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## Emergency Plan of Action (EPoA)

### Benin: Floods

 International Federation  
of Red Cross and Red Crescent Societies

<b>DREF Operation n°</b>	<b>MDRBJ016</b>	<b>Glide n°:</b>	<b><a href="#">FL-2021-000145-BEN</a></b>
<b>For DREF; Date of issue:</b>	<b>25 October 2021</b>	<b>Expected timeframe:</b>	<b>4 months</b>
<b>Operation start date:</b>	<b>22 October 2021</b>	<b>Expected end date:</b>	<b>28 February 2022</b>
<b>Category allocated to the of the disaster or crisis: Yellow</b>			
<b>DREF allocated: CHF 331,836</b>			
<b>Total number of people affected:</b>	<b>35,850 person (6,000 households)</b>	<b>Number of people to be assisted:</b>	<b>9,000 person (1,500 households)</b>
<b>Municipalities affected:</b>	<b>38</b>	<b>Municipalities targeted:</b>	<b>10</b>
<b>Host NS(y presence (n° of volunteers, staff, branches):</b>			
<ul style="list-style-type: none"> <li>- <b>Local and departmental committee level:</b> 5 focal points, 20 local supervisors and 200 volunteers.</li> <li>- <b>Staff:</b> 1 Disaster Manager, 1 Health, 1 Finance, 1 PMER, 1 logistician, 1 communication officer, 1 Shelter, 1 Livelihoods, 1 Gender specialist, 1 Wash specialist, and 1 CEA.</li> </ul>			
<b>Red Cross/Red Crescent Movement partners actively involved in the operation:</b> Netherlands Red Cross			
<b>Other partner organizations actively involved in the operation:</b> National Agency for Civil Protection, the municipalities and health centres			

## A. Situation analysis

### Description of the disaster

Benin has suffered from heavy rains in the past weeks, with 38 communes out of 77 suffering from rising waters with at least 9 flood-related deaths and dozens more due to water-related accidents. Numerous socio-community infrastructures, including above fifty elementary school and a dozen colleges, were affected. In addition, several houses were destroyed or damaged, as well as crossing structures. Significant agricultural and livestock losses were recorded.

Following the intensification of heavy rains over the past two weeks, and the release of water at the Nagbeto dam, municipalities located on the coasts of the Mono, Ouémé and Niger rivers in Benin experienced a peak in the overflow of the river by mid-September. This situation led to widespread flooding in the Municipalities of Karimama, Malanville, Zangnanado, Zogbodomey, Ouinhi, Aguégues, Dangbo, Athiémé, Grand-Popo, and Zè, with several villages currently under water. This has placed these areas on red alert. It should also be noted that, according to Benin Meteorology, heavy rains will continue until the end of November<sup>1</sup> 2021, and water is likely to be released from the Nagbeto dam in the coming days, which could worsen the situation.



Picture of floods in Aguégues ©Benin RC

<sup>1</sup> [http://meteobenin.bj/wp-content/uploads/2021/05/BULLETIN%20DU%20PRESASS\\_2021.pdf](http://meteobenin.bj/wp-content/uploads/2021/05/BULLETIN%20DU%20PRESASS_2021.pdf)



*Affected families relocated in a classroom ©Benin RC*

A session of the National Platform for Disaster Risk Reduction was urgently convened by the Minister of Interior, Chairman of the Platform under the aegis of the Minister of State in charge of Development and Coordination of Government Action to review the situation. Following this session, a set of actionable recommendations were agreed with partners to reduce the exposure to floods and assist the affected families. These recommendations were officially submitted to Red Cross of Benin (RCB) on 17 September 2021. Since then, several municipalities have requested the intervention of Benin Red Cross, including the municipality of Zangnanado (one of the most affected localities), which made a request on 20 September. Municipalities called on the National Society (NS) to support with the relocation of the affected families to safe areas and provide immediate relief with through a range of services including shelter, WASH and basic needs, and to ensure diseases are prevented. The NS has completed a rapid assessment, through the local committees and started

providing support by relocating the affected people to safe areas.

### **Summary of the current response**

#### **Overview of Operating NS Response Action**

As an auxiliary to the public authorities in the humanitarian field and a member of various platforms (national, departmental, and local) for disaster risk reduction and adaptation to climate change, the RCB quickly positioned itself alongside the authorities at national, municipal and local levels to support assessments, overall coordination and provide assistance to the affected families.

The operation will be implemented in collaboration with local authorities with aim to transfer ownership and competences. The authorities will be involved in all phases of the operation for sustainability of achievements, and this will reinforce the auxiliary role of the NS with the government of Benin. A rapid assessment was jointly organized by the RCB local committees in the affected municipalities. Some 50 volunteers from the 10 local committees affected have been organized to conduct awareness sessions on hygiene promotion and sanitation and to assist the authorities in the preparing the relocation sites for the affected. Community meetings are organized at various territorial levels where the NS is actively represented.

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

RCB receives institutional and technical support from the IFRC Secretariat, represented in the region through its Country Cluster Delegation based in Abuja. In addition, as part of the COVID-19 Emergency Appeal, the NS has received funding and benefited from a series of training sessions on public health, community engagement and information management with support of the IFRC technical teams, which will also be replicated in this response. These trainings allowed for a relevant and efficient management of the COVID19 operation in communities. Learnings from the COVID-19 operation have been used for the design of this response, particularly in respect to Public Health promotion and prevention as well as risk communication and community engagement.

The Netherlands Red Cross is informed and is closely following the situation on the ground. The Partner NS has mentioned availability to support RCB on this operation, if necessary, and in complementarity to this operation.

#### **Overview of other actors' actions in country**

A government delegation made up of the Ministers of the Interior and Security, Health, and Social Affairs was deployed to provide psychosocial and material support to the affected and to donate food and essential household items. The National Agency for Civil Protection (ANPC) in collaboration with municipal authorities have identified sites for the relocation of affected people and are actively organizing to this effect. Several other local humanitarian organizations are mobilizing to assist the affected, however, coordination arrangements in the field are yet to be defined, despite a virtual platform, in which RCB participates, which was set up. Each actor on the platform presents his actions to avoid duplication, and all these are coordinated by the National Agency for Civil Protection.

For the moment, all actors are mobilizing for a response with their partners which include Plan International, Caritas Benin and others but only the Humanitarian Organization for Islamic Mutual Aid Benin has provided food kits of 60kg to 260 households in one locality.

## Needs analysis, targeting, scenario planning and risk assessment

### Needs analysis

The rapid assessment of the situation conducted by the National Agency for Civil Protection (ANPC) show that, despite the awareness messages and early warning measures in place, damages to infrastructure continues to be recorded. A total of 38 municipalities have been identified to be affected with an estimated number 60,622 people affected in different ways: loss of shelter, household items, agricultural livelihoods, access to health, and displacements. Out of the 38, 10 municipalities are being prioritized for the response, considering the level of destruction, but also the necessity to relocate population to safer areas. In these municipalities, people have suffered severe destruction of their homes and livelihoods. Water points are completely flooded, jeopardizing the availability of drinking water. The populations are forced to resort to water from the river, which in the meantime has flooded latrines and defecation areas. Health centres, schools and access roads are flooded and remain inaccessible. This information is confirmed by the monitoring mission of the Department of Relief and Disasters. Most of these localities have experienced cholera epidemics in the past, related with flooding events, therefore, it will be necessary to scale-up hygiene promotion in the communities.

The RCB will apply lessons from 2020, where floods affected the health of the populations of these municipalities (Grand-Popo, Athiémé, Aguégués, Adjohoun, Dangbo, Zangnanado, Malanville, and Karimama) in terms of access to health infrastructure, poor maternal and child health, high prevalence of malaria and other communicable diseases, and a low rate of notification of diseases with epidemic potential (EPM). Hence, the health promotion services will be decentralized to affected locations and relocation sites, and occupation of areas at high risk of flooding will be controlled, to avoid epidemics.

A detailed needs assessment is required in the coming weeks, which will provide further information on population basic needs, health risks, gender, disability and other diversity related factors that may hinder access to assistance. For the assessment, RCB will use the CEA toolbox, collecting qualitative and quantitative information, and the different data will also be disaggregated considering the Protection, Gender and Inclusion (PGI) minimum standards. The evaluation form will also be shared with IFRC colleagues for amendment before sending the volunteers to the field with the kobo tool. A market assessment will be completed in the first weeks to assess the functionality of the markets in the affected area.

### Targeting

This operation will target 9,000 people or 1,500 households most affected in the ten municipalities: Karimama, Malanville, Zangnanado, Zogbodomey, Ouinhi, Aguégués, Dangbo, Athiémé, Grand-Popo, and Zè. This target was identified jointly with the National Agency for Civil Protection, members of the risk reduction and climate change adaptation platform, local elected officials and RCB volunteers during the rapid assessment with an average of six people per household (1,500HHs). While people relocated to emergency sites will receive a package of Health, WASH and Shelter services, the selection criteria will consider those most at risk, based on the vulnerability analysis, prioritising people with specific needs, namely: the elderly, pregnant women, people living with disability, and people who are ill while ensuring to record those who have become ill as a result of the flooding.

For the selection of the most vulnerable beneficiaries, a committee will be set up with the involvement of community members through their representatives, community, religious and state leaders. This committee will respect the criteria defined in transparency and will be monitored by RCB. A counter-expertise will be conducted to validate the documents from the committees. The selection of beneficiaries will be verified by a broad representation of the community.

### Estimated disaggregated data for population targeted.

Category	Estimated % of target group	Female	Male	TOTAL
Young Children (under 5 years)	3%	140	130	270
Children (5-17years)	39%	1,690	1640	3,330
Adults (18-49 years)	52%	2,569	2,291	4,860
Elderly (>50 years)	6%	281	259	540
Total	100%	4,680	4,320	9,000

## Scenario planning

Scenario	Humanitarian consequence	Potential Response
<b>Scenario 1</b> The torrential rains stop, and no water is released from the Nagbéto dam, which leads to considerable decrease in the water level of the Mono, Ouémé and Niger rivers. This would lead to slow reduction of the phenomenon and limit the already colossal damages on the ground.	No further damages are recorded  No additional persons affected.	This operation will be sufficient to address the current needs, with the provision of health, WASH, Shelter and LLH services, and with a maximum response time of three months.  Awareness and community surveillance activities will be maintained until the end of the season.
<b>Scenario 2</b> The heavy rains continue until November with no release of water at the Nagbéto dam and a stabilization of the water level in the three rivers (Mono, Ouémé and Niger).	Additional damages are recorded.  The number of affected persons increases.  WASH situation deteriorates, further exposing the affected to water-related diseases.	Alongside the response, the NS will continue to improve the preparedness and disaster risk reduction measures put in place for local committees and communities to better cope with a possible release of water that may occur at any time and cause the river to overflow. Awareness and community surveillance will be reinforced.
<b>Scenario 3</b> The torrential rains continue until November and force the CEB authorities to release water at the Nagbeto dam	Increase in the number of affected localities and, by extension, the number of affected populations.  Massive displacements are recorded.  Further destruction of infrastructure and livelihoods.  Unsanitary conditions lead to outbreak of cholera.  Heightened risk of death within affected communities due to floods and related effects.	Programmatic review of the operation to update activities, increase the timeframe and possibly request a second allocation or launch an Emergency Appeal.  Awareness raising, community monitoring, relocation and community livelihoods activities will be carried out to address the situation.

## Operation Risk Assessment

The risk assessment for this operation presents the following possible cases:

- Inaccessibility of the intervention areas due to flooding of access roads. This would require appropriate means of travel (canoes and/or motorized boats).
- Flooding of the relocation sites due to continuous flooding could jeopardize the implementation of activities, hence RCB will work with agencies to ensure the sites have appropriate drainage systems.
- The proliferation of diseases with epidemic potential, such as cholera. The RCB will invest largely in health promotion and disease prevention.
- The current COVID19 pandemic may also be a risk at operational and community level. According to [Africa CDC](#), Benin has recorded 24,560 cases as of 22 October, with 161 deaths and 21,993 recoveries. However, a spike in cases was registered in August and September (almost 50% of the cases recorded). Population movement and concentration in settlements may increase the spread of the virus. The RCB will provide protective equipment for volunteers and attempt to enforce prevention measures among the settlement population.
- The security situation and militants operating in bordering areas of Burkina Faso, Niger and Nigeria, may interfere in the national security and overall development of the operation. The RCB will constantly update the teams on security information and applicable regulations. Most volunteers in these areas are trained on Safer Access, safety and security. RCB has a good relationship with the security agents and during implementation, the NS shall retrain its volunteers as required.

## B. Operational strategy<sup>2</sup>

### Overall Operational objective:

To provide relief to assist 9,000 people (approximately 1,500 households) affected by the floods through a holistic package of emergency shelter construction, the provision of community health promotion and prevention activities, safe water, sanitation, and hygiene services, as well as food support. Community Engagement and Accountability (CEA) will serve as a holistic pillar to all sectors for an appropriate and community sensitive response. Two hundred (200) volunteers will be involved in the response (20 per area). The requested operational timeframe is four (4) months to allow for optimal implementation and completion of activities.

### Proposed Strategy

#### In-depth assessment

A detailed needs assessment will be conducted with the participation of the affected population. Surveys and focus group discussions with different groups of people, including women, girls, men, boys and people with disabilities will be conducted to verify information already available and provide updated information on the actions of other stakeholders. This will equally consider the risks that may hinder the smooth running of the operation and the capacities of the target populations, while taking into account the specific needs and risks for people of different ages, genders and disabilities. Two hundred (200) volunteers will be trained on conducting rapid surveys using mobile tablets.

#### Shelter (Targeting: 9,000 people or 1,500 HHs)

Most houses in the affected areas were built with clay and branches, which led to total or severe destruction of dwellings, and consequently the displacement of the affected populations. Therefore, it will be urgent to support the population in the construction of emergency shelters at the relocation sites. Emergency shelters will be built using tarpaulins, wood poles and tools, that shall be made available to 1,500 families. Fifty (50) volunteers will be trained on the construction of emergency shelters, following IFRC emergency shelter guidelines, and will support the beneficiaries in this activity. These volunteers will also receive training on improved water-resistant earthen construction techniques, which will enable them to conduct awareness sessions for the affected communities after the water has receded.

#### Food / Livelihoods (Targeting: 6,000 people or 1,000 HHs)

The main providers in most of the affected families are farmers and fishermen, who have lost their production and livelihoods with the rise of water levels. Recovering their livelihoods will be a medium-term endeavour, but in the meantime, families will require food assistance as a life-line intervention for most. The NS has calculated a food basket for a family of 6 for 2 months, based on the minimum required energy intake. Food assistance was privileged over cash due to the urgency in getting this support to the population, and the lack of a financial service provider (FSP) contract in force. A total of 1,000 households will benefit from food assistance. A distribution training will be organized for one hundred (100) volunteers to support the implementation of this activity.

#### Health (Targeting: 9,000 people or 1,500 HHs)

Most health centres in the affected areas are inaccessible, limiting the population's access to health care. It will be necessary to provide primary health care through the establishment of Community Based Health and First Aid (CBHFA) activities and training volunteer teams in CBHFA and ECV, for health prevention and promotion at the relocation sites; to reinforce preventive measures through awareness sessions, educational talks, and health education on the different health risks. To mitigate the risks of malaria cases among the affected population, mosquito nets will be procured and distributed to the targeted 1500HHs. Each household will receive 2 mosquito nets. These different teams will contribute to the prevention and early warning of vector-borne diseases resulting from the disaster. As part of the health activities, the NS will also be involved in the deworming for children of 6 months to 5 years of age, which could affect severely their health and nutritional status.

Two hundred (200) volunteers will be trained (or refreshed) in the implementation of health and sexual and gender-based violence (SGBV), CBHFA and ECV. The trained volunteers will contribute to health surveillance, emergency first aid and referral of patients. They will conduct sensitization sessions on SGBV in the targeted communities and other health issues.

#### Water, hygiene and sanitation - WASH (Targeting: 9,000 people or 1,500 HHs)

The WASH activities to be carried out will cover access to safe drinking water through the distribution of water purification tablets and awareness raising on its use, and other methods for household water treatment (if available) and storage. This will be in addition to construction of latrines in the relocation sites, training of sanitation committees for the maintenance of latrines including the distribution of cleaning materials, and awareness raising for hygiene promotion, alongside the distribution of hygiene kits. Awareness materials (picture boxes, posters, leaflets) will be developed and

<sup>2</sup> The plan should be prepared by the NS, with support from the Secretariat technical departments and support services.

made available to social mobilizers (volunteers). For the implementation of these different activities, seventy (70) volunteers will be trained and equipped on the different themes.

### **Community Engagement and Accountability (CEA)**

Target community participation will be ensured through regular community meetings, organising focus group discussions with women, youths, market associations, traditional/religious leaders, and transport unions, etc. in response activities and feedback will be collected regularly and acted upon. Findings from the needs assessment survey and previous secondary data available will be used to inform on the needs of the affected population and how to engage communities and receive feedback during and after the duration of the operation.

For each activity or operation, a feedback system is set up by the CEA and PMER teams, with suggestion boxes, a complaint number and a community satisfaction survey. With those tools feedbacks (non-sensitive) will be actioned and documented real-time during Red Cross volunteer engagements in the community using the volunteer Q&A guide. Where responses cannot be provided by the Red Cross volunteer or staff, such complaints or concerns will be shared with the relevant authority (actors) and the response will be provided to the community member through their preferred/trusted communication channels through hotlines and community meetings. While sensitive complaints received through the feedback system will be handled with confidentiality and channelled for further expert management, and with the protection of the complainant. The collected feedback will be analysed weekly at the HQ level, while a monthly report will be made available to all actors and technical leads to discuss updates and recommendations from the feedback findings to improve on the program/operations.

Planning and responding to the affected communities will also involve considerations on cultural specificities and community structures, gender and diversity mainstreaming, and promotion of the CEA minimum actions. Red Cross volunteers will carry out a door-to-door visit to listen, respond, and document people's concerns, on the other hand, adhering to all COVID-19 protocols. Engaging with communities will also involve informing them of their right to complain and provide feedback during the operation. A feedback and complaint management system will be established in collaboration with the communities and will be widely publicized to ensure that everyone is aware of the system and is comfortable using it. The feedback and complaint system will be critical in identifying risk behaviours', such as unsafe hygiene practices, non-use of nets, and integrity issues in target communities during distribution activities. This ongoing feedback will inform the operation for a better response.

An online refresher training will be organised for all HQ staff and, face-to-face training for 50 selected Red Cross volunteers on the concept of CEA including the code of conduct, and communication skills to enable them to implement a participatory approach.

A monthly review meeting will be held at the district level to inform progress, challenges, and recommendations within the operation. The main themes, analysis of feedbacks and recommendations will be validated at the HQ level and further shared with all relevant stakeholders based on the findings from feedback.

### **Coordination**

Supervision of the operation will be done at all levels of implementation: volunteer training, public awareness, distribution, and case management. The implementation of the activities will be supervised by the Secretary General in collaboration with the technical staff and the executive. The NS's Disaster Relief Directorate and the Federation's focal point will coordinate the implementation of the operation in collaboration with the Ministry of Interior and Public Security and stakeholders. Regular reports on implementation will be produced and transmitted. At national level, a coordination mechanism that will regularly bring together the various technical managers and the Secretary General will be set up to monitor the implementation and define the main orientations of the operation. The team in charge of the operation will participate in all coordination and technical meetings at all levels of the organization.

Activities will be carried out by the local committees under the supervision of the departmental committees and the direction of the general secretariat. Joint supervision missions will be carried out by the technical teams and the NS headquarters to evaluate the progress of implementation and make adjustments if necessary.

### **Post Distribution Monitoring**

A post distribution monitoring (PDM) will be conducted to assess the effectiveness of the shelter and food distribution, its desirability as an intervention approach and to document lessons for future operations. The PDM will be conducted by the NS with technical support from the IFRC Cluster Delegation PMER and operations teams. A PDM report will be produced and shared.

## Operational Support Services

### Human resources

This operation will involve the following human resources:

- Local and departmental committee level: 5 focal points, 20 local supervisors and 200 volunteers.
- Staff: 1 Disaster Manager, 1 Health, 1 Finance, 1 PMER
- Other actors
- 1 logistician, 1 communication officer, 1 Shelter,
- 1 Livelihoods, 1 Gender specialist, 1 Wash specialist, 1 CEA
- The National Directorate of Relief and Disasters will coordinate the operation.

The IFRC will deploy Rapid Response personnel in support to this operation, including Logistics and Finance, for a period of 3 months to provide technical and managerial support to the NS, for an efficient and effective implementation of the operation. The IFRC Cluster Delegation will also support with Operations Coordination.

### Logistics and Supply Chain

To carry out the field activities, the Logistics Department, in collaboration with the Operation Coordinator, will plan the procurement and provision of items and tools required for the trainings and workshops. It will oversee issuing calls for tender for the purchase of materials for the operation in collaboration with the IFRC Cluster Delegation in compliance with IFRC Procedures. Careful use and appropriation of logistical procedural tools such as requisitions, CBAs, POs, BLs, contracts, Good Received note, waybill, supplier registration, supplier and consultant evaluation form, etc. must precede each purchase. The management of the transport chain allows for the rental of vehicles to support supervision missions in the field with efficient fuel management using tools such as vehicle log sheet, transport request, Mission Order, vehicle index card, driver index card.

### Finance and Administration

Through its finance department, the IFRC will provide the necessary support to the operation to review and validate budgets, bank transfers, technical assistance to the NS on expenditure justification procedures and review and validation of operational invoices. The finance department of the RCB will be in charge of facilitating the financial procedures, the payment of invoices, the payment of per diem, the budget follow-up and the review of accounting documents.

### Security - Operational Security Review

Among the 10 municipalities, some border Niger, Burkina Faso and Nigeria. The volatile security situation in eastern Burkina Faso has fuelled a threat of cross-border militancy and banditry as well as kidnapping in areas of northern Benin bordering Burkina Faso and Niger. The porous border with Burkina Faso and Niger, where the forests of the W and the Pendjari National Parks are located, is vulnerable to incursions from armed groups and Islamist militants operating in the Sahel and exploiting this favourable terrain. The kidnap risk is most acute during road movements through remote areas of the national parks along the border. Personnel also face a higher risk from attacks and banditry along the country's long, porous eastern border with Nigeria due to the presence of armed criminal groups. Petty and violent crimes pose a risk to personnel. Nigerian border areas are more dangerous because of the presence of armed criminals. In Cotonou, armed crime – including bank robberies – is increasing and road traffic accidents are common, partly as a result of the high number of 'zemidjans' (scooter taxis) in circulation. Roads outside Cotonou are poorly lit and night-time travel along such routes is inadvisable. Some local carriers and private charter aircraft adopt lax technical and safety measures. Nigerian pirates have taken to attacking ships off the country's coast.

Measures will be taken to ensure that volunteers and staff involved in the operation are protected. Security management will be based on the Core Principles and humanitarian values of the Red Cross Red Crescent Movement. The following security-related measures will also be implemented:

- Regular security updates will be organized, and information will be disseminated.
- Real-time monitoring of field activities using the RCB's information management system.
- Use of other ICTs to ensure communications during monitoring missions.
- Area specific Security Risk Assessment will be conducted for any operational area should any IFRC personnel deploy there; risk mitigation measures will be identified and implemented. All IFRC must, and RC/RC staff and volunteers are encouraged, to complete the IFRC Stay Safe e-learning courses, i.e., Stay Safe Personal Security, Stay Safe Security Management and Stay Safe Volunteer Security online training.
- All staff and volunteers must have completed the security course and comply with the Code of Conduct.
- All staff, especially volunteers, will have RCRC risk insurance through IFRC.

### Planning, Monitoring, Evaluation, & Reporting (PMER)

Key lessons learned in the 2019 and 2020 Floods DREF in Nigeria, Ghana and Côte d'Ivoire will be incorporated into the strategic planning for this DREF:

- The need for a joint planning meeting of the NS HQ and the NS Branch/Municipality staff of the target municipalities before the commencement of the DREF operations to clarify the EPOA, budget and roles of the HQ and the Branches in the DREF operation
- Identification of beneficiaries will be done with the community members and not by the NS staff and volunteers alone, so that the communities are involved in beneficiary selection
- Intervene in the early days of the disaster for maximum coverage
- Provide an ongoing update of project activities to local authorities
- IFRC support in the area of staff in the emergency operation was an added value to the effective implementation of planned activities
- The importance of good community entry through appropriate CEA and setting up/reinforcing of community feedback mechanisms e.g., Feedback mechanisms need to be enhanced to incorporate wider sharing of hot lines to community and beneficiaries (build on system already put in place during COVID19 operation)
- Need for weekly monitoring of activities in the target municipalities
- It is imperative for intervention to be focused on immediate humanitarian needs such as provision of water rather than activities that seem to be of long-term recovery
- Need for PDM to take place and report produced before the LLW
- Aqua tabs must be distributed to the affected communities timely
- PPEs should be provided to all volunteers and NS staff involved in the operations
- Plan activities on time and communicate quickly enough on the period / date of the activities so as not to surprise the communities
- Discussions between the NS and the IFRC on the timing of the deployment of the Surge is necessary for greater support effectiveness
- The composition of mixed intervention teams taking gender and diversity into account is necessary for the success of the assistance
- Inter-agency coordination to ensure complimentary planning and implementation strategies by all stakeholders.

The RCB, through its PMER department, will oversee all operational, implementation, monitoring, evaluation, and reporting aspects of the operation in the flood affected provinces through its country-wide network of branches and volunteers. The responsibility for day-to-day monitoring of the operation will be with RCB provincial branches but supervised by the RCB headquarters to ensure appropriate accountability, transparency and financial management of the operation.

The RCB PMER team will develop an M&E plan to ensure regular and timely monitoring of all activities in the operation. An indicator tracking table (ITT) and activity tracking table (ATT) will be in place for close monitoring. A reporting template will be updated to report on set indicators at all reporting levels with reporting line clearly defined for effective tracking of activity implementation. As there will be distribution of food, shelter and livelihood items and aqua tabs, a post distribution monitoring (PDM) will be conducted to collect and analyse information to ascertain effectiveness of the approaches, get community feedback for future implementation and collect and document success stories. A PDM report will be produced at the end of the monitoring.

IFRC Abuja Country Cluster Delegation office, through the PMER Officer will provide technical support to the PDM, LLW and in programme management to ensure that the operational goals are met, and reporting done appropriately. The IFRC CEA delegate will also provide support to ensure that complaints mechanisms are set up for the CVA so that feedback from the communities are received and acted upon to inform the operation. Two monitoring visits under the supervision of the Head of Cluster will be organized during the implementation of this DREF.

A DREF lessons learned workshop involving various implementing actors will be organized towards the end of the operation to ensure that feedback from volunteers and target communities is obtained, and strengths or weaknesses of the implementation identified to better plan and inform future responses. A report of this workshop will be produced and shared with all relevant stakeholders.



## C. Detailed Operational Plan



### Shelter

People targeted: 9,000

Male: 4,320

Female: 4,680

Requirements (CHF): 61,622

At this stage, the evacuees need a roof over their heads, as such, the urgency is to provide safe emergency shelter, particularly in relocation sites. The evacuees currently hosted in schools must vacate facilities to allow for the start of classes, hence would also need support with the relocation.

**Risk analysis:** The setting up of the shelters will require a field study to see if all the conditions are met to allow the disaster victims to live with minimum standards in relocation sites. The destruction of homes of flood-affected populations making them homeless and relocating them. In the case of sites without hosting facilities, there is a systematic need for emergency shelters to ensure their safety and dignity. Some 1,500 emergency shelters will be built.

**Population to be assisted:** The beneficiaries of this activity are the populations who have moved to the relocation sites and who could not have access to the tents set up by the state in the 10 localities.

**Programme standards/benchmarks:** Respecting individual space through the ratio closer to 1 to 4 is preferable considering the cultural and social rules, as well as the availability of space in practice. Other Sphere standards will be applied.

P&B Output Code	Shelter Outcome 1: Communities in disaster and crisis affected areas restore and strengthen their safety, well-being and longer-term recovery through shelter and settlement solutions	# of households assisted with safe and appropriate emergency shelter (Target: 1,500 HHs)															
	Shelter Output 1.1: Short, medium and long-term shelter and settlement assistance is provided to affected households	<ul style="list-style-type: none"> <li># of households receiving shelter items (Target: 1,500 HHs)</li> <li># of Volunteers trained on Shelter (Target: 50 volunteers)</li> <li># of shelter needs assessments conducted (Target: 10 municipalities)</li> <li># of market assessments conducted (Target: 10 municipalities)</li> <li># of monitoring visits conducted to monitor the distribution of shelter and food items (Target: 10 visits)</li> </ul>															
	Activities planned Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
AP005	Assessment of shelter needs, capacities and gaps																
AP005	Identification of caseloads and verification of beneficiaries in different target groups – inclusion factors integrate gender, diversity and disability in the response																

AP005	Identification of the appropriate modality of support for each caseload																		
AP005	Identification of community participation modalities in program design and implementation																		
AP005	Coordination with other relevant sectors for integrated programming																		
AP005	Coordination with government and other stakeholders																		
AP005	Analysis of the local market to identify availability/access to shelter and household items (can be two separate activities)																		
AP005	Procurement of shelter kits – tarps, poles and fixings - and transport to the target areas of shelter items																		
AP005	Briefing of 100 volunteers on emergency shelter construction including CEA																		
AP005	Support and supervise construction of emergency shelters																		
AP005	Monitoring of the use of distributed shelter and household items																		
AP005	Provision of support to affected population on HLP issues																		
AP005	Evaluation of the shelter support provided																		
P&B Output Code	<b>Shelter Output 1.2: Technical support, guidance and awareness raising in safe shelter design and settlement planning and improved building techniques are provided to affected households</b>	<ul style="list-style-type: none"> <li>• # of households supported to construct emergency shelter (Target: 1500 HHs)</li> <li>• # of volunteers trained on construction of emergency shelter (Target: 100)</li> <li>• % of people reached who report they were satisfied with the support/assistance provided (Target: 80%)</li> </ul>																	
	Activities planned Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16		
AP006	Development of appropriate training material for awareness raising/training of volunteers																		
AP006	Training of Volunteers on construction of emergency shelter																		
AP006	Technical support to the target population for the construction of their shelter																		



## Livelihoods and basic needs

People targeted: 6,000

Male: 2,880

Female: 3,120

Requirements (CHF): 76,041

### Needs analysis: (see above for details)

The populations affected by these floods have lost, for the most part, their agricultural and animal production, as well as access to agricultural fields and fishing areas. Affected farmers and their families will thus need emergency food support in order to cope during the emergency period.

**Risk analysis:** The social-cultural habits of the population must be respected when considering the food baskets to be provided.

**Population to be assisted:** 6,000 people (1,000 HHs) in the 10 districts/municipalities will be assisted with Food support. The selection will be based on the criteria defined above.

**Programme standards/benchmarks:** The Sphere standard for food assistance in kind, which is a complete basket equivalent to 2,100 kcal per day and per person.

P&B Output Code	Livelihoods and basic needs Outcome 1: Communities, especially in disaster and crisis affected areas, restore and strengthen their livelihoods	# of households with fulfilled basic needs (Target: 80% or 4,800)															
	Livelihoods and basic needs Output 1.2: Basic needs assistance for livelihoods security including food is provided to the most affected communities	<ul style="list-style-type: none"> <li># of households provided with in-kind food support: 1,000 HHs</li> <li># of market assessments conducted (Target: 1)</li> <li># of PDM conducted (Target: 10 municipalities)</li> </ul>															
	Activities planned Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
AP008	Financial service provider mapping and contracting																
AP008	Identify beneficiaries for livelihoods and basic needs according to defined criteria																
AP008	Training of Volunteers on safe and accountable distributions																
AP008	Conduct market assessment and market monitoring																
AP008	Procurement of agreed food and non-food items																
AP008	Basic livelihoods/food distributions will be in form of materials/food																
AP008	Post Distribution Monitoring																



## Health

**People targeted: 9,000**

Male: 4,320

Female: 4,680

**Requirements (CHF): 41,734**

### Needs analysis: (see details above)

Flooding causes many constraints in terms of access to health services, health promotion and prevention of health risks, which are normally heightened by floods and with population in the relocation sites. For that, people need to be educated on how to avoid health problems. There is also need for Community Based Health and First Aid (CBHFA) as this utilizes the active volunteers to provide primary health care to support the prevention of health outbreaks, hygiene promotion and education. The volunteers will also engage on early warning of vector-borne diseases including malaria. Two hundred (200) volunteers will be trained and retrained in the implementation and different themes of health and sexual and gender-based violence (SGBV), CBHFA and ECV. The trained volunteers will contribute to health surveillance, administration of emergency first aid and referral of patients. They will conduct sensitization sessions on SGBV in the targeted communities and other health issues.

**Risk analysis:** The major risk is the spread of waterborne diseases such as cholera, and other related diseases. However, community surveillance will be done to identify any other disease outbreak or occurrence within the affected population.

**Population to be assisted:** The beneficiaries of this activity are the populations who have moved to the relocation sites and who could not have access to the tents set up by the state in the 10 localities.

**Programme standards/benchmarks:** WHO and the Beninese Ministry of Health regulations shall apply

P&B Output Code	Health Outcome 1: The immediate risks to the health of affected populations are reduced						% of the target population that are aware of health risks; (Target: 60%)															
	Health Output 1.1: The health situation and immediate risks are assessed using agreed guidelines						<ul style="list-style-type: none"> <li># of communities/HHs reached with health risks information</li> <li># of assessments conducted to identify health needs</li> </ul>															
	Activities planned Week						1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
AP022	In coordination with health authorities, undertake detailed assessments to identify health needs, number/type/location of damaged health facilities and/or medical service gaps in target communities																					
AP084	Develop and roll out a Knowledge, Attitudes and Practices survey/rapid situational analysis in 10 districts to assess behavioural challenges, local cultures, customs, concerns and risk behaviours and practices of communities as well as and track myths and knowledge gaps																					
P&B Output	Health Outcome 4: Transmission of diseases of epidemic potential is reduced						80% of the target population who were observed conducting prevention measures (Target: 7,200)															

Code	Health Output 4.1: Community-based disease control and health promotion is provided to the target population	<ul style="list-style-type: none"> <li># of volunteers trained: on epidemic control and CBHFA (200 vols)</li> <li># of Staff trained on epidemic control and CBHFA : (20 staff)</li> <li># of under 5 years old children dewormed (Target: 75%)</li> <li># of volunteers deployed to conduct RCCE (Target: 100)</li> <li>## of RCCE activities conducted (Target: 50)</li> </ul>															
		Activities planned Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
AP021	Rapid rollout of NS trainings in Epidemic Control for Volunteers and CBHFA																
AP021	Identification and activation of CBHFA volunteers for integration into emergency response																
AP021	Deworming for Children from 6 months to 5 years of age																
AP084	Deploy volunteers to conduct risk communication and health promotion activities in relocation sites																
AP084	Risk Communication and Community Engagement activities focusing on community-based disease control, prevention and health promotion																
P&B Output Code	Health Output 4.2: Vector-borne diseases are prevented	<ul style="list-style-type: none"> <li># of relocation sites implementing vector control measures</li> <li># of mosquito nets distributed (Target: 3,000 - 2 per HH)</li> <li># of people screened for malaria (Target: N/A)</li> <li># of malaria cases treated (Target: actual based on cases)</li> <li># of surveillance activities conducted (Target: 300)</li> </ul>															
		Activities planned Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
AP021	Procurement of mosquito nets																
AP021	Distribution of mosquito nets																
AP021	Screening and referral of malaria cases																
AP021	Community awareness for Malaria prevention and case identification																
AP021	Sensitization to community by volunteers on health risks																
P&B Output Code	Health Output 4.4: Transmission is limited through early identification and referral of suspected cases using community-based surveillance, active case finding, and/or contact tracing	<ul style="list-style-type: none"> <li># of households to be assisted (Target: 1500 HHs)</li> <li># of vols trained on community-based surveillance (Target: 200)</li> <li># of ill patients referred (Target: as necessary)</li> </ul>															
		Activities planned Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
AP021	Establish referral system to health services																

AP021	Detection and referral of ill patients to appropriate health services/agencies																			
AP021	Supervision and data collection/monitoring																			
P&B Output Code	<b>Health Output 4.6: Improved knowledge about public health</b>	<ul style="list-style-type: none"> <li>• # of households to be reached (1,500)</li> <li>• # of hygiene promotion campaigns conducted (Target: as necessary)</li> <li>• # of IEC materials produced and distributed</li> </ul>																		
	Activities planned Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16			
AP021	Health and hygiene promotion campaigns on prevention and control of common communicable diseases such as Malaria, Acute Watery Diarrhoea, Bloody Diarrhoeas, Dermatitis and other outbreaks likely to occur during emergency situations																			
AP021	Reproduce and distribute IEC materials on community-based disease prevention, epidemic preparedness and health promotion, complemented by the use of social media and youth as agents of behavioural change (YABC).																			
P&B Output Code	<b>Health Outcome 6: The psychosocial impacts of the emergency are lessened</b>	# of people reached with PSS (Target: as necessary)																		
	<b>Health Output 6.1: Psychosocial support provided to the target population as well as to RCRC volunteers and staff</b>	# of volunteers and staff trained on PSS (Target: 200 volunteers)																		
	Activities planned Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16			
AP023	Identification of and training for volunteers in psychosocial support																			
AP023	Assessment of PSS needs and resources available in the community																			
	Training/Refresher of volunteers on PSS																			
AP023	Provide PSS to people affected by the crisis/disaster																			
AP023	Provide PSS to staff and volunteers																			



## Water, sanitation and hygiene

People targeted: 9,000

Male: 4,320

Female: 4,680

Requirements (CHF): 43,856

### Needs analysis: (see details above)

The disaster victims need to be made aware of hygiene and sanitation measures, availability of safe drinking water, safe latrines at the relocation sites, personal care items, laundry and dishwashing supplies, water treatment products and hygiene items

**Risk analysis:** The major risk is the spread of waterborne diseases such as cholera and other related health risks.

**Population to be assisted:** The operation will target 9,000 people, especially those on the relocation sites.

**Programme standards/benchmarks:** In line with Sphere standards, RCB will provide the following needs: hygiene and water treatment kits, mosquito nets and latrines

P&B Output Code	WASH Outcome1: Immediate reduction in risk of waterborne and water related diseases in targeted communities	# of vulnerable households with increased access to appropriate and sustainable water, sanitation and hygiene services (Target: 1,000)															
	WASH Output 1.1: Continuous assessment of water, sanitation, and hygiene situation is carried out in targeted communities	Number of volunteers trained: 70															
	Activities planned Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
AP026	Conduct training for RC volunteers on carrying out water, sanitation and hygiene assessments																
AP026	Continuously monitor the water, sanitation and hygiene situation in targeted communities																
AP026	Coordinate with other WASH actors on target group needs and appropriate response.																
P&B Output Code	WASH 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	<ul style="list-style-type: none"> <li># of households with access to safe water (1500 HHs or 9000 people)</li> <li># of aqua tabs distributed</li> <li># of communities trained on safe water storage and use of water treatment products</li> </ul>															
		Activities planned Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
AP026	Provide safe water to 9000 people through the distribution of aquatabs (2 tabs per day x 1,500 families x 90 days)																
AP026	Train population of targeted communities on safe water storage, and safe use of water treatment products																

AP026	Monitor treatment and storage of water through household surveys and household water quality tests.																	
P&B Output Code	<b>WASH Output 1.3: Adequate sanitation which meets Sphere standards in terms of quantity and quality is provided to target population</b>	<ul style="list-style-type: none"> <li>• # of households with access to adequate sanitation</li> <li>• # of toilets constructed (Target: 100)</li> <li>• # of toilets equipped with handwashing facilities, etc.)</li> <li>• # of community cleaning activities conducted</li> </ul>																
	Activities planned Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	
AP028	Select design for toilets based on consultation with targeted communities with considerations for cultural preference, safety, access for children and disabled, anal cleansing practices, national standards, and menstrual hygiene as well as environmental impact and sustainability.																	
AP028	Construct 100 toilets in 10 municipalities																	
AP028	Ensure toilets are clean and maintained through community mobilization																	
AP028	Equip toilets with handwashing facilities, anal cleansing material or water and menstrual hygiene disposals and ensure they remain functional.																	
AP028	Carry out drainage, vector control, and solid waste in targeted communities.																	
P&B Output Code	<b>WASH 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>	<ul style="list-style-type: none"> <li>• # of people reached by hygiene promotion activities (target: 9,000)</li> <li>• # of hygiene needs assessments conducted</li> <li>• # of IEC materials printed</li> </ul>																
	Activities planned Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	
AP030	Conduct needs assessment: define hygiene issues and assess capacity to address the problem.																	
AP030	Select target groups, key messages, and methods of communicating with beneficiaries (mass media and interpersonal communication).																	
AP030	Develop a hygiene communication plan. Train volunteers to implement activities from communication plan.																	
AP030	Design/Print IEC materials																	
AP030	Assess progress and evaluate results.																	
AP030	Engage community on design and acceptability of water and sanitation facilities.																	
AP030	Construct or encourage construction and maintenance of handwashing facilities in targeted communities.																	



P&B Output Code	WASH 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	<ul style="list-style-type: none"> <li>• # of households that receive soap and hygiene materials (Target: 1,000)</li> <li>• # of hygiene kits distributed (Target: 1,500)</li> <li>• # of target communities trained on the use of hygiene kits</li> </ul>															
		Activities planned Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
AP030	Determine the needs for hygiene NFIs, including soap, water storage, and menstrual hygiene for each community based on health risks and user preference in targeted communities in coordination with the WASH group or cluster.																
AP030	Distribute 1,500 hygiene kits, sufficient for 03 months to 9,000 people.																
AP030	Train population of targeted communities in use of distributed hygiene kits.																
AP030	Determine whether additional distributions are required and whether changes should be made.																
AP030	Monitor use of hygiene kits and water treatment products and user's satisfaction through household surveys and household water quality tests.																

## Strategies for Implementation

Requirements (CHF): 108,853

P&B Output Code	S1.1: NS 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	<ul style="list-style-type: none"> <li>• Number of volunteers: 450</li> <li>• Number of staff : 20</li> </ul>															
		Output S1.1.4: National Societies have effective and motivated volunteers who are protected	Number of staff : 20														
Activities planned Week		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
AP040	Ensure that volunteers are insured																
AP040	Provide complete briefings on volunteers' roles and the risks they face																
AP040	Provide psychosocial support to volunteers																
AP040	Ensure volunteers are aware of their rights and responsibilities																
AP040	Ensure volunteers' safety and wellbeing																
AP040	Ensure volunteers are properly trained																

AP040	Ensure volunteers' engagement in decision-making processes of respective projects they implement																		
<b>P&amp;B Output Code</b>	<b>Output S1.1.7: NS capacity to support community-based disaster risk reduction, response and preparedness is strengthened</b>	<i>Number of staff: 20</i>																	
	Activities planned Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16		
AP002	Disaster response and risk reduction capacity building activities with NS																		
AP002	Review and revise the DRR strategy of the NS																		
AP002	Enhance the NS capacity in assessment and planning for DRR and resilience projects																		
AP002	Develop the NS capacity to accompany, enable and connect communities in their efforts for resilience																		
AP002	Develop NS capacity to train the community in VCA and DRR and facilitate/support CBDRR																		
<b>P&amp;B Output Code</b>	<b>Outcome S2.1: Effective and coordinated international disaster response is ensured</b>	<i>Number of staff : 20</i>																	
<b>P&amp;B Output Code</b>	<b>Output S2.1.3: NS compliance with Principles and Rules for Humanitarian Assistance is improved</b>																		
	Activities planned Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16		
AP049	Ensure that the Principles and Rules, Emergency Response Framework and Emergency Appeal and DREF procedures are well understood and applied																		
AP084	Methods are put in place to ensure communities can participate in the response and influence decision-making																		
AP084	Community communication activities ensure people are kept informed of operational plans and progress and have they information they need about the response																		
AP084	Community feedback systems (including rumour and/or perception tracking) are established, and feedback acted upon and used to improve the operation																		
AP084	Community engagement activities help to promote healthy and safe behaviour in relation to the identified risks and vulnerabilities																		
AP042	Surge Deployment – Finance and Logs																		

## Funding Requirements

The total amount allocated for implementation of this emergency plan of action is CHF 331,836 as seen in below budget.

International Federation of Red Cross and Red Crescent Societies

*all amounts in Swiss  
Francs (CHF)*

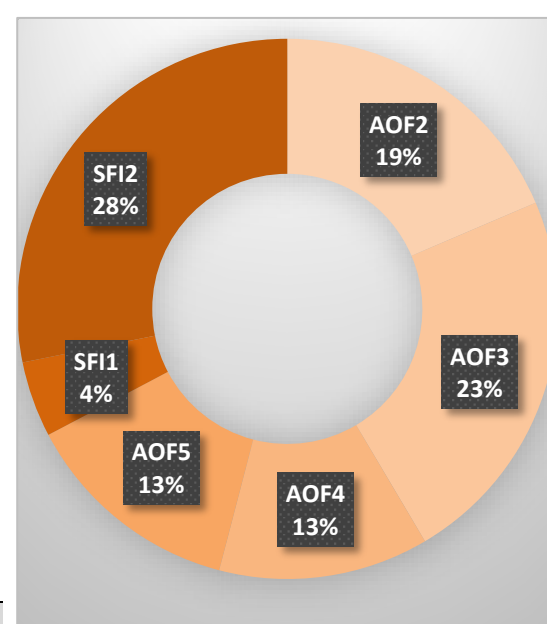
## DREF OPERATION

MDRBJ016 - BENIN - FLOODS

22/10/2021

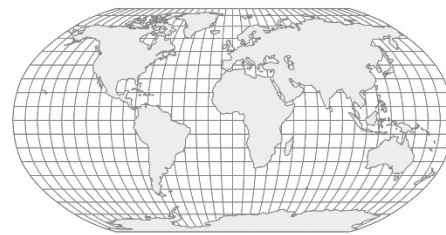
### Budget by Resource

Budget Group	Budget
Shelter - Relief	50,312
Construction - Facilities	10,295
Food	66,419
Water, Sanitation & Hygiene	21,420
Medical & First Aid	25,239
Teaching Materials	10,129
<b>Relief items, Construction, Supplies</b>	<b>183,814</b>
Distribution & Monitoring	4,643
<b>Logistics, Transport &amp; Storage</b>	<b>4,643</b>
International Staff	27,095
Volunteers	15,643
<b>Personnel</b>	<b>42,738</b>
Workshops & Training	19,511
<b>Workshops &amp; Training</b>	<b>19,511</b>
Travel	47,705
Information & Public Relations	3,653
Other General Expenses	9,519
<b>General Expenditure</b>	<b>60,878</b>
DIRECT COSTS	311,584
INDIRECT COSTS	20,253
<b>TOTAL BUDGET</b>	<b>331,836</b>



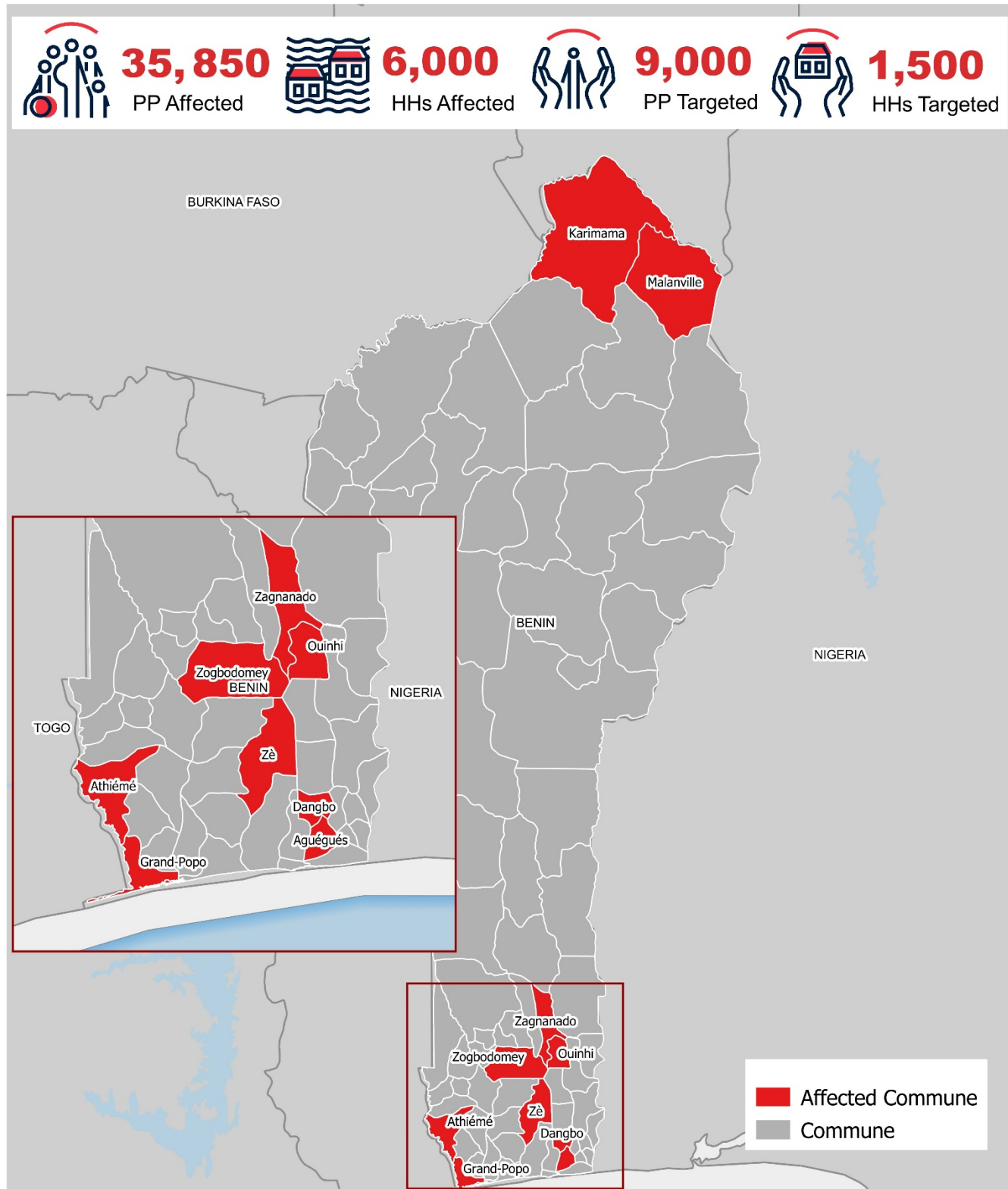
### Budget by Area of Intervention

AOF2 Shelter	61,622
AOF3 Livelihoods and Basic Needs	76,041
AOF4 Health	41,734
AOF5 Water, Sanitation and Hygiene	43,856
SF11 Strengthen National Societies	15,069
SF12 Effective International Disaster Management	93,514
<b>TOTAL</b>	<b>331,836</b>

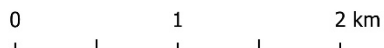


## Benin : Floods

27 September 2021 • FL-2021-000145-BEN



The maps used do not imply the expression of any opinion on the part of the International Federation of the Red Cross and Red Crescent Societies or National Societies concerning the legal status of a territory or of its authorities.  
 Map data sources: GADM, Benin RC, IFRC. Map produced by: IFRC Africa Regional Office, Nairobi



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### For In-Kind donations and Mobilization table support:

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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 Humanitarian 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.