

DREF final report

The Gambia: Cholera

DREF operation n° MDRGM007 10 October, 2012

The International Federation of Red Cross and Red Crescent (IFRC) Disaster Relief Emergency Fund (DREF) is a source of un-earmarked money created by the Federation in 1985 to ensure that immediate financial support is available for Red Cross Red Crescent response to emergencies. The DREF is a vital part of the International Federation's disaster response system and increases the ability of National Societies to respond to disasters.

Summary: CHF 119,220 was allocated from the IFRC's Disaster Relief Emergency Fund (DREF) on 12 January, 2012 to support the Gambia Red Cross Society in delivering assistance to some 30,000 persons travelling in and out of Senegal.

The Gambia is surrounded by Senegal and people move in and out of the country daily. On 6 January 2012, the Government of the Gambia, through the Ministry of Health and Social Welfare sent out a press release through the media regarding a cholera outbreak in neighbouring Senegal, where 10 cases were confirmed. The Gambia was therefore exposed to a risk of cholera outbreak which was all the more serious since Gambian pilgrims who were travelling to Senegal for the *Magal* Muslim festival in the Senegalese town of Touba were returning. The nation was therefore prepared for an eventual cholera spread.



Volunteers distributing water, soap and hand washing points at Amdalai Border Crossing Point /Photo GRCS

The Gambia Red Cross Society (GRCS) supported by the International Federation of Red Cross and Red Crescent Societies (IFRC) made a DREF request to implement country wide preparedness, prevention, surveillance and response activities in collaboration with the regional health teams and the national disaster management agency. The National Society prepared all its regional branches and mobilized 270 volunteers for the implementation of activities. GRCS started deploying teams in all border crossing points with Senegal, weekly open markets and border communities. Schools and fish landing sites were also covered during sensitization activities. Coordination meetings were conducted by both Senegal and The Gambia border authorities and health officers. Furthermore, the National Society used its prepositioned stock comprising 60,000 bars of soap, 870 hand towels, 348 buckets, 348 kettles, 870 bottles of detergents and 30,000 bottles of 1.5 water bottles, distributed to people travelling from Senegal to the Gambia and on transit to the *Magal* festival.

The major donors and partners of the DREF include the Red Cross Societies and governments of Australia, Austria, Belgium, Canada, Denmark, Ireland, Italy, Japan, Luxembourg, Monaco, the Netherlands, Norway, Spain, Sweden, USA, DG ECHO, the UK Department for International Development (DFID), the Medtronic, Z Zurich and Coca Cola Foundations including other corporate and private donors. Details of all contributions to the DREF for 2012 can be found on:

http://www.ifrc.org/docs/appeals/Active/MAA00010_2012.pdf.

The IFRC, on behalf of the Gambia Red Cross Society, would like to extend thanks to all partners for their generous contributions.

The remaining balance of CHF 5,269 has been returned to the DREF.

[<click here for the final financial report, or here to view contact details>](#)

The situation

The feast of *Magal* used to witness the movement of people from the Gambia, Guinea Bissau, Guinea Conakry, Mali, and Mauritania into Touba in Senegal. The feast attracts tens of thousands of people. Food and water during the period are taken at common public places, and this practice increases the risks of contraction and spread of cholera. Among countries mentioned above, Gambia is the only country whose gateway is Senegal, except for Gambia's airport and seaport. This makes the Gambia a very high risk country in terms of the spread of the disease. The Ministry of Health and partners indicated the need to be prepared to respond to any case of cholera and advised the general public to take precautionary measures. The Ministry also called on people to work together to prevent the incoming of cholera and its spread in the country.

Red Cross and Red Crescent action

To support the efforts of the government in addressing prevention and averting the possibility of an imminent crisis, the National Society, through this DREF operation, collaboratively worked with the Ministry of Health through regional health teams, community health workers, health inspectors, border authorities, teachers, communities and Red Cross volunteers.

GRCS used the following strategies to support the efforts of the government in addressing the prevention and averting the possible presence of cholera in the Gambia:

- Coordination with Government of the Gambia and its partners and Senegal's border authorities during the 10-day implementation period.
- Support to the government of the Gambia on surveillance system. GRCS was also on standby to provide transport of any confirmed cases at border points and open markets to the nearest health facility.
- Sensitization of the general public on cholera prevention by way of personal hygiene and proper hand washing at open markets, schools, border communities.
- Distribution of soap, detergents and clean drinking water to the population moving from Senegal into the Gambia and food vendors at the borders, open markets, schools, fishing landing sites and crossing points.
- Monitoring of the implementation progress in collaboration with the national team from the Ministry of Health in all border points, border communities, open markets, schools and fishing landing sites.

The following table gives more details on the deployment of teams in all border crossing points with Senegal, weekly open markets, border communities, etc.

Region	Volunteers	Borders	Open Markets	Border Communities	Fish Landing Sites	Border Schools	Totals
Banjul	10	0	0	1	1	5	7
Kanifing Municipality	30	0	2	5	0	4	11
West Coast Region	50	9	0	8	2	0	19
North Bank Region	60	5	5	5	0	16	31
Lower River Region	40	3	2	4	0	4	13
Central River Region	40	9	10	30	0	24	73
Upper River Region	40	12	7	5	0	10	34
Grand Totals	270	38	26	58	3	63	188

Achievements against outcomes

Water, sanitation, and hygiene promotion	
Outcome: Improve health conditions through the implementation of adequate hygiene promotion activities in strategic locations.	
Outputs	Activities planned
<p>Immediate reduction of cholera in 87 strategic locations.</p> <p>Improve people's knowledge on border crossing points, open markets and border communities on cholera prevention and response</p> <p>To contribute to the improvement of access to clean water, hygiene and sanitation facilities for 30,000 persons.</p>	<ul style="list-style-type: none"> • Procure and distribute 60,000 pieces of soap to the seven regional Red Cross Branches. • Distribute 2 pieces of soap per person for improved personal hygiene. • Provide adequate materials for sufficient hand washing points in each of the identified strategic points. • Conduct four decentralized training for identified NDRTs and CDRTs who will carry out cholera sensitization activities. • Adapt existing cholera message from the ministry of health for sensitization at strategic locations including border points. • Procure and distribute 30,000 water bottles to moving population into Senegal to attend the <i>Magal</i>. • Procure and use 348 buckets, 870 hand towels, and 348 kettles for proper hand washing. • Stick up existing cholera posters developed by the Ministry of Health to sensitize on cholera. • Conduct hygiene promotion and proper hand washing sensitization activities in border crossing points and open markets. • Station volunteers in 15 busy border crossing points, 20 open markets and 25 border communities to sensitize people on cholera prevention and early detection of cholera cases. • Response by referring any suspected cholera case to the nearest health facility.

Impact:

In the period 12 to 21 January, 270 Red Cross volunteers were trained in different duty and centralised stations (60 in North Bank, 40 in Lower River Region, 10 in Banjul, 30 in Kanifing Municipality, 50 in West Coast region, 40 in Central River Region and 40 in Upper River Region). The training was conducted by the regional health officers. Some of the topics presented included proper hand washing methods, how to prevent cholera, how to send right messages of cholera to the general public without creating panic and handling of cases. The trained volunteers were deployed to the affected areas to conduct response activities.

In all the regions that included border crossing points, border communities, schools, open markets, ferry crossing terminals and fishing landing sites, 53,690 people were supported in washing their hands before crossing into the Gambia and over 150,000 others sensitized in 27 open markets. A total of 50,000 pupils were also sensitized in 32 schools and 15,000 other people in 2 fishing landing sites. In all crossing points, schools, and fishing landing sites 2 bars of soap were given out per person at the start of the operation, but this was later

reduce to 1 bar per person crossing into the Gambia. Water was also distributed in North bank region at the Amdanlai and Farafenni crossing points which are the main official border crossing and transit points between the Gambia and Senegal towards Guinea-Bissau and the main route for the travelling population attending the *Magal*. Water was distributed to 30,000 people from 12 to 18 January 2012. Buckets, hand towels and kettles were also distributed to the health facilities and Red Cross Branch Offices for use in case management and as replenishment of used health stock.

These achievements were possible due to the change in strategy during the implementation by using the border authorities, schools and fishing landing sites. The involvement of health personnel helped to increase the total population covered. The regional offices of the National Disaster Management Agency and the Ministry of Health allowed the use of their stock to ensure continuity of the operation which was later replenished after procurement.

The Gambia Red Cross Society, the National Disaster Management Agency and regional health offices were in touch on a daily basis concerning the state of affairs and implementation progress in all the identified points. Resulting from this partnership some of the volunteers used for the intervention were recruited from the national disaster management regional teams and the regional health offices. The GRCS team comprises of 2 RDRTs, 1 Watsan officer and a volunteers management coordinator, 10 NDTRs and 25 CDRTs at branch level who were also attached to teams for supervision and reporting.

The following table gives more details about distribution activities and the number of people reached

Regions	No of persons hand washed	No of soap distributed	No of soap in packets	No of soap distributed to health facilities	Replenishment of GRCS stock
North Bank Region	15,735	7,920	220	1,800	2,000
Lower River Region	2,277	2,277	63.25	600	1,000
Central River Region	5,740	5,740	159.4	625	1,000
Upper River Region	4,880	4,880	136	600	1,000
West Coast Region	11,102	11,102	308.3	1,000	1,500
Banjul	4,546	4,546	126.2	400	1,000
Kanifing Municipality	9,410	9,410	261.3	600	1,000
Total	53,690	45,875	1,274.45	5,625	8,500

Challenges:

The late transfer of funds contributed to the delayed in communication with the Senegalese Red Cross Society particularly sharing of information on the number of cases detected and confirmed. Besides, due to the fact that training was not done at one centralised point for all the volunteers as planned in the strategy, some logistic challenges occurred. They were mainly related to moving resource persons from one training centre to another, supervision and coordination of all training points. There was also a delay in the transfer of funds and therefore the procurement of materials was delayed. Furthermore, to resolve the limited mobility of volunteers between places, GRCS has hired private cars to supplement its poor fleet.

Lessons learnt:

- The distribution of soap to the travelling population from Senegal into the Gambia has helped a great deal in motivating people to wash their hands and their numbers have continued to increase.
- Most of Senegal border health facilities close to the Gambia do their case referrals to the Gambia health facilities, this was not factored during the planning but coordination meetings were organized and held with health facilities along the border for information sharing and case management.
- There was no contingency plan; therefore GRCS and the Ministry of health should develop one for the coming years for better preparedness and response.

Contact information

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

- **IFRC Regional Representation:** Momodou Lamin Fye, Regional Representative for Sahel; Dakar; phone: +221.33.869.36.41 or +221.77.332.56.72; email: momodoulamin.fye@ifrc.org;
- **IFRC Africa Zone:** Daniel Bolaños, Disaster Management Coordinator for Africa; Nairobi; phone: +254 (0)731 067 489; email: daniel.bolanos@ifrc.org
- **IFRC Geneva:** Christine South, Operations Quality Assurance Senior Officer; phone: +41.22.730.45 29; email: christine.south@ifrc.org
- **IFRC Regional Logistics Unit (RLU):** Ari Mantyvaara Logistics Coordinator, Dubai; phone +971 50 4584872, Fax +971.4.883.22.12, email: ari.mantyvaara@ifrc.org

For Resource Mobilization and Pledges:

- **IFRC Africa Zone:** Loïc de Bastier, Resource Mobilization Coordinator for Africa; Addis Ababa; phone: +251-93-003 4013; fax: +251-11-557 0799; email: loic.debastier@ifrc.org

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

- **IFRC Africa Zone:** Robert Ondrusek, PMER/QA Delegate for Africa; Nairobi; phone: +254 731 067277; email: robert.ondrusek@ifrc.org

How we work

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

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

www.ifrc.org
Saving lives, changing minds.



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

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

MDRGM007 - Gambia - Cholera Outbreak

Appeal Launch Date: 12 jan 12

Appeal Timeframe: 12 jan 12 to 12 apr 12

Interim Report

Selected Parameters	
Reporting Timeframe	2012/1-2012/08
Budget Timeframe	2012/1-2012/04
Appeal	Mdrgm007
Budget	APPROVED

All figures are in Swiss Francs (CHF)

I. Funding

	Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination	TOTAL	Deferred Income
A. Budget	119,220					119,220	
B. Opening Balance	0					0	
Income							
<u>Other Income</u>							
<i>DREF Allocations</i>	119,220					119,220	
C4. Other Income	119,220					119,220	
C. Total Income = SUM(C1..C4)	119,220					119,220	
D. Total Funding = B +C	119,220					119,220	
Coverage = D/A	100%					100%	

II. Movement of Funds

	Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination	TOTAL	Deferred Income
B. Opening Balance	0					0	
C. Income	119,220					119,220	
E. Expenditure	-113,951					-113,951	
F. Closing Balance = (B + C + E)	5,269					5,269	

Selected Parameters	
Reporting Timeframe	2012/1-2012/08
Budget Timeframe	2012/1-2012/04
Appeal	Mdrgm007
Budget	APPROVED

All figures are in Swiss Francs (CHF)

III. Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance
		Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination		
A		B					A - B	
BUDGET (C)	119,220						119,220	
Relief items, Construction, Supplies								
Water, Sanitation & Hygiene	29,250	31,898				31,898	-2,648	
Utensils & Tools	2,018	1,969				1,969	49	
Other Supplies & Services	28,350	24,290				24,290	4,060	
Total Relief items, Construction, Su	59,618	58,157				58,157	1,461	
Logistics, Transport & Storage								
Transport & Vehicles Costs	3,432	3,265				3,265	167	
Total Logistics, Transport & Storage	3,432	3,265				3,265	167	
Personnel								
National Society Staff	750	5,951				5,951	-5,201	
Volunteers	27,270	26,338				26,338	932	
Total Personnel	28,020	32,289				32,289	-4,269	
Workshops & Training								
Workshops & Training	13,440	9,583				9,583	3,857	
Total Workshops & Training	13,440	9,583				9,583	3,857	
General Expenditure								
Travel		48				48	-48	
Information & Public Relations	1,050						1,050	
Office Costs	2,250	2,195				2,195	55	
Communications	1,500	975				975	525	
Financial Charges	1,000	484				484	517	
Other General Expenses	1,633						1,633	
Total General Expenditure	7,433	3,702				3,702	3,731	
Indirect Costs								
Programme & Services Support Recov	7,276	6,955				6,955	322	
Total Indirect Costs	7,276	6,955				6,955	322	
TOTAL EXPENDITURE (D)	119,220	113,951				113,951	5,269	
VARIANCE (C - D)		5,269				5,269		