for the evaluation include desk review and review of Secondary Data, key Informants Interview, focus Group Discussion, direct Observation and development of a case study. Some of the recommendations include;</p> <ul style="list-style-type: none"> <li>• Water, Hygiene, Sanitation (WASH) Strategy: The SLRCS with support from IFRC should develop a national water programme strategy and guidelines with a clear linkage to enhancing community resilience.</li> <li>• Boreholes construction: Develop clear policies and guidelines regarding selection of boreholes sites, community engagement and consultation in selection of sites. Increase investment in rehabilitation of existing community water facilities to ensure sustainability of the service. Increase community awareness on water consumption versus the cost element involved in maintaining the water supply system.</li> <li>• Long term investment in basic infrastructure in the informal settlements that increase access to safe drinking water, improved sanitation, new livelihoods, education, roads, and health care that will make the sustainable difference and improve the lives of the vulnerable communities. This commitment is beyond the Red Cross; however, the Red Cross should use its robust humanitarian diplomacy to lobby the Government and advocate on behalf of the vulnerable communities to do so.</li> <li>• Funding: The SLRCS with support from IFRC and the participating national societies (PNS) in the country should develop a robust multi-year funding plan focused on enhancing the resilience of the vulnerable</li> </ul>		

communities in the informal settlements and strengthening the capacity of SLRCS in disaster response and disaster risk reduction.

Detailed evaluation report is annex to this report.

In early stages of the Operation (end of 2017) the SLRCS had gone through challenging times through the resignation of the leadership and management. Under IFRC initiative a transitional manager was employed to assist the SLRCS in those critical times. In a leadership and management vacuum the operation definitely suffered due attention since the Partnership modality of the implementation meant to be going through the SLRCS operational, programme and DM structures delivering services and assistance. In those particular circumstances IFRC was forced to take an operational stand and operate directly, where possible through the SLRCS structures.

Due to a number of direct and indirect factors affecting the operations at large, timely funds utilisation of pledged funding, forced re-scheduling of action plan due to external and internal factors, government restrictions on shelter component resulted in a major revision of the initially planned Emergency Plan of Action and others, in some aspects the Operations management was unable to deliver timely results on some areas and against some donor pledges. Consequently, IFRC had to return partial and complete pledge funding to ECHO and the Netherlands RC.

#### Challenges

As above: external and internal factors effecting the Operation.

#### Lessons Learned

Force Majeure situations may affect any other operations in the future as it has affected the Mudslides Operations. In a future Operation it is necessary to enhance Government liaison and coordination, while designing the Emergency Plan of Action so it is aligned to national planning but with humanitarian imperative as the highest priority.

Maintain continuous operations management at site and full thematic capacities throughout the Emergency Appeal. Staff rotations and recruitment processes need to be planned in advance and ensure to provide overlap and proper handover options.

In the event of any major review of the EPoA maintain relevant and appropriate donor information and communication and properly co-ordinate any funding extension requests.

## D. THE BUDGET

As has been described above in full alignment with the cumulative factors affecting this operation from its early stages onwards, some of the contributing respected donors' requirements could not be satisfied and only partial satisfaction could be achieved by Parties.

Brief review of the Emergency Appeal as part of action versus budget reflection:

1. Affected by the Integrity crisis of the SLRCS in 2017, complete change of the leadership and management and associated dissolution of the Governing Board forced IFRC to take an Operational stand and become operational in the Sierra Leone context. The above circumstances generated change of the first generation of IFRC staff in-country where a new IFRC management could re-initiate and continue speeding up the implementation from only January-March 2018 with the deployment of the second generation of IFRC thematic delegates on operations (Ops Manager, DRR and WASH Delegates). There were thus two generations of operations management and thematic delegate staff which occasioned transitional gaps of lost time and a takeover with nonsufficient handover of thematic areas on an Emergency Appeal which had a lifespan of 18 months.
2. Government restriction of shelter component to all INGOs active at the time of Mudslides response resulted in major revision the scope of the Emergency Appeal and its Operational Plan of Action halting and stopping the entire implementation of the Shelter component and a necessary revision of activities all of which took a certain time.
3. **Presidential elections** in two rounds during March-April 2018 resulted in lowering implementation speeds and introduced access constraints on security grounds.
4. Major delays in thematic areas were experienced, which affected the operational strategy and slowed the pace of implementation. IFRC had to return EUR 95,000 to ECHO and EUR 500,000 to the Netherlands Red Cross. This unprecedented situation was due to initial planning that had to be changed during the implementation period of this operation. The IFRC, as well as the National Society, considers this situation as a source of lessons learned and will contribute to future corrective actions that involve improved donor relations, clearer financial monitoring, as well as more clear communication to the operational team regarding donor requirements.

Most of the discrepancies between the coverage numbers and the final completion figures are a consequence of funds returned to the donors. The plan of action had to be revised to reflect the available funding for each set of prioritised activities within short time span. To some extent, the variance also has occurred due to changing local market price against the forecasted budget.

**Key financial aspects of the Emergency Appeal:**

- The budgeted funding request of the Emergency Appeal was **CHF 4,631,088**
- Actual, raised funding: **CHF 3,197,029**
- Variance: **CHF 1,434,059** less income than requested by the Emergency Appeal
- Appeal coverage: **69.03%** against the budgeted funding request.
- Implementation rate: against the actual / raised funding: **99.93%**

<b>Thematic Areas</b>	<b>Original Budget of the EA (CHF)</b>	<b>Expenditure (CHF)</b>	<b>Funding Gap (CHF)</b>	<b>Brief comment on significant variances</b>
<b>DRR</b>	310,554	130,065		Funds were no longer available to support some community preparedness activities including training of first Aid action team at community level, and construction of flood control gabions among others. Some of the DRR activities were transferred to the Sierra Leone COP 2019.
<b>Shelter</b>	1,156	1,156	0	Government restricted area – re-scheduled EoPA of the EA.
<b>Livelihood and Basic need</b>	549,950	348,749		Much funding was not available to support the initial number planned number of women's groups to strengthen their livelihood. The number of women groups to have benefited from the livelihood support were reduced to match available fund.
<b>Health</b>	256,679	54,882		The loss of funds to donors could not support some key hygiene promotion activities including Medical and equipment supplies for health facilities of affected communities.
<b>WASH, sanitation and hygiene</b>	1,148,064	726,231		The return of funds could not support the entire response plan. Capacity building action of the national society on health aspects in WASH section could not be completed.
<b>Strengthen National Societies</b>	303,228	593,622		NS in transition, change of leadership, management and associated senior and key function holders within the NS HQ, required more focused expenditures on support side.
<b>Effective international disaster management</b>	556,268	404,172		After funds were returned to the above-mentioned donors, the operation was unable to support NS resource and partnership development capacity.
<b>Influence others as leading strategic partners</b>	1,500,318	837,403		As all along the thematic areas certain areas and activates could be covered as per decisions taken, other could not.

<b>Ensure a strong IFRC</b>	5,351	98,702		IFRC as country office had to take over the majority of implementation and carry on activities. IFRC in-country structures had to be covered and adequately maintained (see challenge description).
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## Annex:

Baseline study



Mudslide baseline survey report.pdf

Mudslide/ Flood Final evaluation



SL Mudslide Floods Final Evalua

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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 \(NGOs\) 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.

[www.ifrc.org](http://www.ifrc.org)

**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.

Promote social inclusion and a culture of non-violence and peace.

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