DREF Operation

The Liberia Multiple Floods -2026

Flood Impacted area in Monrovia , Liberia

Appeal: **MDRLR012**	Hazard: **Flood**	Country: **Liberia**	Type of DREF: **Response**
Crisis Category: Yellow	Event Onset: **Slow**	DREF Allocation: **CHF 462,836**	
Glide Number: **-**	People Affected: **76,150 people**	People Targeted: **6,125 people**	
Operation Start Date: **02-09-2026**	Operation Timeframe: **4 months**	Operation End Date: **31-01-2027**	DREF Published: **12-09-2026**

Targeted Regions: **Bong, Grand Bassa, Grand Cape Mount, Montserrado, Nimba**

Description of the Event

Date when the trigger was met

24-08-2026

What happened, where and when?

Between 19 and 26 August 2026, Liberia experienced a prolonged period of heavy rainfall that affected multiple parts of the country. Initial flooding and localized impacts were reported from 19 August onwards in several communities; however, the situation deteriorated significantly on 24 August 2026, when exceptionally intense rainfall caused widespread overflow of rivers, drainage systems, and waterways, resulting in severe flooding across multiple counties simultaneously.

While seasonal flooding occurs regularly in Liberia during the rainy season, the situation on 24 August represented a clear escalation beyond normal seasonal impacts. The volume and intensity of rainfall exceeded the capacity of existing drainage infrastructure and flood mitigation measures, causing extensive inundation of residential communities, major transportation routes, public facilities, and essential services. The floods rapidly expanded from localized incidents into a large-scale multi-county emergency affecting Montserrado, Grand Cape Mount, Grand Bassa, Bomi, Nimba, River Gee, Bong, and other areas across the country.

The significance of 24 August lies in the fact that this was the point at which the scale of humanitarian consequences exceeded the coping capacity of affected communities and local response mechanisms. Assessments conducted immediately after the flooding confirmed widespread destruction of homes, large-scale displacement, contamination of water sources, disruption of livelihoods, damage to public infrastructure, and growing public health risks. These impacts far exceeded those typically associated with routine seasonal flooding and generated humanitarian needs requiring external support.

According to preliminary reports, more than 76,000 people from over 15,200 households were affected, while more than 5,000 people were displaced from their homes. Thousands of houses, schools, health facilities, community structures, and livelihood assets were damaged or destroyed. In several locations, families lost food stocks, household belongings, productive assets, and sources of income, significantly reducing their ability to recover without assistance.

The event was further distinguished by its geographic scale. Unlike localized seasonal floods that affect specific communities, the impacts of the 24 August floods were observed simultaneously across several counties, placing considerable pressure on government authorities, local communities, and humanitarian actors. The widespread nature of the disaster stretched available response capacities and created substantial unmet needs across multiple sectors, including shelter, water and sanitation, health, household recovery, and protection.

Rapid assessments conducted by the Liberia National Red Cross Society (LNRCS), in coordination with the National Disaster Management Agency (NDMA) and local authorities, identified significant humanitarian needs requiring immediate intervention. Within the targeted operational areas alone, 1,225 households (6,125 people) were identified as requiring urgent assistance, including 350 households whose homes were destroyed or severely damaged and require shelter reconstruction support. Assessments also confirmed contaminated water sources, increased risks of waterborne diseases and malaria, loss of household assets and livelihoods, and growing psychosocial distress among affected populations.

Therefore, while rainfall began on 19 August and impacts accumulated over several days, 24 August 2026 is identified as the date of impact and escalation because it marked the point at which flooding reached exceptional levels, humanitarian needs surpassed local response capacities, and emergency intervention became necessary. The scale, severity, geographic spread, and humanitarian consequences observed after 24 August clearly distinguish this event from routine seasonal flooding and justify the activation of a DREF-supported response.

LNRC Conducting search and rescue

Impacted community

LNRC Volunteer supporting evacuation

Affected community

Scope and Scale

The flooding in Liberia has evolved into a major humanitarian emergency, affecting a wide geographic area and causing significant human, social, and economic impacts. Between 19 and 26 August 2026, prolonged and intense rainfall during the peak of the rainy season triggered widespread flash and riverine flooding across several counties, including Montserrado, Grand Cape Mount, Grand Bassa, Bomi, Nimba, River Gee, and Bong.

The scale of the disaster is substantial, with more than 76,000 people affected, particularly in Montserrado County, which hosts the capital city, Monrovia. The most severely affected communities include Doe Community, Neezoe, Battery Factory, New Matadi, Zayzay Community, Soul Clinic/Fish Market area, New Kemah Town, Fiama Weasay, Kissi Camp, Swamp City, and other densely populated low-lying settlements. Many of these communities are situated along the St. Paul River, Stockton Creek, Du River, and Mesurado Wetlands and remain highly exposed to flooding due to poor drainage systems, inadequate infrastructure, and environmental degradation.

The impact extends beyond displacement and shelter damage. Floodwaters inundated homes, destroyed household assets, contaminated water sources, and damaged critical infrastructure, including roads, bridges, drainage systems, schools, health facilities, and local markets. Livelihoods have been severely disrupted, particularly among households dependent on agriculture, petty trading, fishing, and daily wage labour, increasing the risk of food insecurity and prolonged economic hardship.

The flooding has also generated significant public health concerns. Contaminated water sources, stagnant floodwaters, and deteriorated sanitation conditions have increased the risk of waterborne and vector-borne diseases. Access to safe drinking water, sanitation facilities, healthcare services, and hygiene supplies remains a critical concern in the affected areas.

The crisis disproportionately affects vulnerable population groups, including children, older persons, persons with disabilities, pregnant and lactating women, people with chronic illnesses, and female-headed households. These groups face heightened barriers in accessing essential services and are at increased risk of adverse health, protection, and socioeconomic impacts.

While the flooding affected several counties across Liberia, the scale of needs exceeds the resources available under this DREF operation. Consequently, LNRCS and NDMA conducted a prioritization exercise to identify locations with the greatest humanitarian needs and the largest gaps in assistance. Montserrado, Nimba, Bong, Grand Cape Mount, and Grand Bassa were prioritized based on the severity of

impacts, concentration of affected households, extent of shelter and livelihood losses, contamination of water sources, vulnerability levels, and the absence of sufficient confirmed assistance from other actors. These counties were assessed as having the highest levels of unmet humanitarian needs requiring immediate intervention.

The National Disaster Management Agency (NDMA) had previously warned of elevated flood risks due to forecasts of exceptionally high rainfall and humidity levels. However, the scale, geographic spread, and humanitarian consequences observed during this event exceeded those normally experienced during seasonal flooding and overwhelmed local coping capacities. Given the magnitude of humanitarian needs and the limited assistance currently available, the Government of Liberia has issued an urgent appeal for support. Immediate priorities include household recovery assistance, shelter support, safe water access, health interventions, protection services, and support for early recovery.

Source Name	Source Link
1. Liberia Meteorological Service	https://meteoliberia.com/product/im
2. ELBC Radio (National/State Broadcaster)	https://www.facebook.com/share/v/1DsPWKm847/

Previous Operations

Has a similar event affected the same area(s) in the last 3 years?	**Yes**
Did it affect the same population group?	**No**
Did the National Society respond?	**-**
Did the National Society request funding form DREF for that event(s)	**-**
If yes, please specify which operation	-

If you have answered yes to all questions above, justify why the use of DREF for a recurrent event, or how this event should not be considered recurrent:

-

Lessons learned:

The Liberian National Red Cross Society has carried out several flood-related DREF operations over the past decade, including MDRLR002 (2016, Margibi), MDRLR004 (2017, Montserrado and Margibi), MDRLR007 (2023, Montserrado/Monrovia, Grand Cape Mount, and Bong). Each of these operations responded to flooding in overlapping but shifting combinations of Montserrado (including Monrovia) and neighboring counties. Drawing on the experience gained across these previous flood responses, the National Society has built key lessons into the design and delivery of the current operation to strengthen its effectiveness, accountability, and overall impact for flood-affected households.

1. The past operations showed that carrying out market assessments ahead of cash distributions helped set appropriate transfer values and confirmed that local markets could handle the added demand without major disruption. Building on this, the current operation will continue to draw on market assessment data to shape multipurpose cash assistance and livelihood recovery support, so that transfer values remain adequate and reflect actual market conditions.

2. The past operations showed that involving community representatives and local committees in identifying and validating beneficiaries led to greater transparency, fewer complaints, and stronger community confidence in the response. This operation will sustain close community engagement across targeting, implementation, and monitoring, and will ensure beneficiary selection criteria are clearly explained and understood by affected communities.

3. The past flood response demonstrated that cash assistance allowed households to address their most pressing needs based on their own circumstances, resulting in strong beneficiary satisfaction and appropriate use of funds. Given the range of needs created by the current flooding and the fact that local markets remain functional, multipurpose cash assistance has again been chosen as a core response tool, allowing affected households to direct their own recovery with dignity.

4. Previous operations showed that thorough training of volunteers in cash programming, first aid, psychosocial support, safeguarding, accountability, and community engagement led to noticeably better service delivery and performance. In line with this, the current operation includes refresher training and capacity building for staff and volunteers to improve implementation, monitoring, and community outreach.

5. Earlier operations found that regular monitoring, post-distribution checks, and real-time feedback allowed challenges to be caught early and adjustments made quickly. Communication difficulties in hard-to-reach areas also underscored the need for multiple channels and locally appropriate messaging. This operation will therefore strengthen Community Engagement and Accountability (CEA) mechanisms and feedback channels, and maintain regular monitoring to keep the response relevant, accountable, and responsive to communities' changing needs.

These lessons have directly shaped the design of the current DREF operation and will support more effective targeting, stronger accountability, better community acceptance, and improved humanitarian outcomes for flood-affected households.

Did you complete the Child Safeguarding Risk Analysis in previous operations, what was risk level?	**Yes**

Current National Society Actions

Start date of National Society actions

24-08-2026

Health	LNRCS has mobilized volunteers trained in first aid, Infection Prevention and Control (IPC), and Community-Based Health and First Aid (CBHFA) to support people affected by the ongoing floods across Montserrado and other affected coastal counties, addressing immediate physical health needs while providing Mental Health and Psychosocial Support (MHPSS) to individuals and families affected by loss, displacement, and trauma. Volunteers have conducted outreach in affected communities, delivering psychological first aid, basic emotional support, and referrals for individuals requiring additional care, while also engaging community members on emergency health, safety,

	and resilience awareness to reduce exposure to flood-related health risks and strengthen preparedness as rains continue.
Water, Sanitation And Hygiene	DM/WASH volunteers are part of the ongoing assessment. They are assessing critical WASH issues, including the functionality and contamination status of water points, damage to sanitation infrastructure such as latrines and drainage systems, household hygiene practices and access to hygiene items, and the presence of standing floodwater that could serve as a breeding ground for disease. Drawing on capacities built through previous flood DREF operations, volunteers are cross-referencing these findings with community-reported health concerns to identify priority needs and inform the overall response strategy. Initial findings indicate that several water sources, including community hand pumps and boreholes, have been contaminated by floodwaters, while damaged or overflowing latrines are heightening the risk of open defecation and further contamination together raising the risk of waterborne disease among affected populations.
Coordination	Since the onset of the floods, LNRCS has been actively coordinating within the Red Cross Red Crescent Movement and with national and local authorities to ensure a timely, complementary, and well-coordinated humanitarian response. As an auxiliary to the public authorities in the humanitarian field, LNRCS maintains strong working relationships with government institutions at both national and county levels, particularly the National Disaster Management Agency (NDMA), the Liberia Meteorological Service (LMS), the Liberia Hydrological Service (LHS), local government structures, sector ministries, and community leadership structures. Coordination with the LMS and LHS in particular allows LNRCS to track rainfall forecasts and river and water-level trends, helping the response anticipate further flood risk rather than only react to it. LNRCS has been actively participating in emergency coordination meetings, assessment missions, and technical working groups convened by NDMA and other stakeholders. At the field level, LNRCS response teams continue to work closely with government agencies, especially the Ministry of Local Government, Movement partners, UN agencies, community leaders, and other humanitarian actors to support needs assessments, response planning, and service delivery. This coordination has strengthened situational awareness, enabled the timely identification of priority needs, and supported evidence-based decision-making throughout the response. As the situation continues to evolve due to ongoing rainfall and the potential for additional flooding, LNRCS will maintain active engagement in all relevant coordination mechanisms — including regular NDMA coordination meetings and technical exchanges with the LMS and LHS — to ensure effective collaboration, resource mobilization, information management, and a coherent response aligned with national priorities and the needs of affected communities.
National Society Readiness	LNRCS has a strong presence across Liberia's 15 counties and extensive community networks that enable it to rapidly access and support vulnerable populations, including those living in hard-to-reach and disaster-prone areas. As the country's largest humanitarian organization and an auxiliary to the Government in the humanitarian field, LNRCS maintains trusted relationships with communities, local authorities, and national institutions, allowing for effective preparedness, early action, emergency response, and recovery interventions. The National Society has well-structured Emergency Response Teams (ERTs) at all chapters, which are placed on alert during emergencies to ensure rapid mobilization and initial response at the local level. The NS has substantial experience responding to floods, epidemics, population movements, and other emergencies, supported by strong partnerships within the Red Cross and Red Crescent Movement, including the International Federation of Red Cross and Red Crescent Societies (IFRC), the International Committee of the Red Cross (ICRC), and Partner National Societies. It has conducted the Preparedness for Effective Response (PER) exercise in 2024 and is actively implementing the key recommendations

	arising from that process to strengthen institutional readiness, coordination mechanisms, and emergency planning. LNRCS continues to invest in building specialized emergency response capacity. In 2025, 27 personnel were trained at both headquarters and field levels in Managing Operations, using IFRC standards and training modules, in collaboration with IFRC Geneva. In 2026, the National Society completed a full orientation in DREF Evolution and the introductory Emergency Needs Assessment and Planning (ENAP) courses, facilitated by IFRC Geneva together with the Freetown Cluster. LNRCS's surge capacity includes 3 Field Assessment and Coordination Team (FACT)-trained personnel and 2 Regional Disaster Response Team (RDRT) members who have been deployed on prior operations, alongside a broader base of National Disaster Response Team (NDRT) members trained in emergency management and operations management. The Head of Programs has been trained through the IFRC Operations Management Mentoring Program, further strengthening leadership capacity for complex emergency operations. Additional inductions in core IFRC operations management competencies, including Emergency Response Framework orientation, Movement coordination mechanisms, financial and logistics standards for emergency operations, and Community Engagement and Accountability (CEA), further reinforce the National Society's readiness to lead and scale up response. Through its network of chapters across all 15 counties, including a strong operational presence in the affected areas, LNRCS is well positioned to lead and scale up emergency operations in coordination with government authorities and humanitarian partners. The Society's trained personnel, volunteer base, and community reach, combined with its investments in PER implementation and IFRC-standard operations management capacity, provide a solid foundation for delivering timely, effective, and accountable humanitarian assistance to flood-affected populations, while supporting preparedness measures in communities at risk of additional flooding during the ongoing rainy season. The LNRCS has set up a PSS Call Center and has integrated it with an Emergency Operations Centre (EOC) with trained personnel, including staff and volunteers
Assessment	In coordination with the National Disaster Management Agency (NDMA), the Liberian National Red Cross Society (LNRCS) is undertaking a multi-sectoral assessment in flood-affected communities across Montserrado and other affected counties to determine the extent of the humanitarian impact and identify priority needs across shelter, health, WASH, livelihoods, and protection. The assessment is also examining the effects of continued rainfall and the risks facing communities vulnerable to further flooding. To support immediate response decision-making, LNRCS rapidly mobilized volunteers from affected communities, coordinated by National Disaster Response Team (NDRT) members and chapter-level Emergency Response Teams (ERTs), to conduct rapid needs assessments and collect initial data on people affected and flood impact. This enabled timely identification of affected households, immediate needs, and emerging risks in the hardest-hit locations. Preliminary findings, complemented by situation reports and joint field verification with NDMA, confirmed significant damage to homes, community infrastructure, water sources, and household assets, along with displacement and heightened public health concerns. This has guided the prioritization of response activities and targeting of the most vulnerable households. As rainfall continues across Montserrado and other counties, assessments remain ongoing to track evolving needs, identify newly affected communities, and support evidence-based planning. The comprehensive multi-sectoral assessment will provide a clearer picture of the disaster's overall scale and guide the adjustment and expansion of the response as required.

IFRC Network Actions Related To The Current Event

Secretariat	The International Federation of Red Cross and Red Crescent Societies (IFRC) maintains a Country Delegation in Freetown, providing strategic, technical, and operational support to the Liberia national Red Cross Society (LNRCS) and serving as a key partner in strengthening preparedness, response, and organizational development capacities. The delegation forms part of the IFRC's broader support architecture in the region and comprises experienced technical personnel specializing in disaster management, National Society Development, Planning, Monitoring, Evaluation, Accountability and Learning (PMER), finance, logistics, resource mobilization, and emergency operations. Since the onset of the floods, the IFRC Country Cluster Delegation in Freetown has worked closely with LNRCS leadership and operational teams to support emergency response planning, needs analysis, operational strategy development, and coordination within the Red Cross Red Crescent Movement. Through this close collaboration, the IFRC has supported the National Society in defining priority intervention areas, strengthening response coordination mechanisms, and ensuring alignment of the operation with identified humanitarian needs and national response priorities. Throughout the operational planning phase, the IFRC will provide technical support. This includes assistance in initial data collection through rapid assessment, planning, and designing an appropriate response operation using IFRC planning standards and guidelines. The IFRC will also support quality assurance and accountability processes to ensure that assistance reaches the most vulnerable populations in a timely, efficient, and accountable manner. As part of its Secretariat services, the IFRC will provide dedicated support in PMER, finance, administration, logistics, security, procurement, and National Society Development (NSD). The IFRC technical team will work closely with LNRCS operations team to monitor implementation progress, strengthen data collection and analysis, support donor reporting requirements, and ensure sound financial management and operational accountability throughout the response. The IFRC will also facilitate coordination within the Movement, ensuring complementarity between the efforts of the LNRCS, the International Committee of the Red Cross (ICRC), the Swedish Red Cross (SRC), and other Partner National Societies (PNS), while supporting engagement with government authorities, humanitarian actors, donors, and other stakeholders. Through its global network, the IFRC will help mobilize technical expertise, operational support, and resources to address emerging needs and strengthen the overall effectiveness of the response. Under this DREF operation, the IFRC Country Cluster Delegation in Freetown will continue to provide sustained accompaniment to the LNRCS throughout implementation. An operations focal point will support overall response coordination, while technical specialists from PMER, finance, logistics, communications, and disaster management functions will provide ongoing remote and in-country support as required. This support will help ensure that the operation remains responsive to evolving needs, particularly given the continued rainfall across Sierra Leone and the risk of further flooding in additional communities during the ongoing rainy season.
Participating National Societies	The LNRCS maintains close coordination with its Partner National Societies (PNSs), particularly the Swedish Red Cross (the only in-country PNS), which supports ongoing programmes in community development, anticipatory action, National Society Development (NSD), resource mobilization, youth and volunteer management, climate and environment, and NS Preparedness for Effective Response (PER), including

	readiness actions. LNRCS mobilized USD$10,000 through the Initial Response Fund (IRF), an in-country funding mechanism supported by the Swedish Red Cross (SRC). This rapid injection of resources enabled LNRCS teams to conduct timely assessments and initiate early response engagements on the ground, laying the groundwork for a larger-scale intervention through the IFRC's Disaster Response Emergency Fund (DREF). This partnership reflects the strength of the Red Cross Red Crescent Movement's layered approach to disaster response: fast, flexible, in-country financing that closes the critical gap between the first signs of crisis and the arrival of larger-scale support, ensuring no time is lost when communities need it most. LNRCS shared the Situation Reports that included rapid assessment findings with partners, including the SRC, to ensure they are informed of the evolving humanitarian situation, identified needs, and planned response actions. This information-sharing supports Movement-wide situational awareness and promotes coordinated engagement among partners. LNRCS will continue to work closely with the RCRC Movement and Partner National Societies to ensure complementarity of efforts and to explore opportunities for technical and resource support should the humanitarian situation worsen, or recovery needs exceed the scope of the current DREF operation.

ICRC Actions Related To The Current Event

The International Committee of the Red Cross (ICRC) does not maintain a permanent presence in Liberia and provides support through its regional delegation in Dakar, Senegal. The ICRC maintains regular dialogue and coordination with the Liberia National Red Cross Society (LNRCS) and continues to support National Society capacity strengthening in areas including International Humanitarian Law (IHL), Protecting Family Links (PFL), Emergency Preparedness and Response (EPR), communications, and Movement coordination. At the time of submitting this DREF request, no specific operational or financial contribution from the ICRC had been confirmed in support of the flood response operation.

Other Actors Actions Related To The Current Event

Government has requested international assistance	Yes
National authorities	The National Disaster Management Agency (NDMA), as the lead government agency for disaster response, has coordinated the national response since the onset of the floods. Working alongside county authorities, sector ministries, and humanitarian partners, NDMA led rapid assessments, consolidated impact data, coordinated information management, and facilitated response planning across affected counties. Government efforts have primarily focused on assessment, coordination, emergency monitoring, public information dissemination, search and rescue support, and verification of casualty and damage reports. The Ministry of Health has continued routine surveillance through the Integrated Disease Surveillance and Response (IDSR) system and is monitoring priority public health risks, including cholera, acute diarrhoeal diseases, malaria, and other epidemic-prone conditions in affected areas. Existing health facilities remain operational where accessible and continue to provide routine health services. Government protection

	services, including child protection, gender-based violence referral services, psychosocial support services, and social welfare mechanisms, also remain operational and available for referral of protection cases requiring specialized assistance. At the time of the DREF application, response efforts by government institutions and humanitarian partners were primarily focused on assessments, coordination, surveillance, information sharing, and resource mobilization. While several partners had expressed interest in supporting affected populations, no confirmed large-scale interventions had been reported within the targeted operational areas for multipurpose cash assistance, household recovery support, shelter reconstruction, water source rehabilitation, or community-based health and psychosocial support activities. Consequently, substantial humanitarian needs remained unmet.' Assessment findings identified significant gaps in household recovery support following the loss of food stocks, household assets, livelihoods, and income sources. No confirmed partner support was available for large-scale multipurpose cash assistance despite market assessments confirming that local markets remained functional and cash assistance was the most appropriate modality to help affected households meet their immediate and early recovery needs. Similarly, no confirmed assistance had been identified for the 350 households whose homes had been destroyed or severely damaged and require support to begin shelter reconstruction and recovery. In the WASH sector, assessments confirmed contamination and damage to community water sources, reducing access to safe water and increasing public health risks. At the time of application development, no partner had confirmed support for the assessment, rehabilitation, disinfection, and water quality testing of affected water points within the targeted communities. In the health sector, while disease surveillance activities were ongoing through government systems, gaps remained in community-based health promotion, epidemic prevention and control activities, psychosocial support, and risk communication interventions required to reduce health risks among affected populations. The proposed DREF operation has therefore been designed to address clearly identified humanitarian gaps by focusing on multipurpose cash assistance, shelter recovery support, rehabilitation of affected water sources, community-based health interventions, and integrated PGI, CEA, and preparedness activities. The operation complements government-led coordination and surveillance efforts while providing direct assistance in sectors where no sufficient support has been confirmed. Target locations, beneficiary lists, and intervention plans will continue to be validated through NDMA-led coordination mechanisms and local authorities throughout implementation to ensure complementarity, maximize coverage, and avoid duplication of assistance. Through this approach, the Liberia National Red Cross Society will address priority unmet needs among 1,225 vulnerable households (6,125 people) that would otherwise remain underserved by the ongoing response.
UN or other actors	-

Are there major coordination mechanism in place?

A National Inter-Pillar Coordination Mechanism, led by the National Disaster Management Agency (NDMA), has been activated to coordinate the flood response. The platform brings together government ministries, agencies, humanitarian organizations, the LNRCS and other response partners to facilitate information sharing, joint planning, resource mobilization, and operational coordination.

At the national level, regular coordination meetings are convened by the NDMA to provide situational updates, review assessment findings, identify priority needs, and coordinate response interventions. Similar coordination structures are operational at district and community levels, involving local authorities, community leaders, and frontline responders to support information flow and response planning.

As an auxiliary to the public authorities in the humanitarian field, the LNRCS is an active participant in these coordination mechanisms, contributing assessment data, operational updates, and technical inputs to support evidence-based decision-making. The National Society is also working closely with the NDMA and other partners to support joint assessments, identify vulnerable households, and ensure that response efforts are complementary and do not duplicate assistance.

At present, no major coordination gaps have been identified. However, the response remains heavily focused on conducting detailed assessments as reports of flood impacts continue to emerge from additional communities and districts. Continued coordination will be essential to monitor evolving humanitarian needs, address emerging gaps, and ensure a timely and coordinated response throughout the ongoing rainy season.

Needs (Gaps) Identified

Shelter Housing And Settlements

Needs and Gaps Analysis

The floods of 24 August 2026 caused widespread destruction and severe damage to housing across the affected counties, creating significant shelter needs among flood-affected populations. Rapid assessments conducted by the Liberia National Red Cross Society (LNRCS), in collaboration with local authorities and community representatives, identified 350 households whose homes were destroyed or sustained severe structural damage, rendering them unsafe for habitation and exposing affected families to prolonged displacement and deteriorating living conditions.

The destruction of shelter has forced many affected families to seek temporary accommodation with relatives, friends, and host families, while others continue to reside in partially damaged structures that no longer provide adequate protection from rain, wind, and other environmental hazards. These conditions expose affected households to increased health risks, protection concerns, overcrowding, and heightened vulnerability, particularly among women, children, older persons, persons with disabilities, and other vulnerable groups.

Assessments confirmed that affected households have lost critical shelter components including roofing materials, timber structures, doors, windows, and other construction materials. In addition, many households reported the loss of essential household belongings and productive assets, limiting their ability to mobilize resources for shelter repairs. Community consultations consistently identified shelter recovery as one of the highest priorities for affected households, alongside food security and household recovery support.

Market assessments further confirmed that local markets remain functional and that basic construction materials, including roofing sheets, timber, nails, and other shelter items, are available within accessible markets. However, the majority of affected households lack the financial capacity to procure these materials due to the loss of livelihoods, savings, household assets, and income-generating opportunities resulting from the floods. The primary barrier to shelter recovery is therefore a lack of purchasing power rather than market availability.

At the time of the DREF application, no government agency or humanitarian partner had confirmed shelter reconstruction or repair assistance at a scale sufficient to address the needs of affected households within the targeted communities. Existing efforts remained focused primarily on assessments, coordination, and life-saving response activities, leaving a significant gap in support for households whose homes require repair or reconstruction.

Without targeted assistance, affected households are likely to remain displaced or continue living in unsafe and damaged shelters for extended periods, increasing exposure to health risks, protection concerns, and future weather-related hazards. The identified gaps

justify targeted shelter recovery support for households whose homes have been destroyed or severely damaged to facilitate the restoration of safe, dignified, and habitable living conditions.

Multi purpose cash grants

The floods have left many affected households with multiple and overlapping urgent needs that cannot be adequately addressed through a single-sector intervention. The loss of homes, household assets, food stocks, clothing, livelihood resources, and income-generating activities has significantly reduced the capacity of affected families to meet their immediate basic needs. Many households are now facing competing priorities, including the purchase of food, drinking water, medicines, hygiene supplies, clothing, transportation, temporary shelter, and materials for minor household repairs.

Assessments indicate that the needs of affected households vary considerably depending on the extent of damage experienced, household composition, displacement status, and livelihood losses. Vulnerable groups, including female-headed households, older persons, persons with disabilities, households caring for chronically ill family members, and families with young children, face particularly high levels of financial stress as they struggle to cover essential expenses while coping with the aftermath of the floods.

The flooding has also resulted in the temporary displacement of many households, creating additional expenditures related to accommodation, transportation, healthcare, and replacement of essential household items. At the same time, the loss of income and livelihood opportunities has reduced household purchasing power, leaving many families unable to meet their priority needs without external support. As savings are depleted and recovery opportunities remain limited during the ongoing rainy season, affected populations are increasingly vulnerable to negative coping strategies, including reducing food consumption, accumulating debt, and selling productive assets.

Market observations conducted in affected areas indicate that local markets remain functional and accessible, with essential commodities available despite localized disruptions. However, the main constraint facing affected households is a lack of financial resources to purchase these goods. Consequently, a significant gap exists between the availability of basic commodities in local markets and the ability of affected households to access them.

Given the diversity of needs, varying levels of impact, and the continued uncertainty posed by ongoing rainfall and the risk of further flooding, affected households require flexible assistance that enables them to prioritize their most urgent needs according to their individual circumstances. Multipurpose cash assistance has therefore been identified as a critical humanitarian need to restore access to basic goods and services, support household dignity and choice, reduce reliance on negative coping mechanisms, and contribute to the early recovery of flood-affected populations.

Health

The floods have created significant and multifaceted health risks for affected populations, both immediately and in the aftermath of the disaster. Loss of life, displacement, destruction of homes, and the loss of livelihoods have exposed many individuals and families to considerable psychological stress and emotional trauma. This is particularly evident among bereaved families who lost relatives during the flooding, as well as households that have lost homes, assets, and sources of income. Children, older persons, persons with disabilities, pregnant women, and other vulnerable groups are especially at risk of experiencing prolonged psychosocial distress and may require targeted psychosocial support to help restore resilience and wellbeing.

The flooding has also significantly increased public health risks due to contamination of water sources and deterioration of environmental sanitation conditions in affected communities. Rapid assessments confirmed that at least 30 community boreholes have been contaminated, reducing access to safe drinking water and increasing the risk of waterborne diseases such as acute watery diarrhoea, cholera, typhoid fever, and other gastrointestinal infections. These risks are further heightened by continued rainfall, stagnant floodwaters, temporary displacement arrangements, overcrowding in host communities, and limited access to safe water, sanitation, and hygiene services.

In addition to waterborne disease risks, the disruption caused by the floods has reduced access to basic health services and increased the need for community-based health interventions. Many affected communities require strengthened health promotion, disease prevention messaging, community surveillance, and first aid support to address injuries, reduce health risks, and facilitate early identification and referral of illness. Community awareness activities are particularly important to promote safe water handling, household hygiene practices, sanitation behaviours, and health-seeking practices in order to prevent outbreaks.

The flood conditions have also heightened exposure to vector-borne diseases, particularly malaria, as stagnant water creates favourable

breeding conditions for mosquitoes. Pregnant women, children under five years, older persons, and individuals with pre-existing health conditions face increased vulnerability. While malaria prevention measures, including the distribution of insecticide-treated mosquito nets and community awareness activities, remain important, these interventions should be implemented as part of a broader public health response that addresses the wider health risks generated by the floods.

Although no major disease outbreak has been reported to date, the evolving situation requires continued community-based surveillance, health education, risk communication, psychosocial support, first aid services, and early warning mechanisms to prevent and rapidly respond to potential disease outbreaks.

The combined effects of psychosocial distress, increased risk of waterborne and vector-borne diseases, disrupted living conditions, contamination of water sources, and reduced access to basic services underscore the need for an integrated health response focused on psychosocial support, community-based health and first aid, epidemic prevention and control, health promotion, and disease surveillance to protect affected populations and prevent further deterioration of health outcomes.

Water, Sanitation And Hygiene

The floods have significantly affected access to safe water, sanitation, and hygiene services in the most affected communities, creating conditions conducive to disease outbreaks and further deterioration of public health. Preliminary rapid assessments confirmed that at least 18 community boreholes and water points serving affected populations had been contaminated or damaged by floodwaters, debris, and surface runoff, severely limiting access to safe drinking water for affected households. Subsequent verification conducted jointly by the Liberia National Red Cross Society (LNRCS), local authorities, and community representatives identified additional affected water sources requiring water quality testing, disinfection, and rehabilitation. As a result, the operation targets 30 water sources to ensure comprehensive restoration of safe water access across the affected communities and to address both confirmed contamination and additional rehabilitation needs identified during field assessments.

As a result, many families are relying on potentially unsafe water sources for drinking, cooking, and domestic use, increasing the risk of waterborne diseases such as diarrhoea, cholera, typhoid, and other acute gastrointestinal illnesses. The risk is particularly high among children under five, older persons, pregnant and lactating women, persons with disabilities, and individuals with underlying health conditions, who are often the most vulnerable to disease outbreaks and related complications.

The flooding has also damaged household hygiene conditions through the loss of water storage containers, hygiene supplies, and sanitation materials. Many affected households reported the loss of essential items such as buckets, soap, and other hygiene commodities, reducing their ability to safely store water and maintain adequate hygiene practices. In some locations, accumulated debris, stagnant water, and poor waste disposal conditions have further increased environmental health risks and created favourable conditions for disease transmission.

The situation remains concerning as continued rainfall across affected areas of Liberia increases the likelihood of additional flooding, further contamination of water sources, and worsening sanitation conditions. Communities already affected by the floods remain exposed to recurring WASH-related risks, while other vulnerable communities may face similar challenges should the rains persist.

Assessments further identified limited community capacity to undertake preventive environmental sanitation activities, while existing community-based disaster management structures require additional strengthening to support preparedness, risk reduction, and response efforts. There is also a critical need for comprehensive assessment and monitoring of affected water sources to determine contamination levels, identify rehabilitation requirements, and ensure that affected populations regain access to safe and reliable water supplies. In addition, many households require hygiene promotion support and essential hygiene items to reduce exposure to disease risks associated with unsafe water, poor sanitation conditions, and overcrowded living arrangements.

Without timely intervention, the combination of contaminated water sources, inadequate hygiene conditions, disrupted sanitation services, and continued rainfall could lead to a significant increase in public health risks and disease outbreaks among affected populations. The identified gaps therefore underscore the urgent need for water quality assessment and testing, rehabilitation and disinfection of affected water sources, hygiene support, environmental sanitation activities, community awareness and behaviour change interventions, and community-based prevention measures to protect the health and well-being of affected households.

Protection, Gender And Inclusion

The floods have disproportionately affected vulnerable groups, including women, children, older persons, persons with disabilities, pregnant and lactating women, and female-headed households, who face heightened challenges in accessing assistance and recovering

from the impacts of the disaster. Assessment findings confirmed widespread destruction and damage to homes, forcing many affected families to seek temporary accommodation with relatives, friends, and host families while others remain in partially damaged houses awaiting support for recovery and reconstruction.

Community consultations conducted during the assessment identified concerns relating to overcrowding within temporary living arrangements, reduced privacy, increased dependency on host families, and the additional challenges faced by individuals with specific needs. Households hosting displaced family members reported increased pressure on already limited resources, while vulnerable individuals highlighted concerns related to safe access to basic services, information, healthcare, water sources, and humanitarian assistance.

The assessments further identified that older persons, persons with disabilities, pregnant women, and individuals with reduced mobility may face greater barriers in accessing assistance due to mobility constraints, communication barriers, and reduced access to transportation. Without deliberate inclusion measures, these groups risk being unintentionally excluded from registration processes, information dissemination, distributions, and community engagement activities.

The disaster has also caused significant emotional and psychological distress among affected populations. Families have experienced loss of homes, household assets, livelihoods, and personal belongings, while some communities reported deaths and injuries associated with the flooding. These circumstances have increased stress, anxiety, and uncertainty regarding recovery, particularly among vulnerable individuals and households facing the greatest losses.

Although no specific incidents of gender-based violence, sexual exploitation and abuse, or other serious protection violations were reported during the rapid assessment, the combination of displacement, overcrowded living conditions, loss of livelihoods, and increased dependency can heighten protection risks during emergencies. These risks underscore the importance of ensuring that humanitarian assistance is delivered in a safe, inclusive, accountable, and dignified manner and that affected populations are aware of available reporting and referral pathways.

The identified gaps therefore highlight the need to mainstream Protection, Gender and Inclusion across all sectors of the response. Priority actions include ensuring equitable access to assistance, applying vulnerability-based targeting, supporting the participation of women, persons with disabilities, older persons, and other at-risk groups in decision-making processes, strengthening safeguarding and Prevention of Sexual Exploitation and Abuse (PSEA) measures, training volunteers and staff on PGI principles, and establishing accessible community feedback and referral mechanisms. These measures will help ensure that humanitarian assistance reaches those most in need while minimizing exclusion and protection risks throughout the operation.

This version is stronger because it links PGI directly to actual assessment findings (damaged homes, temporary accommodation, overcrowding, barriers to accessing aid, psychosocial stress) rather than making unsupported claims about protection risks or safe-space needs. It also aligns much better with the PGI activities currently included in the operation.

Community Engagement And Accountability

The flooding emergency has created an urgent need for timely, accurate, and accessible information for affected populations. Rapid assessments and community consultations conducted by the Liberia National Red Cross Society (LNRCS) identified significant information needs among affected households regarding available assistance, beneficiary selection criteria, registration processes, distribution arrangements, transfer values, and timelines for support. As Multipurpose Cash Assistance (MPCA) represents the primary intervention of the operation, ensuring that communities clearly understand the objectives, eligibility criteria, distribution process, and use of cash assistance is critical to maintaining transparency, trust, and accountability.

Affected communities also require reliable information related to the operation's WASH activities, including water source rehabilitation, water quality testing, household water treatment options, safe water handling practices, hygiene promotion activities, and disease prevention measures. Without clear and consistent communication, there is a risk of misinformation, misunderstandings regarding assistance packages, low uptake of recommended WASH practices, and reduced effectiveness of the intervention.

Assessments further highlighted the importance of establishing accessible and trusted mechanisms through which community members can ask questions, seek clarification, provide feedback, raise complaints, and report concerns related to assistance. This is particularly important for vulnerable groups, including women, older persons, persons with disabilities, and female-headed households, who may face barriers in accessing information and humanitarian services. Ensuring that these groups can meaningfully participate in decision-making processes is essential to delivering an inclusive and responsive response.

The scale of the operation, covering 1,225 households across multiple counties, further underscores the need for strong accountability mechanisms to ensure that community perspectives continuously inform implementation. Feedback from affected populations will be

critical for identifying emerging issues, addressing complaints, validating targeting processes, monitoring satisfaction with assistance, and adapting interventions where necessary.

While continued rainfall may result in additional flooding and evolving risks, the primary community engagement need identified through assessments relates to ensuring affected populations have access to accurate information about humanitarian assistance and meaningful opportunities to influence the response. Strengthening accountability to affected populations will therefore be essential to ensuring that MPCA, shelter recovery, health, and WASH interventions remain relevant, transparent, inclusive, and responsive to the priorities and concerns of affected communities throughout the operation.

The identified gaps highlight the need for comprehensive Community Engagement and Accountability activities, including regular community consultations, information dissemination through accessible communication channels, dedicated feedback and complaints mechanisms, beneficiary sensitization, and systematic analysis and use of community feedback to improve programme quality and accountability. These measures will support equitable access to assistance, strengthen trust between communities and responders, and improve the effectiveness of the operation's primary MPCA and WASH interventions.

Any identified gaps/limitations in the assessment

While rapid assessments conducted by the LNRCS and the National Disaster Management Agency (NDMA) have provided critical information to guide the initial response, several gaps and limitations remain due to the evolving nature of the emergency and the continued rainfall affecting Monrovia and hugely other counties affected.

Assessment coverage remains incomplete. The rapid assessment focused primarily on the most severely affected communities in Monrovia, its environs, and parts of the other counties. However, continuous rainfall since the flooding event has resulted in additional reports of flooding and localized impacts in other communities. As a result, the full geographical extent of the disaster and the total number of affected people are still being verified.

Significant humanitarian needs remain unmet across multiple sectors. Preliminary findings indicate urgent gaps in livelihoods and basic needs, shelter, health, water, sanitation and hygiene (WASH), protection, and disaster risk reduction. Many affected households continue to lack adequate resources to meet basic needs, restore livelihoods, replace lost household assets, access safe water, and recover from the impact of the floods.

Resource constraints continue to limit response coverage. Although assessments have identified substantial humanitarian needs, available resources remain insufficient relative to the scale of the impact. At the time of assessment, no large-scale relief assistance had yet been mobilized to address the full range of identified needs, leaving many affected households without support. Additional funding and resources are required to ensure timely assistance and prevent further deterioration of living conditions.

Continued rainfall presents operational challenges. Persistent rainfall across Liberia continues to affect access to some communities,

complicate assessment efforts, and increase the likelihood of new incidents. The evolving situation requires continuous monitoring and reassessment as additional households and communities may become affected during the ongoing rainy season.

The specific needs of vulnerable groups may not yet be fully captured. While initial assessments identified vulnerable populations, including children, older persons, persons with disabilities, pregnant and lactating women, female-headed households, and displaced families, more detailed analysis is required to fully understand their protection concerns, recovery priorities, and barriers to accessing assistance. Additional sector-specific assessments will be necessary to ensure that response interventions adequately address their needs.

Recovery and resilience needs are likely underrepresented in current assessment findings. The immediate focus of rapid assessments has been on life-saving and urgent humanitarian needs. Further analysis is required to quantify longer-term recovery requirements, including livelihood restoration, rehabilitation of community infrastructure, restoration of water systems, and community-based disaster risk reduction measures.

Given the ongoing rainfall, the possibility of additional flooding, and the dynamic humanitarian situation, assessment activities will continue to be updated to ensure response planning remains evidence-based and responsive to emerging needs. These limitations highlight the importance of flexible emergency funding and ongoing monitoring to address both current and evolving humanitarian needs.

Operational Strategy

Overall objective of the operation

The overall objective of the planned response is to mitigate the humanitarian impact of the August 2026 floods on 1,225 flood-affected households in Liberia through timely, targeted, and integrated assistance that addresses immediate needs and supports in shelter and basic household items, water, sanitation and hygiene (WASH), health, Community Engagement and Accountability (CEA) and Protection, Gender and Inclusion (PGI). The operation will place particular emphasis on multipurpose cash assistance to enable affected households to meet their most urgent priorities with dignity, while reducing reliance on negative coping mechanisms. The response will also strengthen community resilience through Community Engagement and Accountability (CEA), disaster risk reduction, climate adaptation, and recovery actions, while building the capacity of staff, volunteers, and communities to better prepare for and respond to future flood-related emergencies

Operation strategy rationale

The Liberia National Red Cross Society (LNRCS), supported by the IFRC, will implement a four-month integrated flood response operation to address the immediate humanitarian needs and support the early recovery of populations affected by the severe flooding that occurred on 24 August 2026. The operation has been designed based on findings from completed rapid assessments, market assessments, community consultations, and coordination with national and local authorities. Assessment findings indicate widespread destruction of shelters, loss of household assets and livelihoods, contamination of water sources, and increased health risks across the affected counties.

Multipurpose Cash Assistance (MPCA) constitutes the central pillar of the response and represents the primary modality through which affected households will be supported to meet their immediate and early recovery needs. Assessments and market analysis confirmed that local markets remain functional despite the impacts of the flooding, allowing cash assistance to provide a flexible, efficient, and dignified means for households to address their diverse priorities. Through cash assistance, affected families will be able to purchase food, hygiene items, and other essential goods and services according to their specific circumstances. The cash-based approach also supports local economic recovery by injecting resources into affected markets while enabling households to make informed decisions regarding their own recovery.

Drawing on lessons learned from previous emergency operations, including MDRLR008 and MDRLR010, the response will utilize cash-based assistance as the primary modality where feasible. Previous post-distribution monitoring demonstrated that cash assistance enables affected households to prioritize their own needs, restore dignity, stimulate local markets, and accelerate recovery. The Liberia National Red Cross Society has established operational partnerships with Financial Service Providers through existing agreements with Orange Money and Africell, allowing for secure, efficient, accountable, and timely cash transfers.

While MPCA forms the foundation of the operational strategy, additional sectoral interventions will complement and reinforce household recovery by addressing critical needs that cannot be sufficiently met through cash assistance alone. These include targeted shelter recovery support for households whose homes were severely damaged or destroyed, community-based health and psychosocial support interventions, rehabilitation of damaged water sources and disease-prevention activities, protection and inclusion measures, community engagement and accountability mechanisms, and preparedness actions aimed at reducing future flood-related risks. Together, these interventions provide an integrated response that combines household purchasing power with targeted sectoral support to address priority risks and strengthen community resilience.

The operation will target 1,225 households (approximately 6,125 people) across the five most affected counties. Beneficiaries include 487 households in Montserrado, 214 households in Nimba, 214 households in Bong, 128 households in Grand Cape Mount, and 182 households in Grand Bassa. The strategy seeks to support affected populations through integrated interventions focusing on multipurpose cash assistance, shelter recovery, health, water, sanitation and hygiene, protection, gender and inclusion, and community engagement and accountability

Targeting will prioritize households that have experienced significant flood impacts, including destruction of homes, loss of livelihoods, damage to household assets, and displacement. Particular attention will be given to female-headed households, child-headed households, older persons, persons with disabilities, pregnant and lactating women, and other vulnerable groups identified through community-based targeting and verification processes. Beneficiary identification and validation will be conducted in collaboration with community leaders, local authorities, and community committees to ensure transparency, accountability, and acceptance.

- Multipurpose Cash Assistance: Target: 6,125 people (1,225 HHs)

Multipurpose Cash Assistance (MPCA) will be provided to 1,225 flood-affected households (6,125 people) identified through the completed rapid assessments conducted by the Liberian National Red Cross Society (LNRCS). The objective of the intervention is to enable affected households to meet their most urgent needs, restore a degree of self-reliance, and support early recovery following the devastating floods. Priority will be given to households that have experienced significant losses of shelter, livelihoods, household assets, food stocks, and essential belongings, while ensuring the inclusion of vulnerable groups such as female-headed households, older persons, persons with disabilities, and households with high dependency ratios.

Each targeted household will receive an unconditional cash transfer of USD 203. This amount is designed to support households in meeting essential food requirements while also enabling them to access critical hygiene and dignity items during the recovery period. The transfer value is based on market price analysis and operational learning from previous cash interventions. The calculation uses the August 2026 WFP market price monitoring report for staple food items, together with National Society market price data for essential hygiene items commonly provided by suppliers and partners. Based on this analysis, the average cost of essential food items is estimated at LRD 10,382.5 (USD 56.2) per household per month, totaling approximately LRD 31,148 (USD 168) over the assistance period. In addition, LRD 16,680 (USD 90.28) is allocated to enable households to access essential hygiene and dignity items based on prevailing market prices. These combined costs form the basis of the USD 203 transfer value per household, while also taking into account potential inflation and market price fluctuations during implementation.

Cash transfers will be delivered through mobile money platforms using existing partnerships with Orange Money and Africell. Prior to distribution, LNRCS will conduct beneficiary registration, verification, sensitization, and mobile money validation. Throughout implementation, market monitoring and post-distribution monitoring will be conducted to ensure that assistance remains appropriate and effective and that local markets continue to function adequately. Technical support from IFRC Cash and Voucher Assistance specialists will ensure compliance with established humanitarian cash programming standards and accountability requirements.

- Shelter: Target: 1,750 people (350 HHs)

Flood assessments conducted by the Liberia National Red Cross Society (LNRCS) identified 350 households whose homes were either destroyed or sustained severe structural damage, leaving them unable to safely inhabit their shelters without significant repairs or reconstruction. These households represent the most severely affected segment of the flood-affected population and face shelter recovery needs that cannot be adequately addressed through the Multipurpose Cash Assistance (MPCA) transfer alone.

While the USD 203 MPCA transfer is intended to support households in meeting a range of immediate and competing needs, including food, hygiene items, and other essential household expenditures, assessments indicated that households with destroyed or severely damaged homes require additional targeted support to begin shelter reconstruction. Community consultations and market assessments confirmed that families are prioritizing food consumption, replacement of essential household items, healthcare, and other urgent needs, leaving limited capacity to allocate sufficient resources for shelter repairs. Consequently, an additional shelter recovery grant is necessary to address critical shelter-specific needs and facilitate early recovery.

The shelter recovery grant will target 350 households whose homes were assessed as destroyed or severely damaged, based on damage classification conducted jointly by LNRCS, local authorities, and community representatives during the rapid assessment process. Selection will prioritize owner-occupied households that have lost the ability to safely reside in their homes and require support to undertake repairs or reconstruction. The targeted households will be verified through community-based targeting and validation mechanisms to ensure transparency and accountability.

Each eligible household will receive a conditional shelter recovery grant of USD 150. Unlike the unconditional MPCA transfer, this assistance is specifically intended to support the procurement of essential shelter construction materials required for repair or reconstruction of damaged homes. The transfer value was informed by market assessments and consultations with affected households, which identified roofing sheets, timber, nails, and other basic construction materials as the most immediate shelter recovery priorities. While the grant does not cover the full cost of rebuilding, it provides critical support that enables households to begin reconstruction and restore safe and habitable living conditions.

The shelter recovery grant will be delivered through the same financial service provider arrangements used for MPCA. However, its use will be linked to shelter recovery objectives, with community verification and post-distribution monitoring conducted to assess its contribution to reconstruction efforts. This approach ensures that households with the most severe shelter losses receive additional targeted support beyond their immediate survival needs and can transition more rapidly from displacement and unsafe living conditions towards recovery.

At the time of the DREF application, no government or humanitarian partner had confirmed shelter reconstruction assistance at a scale sufficient to address the needs of the identified households within the targeted communities. The LNRCS shelter intervention therefore fills a critical humanitarian gap by providing targeted support to households facing the greatest shelter recovery challenges while complementing ongoing government coordination efforts and avoiding duplication through continuous coordination with local authorities and humanitarian partners.

- Health: 6,125 people (1,225 HHs)

Flooding has significantly increased exposure to communicable diseases, waterborne illnesses, injuries, malaria, and psychosocial distress. The operation will therefore implement a comprehensive community-based health response aimed at protecting the health and wellbeing of affected populations.

LNRCS volunteers will conduct health promotion, epidemic prevention and control, and disease prevention activities in affected communities, focusing on the priority risks identified through assessments. Community awareness sessions will disseminate information on safe water use, hygiene practices, disease prevention, malaria prevention, environmental health risks, and timely health-seeking behaviour. Community-based surveillance and referral mechanisms will be strengthened to support early detection of potential disease outbreaks and facilitate access to healthcare services.

Mental Health and Psychosocial Support (MHPSS) will be integrated throughout the operation. Trained volunteers will provide psychological first aid, basic psychosocial support, and referrals for individuals requiring specialized services. Insecticide-treated mosquito nets will also be distributed as part of broader public health efforts to reduce malaria transmission and protect vulnerable populations.

- Water, Sanitation and Hygiene (WASH): Target: 6,125 people (1,225 HHs)

The floods contaminated numerous water sources and increased the risk of waterborne disease outbreaks in affected communities. Rapid assessments confirmed that at least 18 community water points had been contaminated or damaged. Subsequent verification conducted jointly by LNRCS, local authorities, and community representatives identified additional affected water sources requiring water quality testing, disinfection, and rehabilitation. As a result, the operation will support the assessment, testing, and rehabilitation of 30 water sources to restore safe access to water for affected populations.

The WASH component will focus on restoring access to safe water and promoting healthy hygiene practices. Activities will include water quality testing, rehabilitation and disinfection of affected water points, support for household water treatment, and promotion of safe water handling and storage practices.

Hygiene promotion activities will reinforce critical behaviours related to handwashing, water treatment, sanitation, environmental cleanliness, and disease prevention. Communities will be trained on the correct use of household water treatment options, while regular monitoring will be conducted to assess adoption of recommended practices and ensure effective utilization of WASH interventions.

- Protection, Gender and Inclusion (PGI): Target: 6,125 people (1,225 HHs)

Protection, Gender and Inclusion considerations will be systematically integrated across all sectors of the operation to ensure that assistance is delivered in a safe, equitable, and dignified manner. Particular attention will be given to the specific needs and vulnerabilities of women, children, older persons, persons with disabilities, and other groups that may face heightened risks during emergencies.

LNRCS staff and volunteers will receive orientation on Protection, Gender and Inclusion, Prevention of Sexual Exploitation and Abuse (PSEA), safeguarding, and protection principles. Accessibility considerations will be incorporated into registration, communication, distribution arrangements, and feedback mechanisms to ensure that all population groups can safely access assistance.

- Community Engagement and Accountability (CEA): Target: 6,125 people (1,225 HHs)

Community Engagement and Accountability will serve as a foundation of the entire operation. Affected communities will participate actively throughout planning, implementation, monitoring, and evaluation processes to ensure that the response remains relevant, accountable, and responsive to their needs.

LNRCS will conduct regular consultations with communities and provide timely, accurate, and accessible information regarding beneficiary selection criteria, assistance packages, distribution schedules, and available services. Community feedback and complaints mechanisms will be established and promoted across all intervention areas.

Dedicated community committees, volunteer outreach teams, community meetings, home visits, and focus group discussions will facilitate the collection, management, and resolution of feedback and complaints. Information collected through these mechanisms will be analysed regularly and used to strengthen decision-making, improve service delivery, and enhance accountability to affected populations.

- Operational Support

Implementation of the operation will be supported through robust logistics, procurement, finance, security, and PMER systems. LNRCS will leverage its established branch structure, trained volunteers, and operational presence within affected counties to facilitate timely

and effective delivery of assistance.

Procurement and supply chain activities will be conducted in accordance with LNRCS and IFRC procedures, with priority given to local procurement whenever feasible and appropriate. Security management will follow the LNRCS Security Framework, the Safer Access Framework, and IFRC Minimum Security Requirements to ensure the safety of staff, volunteers, and affected communities.

Regular field supervision, monitoring visits, market assessments, distribution monitoring, and post-distribution monitoring will be conducted throughout the operation to measure progress, assess effectiveness, and ensure accountability. At the end of the operation, a lessons-learned workshop involving LNRCS, IFRC, government authorities, and key stakeholders will be organized to document achievements, identify challenges, capture best practices, and strengthen preparedness and response capacities for future emergencies in Liberia.

Targeting Strategy

Who will be targeted through this operation?

Rapid assessments conducted jointly by the Liberia National Red Cross Society (LNRCS) and the National Disaster Management Agency (NDMA) identified widespread humanitarian needs across multiple flood-affected counties. Given the scale of the disaster and the limited resources available through the DREF, the operation will focus on the five counties where assessments confirmed the greatest concentration of affected households and the most significant unmet humanitarian needs: Montserrado, Nimba, Bong, Grand Cape Mount, and Grand Bassa.
The selection of these counties was informed by an analysis of flood severity, number of affected households, vulnerability levels, damage to housing and livelihoods, disruption of essential services, contamination of water sources, humanitarian gaps, and the level of assistance available from government and humanitarian partners. Montserrado was prioritized because of the exceptionally high concentration of affected populations and extensive damage within densely populated urban and peri-urban communities. Nimba, Bong, Grand Cape Mount, and Grand Bassa were selected because assessments identified substantial losses of shelter, livelihoods, household assets, and access to basic services, while available assistance remained insufficient to address identified needs.

Although flooding was reported in other counties, assessment findings confirmed that the selected five counties accounted for the highest concentration of households requiring immediate support during the operational period. Prioritization also considered areas where significant gaps remained in multipurpose cash assistance, shelter recovery support, rehabilitation of water sources, and community-level recovery interventions. The operation therefore focuses on locations where humanitarian needs are most acute and where affected households face the greatest barriers to recovery without external assistance.

Assessments identified 1,225 flood-affected households (6,125 people) requiring immediate humanitarian assistance across the selected counties, comprising 487 households in Montserrado, 214 households in Nimba, 214 households in Bong, 128 households in Grand Cape Mount, and 182 households in Grand Bassa. The operation will address immediate needs and support early recovery through multipurpose cash assistance, shelter recovery support, health interventions, WASH activities, and community-based preparedness and accountability measures.

Given the scale of humanitarian needs and the resources available under this DREF operation, it is not possible to assist all affected households. Therefore, the operation will prioritize 1,225 households (6125 people) assessed as having the highest level of humanitarian need and the lowest capacity to recover without external support. The target was determined through analysis of assessment findings, vulnerability data, estimated operational resources, and the funding available under the DREF allocation.

The selected 1 225 households represent those whose lives and livelihoods have been most severely disrupted by the floods. These households experienced substantial losses of income, productive assets, household belongings, food stocks, and access to essential services, leaving them unable to meet their immediate basic needs. Many have exhausted available coping mechanisms and remain highly exposed to the risk of further hardship due to ongoing rainfall and the continued threat of flooding.

The targeting approach is guided by the principle of prioritizing households facing the greatest vulnerability and protection risks. Particular attention will be given to households that combine severe flood impacts with pre-existing vulnerabilities that limit their ability to recover independently.

Beneficiary selection criteria will be developed and validated jointly with community leaders, beneficiary representatives, local authorities, NDMA, and relevant sector stakeholders to ensure transparency, accountability, and community ownership. Priority will be given to households meeting one or more of the following criteria:

• Households whose homes, livelihoods, businesses, food stocks, or household assets were severely damaged or destroyed by the floods.
• Households that have lost their primary source of income or means of livelihood.
• Households displaced by the floods or currently living in unsafe, damaged, or temporary accommodation.
• Female-headed households, particularly those caring for dependent children.
• Child-headed households.
• Households with persons with disabilities or caring for persons with disabilities.
• Older persons living alone or with limited family support.
• Pregnant and lactating women facing significant flood-related losses.
• Households with high dependency ratios, including households with multiple young children.
• Widows and widowers facing heightened vulnerability.
• Households identified through community validation processes as among the most vulnerable and least able to recover without assistance.

Community-based targeting and verification exercises will be conducted to ensure fairness, transparency, and acceptance of the selection process. Preliminary beneficiary lists will be validated by communities, local authorities, where relevant, and NDMA before final registration. To maximize coverage and prevent duplication, each targeted household will be registered and supported only once under the operation.

Continuous coordination with NDMA, local authorities, and humanitarian partners will be maintained throughout implementation to ensure complementarity of assistance, avoid overlaps, and ensure that the limited resources available under the operation reach the 1,225 households assessed as the most severely affected and vulnerable among the households impacted by the floods.

Explain the selection criteria for the targeted population

As usual, the criteria for selection will be co-formulated with community stakeholders, beneficiary representatives and NDMA representatives at district level. However, LNRCS will use its experience from previous DREF operations to propose the following criteria for inclusion into the beneficiary selection criteria:

As assessed:
- Households that have suffered partial or complete loss of household items.
- Households with partial or complete loss of livelihood assets.
- Households that have experienced partial or complete loss of water storage facilities.
- Households with partially or completely damaged homes.

Priority Considerations:
- Households classified as poor or near-poor in the latest assessments.
- Households that have not received assistance or have only received minimal support from other agencies.
- Households lacking a sustainable source of income or livelihoods.
- Households with individuals living with disabilities or chronic illnesses.
- Households headed by women.
- Households with pregnant or lactating women.
- Households with elderly members (aged over 65 years).
- Households with children under five years old.

Total Targeted Population

Women	3,216	Rural	20%
Girls (under 18)	843	Urban	80%
Men	1,539	People with disabilities (estimated)	10%
Boys (under 18)	527		
Total targeted population	6,125		

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 exploitation and abuse policy?	Yes
Does your National Society have child protection/child safeguarding policy?	Yes
Does your National Society have whistleblower protection policy?	Yes
Does your National Society have anti-sexual harassment policy?	Yes

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

Risk	Mitigation action
Continued heavy rainfall leading to additional flooding and an increase in the number of affected households beyond the planned target.	Continuous monitoring of weather forecasts and flood trends through the Emergency Operations Centre (EOC); close coordination with NDMA and local authorities; regular review of targeting and response priorities; contingency planning to allow adjustment of response activities if the situation deteriorates.
Safety and security risks affecting staff, volunteers, or beneficiaries during field operations.	Compliance with the LNRCS Security Manual, Safer Access Framework, and IFRC Minimum Security Requirements (MSRs); regular security briefings; coordination with local authorities; continuous risk monitoring throughout the operation.
Present Economic Challenges, especially high and unstable inflation may increase the cost of basic commodities and the general cost of the response	LNRCS staff and volunteers will continue to do price monitoring, and the procurement team will ensure that items to be procured are bought within the first month of the operation.

	CVA staff and volunteers will also do Rapid Market Assessment. Among other objectives, that assessment will inform any need for cash value revision or changes on proposed intervention
Deterioration of public health conditions due to contaminated water sources, poor sanitation, and potential outbreaks of waterborne diseases	Implementation of WASH interventions, hygiene promotion, water quality testing, distribution of water treatment supplies and hygiene kits, community health awareness activities, and close coordination with health authorities for surveillance and referrals.

Please indicate any security and safety concerns for this operation:

The flood-affected communities continue to face a range of protection, safety, and security risks that may affect both affected populations and response personnel. Displacement, loss of livelihoods, destruction of assets, and increased economic hardship may heighten the risk of sexual and gender-based violence (SGBV), exploitation and abuse, theft, looting, and other forms of criminal activity, particularly among vulnerable groups such as women, girls, children, older persons, and persons with disabilities.

The operation may also face challenges related to community expectations and perceptions, especially if humanitarian needs exceed available resources. There is a potential risk of tension or dissatisfaction among community members who may feel excluded from assistance or perceive support to be insufficient. Such situations could affect the safety of volunteers and staff and disrupt planned response activities.

In addition, continued heavy rainfall, flooding, eroded roads, unstable slopes, and damaged infrastructure may pose physical safety risks to both communities and response teams during assessments, distributions, monitoring visits, and other field activities.

To mitigate these risks, the LNRCS will implement the operation in accordance with the Red Cross and Red Crescent Movement's Fundamental Principles, the Safer Access Framework, the LNRCS Security Manual, and IFRC Minimum Security Requirements (MSRs). Key mitigation measures will include:

- Ensuring clear visibility and identification of volunteers and staff through the use of Red Cross protective clothing and identification materials.
- Maintaining regular communication and movement tracking for all field teams.
- Conducting continuous community engagement and awareness activities to clearly explain the role of the Red Cross, the available support, beneficiary selection criteria, and complaints and feedback mechanisms.
- Establishing and promoting accessible feedback and complaints channels to address concerns and reduce community tensions.
- Providing regular security and safety briefings to staff and volunteers throughout the operation.
- Ensuring staff and volunteers are oriented on Safer Access, personal safety, safeguarding, Protection from Sexual Exploitation and Abuse (PSEA), and Protection, Gender and Inclusion (PGI) principles.
- Conducting ongoing security risk assessments and context monitoring, with support from the IFRC, to inform operational decision-making and adapt activities as required.
- Coordinating closely with local authorities, NDMA, community leaders, and other stakeholders to facilitate safe access to affected communities and enhance acceptance of the operation.

While the security environment remains manageable, continuous monitoring, strong community engagement, and adherence to established security protocols will be essential to ensuring the safety of affected populations, volunteers, and staff throughout the operation.

Has the child safeguarding risk analysis assessment been completed?	**Yes**

Planned Intervention

Shelter Housing And Settlements

Budget: CHF 54,443

Targeted Persons: 1,750

Indicators

Title	Target
# of households with destroyed or severely damaged shelters that report improved access to safe and habitable shelter following assistance.	350
# of households with destroyed or severely damaged shelters receiving shelter recovery cash assistance.	350
% of supported households that use the grant to procure shelter repair or reconstruction materials.	80
% of supported households reporting that the shelter grant contributed to improving the safety and habitability of their shelter	80

Priority Actions

- Conduct verification and registration of 350 households with destroyed or severely damaged shelters.
- Conduct beneficiary sensitization on grant use, safer reconstruction principles, and accountability mechanisms.
- Provide shelter recovery cash grants to 350 households.
- Conduct monitoring visits to assess shelter recovery progress and appropriate use of assistance.
- Coordinate with local authorities and communities to avoid duplication and ensure assistance reaches eligible households.
- Conduct post-distribution monitoring to evaluate the effectiveness of shelter recovery support.

Multi Purpose Cash

Budget: CHF 231,467
Targeted Persons: 6,125

Indicators

Title	Target
# of HHs supported with multi-purpose cash to cover food and WASH items transfer to support basic needs and food.	1,225
# of volunteers trained on cash transfer process	100
% HH reporting cash helped meet priority needs, reduce/avoid negative copying mechanisms	80
# of Post Distribution Monitoring done	1

Priority Actions

- Registration and Verification of Beneficiaries
- Train 100 volunteers on cash transfer and household registration through the Kobo Collect platform
- Conduct market assessment
- Set up targeting committees and brief beneficiary households

- Distribute multipurpose cash to 1225 households
- Deploy volunteers to monitor cash transfer activities
- Deploy 100 volunteers to sensitize targeted beneficiaries on the details of Mobile money transactions
- Conduct post-distribution monitoring

Health

Budget: CHF 41,471
Targeted Persons: 6,125

Indicators

Title	Target
# of HHs reached with mosquito nets	1,225
% of targeted households, which receive support in terms of health promotion and hygiene awareness	90
# of staff and volunteers trained on MHPSS, EPIC, Health promotions	110
# of training sessions for the benefit of the population of the target communities: on the storage of drinking water	5

Priority Actions

- Deploy volunteers to carry out First Aid and PSS.
- Conduct training on MHPSS for staff and volunteers.
- Train 100 volunteers and staff on water, hygiene, and sanitation promotion activities, waterborne disease prevention (including menstrual hygiene, Epidemic Control for Volunteers, and the use of Mosquito nets), MPHSS.
- Procure and distribute mosquito nets to affected 1225 HHs (2 per HH)
- Organize training for the benefit of the population of the target communities: on the storage of drinking water, a healthy use of water treatment products)

Water, Sanitation And Hygiene

Budget: CHF 31,354
Targeted Persons: 6,125

Indicators

Title	Target
% of targeted households reporting access to safe drinking water from rehabilitated or treated water sources	80
# of community water sources assessed	30
# of community water sources tested for water quality	30

# of volunteers trained and mobilized for hygiene promotion activities.	100
# of people reached with hygiene promotion and water safety messages.	6,125
# of community hygiene promotion sessions conducted	36

Priority Actions

• Mobilize and train 100 volunteers to conduct community-based hygiene promotion and awareness activities focusing on waterborne disease prevention, safe water handling, household water treatment, handwashing, and sanitation practices.
• Conduct community water source assessments in affected communities.
• Conduct water quality testing of affected community water sources.
• Conduct regular water quality monitoring at water sources and selected household water storage points.
• Rehabilitate and disinfect 30 damaged or contaminated community water sources.
• Conduct community awareness sessions on safe water treatment, storage, and use.
• Distribute and demonstrate the use of household water treatment products (if included in the budget and procurement plan).
• Support community environmental sanitation and clean-up campaigns through provision of community cleaning tools and volunteer mobilization.

Protection, Gender And Inclusion

Budget: CHF 6,816
Targeted Persons: 6,125

Indicators

Title	Target
# of PGI assessment conducted	1
# of breifing conducted for staff and volunteers	5
# of staff and volunteers trained on PGI minimum standards, PSEA and Safeguarding	110

Priority Actions

• Conduct rapid PGI risk and needs assessment to identify heightened vulnerabilities and protection risks
• Organize regular, field-based PGI briefings and awareness sessions for frontline staff and volunteers, focusing on safe identification of protection risks, inclusion of at-risk groups, and respectful engagement with affected communities.
• Create safe, accessible, and culturally appropriate spaces for women, girls, and other at-risk groups
• Train staff and volunteers on PGI minimum standards, PSEA, and Safeguarding
• Awareness sessions for communities on SGBV prevention, mitigation, and response, and PSEA as well as child safeguarding.
• Map out safe referral pathways and disseminate the same to staff, volunteers, and communities.
• Create Safe spaces for children to ensure prevent risks that are bound to be faced due to the floods.

Community Engagement And Accountability

Budget: CHF 7,924
Targeted Persons: 6,125

Indicators

Title	Target
# of volunteers trained In CEA and PGI	70
# of people reached with flood prevention messages	6,125
% of operation complaints and feedback received and responded to by the LNRCS	90

Priority Actions

• Train volunteers on CEA and PGI to support operations' activities. Involvement can enhance accountability and ensure that actions are aligned
with community needs and priorities.
• Organize community meetings to validate the targeting criteria and the lists of beneficiaries.
• Engage a broad spectrum of community members, including marginalized and vulnerable groups, to ensure diverse perspectives and needs are addressed.
• Incorporate local knowledge and practices related to prevention of flooding, management and response
• Establish clear and continuous two-way communication channels between authorities and the community
• Produce Assorted IEC materials
• Set up Community Feedback Mechanisms for receiving and addressing community feedback, complaints, and suggestions, which should be used to amend early actions to be more effective
• Conduct regular awareness campaigns and educational programmes about re hazards, early warning signs, and appropriate response actions. This would empower communities to act quickly and effectively during flooding
• Ensure transparency in decision-making processes and the allocation of resources. Keep the community informed about how decisions are made and how resources are distributed
• Undertake communication work to ensure media coverage of the volunteers' activities
. Conduct TV & Radio discussion

Secretariat Services

Budget: CHF 20,516
Targeted Persons: 6,125

Indicators

Title	Target
# of technical support missions conducted by IFRC	3
# of coordination meetings attended	8

Priority Actions

• IFRC technical support mission and monitoring visits
• Participation in coordination meetings
• Volunteers insurance

National Society Strengthening

Budget: CHF 68,845
Targeted Persons: 15

Indicators

Title	Target
# of lessons learned, workshop conducted	2
# of monitoring conducted by LNRCS Headquarters Office staff	12
# of documentaries produced (video and case studies	4

Priority Actions

- Ensure coordination and public relations
- Programme Monitoring conducted by NS team
- Documentary production on flood response activities
- Organize a lessons learned workshop
- Ensure compliance with reporting and accompany the process
- Support the full functioning of the EOC

About Support Services

How many staff and volunteers will be involved in this operation. Briefly describe their role.

The operation will be implemented by a dedicated team of 10 staff and 100 volunteers from the LNRCS supported by its chapter structures, National Disaster Response Team (NDRT), and technical departments.

The 100 volunteers will serve as the frontline responders and will be responsible for community mobilization, beneficiary identification and registration, needs assessments, community engagement and accountability (CEA), hygiene promotion, distribution support, post-distribution monitoring, first aid, mental health and psychosocial support (MHPSS), and awareness-raising activities in the target communities.

The 10 staff members will be responsible for overall operational management, coordination, technical supervision, logistics, finance, procurement, communications, monitoring and reporting, and ensuring compliance with IFRC and LNRCS standards and procedures. Staff members will also provide technical oversight for sectoral interventions, including livelihoods and basic needs, health, WASH, protection, and community engagement.

The operation will be overseen by the Secretary General of LNRCS, with day-to-day leadership provided by the Disaster Management/WASH Officer. Technical support will be provided by staff from the PMER, Finance, Logistics, Communications, Health, WASH, and Protection, Gender and Inclusion (PGI) units. NDRT members will support field coordination, supervision of volunteers, assessments, distributions, and monitoring activities.

This combination of experienced staff, trained volunteers, and technical support personnel will ensure the timely, accountable, and effective implementation of the operation while maintaining a strong presence within the affected communities.

Does your volunteer team reflect the gender, age, and cultural diversity of the people you're helping? What gaps exist in your volunteer team's gender, age, or cultural diversity, and how are you addressing them to ensure inclusive and appropriate support?

Yes

The Liberia National Red Cross Society (LNRCS) volunteer network reflects the diversity of the communities it serves and includes men and women, young people, adults, and volunteers drawn from the affected communities themselves. For this operation, volunteers will be mobilized primarily from the Western Area Urban District and surrounding branches, ensuring that response teams have a strong understanding of local languages, cultural norms, community dynamics, and the specific needs of affected populations.

LNRCS recognizes that a diverse volunteer base is essential to delivering safe, inclusive, and effective humanitarian assistance. Particular emphasis will be placed on ensuring adequate representation of female volunteers throughout the operation to facilitate engagement with women and girls, support gender-sensitive programming, and promote safe access to assistance for vulnerable groups. Volunteers with experience in community health, protection, psychosocial support, community engagement, and disaster response will be prioritized to ensure quality service delivery.

While the National Society has a diverse volunteer base, there remain some gaps in specialized capacities, particularly in Protection, Gender and Inclusion (PGI), safeguarding, Protection from Sexual Exploitation and Abuse (PSEA), and support for persons with disabilities and other vulnerable groups. To address these gaps, staff and volunteers engaged in the operation will receive refresher training and orientation on PGI, PSEA, safeguarding, community engagement, and inclusive humanitarian programming before and during implementation.

LNRCS will also work closely with community leaders, women's groups, youth representatives, and persons with disabilities to ensure that the perspectives and specific needs of diverse population groups are adequately reflected in planning, targeting, implementation, and monitoring. This approach will help ensure that assistance is accessible, culturally appropriate, gender-sensitive, and responsive to the needs of the most vulnerable flood-affected households.

If there is procurement, will it be done by National Society or IFRC?

Procurement for this operation will be undertaken by the LNRCS, with technical oversight and support from the IFRC Country Cluster Delegation, in accordance with LNRCS procurement policies, IFRC procurement procedures, and DREF requirements. The National Society has the operational capacity and experience to manage local procurement and service contracting required for the implementation of the response.

Where feasible, goods and services will be procured locally to support timely delivery, cost-effectiveness, and local market recovery. All procurement processes will be conducted through competitive, transparent, and accountable procedures to ensure value for money, quality assurance, and compliance with applicable procurement standards.

The IFRC will provide technical guidance, oversight, and compliance support throughout the procurement process to ensure adherence to IFRC regulations, financial controls, and donor requirements. Regular procurement reviews and monitoring will be undertaken to ensure that all goods and services are delivered efficiently, meet required quality standards, and support the timely achievement of operational objectives.

How will this operation be monitored?

The operation will be implemented under a robust monitoring, evaluation, accountability, and reporting framework to ensure effective delivery of assistance, adherence to quality standards, and accountability to affected populations. The LNRCS, with technical support from the IFRC Country Delegation, will oversee all monitoring, evaluation, reporting, and learning components of the operation.

Monitoring will be led by the LNRCS Planning, Monitoring, Evaluation and Reporting (PMER) unit in close collaboration with operational teams, branches, and volunteers. Progress will be tracked against approved indicators, targets, and implementation plans using standardized monitoring tools and regular field visits. Routine monitoring will assess the relevance, effectiveness, quality, timeliness, and coverage of interventions, while identifying emerging needs and operational challenges requiring adjustments during implementation.

Community feedback and complaints mechanisms will be integrated throughout the operation to ensure accountability and provide real-time information on beneficiary satisfaction, targeting, service quality, and emerging concerns. Feedback received from affected communities will be regularly reviewed and used to inform operational decision-making and adaptive management.

Post-distribution monitoring (PDM) will be conducted following cash assistance and other distributions to assess the effectiveness, appropriateness, and utilization of assistance, measure beneficiary satisfaction, and identify lessons for future interventions.

The IFRC Country Delegation will provide ongoing technical support, oversight, and quality assurance through regular monitoring and support missions. Joint field monitoring visits by LNRCS and IFRC teams will be conducted throughout the operation to verify progress, monitor compliance with DREF standards and procedures, and support evidence-based decision-making.

Regular operational updates will be shared with LNRCS and IFRC management to facilitate timely decision-making, risk management, and accountability. Reporting will be undertaken in accordance with IFRC requirements, including the submission of an operational update and a final report detailing achievements, challenges, lessons learned, and the overall impact of the intervention.

At the conclusion of the operation, LNRCS will organize a lessons learned workshop involving staff, volunteers, IFRC, and relevant stakeholders to capture best practices, identify operational challenges, and generate recommendations to strengthen future emergency preparedness and response operations.

Please briefly explain the National Societies communication strategy for this operation

The Liberia National Red Cross Society (LNRCS) will implement a communication strategy that promotes transparency, accountability, and meaningful engagement with affected communities, partners, authorities, and other stakeholders throughout the operation. The strategy will support timely information sharing, strengthen community trust, and ensure that affected populations are informed about available assistance, beneficiary selection criteria, response activities, and feedback channels.

At the community level, LNRCS volunteers will conduct regular awareness and information-sharing sessions in affected communities, providing accurate and timely information on the response while collecting community feedback, concerns, and suggestions. This two-way communication approach will help ensure that community perspectives and emerging needs inform operational decision-making and enable the National Society to adapt interventions as required.

The operation will mainstream Community Engagement and Accountability (CEA) principles by establishing accessible feedback and complaints mechanisms and ensuring that affected populations can safely raise concerns, seek clarification, and provide input on response activities. Particular attention will be given to ensuring that women, children, older persons, persons with disabilities, and other vulnerable groups have equitable access to information and communication channels.

Externally, LNRCS will use a combination of radio programmes, social media platforms, community outreach activities, press releases, and stakeholder meetings to provide updates on the flooding situation, response progress, humanitarian needs, and key operational achievements. Communication activities will also support public awareness on flood risks, disease prevention, hygiene practices, and community preparedness measures as the rainy season continues.

Protection, Gender and Inclusion (PGI) considerations will be integrated into all communication activities to ensure messaging is inclusive, accessible, culturally appropriate, and understandable to diverse audiences, including low-literacy populations.

The IFRC Country Delegation will provide technical support to LNRCS in communications, media engagement, and visibility, ensuring consistent messaging, enhanced accountability to affected populations, and appropriate visibility for the DREF-supported response. Lessons learned, good practices, and operational achievements will be documented and shared to inform future preparedness and emergency response efforts.

Budget Overview

IFRC

DREF OPERATION

MDRLR012 - Liberia Nationa Red Cross
Liberia Floods

Operating Budget

Planned Operations	**373,474**
Shelter and Basic Household Items	54,443
Livelihoods	0
Multi-purpose Cash	231,467
Health	41,471
Water, Sanitation & Hygiene	31,354
Protection, Gender and Inclusion	6,816
Education	0
Migration	0
Risk Reduction, Climate Adaptation and Recovery	0
Community Engagement and Accountability	7,924
Environmental Sustainability	0
Enabling Approaches	**89,362**
Coordination and Partnerships	0
Secretariat Services	20,516
National Society Strengthening	68,845
TOTAL BUDGET	**462,836**

all amounts in Swiss Francs (CHF)

Click here to download the budget file

Contact Information

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

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Click here for the reference