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DREF Final Report

Guyana: Floods



DREF Operation	Operation n° MDRGY003
Date of Issue: 24 May 2022	Glide number: FL-2021-000066-GUY
Operation start date: 13 June 2021	Operation end date: 31 October 2021
Host National Society: The Guyana Red Cross Society	Operation budget: 216,925 Swiss francs (CHF)
Number of people affected: 34,500 (6,900 households)	Number of people assisted: 2,910 people
Host National Society presence: The Guyana Red Cross Society (GRCS) is present in all ten districts, with volunteer groups (CDR and CBHFA teams ¹) in each district. Its actions are supported by its 100 active volunteers and 35 employees at HQ and branches.	
Red Cross Red Crescent Movement partners actively involved in the operation: The International Federation of Red Cross and Red Crescent Societies (IFRC). The Regional Intervention Platform for the Americas and the Caribbean of the French Red Cross (PIRAC), which does not have a presence in the country but supported the operation.	
Other partner organizations actively involved in the operation: Civil Defence Commission (CDC), The Caribbean Disaster Emergency Management Agency (CDEMA), United Nations Office for the Coordination of Humanitarian Affairs (OCHA), HydroMET Guyana.	
The Guyana Red Cross spent a total of 204,699 CHF. The remaining balance of 12,226 CHF will be returned to the Disaster Relief Emergency Fund.	
<i>The major donors and partners, of the Disaster Relief Emergency Fund (DREF) included the Red Cross Societies and governments of Belgium, Britain, Canada, Denmark, German, Ireland, Italy, Japan, Luxembourg, New Zealand, Norway, Republic of Korea, Spain, Sweden, and Switzerland, as well as DG ECHO, Blizzard Entertainment, Mondelez International Foundation, Fortive Corporation, and other corporate and private donors. The IFRC, on behalf of the GRCS, would like to extend thanks to all for their generous contributions.</i>	

A. SITUATION ANALYSIS

Description of the disaster

In mid-May 2021, Guyana experienced higher than normal levels of rainfall across the country. This led to what was described as the worst flooding in Guyana for over 20 years. On 10 June 2021, it was reported that all communities across Guyana were severely affected. The most affected communities were Regions 9 and 10, with an estimated 6,900 affected households or 34,500 people. At the end of the floods, the Civil Defence Commission reported a total of 52,000 affected households. The flood caused damage to homes, loss of crops and livestock, displacement of families and damage to buildings. The affected people experienced mental trauma, as many lost their homes, livestock, and farms, which were their primary sources of safety and income. This crisis was compounded by the COVID-19 pandemic, especially for the people housed in temporary formal shelters.

¹ CDR: Community Disaster Response. CBHFA: Community Based Health and First Aid.

Summary of response

Overview of Host National Society

The National Society monitored and assessed the areas affected and worked closely with the various levels of government, partner agencies and community leaders in the affected areas. The Guyana Red Cross Society assisted with the distribution of relief supplies to shelters and worked with the Civil Defence Commission (CDC) to provide support with assessments, packing and distribution of relief supplies and shelter management assistance.

When the water receded in the communities, the Guyana Red Cross Society mobilized the Community Disaster Response Teams (CDRTs) to conduct Rapid Damage and Needs Assessments in Regions 1, 5, 7, and 10. The National Society found that people's homes were flooded and their furniture damaged, farms were flooded, and farmers and livestock owners tried to recover losses by selling livestock at lower prices. Wild animals killed some livestock and livelihood support was needed. With the receded flood, there was also a need for intervention against water and vector-borne illness.

The Guyana Red Cross Society (GRCS) distributed 283 kitchen sets, 800 solar lamps, 500 hygiene kits, 500 cleaning kits, 4 first aid kits, 1,820 treated bed nets, 870 buckets, 940 jerry cans, 5,700 water treatment tablets, 724 tarpaulins, 1,500 hand sanitizers, 7,000 KN95 masks and 200 multi-sectorial vouchers. The National Society also engaged the affected population with health and hygiene promotion activities and conducted Mental Health and Psychosocial Support Services (MHPSS) at three shelters serving adults and children. In addition to the support received from the IFRC, the National Society received support from USAID (United States Agency for International Development), GUYASPAN Inc., and the public for its operation.

Overview of Red Cross Red Crescent Movement in country

The IFRC Country Cluster Delegation (CCD) in Port of Spain, Trinidad, and the Americas Regional Office (ARO) provided the Guyana Red Cross Society with technical guidance and support throughout the DREF process by guiding the operation's strategy and the implementation of best practices. A Disaster Management Coordinator with specialized knowledge in Cash Voucher Assistance was deployed to Guyana to provide technical assistance to the operation. No other Partner National Society or Red Cross Movement Partners assisted with operation implementation.

Overview of non-RCRC actors in country

The Civil Defence Commission distributed food and cleaning hampers to the affected persons across Guyana. In addition, several Guyanese businesses and citizens donated to several initiatives implemented by other government agencies, NGO (Non-Government Organisations) and religious organisations that provided support to communities and families affected by the flood.

The Government of Guyana sought assistance from the Caribbean Disaster Emergency Management Agency (CDEMA), the regional inter-governmental agency for disaster management in the Caribbean, for technical assistance in the form of sectoral damage assessment teams to conduct a Detailed Disaster Sectoral Assessment (DDSA). This assessment was conducted across the regions that were severely affected and included representatives from the Guyana Red Cross.

Needs analysis and scenario planning

The Guyana Red Cross Society identified the needs of the affected people based on rapid assessments conducted by its Community Disaster Response Teams (CDRT) and in collaboration with the Government of Guyana and other agencies. Based on the data collected, shelter, WASH, livelihoods, and health were the most needed

interventions. According to official sources, as of 10 June 2021, 34,500 people were affected (6,900 households).² However, after a few weeks, this number grew exponentially. Additionally, thousands of families lost their livestock and farms, severely affecting their livelihood as they depended on agriculture and livestock as their primary source of income. Health interventions were needed as the stagnant water from the flood resulted in mosquito breeding sites and increased the risks for Dengue and Malaria outbreaks.

The National Society targeted 500 families (2,500 people) affected by the flood. All ten administrative regions across Guyana were impacted, the most impacted areas, however, were regions 9 (Upper Takutu- Upper Essequibo) and 10 (Upper Demerara- Berbice). Based on the results of assessments conducted by the National Society, it was decided to focus the operation on region 10 (Upper Demerara- Berbice) and Region 5 (Mahaica- Berbice) and provide support to migrant populations in regions 1 and 7. Emphasis was placed on people displaced in shelters, those who have lost their crops and livestock at the household level and communities not reached with other support. Based on the needs identified, the Guyana Red Cross Society decided to provide emergency multi-sectoral cash vouchers, conduct hygiene, and WASH promotion activities and provide shelter support through the distribution of Non-Food Items (NFIs).

Risk Analysis

Risks to the operation included:

- Limited access to the communities due to the flooding
- Exposure of our staff and volunteers to COVID-19.

Mitigation measures included:

- Communicating with community volunteers to identify safe alternate routes and sharing information with other response agencies.
- The National Society ensured that staff and volunteers engaged were vaccinated and were provided with personal protective equipment (PPE) and sanitizing products; a briefing exercise was also done to sensitize the team on adhering to COVID-19 protocols.

B. OPERATIONAL STRATEGY

Proposed strategy

The adopted strategy addressed the needs highlighted in the assessments done by the Guyana Red Cross Society and data collected by the Civil Defence Commission and other partnering agencies. The needs outlined from these assessments were shelter, livelihoods, WASH and health (disease prevention). Therefore, the key focus of the operation was to provide immediate relief through:

- **Shelter** - The distribution of kitchen sets (to replace items lost) and solar lamps (as many people rely on generators for power that have been damaged by floodwater).
- **Health** – The distribution of first aid kits to each shelter established and to the National Society to ensure that First-Aid responders were fully equipped to respond. COVID-19 personal protective equipment (PPE) in the form of masks (10 per family plus staff and volunteers) and hand sanitizers (part of the hygiene kit) were provided. Health and hygiene promotion and disease prevention campaigns were conducted in targeted communities to encourage safe and sanitary practices while exposed to floodwaters. Mental Health and Psychosocial Support Services (MHPSS) were provided to displaced people in shelters and volunteers mobilized by the emergency response operations.

² <https://reliefweb.int/report/guyana/guyana-floods-dref-plan-action-n-mdrgy003>

- **WASH** – Cleaning and hygiene kits were procured internationally through the Regional Logistics Unit in Panama and distributed to assist families in clean-up their homes as floodwaters receded. Water purification tablets, jerry cans and buckets with lids were also provided to ensure that people had access to safe and potable water.
- **Livelihoods** – Cash Voucher Assistance (CVA) was given to 200 families in the shelters, those staying with host families or in informal shelters, and those who lost significant livestock and crops. This methodology was used as assessments highlighted that people preferred vouchers rather than IFRC - debit cards, as access to ATMs (Automated Teller Machines), in the areas was limited. Cash and Voucher Assistance (CVA) was used as a modality to address the basic needs of the people affected. Local markets were still functional in the affected areas and people were facilitated to prioritize and purchase their own essential needs. This initiative also boosted the income of shop owners who experienced decreased sales during the flood. A Cash Voucher Assistance Delegate was deployed to support the National Society with this aspect of the operation.

All needs assessments, cash distribution, and health and disease prevention education were conducted by the Guyana Red Cross Society's staff and volunteers. The IFRC supported the National Society in operations monitoring to ensure that activities were implemented within standard guidelines. The Guyana Red Cross Society guideline on Cash Voucher Assistance, education, and communication materials (posters and leaflets etc.) were used to sensitize the affected people and community representatives. To ensure transparency and accountability in delivering relief items, local authority leaders, representatives from relevant local organizations, and heads of the community were involved during the planning and implementation stage.

Operational Support Strategy

Planning, Monitoring, Evaluation, and Reporting

Reporting on the operation was conducted per the IFRC's minimum reporting standards. PMER (Planning Monitoring Evaluation and Reporting) provided support at the Country Cluster Delegation in Port of Spain and the Americas Regional Office in Panama.

Administration and Finance

The Guyana Red Cross Society assigned a specific administrator to manage the operation. The IFRC also assigned a dedicated Project Manager to support the National Society. IFRC provided the necessary operational support for budget review and validation and bank transfers, as well as technical assistance to the National Society on expense justification procedures, including invoice review and validation.

Human Resources

The Guyana Red Cross Society, through its staff and volunteers, led the operation with the close involvement of community representatives to support the different activities of the operation. The National Society identified a designated person responsible for the implementation of the operation. In addition, 100 volunteers from headquarters and targeted areas supported the Guyana Red Cross Society. With technical support from the regional office, an IFRC delegate with knowledge of Cash Voucher Assistance was deployed to assist in the operation.

Security

The Guyana Red Cross Society volunteers were trained in basic safety standards (using the Stay Safe manual). All received the necessary visibility material and received accident insurance made available by the Red Cross and Red Crescent Movement.

Logistics and Supply Chain

The operation consisted of international purchases for hygiene kits, cleaning kits, first aid kits, kitchen sets, treated nets, buckets, water purification tablets, tarpaulins, solar lamps, COVID-19 personal protective equipment and

sanitizers, which were coordinated with the IFRC Regional Logistics Unit in Panama and PIRAC. The Cash Voucher Assistance procurement processes were managed locally by the National Society supported by the IFRC.

Community Engagement and Accountability (CEA)

The Community Engagement and Accountability (CEA) approach, was incorporated to promote effective participation, feedback from affected communities, and support the effort in the focus areas. This was based on an analysis and diagnosis of the communities' needs and information channels to support the strengthening and enhancement of their response capacities to dealing with floodwaters.

Public Communications

The IFRC Communications team supported the National Society by ensuring media coverage and disseminating key messages. The team prepared digital content for social media networks, internal bulletins, audio-visual material, etc. Key messages on the importance of the DREF as an IFRC instrument to support the National Society were also developed. A local photographer/videography was hired to support the capturing and development of content.

Volunteering

Feedback from volunteers was incorporated into the disaster response planning and evaluation. This ensured that the local realities were reflected in the implementation strategies. All volunteers mobilized were provided with insurance coverage to support exposure risks in the field.

C. DETAILED OPERATIONAL PLAN


	<p>Shelter People reached: 2,084 Male: 625 Female: 1,459</p>		
<p>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</p>			
<p>Indicators:</p>	<table border="1"> <thead> <tr> <th>Target</th> <th>Actual</th> </tr> </thead> </table>	Target	Actual
Target	Actual		
<p># of people provided with emergency shelter and settlement assistance</p>	<table border="1"> <tbody> <tr> <td>2,500</td> <td>2,084</td> </tr> </tbody> </table>	2,500	2,084
2,500	2,084		
<p>Output 1.1: Shelter and settlements and basic household items assistance is provided to the affected families.</p>			
<p>Indicators:</p>	<table border="1"> <thead> <tr> <th>Target</th> <th>Actual</th> </tr> </thead> </table>	Target	Actual
Target	Actual		
<p># of households provided with emergency shelter assistance</p>	<table border="1"> <tbody> <tr> <td>500</td> <td>732</td> </tr> </tbody> </table>	500	732
500	732		
<p># of households provided with kitchen sets</p>	<table border="1"> <tbody> <tr> <td>500</td> <td>283</td> </tr> </tbody> </table>	500	283
500	283		
<p># of households provided with solar lamps</p>	<table border="1"> <tbody> <tr> <td>1,000</td> <td>800</td> </tr> </tbody> </table>	1,000	800
1,000	800		
<p># of households provided with tarpaulins</p>	<table border="1"> <tbody> <tr> <td>1,000</td> <td>724</td> </tr> </tbody> </table>	1,000	724
1,000	724		
<p>Narrative description of achievements</p>			
<p>The Guyana Red Cross Society conducted distributions in 8 communities across four regions in Guyana. Byderabo and Handsome Tree in the Mahaica Creek - Region 5, Port Kaituma – Region 1 (both Guyanese and migrant population were targeted in this region), Hururu – Region 10 and Central Bartica, Puruni, Itabali and Black Water – Region 7 (the migrant population was targeted in this region). A total of 800 Solar Lamps, 283 Kitchen Sets and 724 tarpaulins were distributed. The items were distributed to the household based on their needs. As such, some households received all three items, two of the items or one of each. A total of 732 households received shelter support.</p>			



Photo 1: Distribution of shelter supplies in Mahaica Creek- Region 5, September 2021. Source: Guyana Red Cross Society.

Challenges

The main challenge was the transporting of the supplies for distribution. This required diverse types of transport for one activity, such as canters, boats, trucks, pickups, and ATVs. This challenge was mitigated by gathering as much information as possible about the road, trails and riverways and partnering with other supporting agencies and CDRTs for distribution.

Lessons Learned

Transporting supplies to affected communities can be extremely difficult during a disaster. Having multiple options concerning transport suppliers and access to the community (common access may be blocked) was essential. As a result of the transportation difficulties faced, not all items were distributed within the project period. The CDRTs within the communities will continue to distribute as per needs identified.



Health

People reached: 2,910³

Male: 1,426

Female: 1,484

Outcome 1: *The immediate risks to the health of the affected populations are reduced through improved access to medical treatment*

Indicators:	Target	Actual
# of people reached with first aid assistance	200	154
Output 1.1: <i>Improved access to health care and emergency health care for the targeted population and communities.</i>		
Indicators:	Target	Actual

³ Sex disaggregated data was not available for health. An estimated number has been included using the population's sex percentage found at https://statisticsguyana.gov.gy/wp-content/uploads/2019/10/2012_Preliminary_Report.pdf

# of first aid kits delivered	10	4
# of N95 masks delivered to families	5,000	5,000
# of N95 masks delivered to frontline volunteers	2,000	2,000
# of hand sanitizers delivered to families	1,000	1,000
# of hand sanitizers delivered to volunteers	500	500
Outcome 2: Transmission of diseases of epidemic potential is reduced		
Indicators:	Target	Actual
# of people reached with community-based epidemic prevention and control activities.	2,000	2,910 ⁴
Output 2.1: Vector-borne diseases are prevented		
Indicators:	Target	Actual
# of LLINs distributed	2,000	1,820
Output 2.2: Vector-borne diseases are prevented		
Indicators:	Target	Actual
# of campaign implemented for a hygiene promotion campaign on prevention and control of common communicable diseases	1	1
Outcome 3: The psychosocial impacts of the emergency are lessened		
Indicators:	Target	Actual
Output 3.1: The psychosocial impacts of the emergency are lessened		
# of volunteers and staff trained in PSS community based and PFA	340	15
# of people affected reached with PSS services	300	208
# of volunteers and staff reached with PSS services	40	2
Narrative description of achievements		
<p>Emergency health care Six shelters were opened by the Civil Defence Committee in three communities, Kwakwani, Hururu and Aroima. Those shelters were the initial targets for the first aid kits. However, four of those shelters were closed at the time of distribution. Only two first aid kits were distributed, and volunteers utilised two in the field. Masks and hand sanitisers were distributed to staff and volunteers, included in packages, and distributed at distribution sites to persons in need.</p> <p>Epidemic control activities Distributions of treated bed nets and risk communication on vector-borne diseases and how to prevent them were shared in communities as follows: 100 households in Handsome Tree and Byaboo communities, 500 households in Kwakwani, 163 households in Hururu, and 207 households in Landersville.</p> <p>Mental health care Mental Health Psychosocial Support Services (MHPSS) activities implemented targeted children who were in the shelters and those who had left the shelters located at Aoarima, Hururu and Kwakwani. This was done as a care and support intervention that aimed to improve the mental health of the children targeted. The volunteers prepared items to be distributed which included: a coloring book, reading a book, teddy bear, board games, paint set, play dough, beads set, puzzle, etc.</p>		

⁴ This figure was reached by multiplying the number of households reached (970 households) by the average household size (3 persons per household) according to https://statisticsguyana.gov.gy/wp-content/uploads/2019/10/2012_Preliminary_Report.pdf

Mental Health Psychosocial Support Services Training for staff and 15 volunteers was completed on 25-26 September 2021.



Photo 2: A member of the Bartica community collecting items at the National Society's distribution site, September 2021. Source: Guyana Red Cross Society.

Challenges

There was a significant delay in the reception of items by the Guyana Red Cross Society for distribution. The delay was a result of shipping backlog at the international ports and, upon arrival in Guyana, there was further delay at customs for the release of items. The National Society received the items on 27 August, long after implementation of operations had begun.

Lessons Learned

Procuring items locally can significantly reduce the delays in the implementation of activities.

Beneficiary feedback indicated that local items that are known would have been preferred for the hygiene kits and cleaning kits.



Water, sanitation and hygiene

People reached: 2,350

Male: 799

Female: 1,551

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

Indicators:	Target	Actual
# people reached with WASH support during the emergency phase	2,500	2,350
Output 1.1: Continuous assessment of water, sanitation, and hygiene situation is carried out in targeted communities		
Indicators:	Target	Actual
# of people provided with safe water during the emergency phase	2,500	2,350

# of family hygiene kits procured and distributed	500	500
# of cleaning kits procured and distributed	500	500
# of buckets with fittings procured, shipped, and distributed	1,000	870
# of jerrycans procured, shipped, and distributed	1,000	940
# of water treatment tablets (20 per household) procured, shipped, and distributed	10,000	9,400

Narrative description of achievements

A total of 2,350 persons were reached with water sanitation and hygiene activities. 500 hygiene and cleaning kits and 870 buckets were distributed to affected persons identified through partnership with local stakeholders and our CDRT within the various communities. Distribution of 2 jerry cans per household and 20 packets of water purification tablets per household was conducted in 3 communities as follows: 100 households in Handsome Tree and Byaboo, 163 households in Hururu and 207 households in Landersville. In addition to receiving the jerry cans and tablets, each person was informed about the correct use of the tablets and received a leaflet with instructions on the proper use of the tablets.



Photo 3: Distribution in Hururu, September 2021. Source: Guyana Red Cross Society.

Challenges

Disposing of garbage and human waste was challenging when conducting hygiene promotion. Many people were surrounded by water, and some lived in the water with limited access to transport to move from one location to the next. As such, waste disposal in the floodwater was the best option at the time. Continuous messaging on the effects of waste in the flood water and working with the population to find suitable alternative solutions were needed.

Lessons Learned

Hygiene promotion and messaging efforts were more effective when carried out by the National Society's local volunteers in the community.



Livelihoods and basic needs

People reached: 1,000

Male: 350

Female: 650

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

Indicators:	Target	Actual
# of people reached with livelihoods support	1,000	1,000

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

Indicators:	Target	Actual
# of targeted households have enough food, cash or income to meet their survival threshold	200	200
# of volunteers trained in Cash Voucher Assistance and Community Engagement and Accountability	15	15

Narrative description of achievements

200 Multi-Sectoral Cash Vouchers were distributed across three communities in region 10. The communities identified for distribution were Kwakwani, Landersville and Hururu. The National Society created a selection criterion to identify the most vulnerable assisted. Continuous communication was done with the people reached to provide them with current and critical procedural updates.



Photo 4: Community members of Landersville and Hururu receiving their vouchers, September 2021. Source: Guyana Red Cross Society.

The Cash and Voucher Assistance training was completed with 15 volunteers over a 3-day period. The first two days of training focused on preliminaries and implementation of the Cash and Voucher Assistance programme, and the 3rd day of training focused on Community Engagement and Accountability and how important it is in providing Cash and Voucher Assistance.



Photo 5: Community Engagement and Accountability Training at Guyana Red Cross Society Headquarters, September 2021. Source: Guyana Red Cross Society.

Challenges

This was the first time implementing the Cash and Voucher Assistance programme in Guyana. There was a significant limitation with trained staff and volunteers to assist with the programme implementation. This was later addressed with the arrival of the Cash and Voucher Assistance surge deployment and the subsequent training of staff and volunteers.

Lessons Learned

Assessing the community and using the best methodology for registration, distribution and CVA modality is key in reducing the challenges to implementation and ensuring the targeted population's needs are met.

Based on beneficiary feedback, more Community Engagement and Accountability actions were needed. Approximately 25% of people reached indicated they did not know how to contact the National Society for clarification or queries regarding the Cash and Voucher Assistance. This taught us that Community Engagement and Accountability actions were not enough and should be continuous.

Strengthen National Society

Outcome 1: National Societies have the necessary corporate infrastructure and systems in place

Indicators:	Target	Actual
# of volunteers insured	100	100

Output 1.1:

Narrative description of achievements

3 persons were hired to support the operations from 1 July to 30 September 2021. The positions were Operations Manager, Finance Officer and Logistics and Procurement Officer. Each position was supported by the National Society and its Disaster Management Team.

Protection, Gender, and Inclusion was a cross-cutting throughout the interventions to ensure communities' dignity, access, participation, and safety. Acknowledging that women, girls, men and boys with diverse ages, disabilities and backgrounds have unique needs, risks and coping strategies, the operation increased attention to the protection and inclusion of vulnerable groups and conducted a gender and diversity analysis.

The CVA programme targeted families who were displaced due to the flood and were placed in formal and informal collective centres. Of this group female-headed households, older adults, families with disabled family members and migrants were prioritised. The female-headed households and the migrant population were also targeted as WASH, Health, and Shelter interventions people reached.

Challenges

Finding suitable qualified persons for the positions in a brief period was a challenge, especially during an emergency. The Guyana Red Cross Society had a reduced number of volunteers and staff trained and experienced in Disaster Management Response due to the impact of COVID-19.

Only two persons who were part of the operations were trained in PGI as such it was essential to have these two persons involved in every aspect of the operations to ensure PGI was always considered. This was a challenge and sometimes proved overwhelming.

Lessons Learned

There is a need for continuous training of Guyana Red Cross Society personnel and the implementation of simulation exercises for practical experiences.

Training for staff and volunteers in PGI is needed to improve the National Society's capacity.

International Disaster Response

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

Indicators:	Target	Actual
# of RIT personnel deployed	1	1

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

Indicators:	Target	Actual
# of IFRC monitoring and support missions	1	0

Narrative description of achievements

A request was made for the extension of the Cash Voucher Assistance Regional Intervention Team whose mission ended on 11 September 2021. The extension request was made due to the delayed implementation of the Cash Voucher Assistance programme. The extension of the Regional Intervention Team's mission to complete the Cash Voucher Assistance was extended to 10 October 2021.

Challenges

The RIT arrived in Guyana one month after the operations began. This was a significant delay for the National Society as Cash Voucher Assistance capacity was limited and not much was done in the absence of the Cash Voucher Assistance personnel.

Lessons Learned

Advocate for training for staff and volunteers across all sectors in non-emergency times to build the capacity of the National Society to respond quickly in an emergency.

Effective, credible and accountable IFRC

Outcome 3: 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

Output 3.1: IFRC produces high-quality research and evaluation that informs advocacy, resource mobilization and programming

Indicators:	Target	Actual
# of lessons learned workshop carried out	1	0

Narrative description of achievements

This activity was scheduled to be completed on 30 September 2021, however, due to several technical delays the operation closed before the activity could be implemented.

Challenges

There was a significant delay in the transfer of the 2nd tranche of funding. Funds arrived after the closing date for the implementation of activities under the operation.

Lessons Learned

Documenting feedback sessions at the end of each activity can be used to gather lessons learnt during an operation in the event we are unable to conduct a lesson learnt workshop, as in this case.

D. Financial Report

Please see the [Final Financial Report](#) attached.

Contact information

Reference documents

Click here for:

- [DREF Plan of Action \(EPoA\)](#)
- [Operation Update no. 1](#)

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

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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.

DREF Operation

Selected Parameters			
Reporting Timeframe	2021/06-2022/04	Operation	MDRGY003
Budget Timeframe	2021/06-2021/10	Budget	APPROVED

FINAL FINANCIAL REPORT

Prepared on 17/May/2022

All figures are in Swiss Francs (CHF)

MDRGY003 - Guyana - Floods

Operating Timeframe: 13 Jun 2021 to 31 Oct 2021

I. Summary

Opening Balance	0
Funds & Other Income	216,925
DREF Allocations	216,925
Expenditure	-204,699
Closing Balance	12,226

II. Expenditure by planned operations / enabling approaches

Description	Budget	Expenditure	Variance
PO01 - Shelter and Basic Household Items	40,923	41,093	-171
PO02 - Livelihoods	3,727	2,744	983
PO03 - Multi-purpose Cash	6,852	64,141	-57,290
PO04 - Health	11,596	19,227	-7,632
PO05 - Water, Sanitation & Hygiene	44,500	45,130	-629
PO06 - Protection, Gender and Inclusion		6	-6
PO07 - Education			0
PO08 - Migration			0
PO09 - Risk Reduction, Climate Adaptation and Recovery			0
PO10 - Community Engagement and Accountability	533	1,101	-569
PO11 - Environmental Sustainability			0
Planned Operations Total	108,130	173,442	-65,312
EA01 - Coordination and Partnerships			0
EA02 - Secretariat Services	1,445	74	1,371
EA03 - National Society Strengthening	107,350	31,182	76,167
Enabling Approaches Total	108,795	31,256	77,538
Grand Total	216,925	204,699	12,226

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All figures are in Swiss Francs (CHF)

MDRGY003 - Guyana - Floods

Operating Timeframe: 13 Jun 2021 to 31 Oct 2021

III. Expenditure by budget category & group

Description	Budget	Expenditure	Variance
Relief items, Construction, Supplies	143,810	137,934	5,876
Shelter - Relief	12,570	12,570	0
Clothing & Textiles	3,924	3,924	0
Water, Sanitation & Hygiene	26,455	26,455	0
Medical & First Aid	7,768	7,768	0
Teaching Materials	58,590	373	58,217
Utensils & Tools	28,703	28,703	0
Cash Disbursement	5,800	58,141	-52,341
Land, vehicles & equipment	154	154	0
Computers & Telecom	154	154	0
Logistics, Transport & Storage	19,665	18,399	1,266
Storage	40	269	-229
Distribution & Monitoring	12,402	12,045	357
Transport & Vehicles Costs	794	2,516	-1,722
Logistics Services	6,429	3,569	2,860
Personnel	23,499	19,504	3,995
International Staff	0	0	0
National Society Staff	18,465	17,442	1,023
Volunteers	5,034	2,062	2,972
Consultants & Professional Fees	2,000	2,612	-612
Consultants	2,000	572	1,428
Professional Fees		2,040	-2,040
Workshops & Training	906	2,579	-1,673
Workshops & Training	906	2,579	-1,673
General Expenditure	13,651	11,023	2,628
Travel	3,500	3,936	-436
Information & Public Relations	1,013	2,736	-1,723
Office Costs	7,717	3,162	4,555
Communications	675	715	-41
Financial Charges	747	475	272
Indirect Costs	13,240	12,493	746
Programme & Services Support Recover	13,240	12,493	746
Grand Total	216,925	204,699	12,226