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Emergency Plan of Action (EPoA)

Ghana: Explosion in Apeate

 International Federation
of Red Cross and Red Crescent Societies

DREF Operation n°	MDRGH017	Glide n°:	OT-2022-000152-GHA
Date of issue:	31 January 2022	Expected timeframe:	3 months
Operation start date:	29 January 2022	Expected end date:	30 April 2022
Category allocated to the of the disaster or crisis: Yellow			
DREF allocated: CHF 172,246			
Total number of people affected:	3,300 people (660 HH)	Number of people to be assisted:	2,000 people (400 HH)
Provinces affected:	Western Region	Provinces/Regions targeted:	Apeate, Bogoso
Host National Society presence (n° of volunteers, staff, branches): Ghana Red Cross Society (GRCS) has over 60,000 volunteers, 50 staff, and 10 regional offices across the country. The National Society (NS) currently has 85 trained and established District Disaster Response Teams (DDRTs) members across the country, 33 National Disaster Response Teams (NDRT) members, 10 Regional Emergency Response Teams (RERT) consisting of 135 members, 45 Community Disaster Preparedness and Response Teams (CDPRT) consisting of 910 members, 53 NS staff, and five Partner National Society (PNS) staff. In the Western Region, GRCS has 2 regional staff supported by 22 District Organisers and 400 Community Disaster Prevention Response Teams (CDPRTs) position in 20 communities.			
Red Cross Red Crescent Movement partners actively involved in the operation: International Federation of Red Cross and Red Crescent Societies (IFRC), International Committee of Red Cross (ICRC) and Swiss Red Cross.			
Other partner organizations actively involved in the operation: National Disaster Management Organization (NADMO), Ghana National Fire Service			

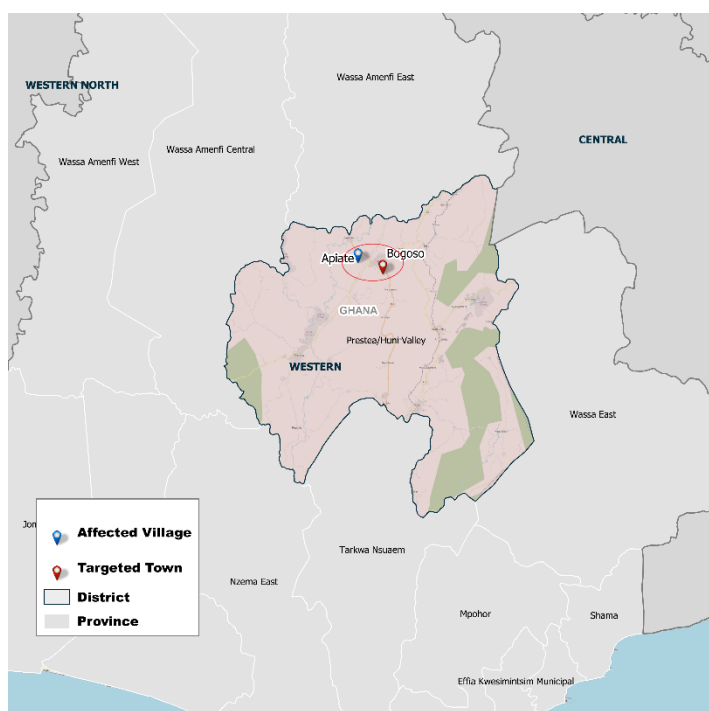
A. Situation analysis

Description of the disaster

On 20 January 2022, a large [blast occurred in an area at Apeate community](#), near the city of Bogoso about 300km (180 miles) west of the capital of Ghana, Accra. The explosion occurred when a motorcycle went under a truck carrying explosives that was en route to the gold mine at Bogoso. After the blasts, people in the community rushed down to the scene when a second blast occurred few minutes later. This resulted in the destruction of dozens of buildings.

As of 26 January, a total of [17 people had been confirmed dead, and some 59 injured people](#) rescued and referred to Bogoso Government Hospital where they are receiving treatment. As of 26 January, 3,300 persons (1,122 males and 2,178 females) have been affected by the event, excluding those who were at the various health centers.

Reports from the National Disaster Management Organization (NADMO) indicates that 500 buildings have been destroyed by the blasts and approximately 1,500 people are now homeless. The explosion blew-off major



Map highlighting impact area in Apeate ©IFRC

roads in the area, with many commuters getting stranded due to the situation. Schools, markets and other services at community level were equally impacted, disrupting activities as children can no longer go to school and community members have lost their livelihoods.

The Prestea Huni Valley Municipal Assembly has set up a relief center at the Catholic Church Parish Hall in Bogoso which is hosting the displaced people, and the Government through the Municipal Chief Executive of Prestea Huni Valley Municipal Assembly has issued a statement highlighting the need for assistance including temporary shelter, food items and medical needs. The government is taking full charge of the medical bills of the injured while the Vice President of the Republic of Ghana, mining companies and other non-profit organizations have provided cash (undisclosed amounts) and in-kind donations to the Municipal assembly, as a contribution to support relief actions.

Summary of the current response

Overview of Operating National Society Response Action

Ghana Red Cross Society (GRCS) immediately activated its District Disaster Response Teams (DDRTs) from nearby districts and deployed 52 team members in Tarkwa and Prestea with the team led by Regional Manager. Some activities carried out include psychosocial support services to approximately 200 people at the Parish Hall in Bogoso, first aid to 59 injured people, search & rescue and evacuation. These activities were jointly implemented with the National Ambulance Service, Fire Fighters and the NADMO. Data for the search, rescue and evacuation are yet to be consolidated.



GRCS team during rapid needs assessment ©GRCS

The National Society's Disaster Management Department initiated a process of dispatching 20 shelter kits and 20 family tents to cover at least 300 displaced people camped at a relief centre at Bogoso town. These shelters have been mounted at two locations within the municipality. The women and children have been housed at the St. Michael Catholic Parish Hall in Bogoso, while the males were sheltered at the Bogoso Golden Hotel Conference Hall (Old site). GRCS seeks replenishment of distributed items through this DREF operation.

The Western branch of GRCS has issued a solidarity message to the affected people of Apeate and its surrounding communities through the media.

The GRCS will require technical, logistical, and financial support to be able to reach more affected population and provide more services based on need. Red Cross staff and volunteers collected data to inform the design of this emergency plan of action and are supporting restoration of family links for people separated from their families by the ongoing chaos.

GRCS is participating in national coordination meetings organized by the NADMO with other partners including UN Agencies which has resulted in the relocation of the relief centre to a safer zone as identified and recommended by the GRCS.

Lessons learnt from previous response using cash and voucher assistance (CVA)

- Being relatively new to cash and voucher assistance with the first CVA response during the COVID-19 appeal, GRCS engaged in a capacity assessment conducted in October 2020, which highlighted the need to train cash focal points to ensure readiness of the NS in providing quick response using the CVA modality. In the same vein, a long term FSP contract was signed which shall now allow GRCS provide quick support to targeted households in the current intervention.
- Some families had issues accessing the cash grants due to wrong registration because lack of identification, sim card errors, etc. As such, GRCS will ensure in this operation to make available volunteers to support families in their registration process to reduce instances of mistakes. This will be facilitated by experience gathered working with the 510-Project of the Netherlands Red Cross, in setting up and managing beneficiary data base. In addition, GRCS will carry out advocacy with local authorities to provide families where the members lost their identification with some documents to help identify them.

Overview of Red Cross Red Crescent Movement Actions in country

The International Federation of Red Cross and Red Crescent Societies (IFRC) through the Delegation Office in Abuja supports the GRCS. The Program Coordinator based in Ghana is supporting the National Society by providing support in the areas of operational coordination and partnerships and resource development. The IFRC supported GRCS in cash preparedness activities including a training for programme and support staff and volunteers in 2021.

The Swiss Red Cross, the only PNS present in Ghana has been supporting the Ghana Red Cross Society (GRCS) in 4 regions in Disaster Risk Reduction (DRR), Shelter, Climate Change and Institutional preparedness, Maternal and New-born Child Health (MNCH) and Eye Health Services.

The International Committee of Red Cross (ICRC) supports the National Society remotely in area of Restoration of Family Links (RFL), Tracing and International Humanitarian Law (IHL).

Overview of other actors' actions in country

The major stakeholders in Ghana are National Disaster Management Organisation (NADMO), which is responsible for coordination at all levels, Ghana Health Service, District Assemblies, traditional leadership, UN agencies and other civil society actors.

NADMO is unable to cope with the increasing needs resulting from the explosion. As such, it appeals to corporate bodies and non-government organizations to complement government's efforts to save lives through its coordination meetings and media. All donations received by the Municipal Assembly are received by NADMO at district level, to be dispatched as needed. At the moment, the numbers of people these donations could reach are unknown.

The GRCS has conducted a rapid assessment in collaboration with District Directors and regional Coordinators of NADMO.

Internally, Ghana Red Cross will be the overall coordinator while weekly membership coordination will be held, represented by NS head of departments, Swiss Red Cross and IFRC.

Needs analysis, targeting, scenario planning and risk assessment

Needs analysis

According to the initial joint assessment conducted by NADMO and Red Cross on 26 January 2022, a total of 3,300 people (660 households) in Bogoso Prestea Huni valley district (Apeate community) were affected by the blast with about 500 houses destroyed, resulting in 13 deaths and 59 injured. See Table 1 below for details:

Description	Affected Number
No. of Houses Destroyed	500
No. of Displaced and Camped	300 Households
Affected People	3,300
Number of People Dead	17
Number of People Injured	59

Generally, the explosion has affected all members of the community relatively (directly or indirectly) and has caused a strain in their ability to cope with the situation and desperately need support in different sectors.

The immediate needs are Psychosocial Support to the affected families and Red Cross volunteers experiencing the gruesome sight. The NS also needs to continue to provide RFL and First Aid services as the need arises while also providing Shelter, and non-food items.

The current situation presents protection risks as most people are sheltered in same spaces. This also highlights potential health risks amidst the already existing pandemic. Indeed, there is an increased risk of spread of COVID-19 in camps and shared spaces.

In addition, road access to and within the communities have been damaged and it is assumed that the



Family tents dispatched by GRCS from its warehouse. ©GRCS

vulnerable population will find it difficult to move within the area. The accident also seriously disrupted market activities and the inflow of goods and services including food items.

The National Society will simultaneously support government authorities in conducting multi-sectoral needs assessments, to determine the further detail on the number of families affected and damages to property. Volunteers already present on the ground will join government teams to collect the information. With the explosion livelihoods have likely been impacted. Likewise, habitations in the area have been impacted though extent remains unknown for the moment. The result of this assessment will allow GRCS to adjust its intervention if required.

Targeting

Considering that affected people have varied levels of vulnerability and that there are other partners on the ground, GRCS will focus its initial intervention to target affected families including those injured and in hospitals. As such, the NS will target **2,000 people (400 households)** directly affected by the explosion in the community of Apeate with first-aid services, Shelter, psychosocial first aid and family tracing, as well as hygiene promotion, health messaging and awareness and eventually supported to cover basic needs through a one-off unrestricted cash disbursement.

A selection criterion will be developed together with the community stakeholders and representative and adapted to identify the most vulnerable and subsequently used to guide the beneficiary selection process. The community will be consulted, listened to and informed of the selection process through the meetings with key stakeholders. Reverification of targeted households will be done referencing the standard selection criteria to ensure a well-informed beneficiary target. This way, the communities will have a chance to influence the operational strategy and provide key information on needs as they evolve.

The initial beneficiary selection criteria will include families of injured persons, and women headed households who lost their livelihoods due to the explosion. The criteria will be widely disseminated in a transparent way and will be revised as situation unfolds and more information is made available following the assessment which is ongoing.

Estimated disaggregated data for population targeted: Disaggregated data will be made available as soon as registration process is completed. This will be provided in any future updates/reports of this operation.

Scenario planning

Scenario	Humanitarian consequence	Potential Response
Best Scenario: Affected community receives emergency assistance within few weeks to a month, from the partners and government, while waiting for necessary measures to facilitate their return to a normal life.	<p>Affected communities have access to emergency shelter from the government and private sector.</p> <p>Health facilities rapidly regain the capacity to care for emergencies and health needs in the communities</p> <p>No damages at essential water sources</p> <p>Affected communities can continue physical distancing to curb the rising trend of COVID-19 cases in their community.</p>	The implementation of this DREF operation is finalized within planned timeline, in coordination with authorities and other stakeholders.
Most likely Scenario: Affected population receive emergency assistance within three months, while waiting for measures which will allow them to return to their homes.	<p>Affected communities have no access to adequate health and mental care</p> <p>Community remains highly exposed to the spread of Covid-19 within affected community because of overcrowding in unsanitary conditions</p> <p>Health facility remain overwhelmed for several days and unable to cater for medical emergencies in the communities, with temporary shortage of doctors, nurses and essential hospital drugs (including anaesthetics, EM drugs)</p>	This DREF operation is implemented as planned with possibility of a timeframe extension and adjustment of the operational strategy based on the specific situation.

	<p>Some water sources are unusable / contaminated, some damages at WASH facilities carry risk of water borne diseases outbreaks</p> <p>Vulnerability of affected families increases due to trauma and need to cover medical bills, exposing them to negative coping mechanisms.</p>	
<p>Worst case scenario: Affected population receives no support within 3 months and cannot access adequate health and psychological care support</p>	<p>Affected communities have no access to adequate health and mental care</p> <p>Health facilities remain overwhelmed for several weeks and unable to cater for medical emergencies in the communities, with extended shortage of doctors, nurses and essential hospital drugs (including anaesthetics, EM drugs)</p> <p>Several water sources are unusable / contaminated, heavy damages at WASH facilities carry high risk of water borne diseases outbreaks</p> <p>Vulnerability of affected families increases, exposing them to negative coping mechanisms</p>	<p>GRCS mobilises more volunteers and financial resources to support relevant response sector.</p> <p>GRCS engages its national and international partners to develop an exit strategy through a medium-to-long term project with a view to supporting development of livelihoods within the affected community.</p>

Operation Risk Assessment

The staff and volunteers may face some risks in implementing this operation. These include:

- Roads destroyed by the explosion might pose potential risks during movement of staff and volunteers.
- Poor telecommunication network in the community can pose a risk to staff and volunteers when communicating and receiving feedbacks through mobile phones and other electronic gadgets.
- The high level of stagnant water might present potential hazards during the movement of staff and volunteers as they are likely to fall in open pits or get hurt by obstacles including broken bottles during movement.
- This DREF operation faces risks related to the current COVID-19 pandemic in the operational community.

Some of the risks also include sexual exploitation and abuse faced by women and young girls especially at shared spaces.

The risk mitigation measures that are put in place include:

- Movement of staff and volunteers will be coordinated based on security clearance.
- Identification of PSEA focal points and training staff, volunteers and community stakeholders on PSEA
- All volunteers will be insured for the duration of the operation.
- All operations field teams will be provided with safety gears, safe water and food packages.
- Volunteers will be trained on Epidemic Control to strengthen community surveillance and hygiene promotion.
- Ensure community engagement to provide clear explanations on the role of Red Cross, the support being provided and beneficiary selection criteria to be communicated clearly.
- Regular briefings will be organized to remind volunteers and staff on their behaviour and Safer Access.
- Coordination will be maintained between the National Society and IFRC to ensure that all security measures are adhered to.
- Constant communications check-in measures with base by all operation staff will be sustained.
- Regular security updates will be organized, and information disseminated.
- The use of other IT means of contact system to ensure communications during follow-up missions.

Furthermore, GRCS has developed an extensive CVA Risk Register with identified mitigation measures, which will be applied as necessary.

B. Operational strategy¹

Overall Operational objective:

The overall objective of this operation is to provide emergency assistance to at least 2,000 directly affected persons (400 households) by the explosion in Apeate Community near Bogoso in the Western Region. This will be done by immediate provision of first-aid services, supporting restoration of family links, providing psychosocial first aid to both the affected population and volunteers. Hygiene promotion will be ensured by the provision of essential items, and basic needs ensured by supplying affected families with a one-off multipurpose cash disbursement.

Due to the limited information at the moment, the GRCS will avail volunteers to support Government during multisectoral assessment and will amend its operational strategy as needed based on new information received. Coordination with other local and regional active organizations will also be ensured in order to identify commonalities and cover gaps. Women groups, leaders or their representatives, youth, elderly and disabled representatives across all ages will be consulted during this process as the area needs rebuilding. Community meetings well represented by the different groups will be held during the assessment, identification and selection of most affected families, distribution, and further engagements throughout the project timeframe. This will also play a role in getting community feedback for the operation and also create mechanisms for complaints at any phase of the project.

Proposed strategy

GRCS, through its thematic core areas of focus, will ensure collective response to the most urgent needs of the explosion affected population. The strategy will include gender-sensitive and protection in all programming, psychosocial support, community engagement and accountability to affected people.

The DREF operation will provide support in the following sectors:

1. Emergency Shelter (Target: 200 people or 40 HH)

In the first few hours following the disaster, the NS distributed 20 tents which can accommodate 5 people each, i.e., 100 persons overall, and provided 20 shelter kits to support repairs to damaged houses of 20 families (100 people). As the Government will engage assessment to determine the next steps in the recovery process, the NS is requesting for replenishment of the distributed items through this operation.

2. Livelihoods and basic needs (Target: 2,000 people or 400 HH)

Homes and businesses in the area surrounding the explosion have been destroyed and it is likely that affected families are amongst those that have lost (partially or totally) their dwellings and livelihoods and their source of income. As such, the intervention will provide a multipurpose unconditional cash grant to 400 households to support their food and household needs, since Government is already covering for their medical costs.

The use of cash assistance is the preferred modality as markets are open in the nearby community of Bogoso, which is much larger. As such, recipient families can have access to varied services including health care. The National Society has experience in using CVA modalities and will duly consult targeted families on identification of primary recipient for each household, provide sensitization on the use of the cash following IFRC guidelines for food and basic needs, support them in accessing their cash grants as they are stationed at the Financial Service Provider (FSP) cashing points. GRCS has an existing framework agreement with Fidelity Bank to carry out Cash Transfers through Mobile Money. The FSP provides a statement of disbursements at the end of the operation while the NS confirms the statement by comparison with beneficiary declaration notes.

To support this operation, further 20 volunteers will be oriented/trained on Cash and Voucher Assistance and deployed to support cash activities. Volunteers will also conduct post distribution monitoring and market monitoring which will last for two days, 2 weeks after the distribution. Overall, volunteers will work for a total of seven days in this sector, supporting targeting as well.

The cash grant has been calculated at the minimum food basket rate, set by the Cash Working Group at 550 Ghana Cedis (see content and cost of the food basket in table below). In addition, 390 Ghana cedis will be allocated to support procurement of water collection and storage items for the households and blankets. As such, the total amount of the cash grant per household targeted will be 940 Ghana Cedis, which is equivalent to 137.5 Swiss Francs.

¹ The plan should be prepared by the National Society, with support from the Secretariat technical departments and support services.

Table 2: Calculation of cash grant per household

Item description	Quantity per day (kg)	Quantity/month/person (kg)	Unit of measure	Quantity for HH of 5 persons (kg)	Cost in GHS
Rice	0.3	10	Kgs	50	320
Dry beans	0.066	2	Kgs	15	100
Cooking oil	0.025	0.75	litres	6	35
Fine salt	0.006	0.2	Kgs	5	10
Sugar	0.02	0.6	Kgs	5	15
Vegetables	NA	N/A	Kgs	N/A	20
Potatoes	N/A	N/A	Bag	10	50
Total per month for food					550
Item description	Quantity	Unit /HH	Quantity /HH	Unit Cost	Total Cost in GHS
Kitchen set	1	per HH	1	1	150
Jerry cans	1	per HH	1	1	50
Blankets	2	Per HH	2	95	190
Total per month for essential HH					390
GRAND TOTAL FOR FOOD AND HOUSEHOLD ESSENTIALS					940

3. Health (2,000 people or 400 HH)

First Aid and Psychological first aid (PFA) will be provided to families affected by the disaster and the volunteers. First aid will be delivered following CBHFA protocols and volunteers will be trained in CBHFA. Visits in communities and areas where affected individuals have been hosted will make sure that wounded individuals may be medicated / referred as necessary and that access to health services may be ensured for medical emergencies, (including obstetric and paediatric emergencies), also employing ambulances when necessary. Regular coordination with health authorities will ensure that cases may be referred to facilities with strengthened capacities. Volunteers will be engaged to support continuity of preventative care at community level, to ensure that access for ANC/ PNC, vaccination services (including for COVID-19) and NCDs clinics is maintained. PFA will be delivered with the aim to ease stress experienced from the tragedy. Volunteers will be holding Psychosocial Support (PSS) sessions in affected communities and disseminating RCCE messages related to COVID-19 safety awareness and on hygiene promotion, to reduce the risk of epidemic outbreaks due to overcrowding. Facemasks will also be distributed by volunteers during their community engagement activities to both promote adherence to COVID-19 regulations and protect them from contracting the virus. An initial 20 volunteers will be engaged in the activities that will include:

- Provision of first aid and follow up at community level for referral of surgical / medical emergencies, including by ambulance when necessary
- Community health promotion in affected areas for ensuring continuity of access to preventative health services (ANC/ PNC, NCDs clinics, vaccinations, including for COVID-19)
- Provide PFA to targeted community and volunteers, once a week in group session (4 sessions) throughout the first month of operation. All cases requiring professional support will be referred to appropriate service at the local health care centers.
- Distribution of 2 treated mosquito nets per household to control or prevent vector borne diseases. A total of 800 mosquito nets will be procured and distributed.
- Health promotion, including Covid-19 awareness (to be conducted and budgeted together with hygiene promotion under WASH).

4. Water, Sanitation and Hygiene – WASH (2,000 people or 400 HH)

Following the explosion, the entire affected area is currently filled with rubble. There is need to support sanitation of this area. GRCS will conduct below activities while assessments are completed, to determine specific WASH needs created by the accident.

- Procurement and distribution of hygiene kits for 400 families. These kits shall contain bathing soap, toothpaste, toothbrushes, etc for household personal hygiene.
- Provision of dignity kits to 274 women and girls of childbearing age who represent 24% of the targeted females to serve for 2 months. Each kit shall contain sanitary pads, panties and bathing soap for women and girls.
- Procurement and distribution of Aquatabs will be carried out for water purification and safe storage over a period of 45 days. A total of 18,000 tablets of Aqua tabs will be procured and distributed.

- Installation of 20 handwashing facilities
- Conduct hygiene and sanitation campaigns twice a month for 2 months, to clear the rubble and remove all signs of the traumatic event. This activity will be coupled with health and hygiene promotion, with emphasis on awareness against Covid. A total of 20 volunteers will be deployed conduct these sessions which will aim to clear the rubble to wipe as much as possible, the physical traces of this traumatic event.
- Continued assessments and monitoring are also integrated in the operation to ensure that the operation is in line with the evolving situation on the ground.

5. Family tracing and Reunification

GRCS will be providing and supporting authorities with family tracing and reunification with technical and financial support from ICRC. This will go on for next 2 weeks, to ensure no one is left behind. Volunteers will be trained on Restoring Family Links and will be supported technically from the Headquarters to provide guidance as needed.

Volunteers will be involved in tracing community members that must have fled and in some cases could not find their way back to family or relatives. They will engage with the Department of Social Welfare and the security operatives to enhance coordination and support in covering related gaps. To note, this activity will be fully funded by ICRC.

Protection, Gender and Inclusion (PGI): Women and children are more vulnerable especially owing to the fact of their homeless condition in the affected community. As such, PGI will be streamlined throughout the intervention, ensuring that volunteers receive adequate briefing during the various refreshers. GRCS will ensure that protection issues are taken into account and that everyone feels protected despite age, gender and disability status. The National Society will conduct awareness-raising and orientation session on Protection, Prevention and Response to Sexual and Gender Based violence (SGBV) and Prevention of Sexual Exploitation and Abuse (PSEA). For inclusion of everyone, engagement with people in the centres will be done to ensure that all the assistance is distributed equitably and impartially. Gender roles will be considered when setting up distribution time (especially during distribution of dignity kits) and dates and during hygiene promotion activities. As part of the needs assessment and analysis, a gender and diversity analysis will be included in all sector responses including Shelter, Livelihoods, Health and WASH, to understand how different groups have been affected, which will inform any revision of the operational strategy. During all trainings for the different sectors, PGI will be integrated to ensure harmonization of the overall project PGI component. All sectors will seek to meet the [IFRC minimum standards for protection, gender and inclusion in emergencies](#)

Community Engagement and Accountability (CEA): Community Engagement and Accountability (CEA) will be mainstreamed throughout the intervention to guarantee meaningful participation of the affected communities. An effective complaints and feedback mechanism will be set up to ensure community feedback is taken into account in the implementation of this EPoA. This will also help in the event the situation changes, to ensure that the community is listened to with regards to any change of strategy. Hygiene and health promotion sessions will also be instrumental in collecting feedback and responding to community concerns.

- Conduct orientation of 20 volunteers in CEA to ensure they can clearly convey to communities the objectives of the operation, ensure a good flow of information and clear roles and responsibilities between representatives, community leaders and committees.
- Hold meetings with affected communities.
- Set up feedback system and ensure to process the complaints received. Feedback will also be provided to the community to ensure they are aware their feedback had been considered. Separate feedback mechanisms will be set up to receive sensitive and/or serious complaints.
- Identify and orient a CEA focal point in the community to collect complaint and feedback while reporting to the HQ throughout the project timeframe. A lead focal point on CEA will also be appointed to receive all feedback and complaints at HQ level for reporting.
- The different response sectors will incorporate the main practical tools of the [CEA in Emergencies Toolkit](#), in particular to ensure that assessments are well integrated and capture key community demands and the most appropriate communication channels to be established with affected communities.

Operational support services

Human Resources: Overall, about 50 volunteers will be engaged in this operation to support the various sectors. Some of the volunteers will be selected amongst the National Disaster Response Team members and will support in assessments, coordination and response. This will ensure that effective response preparedness and National Society surge capacity mechanism is maintained. Insurance for volunteers is covered in this operation as well as their incentives for each deployment. The deployed National Society staff related cost is also included in the operation (travel costs). National Society staff will also be on the field to provide support. This includes, the Disaster Management Coordinator, the Logistics Manager, the Cash focal point, the Communications Manager and the Secretary General. Their costs are imputed to this operation.

The IFRC Cash focal point will provide technical guidance on Cash and Voucher Assistance (CVA) activities. The overall operation will be led by National Society Disaster Management Coordinator.

Finance and Administration

The Finance & Administration strategy will be focused on the following:

- A Finance Officer will be responsible and assigned to the operation, who will strictly adhere to the budget lines spent.
- Submission of GRCS request to the finance will be submitted at least 5 days before the travel dates to facilitate proper planning.
- All retirement and refunds at the branches and HQ officers need to be timely submitted.
- Accommodation for volunteers' trainings in the capital state will be budgeted
- Additional cars are needed to rent in the Branches for easy mobility.

Through its Finance Department, the IFRC will provide necessary support to the operation to review and validate budgets, bank transfers, technical assistance to the National Society regarding expense justification procedures and the review and validation of operational invoices. All transfers should be done at least 5 days before the scheduled activity days to enable the Branches request.

Planning, Monitoring, Evaluation and Reporting (PMER)

RCS will oversee all operational, implementation, monitoring and evaluation, and reporting aspects of the DREF implementation. The Planning, Monitoring, Evaluation, and Reporting (PMER) unit of GRCS will work closely with IFRC Country Cluster Delegation and will be responsible for performance-based management systems and the overall quality and effectiveness of the operation. The performance of the operation will be monitored through a robust system of accountability and reporting, with emphasis on tracking the progress of outputs to inform operational planning and decision making. The PMER unit will develop a monitoring schedule and appropriate tools to collect data on key performance indicators to ensure accountability, transparency, and financial management of the operation.

GRCS staff in the Operations, Disaster Management, Health, WASH and CEA units will conduct monitoring and supervision visits to the branch and affected community to provide technical support and ensure that activities are implemented according to agreed standards. For quality assurance, regular monitoring of the planned activities will be carried out by the DREF implementation team, while scheduled monitoring visits will be made jointly by the GRCS team and IFRC. Findings from these monitoring visits will be analyzed for reporting and decision-making purposes.

Apart from scheduled monitoring, the day-to-day monitoring on the progress of the operation will be the responsibility of the PMER unit and the coordinating team based on the plan of action and outputs indicators. They will advise on any delay or difficulties faced during implementation so that appropriate support or corrective measures can be adopted in a timely and appropriate manner. Reporting on the operation will be done per the IFRC minimum reporting standards, there will be series of reports to monitor performance including activity reports, monitoring reports, internal tracking tool to compare the approved plan of action with actual performance and identify constraints and recommended remedial actions as required. A day lesson learned workshop will be conducted at the end of the operation, and final narrative report will be produced a month after the end of the timeframe, that will outline key achievements, best practices, challenges, and lessons learned that will be referenced when responding to future fire disaster of such nature.

Logistics

All procurement relating to this operation will follow the regulations of the Ghana Government and IFRC standard procurement systems and procedures to ensure transparency and accountability. Quality inspection will be undertaken at the end of all procurement processes before items are accepted and goods received notes signed.

GRCS has identified cash disbursement as the preferred response mechanism under this sector because it currently has an existing agreement with a financial service provider (FSPs), Fidelity Bank. Recently, with the COVID-19 Response, GRCS used agreement with Fidelity Bank to provide multipurpose unconditional cash transfer and cash for Housing to target beneficiaries. However, with few challenges reporting during the process of cash-out, GRCS will use agreement with the FSP to provide the unconditional cash to the 400 households.

Communication

A communication pillar is established by the National Disaster Management Organization (NADMO), of which Red Cross is part, with request for partners to provide support in communication activities around response to this disaster. GRCS will document its response actions and their impact in a documentary which will be funded through this operation.

Security Situation Review

To reduce the risk of Red Cross Red Crescent personnel falling victim to crime or violence, active risk mitigation measures have been communicated with staff and volunteers through induction or briefing exercise. The briefing exercise including putting out some potential security issues and how they can mitigate, report or manage some those issues. Relating to safer access concern, one of the main benefits of the GRCS is the nationwide recognition of the National Society. This has rendered ease and facilitation with affected community head and most importantly the community people themselves. The GRCS is well accepted and trusted by the community. GRCS is presently reviewing the existing risk matrix to inform all staff and volunteers about some of the risks and how this could be handled or mitigated. The GRCS has been also advised to either recruit or appoint a skilled security focal point to raise the standards and extend professional security support to volunteers operating under insecure, remote and high-risk operating environments.

IFRC Cluster Security has been extending direct support to the GRCS. The IFRC security plans will apply to all IFRC staff throughout. 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. Minimum Security Requirements (MSR) is in place for Ghana.

C. Detailed Operational Plan



Shelter

People targeted: 200

Male: 86

Female: 114

Requirements (CHF): 10,405

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 targeted households that have access to emergency shelter (Target 15%)															
	Shelter Output 1.1: Shelter and settlements and basic household items assistance is provided to the affected families.	- # of households reached with emergency shelter (Target: 40 HH) - # of shelter items replenished (Target: 20 shelter kits and 20 family tents)															
	Activities planned Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
AP005	Coordination with other relevant sectors for integrated programming																
AP005	Coordination with government and other stakeholders																
AP005	Replenishment of shelter kits and family tents distributed from GRCS warehouse.																
AP005	Conduct post distribution monitoring (PDM) of shelter/household items distributed (Note: to start 14 days after distribution)																



Livelihoods and basic needs

People targeted: 2,000

Male: 860

Female: 1,140

Requirements (CHF): 62,490

P&B Output Code	Livelihoods and basic needs Outcome 1: Communities, especially in disaster and crisis affected areas, restore and strengthen their livelihoods	% of surveyed households supported with cash transfers that report that the assistance was appropriate to meet their emergency needs (Target: 100%)

P&B Output Code	Livelihoods and basic needs Output 1.5: Households are provided with unconditional/multipurpose cash grants to address their basic needs	<ul style="list-style-type: none"> # of volunteers trained on CVA (Target: 20) # of HHs to receive MPCT (Target: 400) 															
		Activities planned Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
AP081	Analysis of the local market to identify availability/access to shelter and household items (can be two separate activities)																
AP081	Beneficiary identification and Registration.																
AP081	Unconditional/multipurpose cash distributions																
AP081	Market monitoring																
AP081	Training of Volunteers on CVA																
AP081	Conduct post distribution monitoring (PDM) (Note: to start 14 days after distribution)																



Health

People targeted: 2,000

Male: 860

Female: 1,140

Requirements (CHF): 10,074

P&B Output Code	Health Outcome 1: The immediate risks to the health of affected populations are reduced	% of targeted households that report they were satisfied with the health services provided (Target: 100%)															
		Health Output 1.1: The health situation and immediate risks are assessed using agreed guidelines	<ul style="list-style-type: none"> # of volunteers trained in CBHFA (Target: 20) # of people provided with FA services (Target: TBD) # of health awareness sessions conducted (Target: 4 sessions) 														
	Activities planned Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
AP022	CBHFA training for volunteers																
AP022	Provision of First Aid and Referral of surgical/medical emergencies																
AP022	Community Health support for continuity of essential preventive services																
AP022	Health Awareness and Promotion by 20 volunteers (jointly with Hygiene promotion)																
P&B Output	Health Output 4.1: Vector-borne diseases are prevented	# of Mosquito nets procured and distributed (Target: 800)															

Code	Activities planned Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
AP021	Procurement of Treated Mosquito nets																
AP021	Distribution of mosquito nets																
P&B Output Code	Health Outcome 6: The psychosocial impacts of the emergency are lessened	% of people who acknowledge usefulness of the PSS sessions (Target: at least 50%)															
	Health Output 6.1: Psychosocial support provided to the target population as well as to RCRC volunteers and staff	# of people who receive mental health and psychosocial services (Target: TBD)															
	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																
AP023	Provide PSS to people affected by the crisis/disaster																
AP023	Provide PSS to staff and volunteers																



Water, sanitation and hygiene

People targeted: 2,000

Male: 860

Female: 1,140

Requirements (CHF): 42,500

P&B Output Code	WASH Outcome1: Immediate reduction in risk of waterborne and water related diseases in targeted communities	<ul style="list-style-type: none"> • % of target population who, state they are satisfied with their access to water and sanitation facilities (Target: 100%) • % of people who can identify, without prompting, key times to wash hands (Target: 100%) • % of household that are found to be using treated water during random water treatment test (Target: 100%) 															
	WASH Output 1.1: Continuous assessment of water, sanitation, and hygiene situation is carried out in targeted communities	<ul style="list-style-type: none"> - # of volunteers trained in WASH (Target: 20) • # of households who receive water treatment support (Target: 400) 															
	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	Conduct initial assessment of the water, sanitation and hygiene situation in targeted communities																		
AP026	Continuously monitor the water, sanitation and hygiene situation in targeted communities																		
AP026	Coordinate with other WatSan 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	# of Aqua tabs distributed (Target: 18,000)																	
	Activities planned Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16		
AP026	Procurement of Aquatabs																		
AP026	Distribute 18,000 Aquatabs to 400 HH for 45 days																		
AP026	Train population of targeted communities (on safe water storage and safe use of water treatment products)																		
P&B Output Code	WASH Output 1.3: Hygiene promotion activities which meet Sphere standards in terms of the identification and use of hygiene items provided to target population	# of handwashing facilities installed (Target: 20)																	
	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	Install 20 handwashing facilities																		
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	- # of family hygiene kits distributed (Target: 400) - # of dignity kits distributed in 2 months (Target: 548 dignity kits)																	
	Activities planned Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16		
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 400 hygiene kits, sufficient for 1 month																		
AP030	Distribute dignity kits to 274 women and girls for 2 months																		

AP030	Orient population of targeted communities in use of distributed hygiene kits.																		
AP030	Monitor use of hygiene kits and water treatment products and user's satisfaction through household surveys and household water quality tests.																		
P&B Output Code	WASH Output 2.4: Hygiene promotion activities are provided to the entire affected population.	<ul style="list-style-type: none"> - # of hygiene and health awareness sessions conducted (Target: 4 sessions) - # of people reached through hygiene promotion activities (Target: 2000 people) 																	
	Activities planned Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16		
AP030	Conduct baseline survey to 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.																		



Protection, Gender and Inclusion

People targeted: 2,000

Male: 860

Female: 1,140

Requirements (CHF): 0

P&B Output Code	Protection, Gender & Inclusion Outcome 1: Communities become more peaceful, safe and inclusive through meeting the needs and rights of the most vulnerable.	# of people reached by protection, gender and inclusion services (Target: 2,000)																	
	Protection, Gender & Inclusion Output 1.1: Programmes and operations ensure safe and equitable provision of basic services, considering different needs based on gender and other diversity factors.	# of PGI assessments conducted (Target: 1)																	
	Activities planned Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16		
AP031	Support sectoral teams to include measures to address vulnerabilities specific to gender and diversity factors (including people with disabilities) in their planning																		

AP031	Support sectoral teams to ensure collection and analysis of sex-age and disability-disaggregated data (see guidance in Minimum Standards)																		
P&B Output Code	Protection, Gender & Inclusion Output 1.2: Programmes and operations prevent and respond to sexual- and gender-based violence and other forms of violence especially against children.	<ul style="list-style-type: none"> # of Volunteers Trained on RFL and tracing target – 20 # of CEA focal points identified – Target - 1 																	
AP033	Provide essential services (including reception facilities, RFL, and access to education, health, shelter, and legal services) to unaccompanied and separated children and other children on their own supported by ICRC																		
AP033	Training on Volunteers in PSEA and PGI																		
AP033	Identification and recruitment of PSEA focal points																		
AP033	Training of Volunteers on RFL																		

Strategies for Implementation

Requirements (CHF): 46,778

P&B Output Code	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	<ul style="list-style-type: none"> # of volunteers insured – 50 # of volunteers provided with PSS - 20 																		
	Output S1.1.4: National Societies have effective and motivated volunteers who are protected																			
	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																			
P&B Output	Outcome S2.1: Effective and coordinated international disaster response is ensured	<ul style="list-style-type: none"> % of feedback received and responded to (Target: at least 70%) 																		

Code																	• % of people who acknowledge consideration of their complaints (Target: 100%)	
P&B Output Code	Output S2.1.3: NS compliance with Principles and Rules for Humanitarian Assistance is improved																• # of community feedback systems set up (Target: 1)	
	Activities planned Week																• # of CEA focal point identified and engaged (Target: 1)	
		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																	
AP049	Advocate for engagement with partner and operating NS on the promotion and use of the Principles and Rules																	
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																	
AP084	Exit strategy developed that includes community consultation and sharing of the final evaluation results with the community																	
P&B Output Code	Outcome S3.1: The IFRC secretariat, together with National Societies uses their unique position to influence decisions at local, national and international levels that affect the most vulnerable.																# of video documentaries produced	
	Output S3.1.1: IFRC and NS are visible, trusted and effective advocates on humanitarian issues																	
	Activities planned Week																	
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	
AP053	Communications work																	
AP053	Media engagements																	
AP053	Production of video Documentary																	
AP042	Conduct lessons learnt workshop																	

Funding Requirements

The overall amount requested for implementation of this EPoA is CHF 172,246 as detailed in attached budget.

International Federation of Red Cross and Red Crescent Societies

*all amounts in Swiss
Francs (CHF)*

DREF OPERATION

MDRGRH017 - GHANA - EXPLOSIONS IN APEATE

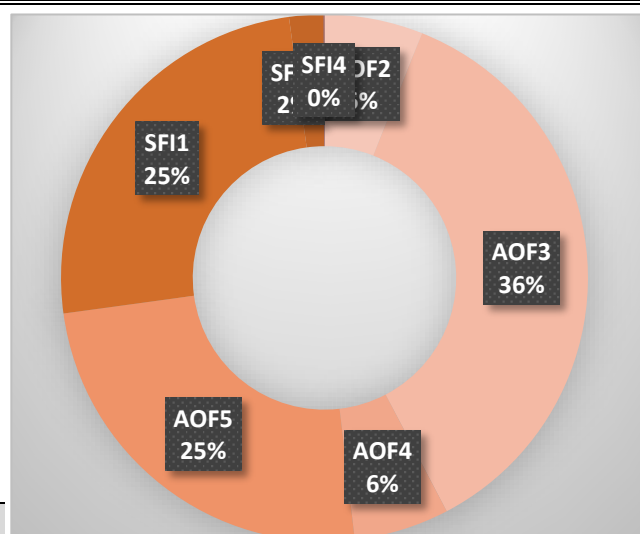
28/01/2022

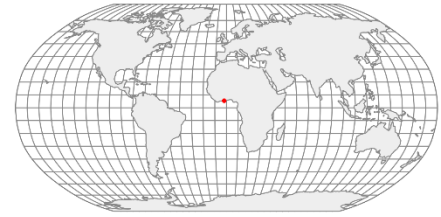
Budget by Resource

Budget Group	Budget
Shelter - Relief	6,370
Clothing & Textiles	5,321
Water, Sanitation & Hygiene	38,723
Medical & First Aid	1,774
Cash Disbursement	56,016
Relief items, Construction, Supplies	108,203
Distribution & Monitoring	3,399
Transport & Vehicles Costs	4,434
Logistics, Transport & Storage	7,833
National Staff	0
National Society Staff	3,141
Volunteers	12,119
Personnel	15,260
Workshops & Training	6,281
Workshops & Training	6,281
Travel	9,755
Information & Public Relations	2,217
Office Costs	443
Communications	1,212
Financial Charges	89
Other General Expenses	10,440
General Expenditure	24,155
DIRECT COSTS	161,734
INDIRECT COSTS	10,513
TOTAL BUDGET	172,246

Budget by Area of Intervention

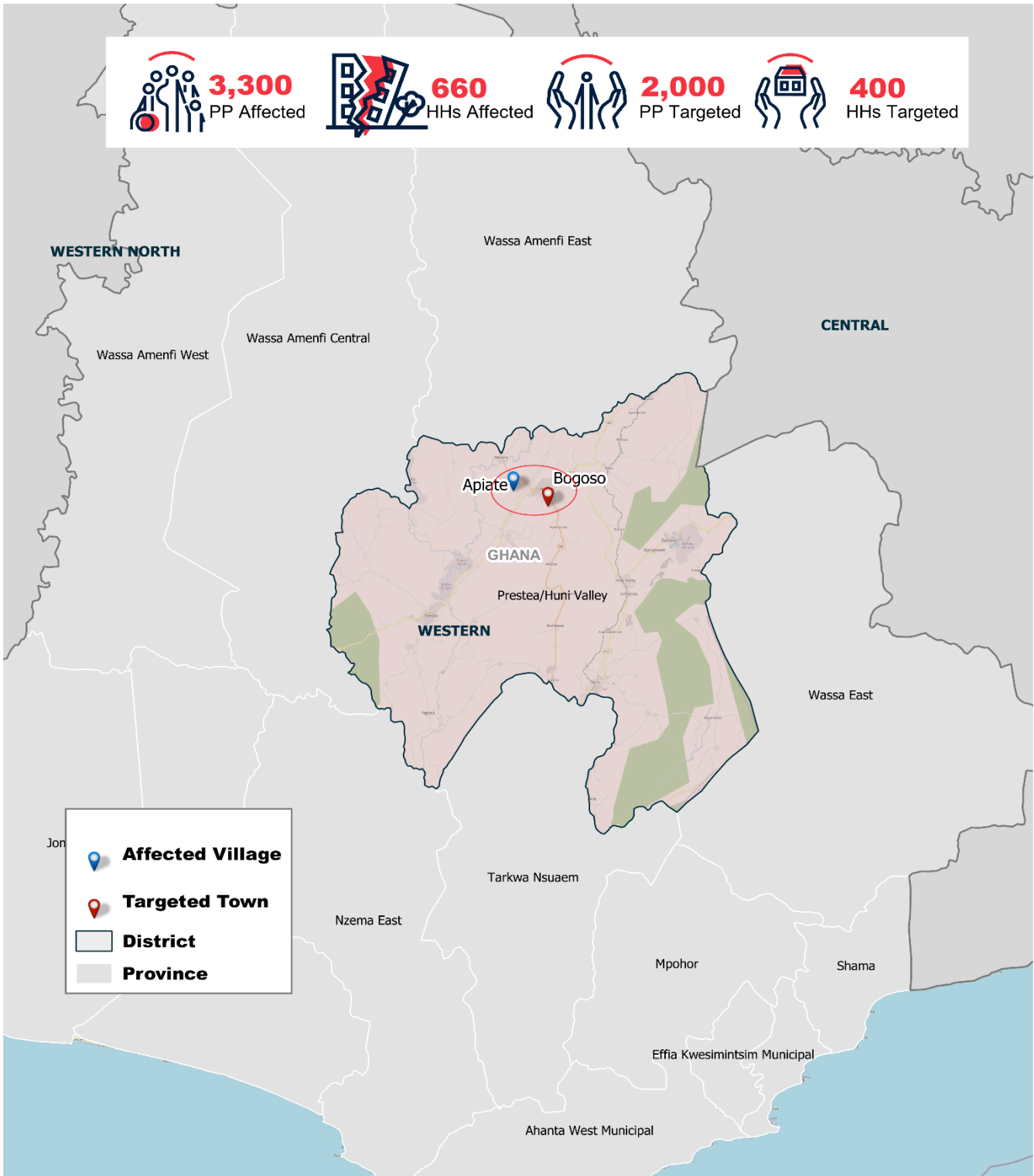
AOF2 Shelter	10,405
AOF3 Livelihoods and Basic Needs	62,490
AOF4 Health	10,074
AOF5 Water, Sanitation and Hygiene	42,500
SFI1 Strengthen National Societies	43,064
SFI2 Effective International Disaster Management	3,620
SFI4 Ensure a strong IFRC	94
TOTAL	172,246





Ghana : Explosions in Apiate

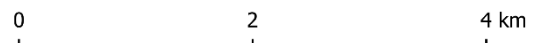
28 January 2022 • OT-2022-000152-GHA



Legend

- Affected Village**
- Targeted Town**
- District**
- Province**

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, Ghana RC, IFRC. Map produced by: IFRC Africa Regional Office, Nairobi



Reference documents



Click here for:

- Previous Appeals and updates
- Emergency Plan of Action (EPoA)

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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.

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.