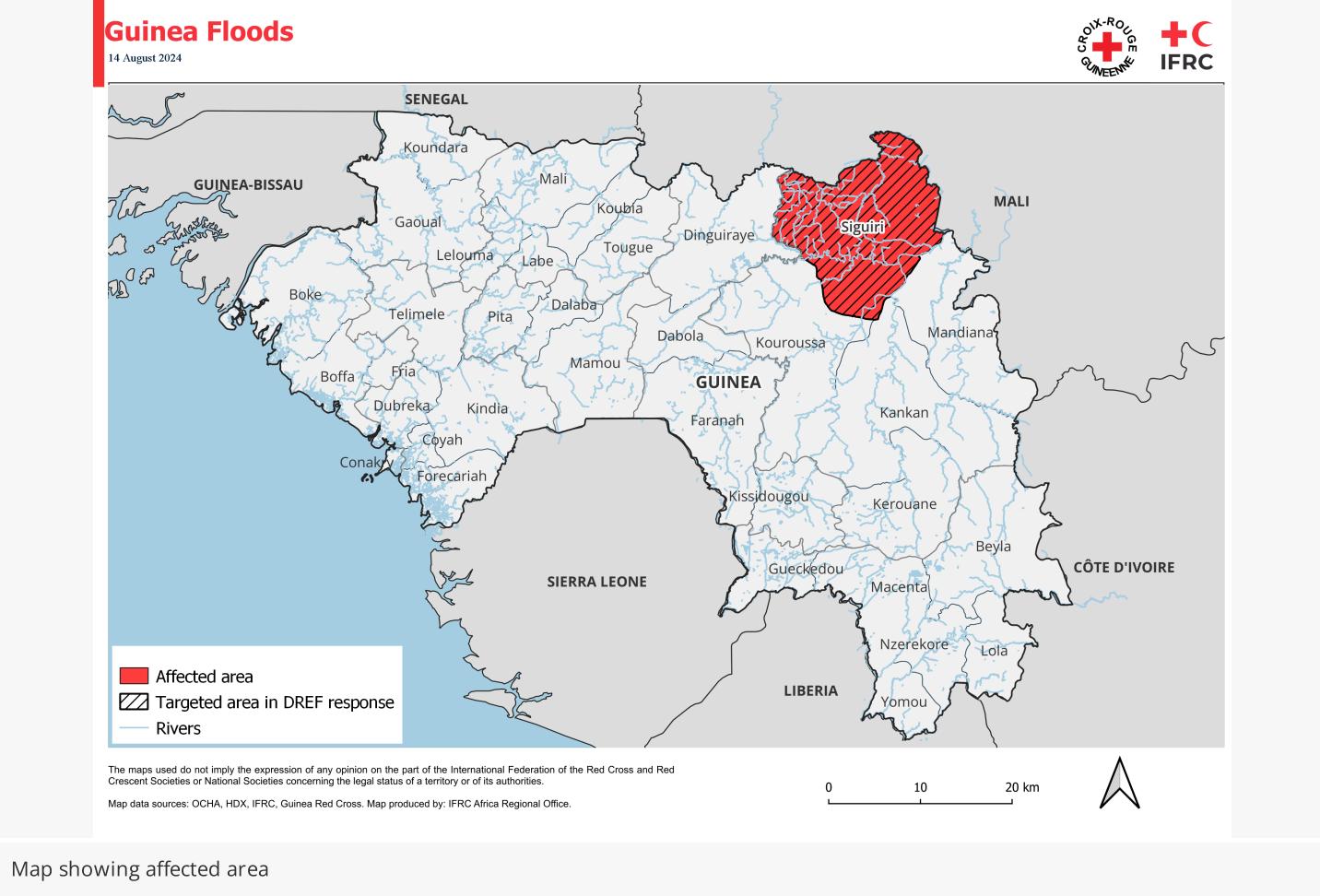




GRC Volunteers supporting with evaluation

Appeal: MDRGN017	Total DREF Allocation: -	Hazard: Flood	Crisis Category: Yellow
Glide Number: -	People at Risk: 19,195 people	People Targeted: 13,300 people	People Assisted: 13,731 people
Event Onset: Slow	Operation Start Date: 13-08-2024	Operational End Date: -	Total Operating Timeframe: 4 months
Targeted Regions: Kankan			

Description of the Event



Date when the trigger was met

30-07-2024

What happened, where and when?

During the night of 29 to 30 July 2024, intense rainfall led to widespread flooding and extensive damage across 14 neighborhoods in the urban commune of Siguiri and four surrounding sub-prefectures. The severity of the flooding caused significant disruption to lives, infrastructure, and livelihoods, particularly in densely populated and flood-prone areas.

In the immediate aftermath of the disaster, the Prefectural Committee of the Red Cross of Siguiri, through its Community Disaster Response Teams (CDRTs) and under the coordination of the National Disaster Response Team (NDRT), swiftly mobilized a response. A total of 50 volunteers and 5 supervisors were deployed to the field to carry out rapid assessments and offer initial assistance to the affected communities. This intervention was conducted in close collaboration with local authorities at all administrative levels; prefectural, sub-prefectural, communal, and neighborhood, ensuring that efforts were well-coordinated and community-specific needs were prioritized. The coordinated response enabled the Red Cross and its partners to quickly identify urgent needs and begin channeling targeted support to the most severely impacted populations. The flooding had a particularly devastating impact on several localities.

The most affected urban districts included BTN, Bolibana, Sigurikoura, Nankoda, Kokomo, Heremakonon, Chinese City, Tiguibiry, Konoba, Abatoire, Setceur TP, Téléladiji, ORS1, and Mandén. In the surrounding sub-prefectures, the worst-hit areas were:

- Kintinian, including Kintinian Center, Boukaria, Balata, and Kofilanin
- Djomabanan, including Djomanan Center and Karakoro
- Kinièbakoura, particularly Kinièbakoura Center
- Niandankoro, including Niandankoro Center and Damissakoro

These areas, already vulnerable due to geography and limited infrastructure, bore the brunt of the flooding, triggering a swift humanitarian response to mitigate further risks and support early recovery.





GRC Volunteers conducting search and rescue



Flooded Community

Scope and Scale

The flood on 30 July 2024, wreaked havoc across more than 23 localities, with the most severely affected areas being the urban municipality districts of BTN, Bolibana, Sigurikoura, Nankoda, Kokomo, Heremakonon, Chinese City, Tiguibiry, Konoba, Abatoire, Setceur TP, Téléladi, ORS1, and Mandén. Additionally, the sub-prefectures of Kintinian (including Kintian Centre, Boukaria, Balata, and Kofilanin), Djomabanan (including Djomanan Centre and Karakoro), Kinièbakoura (including Kinièbakoura Centre), and Niandankoro (including Niandankoro Centre and Damissakoro) were heavily impacted. These areas were characterized by high population density and were situated on the outskirts of Siguiri city, with the sub-prefectures located along the Niger River.

Over the previous five years, overcrowding and haphazard construction had characterized the new neighborhoods on the outskirts of the urban municipality. The lack of drainage canals, inefficient garbage management, and construction in flood-prone lowlands and along riverbanks had exacerbated the vulnerability of these communities. The Nanko River, which flows through the urban commune, further amplified the impact of heavy rainfall. This combination of long-term structural challenges, along with the intense rainfall experienced that year, culminated in the severe flooding.

Initial rapid assessments conducted by volunteers revealed significant impacts on the affected communities. Several individuals sustained injuries, and 3,863 families, totaling 19,195 people, were affected. Of these, 2,438 households, comprising 17,066 people, were identified as the most severely impacted. This group included 8,192 men; 8,874 women; 2,219 women of childbearing age; 6,926 children aged 0 to 5 years; 109 pregnant women; 423 lactating women; 215 persons with disabilities; 736 elderly individuals; 3,205 children sleeping under mosquito nets, and 211 pregnant women sleeping under mosquito nets.

The flood caused widespread damage to infrastructure and displacement. A total of 54 people were injured, 327 houses were affected, and 965 individuals were displaced. Additionally, 143 water points and 632 latrines were destroyed, while 68 host families who accommodated displaced persons were themselves impacted. The disaster also inflicted significant losses on agriculture and livestock, with 110 hectares of fields destroyed and 300 heads of livestock (106 goats and 194 sheep) lost.

Volunteers played a crucial role in the immediate response, providing first aid to the injured and assisting with evacuations. Five seriously injured individuals were evacuated to hospital after receiving first aid from volunteers. Furthermore, volunteers supported over 550 of the displaced people in reaching safe shelters such as schools, youth centers, and foster families.

In the aftermath of this disaster, affected communities and local authorities urgently sought support from humanitarian organizations and individuals of goodwill to assist in recovery and rebuilding efforts following the extensive damage sustained.

IFRC Network Actions Related To The Current Event

Secretariat	<p>The IFRC has a Country Delegation in Freetown, supporting the preparedness and response efforts of the National Societies in Sierra Leone, Guinea, and Guinea-Bissau. The Cluster Delegation has experienced professionals in operations management, disaster preparedness and response, National Society Development, PMER, and finance. The Delegation provided technical assistance to the Guinean Red Cross Society (GRC) in various areas, including humanitarian operations related to natural disasters, health services in remote areas, and long-term resilience-building programs.</p> <p>The IFRC coordinated support from its membership to the GRC, enhanced the GRC's organizational development, and represented the Guinean Red Cross internationally. From the onset of the flood response, the IFRC Country Delegation engaged closely with GRC leadership and the disaster management team to identify intervention areas, roles, and responsibilities. This coordination included Red Cross Red Crescent Movement partners, national and international NGOs, and donors, ensuring a unified and efficient response. Established communication channels and protocols facilitated real-time information sharing and decision-making, enabling quick and coordinated actions on the ground.</p> <p>Through the response supported by the DREF, the IFRC country office in Freetown supported the GRC throughout the implementation of the response, ensuring sustained capacity to address both immediate and evolving needs. The Cluster Delegation deployed an operations focal point to support the initial phase of the response, and technical colleagues, including the Senior PMER officer, undertook support missions to enhance quality, accountability, and learning. By strengthening the GRC's organizational development and resilience, the IFRC contributed to better equipping the GRC to manage future emergencies more effectively and efficiently.</p>
Participating National Societies	<p>The French Red Cross provided active support to the Guinean Red Cross by strengthening its capacity in commercial first aid and psychosocial support programs, specifically targeting individuals living with HIV/AIDS. Meanwhile, the Italian Red Cross, through its regional office in Dakar, contributed to capacity building in nautical rescue and disaster risk reduction. However, it is important to note that none of the Movement partners provided financial support for the National Society's flood response operations.</p>

ICRC Actions Related To The Current Event

The International Committee of the Red Cross (ICRC) has not maintained a physical presence in Guinea since 2020. However, through its Regional Delegation in Abidjan, the ICRC continued its collaboration with the Guinean Red Cross to strengthen the capacity of local committees in areas affected by socio-political and inter-community violence. It also supported the implementation of the Restoring Family Links (RFL) program, assisting migrants, victims of violence, and those impacted by disasters. Despite this ongoing partnership, the ICRC did not provide any financial or technical support for the Guinean Red Cross's flood response operations.
--

Other Actors Actions Related To The Current Event

Government has requested international assistance	Yes
National authorities	Since the start of the assessment, the Guinean Red Cross closely collaborated with the National Agency for the Management of Emergencies and Humanitarian Disasters (ANGUCH) through its prefectural representation. Coordination also extended to town



	halls, local neighborhood committees, civil protection agencies, and the administrative authorities of the Siguiri prefecture.
	Following an initiative by the authorities, emergency meetings were convened during which humanitarian organizations were called upon to support the flood-affected populations. While the Guinean Red Cross actively provided first aid services, ANGUCH focused on mobilizing resources from local institutions and national stakeholders to assist the victims. ANGUCH coordinated the overall flood response to ensure impactful interventions, facilitate rapid recovery, and prevent duplication of efforts among partners.
UN or other actors	N/A

Are there major coordination mechanism in place?

In the aftermath of the floods, a crisis coordination meeting was convened by the Prefect of Siguiri, bringing together key stakeholders, including the Guinean Red Cross, civil protection services, and municipal authorities. This meeting led to the activation of several emergency response mechanisms. A first aid station was established at Siguiri City Hall, and the Mayor authorized the use of schools as temporary shelters for displaced families. The Guinean Red Cross was tasked with leading immediate support activities and conducting a rapid emergency needs assessment. At the national level, the National Director of ANGUCH visited the affected areas to reinforce coordination on the ground. Furthermore, a high-level interministerial coordination commission, led by the Prime Minister’s Office, was established to oversee and harmonize the national response efforts across sectors.

Needs (Gaps) Identified



Shelter Housing And Settlements

The flood incident caused significant losses within the affected communities; however, the structural integrity of most houses remained largely intact. A rapid assessment conducted after the flooding confirmed that, while the buildings themselves were not extensively damaged, floodwaters severely affected household contents. Essential belongings such as furniture, cooking utensils, and bedding were either destroyed or rendered unusable, highlighting a critical need for replacement of household items rather than shelter reconstruction.

The assessment revealed that the immediate priority was not the rebuilding of houses, but rather the replacement of essential household and non-food items (NFIs). The floodwaters destroyed crucial items such as blankets, mats, and kitchen kits, vital for maintaining basic living conditions. The loss of these items left families without the necessary tools for daily living, significantly affecting their comfort, hygiene, and cooking capabilities.

In light of these findings, the response prioritized the provision of essential household and non-food items. Distributions of blankets, mats, and kitchen kits enabled affected families to restore minimum living conditions and address the immediate discomfort and instability caused by the disaster. This approach helped families to resume their daily routines and better maintain health and hygiene in the aftermath of the flood.



Livelihoods And Basic Needs

The affected localities were grappling with the severe impacts of climate change, which resulted in increasingly frequent and intense climatic shocks. These adverse conditions had already disrupted local livelihoods and income-generating activities, further worsening the living conditions of the population. The flood significantly compounded these challenges, leaving many families facing a serious decline in their well-being.

The flood caused extensive losses, impairing the ability of families to engage in their regular economic activities and deepening pre-existing vulnerabilities. The destruction of crops, damage to tools, and disruption of local markets severely undermined the livelihoods of those affected. As a result, a critical shortage of both food and income emerged, placing immense pressure on already vulnerable households.

At the time of assessment, affected individuals were experiencing severe difficulties, including acute food shortages and increased struggles to meet basic daily needs. Given the scale of the losses and the consequences of the flooding, addressing the immediate food



needs of these families was identified as a priority. Food assistance was deemed essential to help affected populations recover from the shock and begin stabilizing their living conditions.

In the absence of immediate food support, the risk of further deterioration in the already fragile conditions of the affected populations was high. Ensuring timely access to sufficient food was necessary to support early recovery, enable families to regain a sense of stability, and facilitate the restoration of their livelihoods.



Health

The health situation of the flood-affected population deteriorated rapidly due to their heightened vulnerability. Immediate actions were required to prevent a rise in waterborne diseases, malnutrition, and related health complications that threatened to severely affect their overall well-being. The rainy season further intensified the risk of malaria, especially among children and pregnant women. The region was already susceptible to waterborne illnesses and malnutrition, and even prior to the floods, Siguiri had experienced outbreaks of polio and diphtheria.

Given these compounding factors, there was an urgent need to distribute mosquito nets and implement comprehensive awareness and training campaigns focused on the prevention of waterborne diseases. Addressing these needs were essential to avert a potential public health crisis and safeguard the health and resilience of the affected communities.



Water, Sanitation And Hygiene

The floods severely compromised the community's water supply, as contamination from overflowing latrines and wastewater led to a critical shortage of safe drinking water. This situation created a highly unsanitary environment, further aggravated by increased open defecation. Consequently, there was an urgent need for essential hygiene and sanitation items, including soap, jerry cans, and the establishment of emergency latrines.

Water treatment solutions were required to ensure the safety of available water sources. There was also a pressing need for the physical sanitation of affected living areas to reduce the risk of disease. Addressing these needs promptly was vital to preventing potential outbreaks of waterborne illnesses and to improving the overall health and safety of the impacted communities.



Protection, Gender And Inclusion

The flood-affected communities presented diverse vulnerabilities requiring a response that prioritized protection, gender, diversity, disability, and minority considerations. Rapid assessments identified that women, children, persons with disabilities, and marginalized groups faced heightened risks related to displacement, lack of access to services, and exposure to unsafe environments. These groups also had varying coping capacities and specific needs that differed by age, gender, and ability.

A gender and diversity analysis were conducted to better understand these disparities and tailor the response accordingly. The analysis revealed the need for gender-sensitive hygiene promotion activities, adjusted distribution times to ensure women and caregivers could safely participate, and inclusive messaging to reach all segments of the population.

To ensure safe and effective engagement with communities, response teams were equipped with essential personal protective equipment (PPE), including raincoats, boots, bibs, flashlights, and megaphones. These tools enabled teams to carry out field activities safely during adverse weather conditions and in flood-damaged environments.

Ultimately, protection, gender, and inclusion considerations were embedded throughout the operation to safeguard dignity, ensure equitable access to aid, promote community participation, and enhance the overall safety and effectiveness of the response.



Community Engagement And Accountability

The response strategy prioritized a participatory approach, emphasizing community engagement and the active involvement of administrative authorities throughout the entire process, including evaluation, targeting, and distribution operations. This approach was essential to ensuring that the needs of the most vulnerable populations were effectively addressed. The Guinea Red Cross worked closely

with both beneficiary and non-beneficiary committees to oversee the operation, ensuring transparency and accountability. These committees managed potential complaints and served as a platform for feedback from all affected groups.

Operational Strategy

Overall objective of the operation

The objective of this operation was to deliver shelter assistance through the distribution of household and non-food items (NFIs), support livelihoods, and improve health and hygiene practices. The intervention aimed to provide emergency relief to 1,900 households (13,300 people) affected by the floods in Siguiri Prefecture, covering 14 districts in the urban commune and 4 sub-prefectures including Kintinia, Kinièbakoura, Djomaban, and Niandan Koro. The operation was implemented over a period of 4 months to ensure the timely and effective completion of all activities.

Operation strategy rationale

The four-month intervention was designed to deliver comprehensive and targeted support to 1,900 households (13,300 people) impacted by the floods in Siguiri Prefecture. The strategy focused on three key areas: provision of essential household and non-food items (NFIs), water, sanitation, and hygiene (WASH) interventions, and food support through a multipurpose cash transfer (MPCT) approach.

The Guinean Red Cross had established a money transfer platform in partnership with Orange, utilizing the Orange Money service. This collaboration began in 2018 through an annual agreement that renewed automatically, initially set up as part of the AMIRA Project to address the immediate needs of returning migrants. The platform's effectiveness was validated by the IFRC's Sahel Plus Cluster after a thorough review of contract clauses and procedures. Since its validation, this platform proved instrumental in supporting cash transfer programs for various emergencies, including COVID-19 and floods in Kankan, Siguiri, and Coyah. Orange provided extensive network coverage across the entire country, with agents and agencies in all prefectures and sub-prefectures. Notably, Siguiri, being a mining area, benefited from particularly strong Orange mobile network coverage, ensuring reliable and efficient cash transfer operations.

This holistic response aimed to restore dignity, promote resilience, and facilitate recovery for the affected communities.

1. Multipurpose Cash Transfers (MPCT) - Target: 1,900 households

The MPCT approach was a cornerstone of the operation, designed to meet the specific needs of each household while supporting the broader recovery of local markets. The rationale behind this strategy included:

- **Household Recovery:** Floodwaters led to the loss of essential household items, even though homes remained structurally intact. Each household received GNF 860,000 (CHF 86) to cover 1 kitchen set (GNF 500,000), 3 sleeping mats (GNF 165,000), and 3 blankets (GNF 195,000) to replace critical items. This ensured that families could swiftly regain their standard of living.
- **Economic Stability:** The floods disrupted livelihoods, making economic support essential. An additional cash transfer of GNF 875,775 (CHF 88), based on Guinea's minimum food baskets—including 50kg rice, 1 kg dry beans, cooking oil, fine salt, sugar, and onions—was provided to cover two months of nutritional needs.

Cash transfers empowered households to make decisions best suited to their needs, restoring dignity and providing flexibility in recovery. Moreover, cash-based interventions stimulated local markets, aiding their recovery and contributing to the community's overall economic resilience.

2. Water, Sanitation, and Hygiene (WASH) - Target: 13,300 people

The WASH component was critical to preventing health crises and ensuring the well-being of the affected population. Key activities included:

- **Provision of WASH Kits:** Each household received GNF 193,000 (CHF 19) including a bucket with lid, two jerry cans, soap, chlorine, and hygiene kits to support basic hygiene and sanitation needs.
- **Sanitation Campaigns:** Community-led activities focused on cleaning drainage systems, waterways, and waste disposal sites to prevent disease spread and ensure a healthier living environment.

Overall, the multipurpose cash transfer provided funds for household kits, NFIs, WASH and hygiene kits, and two months of food support to 1,900 households, totaling GNF 1,928,775 (CHF 193) per household. This approach helped restore essential items, significantly alleviated the immediate burden on affected families, and supported their recovery process.

3. Health (Target: 13,300 people)

Health risks were heightened after the floods, necessitating focused intervention:

- **Volunteer Training:** 90 volunteers were trained in first aid, psychosocial support, and health promotion. They played a crucial role in



raising community awareness, managing waste, and maintaining drainage systems.

- Health Support: First aid and psychosocial assistance were provided to affected families, addressing immediate health needs and mitigating disease outbreak risks.

Through early intervention and targeted health education, the response significantly minimized the risk of disease transmission while strengthening community capacity to manage health-related challenges. The involvement of trained volunteers played a key role in equipping households with practical knowledge and preventive practices, ultimately fostering a healthier and more resilient population.

The response strategy, combining MPCT, WASH interventions, and health promotion, was designed to provide immediate relief while laying the foundation for long-term recovery and resilience. The rationale behind each component underscored the effectiveness of cash-based interventions, the critical importance of WASH, and the need for proactive health measures. With a clear focus on restoring dignity, promoting economic stability, and safeguarding health, this intervention aimed to deliver meaningful, sustainable impact in Siguiri Prefecture.

Local committees oversaw beneficiary selection and fund utilization, ensuring transparency and community ownership. A market assessment was conducted before cash distribution to ensure feasibility, while post-distribution monitoring evaluated the intervention's effectiveness and guided necessary adjustments. The inclusion of community-led processes and rigorous monitoring ensured the intervention was both effective and responsive to evolving needs.

A robust community feedback mechanism was established to enhance accountability and responsiveness. This system facilitated collection and resolution of complaints and claims from beneficiaries through two main communication channels: community-based committees monitoring progress and managing grievances, and a team of trained volunteers skilled in community engagement and accountability (CEA) and complaint management. These volunteers promptly received and addressed complaints.

This participatory strategy fostered trust, improved operational transparency, and ensured the response was tailored to the specific needs and concerns of the affected communities. By integrating community feedback and actively involving local stakeholders, the Guinean Red Cross enhanced the intervention's effectiveness and efficiency, ensuring responsiveness and accountability.

A comprehensive gender and diversity analysis was conducted across all sectors, including WASH and shelter, to understand impacts on various groups and tailor the response accordingly. All sectors adhered to IFRC's minimum standards for protection, gender, and inclusion in emergencies.

The Protection, Gender, and Inclusion (PGI) Focal Point ensured all volunteers completed a brief online introduction on sexual and gender-based violence case disclosure and referral via PSEA videos, with compliance reported in the operation's activity report. Additionally, the Monitoring and Assessment Framework (MAF) integrated Essential Response Plan (ERP) questions into future assessments to better identify needs and implement targeted actions.

Targeting Strategy

Who was targeted by this operation?

The DREF operation supported 13,300 individuals (1,900 households) affected by the floods in Siguiri Prefecture. The Guinean Red Cross identified and prioritized support for vulnerable groups, including children, the elderly, pregnant women, people with disabilities, and marginalized communities. Community engagement was conducted to ensure that the basic needs of the affected population were effectively addressed. A registration and profiling system was established to collect information on family size, income, housing conditions, and specific vulnerabilities. This enabled the creation of detailed beneficiary profiles, allowing for the categorization and prioritization of aid based on the severity of needs. The Guinean Red Cross used these profiles to ensure that the most vulnerable were given priority.

Explain the selection criteria for the targeted population

Assessment of Needs:

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

Priority Considerations:

- Households listed as poor or near-poor in the most recent assessments.



- Households that had not received assistance or had received minimal support from other agencies.
- Households without a sustainable source of income or livelihoods.
- Households with individuals with disabilities or chronic illnesses.
- Households led by women.
- Households with pregnant or lactating women.
- Households with elderly individuals (over 65 years).
- Households with children under 5 years.

Total Assisted Population

Assisted Women	6,998	Rural	-
Assisted Girls (under 18)	6,733	Urban	-
Assisted Men	-	People with disabilities (estimated)	-
Assisted Boys (under 18)	-		
Total Population Assisted	13,731		
Total Targeted Population	13,300		

Risk and Security Considerations (including "management")

Does your National Society have prevention of sexual exploitation and abuse policy?	Yes
Does your National Society have child protection/child safeguarding policy?	Yes

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

Risk	Mitigation action
Rising prices, currency inflation, and market revaluation	Budget restraints were applied during planning, and cash adjustments took into account inflation and rising prices. The National Society monitored the market and adjusted the planning accordingly.
Retraining people posing as concerned	Verification and validation of the list of affected individuals were carried out, involving both community leaders and local authorities in the process.
The unstable nature of the country's economy has the potential to cause inflation and frequent price changes that would affect planned activities	The GRCS and IFRC cluster teams facilitated all processes and ensured that the approval of the Emergency Plan of Action (EPOA) was issued in a timely manner.

Please indicate any security and safety concerns for this operation:

Siguiri posed a considerable risk during the operation due to its proximity to the Republic of Mali, which exposed the area to a range of cross-border criminal activities. Crimes of opportunity such as pickpocketing, bag snatching, theft of valuables from vehicles, assaults, and residential burglaries were of particular concern. Low-level criminal activity was noted in crowded areas, especially markets. Poor road conditions throughout Guinea, including in Siguiri, further complicated movement and logistics. Although many roads were paved, they were severely degraded, with large potholes that made travel challenging.

Demonstrations occurred frequently, particularly in Conakry and Siguiri, and sporadic protests took place across the country. Some of



these demonstrations turned violent, resulting in injuries and, in some cases, fatalities. While kidnappings did occur in Guinea, they were primarily concentrated in remote regions of Conakry and typically involved individuals known to the captors.

Medical care remained sub-standard throughout the country. Public hospitals were often under-resourced and lacked advanced medical technology, although certain private facilities provided relatively better care.

To mitigate these risks and ensure the protection of GRCS personnel and the smooth implementation of program activities, adequate security measures were put in place. The situation was closely monitored, and timely safety advisories were issued to field staff. GRC personnel were easily identifiable through the use of official visibility items. All staff involved in the operation had completed mandatory IFRC online security courses, including Stay Safe Personal Security, Security Management, or Volunteer Security. Furthermore, all volunteers and staff adhered strictly to security protocols established by the Movement and local authorities to minimize exposure to risks.

Has the child safeguarding risk analysis assessment been completed?

Yes

Implementation



Multi Purpose Cash

Budget: CHF 395,522

Targeted Persons: 13,300

Assisted Persons: 13,731

Targeted Male: 6,733

Targeted Female: 6,998

Indicators

Title	Target	Actual
# of HHs provided with multi-purpose cash	1,900	1,900
# of volunteers trained and engaged in cash activities	50	50
% of the target satisfied with the cash provided to support their needs	70	90
# of PDM conducted	1	1

Narrative description of achievements

- **Training of 50 Volunteers on Cash Transfer and Household Registration:** The Guinea Red Cross (GRC) conducted training session for 50 volunteers on cash transfer protocols, digital household registration, and the ethical handling of sensitive data. The training covered the use of the Kobo Collect platform for digital data entry, criteria for assessing household vulnerability, principles of community engagement, and procedures for verifying beneficiary identity. Volunteers were equipped with the necessary tools to collect accurate, real-time data from affected households, which served as the backbone for targeting decisions. The training also included scenario-based simulations, enabling volunteers to practice interactions with beneficiaries and troubleshoot common challenges. This preparation was pivotal in promoting the accuracy, transparency, and fairness of the MPCT intervention. As a result, data errors were minimized, and the targeting process reflected community realities, thereby increasing acceptance and trust in the overall response.

- **Market Assessment:** A rapid yet thorough market assessment was carried out to assess the functionality and capacity of local markets to support cash-based interventions. Data were collected from vendors, market officials, and local authorities regarding the availability and pricing of essential goods such as food staples, kitchen utensils, bedding, and hygiene items. The assessment confirmed that key items were available in sufficient quantities and that vendors had the supply chain strength to meet heightened demand without causing supply shocks. Importantly, the analysis showed that no major inflationary trends were expected, given the resilience of Siguirir's economy as a regional trade and mining hub. This market intelligence directly influenced the determination of the cash transfer value



(GNF 1,928,775) and the assurance that recipients could procure all needed items locally. The market assessment not only safeguarded against unintended harm (e.g., price hikes) but also encouraged local economic activity, with vendors reporting increased turnover during the transfer period.

- **Establishment of Targeting Committees and Beneficiary Briefings:**

To promote local ownership and ensure community relevance in the selection process, targeting committees were established in all intervention areas. These committees included a cross-section of community representatives: local chiefs, women's leaders, youth groups, and volunteers. Their role was to validate household vulnerability criteria, confirm eligibility, and support grievance resolution mechanisms. These committees worked alongside trained volunteers during registration to provide contextual insight and prevent exclusion errors. Simultaneously, beneficiary briefing sessions were held to inform selected households about their entitlements, how to access the funds via the Orange Money platform, and how to report complaints or request clarification. By integrating local leadership and providing clear communication to beneficiaries, the process-built transparency and accountability into the heart of the intervention. This community-based model significantly reduced social tension and increased participation, as many beneficiaries felt reassured by the familiar presence of local committee members during targeting.

- **Cash Transfer to 1,900 Households:** The cash transfer phase marked the core delivery of assistance, reaching 1,900 households (approx. 13,300 individuals) affected by the floods. Each household received GNF 1,928,775 through the Orange Money mobile platform to purchase essential items; non-food items (NFIs), hygiene materials, and two months of food staples. The mobile money approach was particularly effective in Siguiri, where network coverage is strong and mobile agents are widely available. The process was smooth, with most households able to redeem their transfers within 48 hours. Impact data gathered post-transfer showed that families prioritized food (especially rice, beans, oil), kitchen utensils, sleeping mats, and blankets, items that were damaged or lost during the floods. Many households also reported feeling a restoration of dignity and autonomy, as the flexible nature of cash allowed them to make choices best suited to their household needs. Importantly, the infusion of liquidity into local markets also boosted vendor income, creating a positive ripple effect beyond the targeted households.

- **Deployment of Volunteers for Monitoring During Transfers:** During the disbursement period, 50 trained volunteers were strategically deployed to monitor transfer activities and provide real-time support to beneficiaries. Their responsibilities included verifying recipient identity, resolving SIM-related issues, assisting individuals with limited literacy or mobility, and reporting any irregularities. In cases where households faced delays in receiving SMS notifications or accessing agents, volunteers coordinated with Orange Money representatives to ensure timely resolution. Their field presence was instrumental in safeguarding inclusion and equity, particularly for vulnerable groups such as the elderly, women-headed households, and persons with disabilities. This real-time support greatly reduced stress for beneficiaries, enhanced operational efficiency, and mitigated the risk of fraud or exploitation.

- **Post-Distribution Monitoring (PDM):** Following the completion of cash disbursements, the GRC deployed 30 volunteers over a three-day period to conduct post-distribution monitoring (PDM). The PDM collected feedback through household surveys, community focus group discussions, and key informant interviews. Analysis of the data revealed a beneficiary satisfaction rate exceeding 90%, with respondents citing the timeliness, adequacy, and flexibility of the cash support. A majority of households indicated that the assistance directly contributed to restoring their living conditions and helped them avoid negative coping strategies such as borrowing, selling assets, or reducing meal sizes. Feedback also showed a strong preference for cash over in-kind support, with many expressing appreciations for the freedom to choose how best to allocate the funds. The PDM findings validated the effectiveness of the MPCT model and will inform future programming by the GRC and IFRC in similar contexts.

Lessons Learnt

- The early and sustained involvement of local leaders, targeting committees, and community members helped build trust and ownership over the process. This participatory approach not only minimized disputes during household selection but also improved the accuracy of vulnerability targeting. Future interventions should maintain or even strengthen this approach to promote accountability and local buy-in.

- The flexibility and dignity provided by cash assistance were widely appreciated by recipients. The intervention allowed households to meet their own priorities, especially food, bedding, and kitchen items without dependency on pre-packaged kits. This confirms that MPCT is a highly appropriate modality in contexts where markets are functional. Future responses should prioritize cash assistance where market conditions allow.

- The training of volunteers in digital data collection (Kobo Collect), cash protocols, and community engagement proved essential. Well-prepared volunteers ensured accurate registration, smooth implementation, and effective post-distribution monitoring. Investments in volunteer capacity not only improved data quality but also strengthened field-level problem-solving and accountability.

- The pre-distribution market assessment helped prevent inflation and supply disruptions while confirming the adequacy of transfer amounts. This reinforced the need for context-specific market analysis before any cash intervention. Markets must not only be functional but capable of absorbing increased demand without negatively affecting prices or availability.



- Setting up clear communication and complaints channels ensured that beneficiary voices were heard, and concerns addressed promptly. This improved beneficiary confidence in the process and highlighted the value of two-way communication. Future programs should continue to institutionalize feedback and response mechanisms.

- By combining MPCT with WASH and health support, the operation addressed both immediate and longer-term recovery needs. This comprehensive approach reduced the likelihood of negative health outcomes and reinforced household stability. Future interventions should seek similar integration across sectors to enhance impact.

Challenges

- Despite strong Orange network coverage in Siguiri overall, some remote or rural zones experienced weak signal strength, which delayed or complicated access to mobile cash for certain beneficiaries. Some households required technical support to activate SIM cards, update identification details, or complete the withdrawal process.



Budget: CHF 25,986

Targeted Persons: 13,300

Assisted Persons: 13,731

Targeted Male: 6,733

Targeted Female: 6,998

Indicators

Title	Target	Actual
# of households provided with mosquito nets	1,900	1,900
# of Volunteers trained on PSS , First Aid , Health promotion	90	90
# of people reached with immediate health support	13,300	13,731

Narrative description of achievements

- Training of 90 Volunteers on Psychosocial Support (PSS), First Aid, Epidemic Prevention and Control (EPIC), and Health Promotion: The DREF Operation trained 90 volunteers over a three-day intensive program covering essential topics including psychosocial support, first aid techniques, epidemic prevention and control measures, and health promotion strategies. This comprehensive training enabled volunteers to respond effectively to a range of health-related challenges during the flood emergency. By equipping volunteers with practical skills and knowledge, the program ensured a strong, community-based health response capacity. The trained volunteers served as frontline responders, delivering timely health interventions and education to the affected population. This training was crucial in extending health services rapidly and widely, especially in remote or hard-to-reach areas.

- Provision of First Aid to Injured Victims: Throughout the intervention, volunteers provided immediate first aid to 14,420 affected individuals suffering injuries or health complications related to the flooding. These emergency treatments included wound care, management of minor injuries, and stabilization prior to referral where necessary. First-aid provision was critical in reducing morbidity, preventing secondary infections, and alleviating the burden on local health facilities already strained by the disaster. The timely care delivered by volunteers contributed to improved health outcomes and minimized complications among affected populations.

- Distribution and Installation Training of Long-Lasting Insecticidal Nets (LLINs): A total of 1,900 households received two LLINs each to protect families against malaria, a heightened risk in the flood-affected areas due to increased mosquito breeding sites. Distribution was accompanied by targeted training sessions for community members on correct installation, maintenance, and the importance of consistent use of the nets. Follow-up visits indicated high usage rates, confirming that training reinforced community adherence. The provision of LLINs significantly reduced malaria incidence risk and contributed to safeguarding vulnerable groups such as children under five and pregnant women.

- Provision of Psychosocial Support (PSS) to Affected Populations:



In recognition of the emotional and psychological toll of the floods, volunteers delivered PSS sessions to individuals and groups within the affected communities. These sessions provided a safe space to address trauma, reduce anxiety, and strengthen mental well-being. The psychosocial support activities fostered community resilience and helped individuals cope with loss and disruption. Feedback from beneficiaries highlighted a positive impact on their mental health and a sense of being supported during a difficult time.

- **Production and Dissemination of Hygiene Promotion Posters (IEC):**

Complementing face-to-face health education, the program developed and distributed culturally appropriate hygiene promotion posters across the intervention areas. These IEC materials focused on critical health messages, including handwashing, disease prevention, and safe water practices. The visual aids enhanced message retention and reached broader audiences, including those who could not attend community sessions. The posters reinforced healthy behaviors and supported ongoing health promotion efforts.

- **Regular Hygiene and Sanitation Campaigns:** Volunteers organized hygiene and sanitation campaigns twice weekly over a three-month period, mobilizing community members to clean water sources, latrines, and public spaces. These campaigns were vital in minimizing health risks by addressing environmental contamination, which could contribute to outbreaks of waterborne and vector-borne diseases. Community engagement in these activities increased awareness of health risks and encouraged sustained sanitation practices.

- **Provision of Personal Protective Equipment (PPE) to Volunteers:** To ensure the safety and wellbeing of volunteers working in challenging flood conditions, personal protective equipment such as gloves, boots, mufflers, and raincoats was provided. This PPE was essential for maintaining uninterrupted service delivery while protecting volunteers from hazards and potential infections.

Lessons Learnt

- The multi-topic training covering psychosocial support, first aid, epidemic control, and health promotion significantly improved volunteers' confidence and effectiveness. Integrating practical sessions and community engagement strategies prepared volunteers to adapt quickly to diverse health needs in flood-affected areas.

- Deploying trained volunteers from within or near the affected communities ensured faster response times, cultural sensitivity, and greater trust from beneficiaries. This approach facilitated high participation in health promotion activities and uptake of preventive measures like mosquito net usage.

- The distribution of mosquito nets coupled with hands-on installation training and hygiene promotion posters ensured not only access but also proper use of health commodities. This synergy enhanced the sustainability of health gains beyond the immediate emergency phase.

- Equipping volunteers with personal protective equipment enabled them to work safely in challenging flood conditions, preventing illness and injury among frontline workers, and ensuring uninterrupted service delivery.

Challenges

- N/A



Water, Sanitation And Hygiene

Budget: CHF 1,757

Targeted Persons: 13,300

Assisted Persons: 13,731

Targeted Male: 6,733

Targeted Female: 6,998

Indicators

Title	Target	Actual
% of affected households, which receive support in terms of health promotion and hygiene awareness	100	100
# of households assisted with WASH items via cash	1,900	1,900



# of latrines disinfected	309	309
# of households having access to safe drinking water	1,900	1,900
# of volunteers trained to carry out WASH activities	90	90
# of people reached with key messages of health promotion and personal and community hygiene	13,300	137,310

Narrative description of achievements

- **Training of 90 Volunteers on WASH Promotion and Disease Prevention:** The Guinea Red Cross trained 90 volunteers on essential water, sanitation, and hygiene promotion activities, focusing on menstrual hygiene management, Epidemic Control for Volunteers (ECV), and the use of Minimum Initial Laundry and Disinfection Actions (MILDAs). These volunteers became key agents in disseminating vital health messages, reaching approximately 1,420 people with information on personal and community hygiene, waterborne disease prevention, and safe hygiene practices. The training significantly enhanced the volunteers' capacity to conduct effective awareness-raising sessions, leading to increased community knowledge and adoption of healthier behaviors that contributed to reducing the risk of disease outbreaks in the flood-affected areas.
- **Initial Assessment of WASH Situation:** An initial assessment was conducted in all target communities to establish a clear understanding of existing water sources, sanitation infrastructure, hygiene practices, and potential health hazards amplified by flooding. This assessment identified urgent needs such as damaged latrines, contamination of water points, and poor waste management. These findings guided the prioritization of interventions, ensuring resources were allocated effectively to communities most at risk. The assessment also helped set realistic targets and benchmarks for ongoing monitoring.
- **Continuous Monitoring of WASH Conditions:** Trained volunteers carried out continuous monitoring visits throughout the intervention period to track changes in the WASH situation. These regular assessments enabled timely identification of emerging challenges such as water contamination or deterioration of sanitation facilities. Real-time feedback from monitoring visits allowed program managers to adapt activities quickly, maintaining the relevance and effectiveness of the response. This ongoing vigilance helped sustain improvements in hygiene practices and prevented potential health crises.
- **Organization of Six Sanitation Campaigns:** Six community-led sanitation campaigns were organized over three months, with two campaigns held monthly. These campaigns mobilized local residents to clear drainage canals, remove accumulated waste, and improve overall environmental sanitation. The campaigns fostered community ownership and collective responsibility for maintaining hygiene, contributing to a cleaner living environment and a reduction in vector breeding sites. The improved sanitation conditions played a crucial role in lowering the incidence of waterborne and vector-borne diseases within affected communities.
- **Training on Safe Water Storage and Use of Treatment Products:** Community members in targeted areas received training on the proper storage of drinking water and the safe use of water treatment products such as chlorine tablets. These sessions empowered households to take active steps to prevent water contamination at home. Improved water handling practices directly contributed to reducing diarrheal disease cases and other waterborne illnesses, enhancing overall community health and resilience.
- **Cash Transfers for WASH Items Purchase:** Through the multipurpose cash transfer program, 1,900 households received funds specifically intended for purchasing essential WASH items, including buckets with lids, jerry cans, soap, and hygiene kits. This approach enabled families to meet their individual needs flexibly and promptly. The cash transfers also stimulated local markets by increasing demand for hygiene products, thereby supporting local economic recovery. Importantly, all beneficiary households reported improved access to safe drinking water and hygiene supplies, which helped restore dignity and promoted healthier living conditions.
- **Disinfection of Latrines in Siguiri Sub-Prefecture:** A total of 309 latrines were disinfected in the Siguiri sub-prefecture by trained volunteers and sanitation teams. This targeted action reduced contamination risks and helped curb the spread of diseases in the aftermath of flood damage to sanitation infrastructure. The disinfection campaign improved sanitary conditions in both displaced and host communities, contributing to a safer and healthier environment.

Lessons Learnt

- The success of sanitation campaigns and hygiene promotion was greatly enhanced by strong community involvement. Mobilizing local leaders and volunteers fostered ownership and encouraged sustained hygienic practices beyond the intervention period. Future programs should prioritize participatory approaches and leverage local knowledge for more effective behavior change.
- Training 90 volunteers on WASH and disease prevention equipped them to become trusted health promoters within their communities.



Their involvement ensured broad reach and consistent messaging. This investment in local human resources not only improved the immediate response but also strengthened community resilience for future emergencies.

- Providing households with cash to purchase WASH items allowed them to prioritize needs based on their unique circumstances. This approach increased beneficiary satisfaction and dignity while simultaneously stimulating local markets. Cash-based interventions should continue to be integrated into WASH responses where market conditions permit.

- Close coordination between WASH teams, health promoters, and local authorities ensured that activities such as latrine disinfection and sanitation campaigns complemented health promotion and other response efforts. Integrated programming improves overall health outcomes and resource use efficiency.

Challenges

- Despite successful trainings and awareness campaigns, some hygienic behaviors, such as consistent water treatment and safe storage, required prolonged engagement and reinforcement. Sustained community education and follow-up are essential for lasting impact.



Protection, Gender And Inclusion

Budget: CHF 0

Targeted Persons: 13,300

Assisted Persons: 13,731

Targeted Male: 6,733

Targeted Female: 6,998

Indicators

Title	Target	Actual
# of staff briefed on PGI and PSEA and the implementation of PGI minimum standards	10	10
# of volunteers briefed on PGI and PSEA and the implementation of PGI minimum standards	90	90
# of people reached with PGI and PSEA sensitizations by volunteers	13,300	13,731

Narrative description of achievements

- Briefing of Staff on PGI and PSEA and Implementation of PGI Minimum Standards: The Guinean Red Cross conducted briefing sessions for all operational staff at the onset of the intervention. These sessions covered the fundamental principles of Protection, Gender, and Inclusion (PGI), as well as Prevention of Sexual Exploitation and Abuse (PSEA) standards relevant to all sectors involved in the response. Staff were trained on how to apply PGI minimum standards across activities such as shelter assistance, WASH, and cash transfers to ensure that interventions upheld the dignity and safety of affected populations. This briefing equipped staff with the knowledge to identify protection risks and integrate inclusive approaches, especially focusing on vulnerable groups including women, children, elderly persons, and persons with disabilities. As a result, PGI principles became an integral part of the operational culture, enhancing the quality and ethical grounding of the response.

- Briefing of Volunteers on PGI and PSEA during WASH and Health Trainings: Volunteers deployed in the field received PGI and PSEA briefings incorporated within broader training sessions for WASH and health activities. These sessions introduced volunteers to key concepts such as gender sensitivity, protection from exploitation, respectful communication, and referral pathways for protection concerns. Volunteers were taught to recognize signs of abuse and exclusion and encouraged to act as first points of contact for affected community members seeking assistance. Embedding PGI and PSEA content into technical trainings increased volunteer awareness without overburdening them, promoting a holistic approach to community engagement. Volunteers' improved understanding led to enhanced trust-building with beneficiaries, allowing for safer and more respectful interactions during their outreach.

- PGI and PSEA Sensitizations by Volunteers to the Affected Population:



Volunteers actively integrated PGI and PSEA sensitization messages into their routine community awareness activities related to flood response, such as hygiene promotion and health education. Using community meetings, home visits, and informal discussions, volunteers raised awareness about the importance of protection, gender equality, and preventing sexual exploitation and abuse. The messaging included information on community rights, available reporting mechanisms, and ways to identify and respond to protection issues. These sensitizations reached thousands of community members across the 14 urban districts and 4 sub-prefectures, ensuring broad coverage. This proactive approach contributed to increased community vigilance and responsiveness, fostering an environment where vulnerable individuals felt safer and more empowered to report concerns.

Lessons Learnt

- Embedding PGI and PSEA briefings within other sector trainings (WASH, health) proved effective in raising awareness without requiring separate sessions. This approach facilitated comprehensive understanding among volunteers and staff, ensuring protection principles were applied consistently in the field.
- Conducting PGI and PSEA briefings early in the operation helped create a culture of respect and accountability, which contributed to safer community interactions and better identification of protection risks throughout the intervention.
- Incorporating PGI and PSEA messages into regular community engagement activities helped increase awareness of rights and reporting mechanisms. This empowerment led to heightened vigilance against exploitation and abuse and greater trust in humanitarian actors.

Challenges

- Discussing topics like sexual exploitation and gender-based violence remained challenging in some communities due to cultural taboos and stigma. This sometimes limited open dialogue and reporting.
- While referral pathways were identified, limited availability and capacity of specialized protection services in remote or rural sub-prefectures constrained timely support for survivors.



Community Engagement And Accountability

Budget: CHF 1,677

Targeted Persons: 13,300

Assisted Persons: 13,731

Targeted Male: 6,733

Targeted Female: 6,998

Indicators

Title	Target	Actual
% of feedback received and Responded to	70	67
% of staff and volunteers working on the operation who have been briefed on CEA	100	100
# of staff and volunteers oriented and mobilized in raising awareness of the CEA and minimum standards	90	90
Number of consultations with communities for list finalization	5	5
# of people reached with CEA messages	13,300	137,310

Narrative description of achievements

- Community Engagement and Accountability served as the backbone of the Siguiri flood response, ensuring that affected populations were not just passive recipients of aid, but active participants in their recovery. These activities enhanced trust, improved program quality, and helped create a more resilient and informed community better prepared for future disasters.

- **Training of Volunteers on Community Engagement and Accountability (CEA):** The Guinea Red Cross trained 90 volunteers on CEA principles, equipping them with skills in effective communication, complaint management, feedback handling, inclusive engagement, and community dialogue. The training emphasized the importance of respectful engagement with all segments of the population, including vulnerable groups. Volunteers also learned how to document and escalate community feedback and how to facilitate two-way information exchange. This preparation significantly strengthened field operations by enabling volunteers to act as both information conduits and trust-builders. Their trained presence helped dispel misinformation, reduced community frustration, and promoted stronger cooperation with Red Cross teams.

- **Community Meetings to Validate Criteria and Beneficiary Lists:** In each affected community, open meetings were organized to validate the selection criteria and review preliminary beneficiary lists. These sessions involved local authorities, Red Cross staff, and diverse community members, ensuring transparency in the targeting process. Participants were encouraged to identify discrepancies, flag cases of exclusion or inclusion errors, and suggest adjustments based on local knowledge. This process led to over 150 list corrections, enhancing accuracy and fairness. As a result, trust in the targeting methodology increased, and tensions regarding perceived favouritism or exclusion were significantly minimized.

- **Engagement of Marginalized and Vulnerable Groups:**

A deliberate strategy was implemented to involve marginalized groups such as women, persons with disabilities, the elderly, and minority populations through focused group discussions and inclusive public forums. Special attention was given to understanding their unique needs and ensuring that assistance was tailored to be accessible and relevant. This approach not only increased the inclusivity of the intervention but also helped reduce barriers to access. Feedback gathered through these efforts directly informed adjustments to distribution logistics and communication strategies, ensuring no one was left behind.

- **Incorporation of Local Knowledge in Response Planning:**

Community leaders and residents shared traditional flood management practices and early warning signs, which were documented and integrated into risk communication materials. These insights were especially valuable in shaping locally grounded awareness campaigns. For instance, familiar seasonal indicators and water behavior patterns were used to enhance message relatability. This strengthened the credibility of Red Cross messaging and empowered communities to make informed decisions using a blend of traditional and scientific knowledge.

- **Two-Way Communication Channels:**

To ensure open and continuous dialogue, multiple communication platforms were used, including community meetings, mobile phone messaging, local radio broadcasts, megaphone announcements, and posters in strategic public areas. Information on cash transfer amounts, distribution timelines, complaint mechanisms, and hygiene messaging was widely disseminated through these channels. The use of diverse platforms ensured that both literate and non-literate community members received accurate, timely information. This consistent communication reduced confusion, helped manage expectations, and reinforced the Red Cross's commitment to transparency.

- **Community Feedback and Complaint Mechanisms:**

Structured feedback systems were established at all activity sites. These included suggestion boxes, verbal complaint stations, and direct contact with trained volunteers. A total of 137 pieces of feedback were collected during the operation, covering issues such as list errors, delayed payments, and clarification requests. All complaints were addressed in a timely manner, with follow-up actions documented. This responsiveness helped refine the intervention and reassured beneficiaries that their concerns were taken seriously. As a result, satisfaction with the Red Cross response increased, and community participation deepened.

- **Awareness Campaigns on Flood Preparedness and Hygiene:**

Regular public awareness activities were conducted on topics such as flood risks, early warning signs, personal hygiene, and evacuation protocols. These campaigns reached over 13,000 individuals through schools, places of worship, marketplaces, and town halls. Messaging was delivered in local languages and adapted to cultural norms, ensuring high levels of comprehension and acceptance. Communities reported feeling more informed and confident in their ability to respond to future flooding, demonstrating a lasting impact beyond the emergency phase.

- **Transparency in Resource Allocation and Decision-Making:**

Clear communication about the value of assistance (GNF 1,928,775 per household), selection criteria, and disbursement schedules was consistently maintained. Information was shared in public spaces and reinforced during community briefings. This proactive transparency helped prevent misinformation, reduce tension between beneficiaries and non-beneficiaries, and promote trust in Red Cross operations. Communities appreciated being kept informed, and many acknowledged that this level of openness was a key factor in their cooperation.

- **Media Coverage of Volunteer and Community Activities:**

To boost public confidence and showcase the scale and human impact of the response, the Red Cross collaborated with local radio stations and used social media platforms to highlight volunteer efforts and community engagement. Success stories, interviews, and field images were shared to humanize the intervention and mobilize broader community support. Media visibility not only celebrated volunteer contributions but also reinforced Red Cross credibility, attracting positive attention from partners and the general public.



Lessons Learnt

- Initiating dialogue with communities from the outset, especially through inclusive meetings and committee involvement, proved pivotal. Community ownership was strengthened when beneficiaries particularly vulnerable groups were actively consulted in decision-making. This reinforced the credibility of the Red Cross and reduced resistance during implementation.
- Relying on varied communication tools; radio, in-person briefings, posters, and SMS ensured that information reached a wide audience, including those with low literacy or limited mobility. Using local languages and adapting messages to cultural context enhanced comprehension and response, making communication truly two-way.
- Establishing structured mechanisms for complaints and suggestions allowed communities to raise concerns safely and see them addressed. This not only improved satisfaction but allowed the operation to make real-time adjustments (e.g., revising beneficiary lists, clarifying entitlements), increasing its overall effectiveness.
- Openly communicating selection criteria and the value of assistance minimized misinformation and community disputes. Transparency about who was eligible and why helped non-beneficiaries understand the rationale, reducing jealousy and promoting solidarity within communities.

Challenges

- In areas with widespread vulnerability, limiting the intervention to 1,900 households created tension, as non-beneficiaries often misunderstood the selection process or expected assistance. While the Red Cross maintained transparency, managing unmet expectations remained a persistent challenge, particularly in densely populated urban zones.
- While local leaders were valuable allies in the community mobilization process, there were occasional disagreements regarding household eligibility or targeting criteria. These situations required careful negotiation to preserve impartiality while maintaining community trust and local authority buy-in.



National Society Strengthening

Budget: CHF 34,707

Targeted Persons: 13,300

Assisted Persons: 100

Targeted Male: 61

Targeted Female: 39

Indicators

Title	Target	Actual
# of lessons learned, workshop conducted	1	1
# of monitoring missions undertaken by Guinea Red Cross Head Office	8	8
# of volunteers provided with PPE	90	90
# of IFRC technical support and monitoring visits	3	3

Narrative description of achievements

- Support for the Follow-Up of Planned Activities: The Guinea Red Cross (GRC), with ongoing technical guidance from the IFRC cluster team, established dedicated monitoring teams at national and prefectural levels to systematically track the progress of all activities under the DREF approved Plan of Action. These teams conducted regular field visits, held coordination meetings with stakeholders, and organized internal briefings to review implementation status, promptly identify operational challenges, and ensure alignment with timelines and quality standards. This structured follow-up mechanism enabled the rapid detection and resolution of bottlenecks, improved accountability, and enhanced the overall quality and timeliness of assistance delivered to flood-affected communities. As a

result, the operation maintained momentum and efficiency, while strengthening GRC's internal coordination and its capacity to manage multi-sectoral emergency responses effectively, reinforcing the National Society's reputation as a reliable humanitarian actor.

- **Briefing and Signing of the Code of Conduct:** Prior to deployment, all 50 volunteers and operational staff participated in a briefing covering the Red Cross and Red Crescent Movement's Code of Conduct, emphasizing the principles of neutrality, impartiality, confidentiality, and respect for the dignity of affected populations. Each volunteer and staff member formally signed the Code, committing to uphold these ethical standards throughout the operation. This process ensured that interactions with beneficiaries were conducted professionally and respectfully, fostering trust and acceptance within the communities served. Upholding such standards was instrumental in preventing misconduct, reducing complaints, and maintaining the integrity and credibility of the response, which in turn facilitated smoother implementation and strengthened relationships with local authorities and beneficiaries alike.

- **Provision of Visibility Items to Staff and Volunteers:** To enhance the safety, credibility, and visibility of the operation, all GRC volunteers and staff involved in the field were equipped with branded visibility materials, including T-shirts, vests, caps, and raincoats. These items clearly identified personnel as authorized Red Cross actors, which was particularly important during activities such as cash distributions and health outreach in crowded or security-sensitive environments like Siguiri. The presence of clearly identifiable uniforms not only improved volunteer safety by reducing risks associated with confusion or impersonation but also increased community confidence and willingness to engage with GRCS teams. Furthermore, the visibility gear facilitated better coordination with local authorities, streamlined operational processes, and reinforced the National Society's public image as a trusted and professional humanitarian organization.

- **IFRC Monitoring and Technical Support Missions:** Throughout the response, the IFRC cluster team conducted multiple monitoring and technical support missions that included joint field visits, capacity-building workshops, and real-time troubleshooting assistance. These missions focused on strengthening the Guinea Red Cross's ability to manage complex emergency activities such as multipurpose cash transfers, Kobo Collect data management, compliance with humanitarian standards, and community engagement and accountability (CEA) integration. The ongoing support enabled GRCS teams to address operational challenges swiftly, improve the accuracy and reliability of data collection, and ensure the intervention was implemented according to best practices. As a result, these missions not only enhanced the quality and impact of the ongoing response but also contributed to building the National Society's institutional knowledge and operational resilience, positioning it for greater independence and effectiveness in future emergencies.

- **Documentary Production on Coyah Flood Response:** A professionally produced short documentary captured the key elements of the Coyah flood response, featuring interviews with beneficiaries, volunteers, and community leaders, as well as visual footage of key interventions and community impacts. This documentary served as a powerful advocacy and communication tool, allowing the Guinea Red Cross to demonstrate the tangible outcomes of their work to donors, partners, and the broader public. By humanizing the response through personal stories and real-life examples, the film helped to raise awareness, increase donor confidence, and support future fundraising efforts. Additionally, the documentary preserved valuable institutional memory, providing a resource for training, reflection, and strategic planning to improve future humanitarian responses.

Lessons Learnt

- Consistent monitoring and coordination at multiple levels were crucial in identifying and resolving implementation challenges early, which helped maintain the operation's momentum and ensured timely delivery of aid. This reinforced the importance of investing in strong internal communication and regular field oversight for complex emergencies.

- The thorough briefing and formal signing of the Code of Conduct fostered respect and professionalism among volunteers and staff, which in turn increased beneficiary trust and acceptance. Embedding ethical principles from the outset proved vital for smooth interactions and minimized the risk of misconduct or complaints.

- Providing volunteers with clear, branded visibility items not only enhanced their safety but also strengthened the community's recognition and confidence in the Red Cross. This visibility facilitated better collaboration with local authorities and reduced misunderstandings in security-sensitive areas.

- IFRC's continuous technical assistance and on-site mentorship significantly improved the Guinea Red Cross's operational capacity, particularly in cash transfer programming and data management. This hands-on support was key to strengthening institutional knowledge and operational resilience, positioning the NS for more autonomous future responses.

Challenges

- Coordinating multiple teams and actors across national and prefectural levels sometimes caused delays in decision-making and activity rollout, highlighting the need for streamlined communication channels and clearer role definitions.

- Internet connectivity issues and occasional technical difficulties with digital tools like Kobo Collect sometimes slowed data collection and registration processes. Logistical challenges related to remote or flood-affected areas impacted timely deployment of staff and materials.



Financial Report

DREF Operation

FINAL FINANCIAL REPORT

MDRGN017 - Guinea - Flood

Operating Timeframe: 13 Aug 2024 to 31 Dec 2024

Selected Parameters			
Reporting Timeframe	*	Operation	MDRGN017
Budget Timeframe	*	Budget	APPROVED

Prepared on 05/Aug/2025

All figures are in Swiss Francs (CHF)

I. Summary

Opening Balance	0
Funds & Other Income	467,835
DREF Response Pillar	467,835
Expenditure	-461,616
Closing Balance	6,219

II. Expenditure by planned operations / enabling approaches

Description	Budget	Expenditure	Variance
PO01 - Shelter and Basic Household Items			0
PO02 - Livelihoods			0
PO03 - Multi-purpose Cash	371,382	431,578	-60,196
PO04 - Health	3,500	2,942	558
PO05 - Water, Sanitation & Hygiene	1,650	799	851
PO06 - Protection, Gender and Inclusion			0
PO07 - Education			0
PO08 - Migration			0
PO09 - Risk Reduction, Climate Adaptation and Recovery	55,600	10,781	44,818
PO10 - Community Engagement and Accountability	1,575	799	776
PO11 - Environmental Sustainability			0
Planned Operations Total	433,706	446,899	-13,193
EA01 - Coordination and Partnerships			0
EA02 - Secretariat Services	7,529	2,478	5,050
EA03 - National Society Strengthening	26,600	12,238	14,362
Enabling Approaches Total	34,129	14,717	19,412
Grand Total	467,835	461,616	6,219

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

Please explain variances (if any)

- Multi-purpose Cash: The budget for Multi-purpose Cash was 371,381.67, while the actual expenditure reached 431,577.82, resulting in a negative variance of -60,196.15. This line was underbudgeted, and savings from overbudgeted budget lines were redirected to cover the gap.
- Water, Sanitation & Hygiene: The allocated budget for Water, Sanitation & Hygiene was 1,650, but only 799 was spent, leaving a positive variance of 851. Some PGI activities were included under the Multi-purpose Cash intervention, and their costs were covered by the MPC line instead.



- Risk Reduction, Climate Adaptation and Recovery: A budget of 55,599.55 was set aside for Risk Reduction, Climate Adaptation and Recovery, but the expenditure amounted to 10,781.12, creating a large positive variance of 44,818.43. The allocated costs were not fully utilized, and the savings were redirected to cover underbudgeted lines.
- Community Engagement and Accountability: For Community Engagement and Accountability, the budget was 1,575, while the expenditure stood at 799.39, leaving a variance of 775.61. Some CEA activities were incorporated within the MPC intervention, and their costs were absorbed by the MPC budget line.
- Secretariat Services: The Secretariat Services budget was 7,528.73, with an expenditure of 2,478.44, resulting in a variance of 5,050.29. This line was not fully utilized, and the unspent amount was reallocated to support underbudgeted lines.
- National Society Strengthening: The National Society Strengthening line had a budget of 26,600, but only 12,238.16 was spent, creating a variance of 14,361.84. This line was overbudgeted, and the savings were used to cover areas where funds were insufficient.



Contact Information

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

National Society contact: Mamadou Saliou Diallo, Secretary General, crg.secretairegeneral@gmail.com, +224 628682201

IFRC Appeal Manager: Ghulam Muhammad Awan, Head of Delegation, Ghulam.AWAN@ifrc.org, +232 78811584

IFRC Project Manager: John K. Gbao, Senior Operations Officer, John.Gbao@ifrc.org, +232 79102910

IFRC focal point for the emergency: John K.Gbao, Senior Operations Officer, John.Gbao@ifrc.org, +232 79102910

Media Contact: Alhaji Bockarie Abu, Senior PMER Officer, alhaji.abu@ifrc.org, +23278039192

National Societies' Integrity Focal Point: Mamadou Saliou Diallo, Secretary General, crg.secretairegeneral@gmail.com, +224 628682201

[Click here for reference](#)

