

DREF Operation-Final Report

Equatorial Guinea | Explosion Bata

DREF operation MDRGQ002	Glide number: AC-2021-000020-GNQ
Operation start date: 12 March 2021	Operation end date: 30 September 2021
Host National Society: Equatorial Guinea Red Cross	Operation budget: CHF 218,628
Number of people affected: 3,900	Number of people assisted: 2,250 (450 families)
Red Cross Red Crescent Movement partners currently actively involved in the operation: International Federation of Red Cross and Red Crescent Societies (IFRC), International Committee of the Red Cross (ICRC) and the Spanish Red Cross (SRC)	
Other partner organizations actively involved in the operation: Government of Equatorial Guinea, UNDP, UNESCO, UNDAC, UNICEF, WHO, FAO, and ECCAS	

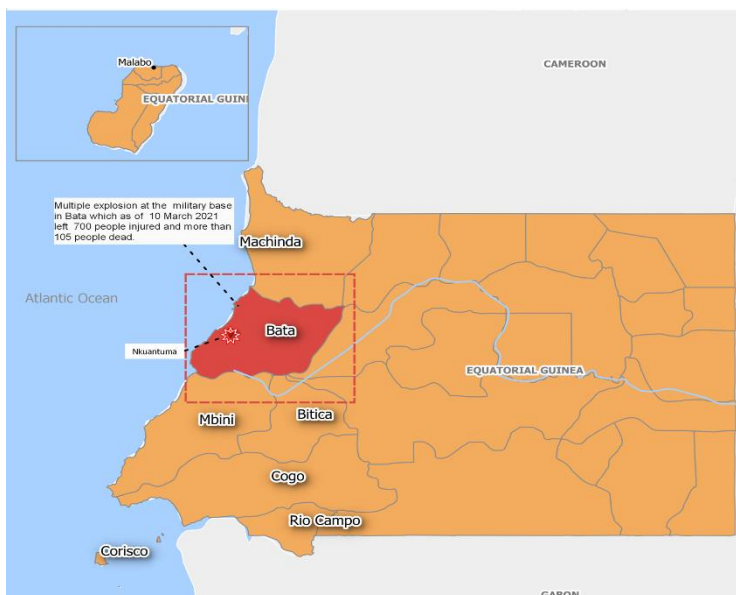
The major donors and partners of the Disaster Response Emergency Fund (DREF) include the Red Cross Societies and governments of Belgium, Britain, Canada, Denmark, Germany, Ireland, Italy, Japan, Luxembourg, New Zealand, Norway, Republic of Korea, Spain, Sweden and Switzerland, as well as DG ECHO and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

A. SITUATION ANALYSIS

Description of the disaster

On 7 March 2021, a series of explosions were recorded in the armoury of the Gendarmerie and the Nkuantoma military barracks in Bata, the economic capital of Equatorial Guinea. According to official data, 107 people died as a result of these explosions, which also caused extensive damage to residential areas and the military compound. More than 700 people were injured, including women and children in army barracks and residential areas near the military complex. The government described the situation as catastrophic and called for international support to meet humanitarian needs. 615 of the injured were admitted to local health facilities.

A total of 19,000 people were affected by the explosion, including 4,500 displaced persons and 8,000 people in need. According to the assessments conducted by the Equatorial Guinea Red Cross EGRCS at the very beginning of the operation, more than 400 families had their homes completely or partially destroyed, thus raising problems of shelter, access to water, and food. In addition to those physically affected, there were reports of unusual behaviour by some children who were traumatised by the blast. As many schools were destroyed, the start of the school year, which was to take place two weeks after the explosion, was compromised. It should also be noted that in the displacement caused by the explosions, some families were separated in confusion, with some parents forced to split their children between various friends and family members due to a lack of resources and space. With children potentially unsupervised or beyond the reach of their usual guardians, leading to a protection issue.



Summary of response

Overview of Host National Society

As soon as the disaster occurred, the Bata regional committee went on the field to provide first aid to the victims and assess the situation, then requested a DREF because of the scale of the situation.

Through this DREF Operation, the National Society was able to:

- Carry out a rapid assessment of the needs of the victims and identify beneficiaries of Vouchers. Beneficiaries were selected according to pre-established vulnerability criteria, with priority being given to families whose houses had been destroyed, large families, and families headed by women or families with young children, pregnant women elderly people. A total of 450 families were selected.
- Train 44 volunteers to various thematics, notably: Psychological First Aid (PFA) and Advanced First Aid (AFA) to provide relief to the victims; Community Engagement and Accountability (CEA) to ensure the involvement of the community and good complaint management; Cash and voucher assistance to carry out the distribution efficiently.
- Provide psychological support to 706 families and carry out sensitisation to water-borne disease and COVID-19;
- Conduct a market survey to identify supermarkets that are well-stocked enough to provide the necessary basic products, including foodstuffs, medicines, and construction materials.
- Distribute vouchers to 450 families, whose 81% were used to buy food.
- Carry out post-distribution monitoring to assess the satisfaction of beneficiaries and the pertinence of the operation. The major outcome was that 100% of the beneficiaries were entirely satisfied by the quality of the articles, and 89% said their most urgent needs had been satisfied.
- Carry out a lesson-learned workshop, which was attended by volunteers, supervisors, National Society (NS) staff and governance, community leaders, IFRC staff from Yaounde, and a visitor from ECHO.

Overview of Red Cross Red Crescent Movement in-country

The IFRC office in Yaoundé supported the NS in launching the alert and then applying for emergency funding, namely the DREF. As soon as the funding was granted, a team from IFRC and Spanish RC, with logistical support from the ICRC, were deployed to Bata to conduct a rapid assessment of the needs of the victims, define the most appropriate type of assistance according to the context and identify the most vulnerable people to provide support. This mission took place from 16 to 27 March 2021.

In addition to financial support, IFRC provided technical expertise remotely and through field missions. A total of five field missions were carried out to support the National Society:

- Assessment PMER PER logistician from SRC.
- Project Management: The Project Manager from Cameroon Red Cross was deployed for 3 months to supervise the operation.
- Monitoring mission from IFRC Project Manager
- Cash specialist
- PMER and Cash specialist from IFRC Yaounde delegation for distribution, training in cash, post-distribution monitoring, and Lessons Learned Workshop (LLW).

The operation being the second DREF operation launched in Equatorial Guinea, the close support and capacity strengthening of NS played a key role in the achievements. Below is a summary table of field missions carried out aside of the remote support and technical meetings held:

	Outcomes of the mission	Staff involved	Date
1	• Rapid needs assessment • Selection of beneficiaries	PMER Assistant (IFRC Yaounde delegation) PER Officer (IFRC Yaounde delegation) Logistics Officer (Spanish Red Cross)	16 to 27 March
2	• Provide technical support to the Equatorial Guinea Red Cross in monitoring the implementation of the DREF Explosion Bata activities	Project Manager /Surge (Cameroon Red Cross)	27 April to 27 July
3	• Provide technical support to the Equatorial Guinea Red Cross in monitoring the	COVID-19 Project Manager (Yaounde delegation)	27 July to 11 August 2021

	implementation of the DREF Explosion Bata activities		
4	• Training of volunteers • Reception of first aid material • Design of distribution setup • Agreement of process with Martinez • Review of beneficiary list • Transfer of operational budget from Malabo	Cash specialist (IFRC Geneva)	
5	• Distribution of vouchers to beneficiaries • Cash training for volunteers involved in the distribution • Post Distribution Monitoring • Lessons learned Workshop • Support the ECHO mission in monitoring the implementation of the DREF operation, in particular to meet beneficiaries who were affected by the explosion	PMER Assistant (Yaounde delegation) Cash Officer (Yaounde delegation) DCPRR Officer (Yaounde delegation)	16 to 30 September

Overview of non-RCRC actors in country

The Government of Equatorial Guinea assisted the affected families through a direct cash distribution of XAF 700,000. All the wounded were attended charge for free in state hospitals.

UN agencies, including WHO, UNFPA, WFP, UNICEF, UNHCR and UNDP, led by UNDAC, conducted a multi-sectoral assessment of the needs of the victims in Bata, in partnership with the Red Cross Movement. Based on the results of these assessments, the UN and the Government of Equatorial Guinea launched a coordinated humanitarian response and recovery plan for Equatorial Guinea to provide emergency assistance to some 16,000 women, men, girls, boys and adolescents affected by the explosions by providing basic support (food, health and water, sanitation and hygiene), as well as support for the rapid restoration of access to basic services, the restoration of livelihoods, and the rehabilitation of destroyed homes and/or public infrastructure, for one year.

Needs analysis and scenario planning

The results of the assessment conducted from 23 to 26 March 2021 were very similar to those made available after the initial observations. The top two priority needs were shelter and food security. Other priorities (health, Protection, gender and inclusion, education) were addressed by various organisations present on the field, notably, UN agencies.

- **Shelter:** About 400 families had their houses completely or partially destroyed, thus raising problems of shelter. Some of those affected had no relatives to turn to and remained in their partially roofless houses, on the brink of collapse, while others moved into makeshift shelters without access to water and latrines.
- **Food security:** In addition to the loss of their homes, some of the affected families also lost their source of income (taxi, food shop or other commercial space) and found themselves without resources to feed themselves.

As the government provided cash assistance to all the victims to support rebuilding their homes, hence, the need for food remained the priority. On this basis, the Equatorial Guinea RC planned the next phase of the operation, the distribution of cash for food and/or construction purposes. Meaning that the beneficiaries would have the choice.

This assistance was supposed to be done through cash transfers via mobile phones. However, there was no telephone operator with an operational Mobil Money system in Equatorial Guinea. The option of cash distribution was also considered but proved to be risky from a security perspective. Therefore, after a market study, assistance with vouchers for purchase in well-established business firms in Bata was preferred. Local supermarkets were well stocked in food and household items, building materials and pharmacies, thus offering the beneficiaries a large selection.

Given the cost of living in Equatorial Guinea, the estimation of the value of the basic needs according to the Minimum Expenditure Basket (MEB) allowed to determine the cash value of the basic needs to be covered per household. The simulation of a basic needs expenditure basket based on observed market prices revealed that 60,000 XAF (about 100 CHF), was enough to allow a household of five people to buy basic foodstuffs in Bata for one month. Thus, the amount of the transfer per family was estimated at 100 CHF/month over 2 months, which was a total of 120,000 XAF/family.

Another change made after the assessment was the number of beneficiaries. The initial number of 500 families was reduced to 450 (2,250 people), as this was the number of households that met the selection criteria to receive Red Cross support.

Risk Analysis

The main risks associated with the operation were access to the country, the language barrier and the Covid-19 pandemic. They were revealed to be of less importance, only resulting in minor delays in field mission planning.

However, a major challenge was not taken into account at the beginning of the operation: the unavailability and lack of operational capacity of NS staff. This led to huge administrative and logistical delays, as well as a great lack of responsiveness in official communications. The main consequence of this situation was the delay in implementation, which was solved by a no-cost extension of 2 months.

Concerning the NS shortcomings at the operational and strategic level, several actions were taken. A surge was deployed to accompany the NS for 3 months, a cash delegate from ARO went on the field, and the Yaounde Delegation staff made repeated field visits. In addition, the Head of the Delegation met with Equatorial Guinee Red Cross (EGRC) executives to strengthen the relationship between the NS and IFRC.

B. OPERATIONAL STRATEGY

The overall objective of this DREF operation was to provide immediate psychosocial and advanced first aid assistance to 2,250 people (450 families) affected by the Nkountama explosions in Bata and to assist them with vouchers to meet their immediate livelihood and/or construction needs.

Proposed strategy

To achieve this objective, the NS led the activities evoked earlier, for 6 months. More details on these activities are in the detailed operational plan below.

The main response pillars and goal of the plan of action launched in March were maintained with slight revision included after the assessment mainly on the timeframe and approach to face the challenges. Details of the initial and revised plan can be found [here](#).

Community Engagement and Accountability (CEA): The 40 volunteers, 4 supervisors and the National DM were briefed during the various CEA trainings to give them strategies for community engagement and accountability. That was useful to enter communities and approach people in such circumstances.

Throughout the project and even at the distribution site, beneficiaries were made aware of the project's objectives, the vulnerability criteria and the different channels for reporting complaints. In addition to the channels already available, a helpdesk was set up at the distribution site. All beneficiaries wishing to give positive or negative feedback were asked to go there.

Protection, Gender and Inclusion (PGI): Protection, Gender and Inclusion was streamlined throughout all sectors of the operation, including the assessment. A briefing was set up for staff and volunteers on protection from sexual exploitation and abuse and they signed the code of conduct.

Operational Support Services

Human Resources: 44 volunteers were deployed in this operation. It should be noted that all these volunteers were insured and given the global health situation, they were equipped with face masks and alcohol-based sanitizers throughout implementation. IFRC deployed a Surge personnel for 3 months with coordination and CVA experience for technical support to the NS. IFRC and EGRC staff supported the teams in the field through frequent phone calls and monitoring missions.

Logistics and Procurement: Procurement was carried out locally by the NS staff in Bata with the technical support of the logistics team of the IFRC Country Cluster Delegation for Central Africa, to ensure that everything was in line with procedures. This collaboration proved particularly useful as difficulties rose during the contracting process between suppliers and the IFRC, as IFRC procedures are very cumbersome in the country's context. Frequent discussions between the supplier and the logistics manager in Yaoundé facilitated the finalisation of procedures.

Communication and Visibility: Visibility materials were produced for the volunteers: tee-shirts, hats, jackets and backpacks. The visibility of the whole team will also be ensured through clear visibility and signs on vehicles. Given the sensitivity of the disaster, media communications were not emphasised in this response.

Planning, Monitoring, Evaluation and Reporting (PMER): Yaounde Delegation, through the PMER Assistant, carried out a field supervision mission in Bata to provide technical support in needs assessment and beneficiary registration. Field reports were regularly shared by the managers of each activity with the local branch also providing updates on the operation. The PMER went on the field for a monitoring visit, which was the opportunity to supervise the distribution, carry out post-distribution monitoring to assess the impact and relevance of the activity, and a lessons learned workshop attended by volunteers, supervisors, NS staff and governance, community leaders, IFRC staff from Yaounde and a visitor from ECHO. Details on the results of these activities will be given in the detailed operational plan below.

C. DETAILED OPERATIONAL PLAN



Livelihoods and basic needs

People reached: 2,250 (450 households)

Male: 1080

Female: 1170

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

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

Indicators:	Target	Actual
Number of vulnerable families assisted with vouchers to address their most urgent needs	450	450
Number of volunteers trained in voucher distribution	44	44

Narrative description of achievements

With the assistance of its Movement partners, the National Society assessed the needs of the victims and identified the beneficiaries among the most vulnerable victims according to pre-established vulnerability criteria. Priority was given to families whose houses had been destroyed, large families, and families headed by women or families with young children, pregnant women elderly people. The assessment identified their priority needs which were livelihoods and shelter, as the populations expressed the need to repair or rebuild their houses and meet their basic needs (food, medicine and other basic materials). 25 volunteers (11 women and 14 men) were trained in emergency needs assessment and deployed on this activity.

This operation made arrangements to provide cash assistance to the affected communities. A market assessment was conducted with an analysis of the economic facilities best shared by the targeted beneficiaries. Cash transfer was dismissed due to the context and redirected to vouchers. Two supermarket chains in Bata were selected to supply the voucher beneficiaries, as they were well stocked and covered the whole territory of Equatorial Guinea and gave the beneficiaries a large selection. However, one of them retracted when signing the commitment documents, which they deem very voluminous, and they were facing this type of procedure for the first time. The final supplier was MARTINEZ HERNANDEZ, and the distribution site was one of its supermarkets located close to the area affected by the explosions.

From the needs and market assessment conducted, an update was made to the NS initial plan to ensure it fits the findings which with two main pieces of information: The most vulnerable families matching the selection criteria agreed with communities were finally 450 instead of 500 HH (2,500 people) initially planned; the Cash grant was not feasible due to the absence of lack of an operational mobile money supplier able to cover that assistance with withdrawal possibility, etc. The option of cash distribution was also considered but proved to be risky from a security perspective. This is why, after a market study, the solution of assistance with vouchers for purchase in well-established business firms in Bata was preferred. Local supermarkets are well stocked in food and household items, building materials and pharmacies, thus offering the beneficiaries a large selection. More information is provided in the [operation update](#).

The operation provided vouchers to 450 assisted households to enable the beneficiaries to buy necessities and/or construction materials. The 450 households were represented by the identified family heads, 1 per family based on pre-agreement with each family.

There was a phase of re-identification of beneficiaries where the 450 beneficiaries were photographed to increase the security of the vouchers. The vouchers were made in Yaoundé and transported to Bata, to avoid duplication. Volunteers were trained in distribution after this exercise.

Distributions took place in mid-September once the final administrative and logistical procedures had been validated. The distribution was done in a single installment of 120,000 CFA francs (approximately 200 CHF) /per household. As it was estimated (based on the market assessment) that 60,000 CFA francs, or about 100 CHF, was enough for a Guinean family to buy basic foodstuffs in Bata for one month.

Beneficiaries were called to the distribution site in waves of 50 per day and were given a specific time to show up, to avoid crowding. Once they arrived at the distribution site, they were sensitised on the barrier measures against COVID-19 and reminded of the project's objectives. Then followed identity checks using national identity cards, telephone numbers, and photos on the vouchers. All measures were taken to ensure that it was the real beneficiaries who entered the shop.



A beneficiary accompanied by a volunteer after she was done shopping with her voucher. © EGRC

Beneficiaries were admitted inside the shop in groups of 7 and as soon as one beneficiary left the shop; he was replaced by another one. Each beneficiary was accompanied by a volunteer to guide him through the supermarket and ensure that the full 120,000 FCFA (coupon value) was consumed. The coupons were cut off after the checkout. The cashiers retained one end and the volunteers another. Invoices were made out in 03 copies. The shop kept 02 copies for its archives and the beneficiary returned with 01 copy. The service provider denied giving RC a copy of the invoice. As a bypass measure, volunteers posted at the checkouts were instructed to film the invoices and coupons in anticipation of the reconciliation. The monitoring and reconciliation of cash execution was accurate and well completed, allowing to easily evaluate the effectiveness, use and pertinence of the cash for the beneficiaries.

Challenges

National Society's lack of preparation: NS did not have processes, systems and tools related to cash transfer. Moreover, the staff lacked technical and operational capacity, from financial to logistics or reporting. This impacted heavily on the delay in the arrival of the assistance (the explosion occurred in March 2021 and the assistance arrived in September 2021, i.e. six months later).

Unpreparedness and lack of commitment from volunteers: Having never been involved in this type of activity, most volunteers needed to be monitored and advised regularly. They had to be constantly reminded of their role. At the beginning of the operation, a few of them left as other humanitarian actors offered a more substantial daily per diem. It was also noted that many of them accepted gifts from beneficiaries, which had to be returned.

One difficulty in implementing the activities is the state of emergency due to the COVID-19 pandemic. Businesses opened at 9:30 am and closed at 4 pm, with a general curfew at 6 pm. These measures required certain adjustments in the organization of activities.

The mobilization of beneficiaries: As the distribution took place several months after the registration of the beneficiaries, a good number had already moved either to the village or to other towns.

Low diversity of items available in the shop: During discussions with the service provider, it was agreed that all items (food, household appliances, shelters, etc.) would be available. However, for the first three days of distribution, the beneficiaries did not have access to the hardware store. It was only after negotiation that the beneficiaries were granted access to it. Unfortunately, it was found to be more of a furniture shop. Most of the items that the beneficiaries requested were not sold there.

Lessons Learned

- There is a huge need to inform and train SN staff about humanitarian governance and volunteering.
- That the NS must genuinely recruit volunteers, train them and retain them as active volunteers and not as transient volunteers for one-off operations.
- It is crucial to continue with the cash transfer preparation process.: If the NS continues with this process, the will be able to conduct this type of operation on time and in compliance with all the necessary technical requirements. This needs to be done through capacity building for volunteers and NS staff, continuous advocacy with officials to increase interest in cash transfers, anticipating the signing of framework contracts with the PSF, etc.



Health

People reached: 4226 (706 HH)

Male: 1,994

Female: 2,232

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

Health Outcome 1.2: The target population benefits from rapid medical treatment of injuries and illnesses

Indicators:	Targets	Real
% of households receiving health support	100% or 450 HH	157% or 706 HH
Number of people receiving emergency health care	2,250	1,528
Number of volunteers involved in health activities	44	44

Health Outcome 1.5: Psychosocial support is given to the target population

Indicators:	Targets	Real
Number of people receiving psychosocial support	2,250	4,226

Health Outcome 1.5: Psychosocial support is given to the target population

Indicators:	Targets	Actual
Number of volunteers trained in psychosocial support	44	44

Health Outcome 2: The immediate risks to the health of the affected populations are reduced through improved access to medical treatment

Health Outcome 2.1: Improved access to health care and emergency health care for the targeted population and communities.

Number of volunteers trained in needs assessment	44	25
Number of assessments conducted	1	1

Narrative description of achievements

Advanced first aid training: 44 volunteers (18 women and 22 men) were trained in psychological first aid and advanced first aid. The training was rich in practice and simulation exercises, this training allowed us to understand that there was a real need for first aid training within the Bata regional committee. It was necessary to make many stops for the demonstrations and then to continue at the end of each simulation some revision of the practices in case of emergency (Lateral Safety Position, stop bleeding, immobilization, etc.) while insisting on the simplicity and the effectiveness of the gestures to be made.

The people who experienced this gruesome explosion need to be comforted through psychosocial support (listening and guidance services to refer these people to more specialised centres). Three pairs of volunteers visited the field three times a week for two months to carry out home visits as part of the psycho-social follow-up. 703 families were visited, i.e. 4,226 people, including 1994 men and 2232 women. Among which 403 people in specific situations: 120 elderly people, 175 pregnant women, and 108 people with disabilities.

Volunteers also raised awareness of sexual abuse and how to report it. No case was reported until the end of the operation.

Regarding the COVID-19 context, awareness-raising on the respect of barrier measures and proper hand washing was done continuously in the community. It is worth noting that 70% of the EGRC volunteers received at least one dose of the COVID vaccine and were provided with face masks and hydro alcohol gel.

Challenges

First aid assistance was not possible at the beginning of the operation since there was not yet first aid equipment.

Lessons Learned

Emphasis should be placed on preparing National Societies and providing them with the minimum equipment that would allow the National Society to provide first aid while awaiting the logistical procedures for acquiring the equipment. It should be noted that, as with cash activities, the National Society should work upstream on internal

logistical procedures to facilitate the implementation of operations. it is very important to work also with the NS on the PER Process.

Strengthen National Society

S1.1: National Society capacity building and organizational development objectives are facilitated to ensure that National Societies have the necessary legal, ethical and financial foundations, systems and structures, competences and capacities to plan and perform

Indicators:	Target	Actual
% of volunteers involved in activities insured	100%	100%

Output S1.1.4: National Societies have effective and motivated volunteers who are protected

Indicators:	Targets	Actual
# of volunteers provided with PPE	44	44

OutcomeS2.1: Effective and coordinated international disaster response is ensured

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

Indicators:	Targets	Actual
# of Surge personnel deployed to support NS	1	1

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

Indicators:	Targets	Actual
# of volunteers briefed in CEA	44	44
# of feedback mechanisms set up	1	1

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

Indicators:	Targets	Actual
# of monitoring missions undertaken by the CCST	2	3
# of lessons learned workshop	1	1

Narrative description of achievements

The Equatorial Guinea Red Cross (EGRC) through its regional office in Bata has a great need for capacity building of its volunteers, most of whom have just joined the Red Cross Movement. To this end, additional staff were recruited for the operation and two follow-up missions have already taken place to provide logistical and monitoring-evaluation support to the NS. The first mission allowed, among other things, the training of volunteers in emergency needs assessment techniques and the provision of technical support to the NS for the conduct of this assessment in the field. A second mission was carried out by the Cluster Head to work with the executive of the SN at the national headquarters and the divisional committee, to further inform them of the objectives of the DREF and also the need for the NS to set up the necessary mechanisms for its proper preparation and functioning to be able to manage emergencies and even implement development projects.

Logistical support was provided by a Fleet Manager from the NS, to make arrangements for the facilitation of the Surge's movements. In addition, weekly online monitoring has been taking place since the start of the Surge's arrival in the field to take stock of the activities carried out, the challenges encountered and the guidelines for the continuity of the operation. NS staff were involved in this online session, and it was an opportunity to instill in them the validity of their involvement in this operation, which is an NS operation with the support of the IFRC.

The 44 volunteers were trained in communication with beneficiaries and Community Engagement and Accountability (CEA), and a complaint management mechanism was put in place to enable disaster victims to channel their complaints through the volunteers.

It was utterly important to strengthen the National Society's capacity to carry out post-disaster damage and needs assessments. The same applies to psychosocial support for affected persons and advanced first aid in cases of accidents involving explosions. Overall, 40 volunteers and 4 supervisors involved in the operation were trained to:

- Post-disaster needs assessment.
- Psychological first aid

- Advanced first aid for explosive accidents.
- Communication with beneficiaries and Community Engagement and Accountability (CEA)
- Community Engagement and Accountability
- Cash and voucher assistance
- Post-distribution monitoring of cash activity.

Post-distribution monitoring: 10% of the 450 beneficiary households were interviewed. Adding a margin of error of 0.5%, a total of 47 households were surveyed for post-distribution monitoring.

6 volunteers were trained and deployed to collect data in the field.

Some key figures from the PDM:

- 85% of the beneficiaries were informed about the distributions only 24-48 hours before. Highlighting a communication problem.
- 81% of the expenditure was directed towards foodstuffs (rice, fish, spaghetti, dairy products, meat and its derivatives), 17% towards household appliances and 2% towards construction materials. This is mainly because aid arrived late and that support from other partners helped to resolve some priority needs in other sectors. Several households told us that they had rebuilt their houses thanks to government support. Health problems were also taken care of free of charge by the public health centres.
- 90% of households consumed all of the purchases within their household.
- 89% of respondents were completely satisfied with the distribution process: the layout of the site, the quality of the support provided by the volunteers, the response to complaints, the quality of the items, the value of the voucher, the variety of options in the shop and the planning.
- 89% of the beneficiaries felt that the aid had helped them meet their most urgent needs, namely food.
- 100% of beneficiaries surveyed said they were satisfied with the quality of the items.



Volunteers interviewing a beneficiary during the PDM. © EGRC

Lessons learned workshop: This workshop took place on Monday 27 and Tuesday 28 September 2021. It was attended by community representatives, Guinean Red Cross officials, volunteer representatives, the IFRC team and an ECHO representative.

The main positive points were that:

- There was a good relationship between the IFRC and the NS with a good distribution of roles and responsibilities on both sides. Efforts were made by IFRC to strengthen its link with the NS, notably a visit of the Head of Yaounde Delegation.
- The good collaboration with community leaders who were involved in the operation helped the population to accept Red Cross. And now Red Cross is well-known and welcomed among the population.
- There was a good collaboration with other humanitarian partners, especially UNDP who entrusted some activities to the NS, (supervision of first aid during rubble work, and payment of volunteers involved in this activity).

The main negative points to be improved for the next operations were:

- The NS should have a contingency plan to be prepared for such happenings.
- NS staff and volunteers' capacity should be constantly strengthened for them to be more operational and independent and take ownership of projects.
- The contracting process with the service providers took more than 3 months to complete due to several challenges in receiving offers and completing the process and the end of the cash process was also challenging with not all the items available in the same quantity which is the result of general availability of the market in the province.



Lessons learned workshop. © EGRC

Challenges

- The unavailability of training materials in Spanish was a difficulty for this operation. The translation of these materials led to a delay in the start of the activities. The training was conducted in two languages - Spanish and Fang (local language).
- It was challenging to get mobilized all the required volunteers and maintain the same all throughout the operation and in all the responses. There were 44 at the beginning and only 15 at the end. The work was too tedious for them, and the reward insignificant.

Lessons Learned

- The EGRC needs capacity building in all technical areas and on cross-cutting issues. This capacity building should start with the National Society staff, before extending to branch volunteers. It will also be important to work with executive members at headquarters and local branches.
- The training of the National Disaster Response Team (NDRT) of the SN is 10 years old and there is a question of re-training volunteers at the national level and strengthening the branches with the community disaster response teams (CDRT).
- NS should be more careful with the choice of service providers by checking if they can provide the services expected and the needed reconciliation documentation.
- A National society development plan can help to identify sustainable solutions to retain volunteers and staff and engage them on RCRC's humanitarian value by promoting the NS image, funding leverage, and other approaches that can retain resources.

D. Financial Report

The allocation and total budget remained the same even with the revision of the budget on July 202. The revision aimed to make a readjustment of the initial budget for cash given the reduction of the target to be able to re-prioritize and extend the logistic support resulting in the need to reinforce the NS and cluster monitoring and the logistic costs over the additional 2 months granted. By the end of the 6 months intervention, the total expenditures were CHF 178,603 on a total allocation of CHF 218,628. The balance of CHF 40,025 (18% of the budget) will be returned to the DREF pot and overall, this balance results from saving from cash due to the above-mentioned reason and in-country costs for all the procurements, trainings, and necessities finally lower than planned. This saving was also made possible as monitoring from the cluster was coupled with a COVID-19 emergency appeal. Details of budget lines below:

III. Expenditure by budget category & group					
Description	Budget	Expenditure	Variance	variance percentage	Explanation of variances
Relief items, Construction, Supplies	129,678	109,747	19,930	15%	Not all the targeted beneficiaries of assistance were covered because some were no longer present when the lists were drawn up
Medical & First Aid	16,330	16,481	-152	-1%	
Teaching Materials	930	94	835	90%	
Other Supplies & Services	1,352	545	807	60%	
Cash Disbursement	111,067	92,626	18,440	17%	
Logistics, Transport & Storage	9,178	9,253	-76	-1%	Field costs in Bata and implementation areas were lower than planned, the most significant cost were linked to the logistic arrangements with car rentals cost required for the field monitoring and continuity and timely implementation of activities.
Transport & Vehicles Costs	9,178	9,253	-76	-1%	
Personnel	23,818	17,372	6,445	27%	The Canadian RC contributed also to cover some cost for the surge given that by the time of the update, the vehicle and monitoring cost were expected to be higher than finally needed.
International Staff	20,372	14,106	6,265	31%	
Volunteers	3,446	3,198	248	7%	
Other Staff Benefits		68	-68	-100%	
Consultants & Professional Fees	1,521	981	540	35%	Saving on translation
Professional Fees	1,521	981	540	35%	
Workshops & Training	20,813	15,018	5,795	28%	Most of the trainings were planned for a long period, mainly 5 days but based on the branches capacity, the trainings were adapted to a shorter version focused on essential competencies needed. Hence, most were completed as briefings with practical exercises. Meaning less cost than initially planned.
Workshops & Training	20,813	15,018	5,795	28%	
General Expenditure	20,278	15,330	4,947	24%	IFRC and NS furniture for this DREF operation, as well as monitoring, was coupled with the COVID-19 Emergency appeal operation. Monitoring missions were twinned for cost efficiency and effectiveness of all the ongoing operations in Equatorial Guinea.
Travel	17,574	13,131	4,443	25%	
Information & Public Relations	592	150	441	75%	
Office Costs		1	-1	-100%	
Communications	1,352	392	960	71%	
Financial Charges	761	1,657	-896	-118%	
Indirect Costs	13,343	10,901	2,443	18%	
Programme & Services Support Recover	13,343	10,901	2,443	18%	
Grand Total	218,628	178,603	40,025	18%	

DREF Operation

FINAL FINANCIAL REPORT

Selected Parameters			
Reporting Timeframe	2021/3-2023/3	Operation	MDRGQ002
Budget Timeframe	2021/3-9	Budget	APPROVED

Prepared on 22/Apr/2023
All figures are in Swiss Francs (CHF)

MDRGQ002 - Equatorial Guinea - Explosions in Bata

Operating Timeframe: 11 Mar 2021 to 30 Sep 2021

I. Summary

Opening Balance	0
Funds & Other Income	218,628
DREF Response Pillar	218,628
Expenditure	-178,603
Closing Balance	40,025

II. Expenditure by planned operations / enabling approaches

Description	Budget	Expenditure	Variance
PO01 - Shelter and Basic Household Items			0
PO02 - Livelihoods			0
PO03 - Multi-purpose Cash	132,739	102,705	30,034
PO04 - Health	24,356	8,746	15,610
PO05 - Water, Sanitation & Hygiene			0
PO06 - Protection, Gender and Inclusion			0
PO07 - Education			0
PO08 - Migration			0
PO09 - Risk Reduction, Climate Adaptation and Recovery			0
PO10 - Community Engagement and Accountability	3,132	440	2,692
PO11 - Environmental Sustainability			0
Planned Operations Total	160,227	111,891	48,336
EA01 - Coordination and Partnerships	29,345	21,802	7,543
EA02 - Secretariat Services	23,316	26,269	-2,954
EA03 - National Society Strengthening	5,740	18,640	-12,901
Enabling Approaches Total	58,401	66,712	-8,311
Grand Total	218,628	178,603	40,025

DREF Operation

FINAL FINANCIAL REPORT

Selected Parameters			
Reporting Timeframe	2021/3-2023/3	Operation	MDRGQ002
Budget Timeframe	2021/3-9	Budget	APPROVED

Prepared on 22/Apr/2023

All figures are in Swiss Francs (CHF)

MDRGQ002 - Equatorial Guinea - Explosions in Bata

Operating Timeframe: 11 Mar 2021 to 30 Sep 2021

III. Expenditure by budget category & group

Description	Budget	Expenditure	Variance
Relief items, Construction, Supplies	129,678	109,747	19,930
Medical & First Aid	16,330	16,481	-152
Teaching Materials	930	94	835
Other Supplies & Services	1,352	545	807
Cash Disbursement	111,067	92,626	18,440
Logistics, Transport & Storage	9,178	9,253	-76
Transport & Vehicles Costs	9,178	9,253	-76
Personnel	23,818	17,372	6,445
International Staff	20,372	14,106	6,265
Volunteers	3,446	3,198	248
Other Staff Benefits		68	-68
Consultants & Professional Fees	1,521	981	540
Professional Fees	1,521	981	540
Workshops & Training	20,813	15,018	5,795
Workshops & Training	20,813	15,018	5,795
General Expenditure	20,278	15,330	4,947
Travel	17,574	13,131	4,443
Information & Public Relations	592	150	441
Office Costs		1	-1
Communications	1,352	392	960
Financial Charges	761	1,657	-896
Indirect Costs	13,343	10,901	2,443
Programme & Services Support Recover	13,343	10,901	2,443
Grand Total	218,628	178,603	40,025

Contact information

Reference documents



Click here for:

- [Emergency Plan of Action \(EPoA\)](#)

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.

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

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