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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.

The Ghana Red Cross Society is operational in 153 districts with a volunteer strength of 77,625 **togo**the country; all these districts have a representation of district organizers. The names of the district and the number of volunteers is as follows:

Fig 1 Staff Strength.

	Region/ Headquarters	Regional Staff	Head Of Departme	HQ Staff	Voluntee r Staff	Service	Regional Committee	HQ Board
			nt			Personnel		
1	Ashanti	4			6	3	12	
2	Eastern	4			5	1	19	
3	Volta	2			6		9	
4	Central	2			5		10	
5	Greater Accra	3			63		12	
6	Western	3			7	8	11	
7	Upper East	8			141		11	
8	Upper West	2			5		15	
9	Northern	3			4		13	
10	Brong Ahafo	3			23		8	
11	Headquarters		6	25	5	4		7
12	IFRC & SRC			7				
	TOTAL	34	6	32	270	16	120	7

Fig 1.1. Regional Volunteer Mapping.

	REGION	NUMBER OF DISTRICTS	VOLUNI	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	17	9,977	1,909	8,068		
5	Eastern Region	22	1,700	783	917		
6	Upper East Region	15	16,631	12,110	4,521		
7	Upper West Region	10	2,892	658	2,234		
8	Volta Region	12	3,268	999	2,269		
9	Central Region	15	3,429	1,562	1,867		
10	Northern Region	19	4,269	2,309	1,960		
	TOTAL	159	84,062	30,871	53,191		

FIRST AID DEPARTMENT

Ensure there is adequate knowledge in First Aid skills and provide services to residents in the country.

First Aid Training

The first aid department within the period of January to December 2022 has trained fifty -Six (56) organizations with a total number of 2,854 participants. The total amount yielded from the training is 86,642.14 Ghana Cedis.

At the regional level, a total of 631.00 were trained in commercial first aid in the year under review. Non-commercial first aid talks were given to 2,323 people in the regions.

First Aid Services and Emergency Response Post

The First aid post is situated at the Apam and Okyereko junction. Thus Accra-Cape Coast highway. The post is manned by four (4) volunteers well-trained in basic first aid to manage accident cases on the highway.

In the year under review, over 4036 accident cases were reported in the country and the Central region has its share mainly on the Accra-Cape Coast Road.

Casualties were transported with the collaboration of the National Ambulance Service to the nearest health centers across the region. We are appealing to the general public to assist the post with a new ambulance to ease the workload of the volunteers.

First Aid Services in Public Places.

The Central Regional branch with the support of the ambulance has been providing First Aid and Ambulance services during events such as the Independence celebration, the Oguaa Fetu Afahye, the National Farmer's Day, and the National Premier League among others.

The Society provided first aid training to its members namely the chapters, and youth links, and rendered first aid services to the public and at the various sporting activities in the Volta Region. The Region organized First Aid drills at various locations across the Region with Covid-19 protocols dully observed at all centers.

The Eastern regional branch of the Ghana Red Cross organizes First Aid training as part of its core mandates. In line with the region's commitment to providing first aid services and training, the Secretariat trained HPW Fresh and Dry company staff, Kibi Goldfields Company Limited, GFA Coaches, etc. Some numbers of individuals were trained in the regional office as well.

The Society was able to conduct two First Aid Trainings for two Organizations in the Upper East Region. The Society did not procure any First Aid Kits from Headquarters, nor produce some in the region for sale. Our District Organizers have been rendering First Aid services to our Community Disaster Preparedness and Response Teams in our DRR and MNCH Districts without a fee. In all a total number of 3,480 Mothers Clubs Members and CDPRTs have benefited from First Aid Training and other training in the region. In 2022, two institutions have been trained in Basic First Aid Management. The Upper East Region has no Emergency Response First Aid post services.

Fig 2. Training Resources Available in the Regions.

No	Region	Full Dummy	Baby Dummy	Stretcher	Spine Board	Blanket
1.	Volta	2	1	4	2	2
2.	Western	3	1	3	2	2
3.	Eastern	3	-	4	2	-
4.	Central	2	1	4	2	10
5.	Brong Ahafo	2	-	4	2	2
6.	Gt. Accra	6	-	2	2	2
7.	Ashanti	2	-	4	2	2
8.	Northern	3	-	4	2	4
9.	Upper East	2	-	4	2	2
10.	Upper West	2	-	2	2	5
	Total	27	3	35	20	31

Fig2.1 First Aid Training Schedule.

	To be able to manage choking and drowning	1 hour
Fainting / Shock	To be able to manage fainting and shock	1: 30 hours
CPR Hands - On	To be able to check and apply CPR	2 hours
nose bleeding	To be able to understand the management of wounds and control of bleeding effectively	1: 30 hours
Burns and Scalds	To be able to manage burns and scalds	1:30 hours
Foreign bodies	To be able to manage strange objects in the human body	45 minutes
Fracture, Dislocation, Sprain and Strain	To be able to manage soft and hard tissue injuries	1:30 hours
Bandages and Bandaging	To be able to know the typesof bandages and their use in bandaging	2 hours
	To help understand how poisoning occurs and how to manage it.	1 hour
Convulsion and Epilepsy	To be able to know their management	1 hour

Transportation of Casualties	To know the effective ways of	
	transporting casualties	2 hours
Practical/ Final Demonstration	The hands – on practice	2 hours
Evaluation test	To ascertain the level of	
	knowledge impacted	30 minutes
Closing		Company Rep.

Fig 2.2

TOPIC	OBJECTIVE	TIME
Opening Remarks Introduction		Company Director/Rep.
History of Red CrossMovement	To help the understanding,origin and activities of Red Cross	30 Minutes
Management	To help understand the Principles and Management of first Aid	30 Minutes
	To be able to manage unconsciousness with breathing and unconsciousness without breathing	

HEALTH DEPARTMENT



Introduction

Health service provision is one of the thematic operational sectors of the Ghana Red Cross Society (GRCS). This sector or department contributes to the government efforts towards achieving the SDGs most especially that of goal 3 and 6 that seek to improve health and wellbeing as well as provision of water and sanitation respectively. The department within the period under review collaboration with our development partners such the Swiss Red Cross and the IFRC to implement projects such COVID-19 response project, the GHA-WASH project, Maternal and Child Health project and Eye health project.

COVID-19 response project

Project in brief

The Ghana Red Cross Society (GRCS) remains in team spirit with communities and front-line responders to the COVID-19 pandemic and the mobilization for the covid vaccine uptake. With a broad network of Regional and district offices and very well committed volunteers and staff across the country, the GRCS is uniquely placed to support people and their communities to prepare for and respond to this global emergency.

In its auxiliary role to the Government of Ghana, GRCS continues to complement the effort of the Government in responding to and curbing the spread of the pandemic. With an extensive network of community-based volunteers across the country, the GRCS is better positioned to provide domestic response to local communities and recognized by the Government and other organizations for its expertise in humanitarian response and its role in providing aids to the most vulnerable population as well as supporting communities to prepare for and respond to this global pandemic.

Specific Objectives

To increase information and health awareness to 100% of the population by providing Risk Communication and Community Engagement (RCCE) to mitigate against the spread of COVID-19 in identified hotspots in Ghana by July 2020.

To support communities to implement appropriate measures for social distancing, hand washing and hygiene to mitigate against spread of COVID-19 to at least 60% of the communities.

To setup a feedback mechanism in 100% of the communities to help understand the beliefs, fears, rumors, questions and suggestions circulating in the communities and use them to provide clear answers and inform the response.

Activities undertaken

Social Mobilization and Awareness Creation

Ever since the government started the roll out of covid-19 vaccine in mid last year 2021, there has been a series of challenges such as the availability, accessibility of vaccine and vaccine hesitancy amongst others. With the support of various internal and external donors in the space of health delivery, there have been strides to ensure a 70% of the population vaccinated. Through this intervention, the GRCS has contributed to over 20 million vaccines administered. This could be translated to about 35% of the country's population.

A total of 170 volunteers and staff were trained in covid-19 vaccine hesitancy, community awareness creation and reporting (RCCE).

6000 posters and 3000 flyers were printed and distributed in 10 administrative regions of Ghana 30 advocacy campaigns and meetings organized to promote the uptake of vaccine.

- 10 feedback mechanism across the 10 administrative regions established and strengthened to monitor and act on community beliefs, misinformation on the covid-19 and vaccine.
- 11 regional and district based traditional media (radio stations) were engaged to create awareness on the RCCE messages.
- 35 community information centres were engaged to reach over 30,000 people indirectly across the country.

Approximately 50 advocacy meetings held in 10 selected districts to promote the uptake of vaccines.

184,011 people reached directly and 600,000 people reached indirectly in risk communication and community engagement (RCCE).

Risk Management

One of the major risks to look out for is cultural and religious resistance to key COVID-19 messages due to misconception of the COVID-19 vaccination. Mitigation measures need to be put in place to reduce physical and psychological impact of stigma on victims. To minimize these, the National Society ensured adequate community engagement (addressing feedbacks, misconceptions/rumors) and training of all volunteers and staff who will be well equipped to

be deployed for operation. The GRCS through the IFRC will provide insurance cover for volunteers on the field. Staff and volunteers are at high risk of contracting COVID-19 in the office as the environment is exposed to infection as different people come in and go out. A vaccination plan has been introduced to mitigate the risk of infection at National, Regional and District level. The project team acknowledge the risk of people rejecting the vaccine as it was declared mandatory for all. As part of the measures to mitigate this risk, a series of community champions were used to mitigate fears regarding the vaccine intake and vaccine hesitancy.

Coordination and Networking with Partners

RCRC Movement

The IFRC provided technical and logistical support to the GRCS in tackling diseases for the national programmes such as the Covid-19 vaccination project.

External

The IFRC is the leading Movement partner in coordination with the Coca cola foundation and other partners and liaising with the Ghana Red Cross for a coordination response. Through the support from the cluster, the IFRC supported the NS to navigate through its challenges.

There were series of virtual internal coordination meetings with GHS, and local organizations to plan and share roles among partners. The GRCS is an active member of the Emergency Operations Centre. GRCS worked closely with the Ghana Health Service which oversees the vaccination centres scattered across the country and coordinates with the regions to ensure this support meets the beneficiaries. Also, the GRCS is a member of the national sub risk communication committee. This committee is responsible for developing messages and SBCC materials for health promotion programmes.

Fig.3 Number of People reached

A == =====	Direct Recipients	Indirect		
Age group	Male	Female	Total	Recipients
0 to 5				
6 to 12				
13 to 17	20,926	18,284	39,210	
18 to 29		10,204	39,210	
30 to 39				
40 to 49	63,737	58,070	121,807	
50 to 59				
60 to 69	12,234	10.760	22,994	
70 to 79	12,234	10,760	22,334	
80+				
Total	96,897	87,114	184,011	600,000

Achievements

The project implementation achieved successes despite the unforeseen challenges.

170 volunteer and staff were trained in risk communication and community engagement (RCCE). There was a one-day training which consist of the training of trainers (TOT) and continued with a one-day step-down training across the 10 regions of the country. The training was co facilitated by the health promotion division of the Ghana Health Service. Staff were

deployed to support in the rolled out of covid vaccination activities.

A total of 184,011 people were reached directly through house-to-house visits creating awareness on covid vaccination, visits to public places such as churches, mosque, lorry stations. Also, an estimated 600,000 people were reached using radio stations and community information centres (CICs) on key messages that focus on prevention, vaccine hesitancy and addressing rumours and misinformation. In some cases, volunteers use megaphones. As per the project targets, the NS was unable to reach its target (number of people reached directly). This is due to the limited volunteers and the constant volunteer attrition hence the underscoring the targets. However, there was an increase in the reach of targeted audience (indirectly) as compared to the proposed target. This success was achieved deploying more CICs and radio station. This perhaps indicates that the communities trusted sources of information the use of these medium as well as the volunteers.

In addition, an estimated number of 10,210 people were identified and vaccinated through the National Immunization days (NIDs). This was the NS contribution to support the GHS in hard-to-reach areas as well as transporting the vaccines through the support of the project. During the report under review a total of 4 National Immunization Days (NIDs). Some branches of the NS support the districts GHS offices in transporting vaccines due to limited logistics available.

The efforts of the red cross have contributed the national vaccine coverage from 28% to 37% although this is far from the intended targets. Some major challenges encountered are.

Absence of health professional to vaccinate the identified persons by the volunteers.

It was observed there were low motivation of health staff to lift their morals to do their works diligently.

Limited vaccines at some health centres

Preference for the Johnson and Johnson vaccine as its take a jab compared to the others

https://drive.google.com/open?id=1AZATBmz_MN83lrAbZrmupx6DZ_BuXQz0&authuser=princeameg%40gmail.com&usp=drive_fs

Exist strategy for sustainability of activities.

All COVID vaccination activities ended in December 2022 and the following were some exit strategies that were put in place to promote sustainability:

Through the continuous collaboration with the Ghana Health Service, we second our volunteers at the community level to ensure continuous community surveillance as the project exit.

Through Community Engagement and Accountability (CEA) as an approach, community leadership or champions are co-opted in the project design and implementation to ensure ownership as the intervention faded out.

Using digital based accounting and real time monitoring of operation.

Main learnings:

It was useful to use the experience of various groups in the communities to identify key section of the population to start with the dissemination of messages as entry strategy to reach the entire communities to pass on message for easy acceptance.

It was easy at the grass root level to mobilize women and the youth groups for community engagement and social mobilization activities

The involvement of women and youth groups were useful as they were skillful, vocal, and

abreast with community dynamisms of COVID-19 which facilitated community engagement and acceptance of the covid vaccines but not a political propaganda message.

GRCS ensured that series of environmentally friendly activities carried out during the project intervention to avoid the destruction of the environment. Some precautionary measures include reduction of noise during the usage of mobile vans for information dissemination. Also, during training and refresher, volunteers are encouraged to avoid littering, plant trees amongst others.

Ghana WASH Project

Project in brief

The department completed and commissioned eight (8) water supply systems during the year under the year under with funding from OPEC and Italian government. The second phase of the Nestle funding which initiated some of the construction activities had come to an end if 2021. 18 water system systems that were provided are still functional with the exception of two (Manhyia in the Eastern region and Meduma in the Asanti region). The department developed a 6 month consolidated budget to take over sustainability aspect of the water systems, unfortunately we could not secure funding for that. During the year, the World Water Day celebrations highlighted the official commissioning of the Ghana WASH project, a function which was attended by representatives from Nestle AS, the IFRC cluster head and government representatives.

Urban WASH

A baseline for an Urban WASH project was also undertaken in Ashanti Region, with funding from the IFRC and the Netherlands RC. As part of long term partnership between the Ghana Red Cross and the Ghana Water Company, an MoU was signed by the two parties. The Urban WASH project in Ashanti region will focus on connecting households with water meters at a subsidized cost and also work focus on improving the hygiene status of the target groups in low income areas.

Cholera Preparedness:

With the funding support from the IFRC the Regional Cholera Coordinator, 20 staff and 30 volunteers of Ghana Red Cross were trained at TOT level on Oral Rehydration therapy and Point (ORT/ORP) in coordination with the Ghana Health services. After the TOT training, a step down training was conducted in one of the Cholera hot spot district in Ashante region and Greater Accra Regions.

Maternal & New-born Child Health (MNCH) Project Report

Project in Brief

The RMNCAH is the third project phase from the previous MNCH project that was successfully implemented during the first and second phases by the Ghana Red Cross Society with support from the Swiss Red Cross in partnership with the Ghana HeaServicesices. In partnership with Ghana Health Services, the GRCS continue to implement the RMNCAH project in the Upper East, Northern and Savanna regions. The project operates in fourteen (14) districts covering 160 communities across these regions. During the year in review, the project did not experience a smooth run due to challenges such as delays in material production, rainy season affecting out-door activities and other emerging events of the GRCS in the regions During the fourth quarter of the year, the project was called to a halt in order to make way for a financial audit by the Swiss Red Cross Society the main funder of the project. In June 2022, four (4) districts from the Upper East Region were phased out from the project including Binduri, Bongo, KNM Nabdam. In effect, the RMNCAH project is currently operating in ten(10) districts covering the Northern, Savana and Upper East Regions with a total of one hundred (100) communities in the three regions. The project did not do much this year as planned. However, some activities were successfully implemented.

PREGNANT WOMEN ANC UP-TAKE

The GRCS Mothers Club members continue to conduct house-to-house visitations, to deliver RMNCAH messages to the target group and families in the communities. Through their activities, about four thousand, seven hundred and sixty six (4,766) new pregnant women were registered by the MCs in the communities in the year and six thousand, two hundred and ninety-three (6,293) old pregnant women were seen making a total of eleven thousand, fifty-nine (11,059) seen and observed to have attended ANC for medical care during the year in review. Out of the 11,059 pregnant women, the MCs referred 476 to the health facility for ANC uptake. 455 were observed to have actually reported to the facility for ANC services.

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On the other hand, some pregnant women who were unwilling to seek early ANC services were escorted by the MCs to the facilities for care. One hundred and sixty- five (165) of such women were escorted to the health facilities for ANC services. Per the Ghana Health Service protocol, every pregnant woman in Ghana is supposed to make up to four plus (4+) visits before delivery. However, the protocol has been changed to 8+ visits in recent times. In line with this protocol, the MCs looked out for women who were able to make up the required visits . About 3,370 women were seen by MCs to have made a four plus (4+) visit to the health facilities.

With the requisite knowledge in RMNCAH issues the MCs were able to identify danger signs in pregnant women and make prompt referrals to the health facilities for medical care. Out of the total number of pregnant women seen in the year, the MCs identified four hundred and fifty seven(457) pregnant women with danger signs in pregnancy. All women with danger signs were referred to the health facility for medical care. Out of the total number referred, 431 actually reported for medical care. Pregnant women who were unable to report to the health facility following referral attributed their inability to financial constraints, lack of transportation and fee charges at the health facilities.

POSTNATAL WOMEN

Translating the MCs health messages in to practice, a good number of women had skilled delivery in the year. A total of (2,809) women and their families willingly went for skilled/facility delivery at the health facilities. 506 were escorted by the MCs members for skilled

delivery at health facilities. However, the MCs recorded home deliveries of 77 in the operational areas making a total delivery of the year under review (2, 886).

A total of 172 postnatal women were also escorted by MCs to health facilities for postnatal care services. The MCs also identified 92 PNC women with danger signs and referred to the health facility. 83 of the referred cases actually reported to the facility. Out of the total PNC women, 2,481 women had standard birth preparedness plan as educated by the MCs before delivery.

The reasons for home delivery were mentioned as follows; lack of transportation, superstitions, cultural believes, financial constraints, and poor attitude of health staff especially labour room nurses.

NEWBORN

The MCs also recorded (2,884) new born babies in the year under review (1, 256) were males and (1,628) were females. There was a record of one (1) neonatal death in the year. 95 new born were observed to have danger signs and prompt referrals were made as well as follow ups. 91 actually reported to the facility.

Reasons for non-attendance to the health facility following referrals were attributed to long distances from communities to health facilities, cut-off of some communities during the rainy season, inaccessible roads, financial constraints, poor attitude of some health workers, superstitions and service fee charges.

Partnership strengthening

The Ghana Red Cross District team actively participate in the Ghana Health Services half year and annual performance review meetings to present their contributions towards the achieved health indicators at the district level.

The District Health Promotion units organized periodic meetings with GRCS M others club to discuss prevailing health issues in their communities in order to proffer solutions together. In the fight against Covid- 19, the GHS provided nose masks to the MC as well as hand flyers and posters to support their awareness creation activities in their respective communities.

Challenges

Crash of project activities due to improper planning and lack of projects integration.

Sometimes undue delay of funds for project activities results in unmet target in the year.

Seasonal challenges such as heavy rains, inaccessibility of some project communities causes delay in the execution of the activities especially the out-door activities.

Long distance to the health facilities accompanied with bad road network is a major cause of home and en-route deliveries.

Non-resident midwives/ nurses in some of the health facilities to support and manage referral cases most especially at night due to infrastructural problem faced by the GHS.

High cost of river crossing fee during the rainy season make pregnant women and and their families unwilling to report to health facilities when referred by MCs to seek medical care.

Lessons learnt

Availability of haemocue machines to check pregnant women haemoglobin level(HB) at registration support in saving a lot of pregnant women's life in the district as many anaemia cases are detected early and measures initiated.

The engagements activities were necessary as key health information were discussed thoroughly due to concerns raised by community members. For example, the issue of women reproductive rights and where she can access family planning without the involvement of the husband

Involve at least one mothers' club (MC)leader in quarterly reviews/planning meeting the way to friendly and quality data from the primary sources.

Community Durbar is one of the most effective communication tools at the community level as it provides the forum for all community members including the minority and the marginalized to have interactive discussions at no cost.

Providing regular supportive monitoring and supervision to the MCs serve as a non-monetary motivation to put up their best, resulting in project success.

The project 's initiative to introduce Night Cinema gave a more live entertainment to the understanding of the health messages.

Eye Health Service Project

Project in Brief

The project is in partnership with the Ghana Health Service in the area of medical, and technical support; and Swiss Red Cross in the areas of funding and technical support. The collaboration that has existed since 1991 has recorded over 40,000 surgeries with over 38,000 of them cataracts, over 1.2m seen at OPD, over 1m reached during community outreach services, 800,000 children screened during school outreach services, 7,000 children with refractive errors supported to acquire spectacles, and over 150,000 children treated for allergies. Approximately 4m people have so far been reached through awareness raising events and house-to-house visits implemented by the GRCS through its trained community-based eye health volunteers. The Eye Health Services currently operate in all the 26 administrative districts in the three constituting the previous Northern Region of Ghana i.e. Savannah, Northeast and Northern Regions.

Support to pro-poor eye patients in the NR, SR and NER

OPD attendance of 68,693 individuals were captured in the records of 26 supported health facilities with 31,149 been males whiles 36,918 were females. 2496 community outreach visits were conducted by eye health personnel of which attendance was 63,130 was recorded with 19,933 been males seen whiles 23,264 were females seen. 2,496 schools visits were made of which 24,242 children were screened with 11,319 were male and 12,923 been female. Surgical operations conducted summed up to 2,095 eyes of which 2,053 were cataract surgeries (1,010 males/1,043 females).

The project supported all 2,053 patients to receive varied subsidies under the pro poor programme including: transportation, feeding, intra-operative consumables and post-operative medications. The consumables included disposable blades, IOLs and viscoelastic substances, intraoperative consumables and post-operative drops and ointment. Mass case searches were conducted in 26 districts which resulted in the identification of over 3000 patients.

Coordination and partnership

Ghana Red Cross Society have collaborated very well with other stakeholders in the eye health service in the regions. Meetings were held between the regional special coordinator and Ghana Red Cross Society at the regional level to plan for quarterly activities. The regional special coordinator took part of all the quarterly meetings held over the reporting period. 4 AACHIB camps were conducted during the period of which 1350 children were treated for various eye conditions. Children with refractive errors and booked for glasses were 48 with 27 females whiles 21 were males and are yet to receive their glasses from the project. Report from the health facilities revealed that the backlog of refractive errors are many and needed immediate attention. During the period under review 116 individuals were identified with refractive errors and were supplied with U SEE glasses, out of 116 supplied 57 were males whiles 59 were

females.

Sustainability of eye health service delivery

No conscious or project related efforts were carried in line with this objective. The year witnessed numerous funding, internal re-organizational and structural challenges and this affected implementation of planned activities under this objective. This is in addition to the inability of NECU and GRCS at national level to finalize enabling factors and inputs for the carrying out activities.

Lessons Learnt

Community members are aware of the existence of the clinics in the districts and visit for the services.

Community Volunteers without refresher training are making effort to identify various eye conditions and refer them to the eye clinic.

Continued link between Ophthalmic Nurses, Districts Organizers and Community Volunteers in the various districts is still making positive impact on the project.

The inability of the project to provide motorcycles for community outreach and school screening is having a negative impact on service provision, especially reaching the poor and vulnerable.

DISASTER DEPARTMENT

Introduction

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.

The Department laid out 2022 Programme of Activities from preparedness through response to recovery in various thematic sector of the area of focus in the DRM Strategy 2020-2024. In achieving its goal of assisting communities build their resilience, prepare and respond to disasters the Disaster Management Department is guided by the IFRC Strategy 2020 and Sendai Framework for Disaster Risk Reduction 2015-2030.

OVERALL OBJECTIVE: Strengthen community resilience and institutional capacity to ensure disaster risk reduction, response, and impact reduction.

The Disaster Management Department is headed by Head of Disaster Management (Disaster Manager) at the Headquarters and assist by Regional focal persons. The Advisory Committee is consisted of the following and chaired by the Vice President or their Alternate.

- Vice President (Chair)
- Swiss Red Cross Representative
- NADMO Representative
- Youth Coordinator

- DM Manager (Secretary)
- Health Coordinator
- IFRC

Partnerships, Collaborations, and Advocacy

During the year under review, Red Cross continue to collaborate with other Government Ministries, Departments, and Agencies as it discharged it mandate as auxiliary to Government. National Society have an effective collaboration with the agencies, departments, and ministries, NADMO. Currently, the Red Cross serves as Chair to the Regional Risk Reduction subcommittee, with other stakeholders as members in Volta Region. In other regions, the Red Cross is member of Inter-agencies emergency working group which comprises of UN agencies and international nonprofit organizations.

Disaster Risk Reduction /Climate Change Adaptation & Institutional Preparedness (DRR/CCA-IP)

This project is being implemented by GRCS at three (3) levels across the country, level one(1) is the community based disaster risk reduction and climate change adaptation(DRR/CCA) implementing in eighteen (18) district in the four (4) regional (NR,NER,SR,UER), level two (2) is the district based DRR/CCA being implemented in sixteen (16) district in the newly created region (Ahafo, Bono East ,Oti and Western North) whiles level three (3) is supporting the institutional preparedness of the NS.

The DRR/IP project commenced in November of 2022 with the planning meeting held with key stakeholders. The two-day project inception meeting was held to initiate the project and outline the project proposal and log frame to the implementation team. The allocation of seventy (70) new communities and phasing of the forty-five (45) old communities were discussed and agreed at the planning meeting. At the meeting were the SG of GRCS, CC of SRC, 2 GRCS HoDs, 2 GRCS Regional Managers, 17 NADMO District Directors and 17 GRCS District Organisers and at least the Deputy Director of the Climate Centre of NADMO.

Trainings

Disaster Risk Reduction- Training and Capacity Building

Ghana continues to experience a severe toll from disasters, just like every other nation on the planet. Disaster effects are frequently described and quantified in terms of the quantity of people who die, are hurt, and lose property and resources. The ultimate goal of the training was to increase the ability of the participants to contribute to reducing economic losses as well as injuries and fatalities among the impacted population.

The Ghana Red Cross Society continues to encounter some difficulties in carrying out its auxiliary function and legal obligation to prevent, mitigate, prepare for, and respond to humanitarian crises of any kind. The Society has been at the forefront of the fight against disasters and strengthening the resilience of vulnerable communities, who frequently bear the brunt of these occurrences, through the staff, volunteers, and communities.

Therefore, the habit of regularly increasing volunteers' capacity in disaster management to address these challenges was crucial. 80 members of the District Disaster Response Team and 4 NAMDO District Directors participated in two-day workshops held in Bibiani, Biakoye, Bia East, and Dambai in the Oti and Western North regions. Since these Volunteers are the face of disaster management, they required special training to perform their duties. The topics treated were disaster management, the disaster management cycle, the history of the Red Cross movement, the seven guiding principles, first aid, health, and fire safety.

Among the topics covered were reporting, where the report template was carefully examined,

and the action plan (workplan) for the final three months of the year. Even though it may not be possible to completely prevent disasters from happening, GRCS, communities, and other stakeholders can collaborate to prevent hazards brought on by humans, lower the likelihood that disasters will occur, mitigate or manage them when they do, and lessen their effects on lives and livelihoods.

The training will act as a tool to support communities in taking center stage, empowering them to take charge of the disaster risk reduction process and create pertinent actions. The training was also participated by NADMO, Fire Service and Traditional Authorities of various districts.









EMERGENCY RESPONSE TEAM-TRAINING

The Ghana Red Cross Society, as a National Society, continues to respond regularly to natural hazards and human-induced disasters -- the causes of which are widespread, yet often predictable and preventable. Emergencies have, for some time now, been a part of the country's woes, with severe impact on the country's economy, lives and infrastructure.

Globally, disasters have been trending toward increased frequency and severity. Mitigating their effects demands strategic planning and an emphasis on developing resilience. The GRCS is committed to scaling risk reduction activities to further protect vulnerable people through first aid and disease prevention, as well as through improving regional and national capacity to respond to emergencies.

As part of the Disaster Management Department activities a formation of regional emergency response team is required by the DM Department to response to emergency at the regional and this is supported by ICRC. A 40-member Emergency Response Team was formed and trained in Central Region, Cape Coast.

The objective was to strengthen the national society's key volunteers and staffs' capacities to effectively response to emergencies when the need arises.

SECURITY AND SAFER ACCESS TRAINING

This insecurity and lack of security have, for example, negatively affected GRCS's primary information collection and management activities. Incidents related to access and noted during these troubles in certain hot zones, as well as the difficulty of communicating with the forces of order, lead us to ask ourselves an essential question on the perception, the acceptance of the GRCS as well as the management of security information during our interventions in the field.

To make the Operational Command Posts in the local branches more dynamic, the GRCS wishes to strengthen the capacities of the Regional Branch Managers, have focal points in the management of security information. Thus, the GRCS aims to equip itself with well-equipped local Committee Managers, to analyze and provide a response to the risks incurred by their staff and volunteers during their field trips during crisis situations. To do this, the ICRC and GRCS organized a training workshop in safety and security management for the benefit of 5 Regional Branch Managers, 5 focal point and 5 staff from the GRCS HQ in December 2022. The main objective was to strengthen the capacities of Branches and Focal Points in the management of security information. The specific objectives were to:

List and map safety and security risks within local committees.

Understand the role and responsibility of the Secretary General in the management of security / safety.

Implement a local security plan in accordance with the GRCS global security plan.

Know the security alert levels related to the contingency plan.

Know and understand the GRCS safety communication plan.

Develop and understand the operation of a secure database.

Set up a mechanism for collecting and managing security information in each locality.

Understand security management within the broader framework of Safer Access.

The expected results achieved after the workshop were:

Security and safety risks are listed and mapped.

The role and responsibility of the Secretary General is included in the management of Safety and Security.

A local security plan was implemented in accordance with the GRCS's overall security plan.

The security alert levels linked to the contingency plan are known.

The GRCS security communication plan is known and understood.

A secure database is developed, and its operation is understood by all.

A mechanism for collecting and managing security information is set up in each locality.

Security management within the broader framework of Safer Access is included.

Watermanship Training: The training took place, in line with the volunteer recruitment and support concept. The training was created for capacity building and sharing of knowledge and experiences. It was expected that at the end of the training, participants would be trained and equipped with relevant knowledge for drowning rescuing intervention at the community level.

No. of Districts -6,

No. of Participants -42,

No. of Dos -6,

No. of Trainers – 2, NADMO Staff – 1, GRCS Staff – 2.

The participants were taken through the following:

- Physical exercises,
- Use of training material,
- Importance of the material,
- Demonstration exercises, both on land and in water.
- The training covered the types of swimming, as follows:
- Breaststroke,
- Freestyle,
- Size stroke,
- Butterfly stroke,

The Waterman ship Training led to the following **output**: A number of community emergency structures were established in the districts and communities become sustainable in communities, in the 6 districts.

Disaster Response and Relief

Appiati Explosion:

On 20th January 2022, a large blast occurred in an area at Apeate community, near the city of Bogoso about 300km (180 miles) west of the capital of Ghana, Accra. The explosion occurred when a motorcycle went under a truck carrying explosives that was en route to the gold mine at Bogoso. After the blasts, people in the community rushed down to the scene when a second blast occurred few minutes later.

This resulted in the destruction of dozens of buildings. As of 22nd January, a total of 13 people were confirmed dead, and 59 injured people were rescued and referred to Bogoso Government Hospital where they received treatment. As of 26th January, 3,300 persons (1,122 males and 2,178 females) have been affected by the event, excluding those who were at the various health centers.

A DREF Operation was approved for CHF **172,246** to enable Ghana Red Cross Society (GRCS) meet the urgent needs of the affected community and aid all affected 400 households through emergency shelter, livelihoods and basic needs, water, sanitation, and hygiene (WASH) and health interventions. The operation was initially launched for 3 months. Overall, the operation ended on 30 April 2022, and reached 1,030 people (400HH)

A total of 56 volunteers were oriented with mounting of 21 family tents and 20 shelter repair kits which can accommodate 5 people each, i.e., 105 persons overall, as well as provided 20 shelter kits to support repairs to damaged houses of 20 families (100 people).

A total of 20 volunteers were sourced from the affected communities and trained to carry out assessment, beneficiaries' identification and registration and participated in distribution of non-food items (hygiene, dignity kits, and mosquito net) to 400 affected households.

Awareness on how to hang mosquito nets was carried out by the volunteers and also distributed mosquito nets to households (2 pieces per household) completely destroyed and displaced families. A total of 20 volunteers were trained to conduct health and hygiene promotion

activities in the affected community through community meeting and house to house education.

To ensure access to safe water supply, GRCS distributed water treatment tablets (Aqua tabs; 1 tablet for 20L, 20L per day per HH, for the period of 45 days to support 400 HH). A total of 15 handwashing facilities installed at the Relief Camp at the location based.

A total of 20 volunteers were trained in hygiene messaging and social mobilization. The operation mobilized community to promote environmental clean-up campaigns to ensure a decent and hygienic environment.

To support this operation, 20 volunteers were trained on Cash and Voucher Assistance and deployed to support cash activities. Volunteers conducted post distribution monitoring and market monitoring. The cash grant was calculated at the minimum food basket rate, set by the Cash Working Group at 550 Ghana Cedis 390 Ghana cedis was allocated to support procurement of water collection and storage items for the households as well as blankets. The total amount of the cash grants per household targeted was 940 Ghana Cedis, which is equivalent to 137.5 Swiss Francs.

Two 2) Volunteers were oriented on Restoring Family Links (RFL) and conducted family tracing and reunification. There was no case of missing after the explosion.

Community engagement and accountability (CEA) was an integral part of the operation, through already existing capacity. CEA focal person in each target community and district were responsible for coordinating community engagement and accountability interventions. A feedback and complaints system were established in consultation with community and widely promoted to ensure everyone was aware of the system and was comfortable using it.

Protection Gender and Inclusion was integrated in all sectors. Indeed, questions on gender, disability and diversity related were included in all needs and sectoral assessments to ensure protective and inclusive programming. Through human resource at the HQ level, the National Disaster Manager supervised activities with technical support and contribution from Health, PMER, CVA, Communication, Finance and Administration. The IFRC Program Coordinator based in Ghana provided technical support and liaised with GRCS and Red Cross Movement partners on all matters regarding the operation.





Keta Tidal Wave Disaster

On Sunday, the3rd. April 2022, the Agavedzi community experienced a tidal wave (coastal flooding) disaster. The coastal flooding destroyed (85) structures including personal belongings such as clothes, foodstuff, and harvested salt among others. There were (55) households displaced involving (228) individuals. This includes (47) male adults, (55) female adults, (82) boys below18 years and (44) girls below 18 years. No death or injury was recorded according to Ketu South Municipal NADMO's damage assessment report dated 4th April 2022. Based on NADMO's report, the Ghana Red Cross Society made secured 56 sets of family shelter kits, with support from the Swiss Red Cross. The "Shelter Repair Kit" (which contains construction tools) were intended for distribution to disaster-affected families to meet their shelter material needs in emergency and recovery phases.

Primarily it is used to repair damaged houses. However, the items provided in it can be combined with existing materials such as timber, bamboo, and metal roof sheets to construct temporary shelters.

Beyond that, the tools may be used for other purposes in the field, such as building latrines, dig drainage ditches, preparing the ground, or supporting livelihood activities. The "Shelter Repair Kit" provide resources for families to initiate their own recovery.

The items were delivered to the affected tidal wave victims at Agavedzi on 30th April 2022, by a team from the Regional Secretariat of the Ghana Red Cross Society, through the Ketu South Municipal Assembly to support the disaster victims. With the help of the Ketu South Municipal Assembly, some of the shelter kits were erected but not to the specification of Ghana Red Cross Society at the location (Agavedzi Beach) to serve as temporary sleeping place for the displaced disaster victims whiles the Ketu South Municipal Assembly work to find a permanent solution to the issue.





BURKINA FASO CRISIS AND ASYLUM SEEKERS RESPONSE

More than 4,872 refugees, including Ghanaians, have fled a trouble spot in Burkina Faso to seek refuge in Ghana due to terrorist attacks by militants against local militia. The mostly children's refugees have fled from Beriyale, a community in Burkina Faso, where a recent suspected Jihadist's attack led to the death of two residents, one of whom left behind three wives and 13 children. The Ghanaians among the refugees are doing business there, while others are farming in Burkina Faso and living there with their families. The joint team from Upper East Region led by the Regional Minister, and top hierarchy of the military and police, as well as officials of the Ghana Red Cross Society, UNHCR, Ghana Refugees Board, National Disaster Management Organization (NADMO), have toured the three districts where the refugees are being accommodated to assess the situation.

Ghana Red Cross Society from Headquarters and Regional Branch embarked on field trip to the affected areas in Binduri, Bawku and Zibilla Districts of Upper East Region of Ghana. The main objective was to assess the situation and mountemergency shelters of displaced persons in three districts of the Upper East region (Bawku West, Bawku Municipal and Binduri districts).

The team interacted with Government officials at the regional and district levels and offered relief to the displaced nationals. A total of 8 family tents were mounted to house 72 people at Issakatam and Sapelga communities.

Tree Planting and Care Project

Another major activity carried out in the Upper West Region, was the tree planting and Care Project.

The tree planting and care project aims to contribute to the reversal of the current trends of rising greenhouse gas emissions from forest destruction. Sustained tree planting and care for reforestation is an achievable target for the Ghana Red Cross Society, harnessing the unique niche of having a network and presence of volunteers in each community, strong partnerships with governments – grounded in auxiliary roles to state authorities.

The project targeted 3 districts of Upper West Regional Branch, meaning each district engaged 5 communities. The project planted and cared for 15,000 multipurpose trees with each community planting and caring for 1000 trees in a year. A total of 135 staff and volunteers of Ghana Red Cross reached out to 223,500 people with key messages on climate change. The Italian Red Cross supported the project through IFRC.

Restoring Family Links

Whenever people are separated from, or without news of, their loved ones as a result of armed conflict, other situations of violence, natural disaster or other situations requiring a humanitarian response, the International Red Cross and Red Crescent Movement responds efficiently and effectively by mobilizing its resources to restore family links.

There were various successful red cross messages and tracing services achieved during the year under review. Notable among them was family reunification on 7th January 2022 for Ghanaian man in Bamako, Mali.

YOUTH DEPARTMENT

The youth department has the National Youth Co-coordinator at the headquarters, Ten (10) Regional Youth Organizers (RYOs), Ten (10) Regional Youth Representatives (RYRs), District Organizers (Dos) and District Youth Organizers (DYOs) at each operating district at the Regional level. The RYOs, Dos, and DYOs are volunteer staff in the region. The volunteer staff helped in organizing and implementing youth-related activities with other youth leaders and School Link leaders in the districts whereas the RYRs and DYRs are decision markers elected during annual general meetings to represent the voice of the youth at the Regional and District management committee respectively.

Fig 5 Youth Membership

	REGION	RYO	RYR	DO	DYO	DYR	Number		fNumber of
							of Registered youth Members	youth Volunteers	Volunteers
1	Ashanti	1	1	12			500	650	1,100
2	Brong Ahafo	1	1	20				2688+	4,158
3	Central	1	1	14			190	1526	3,088
4	Eastern	1	1				286	563	1,249
5	Greater Accra	2	1	16	16		947	28,550	36,575
6	Northern	1	1	19				1960	4269
7	Upper East	1		12	12			2061	14,461
8	Upper West								
9	Volta	1	1				267	801	1623
10	Western	1	1				150	4,000	5,000

Fig 5.1 School Links & Out of School Links

	REGION	Number	Number of out of	TertiaryLinks	Total Number
		of	school Links		of
		Schools Links			Links
1	Ashanti			4	4
2	Brong Ahafo	56	34	1	91
3	Central	38	4	3	45
4	Eastern	60	6		66
5	Greater Accra	1050	34		1084
6	Northern	28		1	29
7	Upper East	60	5		65

YOUTH ACTIVITIES

Youth Representation at the IFRC'S General Assembly 2022 in Geneva.

The National Youth Coordinator (Mr Patrick Brenya) and the National Youth Representative (Huseini Kamara) represented at the IFRC General Assembly which took place from the 19th June 2022 to 23rd June 2022 in Switzerland, Geneva.





International Youth Day 2022 Celebration

The theme for the 2022 International Youth Day was Intergenerational Solidarity: Creating a world for all Ages .

These are the motivational words from **H.E Nana Addo Dankwa Akufo-Addo**, President of the Republic and Commander-in-Chief of the Ghana Armed Forces as well as the **Chief Patron of the Ghana Red Cross Society.**

"Leadership is about choices as I have chosen to invest in the future of our youth. The urgent responsibility we face is to make our countries and continent attractive, for our youth to see here as places of opportunities. This means we must provide education and skills training for

young people to acquire the skills that run modern economies. Let us mobilize for the happy and prosperous Ghana of tomorrow in which all of us including our youth, women and the vulnerable in our society will have equal opportunities to realize our potential and build lives of dignity".

International Youth Day Celebration @Anagkazo Bible College 2022.



International Youth Day is an awareness day designed by the United Nations to celebrate the energies, power and contribution of young people across the world in creating sustainable impact. IYD is commemorated every year on 12 August, bringing youth issues to the attention of the international community and celebrating the potential of youth as partners in today's global society.

The idea for the International Youth Day was proposed in 1991 by the young people who were gathered in Vienna, Austria, for the first session of the World Youth Forum of the United Nations System. The Forum recommended that an International Youth Day be declared, especially for fund raising and promotional purposes, to support the United Nations Youth Fund in partnership with youth organizations.

In 1998,a resolution proclaiming 12 August as International Youth Day was adopted by the first session of the World Conference of Ministers Responsible for Youth, which was hosted by the Government of Portugal in cooperation with the United Nations(Lisbon, 8-12 August 1998). That recommendation was subsequently endorsed by the fifty-fouth session of the General Assembly, in its resolution A/RES/54/120 entitled Policies and programmes involving youth (17 December 1999).

The Assembly recommended that public information activities be organized to support the Day as a way to promote better awareness of the World programme of action for youth, adopted by the General Assembly in 1996.



The Ghana Red Cross youth has participated in the International Youth Day activities since the declaration by the UN. The National Youth Coordinator(Patrick Brenya) and the National Youth Representative (Huseini Kamara) together with some volunteers from the Greater Accra Branch(Gordon), Central Regional Branch(Perpetual Aidoo) as well as the Eastern Regional Branch (Linda) of the Ghana Red Cross Society represented at the 2022 International Youth held at the Anagkazo Bible College in the Eastern Region of Ghana.

Intergenerational Solidarity

Creating a World for all ages, looked at bridging the gap across generations through knowledge sharing ,guidance and forging a strong partnership between generations. The old generation and the young generation ,together can make unifying and sustainable effort to propel Ghana's development forward.

Youth Partnership with the Wizzkids United

The Ghana Red Cross Society youth department embarked on creation of a partnership with the Whizzkids United to develop a pilot project plan through football to address the adverse effect of climate change. Currently, there have been a Memorandum of Understanding signed between the Ghana Red Cross Society and the Wizzkids United for the piloting stage to start which is going to take place in the Northern part of Ghana.

Overviewing of Vetle's participation in the youth programmes (September/December)

Vetle Storvik joined the youth department of the Ghana Red Cross from a period of September and ended on the 15^{th} of December, 2022. During his stay at the Headquarters, we did review a lot of our youth-written proposals for a period of one month. Vetle was posted to the Northern regional office in Tamale for two months (15^{th} of October – 15^{th} of December, 2022).

Vetle's a radio participation program in Ho

 $20^{th} - 22^{nd}$ September

Vetle joined Jonathan Hope(Disaster Manager) to Ho for a radio program about missing family links. He got to meet the regional office there.



Polio vaccination program in Accra

5th-7th October

Vetle joined a three-day national program regarding polio vaccination. He participated in the execution of Polio vaccinations for children under 5 years in the Madina area with the Greater Accra branch of the Ghana Red Cross Society.



Regional seminar for Northern region

Vetle Storvik participated in the four days seminar which started on 18th of October to 21st October,2022 in Tamale for the three regions, Northern, North East and Savanna. Two days were about DRR, and two days about Eye health.



On the 27th October throughout November, people in Buipe became victims to a big flood, the first in 12 years. Vetle had the opportunity to joined the Ghana Red Cross team who helped with accommodation for the affected families, which included space in schools and emergency tents. He joined the rescue team in Buipe to look out for flood victims.





School meeting with Tolon Senior High School

We held a school meeting for the Red Cross school club at Tolon Senior High School on the 28th of October. We talked about what it will say being a volunteer in Red Cross on word basis. We also planned future events for the students to organize, for them to achieve what they want as volunteers in Red Cross.

Negotiations with NADMO in Tolon for a future cooperation with Red Cross

There was a visitation on the 28th of October,2022 by Vetle, the Norwegian youth volunteer to a meeting in Tolon for discussions on how NADMO Tolon and the Ghana Red Cross can cooperate on future problems in the district. There will be followed up by the regional office in Northern Region.

School meeting with Kasuliyili Senior High School

On 2nd November, 2022, the youth department held a school meeting with a Norwegian volunteer (Vetle) to pay visitation to the Red Cross school club at Kesuliyili Senior High School. We talked about what it will say being a volunteer in Red Cross on word basis. We also planned future events for the students to organize, for them to achieve what they want as volunteers in Red Cross.



Trip to Karaga

 3^{rd} of November -5^{th} of November

There was a trip to Karaga to meet the district organizer, and map the community youth projects and activities. We did the following:

Went to one of their oversea communities, to help them start securing of the trees they have received from Ghana Red Cross. We also discussed current challenges and possible solutions for their community.

We held a school meeting with the Karaga Senior High School, which focused on first aid.



Karaga Senior High School

NADMO training in Damango

10th of November

Vetle joined the DRR team from the regional office for a training of NADMO officers in the Savanna region.





Health walk with Tolon Senior High School

On the 12th of November, Vetle participated in a health walk with Tolon Senior High School. Over 150 students took part.

Trip to Kpandai

23rd of November – 25th of November

We went to Kpandai to help harvest their Red Cross farms in the communities. The following activities took place:

Visited three schools in the nearby communities to inform about Ghana Red Cross Society, and recruit new members.

Visited the eye health doctor in Kpandai, to give the latest updates from the Eye Health programs.

Vetle joined a radio program, talking about premature birth with the Ghana Red Cross Society.



School meeting with Northern Business School Tamale

29th of November, 2022.

A school meeting was held for the Ghana Red Cross school club at Northern Business School Tamale with Vetle. We talked about what it will say being a volunteer in Red Cross Movement on word basis. We also planned future events for the students to organize, for them to achieve what they wanted as volunteers in Red Cross.



Joined a Cross country event at an elementary school in Tamale

He joined the first aid team on the 2nd of December,2022 at a cross-country event in one of the elementary schools in Tamale.

Finally, on the 19th December,2022 the Secretary-General (Mr Gbolo Gayoni Solomon) and the National Youth Coordinator (Mr.Patrick Brenya) represented the Ghana Red Cross Society in the Head of States Award which took place in the Jubilee House, Accra. The Head of State Award Scheme-Ghana is a youth charity striving to give more young people each year, access to a high-quality, non-formal education and learning experience.

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