Summary of major revisions made to emergency plan of action:

This update is to inform stakeholders on Guinea DREF response progress from September to December 2021 and extend the time frame for 02 additional months. New end date is 31 March 2022 for a total duration of 06 months. Budget and strategy remain the same from the DREF plan. Most of the activities (around 60%) planned have been completed and the extension is to allow the completion of the following ones:

- Facilitate the final instalment of DREF funds to NS. The biggest part is for the FSP mobile cash transfer execution.
- Support NS completion of ongoing Sanitation campaigns and other community engagement activities.
- Support the last transfer of funds to the beneficiaries following IFRC standard. Those funds include the second part of the planned cash assistance for WASH activities to 2,000 households.
- Support post distribution monitoring (PDM) with technical support from the Cluster Delegation PMER unit
- Support Lessons learnt workshop (LLW) to generate learning from the operations
- IFRC monitoring visit involving the PMER and Operations Officers to monitor quality of implementation, and support PDM and LLW.

Extension is required because of delay in implementation due to challenges in the response. Mainly on cash assistance, that represents the biggest part of this operation. It took around one month to the NS to get the main list of affected households from the government institution to enable the registration, administrative issue on which team could only wait and follow-up. The process in most cases required visit to the Sungari branch, and field monitoring visit to monitor beneficiaries' selection and modalities of cash transfer; all these delayed the transfer of second instalment to the NS.

In addition, the returns reconciliation with National Society (NS) has requested several meetings and monitoring activities to get required additional information, hence additional delay on reporting and final transfer to the NS.
Internal

Description of the disaster

Heavy rain on 31, August 2021 fell over most of the country causing flooding in the prefectures of Siguiri, Guéckédou, and the capital Conakry. From the multisectoral assessment, flooding affected 69,671 people, i.e., 9,953 households, with 1,972 homeless people, 21 injured and 05 deaths recorded. The following areas were affected:

- Siguiri with 43,815 people affected (6,280 households) in the districts of Heremakonon, ORS, Teleladji, Cité chinoise, Énergie neighbourhoods; and in the Sub-prefectures / Districts of Malea, Djomabanana, Kintignia, Boukaria, Kofilani, Balato Niandankoro and Mandjemakolen

- Guéckédou with 9,305 people affected (1,364 households) in the districts of Frako 1, Bambino 1, Mangala 1, Heremakono, Nioumoulé, Bafilatè, Nialinko, Bambo and the Sub-prefecture of Nongoa.

- Conakry with 16,551 people affected, (2,309 households) in Matoto Municipality (Yimbaya permanence, Tanéné Mosque, Simbaya1, GBessia Port 2, Dabondy 2, Dabondy 3, Sangoyah Mosquée); Ratoma Municipality (Hamdallaye, Nongo, Lambangni, Yattaya and Taouyah); Matam Municipality (Bonfi Marché, Heremakono Mosquée, Coléah Cité, and Madina SIG); Dixinn Municipality (Dixinn centre 2, Dixinn Gare, Kénien, and Hafia 2).

Following these floods, the Prefectural Committees of the Red Cross of Guéckédou and Siguiri, and the Communal Committees of the Red Cross of Conakry have deployed 50 volunteers and 05 Supervisors each who conducted the assessments in the localities through their Community Disaster Response Teams (CDRT / ECRC) coordinated by members of the National Disaster Response Team (NDRT) with the agreement of the prefectural, sub prefectural, communal and neighbourhood authorities.

From the joint assessment report, a total of 9,953 households (69,671 people) were affected including 16,087 men; 36,228 women (with 1,328 pregnant women and 3,795 breastfeeding women); 17,356 children aged 0-5; 256 people with disabilities; 1,295 elderly people; 57 injured; 867 houses destroyed; 2,562 displaced people; 763 water points destroyed; 103 host families; 21 resettlement sites and 964 latrines destroyed. The flooding also had huge impact on agriculture and animal husbandry.

Summary of current response

Overview of Host National Society

From the onset of the floods, the local committees of Conakry, Guéckédou and Siguiri, through their volunteers have been assisted affected households with first aid and rescue, as well as provided sanitation, PSS and emergency assessment support. The national headquarters of the Red Cross Society of Guinea (RCSG), after a summary of information received from the affected local committees affected by these, shared this information with all internal (IFRC and FRC) and external partners (United Nations agencies, NGOs, and government) of the Movement followed by advocacy to provide relief to the vulnerable.

The Guinea Red Cross has 20,400 volunteers in the 33 Prefectures and the 05 Municipalities of Conakry. The national headquarters is located in Conakry, and services are provided by the 33 prefectural committees, the 05 communal committees in Conakry and the 287 sub-prefectural committees across the country. There are also six community teams and a national disaster response team. The National Society has significant experience in flood response a flood contingency plan and a network of trained and available volunteers who can be quickly deployed as needed. The floods contingency plan was activated in the identified flood-prone areas. Unfortunately, with the rains, new areas where early warning activities had not been implemented were also impacted.

From the implementation of the DREF, the following activities have been completed to respond to the impact:

- Deployment of 30 volunteers for 02 days to support registration of identified households for cash assistance
- Briefing of beneficiary households on cash transfer modalities and selection criteria
- Provision of emergency shelter construction materials, dignitary pad, and WASH items to essential household through unconditional cash transfers
- Rehabilitated/disinfected of 413 latrines at community level
• Training of 200 volunteers on health and hygiene promotion, drinking water supply, with components on communication and community engagement and necessary briefings on PG
• Communication: Production of hygiene promotion (IEC) posters is done, and spot diffusion is ongoing
• Training of 30 volunteers including training on cash transfer, household registration on Kobo Collect tool. Cash transfer training took 02 days.
• Deployment of 30 volunteers to monitor cash transfer activities
• Cash transfer to 2,000 most vulnerable households is ongoing, to cover nutritional needs for one month and one-off cash for shelter

Overview of Red Cross Red Crescent Movement in country

With the recent restructuring in the Africa Region related to the IFRC’s Agenda for Renewal, Guinea has since July 2021 been attached to the IFRC Freetown Country Cluster Delegation with covers four National Societies including Guinea, Liberia, Sierra Leone, and Guinea Bissau. The Freetown Country Cluster Delegation throughout the implementation of the DREF has been providing technical support to Guinea National Society in the areas of Operations, PMER and Finance.

Currently, the IFRC is represented by a delegate who is supporting the NS in the implementation of the community pandemic and epidemic preparedness program commonly known as CP3. In parallel with the CP3 programme, the GRC is currently implementing the response to haemorrhagic fevers Ebola and Marburg, in the Guéckédou area, where a base has been set up to work on risk communication and community engagement, in partnership with IFRC through the MDREBOLA21 – West Africa EVD Response emergency appeal.

The sub-regional office of the International Red Cross Committee (ICRC) in Abidjan (Côte d’Ivoire), and has been available to support the Guinea Red Cross in case there was need for restoring family links, programme coordination and communication. Regarding the response to the floods has not support the National Society, but there is planning to support the CRG in the deployment of volunteers in emergency situations, and in the restoration of family links, programme coordination and communication.

The French Red Cross (FRC) is present in the country, but not providing support or assistance to the floods. The British Red Cross also provides bilateral support to the NS through disaster management and health programs, although it is not physically present in Guinea.

Overview of non-RCRC actors in country

Throughout the needs assessment, the RCSG worked in close collaboration with the National Service for Humanitarian Affairs (SENAH) through its regional and prefectural representations. The National Society has also been working with local councils, district representatives, civil protection, prefectures and municipalities and governorates.

Under the initiative of the authorities, emergency meetings were organized during which the authorities requested the support of humanitarian organizations to assist affected families.

In addition to the first aid, psychosocial support and restoration of family links provided by Guinea Red Cross, SENAH initiated a process for mobilizing a few items including, food and non-food items from local institutions and community members to support the affected families. Note that this initiative by SENAH has not yet come to fruition and no assistance has been announced other than support from community solidarity and host families.

Needs analysis and scenario planning

The joint assessment carried out by the Red Cross / National Humanitarian Affairs Service (SENAH) teams revealed, affected populations were made up of extremely poor families who lived in precarious conditions that were aggravated by the floods and the impact of COVID-19. The immediate needs identified were the provision of shelters and household items (blankets, mats, kitchen kit, impregnated mosquito nets, soap, and jerry cans), provision of emergency latrines, water treatment, distribution of food, etc.

All affected populations live in semi-informal settlements (houses built with inefficient local materials) where housing conditions are poor and access to clean water is scarce with water-borne diseases and cases of malnutrition commonly reported. The localities in question are currently affected by COVID-19 and just a few months ago an Ebola Virus Disease outbreak was declared and is now contained. These multiple outbreaks have caused disruption of livelihoods and income-generating activities, thus affecting the living conditions of communities. The most pressing needs are listed as follows:
Shelter and NFI: All the affected populations live in semi-informal settlements (houses built with non-flood resistant construction techniques and materials) where housing conditions are not adequate. Immediate needs include rehabilitation of shelters and household items (blankets, mats, kitchen kit, etc.).

Livelihood: Affected localities were globally affected by Covid-19 in 2020 with a disruption of livelihoods and income-generating activities, thus affecting the living conditions of the population. In addition, in February and then in August 2021, the country experienced cases of Ebola Virus Disease and Marburg Fever, which further impacts economic activities in the country, which was recently undergone political and security crisis which resulted in the closure of land and air borders. Thus, the affected families were left living in difficult conditions due to the change of living environment for some, the lack of food, the increase in the burden for host families. Based on the above elements, livelihood support is urgent for the affected families.

Health: The situation of the affected population deteriorated due to the vulnerability exacerbated following this flood, exposing them to the risks of water-borne diseases, malnutrition, the high risk of epidemics including cholera and other corollary diseases will develop with grave consequences on health and wellbeing. In addition, the current health context in Guinea requires an emphasis on the promotion of community health services, given the risks of the spread of epidemics faced by the country.

Water, hygiene and sanitation: Access to safe drinking water is scarce due to the contamination of wells, water-borne diseases and cases of malnutrition commonly reported in the region. Thus, families need insecticide treated mosquito nets, soap, jerry cans, establishment of emergency latrines, water treatment. Various groups of people including pregnant women, children under five, the elderly and other groups are really affected by these floods.

Although floods are recurrent in Guinea and early actions were implemented as recommended in the RCSG Flood Contingency Plan (April 2021 to March 2022), the affected areas this year in Siguiri did not benefit from these early warnings because it was not in the usual list of flood zones. Unfortunately, with climate change and anarchic urbanization, these new areas must be considered among the flood-prone areas.

Operation Risk Assessment

Among the risk identified was Increased workload for staff and volunteers already assigned to other interventions. As a mitigation measure, through a clear distribution of tasks, the NS will ensure that the coordination of the various interventions runs smoothly. In addition, the Ebola / Marburg operation is implemented by the Guéckédou branch under the coordination of the health manager, while that of the floods will be carried out by the Siguiri branch under the coordination of the interim disaster management manager. The NS will also request the deployment of surge personnel as necessary to support the GRC teams. Deployment of volunteers dedicated solely to the current DREF in the Siguiri area.

Another risk identified was the reluctance of the local population because of the image of the Red Cross during this period of multiple health crises. As a mitigating strategy, volunteers are work with community leaders and SENAH staff in all phases of the implementation. Modules on Safer Access will be given to volunteers. The response activity will be covered by a communication approach based on door-to-door awareness and community engagement.

Possible lockdown due to increase in positive COVID-19 cases in targeted area was also identified as a risk, although the probability was low, if the government implements another lockdown, the RCSG will be able to continue to carry out its humanitarian missions, being auxiliary to the public authorities, under the supervision of the Ministry of Health. In addition, the RCSG is already implementing activities to promote hygiene and prevent water-borne diseases through the IFRC's global COVID-19 Appeal, and will continue to do so in Siguiri, through this operation. To date, this sector has not been affected by the restrictions.

Political and security tensions and closure of air and land borders was identified as an operational risk; although movement restrictions were imposed on the population from Sunday, 5th September, these were lifted by the new authorities through a press release on 6th September, authorizing humanitarian organizations to go about their business to alleviate the suffering of the most vulnerable. In the same vein, the borders were reopened on the same day. In addition, tensions are more obvious in Conakry, while the area of implementation of this operation will be in Siguiri. However, the NS continued to assess the security situation and ensure the safety of its volunteers. Even if the situation can change at any time, the NS in its humanitarian mission, will continue to intervene in crisis situations across the country.

B. OPERATIONAL STRATEGY

Proposed strategy
**Overall Operational objective**

The objective of this operation remain the same: to provide immediate assistance in shelter, livelihoods and promotion of health and hygiene to 6,280 households (43,815 people) affected by the floods in the prefecture of Siguiri. The RCSG is implementing activities in the 4 affected districts and 9 sub-prefectures, according to the selection criteria mentioned in the DREF. The implementation time for this operation initially at four months is revised for 6 months to ensure that all activities are completed.

Operational learnings capture in the DREF has been helpful on the response since September.

**Proposed strategy**

As planned, the response focused on emergency shelter, hygiene, and sanitation promotion, improving access to safe drinking water through water treatment and distribution of food and household items through the multipurpose cash transfer (MPCT) approach. It is considered that the MPCT approach enables households to recover, each according to their specific needs and contributes to restoring their dignity as they can choose what is necessary for their family, while helping market recovery. For more details in strategy, refer to [DREF operation launched in September](#) as it remains the same.

Since September, NS has completed 60% of the planned response actions. Details of the implementation in the section below.

### C. DETAILED OPERATIONAL PLAN

#### Shelter

*People reached: 1750*
- Male: 840
- Female: 910

**Outcome 1:** 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

<table>
<thead>
<tr>
<th>Indicators</th>
<th>Target</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td>% of households with destroyed houses, who receive cash support for shelter and household items</td>
<td>58% or 250HHs</td>
<td>250</td>
</tr>
<tr>
<td>Total number of people who received cash for shelter assistance</td>
<td>1,750</td>
<td>1,750</td>
</tr>
<tr>
<td>Total number of volunteers trained and engaged in cash activities</td>
<td>30</td>
<td>30</td>
</tr>
<tr>
<td>Number of PDMs conducted</td>
<td>1</td>
<td>0</td>
</tr>
</tbody>
</table>

**Output 1.1:** Shelter Output 1.1: Shelter and settlements and basic household items assistance is provided to the affected families.

<table>
<thead>
<tr>
<th>Indicators</th>
<th>Target</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total number of people who received cash for shelter assistance</td>
<td>1,750</td>
<td>1,750</td>
</tr>
<tr>
<td>Total number of volunteers trained and engaged in cash activities</td>
<td>30</td>
<td>30</td>
</tr>
<tr>
<td>Number of PDMs conducted</td>
<td>1</td>
<td>0</td>
</tr>
</tbody>
</table>

**Progress towards outcomes**

- **Training of volunteers on cash transfer and household registration:** Some 30 volunteers were identified and trained on the use of Kobo collect to support registration of affected populations. The volunteers worked closely with the Government and other partners to register affected populations, and validated list of beneficiaries was shared with partners for support.
- **Market assessment:** With support from the logistics unit, market assessment has been conducted which provided useful information on the market situation, and identified availability/access to shelter and household items.
- **Establishment of targeting committees and briefing of beneficiary households:** Target committees are set up in the affected areas and briefed on the nature of support and beneficiary selection process. These
committees are made up of: Mayor / Heads of district; The local representative of the Red Cross; youth representative; and women's representative.

- **Transfer of funds to 250 households to support the rehabilitation of destroyed dwellings:** With the use of mobile money transfer, 250HHs whose houses were destroyed have benefited from cash transfer worth the value of shelter tool kits including construction materials for the rehabilitation of their homes. Households have received cash as household items to replace those lost.

- **Deployment of volunteers to monitor cash transfer:** Thirty volunteers were orientated and deployed to support and monitor cash transfer activities that was facilitated by the financial service provider for 3 days. The same volunteers will continue supporting and monitoring the process during the distribution of cash for hygiene kits and food items.

**Challenges**

- Approval process for PFA took time to be completed and this has delayed the transfer of funds to NS to start sanitation and other activities. However, while the approval process was underway, volunteers were deployed to support registration and other community engagement activities.

- There was generally a delay in getting the comprehensive and validated list of affected populations to be supported from the government services, hence the registration after the multisectoral assessment. This equally delayed engagement of communities and affected populations on the nature of Red Cross support, beneficiary selection and modality of transfer.

- Discussion on Working Advance liquidation with NS has delayed the second transfer to NS. Several meetings have been held to discuss the liquidations, request additional information which in most cases required visit to the Sungari site to engage branch and government services.

**Livelihoods and basic needs**

People reached: 14,000  
Male: 6,720  
Female: 7,280

<table>
<thead>
<tr>
<th>Outcome 1: Livelihoods and basic needs</th>
<th>People reached: 14,000</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Indicators:</strong></td>
<td><strong>Target</strong></td>
</tr>
<tr>
<td>% of affected households who receive cash support for nutrition for one month</td>
<td>32%</td>
</tr>
</tbody>
</table>

**Output 1.1:** Livelihoods and basic needs  
**Output 1.5:** Households are provided with unconditional/multipurpose cash grants to address their basic needs

<table>
<thead>
<tr>
<th>Indicators:</th>
<th><strong>Target</strong></th>
<th><strong>Actual</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Total number of people who have benefited from food assistance through cash</td>
<td>14,000</td>
<td>7,000</td>
</tr>
<tr>
<td>Total number of volunteers trained and engaged in cash activities</td>
<td>30</td>
<td>30</td>
</tr>
<tr>
<td>Number of PDMs conducted</td>
<td>1</td>
<td>0</td>
</tr>
</tbody>
</table>

Progress towards outcomes

- **Training of volunteers on cash transfer:** Thirty volunteers have been trained on cash transfer (household registration on Kobo Collect tool), and provided two-day support during the distribution process, that is led by the financial service provider.

- **Deployment of volunteers to support registration of identified households for cash assistance:** Thirty volunteers were trained and deployed for two days to support registration of identified households for cash transfer. These volunteers joined the multisectoral registration process and supported registration of victims using Kobo collect.

- **Transfer of funds to 2,000 households for living support for one month:** A total of 1,000HHs out of targeted 2,000HHs have been assisted with cash for food, amounting to GNF 775,775 per household. The remaining 1,000HHs will be provided with the same support after the second instalment is made during the extended period.

- **Deployment of 30 volunteers to monitor cash transfer activities:** Thirty volunteers were deployed to monitor the transfer of cash to the 1,000HHs for 03 days. The same volunteers will continue monitoring the distribution to the outstanding HHs once funds are transferred to the financial service provider.
## Water, sanitation and hygiene

### Outcome 1: Immediate reduction in risk of waterborne and water related diseases in targeted communities

<table>
<thead>
<tr>
<th>Indicators</th>
<th>Target</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td>% of affected households, which receive support in terms of awareness of</td>
<td></td>
<td></td>
</tr>
<tr>
<td>health and hygiene promotion</td>
<td>100%</td>
<td>94%</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Indicators</th>
<th>Target</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of people reached with key personal and community health and</td>
<td>43,815</td>
<td>41,218</td>
</tr>
<tr>
<td>hygiene promotion messages</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total number of volunteers trained to carry out WASH activities</td>
<td>200</td>
<td>200</td>
</tr>
<tr>
<td>Number of WASH training sessions</td>
<td>8</td>
<td>8</td>
</tr>
<tr>
<td>Number of training sessions organized for the benefit of the community</td>
<td></td>
<td>6</td>
</tr>
<tr>
<td>population on the storage of drinking water and the healthy use of water</td>
<td></td>
<td></td>
</tr>
<tr>
<td>treatment products</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Progress towards outcomes

- Two hundred (200) volunteers have been trained on health and hygiene promotion, drinking water supply, with components on communication and community engagement and necessary briefings on protection, gender, and inclusion, including on menstrual hygiene and the use of long-lasting impregnated nets (LLINs). With the ongoing Covid-19, emphasis have been placed on containment measures during training or briefing sessions for volunteers, and also during their community engagement sessions. Volunteers have already carried out 8 sessions with 25 people to ensure physical distancing, with each training session conducted within 03 days.
- Initial assessment of the water, sanitation and hygiene situation in the target communities has been carried out to identify the appropriate method of household water treatment for each community based on efficiency and user preferences. Continuous monitoring of water, sanitation and hygiene situation in the target communities is going and will continue till the end of the two-month additional timeframe.
- Training and sensitization of community members on risks associated with water-borne diseases like cholera to adopt better prevention and control measures, and the use of distributed material, such as chlorine have also been held.

### 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

<table>
<thead>
<tr>
<th>Indicators</th>
<th>Target</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of households which now have access to drinking</td>
<td>14,000</td>
<td>1,000HHS</td>
</tr>
</tbody>
</table>

### Progress towards outcomes

Awareness raising sessions are being held in operational communities to provide training to the population on the storage of drinking water, and the healthy use of water treatment products. The sessions are followed by questions and answers from beneficiaries, to ensure that they fully understand the concept and support HH practice.

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

<table>
<thead>
<tr>
<th>Indicators</th>
<th>Target</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of latrines rehabilitated / disinfected</td>
<td>413</td>
<td>413</td>
</tr>
</tbody>
</table>

### Progress towards outcomes

The operation has supported the rehabilitation of 413 destroyed latrines, as part of an effort to reduce open defecation, and improving the sanitation situation in the affected areas.

### WASH Output 2.4: Hygiene promotion activities are provided to the entire affected population

<table>
<thead>
<tr>
<th>Indicators</th>
<th>Target</th>
<th>Actual</th>
</tr>
</thead>
</table>
### 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**

<table>
<thead>
<tr>
<th>Indicators</th>
<th>Target</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td>% of volunteers involved in activities insured</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td># of volunteers provided with PPE</td>
<td>230</td>
<td>200</td>
</tr>
</tbody>
</table>

**Progress towards outcomes**

- Volunteers’ insurance: Insurance of the 200 volunteers engaged in the DREF operations has been completed. Names and other useful information were shared with Geneva team to support the insurance process.
- Code of conduct: Volunteers and staff engaged in the DREF were mobilized and briefed on the code of conduct. Volunteers and staff who were present were encouraged to sign the code of conduct after having read it.
- Provide visibility items for volunteers (T-shirts, caps, etc.); with support from the logistics team, this process has commenced, and will be completed after the second transfer to the NS.
- Provide comprehensive information on the role of volunteers and the risks they face: Before the beginning of the operation, volunteers were guided on their roles and responsibilities and the types of risks they were likely to face throughout the operation. Additionally, detailed orientation on how to facilitate community complaints and feedback mechanisms using the Community Engagement & Accountability (CEA) approach were provided.

**Outcome S2.1: Effective and coordinated international disaster response is ensured**

<table>
<thead>
<tr>
<th>Indicators</th>
<th>Target</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td>Percentage ratio of people supported versus people affected</td>
<td>at least 40% or 17,526 persons</td>
<td>16%</td>
</tr>
</tbody>
</table>

**Output S2.1.1: Effective and respected surge capacity mechanism is maintained**

<table>
<thead>
<tr>
<th>Indicators</th>
<th>Target</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td># of RDRT deployed to support NS</td>
<td>1</td>
<td>0</td>
</tr>
</tbody>
</table>

**Progress towards outcomes**

- No surge deployment. The Freetown Country Cluster Delegation (FCCD) logistics, finance and operations team have been providing needed support and NS has finally dropped the surge option included in the plan.

**Output S2.1.3: NS compliance with Principles and Rules for Humanitarian Assistance is improved**

<table>
<thead>
<tr>
<th>Indicators</th>
<th>Target</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td># of volunteers trained in CEA</td>
<td>200</td>
<td>200</td>
</tr>
<tr>
<td># of feedback mechanisms setup</td>
<td>1</td>
<td>0</td>
</tr>
</tbody>
</table>
Progress towards outcomes

- Community meetings have been held with local authorities for the validation of selection criteria and lists of beneficiaries. It also explained the nature of Red Cross support and modality of transfer.
- Volunteer briefing on Community Engagement and Accountability (CEA) and Gender Protection and Inclusion (PGI) guidelines. Communities are consulted on their preferred and trusted communication channels during group discussions; favourite community channels are community dialogues, community radios, and picture boxes.

Output S3.1.2: IFRC produces high-quality research and evaluation that informs advocacy, resource mobilization and programming.

<table>
<thead>
<tr>
<th>Indicators</th>
<th>Target</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td># of monitoring missions undertaken by the CCST</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td># Documentaries produced</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td># of lessons learned workshop</td>
<td>1</td>
<td>0</td>
</tr>
</tbody>
</table>

Progress towards outcomes

- These activities will be implemented during the two months extension period.

D. Financial Report

The budget, published at the launch of the DREF operation and the DREF allocation remain unchanged (CHF 361,162). Total expenditure to date is CHF 217,162 with a balance of CHF 144,000.

Relating to NS reporting on transfer, the amount allocated to NS has been divided to two instalments, as stated in the Project Agreement. First transfer was done, and the extension seeks completion of approved EPoA without additional funding request. Working advance for reported activities has been submitted to the cluster Delegation and were reviewed by the Finance team, thus no expenses have been charged or incurred.

Contact information

For further information, specifically related to this operation please contact:

For Guinea Red Cross:
- Mamadou Saliou Diallo, Secretary General, Guinea Red Cross Society; phone: (+224) 628 78 22 01; e-mail: crg.secretairegeneral@gmail.com
- Mohamed Nasser KEITA : DM Officer/DREF Operations Coordinator tracingcrg@gmail.com; phone : 00224 628 682 203

IFRC Country Cluster Office, Sierra Leone:
- Ghulam Muhammad Awan, Head of Freetown Cluster Delegation; email: ghulam.awan@ifrc.org
- Alhaji Bockarie Abu, Senior PMER officer Freetown Cluster Delegation; email: alhaji.abu@ifrc.org

IFRC office for Africa Region:
- Adesh Tripathee, Head of DCPRR Department, Nairobi, Kenya; phone: +254 731067489; email: adesh.tripathee@ifrc.org

In IFRC Geneva:
- Nicolas Boyrie, Operations Coordination, Senior Officer, DCPRR Unit Geneva; email: nicolas.boyrie@ifrc.org
- Eszter Matyeka, DREF Senior Officer, DCPRR Unit Geneva; Email: eszter.matyeka@ifrc.org

For IFRC Resource Mobilization and Pledges support:
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.

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

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