A GRCS volunteer engaged in a hand washing education © GRCS.

### Emergency Plan of Action Final Report

**Ghana: Floods**

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**DREF operation n°** MDRGH011  
**Glide n°** FL-2015-000065-GHA

**Date of Issue:** 30 June 2016  
**Date of disaster:** 3 June 2015

**Operation start date:** 4 June 2015  
**Operation end date:** September 2015

**Operation manager:** Zakari Issa, Water, Sanitation and Hygiene Coordinator, West Coast  
**Point of contact:** Zakari Issa, Water, Sanitation and Hygiene Coordinator, West Coast

**Host National Society(ies):** Ghana Red Cross - 5,000 volunteers, four staff members, one Regional Branch (Greater Accra)  
**Operation budget:** CHF 108,115

**Number of people affected:** 46,370  
**Number of people assisted:** 54,742 people

**N° of National Societies involved in the operation:** Finnish Red Cross, the International Committee of the Red Cross (ICRC) and Swiss Red Cross  
**N° of other partner organizations involved in the operation:** National Disaster Management Organisation

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### A. Situation analysis

#### Description of the disaster

In early June 2015, the Greater Accra region of Ghana experienced flooding due to torrential rains which led to the widespread destruction to property and livelihoods, caused the displacement of people from their homes, and 200 deaths. According to rapid assessment figures (Ghana Red Cross Society (GRCS)), up to 46,370 people were affected in five communities (Adabraka, Alajo, Aworshie, Lower McCarty Hill and Nima), 187 houses had been partially or totally destroyed as a result of the disaster. The Meteorological Services forecast indicated that more heavy rainstorms and rains were expected creating the fears that the situation could deteriorate even further. It was also anticipated that continuous use of stagnant/contaminated water as observed during initial assessments, would pose serious public health problems, especially given the country continues to be endemic to cholera and other waterborne diseases.

On 11 June 2015, the International Federation of Red Cross and Red Crescent Societies (IFRC) released CHF 108,115 from the Disaster Relief Emergency Fund (DREF) to support the Ghana Red Cross Society respond to the needs of 5,096 people with emergency relief, health care services, water, and sanitation and hygiene promotion, for a period of three months.

This DREF has been partially replenished by the Canadian Red Cross/Govt. and DG ECHO. The major donors and partners of the DREF include the Red Cross Societies and governments of Australia, Austria, Belgium, Canada, Denmark, Ireland, Italy, Japan, Luxembourg, Monaco, the Netherlands, Norway, Spain, Sweden and the USA, as well
as DG ECHO, the UK Department for International Development (DFID) the Medtronic and Zurich Foundations and other corporate and private donors. The IFRC, on behalf of the Ghana Red Cross Society would like to extend many thanks to all partners for their generous contributions.

Please note that 280 Household Water Treatment (HHWT) kits were procured through this DREF operation, of which only 100 were distributed as the heavy rainstorms and rains were anticipated based on Meteorological Services forecasts (see above) did not materialize and as such were not required. It has been agreed (by the DREF Appeal Manager) that the remaining 180 HHWT kits can be pre-positioned by the National Society for distribution in future DREF or Emergency Appeal operations; however will not be eligible for replenishment if/when they are used. A Memorandum of Understanding will be developed between the GRCS and IFRC to ensure the appropriate management of the 180 HHWTs.

Summary of response

Overview of Host National Society
On 3 June 2015 following the activation of the national disaster plan, the GRCS activated 100 of its community based search and rescue and first aid team members to support immediate assistance. On 4 June 2015 in collaboration with the National Ambulance Service, 60 of these volunteers were engaged in rapid assessment to determine the following: life lost, property status, disaggregated data of affected persons, and immediate needs. Following the launch of the DREF operation, the GRCS was able to achieve the following:

- Detailed assessment, which informed the identification/registration of beneficiaries;
- Refresher/orientation of 30 volunteers on the use of RAMP (Rapid Mobile phone based survey) and Epidemic Control for Volunteers (ECV) manual;
- In total, 54,742 people were reached through health and hygiene promotion campaigns; and distribution of 100 HHWTs kits and 60 hygiene kits to the most vulnerable families carried out;
- Five oral rehydration points (ORPs) and first aid posts were established, which treated 167 casualties and made 35 onwards referrals;
- Distribution of blankets, clothing and mosquito nets to 205 of the most vulnerable families.

Overview of Red Cross Red Crescent Movement in country
The IFRC West Coast regional representation (WCRR) based in Abidjan, Cote D’Ivoire, and Africa region office provided technical assistance throughout the DREF operation, ensuring that management and operational issues are directed and implemented with the principles and core values of the Red Cross movement to reach the needs of the most vulnerable. The IFRC WCRR has a focal point based in Accra, Ghana, which coordinated this support. On 5
June 2015, a Disaster Management Information System (DMIS) alert was issued, which was followed by an Operational Strategy Call involving participants from all levels (IFRC WCRR, Africa region and Geneva). It was agreed that an allocation should be made from the DREF to support the GRCS respond to the situation. Following the DREF allocation, a Regional Disaster Response Team (RDRT) member was deployed to support the effective implementation of the DREF operation for a period of two months. In addition, the Central Africa regional representation (CARREP) health coordinator also supported ECV training. Following the floods, GRCS established contact and shared information with the Finnish Red Cross, the International Committee of the Red Cross (ICRC) and Swiss Red Cross.

**Overview of non-RCRC actors in country**

The NADMO (National Disaster Management Organization) in collaboration with key stakeholders (GRCS, United Nations agencies etc.) formed Rapid Assessment Teams to assess damage caused to infrastructure and personal belongings, the number of persons affected and also to conduct needs assessment. A three-member team from the GRCS comprising, the regional manager, first aid coordinator and IFRC RDRT also paid a visit to NADMO office and held discussions with the directors in charge of relief and reconstruction, and fire and lighting, to be informed of NADMO’s intervention and further share information.

**Needs analysis and scenario planning**

Please refer to the [original EPoA](#) for information on the findings of the initial rapid GRCS assessment, which informed the design of the DREF operation. Following the launch of the DREF operation, the GRCS completed a detailed assessment, during which the most vulnerable families were identified/registered for assistance.

**B. Operational strategy and plan**

**Overall Objective**

Improve the health status and shelter needs of some 5,096 community members affected by the floods disaster in Ghana.

The operation was to provide basic relief items for immediate support as well as software (social mobilization and hygiene/health promotion) and epidemic control activities to 5,096 internally displaced people including children (targeting mainly on those in urban-self settlement and collective centres).

**Proposed strategy**

The initial DREF allocation was to serve as a start-up operation while assessments were carried out to inform a revision. During the implementation of the DREF operation, this assessment and monitoring of the situation was conducted using RAMP, which provided a baseline to monitor the situation as well to adapt the proposed strategy if required. For example, non-food items (NFIs) and hygiene kits were identified to be of crucial need as the affected population did not reside long in the displacement sites, and as such the mobile latrines was proven to be of limited importance. Please refer to “Detailed Operational Plan” section for information on the implementation of the activities planned.

The GRCS ensured that the operation was aligned with the IFRC’s commitment to realize gender equality and diversity, by adapting beneficiary selection criteria that targets the most vulnerable (e.g. lactating women, pregnant women, female headed families, the elderly and people with disabilities). Other aspects considered included programming that aims to promote prevention of sexual and gender-based violence and the protection of children. In addition, all activities were carried out in close collaboration with community leaders and stakeholders.

**Operational support services**

**Human resources (HR)**

The DREF operation mobilized the following personnel:
200 volunteers were mobilized for the response to the floods, all of which were insured through the IFRC volunteer insurance programme.

A RDRT (WatSan) was deployed to support the effective implementation of the DREF operation, for a period of two months.

**Logistics and supply chain**

Procurement of relief items was carried out locally by the NS in accordance with the IFRC standard procurement procedures. For the items requesting international purchase, IFRC supported through its logistics unit based in Dubai, United Arab Emirates.

**Communications**

The GRCS ensured the visibility and publicity of the Red Cross during the DREF operation through the print and electronic media. Reports on the operation were also posted on the NS website. In addition, the distribution of relief items was attended and covered by the print and electronic media, notably, GTV, UTV, Peace FM and Graphic Newspaper (see image right).

**Planning, monitoring, evaluation, & reporting (PMER)**

The GRCS national headquarters (NHQ) maintained an overview of the management of the implementation of the DREF operation, and worked closely with its Greater Accra regional branch structure. The NS disaster management coordinator and focal point of the IFRC in-country coordinated and monitored the implementation of the DREF operation in collaboration with other stakeholders, and one monitoring visit was planned as part of the operation. Monitoring of activities was effectively carried jointly by the region, NHQ and the RDRT. Regular reports and updates on the operation were produced and submitted to the IFRC. A lessons learned workshop was planned but not carried out, however a beneficiary survey exercise was completed.

**C. Detailed Operational Plan**

**Programming / Areas Common to all Sectors**

<table>
<thead>
<tr>
<th>Outcome 1: Continuous and detailed assessment and analysis is carried out during the operation</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Output 1.1:</strong> Initial and continuous needs assessment are updated following consultation with communities affected by floods.</td>
</tr>
</tbody>
</table>

**Activities planned**

1.1.1 Deployment of 10 volunteers for one day Rapid Assessment in 5 high affected communities

1.1.2 Deployment of 30 volunteers for 5 days detailed assessment in all affected communities including assessment in potentially affected areas by Dam water spillage

1.1.3 Re-orient additional 15 volunteers and follow refresher training for all 30 volunteers in RAMP Technology for continuous assessment in the affected area

1.1.4 Lessons Learned Workshop

**Achievements**

1.1.1 As per the original EPoA, an initial rapid assessment was completed in the five affected communities (on 4 June 2015), which informed the design of the DREF operation. Data was collected through community key informants, interviews of community representatives, people affected and their representatives, district assembly members, as well as direct observation. Data cleaning and confirmation continued with other sources outside the RC movement. Disaggregated data of the
affected population was data collected by GRCS volunteers (on 7 June 2015) in the five most affected communities by the flood.

1.1.2 Following the launch of the DREF operation, the GRCS completed a detailed assessment during which 264 of the most vulnerable families were identified/registered for assistance, and issued with beneficiary cards for the collection of NFIs etc.

1.1.3 In total, 30 volunteers received refresher/orientation on the use of RAMP for assessment/mobile data collection, which equates to 100 per cent of the intended target (30).

1.1.4 A lessons workshop was not carried out; however a beneficiary satisfaction survey was completed and the summarised findings of this exercise are shared below:

- Through the survey, most beneficiaries reported that their expectations were met.
- 96% of respondent reported damage of properties during the disaster which cuts across all districts and 9% recorded of injury.
- Of all assistance needed by most respondents, 63% represented household items and 15% of medical assistance.
- A mean score of 4.00 showed that household heads were happy with the quality and quantity of assistance given in the GA Central district. While GA South and A.M.A recorded low mean score respectively.
- Relief items from the Red Cross were useful especially mosquito nets, followed by bedding, and clothing.
- Majority of respondents claimed they received items one-two weeks after disaster. 42% household heads reported it took one-two weeks accessing safe drinking water in the community. They also walk less than 500m to get good drinking water which represents 95% total. Many felt the daily requirement did not meet their target.
- 51.2% showed a positive response to access to latrines on the same day.
- 58% receive information from the Red Cross. The analysis shows 53.8% of Red Cross volunteers disseminated information before disaster took place.
- Majority did not know how to make complaint about goods/services all this in the beneficiary communication.

<table>
<thead>
<tr>
<th>Challenges</th>
<th>None reported</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lessons Learned</td>
<td>None reported</td>
</tr>
</tbody>
</table>

ECV training of volunteers facilitated out by RDRT © GRCS

Orientation on RAMP for assessment/data collection © GRCS
Health and care

Outcome 1: Reduce health risks, morbidity and mortality on the affected population through the provision of health promotion, preventive, community-level and referral services to families in affected areas for three months.

Output 1.1: Primary health care and health sensitization campaigns is provided to 5,000 displaced persons

Activities Planned

1.1.1 Training up to 30 community-based volunteers on health and hygiene promotion and ECV (Epidemics control for volunteers) proper utilization of mosquito nets as well as PSS.

1.1.2 Conduct health promotion campaigns within the affected population focusing on malaria and water-borne diseases, targeting total households in affected areas.

1.1.3 Acquire first aid kit for GRCS volunteers and affected communities

1.1.4 Set up 5 First Aid post to provide care to victims of explosion as well as affected communities

1.1.5 Provide first aid, psychosocial support and referral services for affected communities where required

1.1.6 Monitoring and reporting on activities

Achievements

1.1.1 In total, 30 community-based volunteers received a three-day training on the Epidemic Control for Volunteers manual and tools for hygiene promotion to carry out house to house health education as well as referral services in the five targeted affected communities., which equates to 100 per cent of the intended target (30). Following the training, the volunteers. The ECV training was supported by the IFRC RDRT, IFRC CARREP health coordinator, and a facilitator from the Ghana Health Service, and covered topics including: social mobilisation, proper use of mosquito nets, psychosocial support, sanitation and waste management etc.

1.1.2 In total, 54,742 people across gender and age groups (adult male: 27.98%; adult female: 40.65% and children: 31.37%) were reached through health promotion campaigns (including distribution of information, communication and education (IEC) materials), which were carried out through strategies including: house to house, and public spaces (churches, mosques, social gatherings etc.). Please refer to “Table 1: Population reached through health promotion campaigns by community.

Table 1: Population reached through health promotion campaigns by community

<table>
<thead>
<tr>
<th>Community</th>
<th>Adult (Male)</th>
<th>Adult (Female)</th>
<th>Children</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adabraka</td>
<td>2,836</td>
<td>3,772</td>
<td>3,880</td>
<td>10,488</td>
</tr>
<tr>
<td>Alajo</td>
<td>2,926</td>
<td>4,378</td>
<td>2,900</td>
<td>10,204</td>
</tr>
<tr>
<td>Aworshie</td>
<td>2,727</td>
<td>3,832</td>
<td>3,152</td>
<td>9,711</td>
</tr>
<tr>
<td>Lower McCarthy Hill</td>
<td>3,646</td>
<td>5,368</td>
<td>4,281</td>
<td>13,295</td>
</tr>
<tr>
<td>Nima</td>
<td>3,183</td>
<td>4,901</td>
<td>2,960</td>
<td>11,044</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>15,318</strong></td>
<td><strong>22,251</strong></td>
<td><strong>17,173</strong></td>
<td><strong>54,742</strong></td>
</tr>
</tbody>
</table>

1.1.3 Procurement of first aid kits for GRCS volunteers and the affected communities was completed.

1.1.4 In total, five first aid posts and ORPs were established, in collaboration with the chiefs and opinion leaders of these communities, which equates to 100 per cent of the intended target (Five). Each post was equipped with blankets, furniture, hand washing point, educational materials etc. The posts were managed by volunteers’ who treated minor injuries, and made referrals to the nearest clinic or hospital, as well as educate people on personal hygiene. In total, 167 casualties were reported, and 35 referrals made. There was a strong collaboration between the GRCS and heads of clinics and hospitals in the
management of these posts in respect of referral cases. Please refer to “Table 2 - Summary of the data collected during the operation of the First Aid posts and ORPs”.

Table 2: Summary of the data collected during the operation of the First Aid posts and ORPs

<table>
<thead>
<tr>
<th>Community</th>
<th>Casualties</th>
<th>Gender</th>
<th>Sign/Symptoms / Action taken</th>
<th>Referral</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Male</td>
<td>Female</td>
<td>Cold / feverish</td>
</tr>
<tr>
<td>Adabraka</td>
<td>28</td>
<td>12</td>
<td>16</td>
<td>6</td>
</tr>
<tr>
<td>Alajo</td>
<td>74</td>
<td>27</td>
<td>47</td>
<td>19</td>
</tr>
<tr>
<td>Aworshie</td>
<td>25</td>
<td>11</td>
<td>14</td>
<td>6</td>
</tr>
<tr>
<td>Lower McCarthy Hill</td>
<td>21</td>
<td>9</td>
<td>12</td>
<td>5</td>
</tr>
<tr>
<td>Nima</td>
<td>19</td>
<td>8</td>
<td>11</td>
<td>3</td>
</tr>
<tr>
<td>Total</td>
<td>167</td>
<td>67</td>
<td>100</td>
<td>39</td>
</tr>
</tbody>
</table>

1.1.5 Please refer to “Activity 1.1.4”.

1.1.6 Please refer to the “PMER” section.

Challenges

None reported.

Lessons learned

None reported.

Water, sanitation and hygiene promotion

**Outcome 1:** The risk of waterborne and water related diseases is reduced through the provision of safe water to 1000 families (5,000 people) in Nima, Adabraka, Aworshie, Alajo and Low McCarthy Hill

**Output 1.1:** At least 280 household have access to water treatment kits (bucket and containers and/or Day one soap)

**Activities planned**

1.1.1 Procure and distribute 280 HHWT kits

1.1.2 Public demonstration on household water treatment using provided kits

1.1.3 Monitoring and reporting on activities

**Achievements**
1.1.1 In total, 100 HHWT kits were distributed in communities where there was limited access to safe water supply, which equates to approximately 36 per cent of the intended target (280). GRCS assessment teams confirmed that as the water levels receded quickly, the situation went back to normal in most of the Accra’s metropolitan areas, and as such only 100 households were identified as required the HHWT kits. Please note that the remaining 180 that were procured will now be retained for distribution in future DREF operations.

1.1.2 Public demonstration on the use of the HHWT kits was carried out by volunteers during health and hygiene promotion campaigns; and beneficiaries were able to show that they could use them. In total, 100 HHWT kits were hanged for beneficiaries in the communities where the water supply system had been disrupted as a result of the floods to ensure that they had access to safe drinking water. The HHWT kits also contained PUR and aqua tabs (water treatment chemicals).

1.1.3 Please refer to the “PMER” section.

Output 1.2: Appropriate temporary latrines are provided to cover the needs of 2038 affected people over three months, then dismantled.

Activities planned

1.2.1 Rapid evaluation and site selection to set up rapid latrines.
1.2.2 Local procurement of temporary prefabricated rapid latrines.
1.2.3 Installation of 41 temporary rapid latrines in collective centres and urban self-settlement areas.

Achievements

1.2.1 During continuous assessment and coordination with partners, it was established that the context had changed and prefabricated latrines were no longer a suitable option. An additional 59 NFI kits were purchased in lieu of mobile latrines for distribution. Please refer to “Shelter and settlements / Activity 1.1.3”.

1.2.2 Please refer to “Activity 1.2.1”.

1.2.3 Please refer to “Activity 1.2.1”.

Output 1.3: All the affected community is provided with hygiene promotion sessions, of which 60 households receive hygiene kits

Activities planned

1.3.1 Procure and distribute 60 hygiene kits comprising soaps, sanitary and baby pads, tooth paste and brush, towel, razor
1.3.2 Hygiene promotion sessions and activities like personal and environmental sanitation promoted in communities
1.3.3 Coordinate with partners involved in Watsan activities
1.3.4 Monitoring and reporting on activities

Achievements

1.3.1 In total, 60 hygiene kits were procured and distributed to families comprising pregnant women and lactating mothers, which equates to 100 per cent of the intended target (60).

1.3.2 The volunteers effectively carried out the hygiene promotion and sanitation in all five affected communities.

1.3.3 During the implementation of the DREF operation, the NS coordinated the activities planned with partners including the Ghana Health Service.

1.3.4 Please refer to the “PMER” section.

Challenges
Distribution of HHWT kits and demonstrations on their use by volunteers © GRCS

Shelter and settlements

Outcome 1: The vulnerability of 205 flood-affected households is reduced through the provision of basic household items.

Output 1.1: 205 families receive non-food items including mosquito nets and clothing and bedding kits according to assessment and selection criteria.

Activities planned
1.1.1. Select and train 40 volunteers on beneficiary targeting and selection
1.1.2. Identify and register beneficiaries
1.1.3. Procure and distribute 590 mosquito nets and 205 clothing and bedding kits to the targeted families
1.1.4. Monitor, evaluate and report on the distribution activities and findings

Achievements

1.1.1. In total, 40 volunteers were selected and trained on beneficiary targeting and selection, which equates to 100 per cent of the intended target (40).

1.1.2. Identification and registration of beneficiaries was completed. In total, 264 families were confirmed to be vulnerable. An additional 59 families were identified following the assessments.

1.1.3. In total, 264 families received NFIs, which equates to 129% per cent of the intended targets (205); with prioritization of those that comprised pregnant and lactating mothers. During the distribution of the relief items, the President of the GRCS explained the mandate of the Red Cross, and volunteers also provided health and hygiene education (e.g. on hand washing) as well as how to properly hang the mosquito nets. Please refer to “Table 3: Summary of NFI distributions”.

Table 3: Summary of NFI distributions

<table>
<thead>
<tr>
<th>Item</th>
<th>Quantity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mosquito nets</td>
<td>590</td>
</tr>
<tr>
<td>Mats</td>
<td>205</td>
</tr>
<tr>
<td>Blankets</td>
<td>205</td>
</tr>
<tr>
<td>Bed sheets</td>
<td>205</td>
</tr>
<tr>
<td>Clothing</td>
<td>250</td>
</tr>
</tbody>
</table>
1.1.4. Please refer to “PMER” section.

<table>
<thead>
<tr>
<th>Challenges</th>
<th>None reported.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lessons learned</td>
<td>None reported.</td>
</tr>
</tbody>
</table>

**Demonstration on use of mosquito nets © GRCS**

**Distribution of NFIs to targeted families © GRCS**

### D. THE BUDGET

The DREF allocation was CHF 108,115 of which CHF 98,934 was spent. A balance of CHF 9,181 will be returned to the DREF.

- “Clothing & Textiles” was overspent by CHF 11,786; and was due to an error in coding at the onset of the DREF operation (costs were budgeted under “Utensils & Tools”).
- “Water, Sanitation & Hygiene” was overspent by CHF 10,211, which equates to 36 per cent; and was due an error in coding (should have been coded to “Utensils & Tools”), as well as an increase in the NFIs that were procured (refer to Shelter & settlements / Activity 1.1.2”).
- “Medical & First Aid” was overspent by CHF 1,126, which equates to 46.9 per cent; and was due to under budgeting of the cost of establishing First Aid points at the onset of the DREF operation.
- “Utensils & Tools” was underspent by CHF 19,100, which equates to 100 per cent; and was due to an error in coding at the onset of the DREF operation (costs were instead coded under “Clothing & Textiles”).
- “Distribution & Monitoring” was underspent by CHF 1,150, which equates to 31 per cent; and was due to over budgeting (of distribution costs) at the onset of the DREF operation; combined with the reduction in the number of some items (HHWT) distributed.
- “Transport & Vehicle” was overspent by CHF 890, which equate to 42 per cent; and was due to inflation in the cost of fuel.
- “Logistics Services” was underspent by CHF 2,500, which equates to 100 per cent; and was due an error in coding at the onset of the DREF operation (costs were instead coded to “Water, Sanitation & Hygiene Promotion”).
- “International Staff” was underspent by CHF 5,000, which equates to 83.3 per cent; and was due to an error in coding at the onset of the DREF operation (costs related to the RDRT were instead coded to “Travel”).
- “Volunteers” was underspent by CHF 1,860, which equates to 19.7 per cent; and was due to over budgeting (of distribution costs attributed to volunteers) at the onset of the DREF operation.
- “Workshops & Training” was underspent by CHF 8,811, which equates to 70.5 per cent; and was due to the reduction of the timeframe required for the training of volunteers following a revision to the curriculum.
- “Travel” was overspent by CHF 2,340, which equates to 45 per cent; and was due to an error in coding at the onset of the DREF operation (costs related to the RDRT were coded under “International Staff”; as well as increased costs attributed to the lessons learnt workshop.
“Information & Public Relations” was underspent by CHF 3,000, which equates to 100 per cent; and was due to concentration on dissemination of health awareness messages via radio rather than TV, which contributed to a cost saving.

“Communications” was overspent by CHF 2,751, which equates to 86 per cent due to increased costs of the recharge card for the RAMP surveying, and production of IECs that was not budgeted at the onset of the DREF operation.

“Financial Charges” was overspent by CHF 3,711, which equates to 371 per cent due to fluctuation between the Ghana cedi and the Swiss franc.
Contact information

For further information specifically related to this operation please contact:

- **In Ghana:** Kofi Addo, Secretary General, Ghana Red Cross Society, +233206983284, Email: redcrossghana@yahoo.com

- **IFRC Africa Region:** Farid Aiywar, Coordinator of Disaster Crisis Prevention, Response and Recovery Department; Nairobi; phone: + 254 731-067489; email: farid.aiywar@ifrc.org

- **IFRC Geneva:** Christine South, Operations Quality Assurance Senior Officer; phone: +41.22.730.45 29; email: christine.south@ifrc.org

- **IFRC Africa Region Unit:** Rishi Ramrakha, Head of Region logistics unit; phone: +254 733 888 022/ Fax +254 20 271 2777; email: rishi.ramrakha@ifrc.org

For Resource Mobilization and Pledges:

- **In IFRC Africa Zone:** Fidelis Kangethe, Partnerships and Resource Mobilization Coordinator; Addis Ababa; phone: +254 731 984 117; email: fidelis.kangethe@ifrc.org

For Performance and Accountability (planning, monitoring, evaluation and reporting):

- **IFRC Zone:** Robert Ondrusek, PMER Coordinator Africa, phone: +254 731 067277; email: robert.ondrusek@ifrc.org

How we work

All IFRC assistance seeks to adhere to the Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGOs) in Disaster Relief and the Humanitarian Charter and Minimum Standards in Disaster Response (Sphere) in delivering assistance to the most vulnerable.

The IFRC’s vision is to inspire, encourage, facilitate and promote at all times all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.

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Saving lives, changing minds.

The IFRC’s work is guided by Strategy 2020 which puts forward three strategic aims:

1. Save lives, protect livelihoods, and strengthen recovery from disaster and crises.
2. Enable healthy and safe living.
3. Promote social inclusion and a culture of non-violence and peace.
# Disaster Response Financial Report

**MDRGH011 - Ghana - Floods**

**Timeframe:** 10 Jun 15 to 10 Sep 15  
**Appeal Launch Date:** 10 Jun 15

## I. Funding

<table>
<thead>
<tr>
<th></th>
<th>Raise humanitarian standards</th>
<th>Grow RC/RC services for vulnerable people</th>
<th>Strengthen RC/RC contribution to development</th>
<th>Heighten influence and support for RC/RC work</th>
<th>Joint working and accountability</th>
<th>TOTAL</th>
<th>Deferred income</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>A. Budget</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>108,115</td>
<td>108,115</td>
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<td><strong>B. Opening Balance</strong></td>
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<td>108,115</td>
<td>108,115</td>
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<tr>
<td><strong>C. Income</strong></td>
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<td></td>
<td></td>
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<td>108,115</td>
<td>108,115</td>
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<tr>
<td><strong>D. Total Funding</strong></td>
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</table>

*Funding source data based on information provided by the donor*

## II. Movement of Funds

<table>
<thead>
<tr>
<th></th>
<th>Raise humanitarian standards</th>
<th>Grow RC/RC services for vulnerable people</th>
<th>Strengthen RC/RC contribution to development</th>
<th>Heighten influence and support for RC/RC work</th>
<th>Joint working and accountability</th>
<th>TOTAL</th>
<th>Deferred income</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>B. Opening Balance</strong></td>
<td></td>
<td></td>
<td></td>
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<td>108,115</td>
<td>108,115</td>
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<tr>
<td><strong>C. Income</strong></td>
<td></td>
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<td></td>
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<td>108,115</td>
<td>108,115</td>
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<tr>
<td><strong>E. Expenditure</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>-98,934</td>
<td>-98,934</td>
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<tr>
<td><strong>F. Closing Balance</strong></td>
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<td>9,181</td>
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</tbody>
</table>

**Selected Parameters**

- **Programme:** MDRGH011  
- **Budget Timeframe:** 2015/6-2016/6  
- **Split by funding source:** Y  
- **Subsector:** *  

**Deferred Income**

- 108,115
- 108,115
- 108,115
- 108,115
- 108,115
- 108,115
- 108,115
- 108,115

**Other Income**

- **DREF Allocations:** 108,115
- **C4. Other Income:** 108,115

**Notes:**

- All figures are in Swiss Francs (CHF)
- *Figures are based on information provided by the donor*
## III. Expenditure

### Expenditure Account Groups

<table>
<thead>
<tr>
<th>Budget</th>
<th>A</th>
<th>Variance</th>
<th>B</th>
<th>A - B</th>
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</thead>
<tbody>
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<tr>
<td>Relief Items, Construction, Supplies</td>
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<tr>
<td>Clothing &amp; Textiles</td>
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<td>Medical &amp; First Aid</td>
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<td>Utensils &amp; Tools</td>
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<td>Total Relief items, Construction, Sup</td>
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<td>54,040</td>
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<tr>
<td>Logistics, Transport &amp; Storage</td>
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<tr>
<td>Distribution &amp; Monitoring</td>
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<td>Transport &amp; Vehicles Costs</td>
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<tr>
<td>Logistics Services</td>
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<td>Total Logistics, Transport &amp; Storage</td>
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<td>8,090</td>
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<tr>
<td>Personnel</td>
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<tr>
<td>International Staff</td>
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<td>1,000</td>
<td>5,000</td>
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<tr>
<td>National Staff</td>
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<td>-9</td>
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<td>Volunteers</td>
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<td>7,590</td>
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<td>Total Personnel</td>
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<td>6,851</td>
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<tr>
<td>Workshops &amp; Training</td>
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<td></td>
<td></td>
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<tr>
<td>Workshops &amp; Training</td>
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<td>3,689</td>
<td>8,811</td>
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<tr>
<td>Total Workshops &amp; Training</td>
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<td>3,689</td>
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<tr>
<td>General Expenditure</td>
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<td>Travel</td>
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<td>Information &amp; Public Relations</td>
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<td>Office Costs</td>
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<td>Financial Charges</td>
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<tr>
<td>Indirect Costs</td>
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<td>Programme &amp; Services Support Recover</td>
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<td>6,038</td>
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<tr>
<td>Total Indirect Costs</td>
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<td><strong>TOTAL EXPENDITURE (D)</strong></td>
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<td><strong>VARIANCE (C - D)</strong></td>
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</table>
### IV. Breakdown by subsector

<table>
<thead>
<tr>
<th>Business Line / Sub-sector</th>
<th>Budget</th>
<th>Income</th>
<th>Funding</th>
<th>Expenditure</th>
<th>Closing Balance</th>
<th>Deferred Income</th>
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</thead>
<tbody>
<tr>
<td><strong>GRAND TOTAL</strong></td>
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<td>108,115</td>
<td>108,115</td>
<td>98,934</td>
<td>9,181</td>
<td></td>
</tr>
</tbody>
</table>

All figures are in Swiss Francs (CHF)