



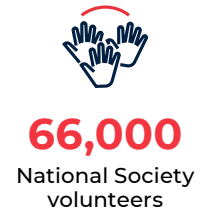
GHANA

2025 IFRC network annual report, Jan-Dec



29 June 2026

IN SUPPORT OF THE GHANA RED CROSS SOCIETY



PEOPLE REACHED

Emergency
Operations



746,061

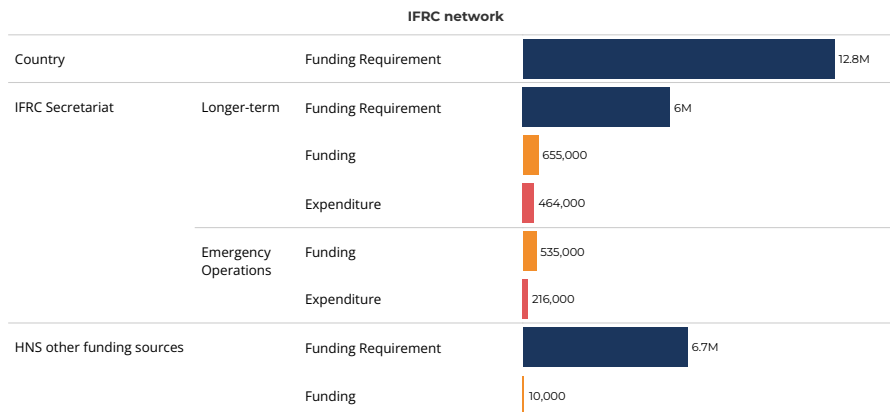
Health and
wellbeing



250,200

FINANCIAL OVERVIEW

in Swiss francs (CHF)



Appeal number **MAAGH002**

*Information on data scope and limitations is available on the back page


ONGOING EMERGENCY INDICATORS

MDRGH021/ Ghana Mpox Response

Accountability and agility	National Society is implementing a digital transformation roadmap in line with the IFRC strategy	Yes
	National Society has strengthened its integrity and reputational risk mechanism	Yes
	National Society has a Protection of Sexual Exploitation and Abuse (PSEA) policy to enforce prevention and support survivors	Yes
	National Society has a functioning data management system that informs decision making and supports monitoring and reporting on the impact and evidence of its actions	Yes
Climate and environment	National Society has received IFRC Network's support to adapt to longer-term impacts of climate change	Yes
Disasters and crises	Number of people reached with disaster risk reduction	46,000
	Number of people reached with shelter support	12
Health and wellbeing	Number of people reached by the National Society with contextually appropriate water, sanitation and hygiene services	746,000
	Number of people reached by the National Society with contextually appropriate health services	746,000
	Number of people reached with immunization services	706,000
Humanitarian diplomacy	National Society participates in IFRC-led campaigns	Yes
	National Society has a domestic advocacy strategy developed aligning, at least in part, with global IFRC advocacy strategies	Yes
National Society development	National Society has developed and/or implemented a strategy for strengthening their auxiliary role	Yes

	National Society has created and implemented youth engagement strategies	Yes
Strategic and operational coordination	Number of government-led coordination platforms the National Society is part of	12
	Number of formal interagency/international coordination platforms the National Society is part of	2
Values, power and inclusion	Number of people reached by protection, gender and inclusion programming	 271,000
	National Society has a Community Engagement and Accountability policy, strategy or plan	Yes

STRATEGIC PRIORITIES

Health and wellbeing	Number of people reached by the National Society with contextually appropriate health services	4,000
	Number of people reached by the National Society with contextually appropriate water, sanitation and hygiene services	4,000
	Number of people reached by the National Society with training in first aid	950
	Number of people reached with immunization services	 250,000

ENABLING FUNCTIONS

Accountability and agility	National Society has a functioning data management system that informs decision making and supports monitoring and reporting on the impact and evidence of its actions	Yes
	National Society has a Protection of Sexual Exploitation and Abuse (PSEA) policy to enforce prevention and support survivors	Yes
	National Society has strengthened its integrity and reputational risk mechanism	Yes
	National Society is implementing a digital transformation roadmap in line with the IFRC strategy	Yes
Humanitarian diplomacy	National Society participates in IFRC-led campaigns	Yes
National Society development	National Society has developed and/or implemented a strategy for strengthening their auxiliary role	Yes
	There is a National Society Development plan in place	Yes



The National Society lead advocacy efforts in Shigu community in Tamale, northern Ghana. (Photo: IFRC)

Q1. OVERALL PERFORMANCE

Context

Ghana ushered in a new government following elections in December 2024. However, over the last few years, Ghana's socio-economic situation has been strained by the persistent depreciation of the local currency against major foreign currencies. As a result, the government put in place measures to stabilize the local currency against major currencies which brought down inflation. Government efforts to stabilize the economy saw limited impact as rising national debt continues to pose further challenges.

Health-related challenges were constant during the year. The country faced continued outbreaks of [Cholera](#) in the first half of the year affecting five regions of Greater Accra, Central, Western, Eastern and Ashanti with Mpox being reported across all regions of the country. The monthly reported cases of Mpox significantly reduced toward the end of the year. Ghana Health services effectively raised their surveillance services for Mpox which enabled timely detection and management of cases.

Key achievements

Climate and environment

In 2025, the Ghana Red Cross Society managed to secure 4,800 hectares of land in Ahafo region for the establishment of an afforestation project with an additional request for 35,000 hectares submitted to the Ministry of Lands and Natural Resources. It also engaged the Ghana Cocoa Board to explore collaboration in cocoa-growing areas, specifically focused on agroforestry and general aligning with European Union (EU) deforestation regulations to help farmers access better prices and European markets. A [locally led adaptation](#) project was also approved by the Global Climate Resilience Platform [Global Climate Resilience Platform](#) fund.

Disasters and crises

In 2025, the National Society responded to [floods](#) through the IFRC-DREF mechanism. The National Society also undertook several [anticipatory actions](#), including preparations to develop [early warning](#) triggers for floods in high-risk areas, pre-positioning relief stocks, and conducting community-level preparedness drills. As an active member of the National Coordination Forum, the Ghana Red Cross Society also collaborated closely with the National Disaster Management Organization (NADMO) to improve [early warning systems](#), promote early action, and implement anticipatory measures aimed at protecting lives, livelihoods, and property. The National Society also co-developed the country's [Early Warning for All](#) (EW4ALL) protocol, taking the lead for Pillar 4, thereby contributing to a more structured and inclusive national preparedness framework.

Health and wellbeing

In dealing with the dual outbreaks of Cholera as well as Mpox, the National Society deployed a comprehensive strategy focusing on scaling up health and [water, sanitation and hygiene](#) (WASH) services and enhanced [community engagement and accountability](#) (CEA) to address the socio-economic impacts of the outbreaks. The Mpox response since May 2025 had combined targeted epidemiological surveillance, community-level risk communication, and cross-sector coordination to contain the spread including through deployment of volunteers doing house-to-house visits and public education in markets. In addition, the Ghana Red Cross Society rehabilitated five water systems and developed three community-based management systems. During the year, 267 household water connections were achieved, reaching over 2900 people.

Values, power and inclusion

The National Society reached marginalized groups to deliver health and hygiene promotion activities, reaching vulnerable individuals with key Mpox messages sex workers, community health workers, and settler farmers. With regard to [community engagement and accountability](#) (CEA), communities were also reached through focus group discussion sessions, door-to-door, mass education at the public places and the use of Community Information Centres (CIC) to disseminate key messages during the operations in the local language. The Ghana Red Cross Society analysed

and responded to community feedback in both emergency and development programmes such as Cholera, Saving Lives and Livelihoods, Mpox and Urban WASH.

Enabling local actors

The Ghana Red Cross Society undertook a General Assembly in September 2025 as provided for by the constitution. As part of [Humanitarian Diplomacy](#), the National Society actively engaged in several coordination and technical committees, including the [Saving Lives and Livelihoods](#) (SLL) technical working group, cholera national taskforce, interagency coordination committee, immunization committee, and [DRR/EW4All](#) initiative among others. The National Society during the General Assembly endorsed ten policies which are designed to strengthen accountability, transparency and quality delivery of programmes.

Q2. CHANGES AND AMENDMENTS

In this reporting period, no changes or amendments were made by the National Society.

Q3. MEASURING RESULTS OF THE IFRC NETWORK ACTION

ONGOING EMERGENCY RESPONSE

For real-time information on emergencies, visit IFRC GO page: [Ghana](#)

1.

Emergency Appeal Name	Africa Region Mpox Appeal
IFRC Emergency Appeal code	MDRS1003
People to be assisted	32 million
Duration	21 months (extended until 30 June 2026)
Funding requirements	IFRC Secretariat: CHF 30 million Federation-wide: CHF 40 million
Link to Emergency Appeal	Mpox Emergency Appeal
Link to Operational Strategy	Operational Strategy
Link to Operations Update	Operation Update No. 5

In 2024–2025, Ghana experienced an Mpox outbreak with 230 suspected cases across 88 districts, affecting all ages and placing children and immunocompromised individuals at the highest risk. The National Society alongside the Ghana Health Service activated Mpox preparedness and response activities to help stop the spread in communities, especially in hotspot areas. The intervention started with a baseline assessment of the Mpox disease across Western North, Western, and Greater Accra regions to deliver Risk Communication and Community Engagement (RCCE) activities, Social and Behaviour Change Communication (SBCC) materials, and referring suspected cases to health facilities. The response prioritized high-risk groups, strengthened early detection and reporting, countered misinformation, and enhanced community-level preparedness for ongoing and future Mpox outbreaks.

Short description of the emergency operational strategy

The Ghana Red Cross Society's intervention started with a baseline assessment of the Mpox disease. Selected volunteers were trained in the Knowledge, Attitudes, and Practices (KAP) assessment protocol to enable them to conduct

the survey effectively in the selected communities of the Bia West district. As a result of the low level of knowledge in communities, house-to-house visits, Community Information Centers (CIC), mass education in marketplaces, churches, mosques, and schools were prioritised. To ensure early reporting, communities were advised to report any possible Mpox signs and symptoms to the nearest health facilities for early treatment. In some cases, volunteers escorted the cases to the health facilities. The highlights of the assistance were:

Health & Care: People were reached through Risk Communication and Community Engagement (RCCE) messages promoting self-reporting, care-seeking, and prevention of Mpox, supported by 150 trained volunteers, 1,000 SBCC materials, and 200 branded Red Cross jackets. Suspected cases were referred to health facilities, while targeted sensitization of inmates improved awareness from 26 per cent to 86 per cent, though the vaccination campaign could not be fully supported.

Water, Sanitation and Hygiene (WASH): People were reached through hygiene promotion and sanitation interventions through house-to-house visits and community engagement, reinforcing 2,000 personal protective equipment items and 10 handwashing facilities. Volunteers emphasized handwashing, sanitation, and preventive behaviors to reduce infection risks in affected communities.

Protection, Gender and Inclusion (PGI): A total of 2,869 from marginalized and high-risk groups, including sex workers, health workers, and settler farmers in border cocoa-growing communities, were engaged in RCCE and preventive messaging, with targeted efforts to reduce cross-border transmission and promote health-seeking behavior.

Community Engagement and Accountability (CEA): The National Society reached people through door-to-door visits, public education, and Community Information Centres. A total of 15 community feedback mechanisms and two FM stations were used to track concerns, address rumors, and enhance community participation, while volunteers supported local health workers in record-keeping.

STRATEGIC PRIORITIES



Climate and environment

Progress by the National Society against objectives

In 2025, the Ghana Red Cross Society managed to secure 4,800 hectares of land in Ahafo region for the establishment of afforestation project with an additional request for 35,000 hectares submitted to the Ministry of Lands and Natural Resources for allocation in Western Region and Upper West. At the planning level, the National Society finalized the costing model for a proposed 10,000-hectare afforestation programme, supporting a blended financing business case. It engaged the Ghana Cocoa Board to explore collaboration in cocoa-growing areas, specifically focused on agroforestry and general aligning with European Union (EU) deforestation regulations to help farmers access better prices and EU markets. Joint working modalities will be covered in an operational Memorandum of Understanding (MoU) between the Ghana Red Cross Society and Cocoa Board.

A project concept note was prepared and submitted to the [Global Climate Resilience Platform](#) fund (GCRP). After consultations between the GCRP and the National Society, financial support for the [locally led adaptation](#) project was approved. The project is in Central region of Ghana targeting six communities in one district which was identified based on climate risk assessment as impacted negatively with climate change.

IFRC network joint support

The IFRC continued to support the Ghana Red Cross Society with the development of a costing model. It supported liaising efforts with stakeholders, promoting the afforestation programme. It also provided financial support to the National Society through the GCRP project on locally led adaptation.



For real-time information on emergencies, visit IFRC GO page [Ghana](#)

In 2025, IFRC Disaster Response Emergency Fund (IFRC-DREF) was utilized for responding to floods as well as a Cholera outbreak. Details on the Cholera outbreak emergency can be found in the 'Health and wellbeing' section of this report.

Name of Operation	Floods
MDR-Code	MDRGH022
People to be assisted	3,000
Duration	3 months (sEAP approved: 10 September 2025)
Funding requirements	CHF 220,000
Link to Emergency Appeal	DREF Operation
Link to Operational Strategy	Operation Update No. 1

The IFRC-DREF allocation of CHF 220,000 in September 2025 supported the Ghana Red Cross Society in assisting 3,000 people through a simplified Early Action Protocol (sEAP). The intervention targeted 500 households within flood-prone areas, focusing on subsistence farmers, small business owners and retailers, and families with weak household structures. These groups have been identified and were supported through multi-purpose cash, water, sanitation and hygiene (WASH), protection, gender and inclusion (PGI), and community engagement and accountability (CEA).

Progress by the National Society against objectives

The National Society played a key role in enhancing preparedness and readiness to respond to shocks across vulnerable communities. As an active member of the National Coordination Forum, the Ghana Red Cross Society collaborated closely with the National Disaster Management Organization (NADMO) to improve [early warning systems](#), promote early action, and implement anticipatory measures aimed at protecting lives, livelihoods, and property.

The National Society undertook several [anticipatory actions](#), including preparations to develop [early warning triggers](#) for floods in high-risk areas, pre-positioning relief stocks based on hazard profiles and conducting community-level preparedness drills.

The National Society also co-developed the country's [Early Warning for All \(EW4ALL\)](#) protocol, taking the lead for Pillar 4, thereby contributing to a more structured and inclusive national preparedness framework. The road map has been completed and submitted to the National Centre for the Coordination of Early Warning and Response Mechanism (NCCRM).

The Ghana Red Cross Society participated in the Regional EW4ALL workshop held in Nairobi in March. During the workshop, participants from the National Society presented the processes Ghana used to support national authorities in developing the EW4ALL roadmap.

During the last quarter of 2025, a lessons learnt workshop was held to review the process for the compilation of the sEAP. Government and other stakeholders including the representatives of the Italian Development Cooperation based in Accra attended the workshop. The lessons learnt workshop resolved to highlight anticipatory action as a key disaster reduction approach, to be promoted at the national level through existing forum.

IFRC network joint support

The IFRC supported the Ghana Red Cross Society through the IFRC-DREF mechanism and supported its response to floods. Additionally, the IFRC also supported the National Society in participating in the Regional EW4All/ workshop held in Nairobi in March, where the National Society shared its experiences in developing the EW4All.



Name of Operation	Cholera Outbreak
MDR-Code	MDRGH020
People to be assisted	427,480
Duration	3 months (16 January 2025)
Funding requirements	CHF 135,759
Link to Emergency Appeal	DREF Operation
Link to Operational Strategy	Operation Update Final Report

The IFRC-DREF allocation of CHF 135,759 in January 2025 supported the Ghana Red Cross Society in assisting 427,480 people. The operation aimed to support and enhance the Government of Ghana's efforts to effectively address the cholera outbreak by reaching 150,000 people in Greater Accra, Central, Western, and Ashanti regions through social mobilization and public education initiatives within three months.

Progress by the National Society against objectives

In dealing with the dual outbreaks of Cholera as well as Mpox, the National Society deployed a comprehensive strategy that focused on scaling up health and [water, sanitation and hygiene \(WASH\)](#) services and enhanced [community engagement and accountability \(CEA\)](#) to address the socio-economic impacts of the outbreaks. Guided by a risk-based approach and regional coordination, the operation prioritized preparedness, readiness and response. The Mpox response since May 2025 had combined targeted epidemiological surveillance, community-level risk communication, and cross-sector coordination to contain the spread.

Additionally, training and deployment of 150 volunteers to the most affected regions, conducting risk communication and community engagement activities through house-to-house visits and public education in markets, religious centres and schools while also referring suspected Mpox cases to health facilities and supporting with social and behaviour change communication materials in key public locations. The National Society also procured 10 handwashing stands, 1,000 pairs of gloves, nose masks, and printed 900 educational posters. It trained and deployed 160 volunteers and 10 staff to communities that were mostly affected by the Mpox outbreak.

In addition, the Ghana Red Cross Society rehabilitated five water systems and developed three community-based management systems. In partnership with Fontes and Myclimate.org, the National Society enhanced technical quality and secured funding for interventions in the Ashanti and Eastern regions. It also intensified community engagement through behaviour change communication, mass media outreach, and focus group discussions, promoting safe water practices and household connections.

The urban WASH pilot project in Ashanti region's Asante Mampong continued its Social Behaviour Change communication approach, supporting communities to apply for connections and remain connected to safe drinking water supplied by Ghana Water Company. During the year, 267 household water connections were achieved, reaching over 2900 people.

IFRC network joint support

The IFRC supported the Ghana Red Cross Society through the IFRC-DREF mechanism. It also assisted in the exploration of alternative financial support options to expand the urban WASH initiative, such as through the use and promotion of the Water Users Association (WUA) as service providers for household connections. The IFRC also carried out the Saving Lives and Livelihoods project in the Sagnarigu district in northern region to promote vaccine uptake among healthcare workers as well as life course vaccines for all, including adult population. The project deployed volunteers to carry out house-to-house awareness campaign in all six Sagnarigu subdistricts. The project worked with local leadership/chiefs, opinion shapers, interactive radio shows, youth groups to promote vaccine uptake. Over 234,000 people were reached with vaccine promotion messages. By project closure, the health facilities testimonials point to a remarkable increase in vaccine uptake services.

The Netherlands Red Cross also assisted the National Society with project evaluation and a learning and sharing workshop. It shared lessons on the collaboration of urban water.



Values, power and inclusion

Progress by the National Society against objectives

As part of the Mpx response, the National Society Volunteers engaged with marginalized groups to deliver health and hygiene promotion activities, reaching vulnerable individuals with key Mpx messages. Most at-risk groups which included marginalized groups such as sex workers, community health workers, and settler farmers were identified and reached through mental health and psychosocial support (MHPSS) and helpful health-seeking behaviour. Under this sector, 60 per cent of the people reached were farmers in the cocoa-growing communities sharing borders with neighbouring communities in Cote d'Ivoire.

With regard to community engagement and accountability (CEA), participatory mapping identified marginalized groups such as persons with disabilities, women-headed households and minority ethnic communities, while volunteers used tools such as feedback boxes and group discussions to assess barriers and improve engagement in Mpx activities. Volunteers effectively engaged communities through focus group discussion sessions, door-to-door, mass education at the public places and the use of Community Information Centres (CIC). The CICs, though limited in coverage, were effective channels that were used to disseminate key messages during the operations in the local language.

Through mainstreaming of Community Engagement and Accountability aspects in all programmes, the Ghana Red Cross Society analysed and responded to community feedback in both emergency and development programmes such as Cholera, Saving Lives and Livelihoods, Mpx and Urban WASH. To promote uptake of key messages and behaviour change, the project targeted women and youth groups who are active and have better outreach through their networks and social media channels.

IFRC network joint support

The IFRC supported the Ghana Red Cross Society with relevant technical advice and support, sharing best practices with the National Society for adoption. During the year, it was also supported to revise PGI related strategies to further enhance inclusion and better service delivery.



The National Society implemented the Saving Lives and Livelihoods (SLL) programme and held a public enlightenment session on the importance of immunization. (Photo: IFRC)

ENABLING LOCAL ACTORS



Strategic and operational coordination

IFRC membership coordination

IFRC membership coordination involves working with National Societies to assess the humanitarian context, agree on common priorities and jointly develop common strategies. This includes addressing issues such as obtaining greater humanitarian acceptance and access, mobilizing funding and other resources, clarifying consistent public messaging, and monitoring progress. It also entails ensuring that strategies and programmes in support of people in need incorporate clarity of humanitarian action while linking with development assistance and contribute to reinforcing National Societies in their respective countries, including through their auxiliary role.

The Ghana Red Cross Society is part of the four [IFRC Pan-African initiatives](#) focusing on Tree Planting and Care, Zero Hunger, Red Ready and National Society Development. These initiatives are reflected in the relevant sections of this plan. The Ghana Red Cross Society enjoys longer-term partnerships with the following participating National Societies:

The **Red Crescent Society of the Islamic Republic of Iran** has a clinic in Accra, providing clinical and preventive health services to its catchment areas. It collaborates with the Ghana Red Cross Society to provide outreach services in the outskirts of Accra city.

The **Italian Red Cross**, though not having an in-country presence, has funded the planting and care of 15,000 trees in Ghana.

The **Netherlands Red Cross** has no country presence in Ghana. However, through the IFRC, it has started supporting an urban pilot water, sanitation and hygiene project targeting Kumasi and Accra city, primarily targeting low-income communities with a number of interventions. The pilot project began in 2022, aiming to increase demand for safe drinking water and better service delivery from the Ghana Water Company. Low-income communities willing to get connections will have their costs subsidized. The project will also address community health through a hygiene promotion package to accompany the supported household connections. An innovation to this project delivery will be using cash and voucher assistance to subsidize the household connections and to deliver hygiene products to women and adolescent girls. The project will increase community awareness of preventable water, sanitation, and hygiene diseases.

The **Swiss Red Cross** was active in Ghana from 1983 to 2023 when it supported projects in disaster risk reduction, health, and WASH. Although it closed its delegation and projects in Ghana in 2023, the Swiss Red Cross has committed to continued support to the Ghana Red Cross Society in National Society development through the IFRC.

Movement coordination

The Ghana Red Cross Society ensures regular exchanges with the IFRC, the International Committee of the Red Cross and participating National Societies, for the alignment of support and action between Movement partners. In times of emergencies, closer coordination is organized. This is carried out in line with the Strengthening Movement Coordination and Cooperation ([SMCC](#)) principles and the newly adopted [Seville Agreement 2.0](#).

The **ICRC** visits places of detention and supports the Ghana Red Cross Society in its response to emergencies and assists the authorities promoting the international humanitarian law.

External coordination

The Ghana Red Cross works directly under the Ministry of Health as a parent ministry. In discharging its mandate as an auxiliary to the public authorities, the National Society works closely in consultation and collaboration with other sectoral ministries and departments. NADMO is responsible for emergency coordination at all levels. The National Society collaborates closely with NADMO for rapid assessments during emergencies and humanitarian assistance and this involves collaboration with district directors and regional coordinators of NADMO.

The National Society also collaborates with other main stakeholders including Ghana's health service, district assemblies, traditional leadership, UN agencies and other civil society actors.

There are no formal partnerships with international non-governmental organizations however, the National Society has previously collaborated on World Bank-funded initiatives for COVID-19 response, health programmes with the Japanese Embassy and with UNICEF and UNHCR on refugee and asylum seeker support. In 2023, the National Society, engaged with the EU delegation, USAID and the embassies of Australia, Türkiye, Denmark, Korea and Italy. These engagements are expected to be further developed and strengthened by 2025 and beyond.

The National Society also closely collaborates with national entities such as the Rotary club, St John Ambulance services in areas of First Aid.



National Society development

Progress by the National Society against objectives

The Ghana Red Cross Society undertook a General Assembly in September 2025 as provided for by the constitution. In continuation of the National Society renewal, the Ghana Red Cross Society made progress in internal policy reform through the successful review of its constitution and the drafting of policies.

Following the capacity building training held in Addis Ababa, the National Society aspired to expand existing resource mobilization initiatives in the National Society and establish new ones.

Under the IFRC-ICRC NSIA grant, a competitive bidding process was initiated, and Deloitte was awarded to undertake a feasibility study for a mini complex in Kumasi which will house commercial building assets for rentals and service delivery.

Efforts are underway to centralize commercial first aid services and strengthen accountability systems with a dedicated training officer appointed to centralize and ensure quality control of all training undertaken by the national society.

IFRC network joint support

The IFRC supported the National Society with technical and financial assistance to hold the General Assembly and Central Council member meetings, review its constitution, policies and guidelines. It also supported the National Society through the IFRC-ICRC National Society Investment Alliance (NSIA) investment service provider selection process.



Humanitarian diplomacy

Progress by the National Society against objectives

The Ghana Red Cross Society made notable progress in participation, outreach and media visibility, laying a strong foundation for increased recognition of its work in humanitarian spaces. The National Society actively engaged in several coordination and technical committees, including the Saving Lives and Livelihoods Technical Working Group, Cholera National Taskforce, Interagency Coordination Committee, Emergency Operational Centre, Risk Communication Committee, Immunization Committee, EW4All Initiative, Surveillance Sub-Committee and the International Health Regulations Sub-Committee.

Despite financial and capacity constraints affecting some planned activities, the Ghana Red Cross Society maintained a high level of operational visibility. The National Society conducted impactful community engagements with political youth groups, traditional authorities, opinion leaders, and religious leaders, strengthening trust and collaboration at the grassroots level.

The Ghana Red Cross Society also marked World Red Cross Day 2025 in Accra and organized a quiz competition and media engagement in the Northern Region. To further promote its identity and mission, the Ghana Red Cross Society produced information brochures, calendars and diaries featuring essential details about the National Society and the Red Cross and Red Crescent Movement.

IFRC network joint support

The IFRC supported the National Society with technical and financial assistance. The communication team has provided virtual support to the communication and humanitarian diplomacy activities.



Accountability and agility (cross-cutting)

Progress by the National Society against objectives

The National Society has undertaken active steps to improve its performance in financial management and administrative support to the programmes. A procurement committee was also established.

IFRC network joint support

The IFRC supported the National Society with technical assistance.

Q4. AFFECTED PERSONS (PEOPLE REACHED)

See cover pages

Q5. PARTICIPATION AND ACCOUNTABILITY FOR AFFECTED PEOPLE – COMMUNITY ENGAGEMENT AND ACCOUNTABILITY

See Strategic Priority on 'Values, power and inclusion' under Q3: MEASURING RESULTS OF THE IFRC NETWORK ACTION

Q6. RISK MANAGEMENT

This information is not available in Annual Reports

Q7. EXIT STRATEGY AND SUSTAINABILITY

See Strategic Priorities or Enabling Local Actors, where relevant under Q3: MEASURING RESULTS OF THE IFRC NETWORK ACTION

Q8. LESSONS LEARNED

During the year under review, a number of lessons have been learned which will be integrated in future programmes to enhance effectiveness and the sustainability of interventions.

- Under SLL programme, both volunteers of the Red Cross and the Community Health Volunteers under the Ghana Health Services were recruited and trained to work as one team in vaccines uptake promotion, creating synergy and boosting the pool of volunteers within the health sector.
- Effective collaboration between the IFRC and District Health Directorate of Sagnarigu district was key in enabling the IFRC secure a free office which was renovated and furnished through the SLL project. This is an additional office capacity which will benefit the district Health authorities.
- The participation of the IFRC in Technical Working Group improved accountability and efficiency of implementation, the TWG was able to resolve timely challenges which were an impediment to smooth project implementation.
- Engaging youth, community Influencers and use of social media accelerate programme delivery.

SUCCESS STORIES



Tamale Communities See Rise in Vaccine Uptake

The Saving Lives and Livelihoods (SLL) immunization campaign, funded by the Mastercard Foundation and implemented by the IFRC, has proven highly effective in increasing vaccine acceptance and improving community health in Shigu, Tamale in northern Ghana. Community volunteer Emmanuel Mahama reported that awareness and advocacy transformed attitudes toward vaccination: “I can boldly say that 90% of the members within this community have accepted the programme very well, especially the men...some were not taking part in immunization exercises, but through this education concerning this programme, they have accepted it, and they also wish to take part.”

The campaign’s results are evident not only in participation but also in improved well-being. Emmanuel notes, in regard to vaccine preventable diseases: “Those who have been vaccinated used to tell me that before, they would fall sick easily. But since they took the immunization... [they hope to not be] experiencing any little sickness within their body again.”

ANNEX 1. IFRC APPLICATION OF THE 8+3 REPORTING TEMPLATE

The IFRC network structures its result-based management along five Strategic priorities and four Enabling functions, developed based on the IFRC network's [Strategy 2030](#):

IFRC network Strategic Priorities	IFRC network Enabling Functions
SP 1 - Climate and environment	EF 1- Strategic and operational coordination
SP 2 - Disasters and crises	EF 2 - National Society development
SP 3 - Health and wellbeing	EF 3 - Humanitarian diplomacy
SP 4 - Migration and displacement	EF 4 - Accountability and agility
SP 5 - Values, power and inclusion	

The Federation-wide results matrix provides a standard way for the IFRC network to measure its progress towards Strategy 2030 implementation and supports consistent quality of the IFRC network planning, monitoring and reporting. To further advance coherence in monitoring across the IFRC network, a [Federation-wide Indicator Bank](#) has been developed and integrated into the Federation-wide monitoring systems for emergencies and longer-term work, structured along the Federation-wide results matrix as well. Signatory of the Grand Bargain Agreement, the IFRC has committed to its monitoring and reporting standards through integration of the [8+3 reporting template](#) contents into its results-based management approach. The following mapping demonstrate the way in which this report aligns with 8+3 reporting:

8+3 template	IFRC network Annual Report (with variance in structure in red)
Core Questions	
1. Overall Performance	Overall Performance
2. Changes and Amendments	Changes and amendments
3. Measuring Results	Measuring Results
4. Affected Persons	Cover pages with indicators values
5. Participation & AAP	Under Q3 Strategic Priority 5: Values, power and inclusion – Community Engagement and Accountability
6. Risk management	Risk management
7. Exit Strategy and Sustainability	Under Q3 sub-sections by Strategic Priority/Enabling Function where relevant
8. Lessons Learned	Lessons learned
Additional Questions	
1. Value for Money/ Cost Effectiveness	Not included in annual reports
2. Visibility	Not included in annual reports
3. Coordination	Under Q3 Enabling Function 1: Strategic and operational coordination
4. Implementing Partners	Cross-cutting, with a focus on support to localization through the Q3 Enabling Functions 1 to 4
5. Activities or Steps Towards implementation	Cross-cutting in Q3 Strategic Priorities and Enabling Functions
6. Environment	Under Q3 Strategic Priority 1: Climate and environment



The International Federation of Red Cross and Red Crescent Societies (IFRC)

is the world's largest humanitarian network, with 191 National Red Cross and Red Crescent Societies and around 15 million volunteers. Our volunteers are present in communities before, during and after a crisis or disaster. We work in the most hard to reach and complex settings in the world, saving lives and promoting human dignity. We support communities to become stronger and more resilient places where people can live safe and healthy lives, and have opportunities to thrive.

DATA SCOPE AND LIMITATIONS

- **Timeframe and alignment:** The reporting timeframe for this overview is covering the period from 1 January to 31 December 2025. However, due to the diversity of the IFRC and differences in fiscal years, this coverage may not fully align for some National Societies.
- **Financial overview:** This overview consolidates data reported by the National Society and its IFRC network partners, as well as data extracted from IFRC's financial systems. All reported figures should include the administrative and operational costs of the different entities. The financial data with a grey background is solely reported by the National Society, including the funding sources. Financial reporting is often times estimated depending on availability of financial figures, closing of financial periods, and may be incomplete. 'Not reported' could sometimes mean 'not applicable'. Also note that funding requirements are already reflected in the published 2025 IFRC network country plan. The total funding requirements show what the IFRC network has sought to raise for the given year through different channels: funding through the IFRC, through participating National Societies as bilateral support, and through the host National Society from non-IFRC network sources. All figures should include the administrative and operational costs of the different entities.
 - » Host National Society funding requirements not coming from IFRC network sources can comprise a variety of sources, as demonstrated when reporting on income in the IFRC Federation-wide Databank and Reporting System
 - » Participating National Society funding requirements for bilateral support are those validated by respective headquarters, and often represent mainly secured funding
 - » IFRC funding requirements comprise both what is sourced from the IFRC core budget and what is sought through emergency and thematic funding. This includes participating National Societies' multilateral support through IFRC, and all other IFRC sources of funding
- **Missing data and breakdowns:** National Societies have diverse data collection systems and processes that may not align with the standardized indicators. Data may not be available for some indicators, for some National Societies. This may lead to inconsistencies across different reporting tools as well as potential under or over-estimation of the efforts led by all.
- **Reporting bias:** The data informing this Federation-wide overview is self-reported by each National Society (or its designated support entity) which is the owner and gatekeeper, and responsible for accuracy and updating. IFRC tries to triangulate the data provided by the National Societies with previous data and other data in the public domain.
- **Definitions:**
 - » **Local units:** ALL subdivisions of a National Society that coordinate and deliver services to people. These include ALL levels (provincial, state, city, district branches, sections or chapters, headquarters, and regional and intermediate offices, as well as community-based units)
 - » **Branches:** A Branch has its roles, responsibilities and relationship with the National Headquarters defined through the National Society's Statutes, including the level of autonomy given, especially in the area of its legal status, mobilising local resources and building local partnerships, and the decisions it makes. It has a local-level decision-making mechanism through its Branch members, board and volunteers, equally defined through the National Society's Statutes

ADDITIONAL INFORMATION

- [GH_Ghana AR Financials.pdf](#) (Note: For emergencies for which a financial report is not yet available, see [MDRGH020](#) and [MDRGH022](#))
- [IFRC network country plans](#)
- [Subscribe for updates](#)
- [Live Disaster Response Emergency Fund \(DREF\) data](#)
- Operational information: [IFRC GO platform](#)
- National Society data: [IFRC Federation-wide Databank and Reporting System](#)
- [Evaluations database](#)

Contact information

Dr. Ghulam Muhammad Awan

Head of Delegation
IFRC Country Cluster Delegation
for Nigeria, Togo, Benin & Ghana,
based in Abuja
T +92 320 1222266
ghulam.awan@ifrc.org

Louise Daintrey

Head of Strategic Partnerships
& Resource Mobilization
IFRC Regional Office for Africa,
Nairobi
T +254 110 843978
louise.daintrey@ifrc.org

Sumitha Martin

Lead
IFRC Global Strategic Planning
& Reporting Centre
New Delhi
sumitha.martin@ifrc.org