# GHANA RED CROSS SOCIETY

ANNUAL REPORT

FOR 2020

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## 1.0 Introduction

Ghana Red Cross Society is the largest volunteer-based humanitarian service organization in the country operating in 216 districts with a volunteer strength of **79,638** throughout the country. To contribute to its auxiliary mandate to the government of Ghana, the health department embarked on programmes interventions with the aim to contributing to reduce morbidity and mortality among mothers and children in deprived areas, improve on the eyesight of the vulnerable and mitigate the effect of COVID-19 pandemic on the Ghanaian populace. Among interventions that the health department implemented under the period under consideration included the following:

- COVID-19 Operational response
- Sustainable Water and Sanitation (WASH)
- Maternal, Neonatal and Child Health
- Eye Care Services

Disaster Management is one of the core areas of the Ghana Red Cross Society which operates to ensure that the impact of disasters on victims and the population is mitigated. The Disaster Management Department aims at increasing community resilience, minimizing community vulnerability and risk to disasters to avoid or limit the diverse impact of disasters within the context of sustainable development. Through risk assessment and identification, risk analysis, planning for risk reduction activities, the Department further plans with communities and implement proactive and preventive measures while strengthening community capacity to resist, cope with and recover from disasters.

In achieving its goal of assisting communities build their resilience, prepare, and respond to disasters, Disaster Management Department was guided by the IFRC Strategy 2020, the Framework for Disaster Risk Reduction for the West Coast Region 2015-2018 and Sendai Framework for Disaster Risk Reduction 2015-2030 in the discharge of its operation 2020.

## 2.0 Administration

The Ghana Red Cross Society has its Regional Branches in the ten regions of Ghana and are managed by Regional Managers and office assistants. Volunteer staff are also engaged as well as national service personnel in the running of the district offices.

### 2.1 Staff Strength.

| No. | Region/ Headquarters | Regional Staff | Head of Department | HQ Staff | Volunteer Staff | National Service Personnel | Regional Committee | HQ Board |
|---|---|---|---|---|---|---|---|---|
| 1 | Ashanti | 2 | | | 4 | 12 | 12 | |

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| 2 | Eastern | 4 | | | 5 | 6 | 12 | |
| 3 | Volta | 2 | | | 6 | | 9 | |
| 4 | Central | 2 | | | 4 | 4 | 11 | |
| 5 | Greater Accra | 3 | | | 24 | 71 | 12 | |
| 6 | Western | 2 | | | 8 | 11 | 12 | |
| 7 | Upper East | 5 | | | 141 | | 11 | |
| 8 | Upper West | 2 | | | 2 | 9 | 9 | |
| 9 | Northern | 3 | | | 4 | | 13 | |
| 10 | Brong Ahafo | 3 | | | 19 | | 8 | |
| 11 | Headquarters | | 6 | 23 | 5 | 10 | | 7 |
| 12 | IFRC | | | 1 | | | | |
| | **TOTAL** | **28** | **6** | **24** | **222** | **133** | **113** | **7** |

2.2 **Regional Volunteer Mapping.**

| | **REGION** | **NUMBER OF DISTRICTS** | **VOLUNTEER MEMBERSHIP** | | |
|---|---|---|---|---|---|
| | **(Active)** | **(Active)** | **Total** | **Adult** | **Youth** |
| 1 | Greater Accra | 16 | 36,705 | 9,175 | 27,530 |
| 2 | Ashanti Region | 13 | 1,630 | 450 | 1,180 |
| 3 | Brong Ahafo | 20 | 3,561 | 916 | 2,645 |
| 4 | Western Region | 22 | 6,981 | 787 | 6,194 |
| 5 | Eastern Region | 12 | 1,573 | 737 | 836 |
| 6 | Upper East Region | 14 | 14,461 | 10,700 | 3,761 |
| 7 | Upper West Region | 10 | 2,892 | 658 | 2,234 |
| 8 | Volta Region | 13 | 4,137 | 800 | 3,200 |
| 9 | Central Region | 14 | 3,429 | 1,562 | 1,867 |
| 10 | Northern Region | 19 | 4,269 | 2,309 | 1,960 |
| | TOTAL | **153** | **79,638** | **28,231** | **51,407** |

## 3.0 First Aid Department

First aid services were provided at the 63rd Independence Day celebration at the Jubilee Park in Ho. A total of 63 casualties of various degrees of injuries were recorded during the rehearsals and the anniversary day. All casualties were treated and discharged by the medical team, made up of GRCS, Army Medical Unit and the National Ambulance Service.

Central Region was able to organize Commercial First Aid Training for two districts in the Region with a total number of 195 participants at the training.

Eastern Regional Branch engaged in a commercial First Aid training, registration of new members and payment of dues. The region was able to train 100 participants in first Aid.

First aid services were provided at the 63rd Independence Day celebration at the Jubilee Park in the Volta Region, Ho. A total of 63 casualties of various degrees of injuries were recorded during the rehearsals and the anniversary day. All casualties' situations were managed, treated, and discharged by the medical team, made up of GRCS, Army Medical Unit and the National Ambulance Service.

Red Cross Volunteers during Independence Day parade in Ho.

First Aid Training in the Brong Ahafo Region is still not encouraging. Efforts made by the region to train the public did not fetch any good results, only a few staff from the following institutions, thirty people from the Fetentaa Refugee camp, five hundred and twenty-one teachers were trained in basic first aid in five districts, sixty staff of Bui Power Authority were also given first aid training. In summary six hundred and eleven people benefited in first aid trainings during the year under review.

First aid and hand washing services were carried out during the burial rites of the Queen mother of the Sunyani Traditional Area. Volunteers in the various districts also rendered first aid services at Ghana's 65th independence parade and at other public gatherings, and public events; these included Floats, health walks, etc. below is a picture of one of the first aid post mounted at a public event.

### 3.1 First Aid services for accident victims

Leaders of the eight DDRTs were given a two-day training in Sunyani. Four of the new DDRTs received sanitation kits donated by the Swiss Red Cross.

The Red Cross participated in the 2020 general elections simulation exercises that were carried out in readiness for any eventualities during the December 7th polls.

A ten-member volunteer team was recruited and trained towards the December general elections. They undertook simulation exercise and monitored almost all polling stations in the Sunyani and Sunyani West municipalities. No casualties were recorded. First aid teams were also constituted

in some of the districts to care for incidents of violence and injuries during and after the elections.

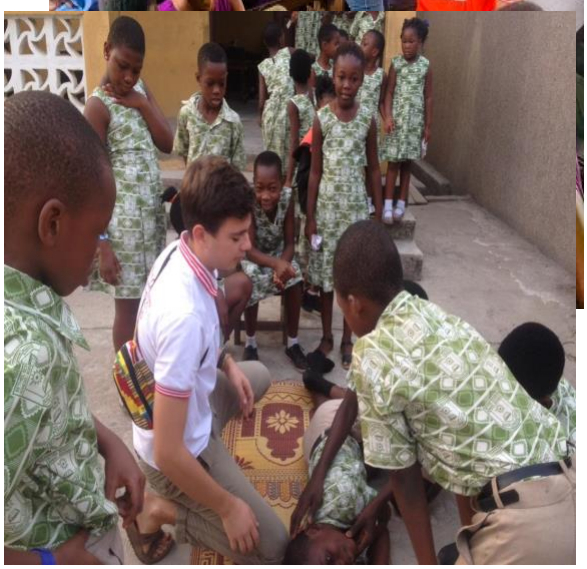
Eastern Region provided first aid services and trainings as requested by individuals, institutions, companies and organizations, the following paid and unpaid trainings were offered to some organizations and institutions for the year 2020.

- Drivers from PROTOA and GPRTU association, Koforidua.
- A two-day training for thirty-two (32) staffs from Vana Energy Company
- A two-day training for sixteen (16) staffs of Zipline Company, Suhum
- A two-day training for fourteen (14) staffs of Voltic Adeiso, Akwadum.
- A one-day training for five (5) staff of Maagrace Garment, Highways, Koforidua.
- A two-day training for six (6) people from Koforidua Technical University.
- Training for twelve (12) staff from C. G Mineral, Nsutem
- A two- day training for eight (8) staff from Kibi Mines, Kibi
- Two separate trainings for three individuals at the regional office, Koforidua

### 3.2 Trainings for Institutions, Volunteers and Staff

Trainings were organized on monthly basis for NABCO and service personnel in all the regions. These trainings were designed to equip the personnel with the necessary skills to boost membership in the region using the school link.

First aid trainings are also done for students and patrons in the various schools by the Youth Organizer and NABCO personnel. In-school trainings came to a halt in the month of April after the declaration made by government for schools to be closed due to COVID 19.



### 3.3 Emergency Response First Aid Posts

The region has two first aid posts at Juaso and Asankari, which is still in force being manage by NABCO personnel and volunteers

Challenges affecting the running of the health post are the post does not have any means of transport in case of any emergencies, no allowance for the volunteers and this is making their work demotivated, the Post has no water and toilet facilities are not working, parts of the celling and the tiles has started removing and utility bill have not been paid since its establishment.

### 3.4 Income Generating Activities

**Hostel:** The hostel continues to be the main source of supporting administrative core cost of the Region and now paying the net salaries of the Administrative Assistant.

During the period under review, the hostel has under-go some renovation and face-lift to improve the patronage and returns, currently two of the rooms have air-conditions and flat screen TV. One of the major challenges was tap-water flowing to the rooms due to disconnection by Ghana Water Company due to non-payment of water bill for the past twelve years ago. The region has been able to settle 85% of the water bills which has led to re-connection of water to the facility.

### 3.5 Regional Collaboration with Stakeholders

Regions continued to collaborate and did business with Government Ministries, Department and Agencies as an auxiliary organization of Government and development partners.

There was collaboration between GRCS, Komfo Anokye Teaching Hospital (KATH) and Luv Fm to embark on a Blood Donation exercise at the Kumasi City Mall with the aim of restocking the KATH Blood Bank, 78 pints were donated by volunteers and other people


Ghana Red Cross Volunteers at the early stage of the Pandemic in March 2020 promoting handing washing at public places in Accra

## 4.0 Health Department

The health department embarked on programmes interventions with the aim to contributing to reduce morbidity and mortality among mothers and children in deprived areas, improve on the eyesight of the vulnerable and mitigate the effect of COVID-19 pandemic on the Ghanaian populace. Among interventions that the health department implemented under the period under consideration included the following:

- COVID-19 Operational response
- Sustainable Water and Sanitation (WASH)
- Maternal, Neonatal and Child Health
- Eye Care Services

### 4.1 Covid-19 Operational Response Activities

The operation focused on RCCE through social mobilization. IFRC provided financial and technical support to GRCS which facilitated GRCS effective response through information dissemination on OVID-19, setting up feedback mechanism as guided by the IFRC CEA standards and Core Humanitarian Standards (CHS). Risk communication was carried through social mobilization and awareness creation, mobile van announcement, radio and TV engagement, establishment of feedback/rumour monitoring mechanisms and coordination. This was done in all the regions in targeted districts including high risk border communities in Upper West Region (Lawra, Nandom, Labose and Wa West districts). The Upper East Region districts will include Kassena Nankana west, Bongo, Nabdam, Talensi, Pusiga and Bolgatanga Municipal. In Northern Region, the activities would be done in Tamale municipal and Tatala-sanguli district. It will also include Aflao in Volta Region and Jomoro municipal in Western Region.

**Radio and TV engagement**: GRCS engaged relevant government agencies in discussing of the COVID 19. This helped to reach larger portions of the populations and affords listeners the opportunity to call in and provided their feedbacks. This was done once in a week. A total of 10 radio and community information centres (CICs) shows were done for each region where the activities covered. The radio shows were held twice a month within the operation period. They were supported by 4 volunteers (2 per region) who were trained on radio show techniques, risk communication and community engagement for coronavirus. A two-day training in each branch was facilitated by one staff from the health and care department at the headquarters and supported by a staff from the region. The picture indicates the volunteer sessions in the media house.

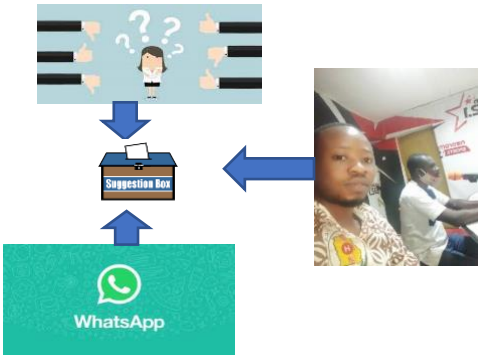
**4.2 Social mobilization and awareness creation**:

GRCS worked with Ghana Health Service health promotion directorate on COVID-19 operation to sensitised communities on preventive measures. Partners collaborated with included IFRC, ICRC, UNICEF, Nestles, Supreme Master Ching Hai and SRC to provide financial support. Key messages and jingles that have already been developed in the various languages by the Ghana health service/Ministry of Health were adopted and delivered by GRCS volunteers through awareness creation. This was aimed at creating opportunities of dialogue on the COVID-19 disease in communities. Key messages were focus on causes, prevention, how to seek medical attention, addressing stigma and misconceptions on the virus. The operation also involved the use of mobile vans to disseminate COVID-19 key messages in areas or districts where access to radio was limited. The operation w hired in each district 3 tricycles which was mounted with horn speakers with Red Cross banners disseminated key messages. Each tricycle carried out 3 information dissemination sessions per week with 2 volunteers in each. Picture above indicates volunteers session with women at the market square.

A total of 140 volunteers were be mobilized and trained on prevention, case definition, signs and symptoms, referrals, communication skills and feedback mechanisms. They conduct mass sensitization activities for 90 days using megaphones or public address systems in public spaces such as markets, and lorry station. Schools, churches, mosques, will be added when the ban is lifted on public gathering including the reopening of schools. The picture depicts volunteers ats marketplace dissemination

messages on COVID-19. It is estimated that 70,000 people will be reached through the mass awareness. There will be 14 teams comprised of 10 volunteers per team that will reach the key public space in the high-risk locations. The volunteers will be provided with visibility materials (t-shirts) and fliers, flip charts, and megaphones with batteries. Each volunteer will engage in these activities at least a minimum of 3 time per weeks for the 12 weeks period.

**Jingles:** It is estimated that 60% of the population (information vans and CICs targets) will be reached through the jingles that will be broadcasted in the targeted areas. GRCS will ensure the dissemination of awareness jingles are done in 3 high priority areas (transmission, prevention, and control). Messages on COVID-19 have already been translated in local dialect such Dagbani, Groni, Dagari, Kassim and Gonja which are spoken in the targeted districts. Community Information Centres will air jingles twice in a day per community for 30 communities. The jingles will also be shared through WhatsApp and GRCS social media platforms as well as websites.




**Establish feedback/rumour monitoring mechanisms**: Feedback/rumour monitoring mechanisms were setup (a simple two-way communication) to capture community beliefs, fears, questions and suggestions. Toll free (+233 800208585/199) lines will also be used and advertised so that communities can benefit key messages on COVID-19. The feedback collected will refine the health information and activities to better address the needs and fears in the community. In addition, it will enable a conversation with communities to listen to them and build trust. This will help volunteers and the NS to provide relevant and tailored based messages in the community. It is very critical in helping NS to assess the effectiveness of its risk communications activities and to address any misconceptions that may exist in the communities. Feedback mechanism that was put in place to engage community to collect complains.

### 4.3 Cash Transfer:

The cash transfer program was also done in partnership with key stakeholders including Ghana Health Service, Ghana Federation of the Disabled, and the Department of Social Welfare. These partners facilitated the processes of beneficiary identification and selections, ensuring that, the right people were selected to benefit from the program. With support from the IFRC West Coast Cluster, the beneficiary lists were cleaned and ensured there were no duplications, and wrong personal details in the data. These comprehensive consultations and involvement of stakeholders resulted in the successful rollout of the first phase of the program (1000HHs with an estimated 6000 indirect beneficiaries).

### 4.4 Contribution to Access to COVID-19 and developmental sustainable WASH

The national society procured and supplied over 30 water kisoks earmarked for installation and public open markets to and procurement of 14 submersible pumps including solar and related accessories. Procurement and supply of water supply equipment's complemented the WAS activities as part of COVID-19 operation and was additional resource to ensure continuity of already ongoing developmental WASH. This support will enable 54,000 people with access to potable water during and beyond the COVID-19 operation. This level of sustainability through a cost recovery initiative will ensure the water infrastructures secure sustainable operation and maintenance and the potential to scale up using the reserve funds generated through the cost recovery initiative. The infrastructures will also improve the fixed as assets of the NS including access to land as all these are to be operated, managed, and owned by the NS. The figure is a woman at Asikasu village drawing water from one of Red Cross water kiosk.

**5.0 Ghana Sustainable Wash Project.**

This project is a partnership between Nestle and the International Federation of Red Cross and Red Crescent Societies, (IFRC) dating back since, 2014, continue to serve most vulnerable cocoa growing farmers in Ghana. The partnership continues to raise the profile of both institutions clearly demonstrating *shared values* and collectively contributing to the global Sustainable Development Goals (SDGs) particularly SDG 6, focused on the provision of sustainable access to water and sanitation.

This report provides an update on progress made on the NESTLE/IFRC partnership including additional funding of CHF 1 million as per contract amendments made in May 2019 ending December 2021. The additional funding is specifically earmarked to Ghana Sustainable WASH project aimed at serving additional 50,000 people in 14 cocoa producing communities with sustainable WASH services by December 2021.The new phase II of the SU-WASH is one of the IFRC flagship and innovative development project angled on three strategic approaches namely:

**Strategic partnership:** Established strategic partnership with key stakeholders including, government agencies at all levels ,academia, research consultants and other movement partners and agreed on a common approach and complementarities in providing WASH services


**5.1 Innovation: Integrated**

approach through a multisectoral approach of development WASH with WASH emergencies (Cholera and other Epidemic) , Community and National Society Development (NSD) transforming NS as Water and Sanitation to sustainable WASH Services delivery. In cooperating research on behavioural factors that influence prevention of WASH related diseases e.g., cholera.

**Coordination:**

Strengthened coordination mechanism at all level's country with regular stakeholders' engagement, joint monitoring and evaluation and quality control.

**5.2 Programme outcomes**

The Ghana WASH Project is part of Outcome 5.1 of the IFRC Plan of Action of 2020, aimed at, *vulnerable* people increased access to appropriate and sustainable water, sanitation, and hygiene services through the IFRC Global Water and Sanitation Initiative (GWSI).

**5.3 Programme summary**

During the period under review, in Ghana, the project reached 100,658 people with access to safe water,4581 Access to Sanitation, 186,255 people reached with health and hygiene education activities. Nine mechanised systems were earmarked to be complemented by October 2021. However, as of September 10, 2021, four systems have been completed with communities drawing water from the systems. The above picture is one of the systems is currently serving a community in the Eastern Region of Ghana.

**6.0 Maternal, Neonatal and Child Health (Mnch)**

Ghana Red Cross Society in partnership with Ghana Health Service with funding support from Swiss Red Cross is implementing MNCH project in Northern and Upper East Regions of the country. This partnership dated back in 2014. The project has contributed significantly to the Ministry of Health strategy which has maternal and child health as a key priority. This partnership further supports the government of Ghana towards its efforts in achieving the SDGs goal 3 which seeks to achieve good health and well-being for the people of Ghana. The project achieved several milestones with the period under consideration. Included the following outcomes.

**Outcome 1: Knowledge, Attitude and Practice on MNCH among mothers in the communities of interest improved for better health.**

The target of 80% of infants < 6 months of age received only breast milk was planned for the project in 2018 was not achieved per the end line survey results (65%). At baseline in 2018, 63% of the respondent practiced exclusive breast feeding. At end line, there was a marginal increase to 65%. Additionally, the target set for the project with regard to number of women who knew at least 3 danger signs in related to pregnancy, postnatal period and in new-borns was 80% each. The baseline results were however very low. The percentage of women who knew at least 3 danger signs in pregnancy, postnatal mothers and new-borns were 31%, 26.9% and 26.9% respectively. The end line survey conducted in 2020 showed significant increase in percentage compared to the baseline survey. Thus 73.3%, 65.5% and 70.3 % in pregnancy, postnatal period, and new-borns respectively. Though none of the targets were achieved per the end line survey, the increase in the practice of exclusive breastfeeding and knowledge in danger signs was remarkable. This was an indication of positive impact of project interventions over the years; community durbars, interactive radio shows and house to house activities by the Mother Club members.

**Outcome 2: Access to health services for mothers, new-borns, and children in the communities of interest improved.**

The project procured 10 tricycles in 2017 were all functional and in use by communities under the beneficiary Community Health Program Services (CHPs) catchment zones. Access to health services by the pregnant women during ante natal care, labour and other general emergencies health conditions were enhanced by the tricycles. An additional 22 additional tricycles earmarked for both the NR and Upper East Region were procured and handed over to the Ghana health service in 2020 an MoU was signed by the parties: GHS, GRCS and SRC. Besides, 110 Haemocue devices and cuvettes were procured and donated to Ghana Health Service in the Upper East Region in 2020 to meet the basic requirement of HB test for pregnant women during their routine ANC visits. The aim was to promote resilient health systems for quality of life at the local level which could

facilitates the achievement of SDG 3. Over 37 HB devices were also donated to the Ghana Health Service in the Northern Region for allocation to the CHPs in the MNCH project operating districts. In the picture is the Ghana Red Cross Pretendent handing over keys of tricycle to the Director of public health in the Region.

## 7.0 Eye Health Services (EHS)

**Background**

The Ghana Red Cross Society and Ghana Health Service with financial and technical support from the Swiss Red Cross have been implementing eye health service in Ghana since 1991. Successes recorded under the partnership project include over 40,000 eye surgeries successfully performed, over 1.1m patients seen at OPD, over 864,000 reached through outreach clinics and 692,000 children seen during school screening services. The work of the Red Cross volunteers has recorded over 3.7m individuals reached with Health Promotion and Disease Prevention (HPDP) messages through house-to-house and community durbar approaches. Since 2014, the project maintained an average annual increase of 9.2% in service provision (OPD, community, school services); 17% in surgical services and 14% in awareness raising. The COVID-19 pandemic on the other hand led to a significant drop of 65% in service provision; 7% in cataract surgery and 14% in awareness raising activities in 2020 due to the restrictions that affected implementation of activities. Visual outcome after surgery between 2017 and 2019 recorded an average of 72.3%, which rose to 89.75% in 2020. An average Cataract Surgical Rate (CSR) of 961 was recorded between 2017 and 2020. It was expected that 2020 would record the highest CSR with a target of 1'037 however, the pandemic saw a drop to 935. The picture depicts after surgery care of cataract cases that volunteer provided to the beneficiaries.

### 7.1 2020 Review

The year 2020 tested the strength and resilience of the GRCS in Ghana. The COVID-19 pandemic almost brought to a standstill, all blindness-control projects. Reports picked up from the field revealed that the blind people in the communities had become increasingly more vulnerable with the introduction of the COVID-19 protocols. The project consequently used eye health as an entry point to create awareness on COVID-19 and encourage the population to observe safety protocols and transmission breaks. 900 project volunteers were orientated to incorporate COVID-19 related education to their routine eye messages. The volunteers were charged to provide leadership by example by observing all the protocols demonstrably. Over 60,000 individuals were reported to

have been reached by volunteers through home visits provided to communities on an integrated EHS-COVID education specially to homes with identified blind patients. The education centered on the character of the disease, the symptoms and protocols suggested by the government and the Ghana Health Service. An estimated 80,000 individuals were reported to have been reached with an integrated eye/COVID-19 education by the volunteers through community durbars. The action saw the successful continuation of eye surgeries benefitting over 1‘800 eyes during the COVID-19 period without any negative effects or infections recorded

### 7.2 Challenges:

The pandemic affected program intervention and volunteers reach out to beneficiaries through the traditional interpersonal communication approach. Mass education became means through which most interventions were delivered which did not promote two-way communication and feedback Over 10,000 assorted PPEs and medical equipment (nose masks, anesthetic machine, strip lamp, surgical masks, disposable gown, set of water stands etc) were procured and distributed to individuals and institutions. However, shortage of PPEs for rural health facilities was repeatedly reported across the regions, lack of reusable nose masks among economically vulnerable groups in informal settlements in the cities, lack of clarity and confusion on health messages due to information overload, inadequate volunteer and volunteer attrition affecting the implementation of activities, and the Economic impact of the COVID-19 on vulnerable households are also dire as some struggle to subsist.

Nonetheless, these unmet needs were addressed to a large extend by supporting rural health facilities with PPEs to reduce their risks of infection and transmission of COVID-19, the provision of reusable nose masks to vulnerable populations in informal settlements in the Cities, re-strategizing RCCE to address persistent misinformation in the communities, increase in number of volunteers and retrain them to address the problems attrition, and the continuation of the cash transfer program currently being implemented to help mitigate the economic impact on economically vulnerable households.

### 7.3 Conclusion:

Despite the uncertainties that plagued the evolution of this pandemic, GRCS successfully implemented several interventions - radio programming, the use of mobile vans, as well sensitization at public gatherings like markets and funerals- in contributing to the fight against the spread of the disease. The most successful among them was the sensitization at market centers using megaphones and the cash transfer program.

Through these, volunteers were able to respond to most of the concerns of the listening population, and observed the practices in these crowded places, and adapted messages to address them. Sensitization activities were localized and provided opportunities for more discussions with the volunteers in the process.

However, volunteer attrition and limited monitoring due to the partial lockdowns and restrictions on public gatherings affected the districts and regions’ ability to collect and manage feedback properly. The volunteers that replaced those who left did not get the full complement of the trainings because training budgets had been exhausted.

## 8.0 Disaster Department

## 8.1 Capacity Building for District Disaster Response Teams Review Meeting

**Objective:** ***Respond effectively and timely to all disasters affecting the most vulnerable communities.***

In Ghana, the devastating effects of disasters including floods, bush fires, long dry spells and disease epidemics (Cholera, CSM etc.) in the communities are mainly due to lack of knowledge of their vulnerability. The populations consequently do not put mitigation strategies in place. The disasters have a greater negative impact on members of the communities in the low-income strata, who are often injured or lose their lives. They often lack good housing, community infrastructure and services that would reduce the human effects of disasters including loss of homes. The affected communities in such case lose their most valuable assets including their working tools thereby leaving them with few resources for use for recovery. The 8 regions with a total of 32 District Disaster Response Teams were trained and established in which the hazard mapping was conducted for the operational communities. A team comprise 10 members each and four (4) per district and 40 members per region. With financial support from Swiss Red Cross, there was a day review meeting. The workshop was used to review and update the existing plan and reporting template for the districts.

The teams were taken through a training with an additional module on the management of fires. The review meeting covered the following with period:

- Review the last 6 months, (Jan-June 2020) of activities and find a possible way of dealing with some of the challenges.
- Discuss reporting and report for the half year from each team.
- Presentation of COVID -19 key massages and approach of GRCS the teams.
- Plan of Action for the next 6 months.


Cross section of participants during the review meeting at Greater Accra region

Below are the regions and districts:

| S/no. | REGION | DISTRICTS |
|---|---|---|
| 1. | Greater Accra | Lekma, Tema, Accra Metro, Ashiaman, Ga South, Ada, Ga West and Weija Gbawe |
| 2. | Central | Asikuman Odoben, Brakwa, Awutu Senya East, Assin Central, Agona West, KEEA, THLD |

| | | |
|---|---|---|
| 3. | Eastern | Suhum, Ayensuano, Kwahu Afraim Plains North, Kwahu Afraim Plains South |
| 4. | Ashanti | Amansie West, Asante Akyem North, Bosomtwe, Offinso North, Konogo,Obuasi Bekwai |
| 5. | Brong Ahafo | Asutife South, Dormaa Municipal, Jaman South, Dormaa West |
| 6. | Western | Amenfi West, Amenfi East, Ahanta West, Elembelle, Jomoro, Tarkwa Nsuem, STMA |
| 7. | Volta | Ho West, Akatsi, Keta, Adaklu, Keta Municipal, Hohoe, Ketu South, Ketu North |
| 8. | Upper West | Lawra,Nadom, Bolu, Tumu |

With the support of Swiss Red Cross, materials and equipment to enhance the operation of the established District Disaster Response Teams(DDRTs) were distributed various teams in their respective regions. The presentation ceremony was done by the Disaster Management Coordinator and Regional Managers. The Materials that were presented to the (32) thirty-two DDRTs were as follows: Megaphones, Jacket(Vest), wheel barrows, shovels, pick axes and First Aid Kits



## 8.2 Community Disaster Preparedness and Response Teams (CDPRTs) Training and Logistics Presentation

**Objective: Reduce *exposure and vulnerability to risks related to climate, natural and health hazards in 90 selected communities in the UER/ NR***

In the framework for community-led disaster management 85 communities were selected in Upper East and Northern region for the establishment of Community Disaster Preparedness and Response Teams and Community Disaster Oversight Committees in each of the 85 communities. In consultation with the leadership of the communities 15 people from each of the communities were

selected and trained on overview of disaster management, emergency first aid, management of fires and swimming drills (boat accident prone communities).

The teams' members were selected by members of the community who want to be better prepared for the hazards that threaten their communities. The roles of the teams are to promote community awareness of potential hazards and preparedness measures, conduct search and rescue, among others. The Oversight Committees are to ensure that the teams carry out their prescribed roles in the community.

Materials and equipment to enhance the operation of the established were distributed to the 25 Communities Disaster Preparedness and Response Teams (CDPRTs) in the five zones of the Northern Region. The presentation ceremony was done by the Disaster Management Coordinator, Swiss Red Cross Logistics/DRR Coordinator, Regional Manager and District Organizers. The Materials that were presented to the (51) fifty-one CDPRTs were as follows:
Bicycles, Life Jackets (Vest), Life Buoys, Nylon Ropes, Cutlasses, Wellington Boots, First Aid Kits, Red Cross T-shirts, Red Cross Jackets, Fire Extinguishers, and Fire beaters.

Presentation of materials for the CDPRTs in Bolgatanga.

The regions and the number of communities are as below:

| S/no. | REGION | NO. OF COMMUNITIES |
|---|---|---|
| 1. | Upper East | 25 |
| 2. | Northern | 26 |

The items were handed over to the Community Disaster Committees which have oversight responsibility of ensuring the good use and maintenance of the items as well as the performance of the CDPRTs.

### 8.3 Training and Establishment of Regional Emergency Response Team

In other to strengthen the capacity of the Emergency Response Teams at the regional level and be better equipped in a wake of any emergencies in the country such as internal conflict, humanitarian

crisis and terrorism. The Emergency Response Team Western and Volta regions were retrained in their respective regions to further enhance the response capacity of these teams in the event of any emergency or crisis. A total of 20 volunteers from the Central region were trained and the training was facilitated by Disaster Manager and Regional Managers of the respective regions.

*Team members going through CPR hands-on*

The purpose of this retraining was to review and update participants on the overview of emergency response, fundamental principles, first aid in emergencies and others. This activity was supported by the International Committee of the Red Cross (ICRC)

**9.0 Relief Distribution**

Ghana is divided into two weather conditions: the dry season and wet season with intermittent spells of either rain showers or sunny days in either case due largely to Climate Change. This year between July and September 2020, heavy rains in the Upper East, Northern, Savannah and North East Regions of Ghana accompanied with spilling of excess water from the Bagre Dam at Burkina Faso and severe rainstorms caused flooding and extensive damage to many homes in ten (10) districts. The districts were: Savelugu, Kumbungu, Zabzugu. Tatale/Sanguli, Tolon, Gushegu, Karaga and Saboba in the Northern Region, In the Savannah Region the affected districts are North Gonja and Central Gonja. For the North East Region, the districts were West Mamprusi and Moagduri. The districts affected were Tanlensi, Kasena Nankana Municipal and Bawku East in Upper East Region.

In the Northern Region the situation led to a displacement of many people from their houses. NADMO reported that a total of affected people are as follows: 2,103 people in the Northern Region. A total of 3209 males and 3,680 females were reported to be affected directly. Again, 4,186 male children, and 4,123 female children were reported to be affected indirectly. There

was no death recorded during the period. Majority of the displaced people have moved to join the friends and other family members in the midst of COVID 19 pandemic. A total of 102 communities from 9 districts were negatively affected by the flood's disaster. Some displaced victims are keeping up in many public buildings such as Schools.

In the savannah region, the situation has led to displacement of many peoples from their houses and NADMO reported that a total of 15,282 people in the Region has been affected, out of which 2,403 are males and 4,821are females. Also, among the affected are 8,058 Children (4,169 males, 3,889 females). NADMO reported one death case of a four year old girl. A total of 45 communities from 2 districts were negatively affected by the Floods. Some displaced victims are keeping up with relatives and friends as many public buildings such as Schools which would have served as safe havens were not left out in this flood disaster.

The situation in the North East was because of heavy rains which affected many communities and later 2 community dams broke their banks and washed away 3 communities that led to displacement of many peoples from their houses. NADMO reported that a total of affected people are as follows: 4,731people. A total of 1,099 males and 1,425 females were reported to be affected directly. Children affected were 2,207 (1,003 males and 1,204 females) were reported to be affected. There was one death reported case. A total of 28 communities from 2 districts were negatively affected by the rainstorm disaster.

Over 413 houses were partially destroyed in the rapid assessment conducted by GRCS Community Preparedness and Response Teams (CDPRTs) and NADMO in Northern Region. In the Savannah Region 79 houses were destroyed in the assessment

NADMO indicated that immediate temporary shelter and rehabilitation of the houses for the displaced people will greatly be needed since the rains would still be intense leaving displaced persons. GRCS with the support of SRC immediately activated its Community Disaster Response Teams (CDPRTs) to provide psychosocial support, rescuing and first aid services to targeted population.

District Assemblies of the affected areas and NADMO were able to support these displaced people with food, Mosquito nets and clothing. Multimedia Group supported Red Cross with relief items which include food and non-food items for the jointly selected communities in North East, Northern, Savannah and Upper East. The relief operation was done in collaborations with Multimedia regional correspondents at various regions.

The table show the joint selected communities and the number of beneficiaries who received the support.

| **COMMUNITY AFFECTED** | **NUMBER OF PERSONS AFFECTED** | |
|---|---|---|

| | MALE ADULT | FEMALE ADULT | MALE CHILDREN | FEMALE CHILDREN | TOTAL FAMILY MEMBERS |
|---|---|---|---|---|---|
| DABOYA | 182 | 205 | 85 | 105 | 577 |
| YAPEI | 240 | 270 | 415 | 380 | 1305 |
| BANAWA | 65 | 86 | 104 | 122 | 377 |
| GAAGBINI | 55 | 76 | 103 | 122 | 363 |
| AFAYILI | 58 | 74 | 31 | 32 | 191 |
| NAWUNI | 489 | 454 | 451 | 412 | 1806 |
| PWUALUGU | | | | | 241 |
| Total | | | | | **4860** |


The non-food items procured were as follows:

| S/no. | ITEM | QUANTITY |
|---|---|---|
| 1. | Blankets(polar blk 32'') | 491 pcs |
| 2. | Mattresses | 491 pcs |
| 3. | Melamine plate 10" G33003-10 | 491pcs |
| | Century CL 155/151Buckets + LID 20 LT 8 | 491pcs |
| | Cup W/Cover plastics | 491pcs |
| | YAZZ Sanitary Pad minty(blue) 24 | 491 pcs |
| | Geisha Coconut Milk &Honey Soap 225G 36 | 591 |
| 3. | Pepsodent cavity fighter toothpaste 175G7 | 491pcs |
| 4. | Vikings Vietnam Jasmine Rice 4.5KG 5 | 1200 |
| 5 | Jerry-cans | 600 |
| 6 | Hygiene Kit | 500 |
| 7 | Household chlorine tablets | 1800 |

### 9.1 Covid-19 Response Operations and Donor Mapping (July- September 2020

Following the declaration of COVID-19 as a global pandemic, GRCS has been working with partners to contribute to the government efforts in mitigating the impact of the pandemic. A strategic plan of action was developed by a team consisted of Heath & Care Coordinator, DM Coordinator of GRCS and DRR Coordinator of SRC. A reviewed copy was sent to ICRC and

Kuwaiti Red Crescent by DM Coordinator. Subsequently the emergency response teams were activated at Western and Volta regions. The Plan was finally lunched by the President of Ghana Red Cross Society through the Press to raise funds to support roll out the plan.

**Specific Objective was:**

- Contribute to the mitigation of the socioeconomic impact by providing short term livelihood support to vulnerable households in communities by September 2020.

**Key donors and partner for the response operations have included**

- ICRC
- Kuwaiti Red Crescent Society
- Nestle Ghana

**Implementation Regions and Donor**

| **Donor** | **Implementing regions** | **Activity** |
|---|---|---|
| ICRC | Western Reg<br>Volta Region | Social mobilization<br>Risk Communication and Community Engagement<br>WASH |
| | Greater Accra<br>Ashanti Reg | Distribution of Stater Packs (supported with face mask, gloves, and hand sanitizers |
| Kuwaiti Red Crescent | Greater Accra | Food and Non-Food Aid Distribution |
| Nestle Ghana | Ashanti Reg<br>Great Accra | Distribution of starter packs distributed to vulnerable people |

## 10.0 Health Education

### 10.1 Risk Communication and Community Engagement (RCCE) activities

The operational plan recruited 100 volunteers from Western and Volta to target 50% (target population) to be reached through radio, and mass education using megaphones. A total number of 76,000 people were reached. The operation also set up of feedback systems in all operational regions. These include call-in periods, during community education sessions and designated phone numbers) feedback collected from various platforms and addressed.

**11.0 Social Mobilization**

GRCS at the regional levels engaged radio for slots to discuss issues on COVID-19 (Radio Talk show). A total of 2 radio stations engaged at Western and Volta regions. Education at Markets, Lorry Stations, Malls, Community gathering, churches, mosque, etc (An estimate of 150 sessions/ meetings have taken place)

**12.0 Covid-19 / Wash**

As the country appeal attracted donors within the movement the operation team revised the plan to include procurement of wash equipment to promote hand washing, food items for food-aid and the provision of personal protection equipment for volunteers and staff. This attracted movement partners like ICRC and Kuwaiti Red Crescent Society commit funds to support the Ghana plan.

**13.0 Distribution of Food Starters with Nestle Ghana and Kuwaiti Red Crescent Society**

As an auxiliary to the government, Ghana Red Cross complemented the government's efforts in social mobilization, Risk communication, contact tracing for early detection, referrals, and treatments. Ghana Red Cross Society contributed to the live saving activities such as provision livelihood packages and PPEs for vulnerable households. Due to the declaration COVID-19 as a pandemic by WHO, the Government of Ghana instituted precautionary measures such as restriction of intra and inter movement including the prohibition of activities that bring people together and adherence to 'physical distancing and maintaining social contact' to mitigate the spread of COVID-19.

During the lockdown, GRCS in partnership with Nestle Ghana distributed 50,000 starter packs to 50,000 vulnerable households in Accra and Kumasi. Procurement of packs were done by Nestle and supplied to GRCS for distribution and DM Department supervised the distribution operation. The volunteer community mobilization and volunteers' motivations were born by GRCS. Total number of volunteers mobilized for these activities was 285 for both Greater Kumasi and Accra.

Out of 50000 target households, 30000 vulnerable households were selected in Greater Accra region and 20000 in Ashanti region respectively.

A delegation led by the Secretary General of Ghana Red Cross Society paid a courtesy call to the Deputy Head of Mission at Kuwaiti Embassy in Ghana to inform them about the Kuwaiti Red Crescent support to Muslim communities in Ghana during this corona virus pandemic through Ghana Red Cross Society.

The National Chief Imam of Ghana as head of all Muslim communities. A delegation led by the Secretary General of Ghana Red Cross Society paid a courtesy call to the resident of National Chief Imam to inform him about the Kuwaiti Red Crescent support to Muslim communities in Ghana during this corona virus pandemic through Ghana Red Cross Society and therefore require his support in choosing a vulnerable Muslim community for covid-19 relief support from Kuwaiti Red Cross Crescent.

The goal of the Adhahy project was to provide vulnerable Muslim families with food aid to relieve them out of economic impact of COVID-19.

A total of one hundred and sixty (160) households that is 960 people received food aid support by the end of the project.

Prior to the commencement of the distribution, a joint in-depth assessment was conducted by the Ghana Red Cross Society in collaborations with Imams at the mosques at the said community. The vulnerability capacity assessment was centered in most vulnerable community in the Ashiaman District, criteria of selection of beneficiary households was based on widow, disabled/physically challenge, aged, pregnant and nursing mother in the households. A total of 160 families with a population of 960 people were identified in Fadama and Ashiaman Zongo Lakka communities and registered with ration card for the food items collection.


*Pictures from the field on nestles Ghana and Kuwaiti Red Crescent support*

## 14.0 Donor involvement

All donors were involved in some of the activities they funded. Some of these included.

- Proposal review and approval
- Implementation of activities such as monitoring and supervision, periodic project review meetings, distribution of logistics etc eg. Nestle participated in distribution of starter packs.

## 14.1 Shelter Project

Ghana experienced torrential rains in Upper East (UER) Region of the country. The worrying trend of report indicated that most roads cut off, houses collapsed, and many acres of farmlands destroyed due to increased volume of water in the rivers which as a result had led to the breakage of banks and overflowing of the neighbouring areas.

The reports also in some cases recorded deaths, injuries, and many people rendered homeless in Upper East Region and camped in area councils. The Ghana Meteorological Agency reported that the torrential rains were to continue until the end of October 2019.

The rapid assessment carried by National Disaster Management Organization (NADMO) and had indicated that over 26,000 people from 116 communities had been affected in UER, with 15 fatalities reported. Major impacts included people displacements, farmland wastage, injuries and death.

Swiss Red Cross (SRC) Country Office in Ghana worked with Ghana Red Cross Society (GRCS) to respond to the flood impacts, to mitigate the impact of the same to the populations in UER especially in the area with the greatest impact from the rains and floods.

SRC had in the past supported GRCS to respond to disasters, and such proposed and provided immediate humanitarian assistance to the flood affected people and provided shelter to these communities. The proposed project fell within the DRR project implemented in the UER and was in line with both SRC and GRCS country programme strategic objectives.

Due to the destruction of infrastructure because of the torrential rains in the Upper East region, several houses were destroyed and consequently displaced families who temporarily took refuge in community centres. The most affected communities in respect of shelter were Manyoro, Nuntagnia, Chuchuliga, Bilinsa, Sienise and Kaasa. However, the impact of the floods in the region was greater, hence the justification for the implementation of the reconstruction project in the Upper East region to provide flood resistant shelter for the affected households.

A total of 102 two bedrooms were constructed for 102 affected peoples in the said region with funding support Swiss Red Cross. The Ghana Red Cross Society implemented the project with technical assistance from Department of Rural Housing in the Upper East Region. The NADMO and the District Assemblies of the affected districts also provided monitoring support.

The houses were handed over the beneficiaries by the President of Ghana Red Cross Society through a handing over ceremony at Manyaro. The occasion was graced by the Upper East Regional Minister, Country Director of Swiss Red Cross and Regional Chairman of Upper East. The chiefs and people of the beneficiaries expressed their appreciation to Red Cross for the support.

## 15.0 Preparedness

### 15.1 Lessons Learnt Workshop on DREF-Upper East

Every year lives, in many parts of Ghana are threatened by disasters. Floods is the most common disasters that occur annually in Ghana, resulting in the displacement of people, psychological trauma, breakdown of communication, loss of livelihoods. To mitigate the impact of the flooding, the Ghana Red Cross Society (GRCS) has taken a leading role in providing disaster response.

In the Upper East Region, it was recorded about 9 main districts (Bolgatanga, Nandom, Bunduri, Kasena Nankana Municipal, Kasena Nankana West, Builsa North, Builsa South, Bongo and Garu) affected by the flooding resulting in displacement of over 26,083 people (in 30 communities), 600 households with 3,600 people affected, 4,941 houses totally or partially destroyed, 6,857 acres of farmlands submerged in the flood waters, 10 people injured and 13 deaths (NADMO 2019).

It is against this background that the DREF lessons learnt workshop was held to review strategies that can be employed in managing these disasters. The objective of the lessons learnt workshop was to reflect on the DREF and IFRC funded flood operations which took place in Upper East regions in 2019 and assess their impact on beneficiaries within the targeted communities within the regions. The discussions focused on a post-mortem of the successes and challenges encountered during the operation in order to identify lessons that can inform the planning for future operations. The aim of this report is to present the findings of the workshop.

The main objective of the lessons learned workshop was to review the DREF operation identify lessons from previous operations for preparedness and response planning to be incorporated. In attendance of the workshop included 30 participants from IFRC, Swiss Red Cross, GRCS,

NADMO, GHS, Volunteers and Beneficiaries. The workshop methodology included plenary session, presentation, and group work.

The workshop was co-facilitated by IFRC delegates present Mr. Ayoola Johnson Awogbemi (PMER) West Coast Office Abuja, Mr. Agersnap Jakob, Danish Red Cross, Skikuku Phoebe and Kibui Patricia of the IFRC Regional office Kenya who contributed valuable support in leading the facilitation of the DREF lessons learnt workshop and provided concrete feedback towards the way forward for the next probable DREF operation.



**16.0 Pre-Election Simulation Exercise and Deployment**

Election related violence has socio-cultural, political, and economic consequences on nations if not managed well. These include loss of cultural identity; break in family ties; possible economic recession and hunger, among others. In all instances electoral violence generate humanitarian situation needing prompt response actions to alleviate sufferings visited on people. Even though elections are not desired to end in conflicts and violence, it sometimes does and the ability to deal with it is very crucial to the stability of any nation.

Regardless of the achievements made to consolidate democracy in Ghana, there are pockets of violence in the conduct of general/bye elections in some constituencies since 1992. In fact, the history of Ghana reveals electoral violence as a canker in our electioneering process since independence. Electoral violence is therefore endemic and entrenched in our society and should not be overlooked either before, during or immediately after the elections.

By its establishment through the Act of Parliament no. 10 of 1958, the Ghana Red Cross Society is the leading volunteer-based humanitarian service organization in the country, which seeks to prevent and alleviate human suffering by mobilizing the power of humanity. The Society also plays an auxiliary role to government in the area of humanitarian assistance and that is its core mandate. Its roles include mobilization of human and material resources, training of volunteers,

assessment, and registration of disaster victims, first aid services, tracing missing family members, and humanitarian diplomacy.

The Ghana Red Cross Society is recognized both nationally and internationally and widely respected. It collaborates extensively with other agencies in carrying out its core mandate. Its network of trained volunteers and Emergency Response Teams are mostly based in the community and providing humanitarian services.

It is against this background that an internal **Full Scale Pre-Election Simulation Exercise** was Conducted at GRCS's Headquarters and all regional branches. **The EXERCISE 'Rapid Response'** was to test the effectiveness of Ghana Red Cross Society's response in coordinating and integrating its efforts in emergency preparedness and response to election related violence.

The objectives **of the exercise were to:**

- To test Society's emergency response team in managing possible threats or shocks.
- To evaluate the existing mechanism or structures for managing possible crises.
- To evaluate the Incident Command System (ICS) and Command and Control Systems available.
- To test the communication plan of the participating regions for handling and disseminating information to the public during a crisis.
- Evaluate existing evacuation procedure
- Access leadership and coordination among regions at EOC.

The conduct of the exercise was to activate two EOCs. The National level EOC and the Regional level EOC. The National EOC was the upper level while the regional EOC became the lower level.

The duty of the national EOC was to take strategic decisions as the regional EOC takes tactical decisions. The National EOC was be activated at the GRCS Headquarters.

The regional EOC's were as follows:

1. Greater Accra EOC – Accra
2. Volta and Oti Regional EOC – Ho
3. Eastern Regional EOC - Koforidua
4. Central Regional EOC – Cape Coast
5. Ashanti Regional EOC - Kumasi
6. Bono East, Bono and Ahafo, Regional EOC - Sunyani
7. Northern, North East, and Savannah Regional EOC - Tamale
8. Upper East Regional EOC - Bolgatanga
9. Western and Western North Regional EOC – Sekondi Takoradi
10. Upper West Regional EOC – Wa

A total of 139 volunteers and staff from Headquarters, partner national society (Swiss Red Cross) and Regions participated in the said exercise. The selected officers at the regional level played the lower control and role of districts and communities where flash points were located while that of Headquarters played the national role and control. The exercise was fully funded by Swiss Red Cross. The exercise was conduct through virtual communication.

In addition, the National Society at both headquarters and regions also participated in the National Pre-Election Simulation Exercise organized by National Disasters Management Organization (NADMO) and its stakeholders.


### 16.1 Election Day Deployment

The National Society with support from ICRC deployed five hundred and sixty-five (565) personnel to response to emergencies and other humanitarian services during the 2020 Ghana general election. The personnel included: volunteer first aiders, regional and headquarters staff, drivers, and Management committee members. The team were provided with First Aid Kit, face mask, Sanitizers, aprons, overcoats.
The Regions supported some of their operational Districts to set up hand washing points. The Regional committee members monitored the election response. There was tension in many parts of the country and fighting at some constituencies which resulted killing of individuals at those constituencies in the country.

The team at some polling stations responded to some casualties with first aid services, temperature monitoring and assisted hand washing stations.

The National Society election response taskforce was led by the Secretary General and coordinated by the Disaster Manager at the National level. The Regional Managers coordinated and supervised their respective teams at the regional level.


## 17.0 Publicity and Visibility

Radio discussions on the role and responsibilities of the Red Cross before and during the disaster was carried out in the regions with emphasis on the fundamental principles and principles and values of the Movement. Logistics such as T-shirts, Jackets and ID tags were also produced and distributed to volunteers during the victims' assessments and relief distribution during DREF in the Upper East Region. There was media engagement during the during and after the upper east floods. The president of Ghana Red Cross launched the DREF during the press briefing which was broadcasted on both print and electronic media.

On the whole coordination of the disaster activities and collaboration with both stakeholders of government and non-government such as the NADMO. Cooperation with stakeholders at the National Headquarters and the regional branches was great.

The information officer was placed at GRCS regional headquarters in Upper East office to receive and manage all information to and from the field through phone as part of Community Engagement and Accountability (CEA). Information during the DREF were also posted on Facebook and twitter accounts and National Society's website.

## 18.0 Regional Disaster Related Activities

In line with the Ghana Red Cross Society's effort to reduce the occurrences of disasters and epidemics using Disaster Risk Reduction strategies in Brong Ahafo region, all the eight DDRTs have continued to undertake DRR activities in their respective districts and communities. In Brong Ahafo Region, the DO has continued to do public education on local FM stations. NADMO staff in these districts have collaborated with these teams in may activities related to DRR

The Greater Accra branch of the Ghana Red Cross has collaborated with some of the districts and trained their zonal coordinators of NADMO in four Districts in the Greater Accra

Ayawaso, west and south, Ashieduketeke in first aid and emergency management. This training would be replicated in other Districts in the Greater Accra Region.


The Ghana Red Cross Society through the support of the DRR Project supported four Districts namely Binduri, Nabdam, Bongo Districts and Kassena-Nankana Municipal. Each district received 600 seedlings each bringing the total number of seedlings distributed to 2,400. An assessment of the survival rate is yet to commerce but grapevine information from informal discussions with CDPRTs and District organizers indicate that most of the trees have survived.

Again, in the region, the 102-bedroom houses were handed over to the beneficiaries at Kansena Nankana Municipal by the President of Ghana Red Cross Society which was fully funded by Swiss Red Cross. The project was in line with Ghana Red Cross Society's response to the flood in the region in 2019.


With funding support from the DRR project, the Upper East Branch commemorated the International Disaster Risk Reduction Day with a clean -up campaign at Doba in the Kassena-Nankana Municipal and a symbolic tree planting at the Chief Palace.

The exercise was jointly undertaken by the Ghana Red Cross Society, the National Disaster Management Organization and the Ghana Health Service and Community of Doba, led by their chief. With funding support from the DRR project. The Chief of Doba pledged to take care of the trees planted and also impress upon his citizens to take tree growing seriously to serve as windbreaks and shade in an ever-increasing warmer world.

Volunteers from the DDRT were deployed to carry out an Initial Assessment in the windstorm disaster at Kpotoe in the Volta Region. The team was welcomed by the District NADMO Director and the District Chief Executive before moving to the field for the assessment.

**19.0 Data Collection**

As a follow up on Disaster Risk Reduction workshop organized in 2018/2019 for volunteers in Suhum, Asamankese, Oda and Anyinam, four (4) volunteers in the regional office were trained on data collection to undertake this exercise. This exercise was to help know the level of impact on the volunteers trained, and the whole community at large, and how the DR plans are being executed. The targeted groups for this collection or interview were NADMO and Red Cross volunteers in the community.

**20.0 Red Cross Messages and Restoration Family Link**

A total of 8 Red Cross Messages were received out of which 3 were delivered whilst the addressees of the rest could not be traced. With regards to the situation in Ivory Coast and its nationals fleeing to Ghana? The Ghana Refugees Board and UNHCR confirmed the arrival of over 912 refugees in Ghana settling along the borders in Bono, Central and Western regions.

The new arrival refugees settled in already existing Refugee Camps and local communities. Ghana and Ivory Coast have a close tie in culture and traditions at the borders. Refugees arrived in their number for the fear of election violence and civil unrest in the country. Majority were women and children.

The following were the breakdown:
Fetentaa Refugees Camp: 84
Egyeikrom Refugee Camp 78
Ampainyi Refugees Camp 335

The information indicated that, there were no unaccompanied minors at all the camps and no tracing request were filed. Ghana Red Cross Society Disaster Department activated plan of action taken into consideration the following with Ghana Refugees Board and Camp Managers

- continue monitoring the situation and provide updates
- strengthen partnership with actors in the area especially with UNHCR and the Government at the Camps

Exploring the RFL needs of the population. The DM and Regional Managers liaised with the camp managers to identify RFL needs.

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