

Emergency Plan of Action (EPoA)

The Gambia: Internal Displaced Population in West Region

DREF Operation	MDRGM015	Glide n°:	OT-2022-000159-GMB
For DREF; Date of issue:	18 February 2022	Expected timeframe:	01 month
		Expected end date	31 March 2022
Category allocated to the of the disaster or crisis: Yellow			
DREF allocated: CHF 105,152			
Total number of people affected:	2,464 people	Number of people to be assisted:	2,464 people 302 households (2,204 IDPs 225 households and 260 people, 77 Host families)
Provinces affected:	West Coast Region	Provinces/Regions targeted:	Foni Kansala, Foni Bintang Karanai District West Coast Region
Operating National Society presence (n° of volunteers, staff, branches): The Gambia Red Cross Society (GRCS) with 100 volunteers and 25 member staff, West Coast Region branch.			
Red Cross Red Crescent Movement partners actively involved in the operation: International Committee of the Red Cross (ICRC) and the International Federation of Red Cross and Red Crescent Societies (IFRC).			
Other partner organizations actively involved in the operation: The National Disaster Management Agency (NDMA), The Gambia Immigration Department (GID), the Gambia Police Force (GPF), the Gambia Food and Nutrition Agency (GAFNA) and the Foni Ding Ding Federation (FDDF).			

A. Situation analysis

Description of the disaster

Monday 24 January 2022, sporadic gunfire was heard from the Ballen Village, Foni Kansala District, West Coast Region in The Gambia, not far from the Gambia/Casamance border. According to The Gambia Red Cross Society GRCS Communication Officer and the residents of Foni, the Economic Community of West African States ECOWAS military mission the Gambia ECOMIG chased a truck carrying wood logs. The truck driver manoeuvred within villages in the Fonis and headed towards Casamance for sanctuary. The driver was chased by the soldiers' crossing over the border in Casamance and found themselves within the (MFDC) "Mouvement des Forces Democratiques de la Casamance" territory. This prompted the exchange of gunfire between the two forces ECOMIG vs MFDC As a result, two soldiers were killed, seven held in captivity by MFDC. The ICRC negotiation led to the release of the 2 dead bodies, later carried to the ECOMIG barracks by the GRCS Emergency Response Team (ERT).



Figure 1: Geographical location of Casamance



All of these events culminated in tension and insecurity that caused violence of all kinds and displacement of people. As of 12 February 2022, a total number of 2,464 people were affected, comprising 2,204 internal displaced population (IDPs). Presently, the region remains in a state of economic precariousness. At the time of the clash, all livelihood activities were stopped slowing down the general economic context that could not efficiently help the population meet the basic social needs, both for IDPs and host population. Some of them rely on

their cashew farms and Community Cashew Farm has been burned down, others leave the village, and left their animals behind. The villages left by the IDPs are around the rebels area. But from GRCS information, few men from the IDPs have started going back to their original villages to see their animals, only during the day, to control them and put them at a safer place. From GRCS continuous report on the situation, those men who came from that place to feed the animals and control their cashew farms did not move with their families (women and children). So generally, they come back to the host villages to see their families, try to eat something, and then go back. In order not to attract attention, however, they do not bring heavy equipment/materials with them because the distances are long and the areas unsafe.

Since the onset, the GRCS member staff and volunteers have been conducting assessment and distribution of Essential Household Items (EHI)s to displaced families. Since 28 January 2022, a total of 2,204 people were displaced representing 225 families. They are hosted by 77 families (comprising 260 people) in the villages of Arangaleh, Bajagarr, Kampant, Kambong, Bwiam, Sibanor, Bujingha, Mandina, Burock, Kanfenda, Krunlai, Buluntu, and Batabu, located within the Foni District. That makes a total of 2,204 IDPs to benefit from this operation.

Summary of the current response

Overview of Host National Society in the country

To respond to the emergency situation, the Gambia Red Cross Society has dispatched its Emergency Response Team to conduct needs assessment and initial distribution of Essential Household Items (EHI) and other materials. However, the ERT is not able to access all affected villages due to insecurity. The International Committee of the Red Cross (ICRC) office in Dakar, Senegal, has also deployed expatriates including a medical doctor for the emergency operations in the Gambia. All staff and volunteers destined for the operations wear bibs/aprons which are clearly marked with the protective emblem and white helmets. All vehicles also display the Red Cross emblems and a large red cross flag for identity and protection in the field. Movement of all vehicles in the field are conducted in organized convoy form.



Figure 22 GRCS volunteers assessment process

reports (SitReps) on the emergency have been developed and shared.

Upon receiving the information about the clashes in the Fonis, the GRCS immediately deployed the Emergency Response Team of the West Coast region supported by the National Society Emergency First Aid Coordinator and Communication Coordination, COVID-19 Manager and Logistics staff from national Headquarters and the West Coast Region to conduct initial assessment / humanitarian requirements of the affected population. Three utility vehicles have been deployed to the area. The welfare of the team is well maintained. Communal cooking (breakfast, lunch and dinner) is organized, used clothes distributed, as all of them left unexpectedly to the field without enough personal clothes. Airtime/credit was provided for staff to ease communication. The organization of the response modalities are well established and functional as the ERT is working closely with stakeholders in the field notably the Police, the Gambia Food and Nutrition Agency (GAFNA), the chief and head of villages, etc. Four situational

The NS has so far distributed the following items (Table 2) to 120 households. This distribution took place on 25 January 2022 to the first displaced HHs arriving in Foni Kansala and Foni Bintang Karanai since the beginning of the shoots. Essential Household Items (EHI) distributed are from NS contingency stocks and to be replenished with the funding from DREF through this operation.

TABLE 2: EHIs AND COVID MATERIALS DISTRIBUTED

No.	ITEMS	QUANTITIES	BENEFICIARIES
1	Blankets	350 pieces	Affected population
2	Soap	183 pieces	Affected population
3	Mosquito nets	187 units	Affected population
4	Sleeping mats	360 units	Affected population
5	Face Masks	500 pieces	Volunteers
6	Hand sanitizers	120 bottles	Volunteers
7	Dettol soap	487 bottles	Affected population
8	Buckets	33 units	Affected population
9	Bleach	35 bottles	Affected population

While collecting information on the IDPs and the situation, NS has posted a [Go Alert](#) on 26 January on the IFRC platform to inform other stakeholders and partners about the situation.

Overview of Red Cross Red Crescent Movement Actions in country

IFRC: The Federation supports the NS in the development of this EPoA which aims to assist affected population. CVA training supported by IFRC was conducted by the NS staff and volunteers in December 2021. IFRC is providing technical support in each sector and will monitor the situation with GRCS. An IFRC monitoring mission to The Gambia is planned.

ICRC office in Dakar, Senegal has deployed expatriates including a medical doctor for this emergency. The ICRC ordered on 3rd February 2022 a transfer of EUR 14,500 to support the GRCS in providing food assistance to thousands of displaced people and host families who have run out of food stocks. This support is temporary and will allow the displaced to meet their basic needs for a few more days. ICRC and GRCS Director of programmes and operation visited the Emergency Response Team (ERT) and the host communities to get first-hand information from the field.

The Spanish Red Cross (SRC) has been working with GRCS for over 10 years in areas like livelihoods, Health, WASH, etc. It supports currently GRCS in the implementation of a EUTF-funded migration project. The project “assistance and protection of the most vulnerable migrants in West Africa” aims to contribute to the protection of the most vulnerable migrants, victims of smuggling and trafficking, local communities and their access to basic services in The Gambia and four other West African countries. The SRC is aware of the current situation in the Fonis and also the efforts of the NS to respond to the needs. However, because the scope of action of the EUTF-funded project is different, no direct support is foreseen to the operation.

Overview of other actors' actions in country

The Gambia government stated [in a press release](#) on 28 January 2022 that it has established a Presidential Task Force that would thoroughly investigate the deadly clashes between Senegalese ECOMIG soldiers and separatist forces of the MFDC.

Currently, the Gambia Red Cross Society is the main humanitarian organization providing assistance to the affected population. The National Society is closely working with some organisation in data collection and analysis, but no further actions engaged since the arrival of IDPs:

- The National Disaster Management Agency (NDMA),
- The Gambia Food and Nutrition Agency (GAFNA),
- The Foni Ding Ding Federation (a community-based organisation formed by the local young residents of the area).

The Gambia Police Force and the Gambia Immigration Department are guiding the NS in security matters in the areas of operation.

GRCS takes part in coordination meetings with other humanitarian actors and partners including NDMA, Foni Ding Ding Federation (FDDF), The Gambia Immigration Department, The Gambia Police Force, the Gambia Food and Nutrition Agency (GAFNA) and local authorities in the areas.

Needs analysis, targeting, scenario planning and risk assessment

Needs analysis

The main needs identified during the initial assessments was also food and water first, clothing, WASH, Health, non-food items, prevention (including COVID-19) and equipment for the displaced families. As all the displaced populations are hosted by relatives, family friends and sympathizers within the region, those host HH are also facing livelihood needs and the same Health and WASH sensitization challenges.

The shootings have caused distress and confusion among the population. The border villages prompted the movement of people, mainly women and children, to safer settlements alongside the main highway. They are being temporarily hosted by families, friends, and sympathizers. Schools within the area of the shoots were temporarily empty, as nobody dare to attend. And those schools could not be used by IDPs due to the high risk of attacks, as they were near the conflict areas. The Police in the area continues to conduct surveillance and adequately guide/advice the ERT on security matters. At time of this EPoA, most IDPs have not returned home with disruption of their livelihood activities.

- **Livelihood and basic needs**

Most of the affected population are farmers. The situation they found themselves in was not expected. Their movement to other location was a result of panic from the shooting they heard from within their settlements and the vigorous movements of heavily armed soldiers with military equipment. Hence their forceful displacement was unplanned. They left with almost nothing except bundles of clothing, with women carrying children on their backs and others held by the hands. The region remains in a state of economic depression, fear due to recurrent conflict resulting from the historic Casamance forest exploitation, and poverty. IDPs left behind their houses with no security or not properly secured, their food items, their livestock, etc. The hosts families, friends and sympathizers are all in similar living conditions and still sharing their resources with the IDPs. The food basket in The Gambia comprises of rice, beans, cooking oil, salt, sugar, onions and potatoes is the target of the assistance. All of those items are available in open markets at Sibanor and Bwiam distant of 2/3 km from the host communities.

Others needs

A preliminary finding discloses urgent need for food amongst the displaced population and host families. Other needs were identified such as healthcare, WASH, NFIs, i.e., clean water, blankets and sleeping mats, soap and bucket at the minimum as many were living in overcrowded conditions.

- **Health**

Access to health services was already a challenge before this event. Only one regional hospital is functional and is far from the affected communities (5 km away). It is located in Bwiam. The health posts in the surrounding affected villages are all closed out of fear, and It was not accessible during the time of the clash due to unsafe roads leading to Bwiam Hospital.

Affected populations need first aid assistance. With the increase in population and crowding, there is a risk of the spread of some of the recurrent community diseases in the area, such as diarrhea, waterborne diseases and malaria. Relating Covid-19, so far only the distribution of prevention materials has been done. No prevention activities and no tests are available. At national level, the number of Covid cases is increasing (1,495 cases on 11 February 2022 and spread of the Omicron variant).

There are many needs for awareness raising. Some 2,000 people in a small community with no access to toilets on top of the existing population, no access to health care and a prevalence of malaria, diarrhea in the area and airborne diseases due to the environmental conditions.

- **WaSH**

In the area where the IDPs are located, access to clean water is limited. This existed before the crisis and has been exacerbated by the massive arrival of IDPs. The number of accessible toilets is insufficient and open defecation is common practice. The promiscuity of host communities and IDPs increases the risk of chronic diarrhea epidemics.

The number of wells with clean water is limited and they dry up quickly. An estimated 10-15 families share the same well, along with their livestock. Small animals regularly die in the wells, requiring protection and chlorination as a short-term solution.

The continued use of host family equipment has also raised concerns about the deterioration of these items. After the return of IDPs, host families will become vulnerable as all their equipment and hygiene materials have been used or damaged.

ICRC and GRCS Director of programmes and operation visited the Emergency Response Team (ERT) and the host communities to get first-hand information from the field. They visited the Kampant communities where the rebels previously mounted their check points, Bwiam police station and Bujinga who hosted more than 100 of IDPs. During their visit, the IDPs have expressed an urgent need for food alongside with other needs such as RFL, dignitary kits, WaSH kits, water container as they do experience erratic electric supplies which affects the water supplies system.

Targeting

This DREF operation aims to reaching 2,464 people (approximately 302 households). This includes 225 IDP households and 77 host households of 260 people. The GRCS Information Management team in the field is still working to provide more details of the affected population whenever gathered and continues to provide humanitarian assistance. Since the majority of the affected population have not gone back home due to high security presence on ground conducting continuous patrolling as the 7 ECOMIG Captive soldiers are still held by the rebels, the planned operation will focus on the affected districts. A refined selection criterion has been developed with specific consideration for women-headed households, persons with disabilities, elderly people and/or children under 5 years, pregnant or lactating women. The NS will continue to carry on the planned assistance in their respective host communities before they return to their original communities.

According the first assessments, they were 29 persons with disabilities and 3 injured, 4 pregnant women, 5 lactating mothers, and 3 sick people recorded. Complete disaggregated data is being produced by the GRCS team in the field. Through this operation, Gambia Red Cross Society will need to conduct targeting and registration of affected population, delivery of initial humanitarian assistance to approximately 2,464 people (302 households of IDPs and Host Families) affected by the clash in the region. The verification and targeting process tool is developed and ready for deployment.

Estimated disaggregated data for population targeted

This information was not obtained during the initial needs assessment and will be provided by the detailed assessment.

Scenario planning

Scenario	Humanitarian Consequences	Potential Response
Scenario 1: The situation subsides and the IDPs return to their initial homes. Schools, health facilities, livelihood activities and other essential services resume back to normalcy.	<ul style="list-style-type: none"> ○ Short-term humanitarian needs. ○ Related to loss of livelihoods would need to be addressed. 	<ul style="list-style-type: none"> ○ Both warring parties continue to respect the truce and allow the free movement of persons and properties in and out of the border. ○ Unconditional release of detainees both military and civilians alike. ○ Red Cross is able to meet affected population in their respective communities and provide assistance.
Scenario 2: The situation becomes protracted, and volatility increased	<ul style="list-style-type: none"> ○ IDPs may be reluctant to return due to persistent fear. ○ Prolonged stay of the IDPs in host communities. ○ Consumption of food reserves of host communities and might affected the next farming season which is just few months away. ○ More IDP movements. ○ Challenges in the implementation of the required humanitarian services. 	<ul style="list-style-type: none"> ○ The resumption of the fighting. ○ Political dialogue with authorities to seek durable solutions and an end to the armed conflict.
Scenario 3: Escalation of tensions leading to further displacement, fear and hardship among the population in the entire region and surroundings.	<ul style="list-style-type: none"> ○ Depletion of food reserve. ○ IDPs movements extended to other regions. ○ The civilian population are made objects of attack by the warring parties. ○ More killings of fighters and the wanton of private and public properties. ○ Making the work of the NS much more difficult. ○ The situation can turn into a flown blown armed conflict. 	<ul style="list-style-type: none"> ○ Red Cross mandate of reaching people for support becomes difficult. ○ ICRC expands its mandate.

Risk assessment

Risks	Probability of occurrence (high, medium, low)	Severity of risk impact (high, medium, low)	Mitigation measures
Continuous tensions and insecurity affecting communities and displacement	Medium	High	<p>There have been unconfirmed reports of arrests and detentions from both sides. Two Gambians, an intelligent officer and a head of a village (Alkalo) were arrested by the Senegalese Forces. They are still in detention. The villagers are planning a protest if these people are not released at the soonest possible time. The ECOMIG military checkpoints in Bwiam villages, Foni District have been reinforced with armed soldiers. Rumours suggest reinforcement of troops from Senegalese Army and no indication of submission from either party. There is mounting tension as the MFDC rebels are planning to launch attacks to the Senegalese military camp in Bwiam village, at a time not known.</p> <p>Rumours are circulating around, stating a planned protest by the inhabitants of Foni in connection with the continuous presence/stay of the ECOMIG/Senegalese force in the Region. The same rumours suggest the immediate replacement of the Senegalese troop with ECOMIG forces from other country (Nigeria, Ghana). Failure to that, the Foni inhabitants would embark on a peaceful protest/ demonstration by the weekend of 4th - 5th of February 2022.</p> <p>All of these events culminated in tension and insecurity that caused fear and displacement of people within the area. Because of this sudden clash, the region remains in a state of economic depression, poverty and a halt to all livelihood activities that could efficiently meet the basic social needs of the IDPs and host population.</p> <p>Police has set security point on the road. The main one is on the main highway, controlled by ECOWEC. The others are managed by national police forces. When some sign boards and plots are put on the road, the area is considered as unsafe and inaccessible.</p> <p>NS will continue to disseminate messages on disaster risk reduction and promote community coexistence in order to avoid potential conflict among IDPs and hosts and to ensure communication on the values and principles of DR and the objectives of this operation. The risk matrix for this intervention will be shared with the volunteers and the costs for good visibility are included in this response.</p>
Continuous tensions and insecurity affecting The response facilities and HR	Medium	High	<p>Risk matrix of this intervention will be shared to Volunteers and costs for proper visibility is included in this response.</p> <p>The strategy will include volunteer's mobilisation and committee's staff which are aware of the context. Volunteer's insurance will be made.</p>
COVID-19 contamination	Medium	Medium	<p>As there is no testing point in place, contamination is one of the major health risks in this OCIVD context. GRCS will manage to protect the staff engaged in the response and the volunteers. Also, prevention measures will be applied during the trainings, the distribution and distance sensitization will be prioritised.</p>

Risks	Probability of occurrence (high, medium, low)	Severity of risk impact (high, medium, low)	Mitigation measures
CVA risk register	Medium	Medium	CVA risk register needs to be completed prior cash intervention to make sure all risks on this specific assistance are considered.

B. Operational strategy¹

Overall Operational objective

The operation will ensure that urgent humanitarian needs of the displaced HHs, and host families are provided as soon as possible. It will implement activities in the areas of livelihood, health, WASH and other relief items in a bid to contribute to efforts of preventing further deterioration of their living condition.

Past operations have unearthed the following lessons learned:

- Need of better coordination and consultation with the communities in the development of intervention (inclusion of communities).
- Need to strengthen the response by Red Cross to maintain trust with the community.
- Improve coordination with stakeholders and government partners (NDMA).
- GRCS has the capacity to provide timely and appropriately response to previous response.

The proposed operation

The GRCS, with the support of IFRC, will conduct a verification exercise to ensure that assistance is given to the intended beneficiaries. A refresher training for 10 staff and 30 volunteers shall be conducted in the emergency relief operation.

Upon completion of verification, cash disbursement to all HH beneficiaries will be carried out using Qmoney Financial Service provider via RedRose platform.

The undermentioned activities shall be implemented:

1. Need assessments and registration of affected households

- Detail Assessments, registration and data analysis of the affected population by 30 volunteers and staff in 3 days in the West Coast Region.
- Development of beneficiary selection criteria.

2. Shelter

Shelter support to communities will essentially cover procurement and distribution of EHI to affected families. The above items will be given to support IDPs and Host communities:

- Procurement of 675 blankets for the IDPs (include 350 to be replenished to the NS stock).
- Procurement of 675 sleeping mats for IDPs (include 360 to be replenished to the NS stock).
- Procurement of 225 kitchen sets for IDPs.

3. Livelihood and basic needs – support households with food through cash distribution:

Since their forceful displacement was unplanned, IDPs left with almost nothing except bundles of clothing, with women carrying children on their backs and others held by the hands. The region remains in a state of economic depression, fear, poverty and all livelihood activities that could efficiently meet the basic social needs of the IDPs and host population have stopped. They left behind their houses not properly secured, their food items, their livestock, etc. The hosts families, friends and sympathizers are all in similar living conditions and still sharing their resources with the IDPs.

The main activities will be:

- Refresher training on cash assistance to the 30 volunteers engaged in the response. The one-day refresher session will be completed with the support of NS trained staff during the December training on CVA.
- Activation of the financial service provider (FSP) Qmoney with whom NS has an ongoing signed contract since 2021. The cash delivery is mobile money, and the delivery mechanism (mobile money). SIM cards of the supplier is needed so this operation will support the fees for 302 SIM cards to be distributed. But, during the registration, it will be asked to beneficiaries if they have an active Qmoney account and it will be verified with the supplier prior transfer. Qmoney will set distribution points with the coordination of GRCS. Safer places for cash distribution will be identified. The localities where IDPs have taken refuge are not reported unsafe but in

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

preventive measure, GRCS will work closely with local authorities and security forces. However, distribution points will be considered at IDPs communities hence most have not returned home.

- Twenty-five (25) Red Cross staff and volunteers will support the financial service provider, the cash distribution and the PDM on cash assistance.
- Cash Disbursement to 302 HH: 225 IDPs and 77 host families for GMD 5248.00 each for one month.

GRCS will consider the minimum basket in The Gambia, with cost estimation actually applied in local market to have the minimum amount to cover food basic needs. The food basket in The Gambia is set by the Cash Working Group and comprises rice, beans, cooking oil, salt, sugar, onions and potatoes which is the target of the assistance. The amount per month per HH will be GMD 5.248.

For the cash implementation, GRCS will use the RedRose system as National Society has been trained in December 2021. The RedRose will be used in all the cash distribution and reconciliation processes. Markets are around 2km from each targeted village and access to it is safe with police point. Beneficiaries can find all the needed food in those markets.

Table 3: Content of food basket for each household for reference for Unconditional cash assistance

Item description	Quantity per day (kg)	Quantity/month /individual (kg)	Unit of measure	Quantity for HH in Kg (HH compose with 7-9 persons)	Cost in GMD
Rice	0.3	10	Kgs	70	2,150
Dry beans	0.066	2	Kgs	14	1,700
Cooking oil	0.025	0.75	Litres	5.75	364
Fine salt	0.006	0.2	Kgs	1.4	60
Sugar	0.02	0.6	Kgs	4.2	174
Onions	NA	N/A	Kgs	3	150
Potatoes	N/A	N/A	Bag	10	650
Total per month					5,248

3. Health

In Health intervention, NS seeks to complete health promotion campaign to cover the health needs. All the Health activities will be coordinated with the Ministry of Health that always give the orientation on any health intervention in the country and in the region through the regional MoH delegation.

In the need analysis, it has been flag that in the affected areas there is only one hospital (in Bwiam) that is functioning and that the health post in Surrounding affected villages are all closed due to fear. Considering this, the Health strategy will start with first aid intervention with the mobilisation of Gplus ambulance that required deployment fees for the first 30 days of this response. The ambulance will ensure first aid to injured IDPs and rapid evacuation to the nearest health centre. All costs included paramedics and operators are included in the fees paid to the Gplus emergency service. The ambulance will be alert through the 1199 free line call, but it will be another community alert with volunteers in the field and communities leaders that this operation will manage to put in place in the affected localities in case the line is busy. Because the ambulance does not have access to all the target localities, NS will need additional first aid kits to ensure same first aid assistance is provided in all the localities. Volunteers will ensure provision of first aid were needed during the health campaign deployment. All the surgical and big cases will be referred to the nearest hospital in Bwiam by using the Gplus which are between 3 to 5 Km from the targeted villages. MoH is in charge of coordination as this is the government hospital and GRCS has a coordination mechanism with all the government hospitals and the MoH through the Gplus ambulance activities set since 2019.

NS plans the below activities to cover Health needs:

- Deployment of 1 lifesaving ambulances by the GRCS /GPlus emergency response to the field for a period of 1 month. G-plus was incorporated on 5th August 2019 and is fully owned by the Gambia Red Cross Society and Emergency Plus Medical Services (E-plus) in Kenya.
- Procurement of 10 equipped first-aid kits with bag to ensure transportation from one point to another and support emergency relief operations in the field. Procurement will be done locally for first aid and adaptation to backpack first-aid IFRC content.
- Training of 30 volunteers on CBHFA (Community-based health and first aid) (Psychosocial support, first aid, maternal and child health, ECV modules in particular). One session of 2 days for all the volunteers in the West coast Regional office of GRCS based in Brikama. Modules will include briefing on CEA and PGI to compliment the health and hygiene promotion.
- Procurement of 675 long-lasting impregnated mosquito nets for 225 displaced HHs (3/per household, 187 to be replenished to NS stock).

4. WASH

Two aspects will be taken into account:

- Prioritisation of women in the response. Both gender inclusion in volunteers' selections and gender consideration all over the wash support provided.
- Training and deployment to support communities for sanitization and sensitization.

The planned strategy is to reinforce the response capacity in terms of training and deployment of volunteers to the affected communities. The WASH activities will be focused on:

- 2-days refresher training session for 30 volunteers on hygiene promotion, waterborne diseases with CEA and PGI modules to compliment the health and hygiene promotion. The training will be done at the same time as Health trainings in the GRCS West coast regional office.
- Water and hygiene promotion: 30 volunteers mobilized for 2 days per week, 4 weeks to ensure WASH messages are disseminated to prevent waterborne diseases.
- Confection and distribution of health posters for sensitization messages
- Providing sanitation material to volunteers or organised communities group in the villages such as FDDF to support continuous sanitation in the communities and wells' water treatment: chlorine, 35 bottles of bleach, and manipulation equipment.
- Providing WASH items to IDPs and Host communities to avoid conflicts within communities and make sure we cover need also for IDPs inside host families. This DREF will then cover the procurement of 302 buckets of 20L with lids for HH water collection and storage (2 per HH). This include 33 to be replenished.
- Procurement and distribution of WASH kits based on the much-needed items already identified:
 - 1,812 pieces of soap (6 pieces x 302HHs for 1 month), including 183 to be replenished. These will be provided to all the target beneficiaries as the host households have shared their own with IDPs since.
 - Two buckets per household for IDPs only; 450 units to purchase with 33 for replenishment.
 - Sanitation soap used in these communities are bottles of Dettol soap (1 bottle per HH, one distribution).
- Procurement of 307 dignity kits for women and adolescent girls (estimation of 24% of total women population, 1 pack per person per month for 1 month). On this activity, volunteers will be female to do the distribution of dignity kits
- Procurement to replenish the 120 sanitizers and 500 masks given to the deployed volunteers to prevent COVID-19 contamination.
- Monitor the impact of hygiene promotion.

The choice of in-kind distribution instead of cash for EHI needs is due to the lack of those items in the local communities' markets.

5. Capacity building for the effective implementation of response activities

- Organize refresher training for 30 volunteers and 10 staff in emergency relief operations, in addition to the specific trainings in each sector.
- Conduct post distribution monitoring (PDM) of the response. Ensure the Post distribution mission conducted by GRCS volunteers are done one week after the distribution to cover all the distribution made in this operation, both cash and in-kind.
- Lessons learned workshop to be held in the regional office by the end of the implementation with all the relevant partners engaged in this response and the IFRC support.

Operation Support Services and strategies for implementation

Human resources

From the start of this emergency operation on 24 January 2022 to-date, 33 members of the Emergency Response Team from the West Coast Red Cross Branch supported by 10 NS staff members are engaged in this operation. Additionally, all the volunteers shall be trained to support the ERT already in the field. This will ensure effective response preparedness and NS surge capacity mechanism are maintained. Considering the fact that this is an armed conflict situation, the insurance for volunteers is covered in this operation and their per diem. The deployed National Society staff to the field include:

- Emergency First Aid Coordinator
- Communication Coordinator,
- COVID19 Coordinator
- Logistics Officer
- PGI from HQ
- Finance staff
- West Coast Branch Officer
- 3 GRCS drivers.
- 85 volunteers engaged in the operation.

The costs of deployment of staff and mobilisation of volunteers are imputed in the operational costs. The Disaster Management Department and PMER unit at headquarters level provide technical guidance and support to the operation.

To ensure the National Society has effective and motivated volunteers who are protected, this operation will support activities below:

- The National Society responds to community concerns.
- Ensure that the staff and volunteers involved in the emergency relief operations volunteers are aware of their rights and responsibilities
- Ensure volunteers' safety and wellbeing
- Ensure volunteers are properly trained
- Ensure volunteers' engagement in decision-making processes of respective projects they implement
- The National Society ensures that volunteers are insured using the IFRC insurance system.
- Organize refresher training on CEA activities for volunteers and staff.
- Conduct CEA feedback mechanism by the trained volunteers and staff on CEA.

This is the first emergency response operation of this nature. Consequently, GRCS staff and volunteers are urged to take all appropriate precautionary measures and more seriousness in the implementation to their needed humanitarian work. As they continue to remain critical Red Cross personnel in the operations, and should strictly adhere to the Fundamental Principles, particularly neutrality and impartiality, the Code of Conduct in Disaster Relief, the Safer Access Framework, etc. to mitigate security-related risks. The definite operational timelines are not determined yet. There stay may be prolonged due to the prevailing humanitarian needs and security situation that does not seem abating.

Frequent monitoring of the security situation and progress and performance shall be undertaken. GRCS shall provide continued support and protection of its staff and volunteers in the field.

IFRC team will provide support and ensure at least one monitoring visit to follow-up the implementation pace. At the end of the operation, IFRC will support the lesson learn workshop as facilitator. A distance support will continue with technical guidance in all steps of the implementation.

Community Engagement and Accountability (CEA)

CEA will be mainstreamed throughout the intervention to guarantee maximum and meaningful participation of the affected communities. A feedback and complaint desk will be put in place for recipients of distributed items to provide direct feedback on the distribution exercise. To clarify and for a good flow of information, clear roles and responsibilities will be agreed with representatives, community leaders and committees. The beneficiary selection criteria will be developed with communities and the process will be clearly communicated to all affected populations. Hygiene and health promotion sessions will also be instrumental in collecting feedback by using survey during PDM activities. For sensitive feedback, GRCS has tablets that will be used in this operation to collect real time data from beneficiaries. The tablets are connected to the GRCS server located at the HQ. Common FAQs are available and can be integrated in the volunteers' tablets so volunteers could carry it with them and address comments during their activities, organizing regular community meetings and sensitization.

Protection, Gender and Inclusion

The National Society has a PGI lead. PGI will be mainstreamed throughout the intervention to ensure communities dignity, access, participation, and safety. Acknowledging that women, girls, men and boys with diverse ages, disabilities and backgrounds have very different needs, risk and coping strategies, the operation will pay particular attention to protection and inclusion of vulnerable groups and on gender and diversity analysis. As part of the needs assessment and analysis, a gender and diversity analysis will be conducted in all sector responses including WaSH, and Shelter to understand how different groups have been affected, which will inform the operational strategy.

Briefing for staff and volunteers involved will include Code of Conduct training and signature, Prevention and response to sexual exploitation and abuse, child safeguarding.

All sectors will seek to meet the IFRC Minimum Standards on Protection, Gender and Inclusion in Emergencies.

Logistics and supply chain

National Society Logistics services supported procurement and transportation of items, in compliance with IFRC and NS procedures. The National Society Logs unit will also ensure safe delivery of items to the field. Storage and arrangements for distributions were necessary. The Logs Unit also ensured that any potential revision of the Financial Service Provider (FSP) agreement is swiftly completed to ensure quick response using cash.

Planning, Monitoring, Evaluation and Reporting (PMER)

Monitoring of this DREF will be done in adherence to IFRC standards to support efficient and effective implementation. The PMER team will input measures and support to ensure data that is collected is timely, accurate, complete, and disaggregated by gender, age and other vulnerabilities (IDPs, disabilities, pregnant and lactating women, children, etc.).

After distribution of EHI and Cash, the PMER team will conduct Post Distribution Monitoring (PDM) to assesses the quality of distribution process (from household identification, communication distribution and post-distribution support).

At the end of the DREF operation timeframe, the PMER team will organize a lesson learnt workshop with all stakeholders (NS, IFRC, beneficiaries, etc.). This workshop will allow the National Society and IFRC to reflect on the operation and document lessons learnt that can be incorporated into future operation.

Security

Petty crime, which has increased with the boom in the country's nascent tourism sector, is the security issue most likely to confront business travelers. Pickpocketing and theft of personal belongings have been reported at hotels, crowded market areas and public transport, including taxis and ferries. While rates of violent crime are low by regional standards, political demonstrations and rallies in the capital Banjul pose an incidental threat of violence. There is a high risk of passport theft at Banjul International Airport (BJL). Road travel to areas bordering southern Senegal's Casamance region is dangerous given the presence of separatist groups and bandits. The country faces a minimal threat from terrorist groups.

Foreign nationals should be particularly wary of young men, locally known as 'bumsters', who approach tourists, usually on beaches, offering unsolicited help to organize tours in the hopes of gaining money or other assistance. Workforce should be polite but firm in declining unwanted help or attempts at conversation.

Criminal activities may also be linked to the country's status as a hub for drug trafficking. Bandits and separatist groups are known to operate near the border with Senegal, with the security forces of both countries patrolling the area.

At this stage there no intention to deploy IFRC expatriate delegate to support this operation, though regional surge deployment could be considered.

In case of Surge deployments under Staff Health, ensure that the person to be deployed get health advise for the specific country, medical insurance covering COVID in the country of deployment, possibility of MedEvac to the nearest able country/home. Prior to deployment mandatory security and staff health briefing to be arranged for.

Under Pandemic situation it has been encouraged that staff and volunteers to follow and abide to the government directives which may include wearing of masks, physical distancing, etc. Staff/volunteers should familiarize themselves with country specific Business Continuity Planning (BCP) including all preventative and control measures that are in place. The CIMT should also review and update country specific BCPs. BCP for IFRC has been established since the beginning of COVID-19 Pandemic and remains in force as part of the IFRC Duty of Care policy.

The IFRC security plans will apply to all IFRC staff throughout the Region. 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 NEW IFRC Stay Safe 2.0 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 Gambia.

IFRC does not maintain permanent presence in Banjul, Gambia (The city is generally safe). The nearest IFRC office is Dakar, Senegal where the IFRC Dakar Cluster Delegation is located and extend direct oversight. The Minimum-Security Requirements (MSR) has been cleared and approved for Gambia on the level of Expanded Security Welcome Brief.

Finance and administration

Compliance with IFRC financial procedures will be observed, and ongoing monitoring and technical support will be provided by the IFRC to ensure effective and responsible management of financial resources. Funds will be made available in a timely manner and monitoring of the GRCS financial teams will be put in place.

Funding Requirements

The total budget of this operation is CHF 105,152 for 1 month implementation. Summary budget below.

International Federation of Red Cross and Red Crescent Societies

all amounts in Swiss Francs (CHF)

DREF OPERATION

MDRGM015 - GAMBIA - POPULATION MOVEMENT

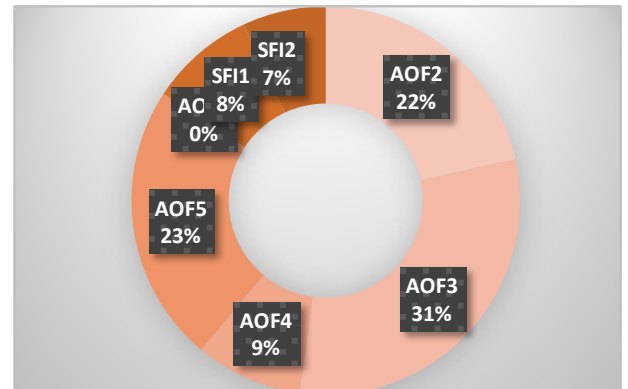
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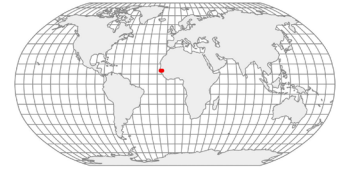
Budget by Resource

Budget Group	Budget
Clothing & Textiles	15,111
Water, Sanitation & Hygiene	9,493
Medical & First Aid	4,951
Teaching Materials	344
Utensils & Tools	5,812
Cash Disbursement	28,631
Relief items, Construction, Supplies	64,341
Transport & Vehicles Costs	1,042
Logistics, Transport & Storage	1,042
Volunteers	15,470
Personnel	15,470
Workshops & Training	6,234
Workshops & Training	6,234
Travel	5,683
Information & Public Relations	689
Office Costs	3,806
Communications	947
Financial Charges	523
General Expenditure	11,648
DIRECT COSTS	98,734
INDIRECT COSTS	6,418
TOTAL BUDGET	105,152

Budget by Area of Intervention

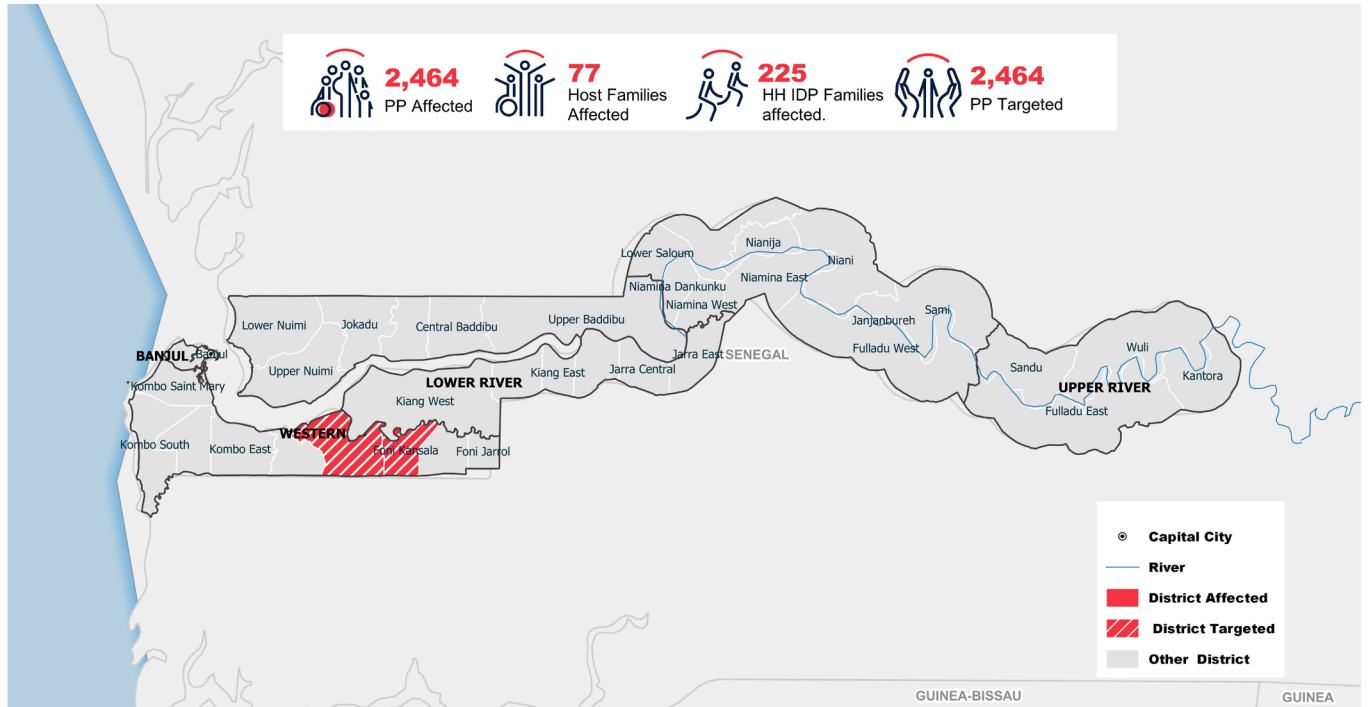
AOF2 Shelter	22,709
AOF3 Livelihoods and Basic Needs	32,142
AOF4 Health	9,381
AOF5 Water, Sanitation and Hygiene	24,369
AOF6 Protection, Gender and Inclusion	330
SF11 Strengthen National Societies	8,922
SF12 Effective International Disaster Management	7,300
TOTAL	105,152





Gambia : Internal Displaced Population

18 February 2022 • OT-2022-000159-GMB



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



Contact information

Reference documents



Click here for:

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

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

For Gambian Red Cross (SSRC)

- Alasan Senghore, Secretary General; phone: +220 3537730; email: alasan.senghore@redcross.org / alasan.senghore@gmail.com
- Abdoulie Fye, Director of Programmes and Operation
Abdoulie.fye@redcross.org

IFRC Sahel Country Cluster Office:

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IFRC Office for Africa Region:

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

In IFRC Geneva:

- Karla Morizzo, DREF Senior Officer, DCPRR Unit Geneva; email: karla.morizzo@ifrc.org

For IFRC Resource Mobilization and Pledges support:

- **IFRC Africa Regional Office for resource Mobilization and Pledge:** Louise Daintrey, Head of Partnership and Resource Development, Nairobi, email: louise.daintrey@ifrc.org; phone: +254 110 843978

For In-Kind donations and Mobilization table support:

- **IFRC Africa Regional Office for Logistics Unit:** Rishi Ramrakha, Head of Africa Regional Logistics Unit, email: rishi.ramrakha@ifrc.org; phone: +254 733 888 022

For Performance and Accountability support (planning, monitoring, evaluation and reporting enquiries)

- **IFRC Africa Regional Office:** Philip Komo Kahuho, PMER Coordinator, email: philip.kahuho@ifrc.org; phone: +254 732 232 081

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.

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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.