

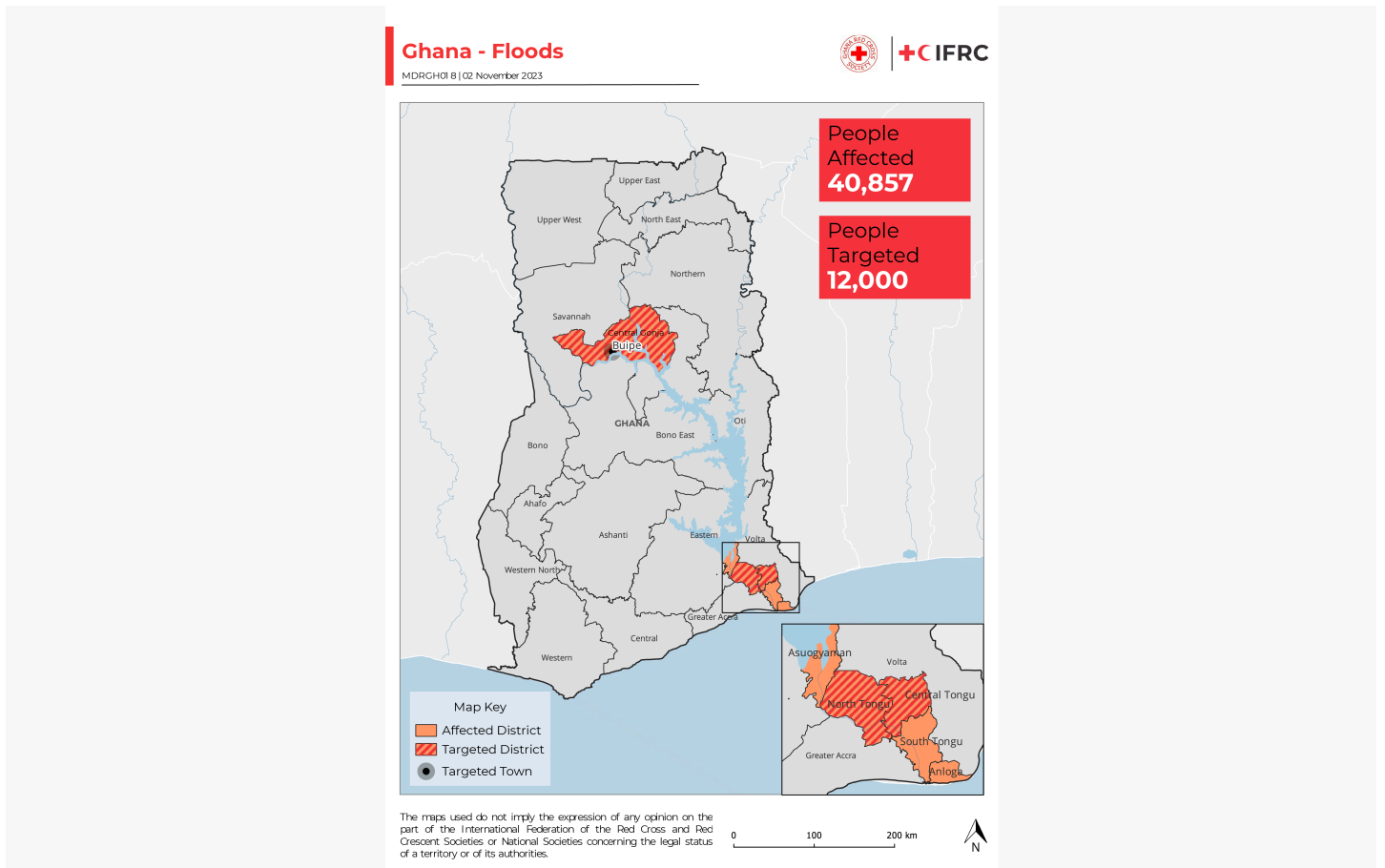


Floods September 2023, Buipe Town in Savannah region (Ghana)- by GRCS

Appeal: MDRGH018	Total DREF Allocation: -	Crisis Category: Yellow	Hazard: Flood
Glide Number: -	People Affected: 31,857 people	People Targeted: 12,000 people	People Assisted: 12,000 people
Event Onset: Slow	Operation Start Date: 05-08-2023	Operational End Date: 30-04-2024	Total Operating Timeframe: 8 months
Targeted Areas: Northern, Volta			

The major donors and partners of the IFRC-DREF include the Red Cross Societies and governments of Australia, Austria, Belgium, Britain, China, Czech, Canada, Denmark, German, Ireland, Italy, Japan, Luxembourg, Liechtenstein, Malta, Norway, Spain, Sweden, Switzerland, Thailand, and the Netherlands, as well as DG ECHO, Mondelez Foundation, and other corporate and private donors. The IFRC, on behalf of the National Society, would like to extend thanks to all for their generous contributions.

Description of the Event



Ghana Red Cross Society Map with assessment of Volta River and Burkina Dam in Reverting flooding.

Date when the trigger was met

14-10-2023

What happened, where and when?

In July 2023, Ghana met forecasts from the National Disaster Management Organization (NADMO) warned against important floods across northern Ghana, with an estimated 70,000 people expected to be affected due to the annual spillage of the Bagre Dam in Burkina Faso that was historically happening when the dam reaches 235m, in the peak of the floods between 30 August to Week 1 of September. This posed a important risk that was adding to the existing flash floods risk across the country in the same period, especially in low lying areas.

In response to the anticipated impact, the Ghana Red Cross launched a DREF to support the vulnerable communities along the Volta River and its tributaries in the Upper West, Upper East, Northern, Savannah, and Northeast regions. The information on the dam level was to be received by the SONA BEL, the power utility of Burkina Faso to trigger early actions ahead of that event, protecting and mitigating impact for riverine floods that could add to the flash floods caseload in low lying areas during the same rainy peak period. On the 7th and 8th of September 2023, SONA BEL, announced that the Bagre Dam had reached critical water levels 235-255mm, requiring a spillage but unlike previous years, the water was released partially, instead of a full opening. This partial release reduced the immediate riverine flood risk and only led to very localized riverine floods that did not require at first any scale-up to response.

While the initial flooding remained localized in the northern part of Ghana, the onset of torrential rains from late September to 18 October 2023 led to successive flood events, particularly in the Savannah, Volta, Northern regions. The two most affected regions were Savannah, Volta regions where flooding intensified and continued until the 18th of October due to the overflow of the Bui Black Volta in the Savannah region and spillage from the Akosombo Dam in the Volta region. 35,857 people were affected in various ways including the loss of household properties and assets, farm products, shelter and other means of livelihoods. The flooding also increased the communities' exposure to various health hazards, including personal injuries.

In Savannah region: On 23 September 2023, torrential rains were experienced in Savannah region, subsequently resulting in the Black Volta bursting its banks and flooding, affecting about 5,000 people in six communities. Torrential rains from late September 2023 contributed to rise in the waters of Bui Black Volta at Buipe in the Savannah region impacting mostly the central Gonja district and surrounding areas. Torrential rains flooded the Bui Black Volta, and the back flow of the river waters caused flooding in Buipe town. Bagre dam which normally causes flooding on annual basis did not impact the region this year due to the authorities' strategy to start an early and gradual release of the waters across the borders in Burkina Faso.

In Volta region: Highest impact was reported as a result of floods on 14 October 2023, in Volta region when the Akasombo dam experienced an increased water inflows which forced the authorities to open the flood gates. The opening of the flood gates led to the flooding of communities in seven districts, but mostly affected being in central, north and south of Tongu districts. It was reported that over 26,857 people were affected by the floods, with at least seven people injured. The displaced people were moved to higher grounds. Dozens of people were isolated as the floods affected the road network. One hospital had to be evacuated due to high water levels. In the following days, the Ghana Met forecasted increased levels of rainfall, which further worsened the situation.



Community members sign for NFIs received in Buipe /GRCS Photo



CEA desk receiving feedback and complaints in Savannah Region/GRCS Photo

Scope and Scale

Over 35,857 people were affected in Savannah and Volta regions as a result of the flooding which occurred on 23 September and 14 October 2023. The course of the overflow of water and successive spillage of the dam brought a gradual humanitarian impact across different districts in the regions, especially Volta region.

Volta Region: Floods were successively reported on 14 and 18 October with multiple humanitarian needs and a continuous rainy situation. The scale of the disaster as per rapid data from GRCS in coordination with NDAMO field staff was as follows:

- An estimated 26,857 people affected in Volta region in about 9 districts (North Tongu, Central Tongu, South Tongu, Shai Osudoku, Asuogyaman and Anlo). The most affected districts in Volta regions were central, south and northern Tongu, where communities were flooded, and lost connections especially in the island's areas of the Volta dam.
- A total of 12,000 people was estimated to be in evacuation centres while over 14,000 people were accommodated by relatives not affected by the flood waters.
- The spillage from the Akosombo Dam was the major external factor which contributed to the flooding in the communities in the Volta region causing significant consequences on agriculture and economic resilience of riverbank communities. The spillage usually affects

farmers who cultivate close to the Volta Lake in the Mepe, Akuse, Anloga and Tongu submerging farms and communities in Savannah Region affected by Black Volta (Buipe, Damango, Bazua, Atub, Binaba, amongst others). The WFP observatory report of 24 October 2023 estimated that 465,180 people were living in the flooded locations, with 45,326 hectares of cropland areas flooded. People affected are those living along the Volta rivers and tributaries; those living in low lying areas, people with poorly constructed houses, women, children and the elderly living in crowded areas.

Savanna region:

- Over 5,000 people affected in Savannah region. Most of the impact was in six communities of the Central Gonja district,
- Population displaced in Savannah a week after the incident was 3,149 (571 men, 603 women, 950 male children and 1,025 female children).
- Floods led to the destruction of houses and public infrastructure like schools,
- Reported flooding farmlands with hundreds of households who lost their crops.
- The flooding which subsequently increased in intensity due to the heavy rainfall caused the displacement and evacuation of 3,149 people to safe havens/evacuation centres in higher grounds. Other displaced families were hosted by families who live in high grounds and evacuation centres.

The various flooding caused a safety risk to this population groups and risks of drowning was particularly high, especially when they venture out and are forced to cross fast moving flood waters. Patients in health facilities were affected and forced to relocate to other facilities, thereby increasing the pressure on existing facilities. Similar incidents with river overflow leading to flooding were recorded in the Eastern regions of the country following the cumulative torrential rainfall and spillage of Akosombo dam. The flooding in both regions led to the displacement of thousands of people. People displaced in both regions were registered in the evacuation centres. However, the number of people continued to increase in both Savannah and Volta.

- Houses were damaged by the flood waters, public institutions like schools, health facilities were also affected. The local road network was cut off due to floods, and there were reported cases of electricity power fluctuations in the area.
- Most farmers in the flooded area lost a significant amount of their crops which were due for harvesting.

Source Information

Source Name	Source Link
1. MDRGH018 DREF application & updates 1-2	https://www.ifrc.org/fr/appeals?date_from=&date_to=&search_terms=&search_terms=&appeal_code=MDRGH018&search_terms=&xt=

National Society Actions

Have the National Society conducted any intervention additionally to those part of this DREF Operation?	Yes
Please provide a brief description of those additional activities	In response to the severe flooding caused by heavy rainfall and the controlled spillage from the Akosombo Dam, the National Society organized a press conference to call on Ghanaians and institutions for support in assisting the large number of people affected. Following this appeal, the following entities provided assistance: <ul style="list-style-type: none"> - Stanbic Bank contributed GHS 200,000 (approximately CHF 15,400), which the Ghana Red Cross Society used to procure food and non-food items for 150 households (around 900 individuals) living near the Lower Volta Basin in the Volta Region. Bales of used clothing were also distributed to people staying in safe havens and those who remained in their homes despite the flooding. - Rotary Club provided financial support of GHS 100,000 (approximately CHF 7,700), which was used to deliver unconditional multipurpose cash assistance to another 150 affected households in the same region.



IFRC Network Actions Related To The Current Event

Secretariat	<p>The IFRC country cluster followed up the rainfall and flooding situation with Ghana RC, ensuring data and forecast monitoring ahead of the flooding season and all through the rainy season. A sub-regional weather forecast monitoring and floods readiness engagement were coordinated by the Secretariat for Ghana RC and neighboring West African countries.</p> <p>The support through the ADMAG meeting and technical guidances for anticipatory actions helped NS on the DREF intervention anticipation phase and later on the development of the floods early action protocol. The technical support and orientations from planning to the reporting has helped shape a more appropriate intervention both for the proposed early actions and the emergency response following the impact.</p> <p>The flexibility of the IFRC-DREF between the various modalities has also give more value to the intervention, allowing to quickly adjust the DREF strategy based on the evolution of the situation. For instance, In August 2023, the IFRC approved an Imminent DREF application for GRCS ahead of the riverbanks flooding with the annual spillage of the Bagre Dam. When the authorities in Burkina Faso initiated a precautionary process of opening the floodgates of the Bagre dam earlier to ease the likelihood of major floods, IFRC-DREF allowed to adjust the un-used resources for the anticipatory plan to the response that was triggered later in September.</p> <p>The IFRC also carried out a risk analysis of the GRCS and the operating context. The gaps assessed in terms of timeliness and alignment to standards for the logistic considerations was integrated to the IFRC support during the response. Following this analysis, the IFRC deployed a senior logistics and procurement officer from the cluster to assist GRCS with procurement activities for the early actions.</p>
Participating National Societies	<p>There is no PNS present in Ghana. However, the Iran Red Crescent runs a medical clinic which provides medical services at a fee to the residents in Accra City and occasionally runs medical outreach activities in and out of Accra. During the response phase to the floods, the Staff of the Clinic carried out a medical outreach service to Volta region, screening and treating people who had various forms of ailments. Over three hundred people received treatment. This service was provided by the clinic to contribute to the response which GRCS was providing through other sector interventions.</p>

ICRC Actions Related To The Current Event

The ICRC did not respond to the floods affected populations in Savannah and Volta Regions.

Other Actors Actions Related To The Current Event

Government has requested international assistance	No
National authorities	<p>National authorities acted in the relocation of people affected by the flooding to high grounds, they provided temporary shelter, food and non-food items. Government agencies in coordination with GRCS issued warnings to those in flood-prone areas to relocate to high grounds. The agencies sent a plea to the UN agencies in Ghana to support and provide relief assistance to people affected.</p> <p>An inter-agency assessment was conducted from 19–22 October 2023 in three affected districts of the Eastern region (North Tongu, Central Tongu and South Tongu). Some 13 agencies took part in that assessment with 20 representatives:</p> <ul style="list-style-type: none">- Government (1): NADMO



	<ul style="list-style-type: none"> - UN (8): WFP, IOM, FAO, UNFPA, UNICEF, UNDSS, WHO, and UNIDO - INGO (2): CRS, and WVI - Others (2): CONIWAS, Basic Needs-Ghana
UN or other actors	WFP, IOM, FAO, UNFPA, UNICEF, UNDSS, WHO, UNIDO took part to the joint assessment on the floods across the Volta area.

Are there major coordination mechanism in place?

The coordination mechanisms were at the regional level and were led by the National Disaster Management Organization (NADMO). The NS through the regional managers was part of the coordination mechanism and volunteers were involved in the assessment and activation of Community Disaster Response Teams where they have been formed and established in collaboration with local NADMO offices. A national-level coordination mechanism was established where NADMO briefed humanitarian organizations in Accra on the current gaps to be addressed. The national level coordination mechanism was also important in ensuring that there was no duplication or over targeting of segments of the affected population.

A meeting on 18 October 2023 advised actors to focus on the gaps in Savannah and Volta regions where the impact of the flooding had affected most people, and the situation was expected to deteriorate further due to more expected rainfall in the areas.

NADMO's main local coordination was through relief committees that were set up at the district level to receive and track deliveries, compile data and ensure equitable distribution of relief items and accountability. All the GRCS interventions were shared and harmonized through that platform. This was to avoid any duplication among the partners as many at the time were not yet covering the needs and gaps identified by the assessment in the affected districts, especially where GRCS was planning to respond.

All partners, including GRCS, participated in the coordination meetings and contributed to a coordinated response and harmonization of people evacuated to the list of safe grounds as per the assessment recommendations.

During the response phase of the operations, representatives of NADMO, and the local leadership participated and supported the planning of the distribution of NFIs. Health authorities accompanied the NS teams in field visits to assess the health situation, they also briefed the NS assessment teams on the prevalence of diseases and the changing disease patterns as a result of the flooding and damage to some of the health facilities in the area.

Needs (Gaps) Identified



Shelter Housing And Settlements

The flood posed a significant threat to communities, with devastating consequences for homes, infrastructure, and most importantly, human lives. Majority of the houses in the affected areas were constructed from bricks and mortar, others from mud and thatched with either tin roofs or grass. The structures could not resist the flood waters as in some places the flood waters were as high as roof level. One glaring gap in this disaster was the insufficient provision of emergency shelters at the evacuation centers. This shortfall exacerbated the vulnerability of affected populations and hampered the effectiveness of relief efforts. All communities' facilities like schools, religious buildings, local authority buildings, etc. were used as temporary shelter solutions for the displaced but lacked basic facilities for dignity, health and protection for the families.

The main needs were the latrines that were usually overwhelmed by the increasing number of affected people at the evacuation centers. The gaps identified were addressed through the provision of an additional 50 family tents and shelter kits. Volunteers were trained and they supported the affected population by mounting tents and repairing their houses using the shelter kits.



Livelihoods And Basic Needs

The situation in the flood-affected areas led to significant devastation for both homes and businesses. Families residing in these regions suffered substantial losses, ranging from partial to substantial destruction of dwellings and livelihoods such as businesses and investments. Consequently, there was a critical need to extend assistance to those affected households. A subsequent multisectoral needs assessment conducted between November 16th and 18th, 2023, targeted internally displaced persons (IDPs) in collective centers across the districts of Ada East, Central Tongu, North Tongu, and Shai Osudoku. This assessment highlighted ongoing challenges, including inadequate access to essential services and the need for comprehensive support to address both immediate and long-term needs of the displaced populations. The Ghana Hydrological Authority emphasized the urgency of addressing the flooding crisis, estimating that approximately \$5 billion is required to effectively combat the country's ongoing flood issues. These results highlight the great necessity of ongoing humanitarian aid and infrastructure development to help impacted populations and lower future flood hazards.



To address this need, our response intervention allocates a multipurpose unconditional cash grant to 2,000 households. This support was intended to help them not only in rebuilding their livelihoods but also to cover essential expenses like medical bills and other specific needs unique to each household's circumstances. A total of 1,200 families in evacuation centres received GHS 1,200 support while 800 families living outside the evacuation centres received GHS 600 CVA support.



Health

Waters were contaminated with various pollutants, including sewage, chemicals, and carcasses from dead animals, flooded latrines, debris which posed significant health risks to people and livestock in the affected regions. The impact of flood waters was observed on households and public latrines. Damage to facilities such as latrines poses serious public health concerns and has a high tendency to lead to increased cases of waterborne diseases such as cholera, diarrhea, dengue fever and the upsurge of malaria due to increased breeding grounds for mosquitoes.

Before the flooding event, the affected population was already exposed to risks of waterborne diseases because the areas lacked access to adequate safe drinking water and low sanitation coverage. After the flooding incident, there was a need to intensify the awareness sessions for prevention of water-related and vector-borne diseases which were likely to escalate during the floods. The various flash flood events and the period of overflowing waters in the communities left stagnant water pools. Coupled with the normal hot climatic conditions, the stagnant water pools were fertile ground for the breeding of mosquitoes, and subsequent spread of malaria which is endemic in the areas.

The stress and trauma associated with losing one's home and belongings can have a profound psychological and social impact on individuals and communities, which necessitates the need for psychosocial support.

Poor hygiene and health conditions have increased the need for immediate relief materials and support for basic needs like food, water, clothing, etc. A rapid needs assessment conducted between October 19th and 22nd, 2023, by the Inter-Agency Emergencies Working Group in collaboration with the National Disaster Management Organization (NADMO), focused on two severely impacted districts: Central Tongu and North Tongu. The assessment, which included interviews and focus group discussions with affected populations, revealed significant disruptions. Approximately 19,743 children were unable to attend school due to the flooding, with over 9,000 losing essential educational materials. Health concerns were prominent, as over 90% of children in safe havens reported ailments such as malaria (94.3%) and skin diseases (70%). Additionally, psychological issues were noted, with over 95% of children experiencing anxiety and sadness.



Water, Sanitation And Hygiene

Access to safe drinking water, sanitation and good hygiene practices was reasonably low among the affected population before the disaster. With the floods, the water supply points have been disrupted (flooded and not accessible) leading to poor water quality due to the spill out of latrines within the areas.

Both household and public latrines were destroyed as a result of the flooding, the waste in the latrines have been dispersed into the general environment by the flood waters, posing a great health risk. Hygiene and access to hygiene services were disrupted due to the flooding and its aftermath. Clean up campaigns were therefore organized, and hygiene and promotion messages passed to the affected population to mitigate and prevent the outbreak of diseases. The NS advocated for increase in the number of latrines and bath shelters for the affected population through engagement with other humanitarian organizations active in the two regions.

Hygiene messages were targeted at the affected 26,000 population by the 40 trained volunteers in epidemic control in emergencies since the threat of water borne and water related diseases is likely to affect those exposed to unsanitary conditions. However, intensive and well-coordinated hygiene promotion messages were focused on those at the evacuation centres, where the likelihood of outbreak of water borne diseases was higher due to the concentration of people in one area.

The knowledge and awareness to use water treatment chemicals were identified and addressed through training of people prior to the distribution of the products. Post distribution support and monitoring were also carried out to ensure safe use of the products.

A total of 12,000 people were targeted with intervention to improve access to safe drinking water through training and distribution of water treatment chemicals to secure safe drinking water for three months.



Protection, Gender And Inclusion

The vulnerability of women, children and minors and people with special need increased in the context of humanitarian crisis. The need for an inclusive, dignified and gender balanced assistance was key to mitigate the risk of any protection and safety concerns.

Among the affected population, the majority were women. There were estimated 1,025 girls and 950 boys in Savannah region out of 3,419 people in evacuation centres while in Volta 8,271 boys and 8,909 girls were part of the affected population of 35,857. These figures indicate a significant number of vulnerable groups among the displaced population who might require protection services to be provided and an inclusive and protection standard to be applied to mitigate any possible fear or reluctance.



The GRCS worked with relevant authorities to ensure the safety of all gender groups and delivered humanitarian support which took into consideration different needs of the gender groups. The GRCS also advocated for the protection of the gender groups, such as women, children and elderly whose risks and vulnerabilities could be exploited, leading to abuse within the evacuation centres but also those affected population hosted with the communities.



Community Engagement And Accountability

In responding to the floods which affected 26,000 people, clear and timely communication to affected populations about the ongoing response efforts, available services, and safety measures was crucial for informed decision-making.

Effective delivery of response relies a lot on understanding, engagement, acceptance and participation of communities. As such, several actions to mitigate the risk of floods consist of communicating with existing representatives' group which needed to be clearly identified. The suitable communication channel identified from previous operations was house-to-house engagement, and the CIC (Community Information Center) where all important messages are broadcasted within a specific community.

CEA needs were embedded in the intervention enabling the GRCS to deliver support which met the needs of the people. Affected populations were also able to provide feedback on quality and timeliness of the response.

Operational Strategy

Overall objective of the operation

The overall objective of the operation was to provide emergency assistance to at least 12,000 persons (2,000 households) affected by floods in Buipe Community, Central Gonja district in the Savannah Region and Central and North Tongu in the Volta Region. These populations were targeted based on consultations within the disaster coordination meetings held at both regional and national level. The operation focused on immediate provision of first-aid services, enhanced hygiene and health conditions by the promotion and provision of essential items, covering immediate basic needs ensured by supplying affected families with a one-off multipurpose cash disbursement, supporting restoration of family links and psychosocial first aid to both the affected people and volunteers. The detailed assessment conducted by the GRCS volunteers and the multi-sectoral Interagency working group on emergencies assessment confirmed the priorities and the gaps which needed to be addressed, notably in the sectors of Health, WASH, livelihoods through CVA, shelter, PGI and CEA.

The DREF operation was launched in August 2023 as an intervention for anticipatory actions ahead of foreseen heavy rains which could cause the opening of the dam in Burkina Faso and lead to the overflow of Volta rivers in Ghana. Budget was CHF 149,586 and set timeframe was 03 months, with end date on 30 November 2023. However, the National Society was not able to complete 70% of planned anticipatory actions given short time between approval in early August and the start of the floods in early September with the opening of the dam in Burkina Faso. On 03 November 2023, a second allocation of CHF 313,113 was approved to support the response phase of the operation. Then the NS requested more time to finish the implementation that had been delayed. At the end of the operation, the total allocation from IFRC-DREF to support both anticipatory actions and emergency response was CHF 462,699 for 08 months, reaching 12,000 people.

Operation strategy rationale

The annual floods response through an imminent DREF on floods in Ghana was initially approved in August 2023 to enable early actions in five regions namely Upper West, Upper East, Northeast, Savannah and Northern regions. The trigger for the early actions was the opening of the dam at peak level 235 meters by the Burkina Faso Authorities (SONABEL). The imminent DREF approved for anticipatory action plan on 05 August 2023, was aiming to ensure readiness of the team and implement mitigation measures in communities ahead of the floods. NS undertook some actions but did not manage to implement all of them as it was no more necessary due to the lower risk of floods after the partial opening of the Dam. Among the anticipatory actions conducted, GRCS ensured:

- Training of volunteers in evacuation, epidemic control in emergencies for 40 volunteers in the Savannah region,
- Supplier identification and activation were completed with the aim to speed-up early actions and eventually response. GRCS conducted an identification of vendors to supply building materials and procurement of 70,020 Aqua tabs. Following the partial opening of the dam, these procurements were used for rapid emergency distribution instead of early actions Still serving the disease prevention.
- Early warning messages ahead of the riverine floods still expected even if it was at a smaller scope and considering the flash floods in the same period.

Following the severe flooding from September to October, the Ghana Red Cross Society (GRCS) revised its operational strategy to prioritize response efforts based on the joint assessment conducted on 26 October 2023. To enhance the response, a detailed assessment was also planned at the district level to refine intervention strategies where relevant and ensure a district implementation plan. This assessment focused on Water, Sanitation, and Hygiene (WASH), Health, Shelter, and Livelihoods, which were identified as the most



pressing needs. Additionally, it examined the extent of damage to water systems, sewage infrastructure, and the potential contamination of water sources due to flood debris. Community engagement was a key component of the process, ensuring that all affected groups were included, feedback was gathered, and complaint mechanisms were established.

The response strategy prioritized livelihoods and basic needs, targeting 12,000 people (or 2,000 households) who had lost their homes and sources of income due to the flooding. Cash and Voucher Assistance (CVA) was provided to support these households, with 1,200 GHS allocated to each of the 1,200 families in evacuation centers and 600 GHS to each of the 800 families staying with relatives. A total of 80 volunteers were planned to be trained and deployed to support cash distribution, raise awareness on proper cash usage, and conduct post-distribution monitoring.

Health interventions also played a crucial role in the response, particularly in addressing the increased risks of waterborne and vector-borne diseases. Psychological First Aid (PFA) was provided to flood victims and volunteers to alleviate stress, while health awareness campaigns focused on cholera, diarrhea, and malaria prevention. Due to the high risk of malaria in the Savannah region, mosquito nets were distributed to 2,000 households, prioritizing pregnant and lactating women, the elderly, female-headed households, and children under six. Although there was an initial plan to establish Oral Rehydration Management posts and community-based disease surveillance, this was ultimately dropped following discussions with the Ghana Health Services, as there was no outbreak data to support the need.

The floods had severely contaminated water sources with sewage, debris, and animal carcasses, increasing the risk of disease outbreaks. In response, WASH interventions were implemented to provide clean water and sanitation services to 12,000 people. Hygiene kits containing soap, toothpaste, and toothbrushes were distributed to 2,000 households, while dignity kits were provided to 350 women and girls for menstrual hygiene management over three months. Additionally, affected families received jerry cans for safe water storage, and 180,000 aqua tabs were distributed for water purification over 90 days. To further prevent the spread of diseases, 50 handwashing stations were installed at evacuation centers, and sanitation and hygiene campaigns were conducted twice a month for three months. Volunteers trained in epidemic control also assisted in debris clearance and health promotion activities.

During the response, many families were displaced, with some staying in camps while others sought shelter with relatives. To address this, GRCS worked alongside the Department of Social Welfare and security agencies to facilitate family tracing and reunification efforts, ensuring that displaced individuals could reconnect with their families.

Protection, Gender, and Inclusion (PGI) was also a key component of the intervention, as women and children were particularly vulnerable due to displacement and unsafe living conditions. Volunteers received training on PGI principles and conducted awareness sessions to ensure the fair and equitable distribution of assistance. A gender and diversity analysis was carried out across all response sectors to assess the specific impacts on different groups, helping to guide any necessary adjustments to the intervention. Special attention was given to ensuring inclusivity, particularly for individuals with disabilities.

Community engagement and accountability were embedded throughout the intervention to ensure meaningful participation and transparency. Volunteers were trained to provide information to affected populations, ensuring they understood the assistance available to them. Additionally, feedback desks were set up at key distribution points to address concerns and improve future response efforts.

Details of the initial plan of actions and subsequent update 1 & 2 is available through the link in SOURCE 1. In general, NS strategy was continuously monitored and adapted as the situation evolved. Through targeted cash support, health interventions, improved WASH services, and protection initiatives, GRCS provided critical relief to flood-affected communities, ensuring their safety, dignity, and long-term recovery.

Targeting Strategy

Who was targeted by this operation?

Across the flood affected communities, a total of 12,000 people were targeted out of the total affected 31,857 people with various forms of interventions based on their level of vulnerability. In total, the number of direct beneficiaries were 2000 HHs, 500 in Savannah and 1500 in Volta regions through the support of DREF funds. Private donors supported 300 households in Volta region alone. The total number of indirect beneficiaries mainly from Hygiene and health promotional messages through volunteers and FM radio stations were over 150,000 people (43,000 in Savannah and 107,000 in Volta). Due to the risks from diseases as a result of the flooding situation, the health messages targeted a much higher population target than the 12,000 who benefitted from a CVA and NFI support. Affected population in evacuation centres and those hosted by the neighbours and whose home steads had been flooded and did not have any available means to restore their lost livelihoods or immediately return to their homes. In summary the following are the number of people reached with the DREF operation funds and support from private donations:

DREF Support (Direct Beneficiaries and Indirect Beneficiaries)

Cash Voucher Assistance: 500 Households reached in Savannah, while 1500 households reached in Volta Region.

Hygiene Kits, Dignity Kits 300 households in Savannah and 750 Households in Volta region.



Blankets, Jerricans, Mosquito Nets (As a single Package) to 500 households in Savannah and 1500 households
 Hygiene and Health Promotion: 12,000 people reached directly with promotional messages while, over 150,000 people were indirect beneficiaries
 Hand Washing Stations to Centres : 15 in Savannah and 35 in Volta region.
 Radio Stations Engaged for Health and hygiene promotional messages were 2.

By Private Donors (Stanbic and Rotary Club

300 Households reached in Volta region with Food and Non-Food items and Cash Voucher Assistance.

Explain the selection criteria for the targeted population

The criteria adopted for the selection of the targeted population were as follows:
 the 2,000HH (12,000 people) to receive the relief support were to be selected following the below criteria that were harmonized with the communities for inclusion and acceptance:

- Households in evacuation centres
- Households who lost their homes - destroyed by floods
- Families with additional losses as businesses, crops, especially for those for which this was the unique income source
- Houses with vulnerable groups that include women in lactation, houses with children below 5 years old; the elderly and people with disabilities that will have challenges to do long distance for water in case of nearest water system affected.

For the specific Livelihood and Basic Needs targeting, recognizing the economic strain experienced by affected households, NS proposes a two-pronged approach.

- Firstly 1,200 households situated in evacuation centre received multipurpose unconditional cash transfers totaling GHC 1,200. This empowered them to procure essential items for their families.
- Additionally, 800 households who were displaced but were not at the evacuation centre received GHC 600, complementing their efforts to meet basic needs during this challenging time.

People with lack of coping mechanisms, and high levels of vulnerability - women, children and elderly.

Total Targeted Population

Women	3,816	Rural	42%
Girls (under 18)	3,050	Urban	58%
Men	2,250	People with disabilities (estimated)	8%
Boys (under 18)	2,884		
Total targeted population	12,000		

Risk and Security Considerations

Please indicate about potential operation risk for this operations and mitigation actions

Risk	Mitigation action
Giving the assistance to people not affected by the flooding.	Local administration structures and social services continuously consulted during beneficiary identification and registration.
Limited access to affected populations.	Prepositioning of stocks in nearest point of operation.

Please indicate any security and safety concerns for this operation

Risk:
 No major security risk was detected; the main consideration was preventive measures following the minimum-security guidelines. This



was to prevent any harm, injuries and drowning of staff and volunteers of the Red Cross during the response activities.

Mitigation:

To reduce the risk of Red Cross personnel falling victim to crime or violence, active risk mitigation measures were communicated to staff and volunteers through induction and briefing sessions. The briefing sessions included putting out some potential security issues and how they could be mitigated, reported, or managed. Relating to safer access concerns, GRCS had the benefits of a nationwide recognition. This eased facilitation with community heads of the affected communities and most importantly the community people themselves. The GRCS is well accepted and trusted by the communities. GRCS reviewed the existing risk matrix to inform all staff and volunteers about some of the risks and how these could be handled or mitigated. The GRCS was advised to either recruit or appoint a skilled security focal point to raise the standards and extend professional security support to volunteers operating in insecure, remote and high-risk operating environments.

IFRC Cluster Security extended direct support to the GRCS. The IFRC MSR was applied to all IFRC and GRCS staff throughout the operation. This was coordinated with the local partners such as NADMO, local leaderships and security personnel in the areas of the operation. The IFRC Minimum Security Requirements (MSR) are reviewed and in place for Ghana.

Has the child safeguarding risk analysis assessment been completed?

No

Implementation



Shelter Housing And Settlements

Budget: CHF 66,651

Targeted Persons: 12,000

Assisted Persons: 12,000

Indicators

Title	Target	Actual
# of people assisted with evacuation	12,000	3,000
# of volunteers trained on beneficiary registration and safe construction	110	110
% of families that confirmed the blankets distributed were useful	2,000	2,000

Narrative description of achievements

The NS operational team updated the evacuation plan in coordination with community leaders, NADMO and local authorities at the Savannah and Volta regions. At the onset of the flooding event, the NS responded with 66 emergency family tents and shelters kits mounted at evacuation centres to house 396 families at 04 evacuation centers in the Savannah and Volta regions. These activities were undertaken by a section of 20 volunteers who had been trained in the siting and setting up of tents and use of shelter kits.

Further, the impact of the loss was ameliorated by the provision of 4,000 blankets to the beneficiaries. The teams in the field reviewed the effectiveness of the shelter support that the NS provided. The family tents were credited to be an appropriate response tool as it enables the family unit to remain intact as opposed to living in common areas. Elderly persons were prioritized as well to receive the family tents, rather than the classrooms which had been set aside by the authorities as shelter.

Lessons Learnt

GRCS should consider having emergency stock of family tents for immediate deployments in case of disaster and only use the DREF funds for replenishment of deployed items. The NS should strengthen its country-based surge capacity (NDRT) in sector-based skills e.g. shelter assessment, response and general emergency coordination.



Challenges

- Difficulty in accessing some of the affected communities due to difficult terrain and the severity of the floods.
- Weak inter-agency coordination of agencies involved in the provision of the shelter sector.
- There were not enough tents to cover the needs of vulnerable populations.



Multi Purpose Cash

Budget: CHF 164,829

Targeted Persons: 12,000

Assisted Persons: 12,000

Indicators

Title	Target	Actual
# of households reached with cash	2,000	2,000
# of post distribution monitoring conducted	1	1

Narrative description of achievements

- A total of 2,000 households were supported with multipurpose cash to address basic needs. The beneficiaries for the multipurpose cash were identified using the criteria for support, and this was also verified with the local leadership structures. Volunteers registered the beneficiaries at their locations (evacuation camps and at the hosts' residences).
- A total of 1,200 Ghana Cedis (CHF 137.5) was received by each household at the evacuation centers and 600 Ghana Cedis (CHF 68.75) was received by those families staying with relatives and friends. The amount for basic needs was informed by the national minimum food basket amount. The beneficiaries were segregated into two groups: those affected and displaced but stayed with friends and relatives and those affected and hosted at the designated evacuation centres.

A PDM was conducted as part of this operation; In the Livelihood sector, the cash transfer program emerged as a critical intervention, enabling households to meet their basic needs and restart income-generating activities. PDM findings indicated that the cash assistance provided flexibility and dignity to beneficiaries, allowing them to prioritize their most pressing expenses, such as food, healthcare, and rebuilding livelihoods.

Lessons Learnt

- Include contingency plans of using direct cash or vouchers as modalities for response in case the target population does not have Mobile Money wallets
- The NS should prepare the agreement with the Financial Service Provider in advance to deliver assistance in time.

Challenges

- Some of the families lost their means of identification because of the floods. This posed a big challenge in the disbursement of funds to the Mobile Money wallets of registered beneficiaries.
- The FSP MoU with Ghana Red Cross Society had expired and needed to be renewed, this took some time and required an Exceptional Approval from IFRC for the cash voucher assistance to be delivered to the target households.



Health

Budget: CHF 32,216

Targeted Persons: 12,000

Assisted Persons: 12,000

Indicators

Title	Target	Actual
# of people reached with health services and awareness messages	31,857	122,000
# of volunteers mobilized and trained	80	80
% of households that confirmed using the mosquito nets distributed	100	100

Narrative description of achievements

The NS trained 80 of its volunteers in EPiC and health promotion as planned. Upon consultations with the health authorities, the trained volunteers carried out awareness and sensitization messages to cover risks such as malaria, diarrhoea, and bilharzia. Other related risks and injuries in flooding situations, positive health-seeking behaviours, and immunization of children under 5 years were emphasized. These messages were delivered by volunteers through house-to-house, public gatherings such as markets and churches, and the use of radio and community information centres (CiCs). The NS also supported communities with prevention measures. A total of 4,000 long-lasting insecticide-treated mosquito nets were distributed to 2,000 households in both Savannah and Volta regions.

To reduce the psychological impact on the affected population as result of loss of property and livelihoods, 20 volunteers were identified and trained in psychosocial support (PSS). The training focused on building the capacity of volunteers to identify communities who were most affected and struggling to cope with the losses and trauma and referring them to the available health facilities for professional support. Trained volunteers disseminated PSS messages to communities impacted by the flood and who had lost livelihoods and shelter or sustained injuries during the flooding events. The volunteers also assured the affected communities that the GRCS and other partners in the field were at hand to provide support to those most in need.

The results of the PDM on the distribution of the mosquito nets revealed that decline in malaria cases, while blankets provided essential warmth and comfort during the recovery period. These interventions were widely appreciated and aligned with the communities' immediate needs.

Lessons Learnt

- There should be continuous social mobilization activities linked to ongoing long-term development programmes implemented in the region by the National Society and other stakeholders.
- It is imperative for GRCS to create country-based funding mechanisms to be at the immediate disposal of emergency operations to respond promptly to affected households.

Challenges

- Difficulty in accessing some of the affected communities due to bad terrain and the severity of the situation.



Water, Sanitation And Hygiene

Budget: CHF 101,340

Targeted Persons: 12,000

Assisted Persons: 12,000

Indicators

Title	Target	Actual
# of HHs reached with jerrycans and Aquatabs	2,000	2,000
# of volunteers trained	80	80

# of women of childbearing age reached with dignity kits	1,050	1,050
% of families confirming their hygiene practice and access to safe water improved	70	70

Narrative description of achievements

• In total, 80 volunteers (40 in each region) were trained on Epidemic Control for Volunteer (EpiC) covering cholera prevention through identifying common signs and symptoms, and preparation and use of Oral Rehydration Solution (ORS). Emphasis was laid on ORS during the training as it is an effective first aid and treats dehydration caused by diarrhea. Personal, food and environmental hygiene and the spread and control of cholera were also taught during the training. Volunteers were taken through skin diseases and skeletal diseases and were asked to identify these cases and report them to the nearest health facility. Volunteers were deployed to engage the affected communities in clean-up campaigns, environmental hygiene, and follow-up visits at household level to ensure that awareness knowledge was being put into practice. Before the training, the NS and IFRC health teams visited the affected districts to engage the District Health Management Team (DHMT) to assess the health impact of the flood. Malaria topped the findings followed by skin diseases, skeletal diseases (joint and body pains) due to fatigue and pockets of watery stools as well as limited access to clean water.

During the intervention, WASH messages were delivered at the same time as those of health promotion, especially during community gatherings and through radio and the use of Community Information Centres. The WASH interventions provided much-needed services like improving knowledge of risks associated with the flood. Some 1,050 girls and women of childbearing age received dignity kits. A total of 2,000 households received jerrycans and Aqua tabs and were trained to use the Aquatabs to make the water safe for use, and safe storage of water.

A total of 50 handwashing stations were set up at the safe havens at Mepe, Buipe and some selected communities at Volta and Savannah regions. In both regions, volunteers reached a total of 73,567 people with WASH messages. This number who otherwise would have been exposed to health risks were directly reached by the Red Cross intervention. Some communities testified that it was only the Ghana Red Cross that had reached out to them with such items and messages.

The outcome of the PDM from targeted communities conducted in Savannah and Volta region revealed significant outcomes across key sectors. Under the WASH sector, the distribution of hygiene kits, dignity kits, aqua tabs, jerry cans, mosquito nets, and blankets greatly improved access to clean water, sanitation, and hygiene for affected households. Beneficiaries reported enhanced ability to maintain personal hygiene, particularly among women and girls, who highlighted the dignity kits as crucial for their well-being.

Lessons Learnt

1. The synergy between WASH and health promotion activities underscored the interrelated nature of hygiene, sanitation, and overall health.
2. It is imperative for such emergency interventions to be focused on immediate humanitarian needs such as the provision of safe water immediately rather than just activities that seem to be for recovery. Continuous refresher training of volunteers on hygiene promotion outside of emergency settings is also essential.

Challenges

Difficulty in accessing some of the affected communities due to bad terrain and the severity of the situation.



Protection, Gender And Inclusion

Budget: CHF 7,699

Targeted Persons: 12,000

Assisted Persons: 12,000

Indicators

Title	Target	Actual
# of people reached	12,000	12,000



# of sessions carried out on PGI	6	15
# of volunteers sensitized	110	110
# of volunteers deployed	20	20

Narrative description of achievements

The needs of vulnerable communities were addressed by actively seeking people with special needs who had been affected by the flooding in both regions. Before deployment in all 15 distribution centres, the volunteers signed a Red Cross Code of Conduct. Paying particular attention to issues of PGI was emphasized as part of the volunteers' induction before the deployment. Children, women and the elderly were most at risk in the evacuation centres, volunteers were briefed on protection issues and mechanism for reporting to the right authorities. Partners, mainly from agencies such as NADMO, local leadership, social services and the security were sensitized through advocacy approaches to take due care to protect the vulnerable and most at-risk community members. There were no cases of missing or separated family members. Therefore, the RFL component was not delivered to the volunteers. During the distribution of NFIs, registered women, the elderly and those with children were identified to ensure they were given priority to access their packages.

Lessons Learnt

The beneficiaries like female headed households and those with special needs were given priority, received their NFI packages in time and were able to return to their homes, and this approach was appreciated by partners like NADMO, local leadership, etc.

Challenges

None were identified.



Community Engagement And Accountability

Budget: CHF 8,211

Targeted Persons: 12,000

Assisted Persons: 12,000

Indicators

Title	Target	Actual
# of volunteers briefed on CEA and community feedback mechanisms	50	30
# of radios engaged	2	3
% of sampled population	20	20
# of people engaged in focus groups and discussions.	1,000	2,201

Narrative description of achievements

PMER activities were rolled out to ensure quality implementation throughout the operation. The NS was responsible for the day-to-day monitoring of the operation, primarily at the branch level, supported by the NS and the IFRC team. Volunteers were orientated in CEA in Savannah to ensure they could convey to communities the objectives of the operation, ensure a good flow of information and clear roles and responsibilities between representatives, community leaders and committees.

The National Disaster Response Team members at the National Headquarters level was deployed to provide support during the operation.



Community engagement and accountability (CEA) was an integral part of this operation, through already existing capacity within the NS. CEA focal persons from the National headquarters were responsible for coordinating community engagement and accountability intervention and were supported by the volunteers.

CEA activities included awareness and information-sharing mechanisms through community engagement during meetings and personal interactions at household level. Communities were encouraged to use other media like call-ins to the designated focal persons, sharing most significant stories and face-to-face interviews through trusted and preferred communication channels (traditional leaders, volunteers and a helpdesk). Feedback and complaints systems were also established at the NFI distribution points- this was set up to deal with feedback related to the quality of the distributions, issues around missing names in distribution registers, etc.). All the feedback mechanisms were disseminated to the community and advertised widely to ensure everyone was aware of the system and was comfortable using it.

The DREF update meetings and lesson learnt workshop which brought together partners in the operation such as NADMO and selected representatives of the affected communities enabled the NS to incorporate the feedback and appreciation of the communities in future operations, especially related to registration and targeting of affected people.

- Variances in reaching Targets: The number of volunteers planned for training on CEA and community feedback mechanism was reduced from 50 to 30 due to the field level assessment which revealed that messages passed by volunteers during in person engagements could be covered well through the use of Community Information Centres. This was particularly achievable in the safe havens due to clusters of families gathered in one location.

The Outcomes of the PDM revealed that , the feedback mechanisms established during the response fostered trust and transparency between the Ghana Red Cross and the affected communities. Regular updates, participatory meetings, and responsive actions ensured that community voices were integral to decision-making, enhancing the overall effectiveness and acceptance of the intervention.

- During the intervention for the 2023 floods response in the Volta and savannah region, the main feedback received from affected communities emphasized the need for timely and equitable distribution of relief items, improved communication about response efforts, and greater inclusion of vulnerable groups such as women, children, and persons with disabilities. Communities also highlighted the importance of providing not only immediate relief but also long-term support to enhance resilience against future disasters. This feedback was gathered through community meetings, surveys, and direct engagement with local leaders and stakeholders, ensuring that the voices of those most impacted were heard and considered.

In response to this feedback, the Ghana Red Cross integrated these insights into their implementation strategy. Relief distributions were prioritized based on vulnerability assessments, ensuring that the most affected households received timely assistance. Communication channels were strengthened through community volunteers and local radio stations to keep residents informed about response activities. Additionally, the intervention included capacity-building initiatives, such as training on disaster preparedness and livelihood support (multipurpose cash transfer), to address immediate to long-term recovery needs.

Lessons Learnt

- Strong collaboration between the National Society and other actors in the field is essential.
- There is a need to discuss CEA with other stakeholders to share feedback if it concerns them.

Challenges

- Mobile telecommunication network access was a major problem that affected feedback and complaints through mobile phone communication.
- A call for multi-sector rapid needs assessment failed as there were no collaborations with NADMO.



Secretariat Services

Budget: CHF 24,620

Targeted Persons: 132

Assisted Persons: 132

Indicators

Title	Target	Actual
# of monitoring reports	2	2



Narrative description of achievements

The Secretariat provided oversight support in the execution of the operation. It coordinated the availability of financial resources to the NS and supported the NS to engage with national-level actors such as NADMO. The Secretariat also ensured compliance with procurements and financial procedures during the procurement and reporting on the field-level activities. It also coordinated with the United National Humanitarian Response Depot (UNHRD) for the procurement of family tents and tarpaulins and duty exemption with Ministry of Foreign Affairs and Regional Integration, Ministry of Health and Ministry of Finance. However, the procurement of the 50 tents and 100 tarpaulins for replenishing the GRCS stock was deferred due to delays in getting customs and tax exemptions clearance and processing in the integrated customs management system of the revenue authorities.

To support the Operation, the IFRC deployed a Logistics and procurement Officer from the Cluster who stayed for five weeks in Ghana, supporting the GRCS to identify suppliers for NFIs and the reactivation of the MoU between the NS and the Financial Service Provider, which later enabled the support to 2,000 households with Cash assistance.

The IFRC also deployed surge operational manager for 02 months. The operations Manager was very essential in providing support, leadership and training of the GRCS staff and volunteers in the planning and execution of relief distribution activities in the field. During the actual distribution activities in the field, the Operations Manager with the GRCS Operation focal point and DM Manager, planned and led the distribution activities in coordination with NADMO, Local Leadership, and volunteers, and achieved the targeted distribution of NFIs to 2,000 households.

Lessons Learnt

- Coordination with the United National Humanitarian Response Depot (UNHRD) for procurement of family tents and tarpaulins demonstrated the value of leveraging partnerships for resource mobilization.
- Engaging with international partners can enhance the capacity to respond effectively to emergencies.
- Ensuring that procurement procedures were strictly followed while meeting urgent needs was a balancing act.

Challenges

- Managing procurement processes and logistics, especially in coordination with international bodies like UNHRD, and relevant ministries of Foreign Affairs, Health, Finance and the Ghana Revenue Authority for customs duty and tax exemption clearance was complex and time-consuming. Finally, the exemption was granted by the Ghana Revenue Authority, but it was late to process the procurement.
- Navigating customs and regulatory frameworks, even with existing agreements presented challenges that delayed the delivery of critical supplies such as family tents, and tarpaulins. This resulted in the non-procurement and therefore non-replenishment of the NS family tents and tarpaulins.



National Society Strengthening

Budget: CHF 57,133

Targeted Persons: 132

Assisted Persons: 132

Indicators

Title	Target	Actual
# of coordination meetings conducted externally	4	2
# of coordination meetings conducted by RC/RC	8	10

Narrative description of achievements

• A total of 80 volunteers underwent training in data collection using Kobo Collect. Forty (40) mobile tablets were distributed among volunteers in both the Savannah and Volta regions. These tablets served to identify, select, and register beneficiaries for various response activities. This technological integration not only expedited the information-gathering process but also enhanced the accuracy and accessibility of data for a more precise and tailored humanitarian response.

There were weekly Internal coordination meetings involving various technical departments such as Disaster Management, Health, Logistics, Finance and Administration to review the operational requirements and define roles for each department in fulfilling the objectives of the response. Such meetings were chaired by the Secretary General. The external coordination meetings were convened by



NADMO and attended by humanitarian actors both at Accra and regional level.

Within the Red Cross Movement, meetings were held by GRCS staff, involving the Iran Clinic (Iran Red Crescent) based in Accra, Ghana. The Iran Clinic participated in the response by providing free health outreach services in Volta region.

Variances for External Coordination Meetings: The meetings conducted externally were convened by NADMO and brought partners together, initially these were done at the HQ level at the onset of the emergency to provide partners with information and direct them to the most affected populations. However after those initial meetings, regional levels ones were undertaken where the NS was represented by the Regional Managers, however those meetings have not been captured in this report.

Lessons Learnt

Strong collaboration between the National Society and other actors in the field is essential for a successful emergency / humanitarian intervention.

Challenges

- Mobile telecommunication network access was a major problem that affected feedback and complaints through mobile phone communications.
- Difficulty in accessing some of the affected communities due to bad terrain and the severity of the situation.



Financial Report

DREF Operation

Selected Parameters			
Reporting Timeframe	2023/08-2025/02	Operation	MDRGH018
Budget Timeframe	2023/08-2024/04	Budget	APPROVED

FINAL FINANCIAL REPORT

Prepared on 07/Apr/2025

All figures are in Swiss Francs (CHF)

MDRGH018 - Ghana - Floods

Operating Timeframe: 05 Aug 2023 to 30 Apr 2024

I. Summary

Opening Balance	0
Funds & Other Income	462,699
DREF Anticipatory Pillar	149,586
DREF Response Pillar	313,113
Expenditure	-400,500
Closing Balance	62,199

II. Expenditure by area of focus / strategies for implementation

Description	Budget	Expenditure	Variance
AOF1 - Disaster risk reduction	1,144	-32,364	33,508
AOF2 - Shelter	56,704	37,195	19,509
AOF3 - Livelihoods and basic needs	162,763	107	162,656
AOF4 - Health	33,128	1,489	31,639
AOF5 - Water, sanitation and hygiene	112,255	14,879	97,376
AOF6 - Protection, Gender & Inclusion	4,820	632	4,188
AOF7 - Migration			0
Area of focus Total	370,814	21,937	348,877
SF11 - Strengthen National Societies	64,474	373,666	-309,192
SF12 - Effective international disaster management			0
SF13 - Influence others as leading strategic partners			0
SF14 - Ensure a strong IFRC	27,412	4,896	22,515
Strategy for implementation Total	91,885	378,563	-286,677
Grand Total	462,699	400,500	62,199

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

Please explain variances (if any)

A. Relief items, Construction, Supplies Overall Variance is CHF 32,361(10.7%) A slight over expenditure mainly attributed blankets costs ,and the inclusion of mosquito nets costs under Water ,Sanitation and Hygiene as explained below under each line item

1. Shelter - Relief : Variance is CHF 43,311 (100%) No expenditure here as 50 Tents and 100 Taupalins which were planned to be procured locally through the WFP stocks in bonded warehouse in Accra Ghana could not be achieved in time due to challenges getting customs exemption from the ministry of finance.

2. Clothing & Textiles Variance is CHF -7708(-38.6%) The high expenditure on this line item was due to the fact that an average cost a set of blankets was estimated at CHF 3.5 while the market price was about CHF 5 which then led to the increase in the total cost for 4000 blankets planned to be procured.
3. Water, Sanitation & Hygiene variance is CHF -17,361 (-18.6%) The variance is caused by an expenditure on Mosquito net costing CHF 18,150 which was booked jointly with Aquatabs as the two items were processed in the same invoice. With this correction, the correct amount expenditure on Water Sanitation and Hygiene would be CHF 92,739 which would have a variance less than 0.8%.
4. Cash Disbursement : Variance is CHF 14,119 (9.7%)-N/A
- B. Logistics, Transport & Storage Variance is CHF 4,035 (27.0 %) The sum total for this variance is explained in the lines below :
5. Storage: Variance is CHF 3,156 (88.8%) The variance here is related the storage costs which were not incurred as planned The local storage costs in the field were minimised as storage was mainly provided by collaborating institutions at no costs.
6. Distribution & Monitoring : Variance CHF -1,117 (-18.2%) The planned budget was exceeded due increased costs related to storage of NFIs during the distribution in the field which was not accurately anticipated during the budgeting process.
7. Transport & Vehicles Costs Variance is CHF 1,996 (37.9%) In the Transport and Vehicle costs , there were less expenses , against the planned costs.
- C. Personnel : Variance is CHF 16,877 (51.9%) Personnel costs were much lower than actuals , one contributing factor is the International staff whose costs were booked in workshop group, and the overall lower expenditure levels in the individual account groups as explained below.
8. International Staff: Variance is CHF 2,239 (100.0 %) The costs allocated to these budget lines were for Surge and the costs for Logistics and procurement officers who travelled to Ghana to provide support to the operation, however some costs for the surge were booked under 7003, 7002.
9. National Staff Variance is CHF 4,005 (92.9 %) The costs are allocated to NDRT deployment and regional staff monitoring visits , these costs were booked under National staff under volunteers costs.
10. National Society Staff Variance is CHF 5,701 (56.3 %) Actual costs incurred in the field and HQ level much lower than those anticipated , therefore a low expenditure overall.
11. Volunteers variance is CHF 4,932 (31.1%). Costs for volunteers incentives incurred over the period lower than anticipated due to reduced number of days volunteers were engaged over the implementation period.
- D. Workshops & Training Overall Variance is CHF 3,945 (16.8%) Workshops overall expenditure was high as explained below
12. Workshops & Training Variance is CHF 3945 (16.8%) The training costs were higher than planned due to averagely high hotel costs and the need to bring additional participants into the lessons learnt workshop from partners such as NADMO who are mandated by government to carryout Disaster Management and GRCS work in collaboration and coordination of NADMO.
- E. General Expenditure overall Variance is CHF 9075 (14.8%)The General expenditure recorded a lower expenditure level, this is one attributed to lower travel costs overall and NS admin costs having been included here rather than under National Society expenses. It is also contributed by a lower expenditure on Information and public relations account group.
13. Travel Variance is CHF 6,624 (25.8 %) Some travel costs have been included under workshops, due to coding issue during posting.
14. Information & Public Relations: Variance is CHF 3,755 (37.7%) Costs of T shirts, Engagements with Media much lower than initially planned in the budget, therefore creating a lower absorption level.
15. Office Costs Variance is CHF -89 (-4.4 %)
16. Communications Variance is CHF -335 (-1420.3 %) Communication costs were under budgeted therefore resulting into an over spend in the budget group.
17. Financial Charges Variance is CHF -743 (37.5%) Actual financial charges costs were higher than those projected at the budgeting stage.
18. Other General Expenses: Variance is CHF-137 (-0.6 %)-N/A



F. Indirect Costs Overall Variance is CHF 3,796 (13.4%) Variance as a result of overall lower expenditure against the sum total of items charged PSSR.

19. Programme & Services Support Recover: Variance is CHF 3,796 (13.4%) Variance as a result of overall lower expenditure against the sum total of items charged PSSR

H. Grand Total Overall Variance is CHF 62,199 (13.4 %) Variance as a result of overall lower expenditure against the sum total of the budget headings.



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