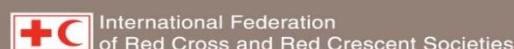




Final Report

Benin: Floods



DREF operation	Operation n° MDRBJ016
Date of Issue: 30 July 2022	Glide number: FL-2021-000145-BEN
Operation start date: 22 October 2022	Operation end date: 31 April 2022
Host National Society(ies): Benin Red Cross Society (BRCS)	Operation budget: 331,836
Number of people affected: 35,850 person (6,000 households)	Number of people assisted: 9,000 people (1,500 households)
Red Cross Red Crescent Movement partners currently actively involved in the operation: International Federation of Red Cross and Red Crescent Societies (IFRC)	
Other partner organizations actively involved in the operation: Government through (National Agency for Civil Protection, the municipalities and health centres of the targeted localities)	

The major donors and partners of the Disaster Relief Emergency Fund (DREF) include the Red Cross Societies and governments of Belgium, Britain, Canada, Denmark, Germany, Ireland, Italy, Japan, Luxembourg, New Zealand, Norway, Republic of Korea, Spain, Sweden and Switzerland, as well as DG ECHO and Blizzard Entertainment, Mondelez International Foundation, Fortive Corporation and other corporate and private donors. The Canadian Government contributed to replenishing the DREF for this operation. On behalf of Benin Red Cross Society (BRCS), the IFRC would like to extend gratitude to all for their generous contributions.

[Click here](#) for the financial report and [here](#) for contacts>

A. SITUATION ANALYSIS

Description of the disaster

In September 2021, Benin experienced heavy rainfall in most parts of the country. According to Benin Meteorological Agency, the floods were set to last for at least one month from September to the beginning of November 2021 due to continuous important amounts of rainfall. Thirty-eight (38) out of seventy-seven (77) communes suffered from rising water levels, important areas flooded, loss and damages, difficult access to infrastructure and markets, and sanitation issue during and after the floods.



Flooded huts in Zè ©Benin RC

Following the detailed assessment conducted by Benin Red Cross Society in November 2021, at least 13 deaths caused by drowning and water-related accidents were recorded by the time the water receded, with at least nine flood-related deaths and 4 more due to water-related accidents recorded in September. Many socio-community infrastructures, including more than 50 elementary schools and a dozen colleges, were affected. Six thousand (6,000) households were affected with several houses completely destroyed or damaged and 608 households displaced. Significant agricultural and livestock losses, food and crops were rendered useless by the floods in more than 80 villages across the affected areas.



BRCS Volunteers conducting needs assessments

From September to December 2021, many suspected cases of water-borne diseases were recorded by the National Society with diarrhoea cases and increased prevalence of malaria recorded in the various localities. The widespread flooding registered in the communes of Karimama, Malanville, Zangnanado, Zogbodomey, Ouinhi, Aguégué, Dangbo, Athiéme, Grand-Popo, and Zè, put these communes in red alert.

The National Society, alongside other partners, coordinated efforts to support communities. Starting from 22 October 2021, BRCS through this [DREF Operation](#) provided urgent lifesaving assistance in the above 10 most affected communes for 4 months in coordination with its partners. In February 2022, the National Society (NS) published an [update](#) of the [initial plan](#) to extend the implementation to complete the well-started implementation.

Summary of response

Overview of Host National Society

As an auxiliary to the public authorities in the humanitarian field and a member of various platforms (national, departmental, and local) for disaster risk reduction and adaptation to climate change, BRCS quickly positioned itself alongside the authorities at national, municipal and local levels to support assessments, overall coordination and provide assistance to the affected families. The authorities were involved in all phases of the operation for the sustainability of the achievements, from the assessment to the post-implementation evaluation.

From the onset of the flooding alerts, NS conducted sensitization sessions on the key risks faced by communities during the flooding season and water-borne prevention messages. Fifty volunteers from the 10 local committees affected were organized to conduct those awareness sessions on WASH and to assist the authorities on temporary relocation before shelter construction by preparing the relocation site, providing psychosocial and physical support to the communities. More actions were possible thanks to the CHF 331,836 DREF allocation, as the National Society engaged relief assistance in Karimama, Malanville, Zangnanado, Zogbodomey, Ouinhi, Aguégues, Dangbo, Athiémé, Grand-Popo, and Zè municipalities. Two hundred (200) trained volunteers were mobilised to carry out various activities to meet the set objectives and achieved the following:

- A rapid assessment was conducted in October, followed by a detailed needs assessment conducted from 8 to 14 November 2021 in the targeted municipalities, which confirmed the vulnerability of the 10 selected municipalities and the operational strategy initially outlined in the EPoA. More details on the need analysis is provided in the assessment section below.
- A total of 10,102 people were reached in the community with awareness messages on health and hygiene promotion.
- Reinforcement of community engagement and promotion taking into consideration feedback from the onset of the disaster.
- Identification of the 9,000 beneficiaries (1,500 households) including 1,000 households for food assistance. The target was identified jointly with the National Agency for Civil Protection, members of the Risk Reduction and Climate Change Adaptation Platform, local elected officials and BRCS volunteers during the rapid assessment.
- Procurement and distribution of various items by the National Society to meet urgent lifesaving needs of 9,000 people in 10 municipalities:
 - 1,500 hygiene kits to 1,500 households sufficient to cover 3 months
 - 270,000 Aquatabs tablets to 1,500 households sufficient to cover 3 months
 - 3,000 mosquito nets were distributed to 1,500 households. 02 per household.
 - 1,000 food kits were distributed, 1 per household. Each kit consisted of 10 packs of corn, 5 Kg Rice, 5 Kg Gari, 5 Kg Beans, and 02 litres of Oil.
 - Each commune benefitted from 100 food kits to cover 2 months ration
 - 1,500 non-food kits with the following content: 2 seals of 20l, 02 mats and 02 blankets.
- Construction of 800 emergency shelters and wash facilities to improve the living conditions:
 - 1280 kits were distributed for the construction of shelters or the rehabilitation of severely damaged houses
 - 100 volunteers assisted the communities with the construction of 1,023 shelters in the 10 municipalities. The NS fully supported the construction of 800 shelters while they partially supported the communities with 223 shelters.
 - 51 latrines were built in 10 villages most in need with the relevant communities and local institution consultation and 305 people have access to those latrines.
 - 3,000 children and women have received deworming medication.



Demonstration of the use of Aquatabs to the communities. ©BRCS

During the 6 months implementation timeframe, particular emphasis was placed on community engagement and protection with 32 feedbacks collected, setting-up community committees, and organising dynamic information-sharing activities with 120 focus group discussions. The lessons learnt from previous operations were duly used to reinforce the response during this operation, leading to a successful implementation.

Overview of Red Cross Red Crescent Movement in country

The Benin Red Cross received institutional, technical support from the IFRC through the Country Cluster delegation based in Abuja both remotely and in person. Within the framework of this operation, BRCS received two surge deployments: logistic and finance officers for 4 months each. Their presence improved the technical support provided by BRCS headquarters to branches and led to a better quality of the response and reporting of the National Society. BRCS also had the opportunity to receive the presence of the DREF officer for French-speaking African National Societies in April 2022 to support facilitating lesson learnt workshop and strengthening capacities of the National Society on operational and financial management of DREF-funded operations for a timely and effective reporting as well as improve the preparedness phase of the flooding seasons.

This operation also included a visit from the Head of Abuja Cluster Delegation, who participated in the launch of the distribution of food and non-food kits in the commune of Athiémé.

Overview of other actors in-country

The humanitarian assistance provided by the Government to the affected population and those at risk of the floods included the distribution of bags of rice, cans of oil, cans of sardines, mats, mosquito nets, bags of corn, bags of beans, boxes of pasta, life jackets, packages of sheet metal and packages of spikes. This Government aid was distributed to approximately 70,000 affected persons in 25 municipalities across the country. Following a programme set up by the National Agency for Civil Protection (ANPC), some affected localities received donations of food and non-food items. Benin Red Cross was present during these distribution activities.

The Islamic Mutual Aid of Benin, a humanitarian organization, distributed food kits of 60 kg to 260 households in one locality. All this assistance was given before the intervention of Benin Red Cross.

See more details on Government and others actors' actions in the [Operation Update 1](#).

Needs analysis and scenario planning

The National Society conducted a rapid assessment at the onset of the flooding alerts and later, a detailed assessment based on the initial rapid assessment results mentioned in the [DREF EPoA](#) which served to pre-identify the most vulnerable and affected municipalities.

The detailed needs assessment conducted with the support of members of the Red Cross and Red Crescent Movement identified urgent needs on food and non-food items, essential households items, emergency shelter, health risks, protection for groups with disability and other diversity-related factors. According to local authorities data and BRCS assessment report for the 10 targeted localities, by the end of the flooding season, 28,025 households had been affected in all the 37 municipalities. For the complete needs analysis, see the [operation update](#) which detailed the needs based on the assessment conducted by the National Society from 8 to 12 November 2021.

Considering all the needs and the humanitarian assistance outlined in the operation update, the National Society prioritised the following needs in the response strategy:

- Social Mobilization
- Food and non-food kit support
- Support for house reconstruction provided directly to households.
- Prevention, risk reconstruction and community engagement (RCCE).
- Community-based surveillance (CBS) and epidemic control for volunteers (ECV)
- Hygiene and sanitation promotion
- Awareness campaign on hygiene and sanitation in the communities
- Support to the national health care system.

The evaluation revealed that the floods did not fundamentally change the structure of the market system, or the situation analysed in the rapid assessment. However, throughout the operation and at the end, it emerged that the floods had nevertheless intensified some of the aspects already known, such as the increase in commodity prices due to longer transport times for goods because of the impracticality of the roads, the decrease in purchasing power with the impact on livelihoods, the closure of borders and the decrease in access to the market and to humanitarian aid in some areas. Data collected from market actors during market monitoring confirms the data from key informants.

There are no traders (from wholesalers/importers to retailers) who offer all basic products for sale. This was particularly true for items purchased under this DREF operation, which are sold by a limited number of traders in most affected villages. In contrast, essential food items are sold by several traders and if needed, could cover the demand.

Many of these traders do not have a formal business to facilitate on-site purchases; most of them were afraid of taxation and preferred to remain in the informal sector. As a result, purchases were made globally from Cotonou and transport managed separately by another supplier.

These needs have been met for the most part. However, some of the people's expectations, notably support for income-generating activities, life jackets for fisheries activities, medical stocks and other long-term support were not met, since the DREF funding covers emergency response and not recovery.

As planned in the scenario, the situation did not change much throughout implementation, so the operation remained at scenario one of the EPoA. Nine thousand most affected people (9,000 people; 1,500 households) were assisted through the proposed response in [the DREF EPoA](#), covering ten municipalities confirmed as: Karimama, Malanville, Zangnanado, Zogbodomey, Ouinhi, Aguégues, Dangbo, Athiémé, Grand-Popo, and Zè.

Risk Analysis

The risk assessment for this operation presents the following cases:

- With regards to the inaccessibility of the intervention areas due to the flooding of access roads, the Beninese Red Cross made use of motorized boats and canoes for movement. These boats and canoes are sometimes rented or made available by the decentralized state services.
- The flooding of relocation sites was not observed during the operation.
- No cases of diarrhoeal diseases, particularly cholera, were detected during the implementation of the operation.
- The execution of this operation during the current pandemic of COVID-19 required the provision of protective equipment to the volunteers and the application of preventive measures among the target population by Benin Red Cross.
- The security situation and militants operating in the border areas with Burkina Faso, Niger and Nigeria did not impact the implementation of activities. For the northern zone, BRCS constantly informed the teams of the security situation and applicable regulations. This information is collected regularly by the safety and security focal points.

B. OPERATIONAL STRATEGY

Overall Operational objective

The objective of this operation was to provide relief to assist 9,000 people (approximately 1,500 households) affected by the floods through a holistic package of emergency shelter construction, the provision of community health promotion and prevention activities, safe water, sanitation, and hygiene services, and food support. The Community Engagement and Accountability (CEA) served as a cross-cutting pillar across all sectors for an appropriate and community-sensitive response.

Proposed Strategy

BRCS completed the proposed response within 6 months implementation timeframe as detailed below:

- **Direct assistance to the communities:**

The shelter assistance was the first such response conducted by National Society in many of the targeted municipalities, but everything was successful thanks to good planning and technical guidance from NS HQ and IFRC surge. The shelter assistance was provided through the steps defined in the EPoA, starting with trainings, procurement, distribution, support to the communities in the construction process and arrangement of temporary sites (mainly schools and hosts) to constructed shelters.

The selection criteria listed in the EPoA were applied and selection was completed on 13 December 2021 through a selection committee with the involvement of community members through their religious and community leaders.

Training was provided to 200 volunteers on shelter construction and safe construction techniques instead of the 50 planned, but only 50 were mobilised for the construction activities. The National Society capitalised in this DREF response to build Branches capacities as far as possible given the lack of technical experience and competencies.

All the relief assistance planned in terms of essential household items was procured from Cotonou and distributed to the targeted households in the 10 municipalities. Unfortunately, due to the length of the procurement tender process to ensure procedures are followed, the procurement ended in 2022, a different fiscal year. The prices in the market were then different than planned due to inflation resulting from additional taxes to supplier in the new financial law. This led the National Society to reduce the quantity of some items, but the response remained relevant thanks to the

stability in the needs and assistance from other entities mentioned before. All the procurement, although concluded later than planned, ended well with a quality control for food kits done by an independent structure certified by the Government as a measure by the National Society to validate the content delivered by the supplier.

The kits were distributed following a programme validated by the National Society, the local authorities of each municipality and the community leaders. Three teams were organized to make the distribution: one for the North municipalities, one for the centre municipalities and one for the Southern municipalities. Each team included personnel from HQ, branches, a staff from the department, and 5 volunteers who distributed all the kits at the same time in each commune. On the sites, centres were organised for families based on the beneficiary list for various kits.

- **Livelihood and basic needs; WASH and Health assistance:**

All planned support was provided to communities and a post-distribution monitoring confirmed the level of satisfaction of households for the items received. The assistance provided included food kits for 1,000 affected households, non-food kits for 1,500 households, hygiene kits for 1,500 households; mosquito nets for 1,500 households, Aquatabs distributed to 1,500 households and deworming for all pregnant women and children under five in affected areas, reaching 451 pregnant women.

Volunteers from Benin Red Cross remained at the heart of this distribution in the various localities and all sensitization and awareness sessions to the communities. The official launch took place in Athiémé and was attended by the Head of Abuja Cluster Delegation.

Achievement per output and activities are detailed in section C.

- **Community engagement and accountability:**

As part of the implementation of this operation, community engagement was streamlined throughout the response and the National Society used different mechanisms to engage communities at different stages from the targeting to the distribution phase. Thus, several channels were defined for the collection of community feedback which was used to strengthen this operation including:

- Phone calls and text messages to the open line of Benin Red Cross.
- Local community committees' discussions facilitated by BRC volunteers
- Suggestion box at the level of some decentralized government structures
- Conducting a survey to collect feedback during the Post distribution monitoring and initial assessment.

It should be noted that the procedure to obtain a green line was undertaken by the National Society but this was not completed by the end of this operation due to taxes formalities which are still ongoing. However, Benin Red Cross has an open phone line which is used to fulfill the same purpose and through which complaints were collected and processed, depending on their nature. Three categories of feedback were defined by the BRCS:

- Feedback related to the response given in this DREF operation. This included all expressions of dissatisfaction relating to the commitment and promises made and therefore which were the direct responsibility of the organization.
- Sensitive feedback related for example to sexual abuse, abuse and exploitation, misconduct of staff, misuse/misappropriation of funds or fraud.
- General feedback not directly linked to the two above. Usually, concerns and issues which were not within the purview of the organization or related to this response.

As soon as the feedback was received, the NS Community Feedback Management Committee took care of the processing and reverted to the complainant or adopted corrective measures depending on the nature and scope of the feedback. All feedback was processed. More details on feedback collected is contained on section C below.

- **Monitoring and Evaluation:**

A detailed needs assessment was conducted with the participation of the affected population. The methodology used included meetings with local authorities, decentralized state structures and Red Cross volunteers. The National Society set up a working session with the prefectural authority before field data collection began, simultaneously with the site visit by the supervision team. Surveys and focus group discussions with different groups of people, including women, girls, men, boys, and people with disabilities, were conducted to verify and validate information already available at National Society level.

A post-distribution monitoring mission was conducted by BRCS. The National Society ensured the relevance of its distribution program and analysed the satisfaction of the beneficiaries of the interventions. Thus, the methodological approach used in this post-distribution monitoring mission was to collect information from beneficiary households via a survey. At the end of the implementation, some field monitoring and evaluation activities were conducted by branches, local authorities, HQ and IFRC.

On 28 April 2022, a lessons-learned workshop, involving the various implementation stakeholders, was held to gather feedback from volunteers, target communities, and available stakeholders to identify implementation strengths and weaknesses to better plan future responses. A report of this workshop was produced and shared with all relevant stakeholders. This workshop was attended by IFRC staff present in Benin and facilitated by the BRCS PMER and Program manager with the technical guidance of the DREF officer. The Preparedness for Effective Response (PER) mechanism was used during the lessons learned workshop. For an integrated approach, the participants were divided in focus groups to analyse the achievements, challenges and lessons. At the end of this workshop, the following good practices were identified:

- The high availability of BRCS volunteers to support activities
- The training of volunteers on different themes and choosing to train all the volunteers on all the trainings to build more capacity
- The identification process of beneficiaries with local authorities and communities
- The variety of kits procured and distributed helping BRCS teams to familiarise with procedures thanks to the Surge support.
- Involvement of local BRCS committee members in the field interventions at all stages
- Rapid assessment of community needs
- Effectiveness of the awareness sessions

However, based on both the monitoring reports and the lesson learnt workshop report, the following recommendations should be considered for better operational management in the future:

- Work towards having an emergency fund at BRCS to support quick starting intervention when an alert is received for crisis/disasters.
- Improve the communication and information sharing to branches, local authorities, and communities to avoid misinformation from involved authorities to the communities.
- To further develop Benin Red Cross' Emergency standard operating procedures in cases of crises and disasters.
- Develop a strategy document for assistance to vulnerable people affected by crises and disasters
- Ensure more capacity building for HQ and branch staff on emergency response, DREF request, update, and reporting
- Build more capacity at branch level with NDRT/CDRT, DREF trainings to limit the omnipresence of HQ as direct support during most of the activities.
- As floods are cyclical in Benin, it would be more useful to develop a long-term anticipatory response or long-term projects for high-risk localities to ensure the sustainability of achievements, reduce vulnerability in the flooding season and improve humanitarian impact.
- Strengthen dissemination of National Society and IFRC policies to the different actors involved in a response chain.

C. DETAILED OPERATIONAL PLAN

 <p>Shelter People reached: 8,993 (1,500 HH) Male: 4,317 Female: 4,676</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		
Indicators:	Target	Actual
# of households assisted with safe and appropriate emergency shelter	1,500	1,280
# of households assisted with essential households items	1,500	1,500
Output 1.1: Short, medium and long-term shelter and settlement assistance is provided to affected households		
Indicators:	Target	Actual
# of households receiving shelter items	1,500	1,280
# of volunteers trained on shelter	50	200
# of shelter needs assessments conducted	10	10

# of market assessments conducted	10 (1 per municipality)	10
# of monitoring visits conducted to monitor the distribution of shelter and food items	10 (1 per municipality)	10
Output 1.2: Technical support, guidance and awareness raising in safe shelter design and settlement planning and improved building techniques are provided to affected households		
# of households supported to construct emergency shelter	1,500	1,023
# of volunteers trained on construction of emergency shelter	100	200
# of people reached who report they were satisfied with the support/assistance provided	80 %	60 %

Narrative description of achievements

To meet the objectives set in this sector, activities were carried out in several stages including trainings, procurement, distribution and evaluation.

i. The training of 200 volunteers started with the development of training modules for shelter construction, including CEA rapid briefing modules. The shelter training was organised as a chain training covered by one main trainer initially trained. The following modules were used:

- Disaster management, emergency assessment and general mechanisms.
- Introduction to the concept of shelter: Guides and standards
- Introduction to CEA in Emergencies
- The IFRC shelter kit and the Sahel shelter kit.



Ten volunteers were trained in shelter construction in each zone and a total of 200 volunteers also received basic construction training in the various local committees in each zone.

ii. A total of 1,280 shelter kits were procured in Cotonou and delivered to each branch. Kits were made up of metal sheets, wood, 12, 15, wire and waxed cloth (solid protection bags). The kits were distributed to the beneficiary households and the support for construction was offered through volunteers.



iii. A two-day preparatory phase was needed for program, branches to draft the tools to be filled in, the ToR, the schedule of activities per locality and ensure the mobilisation of volunteers as well as the practical modalities of implementation of the activities. All tools and agenda were validated and the implementation phase lasted more than 10 days for the overall construction in the targeted municipalities. Constructions were made in each targeted area in agreement with the beneficiaries and with the facilitation of the local authorities. All the shelter constructions were completed on 13 December 2021 with the support being provided according to the needs of each household.

Challenges

The main challenges in this sector were related to the procurement and transportation of the kits:

- During the implementation of this activity, BRCS experienced delays linked to the soaring prices of items on the market, requiring numerous exchanges with the supplier.
- The transportation of material to the target areas was also quite an ordeal due to bad roads.

Lessons Learned

- There is a need in the coming years to have a contract with key suppliers to avoid a long procurement process which delays assistance to people.
- It is also necessary to strengthen the volunteers by having key volunteers for shelter activities.



Livelihoods and basic needs

People reached: 5,995 (1,000 HH)

Male: 2,878

Female: 3,117

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

Indicators:	Target	Actual
# of households with fulfilled basic needs	80% or 4,800	100 %

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

Indicators:	Target	Actual
# of households provided with in-kind food support:	1,000	1000
# of Market assessments conducted	1	1
# of PDM conducted	10 (1 per municipality)	10

Narrative description of achievements

The essential bit of the livelihood assistance was to complete the procurement and distribution of urgent food and non-food items. The procurement lasted one month in accordance with procedures. Each kit was made of 10 pack of corn, 5 Kg of rice, 5 Kg of gari, 5 Kg of beans, and 2 litres of oil. Each municipality benefited from 100 kits.

Sorting was carried out between the volunteers of Benin Red Cross, the persons in charge of the Social centres and the DRR focal points in charge of identifying the beneficiaries to avoid duplication.

The BRCS Staff carried out a quality control check to ensure the beneficiaries.



Some 50 volunteers received a two-days briefing on distribution with a simulation exercise to prepare the distribution in the different municipalities. The distribution went well in the 10 communes without any minor or major incidents. With communities and local authorities' consultation, a distribution schedule was established and shared with the municipalities.

For the distribution, 3 teams were constituted to facilitate the distribution. Local authorities were part of both the selection process and distribution, as well as community leaders, the members of BRCS Governance and the decentralized services of civil protection.

Challenges

- The delay in the assistance was a major challenge as a lot of time was spent completing the tender process and aligning with procedures, as well as accommodating the soaring prices of items on the market.
- Impassable roads in some villages made the transport of kits from Cotonou to the distribution areas very difficult. This led to detours, bypasses and local arrangements involving large amounts of unbudgeted handling equipment that is difficult to document given the context.

Lessons Learned

For speedy implementation, it is necessary to have a contract with key suppliers both for NFIs, food and a financial service provider for cash assistance as this will help to avoid a long procurement process that delays assistance to the vulnerable people. A cash transfer mechanism would have improved the response timeline.

The improvement of the consideration of the communities by the implementation of clear mechanisms allowing the consideration of feedback, opinions and complaints of the communities at each stage of the operation but also the

continuous transmission of information to the communities. This is especially true in the definition of selection criteria, the planning of kit contents and the distribution system and location.

The impact of storage and transport in a wet season must be better assessed as a risk of degradation of food kits when planning for direct food distribution.

It is recommended that in addition to quality control by the state-approved agency, local procurement should be ensured to reduce the risk of dilution due to large quantities, storage time before distribution, and to reinforce with appropriate containers and packaging.



Health

Peoplereached: 10,102 (1,685 HH)

Male: 4,849

Female: 5,253

Outcome 1: The immediate risks to the health of affected populations are reduced

Indicators:	Target	Actual
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% of the target population that are aware of health risks	60%	50%
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Output 1.1: The health situation and immediate risks are assessed using agreed guidelines

Indicators:	Target	Actual
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# of communities/households reached with health risks information	1000	1685
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# of assessments conducted to identify health needs	01	01
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Outcome 2: Transmission of diseases of epidemic potential is reduced

Indicators:	Target	Actual
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% of the target population who was observed conducting prevention measures	80% of 7,200 people	8 000
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Output 2.1: Community-based disease control and health promotion is provided to the target population

# of volunteers trained on epidemic control and CBHFA	200	200
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# of staff trained on epidemic control and CBHFA	20 staff	15
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% of under 5 years old children dewormed	75%	2 098 children and 451 pregnant women
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# of volunteers deployed to conduct RCCE activities	100	100
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# of RCCE activities conducted	50	100
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Output 2.2: Vector-borne diseases are prevented

# of relocation sites implementing vector control measures	05	0
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# of mosquito nets distributed	3,000 - 2 per HH	3000
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# of surveillance activities conducted	300	500
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Output 2.3: Transmission is limited through early identification and referral of suspected cases using community-based surveillance, active case finding, and/or contact tracing

# of Households to be assisted	1,500	1500
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# of volunteers trained on community-based surveillance	200	200
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#of suspicious cases of water-borne diseases referred	as necessary	65 people
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Output 4.6: Improved knowledge about public health

# of Households reached with health prevention messages	1,500	1685 Households) (10,102 people)
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# of Hygiene promotion campaigns conducted	01	01
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IEC materials produced and distributed	200	200
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Outcome 6: The psychosocial impacts of the emergency are lessened

# of people reached with PSS	as necessary	427
Health Output 6.1: Psychosocial support provided to the target population as well as to RCRC volunteers and staff		
# of volunteers and staff trained on PSS	200 volunteers	140

Narrative description of achievements

The activities were planned, implemented and monitored in this sector with the support of local leaders who were part of the local committees set at the onset of the operation. The main achievement to highlight in this sector are:

- i. Training of 200 volunteers on health risk and prevention, water-borne disease and health hygiene and psychosocial support (PSS). These trainings were set as second-priority activities to build or refresh the capacity of volunteers and branch staff on health risks and key messages on health prevention campaign. The training on health and disease prevention was completed in January 2022. A grouped session was organised for 10 trainers in Bohicon who have successfully cascaded to their respective municipalities in January. Fifty (50) volunteers from the 200 selected for this operation were trained on psychosocial support which was completed on 31 January 2022.
- ii. A detailed health need assessment was conducted jointly during the multisectoral assessment. It served to identify all the needs post-disaster with a prevalence of hygiene promotion conducted by volunteers. Community leaders, members of local committees, were engaged in hygiene promotion and environmental hygiene activities. Planning for follow-up of health activities was requested by the Local Committees for outreach from 14 to 28 February 2022. The sensitisation of affected communities was conducted by volunteers mobilised in different teams of 10 volunteers.
- iii. The sensitization reached more than 10,102 people including 451 pregnant women, 5,253 women (52%) and 4,849 men (48%). This was achieved through the following:
 - Door to door visit for sensitization which lasted 4 months and engaged all the 200 volunteers,
 - Facilitation of focus group discussions with the communities most exposed to water-related health risks and prevention and to discuss good practices in place. More than 250 discussions with communities were held during the operation with different groups including: the heads of households which were mainly women, the elderly and young men and women and the children with their parents at the period of April during the schools holidays.
 - Use of local community committees to engage communities in Health/WASH prevention messages. Local community committees were created and taught basic prevention messages in the targeted municipalities to support local engagement of communities on hygiene and messages. Each volunteer oversaw the constitution, the sensitization and teaching and the monitoring of one local community committee. A total of 200 local community committees were therefore created to support hygiene promotion and health prevention activities in the villages.
 - A deployment of 200 volunteers for 5 days for mass campaign sensitization with megaphones and image boxes as IEC material. The messages for IEC material were submitted to local authorities and coordinated with civil protection in the field before printing and use. In addition to the volunteers mobilised through this operation, the National Society engaged the participation of other available branches volunteers during those intensive days of sensitisation.



Cases of patients detected at community level by volunteers during the visits/activities and referred by volunteers for water-borne diseases:			
Types of diseases	Malaria	Diarrhea	Cholera
#	57	8	0

The following themes were covered by volunteers to the communities:

- 1- Diarrheal diseases and modes of transmission
- 2- Malaria and its prevention methods
- 3- Water treatment methods and the use of Aquatabs
- 4- Hand washing techniques

- iv. Psychosocial support was provided to 427 people.
- v. In terms of relief assistance provided, the National Society completed all the procurement in the same period and planned a chronological distribution. Each household received two long-lasting insecticide-treated nets (LLIN).
- vi. Reporting tools were developed and sent to branches for volunteer outings activities. This was used as daily monitoring tools of households reached with messages listed above and it has also served as feedback collection system.

vii. In terms of RCCE activities in place, 176 feedbacks were collected and addressed

The following table summarizes Community Feedback collected and treated in the targeted localities during the DREF period.

Feedback	Point of collection				Total
	Decentralized CRB structures	Social centres	Communal DRR platform	Communities	
The distance between the place of distribution of the kits and the homes of the victims is enormous	12	1	1	44	58
The belated response of the CRB after the onset of the floods	13	2	0	24	39
Lack of involvement of some community leaders in the identification of beneficiaries.	0	0	0	2	2
Late start of outreach activities in the field	9	0	0	10	19
Low involvement of the communal risk and disaster management platform in the implementation of the DREF	1	0	7	0	8
The non-consideration of certain volunteers with the skills at the level of certain local committees	6	0	0	0	6
Lack of activity for community resilience	1	4	0	27	32
Small number of volunteers trained at the local committee level	12	0	0	0	12
Total per feedback by Actors	54	7	8	107	176

Challenges

No major challenges were reported except for road access in some villages for both volunteers and vehicles.

Lessons Learned

Community preparedness activities should be organized before the rainy season to reduce the impact of flooding.

Water, sanitation and hygiene



People reached: 10,102 (1,685 HH)

Male: 4,849

Female: 5,253

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

Indicators:	Target	Actual
# of vulnerable households with increased access to appropriate and sustainable water, sanitation and hygiene services	1,000	1,500
Output 1.1: Continuous assessment of water, sanitation, and hygiene situation is carried out in targeted communities		
Indicators:	Target	Actual
# of volunteers trained	70	200
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 households with access to safe water	1,500	1500
# of Aqua tabs distributed	270,000 tabs	270,000 tabs
# of Communities trained on safe water storage and use of water treatment products	10 communities	10
WASH Output 1.3: Adequate sanitation which meets Sphere standards in terms of quantity and quality is provided to target population		
% of households with access to adequate sanitation	100	132
# of toilets constructed	100	51
# of toilets equipped with handwashing facilities, etc.)	100	51
# of community cleaning activities conducted	20	30

WASH Output 1.4: Hygiene promotion activities which meet Sphere standards in terms of the identification and use of hygiene items provided to target population		
# of People reached by hygiene promotion activities	9,000	10 102
# of hygiene needs assessments conducted	1	1
# of IEC materials printed	200	200
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 households that receive soap and hygiene materials	1,000	1000
# of hygiene kits distributed	1,500	1500
# of communities trained on the use of hygiene kits	10	10
Narrative description of achievements		
<p>Apart from awareness raising, which was coupled with disease risk education, WASH activities were essentially distributions and pre- and post-distribution support of materials to improve access to safe drinking water during periods of flooding. Monitoring was done to ensure appropriate use of distributed materials.</p> <p>The main achievements can be summarised as below:</p> <ul style="list-style-type: none"> • Distribution of 1,500 hygiene kits. One per family containing: 3 sponges, 2 soap dishes, 10 bath soaps and 3 laundry soaps (Omo), • Each household benefited from 180 Aquatabs tablets for home water treatment for 90 days. <p>All the distributions were carried out simultaneously. The beneficiaries were visited by volunteers during the awareness sessions to ensure the right use of the various kits. Each volunteer received one image box for daily sensitization which helped with community education sessions.</p> <ul style="list-style-type: none"> • Construction of temporary fifty-one 51 latrines adapted to the environment and the need expressed by the communities. Pit latrines were built using containers (200l) which are installed to collect the excreta and can be moved to a disposal site to be emptied and reinstalled. Every latrine was fitted with a wooden floor with a defecation hole, a wooden superstructure, a sheet metal cover, a wooden door and stairs, 75 mm PVC pipe for ventilation, a wooden container cover with a bucket as a defecation pipe. The container can be emptied for a lumpsum fees. For continuity, the local commune authorities will support the communities, thanks to the discussions initiated with them by the BRC on the ground. The latrines are made of local wooden pieces that can be dismantled because they were built for communities that were always at risk of flooding. they could therefore be moved as the waters receded. • Local community committees have supported the monitoring of the use and sanitation of the latrine points and surrounding areas. 		 
Challenges		
The high cost of construction materials was the major difficulty BRCS faced. The access roads to our targets were the other difficulty BRCS encountered.		
Lessons Learned		
<ul style="list-style-type: none"> • Community preparedness activities must be organized before the rainy season to reduce the impact of flooding. It is also necessary to elaborate development and resilience projects to accompany these communities. The different supervisions allowed us to know that the support was very necessary to the community. It is also necessary to perpetuate the various achievements of this operation. It is necessary to have in place a rapid acquisition mode to avoid delaying the assistance. • It is necessary to ensure an integrated planning based on the needs and realities of the communities, taking into account the specific needs of the communities in the content of the hygiene kits and the quantity of certain priority items. 		

Strategies for Implementation

Outcome 1: 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

Indicators:	Target	Actual
# of volunteers mobilised	200	200

Output S1.1.1: National Societies have effective and motivated volunteers who are protected

Indicators:	Target	Actual
# of staff mobilised and actively involved in the operation	20	17
# of surge personnel deployed	02	02

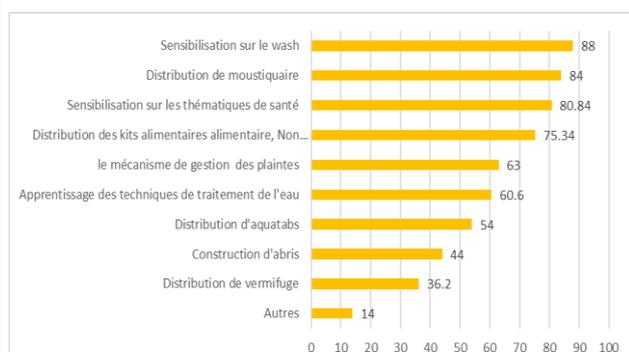
Narrative description of achievements

The NS organized working sessions at the level of the general secretariat with the different technical departments engaged in this DREF.

Several working sessions were also organised with technical and management colleagues at IFRC, to ensure a coordination mechanism and to keep information sharing. For each session, the state of progress of the activities was requested by IFRC and shared. Monitoring of activities was regularly carried out by the members of governance and by the Secretary General.

A field visit with the IFRC team from the Cluster Delegation also took place from 20 to 31 January 2022.

It is necessary to capitalize on the main achievements of this DREF operation, which were: the strengthening of the operational/technical capacities of the headquarters and the antennas (200 volunteers and 20 staff with knowledge of WASH, CEA, Shelter, etc.); strengthening the collaboration with local authorities and partners who were essential to the operation and capitalize on the acceptance of the communities after years of reluctance to obtain the image of the RC.



Graph 1: Level of satisfaction per interventions, BRC PDM report

For the sample selection, the Schwartz formula was used. 333 households were selected as a sample to conduct the final evaluation of the provided assistance. Benin Red Cross organized a data collection to get the expression and community feedback on the assistance and their perception of the various stage of the assistance. All the graph figures are percentages.

The PDM revealed very good level of satisfaction by communities in all the communes where the DREF was implemented. 65% of the households were satisfied in all the localities except Aguégues where it was 56%. In general, the average level of dissatisfaction within communities is 34%.

The efforts of Benin Red Cross within the framework of this intervention are salutary and rightly appreciated by the beneficiaries, even if there is still room for improvement. For this reason, to improve future interventions, BRCS looked at the elements of non-satisfaction and counted 34% of unsatisfied households expressing the low quantity of the composition of the kits as an element of dissatisfaction and 42% notified that the support of the BRC comes a bit late compared to their expectations. In addition, 24% said that the number of households supported in the various localities was insignificant compared to actual needs.

Levels of satisfaction within the community vary from one intervention to another. See graph 1 above.

IFRC provided various technical and operational support. On the field, two surges were deployed. One for logistic to support procurement and shelter and another for finance. In addition, the Abuja Delegation started supporting remotely all the planning, implementation and reporting. A mission of the Africa DREF officer covered the finalisation of various pending files to enable the successful closing of this response.

Challenges

- Communication between the decentralized structures and headquarters experienced some difficulties in the implementation of activities.

- Due to the lack of branches capacity, the implementation obliges to have constantly a staff from Headquarter to support technical guidance to field volunteers and committees for each activity.
- The mission of the surge finance ended prior to the end of the operations with no possibility to extend further due to procedures while their presence was much needed as the operations entered the reporting phase.

Lessons Learned

- The establishment of a decentralized operational management system is needed by improving branches capacity, communication and reduce the constant presence of HQ which is costly and slowing field activities.
- Work more on plan for anticipatory actions to floods in the country.

D. Financial Report

The overall budget allocated for this operation was CHF 331,836 of which CHF 328,655 (99 %) was spent. The balance of CHF 3,181 will be returned to the DREF pot.

Explanation of variances:

Description	Budget	Expenditure	Variance (+/-)		Comments
			CHF balance	%	
Medical & First Aid	25,239	22,377	2,863	11.3%	The actual expenses on this procurement were lower than budgeted, leading to savings recorded.
Information & Public Relations	3,653	2,231	1,422	38.9%	The actual expenses on this procurement were lower than budgeted, leading to savings recorded.
Grand Total	331,386	328,655	3,182	1.0%	The budget was 99% spent. The unspent balance result in fee savings from IEC material and medical and first aid procurement.

Contact information

Reference documents:

Click [here](#) for:

- [Operation Update](#)
- [Emergency Plan of Action](#)

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

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For In-Kind donations and Mobilization table support:

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

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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.

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Saving lives, changing minds.



DREF Operation

Selected Parameters			
Reporting Timeframe	2021/10-2022/6	Operation	MDRBJ016
Budget Timeframe	2021-2022	Budget	APPROVED

FINAL FINANCIAL REPORT

Prepared on 29/Jul/2022

All figures are in Swiss Francs (CHF)

MDRBJ016 - Benin - Floods

Operating Timeframe: 22 Oct 2021 to 30 Apr 2022

I. Summary

Opening Balance	0
Funds & Other Income	331,836
DREF Allocations	331,836
Expenditure	-328,655
Closing Balance	3,181

II. Expenditure by planned operations / enabling approaches

Description	Budget	Expenditure	Variance
PO01 - Shelter and Basic Household Items		-1,618	1,618
PO02 - Livelihoods			0
PO03 - Multi-purpose Cash			0
PO04 - Health	41,734	80,591	-38,857
PO05 - Water, Sanitation & Hygiene	43,856	51,327	-7,470
PO06 - Protection, Gender and Inclusion			0
PO07 - Education			0
PO08 - Migration		35	-35
PO09 - Risk Reduction, Climate Adaptation and Recovery	137,663	155,663	-18,000
PO10 - Community Engagement and Accountability	17,737	9,320	8,417
PO11 - Environmental Sustainability			0
Planned Operations Total	240,991	295,318	-54,327
EA01 - Coordination and Partnerships			0
EA02 - Secretariat Services		2,830	-2,830
EA03 - National Society Strengthening	90,846	30,507	60,339
Enabling Approaches Total	90,846	33,337	57,509
Grand Total	331,836	328,655	3,182

DREF Operation

Selected Parameters			
Reporting Timeframe	2021/10-2022/6	Operation	MDRBJ016
Budget Timeframe	2021-2022	Budget	APPROVED

FINAL FINANCIAL REPORT

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MDRBJ016 - Benin - Floods

Operating Timeframe: 22 Oct 2021 to 30 Apr 2022

III. Expenditure by budget category & group

Description	Budget	Expenditure	Variance
Relief items, Construction, Supplies	183,814	180,225	3,590
Shelter - Relief	50,312	49,945	367
Construction - Facilities	10,295	10,180	115
Food	66,419	66,376	42
Water, Sanitation & Hygiene	21,420	21,511	-91
Medical & First Aid	25,239	22,377	2,863
Teaching Materials	10,129	9,835	293
Logistics, Transport & Storage	4,643	4,428	215
Distribution & Monitoring	4,643	4,428	215
Personnel	42,738	44,095	-1,356
International Staff	27,095	28,133	-1,038
Volunteers	15,643	15,961	-318
Workshops & Training	19,511	19,294	216
Workshops & Training	19,511	19,294	216
General Expenditure	60,878	60,555	323
Travel	47,705	48,947	-1,242
Information & Public Relations	3,653	2,231	1,422
Financial Charges		-15	15
Other General Expenses	9,519	9,391	128
Indirect Costs	20,253	20,059	194
Programme & Services Support Recover	20,253	20,059	194
Grand Total	331,836	328,655	3,182