

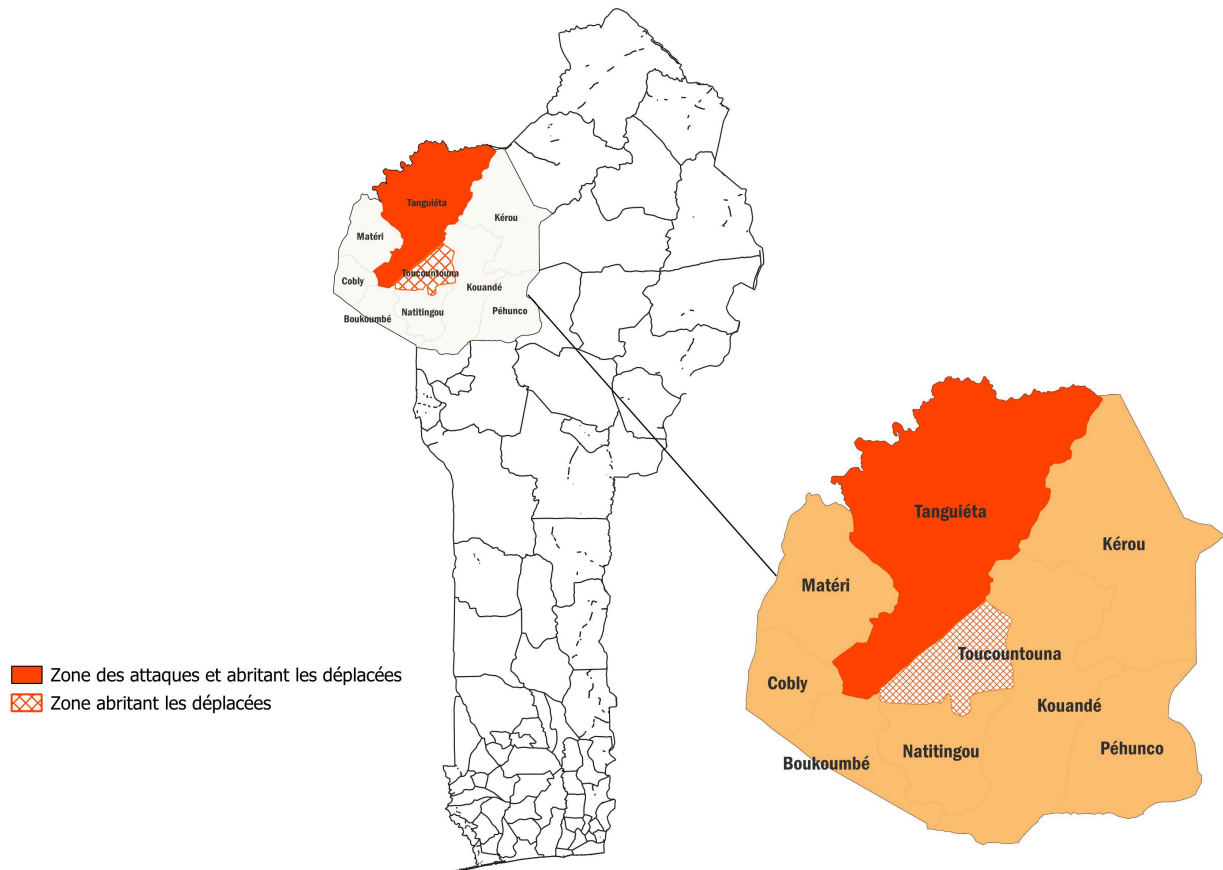


Assistance provided by Benin Red Cross volunteers

Appeal: <b>MDRBJ022</b>	Total DREF Allocation: <b>CHF 215,172</b>	Crisis Category: <b>Yellow</b>	Hazard: <b>Population Movement</b>
Glide Number: -	People Affected: <b>102,168 people</b>	People Targeted: <b>3,000 people</b>	People Assisted: <b>3,000 people</b>
Event Onset: <b>Slow</b>	Operation Start Date: <b>19-06-2025</b>	Operational End Date: <b>31-10-2025</b>	Total Operating Timeframe: <b>4 months</b>

Targeted Regions: **Atakira**

# Description of the Event



Carte de la Zone Cible

## Date when the trigger was met

04-06-2025

## What happened, where and when?

Since 2019, Northern Benin has been experiencing a persistent deterioration in security, marked by recurrent attacks in the Atacora and Alibori departments. This growing insecurity caused population displacement and a significant increase in humanitarian needs.

Within this context, the Tanougou police post, located in the municipality of Tanguéta, was attacked twice on 14 May and 4 June 2025. The first attack displaced 409 households (3,046 people), and the second triggered an additional wave of displacement affecting 571 households (4,404 people).

On 7 June 2025, the Benin Red Cross conducted a rapid assessment that confirmed these displacements. In Tanguéta, 183 host families sheltered displaced individuals, while in the neighboring municipality of Toucountouna, 195 households (1,323 people) found refuge with 27 host families.

In total, the two attacks resulted in the displacement of 766 households, who were hosted by 210 families. Living conditions deteriorated sharply, with severe overcrowding and limited access to safe drinking water, healthcare, and essential items.

In response to the scale of needs and the mounting pressure on host families, and following a formal request from local authorities, the Benin Red Cross sought emergency support from the IFRC's Disaster Relief Emergency Fund (DREF). Funding was approved on 19 June 2025, enabling a rapid response targeting 500 households approximately 3,000 people with interventions focused on cash and voucher assistance (CVA), WASH and health activities.



Echange avec les bénéficiaires au niveau PSH



Focus Group avec les bénéficiaires

## Scope and Scale

Early 2025, the humanitarian impact in northern Benin proved particularly severe. In Tanguiéta, the number of internally displaced persons (IDPs) reached 3,617 individuals, while the neighboring municipality of Toucountouna recorded 987, contributing to a national total estimated at 27,294 IDPs. The trend of forced displacement was especially pronounced in the Atacora department: in Tanguiéta, the number of IDPs rose from 532 people in 2023 to 3,641 in 2025, spread across 23 localities. In Toucountouna, 987 IDPs were recorded in July 2025 across 14 localities, illustrating the continued expansion of displacement throughout the border area. This evolution reflected a persistent deterioration in the security situation and growing pressure on already vulnerable host communities.

Lives and livelihoods were severely threatened by recurring violence, repeated displacement, and the gradual breakdown of basic services. Most displaced people and host families were living in rural areas near the Pendjari and W parks, which had become infiltration zones for non-state armed groups. These communities faced constant risks, repeated attacks, and cycles of fear and flight that steadily eroded their resilience.

The most vulnerable groups included women and children, who were more exposed to gender-based violence, exploitation, and school dropout; older persons and persons with disabilities, for whom access to services and humanitarian assistance remained limited; as well as female-headed households, often facing precarious economic conditions and restricted participation in community life. Host families were also under increasing strain, sharing already scarce resources with newly arrived displaced people.

Findings from a recent multisectoral assessment highlighted critical needs across several sectors. In terms of shelter, 56% of households did not own their homes, 29% were renting under difficult conditions, and 65% were living in overcrowded situations, with an average of seven people per household. The main hosting areas were concentrated in the Atacora and Alibori departments, which were absorbing the majority of displaced people despite limited capacity.

Access to healthcare remained a major concern: although 77% of people lived within five kilometers of a health facility, only 44% actually used these services, mainly due to financial constraints or insecurity, and 61% reported limited or no access, often resorting to self-medication. The situation regarding water, hygiene, and sanitation was particularly alarming: 55% of households faced difficulties accessing water, average household water reserves were only 33 liters far below the 90-liter standard and 85% lacked functional latrines. Hygiene practices were also inadequate: only half of the population knew the key moments for handwashing, and 31% used neither water nor soap.

Access to education was also heavily disrupted: 52% of households reported difficulties related to distance or the destruction of school infrastructure, and many children aged 5 to 17 were out of school for economic or security reasons. Social protection remained limited, despite the introduction of insurance mechanisms for workers in the informal sector. In addition, violence, family separation, and loss of identity documents were common among displaced people. The absence of a formal migration policy in Benin further exacerbated these challenges, as displacement often occurred in haste, leaving many individuals without access to essential services.

The intervention conducted through the DREF significantly improved the living conditions of the affected populations, particularly through enhanced access to essential services (shelter, WASH, community health service provision, and humanitarian assistance through

unconditional cash transfers). It also contributed to reducing the vulnerability of targeted households and strengthening their resilience capacity in the face of shocks. Communities additionally benefited from first aid training.

The intervention contributed to strengthening the technical and operational capacities of volunteers and staff, particularly in emergency response management, coordination, and data collection, with a special emphasis on the implementation of cash transfer operations and the management of humanitarian service points.

## Source Information

Source Name	Source Link
1. Source 1	<a href="https://www.lemonde.fr/afrique/article/2023/01/27/au-benin-la-lutte-antidjihadiste-fait-craindre-une-stigmatisation-accrue-des-peuls_6159588_3212.html">https://www.lemonde.fr/afrique/article/2023/01/27/au-benin-la-lutte-antidjihadiste-fait-craindre-une-stigmatisation-accrue-des-peuls_6159588_3212.html</a>

## National Society Actions

Have the National Society conducted any intervention additionally to those part of this DREF Operation?	No
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## IFRC Network Actions Related To The Current Event

<b>Secretariat</b>	<p>During the operation, the International Federation of Red Cross and Red Crescent Societies (IFRC) played a key role by providing consistent technical and financial support to the Benin Red Cross, both in the development and implementation of the DREF. This support took several forms.</p> <p>From a technical perspective, the IFRC ensured regular operational follow-up, including close support and field missions carried out by the Senior Disaster Manager based in Benin. These visits made it possible to monitor the progress of activities, quickly identify potential challenges, and implement the necessary adjustments to ensure the effectiveness and quality of the humanitarian response.</p>
<b>Participating National Societies</b>	<p>As part of the humanitarian response aimed at supporting populations affected by forced displacement in the municipality of Tanguiéta, the Luxembourg Red Cross provided direct and substantial material support to the Benin Red Cross (BRC). This assistance took the form of 50 emergency shelter kits, intended to enable displaced households to access safe temporary housing suited to their immediate needs and to help meet their basic living requirements. The kits were distributed to 50 households, covering an estimated population of 651 people. The donation of these kits allowed the Benin RC to cover additional beneficiaries and increase the coverage of the response. The kits provided dignified temporary solutions for the most vulnerable households, while simultaneously reducing their exposure to climate and health risks. Some shelters have already been modified by the communities themselves, gradually evolving toward more durable and permanent structures.</p>



# ICRC Actions Related To The Current Event

As part of the response to the needs of displaced populations from Tanougou and host families, the International Committee of the Red Cross (ICRC), in collaboration with the Benin Red Cross (BRC), complemented the DREF-funded intervention through a distribution of non-food items (NFIs) to 453 displaced households in order to meet the essential needs of families affected by forced displacement and to strengthen their ability to cover their basic needs while awaiting durable solutions. The ICRC also conducted assessments and provided Restoring Family Links (RFL) services.

## Other Actors Actions Related To The Current Event

<b>Government has requested international assistance</b>	Yes
<b>National authorities</b>	<p>Following the massive displacements that occurred in the Tanougou area, municipal authorities conducted field visits alongside national political leaders, including the First Vice-President of the National Assembly, in order to reassure affected communities and demonstrate institutional support. This mission was reinforced by the deployment of a detachment of paratroopers tasked with strengthening security in the area.</p> <p>A Municipal Security Council was subsequently convened, bringing together defense and security forces, decentralized state services, and representatives of the humanitarian coordination framework to establish a shared situational overview and define immediate stabilization measures. At the same time, the mayor and the municipal focal point for risk reduction organized a working session with neighborhood and village chiefs to register displaced persons in each locality, enabling harmonized data sharing.</p> <p>Following this meeting, the humanitarian organizations present were invited to submit, within 24 hours, a response plan addressing the urgent needs of displaced households and host families. At the national level, the Government of Benin, through the Benin Civil Protection Agency (ABPC), held a coordination meeting on 4 June 2025 aimed at harmonizing interventions, ensuring complementarity of actions, and strengthening operational planning.</p>
<b>UN or other actors</b>	<p>Several humanitarian actors mobilized to deliver a coordinated response to the needs of displaced people and host families. Plan International Benin provided food assistance in the form of cash transfers to displaced populations. Similarly, the World Food Programme (WFP) delivered food support through cash-based transfers, targeting the most vulnerable displaced households.</p> <p>At the same time, UNICEF provided three months of food assistance through cash transfers, helping to strengthen the food security of affected communities. Complementing these efforts, CONACEE Africa offered targeted support to host households, assisting families who had taken in displaced people and helping to ease the pressure on their already limited resources.</p>
<b>Are there major coordination mechanism in place?</b>	<p>As an auxiliary to the public authorities in the humanitarian field and an active member of various national, departmental, and local platforms dedicated to disaster risk reduction and climate change adaptation, the Benin Red Cross consistently participated in planning and monitoring meetings held at both national and departmental levels.</p> <p>The Natitingou branch of the General Secretariat served as the operational team responsible for implementing the intervention. In this role, it received technical and operational support from the headquarters team, ensuring effective coordination, informed decision-making, and rigorous monitoring of field activities.</p>



# Needs (Gaps) Identified



## Shelter Housing And Settlements

During the rapid assessment conducted by BRC in June 2025, significant needs in the “shelter and NFI/household items” sector were clearly identified. It was observed that host communities had limited capacity to accommodate the total number of displaced people. Housing conditions were overcrowded, with an average of seven people per household due to the presence of hosted families. In addition, the available household item kits were found to be insufficient compared to Sphere humanitarian standards, limiting the ability to adequately meet the essential needs of displaced households.



## Livelihoods And Basic Needs

A large proportion of the affected population was living in poverty and had limited access to basic social services such as education, healthcare, and sanitation. The assessment of food security and livelihoods highlighted several major concerns: inadequate dietary habits within affected communities, with 65% of the population recording unacceptable food consumption scores including 22% with borderline consumption and 43% with poor consumption. Around 50% of affected people were eating no more than two meals per day. Furthermore, affected communities had a limited capacity to obtain food, whether through their own agricultural production or through market purchases.



## Health

Given the severely overcrowded living conditions and the often-large size of displaced households, the risk of disease transmission was considered high in both Tanguiéta and Toucountouna. Displaced populations lived in close quarters with host families, creating conditions conducive to the spread of communicable diseases. Healthcare services were either overwhelmed by the sudden influx of displaced people or remained inaccessible to hard-to-reach communities due to distance, damaged infrastructure, or insecurity.

The assessment further identified significant health needs among displaced children, who were particularly vulnerable to malnutrition, waterborne diseases, and lack of routine vaccinations. Women, including pregnant and lactating mothers, also faced heightened health risks due to limited access to maternal and reproductive health services.

Finally, the psychological toll of displacement, violence, and loss was substantial. Affected populations — particularly children, women, and elderly individuals showed clear signs of distress, highlighting an urgent need for psychosocial support to help communities cope with trauma and rebuild a sense of stability and normalcy.



## Water, Sanitation And Hygiene

The forced displacement of populations has increased pressure on existing social and community infrastructure, particularly in areas where access to safe drinking water, hygiene, and sanitation remained fragile despite ongoing improvement efforts.



## Protection, Gender And Inclusion

The displacement caused by the attacks also gave rise to significant protection, gender, and inclusion concerns. Overcrowding and the breakdown of community structures heightened the risk of gender-based violence, particularly for women and girls, who also faced disproportionate caregiving burdens and limited access to maternal health services. Separated and unaccompanied children required urgent family tracing and reunification support. Elderly persons and individuals with disabilities faced additional barriers in accessing distribution points and essential services, as standard humanitarian modalities were not always adapted to their specific needs. Language, literacy, and mobility barriers further limited the ability of some displaced persons to access available assistance and participate in decision-making processes. Across all groups, the trauma of violence and forced displacement underscored the urgent need for inclusive, community-based psychosocial support.





## Migration And Displacement

Affected populations in both Tanguiéta and Toucountouna had limited access to essential services due to the geographic remoteness of their localities, insecurity, and lack of reliable transportation. The sudden and large-scale nature of the displacement had overwhelmed local health facilities, administrative structures, and existing community support systems. Many displaced households had fled with little to no belongings and had limited information on available humanitarian assistance. The concentration of displaced persons across multiple host families in two municipalities further complicated equitable service delivery and required a structured coordination mechanism. Protection concerns, including the heightened risk of gender-based violence and the presence of highly vulnerable individuals such as unaccompanied children, elderly persons, and people with disabilities were also identified as critical needs.



## Community Engagement And Accountability

No activities had been previously carried out by the Benin Red Cross in the localities identified for this operation. It was therefore necessary to gather information on the needs of the affected populations, as well as feedback during and after the implementation of activities.

# Operational Strategy

## Overall objective of the operation

The objective of the operation was to provide assistance to 3,000 people, or approximately 500 households evenly divided between internally displaced households and host families. This support was to be delivered through cash transfers aimed at covering their immediate needs, complemented by basic health services and hygiene promotion activities. In addition, fifty host families were to receive specific support for emergency shelter.

The intervention therefore sought to improve the living conditions of the affected populations by facilitating access to quality basic services tailored to their specific needs and respectful of their fundamental rights. It was to be implemented over a four-month period in the municipalities of Tanguiéta and Toucountouna, located in the Atacora department in northern Benin.

## Operation strategy rationale

The operation was implemented to address the most pressing humanitarian needs of the populations most affected in Tanguiéta and Toucountouna as identified by the assessment conducted by the Benin Red Cross.

The operation focused on the sectors of shelter, livelihoods, health, WASH, migration related activities through activation of humanitarian services points. Protection, gender and inclusion tools and Community Engagement and Accountability (CEA) tools were integrated throughout all activities.

**Shelter:** 50 emergency shelters were built for host families with the support of volunteers and local artisans. The Luxembourg Red Cross complemented this effort by providing an additional 50 shelter kits, reaching 651 people. Together, these interventions provided dignified temporary housing for the most vulnerable households, reducing their exposure to climate and health risks. Notably, several beneficiary families have already adapted and improved their shelters independently, reflecting a gradual transition toward more durable structures and demonstrating growing community resilience. A key lesson from this intervention was the importance of leveraging Participating National Societies' areas of expertise to complement DREF-funded operations. Despite these achievements, shelter needs remain high. Many displaced households continue to live in precarious conditions, and the shortage of shelter kits and construction materials limits the ability to reach all vulnerable families, leaving them exposed to harsh weather and health risks. Strengthening the availability of both emergency and transitional shelter solutions while exploring longer-term, more durable options remains a priority for any follow-up intervention.

**Livelihoods:** To address the immediate needs of displaced populations, the operation incorporated a Cash and Voucher Assistance (CVA) component. A total of 503 households (approximately 3,012 people) received three rounds of unconditional cash transfers, with amounts differentiated by household status 30,500 CFA francs for host families and 40,500 CFA francs for internally displaced persons. This approach contributed directly to improved food security and broader household well-being, with 98% of beneficiaries reporting satisfaction with the assistance. Key lessons highlighted the critical importance of prior volunteer training in CVA principles and the value of digital tools such as KoBoCollect in ensuring transparent and efficient beneficiary registration and distribution. Challenges included access constraints in certain remote areas, which required logistical adjustments, as well as the need for closer coordination between local authorities, branch volunteers, and headquarters staff to avoid duplication with parallel programs and ensure smooth implementation.



**Health:** To address the health needs identified during the initial assessment, the operation introduced outreach activities to bring healthcare services closer to displaced and hard-to-reach communities. These included medical consultations, antenatal care, and child immunization, collectively reaching 1,473 people with the support of community health workers. Complementing these services, awareness sessions on Essential Family Practices (EFP) were conducted alongside basic first aid training, with four sessions of 12 participants each building the emergency response capacity of 48 volunteers and community members. Despite these achievements, the management of more complex medical conditions remains a significant challenge, as volunteer technical capacity and available funding are insufficient to meet the full scope of health needs among affected populations — an area that will require sustained attention in any follow-up intervention.

**Water, Sanitation, and Hygiene (WASH):** The WASH sector was strengthened through the promotion of access to safe drinking water and sanitation facilities, household-level awareness campaigns, the use of interactive educational tools, and specific training for volunteers in hygiene promotion. Forty volunteers received two days of WASH training before being deployed to conduct household-level awareness sessions across Toucountouna and Tanguiéta. A total of 144 sessions covering eight topics were delivered by 36 volunteer pairs, reaching 10,608 people — including 200 pregnant women, 568 breastfeeding women, and 26 persons with disabilities. Volunteers were equipped with image boxes, WASH manuals, and data reporting tools to support effective outreach delivery. Significant challenges remained at the end of the operation, as access to safe drinking water and sanitation infrastructure are inadequate in several intervention areas. Many water points require rehabilitation or restoration, while hygiene practices need to be further strengthened. Improving access to latrines and promoting awareness activities to prevent waterborne diseases are also essential priorities. Further interventions should also include activities around menstrual hygiene.

**Protection, Gender and Inclusion (PGI):** PGI activities reached 3,187 people through household and public awareness sessions on GBV prevention and children's rights, delivered by 30 trained volunteers across both municipalities. A cascading GBV training mechanism further extended coverage, ultimately training 175 volunteers in total. Psychosocial support was provided to 737 people 476 in Tanguiéta and 261 in Toucountouna through a combination of individual follow-up and group discussion sessions, supported by BRC psychologists and hospital staff. Recreational spaces were organized for children, and intergenerational forums brought together youth and older persons to discuss resilience and community adaptation. Key lessons highlighted the value of structured volunteer training, close supervision, and multidisciplinary psychosocial teams in ensuring quality of care. Challenges included difficult access to certain areas, coordination demands across multiple actors, and a level of psychosocial support demand that at times exceeded planned capacities.

**Migration and displacement:** The establishment of humanitarian services points (HSP) were identified as the best tools to effectively respond to migrants' needs as part of the response. Ten volunteers were trained on HSP implementation, management, and monitoring tools, before being deployed five per municipality to ensure continuous presence at the service points over a four-to-five-week period. The HSPs reached 309 beneficiaries in total (186 in Tanguiéta and 123 in Toucountouna), providing information, support, and referral services. A contextualized HSP manual and associated management tools were developed based on the IFRC resource kit, and regular supervision missions by the Departmental Executive Secretary ensured quality monitoring throughout. Key lessons underlined the importance of standardized tools and regular oversight in enabling structured and responsive service delivery. Challenges included coordination across multiple actors, avoiding overlap with parallel programs, sustaining volunteer motivation over an extended period, and the limited capacity of government services to follow up on all referred cases.

**Community engagement and accountability (CEA):** CEA mechanisms were included in activities throughout the response. Participatory CEA training was organized for volunteers and BRC staff from both municipalities, strengthening their skills in community engagement principles and feedback tools. Feedback mechanisms included Humanitarian Service Points, suggestion boxes, a complaints hotline, and community satisfaction surveys, collectively reaching 1,099 people. Ten radio broadcasts aired in French and four local languages Waama, Naténi, Biali, and Gourmantché disseminated key operational messages and promoted peaceful coexistence. Focus group discussions and community meetings further ensured direct, two-way interaction with affected populations. The key lesson highlighted the need to diversify feedback collection channels, while the main challenge identified was the absence of a structured rumor management mechanism an area recommended for strengthening in future operations to maintain community trust and effective communication.

After the end of the operation, a lessons-learned workshop highlighted the importance of continuous funding to maintain the implementation of activities, particularly through humanitarian service points. Volunteers have continued to run activities on a less regular basis in the absence of funding. As needs remain high, the Benin Red Cross has been working with partners to continue the implementation of activities and raise additional funding to maintain support. The national society notably highlighted the needs to support populations who have been displaced for multiple months rather than focusing solely on recent displacements.

## Targeting Strategy

### Who was targeted by this operation?

The response plan aimed to address the urgent humanitarian needs of the populations most affected in the municipalities of Tanguiéta and Toucountouna. The Benin Red Cross (BRC) primarily targeted internally displaced persons (IDPs) and vulnerable host families who had not yet received support from other partners. Particular attention was given to groups with specific needs, including older persons,



unaccompanied children, households with children under five, pregnant women, persons with disabilities, the sick, widows and widowers, as well as individuals who had fallen ill as a result of the crisis.

These selection criteria were defined in consultation with the Benin Civil Protection Agency and four local officials: the two GUPS chiefs, the cash transfer focal point representing the Director of Technical Services of the Tanguiéta municipality, and a representative from the risk and disaster service of the Toucountouna municipality. This coordination ensured accurate household targeting prior to the distribution of assistance.

Community participation mechanisms were fully integrated throughout the targeting process. Focus group discussions were organized, bringing together community representatives as well as community, religious, and institutional leaders, in order to ensure an inclusive response and promote peaceful coexistence between displaced people and host communities. The operation was therefore designed to fill gaps in humanitarian assistance and address the needs of the groups most severely affected by the crisis.

## Explain the selection criteria for the targeted population

The intervention targeted approximately 500 displaced households, and humanitarian services were also extended to host families, identified through a joint analysis of displacement flows, pressure on basic services, and gaps in humanitarian coverage. The selection of these two municipalities was driven by the confirmed presence of new waves of displaced people, the persistence of armed attacks, and the growing impact on host communities. Prioritization criteria included the presence of around 500 newly displaced households that had not yet received assistance and the continued occurrence of attacks leading to further displacement, highlighting the need for sustained humanitarian support.

This prioritization was carried out in consultation with humanitarian actors and local authorities to strengthen coordination and ensure an effective humanitarian response at both community and institutional levels. Situation analyses conducted by humanitarian organizations revealed that host families were generally overlooked or insufficiently considered in assistance strategies. As a result, they found themselves in an unprecedented situation of poverty due to the sudden and unplanned depletion of their food reserves as they welcomed displaced people in solidarity. Based on this observation, confirmed during the roundtable discussions, it was decided to prioritize assistance to these beneficiaries. This support was intended to provide renewed hope and assistance not only to displaced people but also to host families, particularly since aid provided to a host family benefits both the family itself and the displaced people living with them.

## Total Assisted Population

Assisted Women	1,050	Rural	43.6%
Assisted Girls (under 18)	750	Urban	55.6%
Assisted Men	900	People with disabilities (estimated)	-
Assisted Boys (under 18)	300		
Total Assisted Population	3,000		
Total Targeted Population	3,000		

## Risk and Security Considerations (including "management")

Does your National Society have anti-fraud and corruption policy?	Yes
Does your National Society have prevention of sexual	Yes



exploitation and abuse policy?	
Does your National Society have child protection/child safeguarding policy?	<b>No</b>
Does your National Society have whistleblower protection policy?	<b>No</b>
Does your National Society have anti-sexual harassment policy?	<b>Yes</b>

**Please analyse and indicate potential risks for this operation, its root causes and mitigation actions.**

Risk	Mitigation action
The spread of diseases with epidemic potential had been anticipated by the Benin Red Cross (BRC).	During the training sessions, volunteers received messages on epidemic prevention, with particular emphasis on the correct steps for handwashing.
To reduce the risk of exclusion and inaccessibility to certain affected community groups.	The National Society strengthened the implementation of its humanitarian diplomacy activities.
Sexual and gender-based violence, as well as violence against children, were taken into account in the planning of the intervention.	Sexual and gender-based violence, as well as violence against children, were taken into account in the planning of the intervention. The Benin Red Cross coordinated the activities of all actors involved and trained volunteers to ensure an appropriate, safe response tailored to the needs of vulnerable people.
Inaccessibility to certain intervention areas due to security threats posed a major challenge.	The Benin Red Cross (BRC) collected all relevant security information before and during each field mission. Staff and volunteers involved were briefed on the Code of Conduct and on safe access procedures.
The security situation in border areas with Burkina Faso, Niger, and Togo could have had an impact on national security and on the smooth implementation of the operation.	The BRC regularly kept its teams informed about security-related information and applicable regulations. Most volunteers working in these areas had been trained in safe access, security, and safety procedures. In addition, the BRC maintained good relations with security authorities, and during the implementation of the DREF, the BRC Security Focal Point organized briefing sessions to strengthen volunteers' capacities as needed.

**Please indicate any security and safety concerns for this operation:**

The border area of the Atacora municipalities, adjacent to Burkina Faso, Pendjari National Park, and Togo, faced security instability linked to the threat posed by non-state armed groups. The borders with Burkina Faso and Togo, including the W forests and the Pendjari National Parks, were vulnerable to incursions by these groups. The attacks led to the forced displacement of populations.

Security management, based on humanitarian principles, was regularly updated through risk assessments and mitigation measures. Night travel to remote areas was discouraged due to security risks. All staff received security training and complied with the Code of Conduct and were additionally covered by insurance for risks related to Red Cross and Red Crescent activities through the IFRC.

Has the child safeguarding risk analysis assessment been completed?	<b>Yes</b>
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# Implementation



## Shelter Housing And Settlements

**Budget:** CHF 11,584  
**Targeted Persons:** 300  
**Assisted Persons:** 300  
**Targeted Male:** 108  
**Targeted Female:** 112

### Indicators

Title	Target	Actual
Number of households receiving shelter items	50	50
Number of households assisted with construction	50	50
Percentage of shelters built	90	100
Number of supervised constructions	1	1
Number of protective equipment	2	2

### Narrative description of achievements

As part of the 2025 Population Movement DREF Operation, the logistics department of the Benin Red Cross procured all the materials required for the construction of the 50 planned shelters. These materials were assembled into 50 complete kits, with each beneficiary household receiving one kit containing: 42 teak poles, one rafter, one bag of nails in each size (8, 10, and 12), 1.25 boxes of galvanized roofing nails, one roll of galvanized wire, and 20 roofing sheets. In total, this represented 2,100 teak poles, 50 rafters, 50 rolls of galvanized wire, 1,000 roofing sheets, 50 bags of nails for each size, and 63 boxes of galvanized nails. The materials mobilized also included bitumen washers and various other tools necessary for construction.

To support families with the construction process, local artisans and volunteers were deployed to the field, equipped with personal protective equipment such as gloves, helmets, and boots. Each shelter was built in one day by a team composed of two local artisans and three volunteers. Beneficiaries signed a receipt form confirming the handover of materials.

Construction was supervised by teams from both the national and departmental levels to ensure compliance with the technical standards outlined in the shelter guidelines and to guarantee the effective presence of teams on site. Thanks to this support and the provision of protective equipment, each household was able to build its shelter in safe conditions and in line with established standards. In total, 12 shelters were built for beneficiaries in Toucountouna and 38 for host families. This results in a percentage of 100% of households receiving assistance in building shelters, out of the 90% planned.

### Lessons Learnt

Support provided to families by trained local artisans and volunteers, combined with the provision of personal protective equipment, helped strengthen both the safety and efficiency of field operations. Joint supervision by national and departmental teams ensured compliance with technical standards, thereby improving the quality of the constructions. Moreover, close collaboration with host families promoted better integration of displaced populations and ensured equitable assistance for all beneficiaries.

### Challenges

The implementation of the shelter activities faced several challenges. Difficult weather conditions and limited access to certain areas sometimes delayed the delivery of materials and the construction of shelters. In addition, raising beneficiaries' awareness about the



proper use of materials and adherence to technical standards was essential to ensure the durability of the structures. Finally, the need to develop a shelter model adapted to humanitarian operations in northern Benin remains a significant challenge, in order to standardize and streamline future interventions.



## Multi Purpose Cash

**Budget:** CHF 115,570  
**Targeted Persons:** 3,000  
**Assisted Persons:** 3,018  
**Targeted Male:** 1,479  
**Targeted Female:** 1,539

### Indicators

Title	Target	Actual
Number of households that have received cash transfer	500	503
Percentage of people satisfied with the assistance	80	98
Number of PMDs completed	1	1
Number of volunteers trained on the CTP	30	30
Number of rounds conducted	3	3

### Narrative description of achievements

The Tanguiéta Local Red Cross Committee hosted two days of training for volunteers from the Tanguiéta and Toucountouna local committees on Cash Transfer Programming (CTP). The first day focused on the fundamental concepts of cash transfers, including their advantages, modalities, project cycles, and distribution mechanisms, as well as the importance of coordination, communication with beneficiaries, and compliance with distribution standards. The second day emphasized practical application, including beneficiary identification and registration using digital tools such as KoBoCollect, site management, and data collection simulations to ensure effective and transparent implementation.

Volunteers applied the knowledge gained by registering beneficiaries under the supervision of representatives from the municipality, the GUPS, local committee presidents, the Executive Secretariat, and a headquarters team. Of the 737 households initially registered, 578 were selected after cross-checking with beneficiaries who had already received assistance from the World Food Programme and applying the targeting criteria, which included both host families and internally displaced persons.

In preparation for the unconditional cash distribution, a briefing and mobilization session was organized. Volunteers welcomed and guided beneficiaries, verified their presence on the list, and checked the validity of their Celtis SIM cards to complete the certification process. Of the 578 beneficiaries, 503 were certified and received three payments: 30,500 CFA francs for host families and 40,500 CFA francs for internally displaced persons. The Benin Red Cross covered the withdrawal fees so that beneficiaries received the full amount.

Rigorous monitoring was conducted after each transfer to ensure that all beneficiaries received the assistance, and a post-distribution evaluation was carried out, including a satisfaction survey among beneficiaries and local authorities to measure the effectiveness and acceptability of the program. A quantitative survey conducted among 487 beneficiaries in Tanguiéta and Toucountouna showed that the vast majority received the assistance (100%), with few difficulties during withdrawal (98.36%). The distribution was considered efficient, clear, and fast, contributing to improvements in food consumption, health, education, and overall economic conditions. More than 90% of beneficiaries reported being very satisfied and viewed the mobile money system as sustainable.

### Lessons Learnt

Prior training of volunteers on Cash Transfer Programming (CTP) and the use of digital tools such as KoBoCollect proved essential to ensure effective and transparent implementation. Close supervision by local authorities, the GUPS, and headquarters teams helped



guarantee the quality of registrations and the proper application of targeting criteria. The involvement of beneficiaries at every stage, through certification and feedback mechanisms, strengthened trust and the acceptability of the operation.

The Red Cross's coverage of withdrawal fees ensured that beneficiaries received the full amount of the funds distributed, thereby increasing the immediate impact of the assistance. Coordination among the various stakeholders including municipalities, local committees, and security authorities facilitated beneficiary mobilization and ensured the safety of field operations.

## Challenges

Accessibility constraints in certain areas occasionally slowed the mobilization and certification of beneficiaries, requiring logistical and operational adjustments. In addition, coordination among the various actors involved particularly municipalities, the GUPS, volunteers, and headquarters teams required careful planning to avoid duplication and ensure operational efficiency. Finally, ensuring full coverage while preventing overlap with other existing humanitarian programs, such as those of WFP or other NGOs, remained a major challenge throughout the implementation.



**Budget:** CHF 15,742

**Targeted Persons:** 3,000

**Assisted Persons:** 8,015

**Targeted Male:** -

**Targeted Female:** -

## Indicators

Title	Target	Actual
Number of people affected by the advanced strategy	3,000	1,473
Number of people educated about epidemic management within the community	3	3
Number of people affected by first-aid activities	150	52

## Narrative description of achievements

The outreach strategies were launched through a preparatory session organized in the municipalities of Toucountouna and Tanguiéta. This meeting brought together key local stakeholders, including health workers, Heads of the Single Social Protection Desk (CGUPS), local committee presidents, local teams, and municipal health focal points.

The activities began with the identification of unvaccinated children in both municipalities, leading to the registration of 1,284 children, including 799 girls and 485 boys. The implementation of the outreach strategies subsequently reached 1,473 beneficiaries, including 930 women and 543 men, through medical consultations, antenatal care, and child immunization. During this phase, the supervision team monitored the smooth implementation of activities and addressed any gaps identified.

At the same time, awareness sessions on Essential Family Practices (EFP) were conducted, reaching a total of 8,015 people, including 3,519 men, 3,697 women, 214 pregnant women, 548 breastfeeding women, and 37 persons living with disabilities. These activities aimed to improve the well-being of mothers and children, with positive effects on the entire family. Supervision of these sessions also helped ensure quality implementation and allowed for adjustments when necessary.

In total, 52 participants from Tanguiéta and Toucountouna including volunteers, municipal staff, GUPS members, and displaced persons took part in basic first aid training, thereby strengthening local capacity to provide life-saving assistance.

## Lessons Learnt

The involvement of health workers in the implementation of health activities is a key strategy. It ensures that activities are carried out in line with professional standards, strengthens volunteers' skills, and builds strong links between volunteers and the health system, fostering harmonious collaboration in support of community health.



## Challenges

Managing certain medical conditions that require substantial resources remained a challenge.



## Water, Sanitation And Hygiene

**Budget:** CHF 5,586

**Targeted Persons:** 3,000

**Assisted Persons:** 10,608

**Targeted Male:** 5,198

**Targeted Female:** 5,410

## Indicators

Title	Target	Actual
Number of people who benefited from WASH activities	3	10,608
Number of people trained in water, sanitation, and hygiene	40	40
Number of PHAST kits produced (one kit per municipality)	2	2

## Narrative description of achievements

To ensure the effective and efficient implementation of hygiene and sanitation promotion activities for displaced people and host households in Toucountouna and Tanguiéta, 40 volunteers received two days of capacity building on WASH topics and community facilitation techniques.

Following the training, volunteers were deployed to conduct household-level awareness sessions for both host families and displaced households in the two municipalities. A total of 144 awareness sessions were carried out by 36 pairs of volunteers, covering eight different topics. Over eight field visits in each intervention municipality, 10,608 people were reached. Among the key population groups reached were 200 pregnant women, 568 breastfeeding women, and 26 persons with disabilities. WASH activities were extended to all communities living in the targeted districts, particularly through door-to-door household awareness sessions, which accounts for the significant overachievement in the number of beneficiaries reached compared to the estimated target.

The awareness activities had a positive impact on communities thanks to the materials made available to volunteers for hygiene and sanitation promotion. These included image boxes provided to each volunteer for use during outreach sessions, as well as data reporting tools, notebooks, pens, and WASH manuals for reference when needed.

## Lessons Learnt

Lessons learned highlighted the warm welcome and strong availability of community members, clear recognition of the National Society's role in supporting vulnerable communities, good understanding and ownership of the awareness messages, and strong mobilization and willingness among households to adopt positive behaviors.

It should be noted that there was a significant discrepancy between the actual results and the forecast regarding the number of people who benefited from the activities. This is because the initial forecast did not take into account the type and implementation strategy of this activity, which is intended for the entire community.

## Challenges

It is recommended to continue awareness activities on a regular basis, while adapting their scheduling to the availability of households to ensure better participation and understanding of key messages. Additionally, it would be beneficial to include new topics, such as menstrual hygiene management, in order to address beneficiaries' specific needs and enhance the impact of awareness activities.





# Protection, Gender And Inclusion

**Budget:** CHF 9,553

**Targeted Persons:** 3,000

**Assisted Persons:** 3,187

**Targeted Male:** 1,581

**Targeted Female:** 1,606

## Indicators

Title	Target	Actual
Number of people affected by activities to combat sexual and gender-based violence	3,000	3,187
Number of people trained in sexual and gender-based violence	220	240
Number of intergenerational discussion forums between young people and older adults organized	10	10
Number of activities organized in children's playgrounds	10	10

## Narrative description of achievements

As part of the implementation of the Population Movement DREF operation, several community strengthening actions were carried out to prevent gender-based violence (GBV), promote children's rights, and provide psychosocial support to displaced people.

An initial activity focused on community awareness-raising on GBV and children's rights. A preparatory briefing was organized by the PGI Focal Point for 30 volunteers (15 in Tanguiéta and 15 in Toucountouna). Following this, volunteers were deployed in pairs to conduct household awareness sessions using various tools such as image boxes, attendance sheets, and reporting forms. Each pair covered 10 households per day over six field visits, under the daily supervision of the local team. Additional supervision was provided by the PGI Focal Point and the Atacora Executive Secretary in both municipalities.

During household visits, 2,585 people were reached with awareness messages: 1,517 in Tanguiéta and 1,068 in Toucountouna, including men, women, children, and older persons. Public awareness sessions reached an additional 602 people. In total, 3,187 community members benefited from the awareness sessions conducted as part of this activity.

To strengthen the prevention system, a specialized GBV training was organized for 35 participants, including volunteers and thematic focal points (PGI, Shelter, CEA, WASH, Health, and Monitoring & Evaluation). Participants received theoretical input, practical case studies, and simulation exercises. Following the training, a cascading mechanism was planned so that trained volunteers could share their knowledge with peers in both municipalities. These sessions ultimately led to the training of 175 volunteers in total (72 in Toucountouna and 103 in Tanguiéta).

At the same time, a psychosocial support system was established to assist displaced people showing signs of emotional distress or adaptation difficulties. The team consisted of local committee volunteers, GUPS members, psychologists from the Benin Red Cross, and staff from the Atacora Departmental Hospital (CHD). Activities began with the mobilization of displaced people and the organization of group discussion sessions, which helped identify individuals requiring individual follow-up.

In Tanguiéta, 56 people received individual support and 420 participated in group sessions, for a total of 476 beneficiaries. In Toucountouna, 111 people received individual follow-up and 150 took part in group discussions, totaling 261 beneficiaries. These spaces allowed participants to express psychological experiences, foster mutual support, and refer those in need of more in-depth care.

Recreational spaces were also regularly organized for children, particularly at social promotion centers and local committees in Tanguiéta, to support their well-being and socialization in a displacement context.

Finally, to understand community perceptions of DREF activities and promote intergenerational dialogue, discussion forums between youth and older persons were organized in both municipalities. Discussions focused on resilience in the face of displacement, community adaptation, and intergenerational solidarity. This initiative, led by two volunteers and supervised by BDRT members, reached 28 participants in Tanguiéta and 42 in Toucountouna. Communities expressed strong appreciation for the opportunity to share their views and have their concerns heard.



## Lessons Learnt

Training and close supervision of volunteers significantly improved the quality of awareness sessions and promoted better community understanding of GBV and children's rights. Community engagement through group discussions and intergenerational forums strengthened social cohesion and helped tailor interventions to actual needs. Finally, the presence of a structured psychosocial team enabled early identification of people in distress and improved the quality of care provided.

## Challenges

Difficult access to certain areas sometimes limited mobilization and the implementation of activities. Coordinating multiple actors required strong organization to avoid duplication. The high demand for psychosocial support, at times exceeding planned capacities, posed a significant challenge. Lastly, cascading trainings by volunteers required considerable time and availability.



## Migration And Displacement

**Budget:** CHF 6,030

**Targeted Persons:** 450

**Assisted Persons:** 309

**Targeted Male:** 121

**Targeted Female:** 187

## Indicators

Title	Target	Actual
Number of volunteers qualified to manage HSP	20	20
Number of manuals on humanitarian service points developed	1	1
Number of HSP installed and operational	3	2
Number of people affected by HSP (approximately 50 people per month for each HSP)	450	309

## Narrative description of achievements

Two humanitarian services points (HSP) were operationalized during the response. The initial target of 3 HSPs was overestimated. Operational and contextual constraints meant that only 2 HSPs could be established, in line with available resources.

As part of the establishment and management of Humanitarian Service Points (HSPs), a volunteer training workshop was held on 10-11 September 2025 in the municipalities of Toucountouna and Tanguiéta. Ten (10) volunteers were trained, including the two BDRT volunteers deployed for the operation, focal points (RFL, Monitoring & Evaluation, Food Security), the Departmental Executive Secretary of the BRC, GUPS members, the Chief Medical Officer, and DRR-CCA focal points. The training covered the manual outlining the strategy for the implementation, management, and monitoring of HSPs, as well as the associated management tools. Practical exercises and simulations were conducted to facilitate volunteers' understanding and ownership of the content. Each municipality dedicated a full day to this activity.

Regarding deployment, the five trained volunteers in each municipality ensured continuous presence at the HSPs throughout the deployment period (4 to 5 weeks). During this time, they received, listened to, supported, and referred individuals who came to the HSPs, reaching a total of 309 beneficiaries (186 in Tanguiéta and 123 in Toucountouna).

From a logistical and technical perspective, three components were developed. The first involved the development of the HSP manual and management tools, based on the IFRC resource kit and contextualized for northern Benin and the specific HSP locations. Monitoring and activity management tools were designed and validated. The second component focused on the procurement and provision of the materials and equipment required, in line with the services to be delivered and site-specific needs, and in accordance with BRC procedures. These items were then supplied to volunteers and supervisors for use. Finally, the third component consisted of supervision



missions carried out by the Departmental Executive Secretary, who conducted field visits to assess the quality of services provided, make recommendations, identify challenges faced by volunteers, and propose appropriate solutions.

## Lessons Learnt

Training and deployment of volunteers enabled effective support to beneficiaries, while the use of standardized manuals and tools ensured structured management and rigorous monitoring. Regular supervision also made it possible to quickly identify difficulties encountered and implement appropriate solutions.

## Challenges

Coordination among the various actors required careful planning. It was also crucial to avoid overlap with other existing humanitarian programs, which remained a major challenge. Maintaining volunteer motivation and availability over an extended period required continuous follow-up. Additionally, not all cases referred to other actors received positive outcomes, as those actors particularly government services also face resource constraints that limit their capacity to respond to all cases effectively.

• The indicator was not met due to the time required for preparatory work and the establishment of the HSPs. Additionally, efforts were needed to reassure beneficiaries about confidentiality, which affected initial attendance.



## Community Engagement And Accountability

**Budget:** CHF 4,808

**Targeted Persons:** 3,000

**Assisted Persons:** 1,099

**Targeted Male:** 500

**Targeted Female:** 599

## Indicators

Title	Target	Actual
Number of capacity-building workshops organized for CEA stakeholders and volunteers	2	2
Number of people affected by CEA activities	3	1,099
Number of FGDs organized	4	4
Number of community meetings organized	4	4
Number of radio broadcasts aired	10	10

## Narrative description of achievements

A training session on Community Engagement and Accountability (CEA) was organized at the Tanguiéta Local Committee, bringing together volunteers from the Tanguiéta and Toucountouna local committees, as well as staff from the Benin Red Cross. The main objective of the training was to strengthen participants' skills in the principles, tools, and techniques related to CEA, in order to ensure a more inclusive, effective humanitarian response centered on community needs. The interactive and participatory training enabled participants to put theoretical knowledge into practice through simulations and group exercises, fostering better understanding and ownership of key CEA concepts.

This awareness-raising initiative was preceded by similar sessions held at the GUPS in Toucountouna and at the Tanguiéta Local Committee, bringing together municipal actors, health center staff, volunteers, and national staff. The aim of these sessions was to respond quickly to the essential, free, and impartial humanitarian needs of vulnerable people, often in transit or displaced, and to facilitate their access to basic services such as health, water, hygiene, protection, and information.



As part of feedback management, Humanitarian Service Points were established in each of the two municipalities to guide vulnerable populations toward services and responses suited to their needs. In addition, radio broadcasts were produced to promote the Movement, raise awareness of peaceful coexistence, and disseminate key messages about the operation's activities. A detailed guide was developed to structure the broadcasts, define key messages, and guide discussions. The programs were aired in French and then in local languages — Waama, Naténi, Biali, and Gourmantché to ensure better understanding and ownership of the messages among all concerned communities.

In total, 1,099 people benefited from awareness activities related to the feedback mechanism, helping them better understand how to share their concerns, questions, and suggestions in order to improve the quality and effectiveness of humanitarian interventions. Finally, focus group discussions and community meetings were organized to complement awareness efforts and ensure direct interaction with communities, thereby strengthening the effectiveness and inclusiveness of the CEA approach.

## Lessons Learnt

It is crucial to increase the number of sources and channels for collecting feedback.

## Challenges

It is recommended to establish a sustainable rumor management mechanism and disseminate it more widely in order to ensure effective communication and strengthen community trust.



## Coordination And Partnerships

**Budget:** CHF 3,888

**Targeted Persons:** 220

**Assisted Persons:** 220

**Targeted Male:** 108

**Targeted Female:** 1,112

## Indicators

Title	Target	Actual
Number of volunteers insured	220	220
Number of supervision missions conducted by the local IFRC team	3	1

## Narrative description of achievements

Supervision and technical support were provided by the IFRC SDM office in Benin. Regular operational coordination meetings were maintained to refine detailed planning, monitor implementation, and ensure the technical alignment of planned activities. Close collaboration was also carried out with United Nations agencies for data sharing, referral mechanisms, and improvement of service delivery. In addition, continuous coordination was ensured with local authorities and national government agencies involved in managing the displacement situation in northern Benin.

## Lessons Learnt

The operation highlighted the importance of regular technical coordination with partners, including the IFRC, United Nations agencies, and local authorities, which strengthened the coherence and quality of the response.

## Challenges

Operational handover between the branch and headquarters, although improved, still experienced delays that required further adjustments.





**Budget:** CHF 42,411

**Targeted Persons:** 19

**Assisted Persons:** 20

**Targeted Male:** 12

**Targeted Female:** 8

## Indicators

Title	Target	Actual
Number of kick-off meetings organized	1	2
Number of coordination meetings with stakeholders	1	1
Number of NDRT members deployed by the NS at headquarters and in branches	3	3
Number of supervision missions carried out	4	4
Number of people deployed for this operation	6	6

## Narrative description of achievements

The operation began with a kick-off meeting aimed at preparing and planning all interventions with stakeholders at both local and national levels. Subsequently, coordination meetings were organized with various stakeholders, including municipal authorities and local NGOs, to ensure harmonized implementation of activities. Visibility items, including T-shirts, were produced to support the operation.

To strengthen field presence, two volunteers from the Branch Disaster Response Team (BDRT) were deployed alongside community volunteers, while one NDRT volunteer provided support at the national level. Missions by headquarters staff were also conducted to ensure overall monitoring of activities, complementing the supervision carried out by governance structures. Logistical needs were covered through the purchase of operational fuel and the provision of a vehicle based at the Natitingou branch.

At the end of the operation, a lessons-learned workshop was held to capture achievements, document lessons learned, and share experiences. In addition, several key staff members were partially mobilized with incentives, including the Disaster Management Coordinator, Security Focal Point, Accountant, Logistician, Response Manager, PMER specialist, CASH focal point, Executive Secretaries, and Health Manager.

## Lessons Learnt

The operation demonstrated the importance of early coordination between national and local levels to ensure smooth implementation of activities. The combined deployment of BDRT, NDRT, and community volunteers strengthened the effectiveness of interventions and facilitated monitoring. The lessons-learned workshop also helped consolidate achievements, harmonize practices, and improve management mechanisms for future operations.

## Challenges

Operational handover between the branch and headquarters, although improved, still experienced delays that required further adjustments.



# Financial Report

## DREF Operation

### FINAL FINANCIAL REPORT

#### MDRBJ022 - Benin - Population Movement

Operating Timeframe: 19 Jun 2025 to 31 Oct 2025

Selected Parameters			
Reporting Timeframe	2025/6-2026/1	Operation	MDRBJ022
Budget Timeframe	2025/6-10	Budget	APPROVED

Prepared on 20/Mar/2026

All figures are in Swiss Francs (CHF)

### I. Summary

<b>Opening Balance</b>	<b>0</b>
<b>Funds &amp; Other Income</b>	<b>215,172</b>
DREF Response Pillar	215,172
<b>Expenditure</b>	<b>-198,325</b>
<b>Closing Balance</b>	<b>16,848</b>

### II. Expenditure by planned operations / enabling approaches

Description	Budget	Expenditure	Variance
PO01 - Shelter and Basic Household Items	10,877	12,954	-2,077
PO02 - Livelihoods			0
PO03 - Multi-purpose Cash	108,517	97,286	11,231
PO04 - Health	14,781	17,387	-2,606
PO05 - Water, Sanitation & Hygiene	5,245	5,729	-485
PO06 - Protection, Gender and Inclusion	8,970	9,250	-281
PO07 - Education			0
PO08 - Migration	5,662	5,693	-31
PO09 - Risk Reduction, Climate Adaptation and Recovery	12,908	-2,822	15,730
PO10 - Community Engagement and Accountability	4,515	4,072	442
PO11 - Environmental Sustainability			0
<b>Planned Operations Total</b>	<b>171,474</b>	<b>149,549</b>	<b>21,924</b>
EA01 - Coordination and Partnerships	3,651	2,693	958
EA02 - Secretariat Services			0
EA03 - National Society Strengthening	40,047	46,082	-6,035
<b>Enabling Approaches Total</b>	<b>43,698</b>	<b>48,775</b>	<b>-5,077</b>
<b>Grand Total</b>	<b>215,172</b>	<b>198,325</b>	<b>16,847</b>

[Click here for the complete financial report](#)

## Please explain variances (if any)

Shelter and basic households' items: 19% over expenditure due to increase of unit cost of kits during implementation period.

Multi-purpose cash: 10% under expenditure as ICRC provided emergency hygiene items (EHI) during this period. CVA focused solely on food assistance as a result.

Health: 17% over expenditures due to needs that proved greater than anticipated during implementation and higher number of people



assisted by the activities compared to estimated targets.

Risk reduction, climate adaptation and recovery: Error in uploading of budget, no activity was specifically implemented under this area of focus.

Coordination and partnership: Underspending of 26% due to relocation of community meetings within localities themselves rather than central level to reduce costs.

NSD: 15% over expenditures due to greater needs in terms of capacity building of volunteers compared to original assessment.



# Contact Information

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

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