DREF operation final report

International Federation of Red Cross and Red Crescent Societies

Benin: Meningitis

DREF operation n° MDRBJ001
GLIDE n° EP-2008-000027-BEN
29 December 2008

The International Federation's 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 50,000 (USD 44,000 or EUR 30,000) was allocated from the Federation's Disaster Relief Emergency Fund (DREF) on 21 February, 2008 to support the national society in delivering assistance to some 1.8 million beneficiaries in Benin Republic.

With support from the DREF allocation of the Federation, the Red Cross of Benin mobilized and trained volunteers who were deployed to carry out sensitization and mobilization campaign for vaccination. Working in collaboration with government agencies, local chiefs and local radio stations, the national society reached about 88% of its target beneficiaries with its messages. These messages focused on symptoms, prevention, response measures and importance of vaccination.

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Red Cross volunteers sensitizing the people during a market day/ Red Cross of Benin

The situation

Meningitis outbreaks are registered every year in countries along the meningitis belt in Africa including Benin. Between January and February 2008, a total of 289 cases with 29 deaths were reported in Atacora, Donga, Alibori and Borgou counties. As the epidemic was spreading, the Red Cross of Benin mobilized and deployed its team of volunteers in the affected areas to carry out an assessment of the situation. With support from the Federation, the national society through its trained team of volunteers carried out sensitization and mobilization activities in the affected communities.

The national society organized refresher training for its volunteers and produced Information, Education, and Communication (IEC) materials for distribution to communities during mobilization exercise. The Red Cross employed participatory approach in sensitizing the target population by organizing discussion sessions and drama play. During these sessions, parents were more enlightened on the symptoms, prevention and response measures. This had a great impact as reflected by the turn out during the vaccination campaign.

The operation also afforded the national society the opportunity to strengthen the capacity of its volunteers and improve the image of the Red Cross of Benin.

With support from the Netherlands Red Cross through the DREF allocation and technical support from the West Coast regional representation in Lagos and the Zone office in Dakar, the Red Cross of Benin worked with the Ministries of Health (MoH) and Family Affairs during the intervention. As the lead agency in social mobilization for vaccination, the Red Cross of Benin worked in close collaboration with local chiefs and government authorities in the affected regions to implement its activities. The national society also worked in partnership with local radio stations to reach target populations.

Red Cross and Red Crescent action

Progress towards objectives

Emergency health

Objective: To reduce the vulnerability of populations and the most vulnerable to meningitis in the counties of Atacora, Donga, Alibori and Borgou.

Activities Planned	Expected outcomes
• Train 300 Red Cross volunteers; • Sensitize affected population on the symptoms and preventive measures against meningitis through home visits and public discussions; • Mobilize the affected population for vaccination; • Detect and refer early cases to health centres; • Monitor the expanded programme on immunization; • Carry out advocacy to the government and other actors; • Produce and distribute IEC materials on meningitis transmission and preventive measures.	• The knowledge and capacity of 300 Red Cross volunteers in the affected areas have improved; • Vulnerable communities are protected against meningitis through awareness activities of the Red Cross; • Population in the affected areas have actively participated in the vaccination campaign; • populations have been sensitized on early alert and have been able to detect first symptoms of the epidemic; • Affected populations have been referred to the nearest health centres for treatment; • IEC materials have been produced and distributed for awareness education.

Achievements and Impact:
The Red Cross of Benin has established eight training centres in the eight most affected localities where training was conducted for 300 selected Red Cross volunteers. The training was co-facilitated by Red Cross and health officials from the Ministry of Health and focused on techniques of mobilizing people for vaccination, the symptoms and prevention of meningitis. The training session also emphasized on the door-to-door approach and the use of local languages to reach target population. The Red Cross of Benin produced and distributed IEC materials during the awareness exercise. The national society used local radio broadcasts to create awareness on the epidemic and the need for vaccination. Local town criers were also mobilized during the exercise.

To reach the largest part of the target population, the Red Cross organized 59 public discussions in communities. The discussions included question and answer session and drama play in local languages. Volunteers also carried out door-to-door awareness campaign during which parents were sensitized on the symptoms of the epidemic, prevention and response measures. The Red Cross also enlightened parents on the importance of vaccination against meningitis and other diseases.

The training sessions has strengthened the capacity and enhanced the knowledge of the Red Cross volunteers in community mobilization for vaccination. The door-to-door approach and discussions in local languages impacted a lot on the target population as the vaccination exercise recorded a great response from parents.

Challenges:
The campaign was delayed because of the national legislative elections in the country. However, the operation was effectively carried out after the elections.

Conclusion

Lessons learned:

Good collaboration with heads of communities, local authorities and radio houses contributed a lot to the success recorded during the campaign. The involvement of health officials during the training made them understand better the Red Cross Movement. The exercise has improved the image of the Red Cross in the affected communities.

How we work

All International Federation 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 is committed to the Humanitarian Charter and Minimum Standards in Disaster Response (Sphere) in delivering assistance to the most vulnerable.

The International Federation's activities are aligned with its Global Agenda, which sets out four broad goals to meet the Federation's mission to "improve the lives of vulnerable people by mobilizing the power of humanity".

Global Agenda Goals:

- Reduce the numbers of deaths, injuries and impact from disasters.
- Reduce the number of deaths, illnesses and impact from diseases and public health emergencies.
- Increase local community, civil society and Red Cross Red Crescent capacity to address the most urgent situations of vulnerability.
- Reduce intolerance, discrimination and social exclusion and promote respect for diversity and human dignity.

Contact information

For further information specifically related to this operation please contact:

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International Federation of Red Cross and Red Crescent Societies

MDRBJ001 - Benin - Meningitis

Final Financial Report

Selected Parameters	
Reporting Timeframe	2008/2-2008/11
Budget Timeframe	2008/2-2008/5
Appeal	MDRBJ001
Budget	APPEAL

All figures are in Swiss Francs (CHF)

I. Consolidated Response to Appeal

	Goal 1: Disaster Management	Goal 2: Health and Care	Goal 3: Capacity Building	Goal 4: Principles and Values	Coordination	TOTAL
A. Budget	**50,000**					**50,000**
B. Opening Balance	**0**					**0**
Income						
Other Income						
Voluntary Income	*42,874*					*42,874*
C5. Other Income	***42,874***					***42,874***
C. Total Income = SUM(C1..C5)	**42,874**					**42,874**
D. Total Funding = B +C	**42,874**					**42,874**
Appeal Coverage	**86%**					**86%**

II. Balance of Funds

	Goal 1: Disaster Management	Goal 2: Health and Care	Goal 3: Capacity Building	Goal 4: Principles and Values	Coordination	TOTAL
B. Opening Balance	0					**0**
C. Income	42,874					**42,874**
E. Expenditure	-42,874					**-42,874**
F. Closing Balance = (B + C + E)	0					**0**

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III. Budget Analysis / Breakdown of Expenditure

Account Groups	Budget	Expenditure						Variance
		Goal 1: Disaster Management	Goal 2: Health and Care	Goal 3: Capacity Building	Goal 4: Principles and Values	Coordination	TOTAL	
	A						B	A - B
BUDGET (C)		**50,000**					**50,000**	
Supplies								
Food		1,932					**1,932**	**-1,932**
Teaching Materials	714							**714**
Total Supplies	**714**	**1,932**					**1,932**	**-1,218**
Transport & Storage								
Transport & Vehicle Costs	3,376	1,371					**1,371**	**2,005**
Total Transport & Storage	**3,376**	**1,371**					**1,371**	**2,005**
Personnel								
National Staff		2,365					**2,365**	**-2,365**
National Society Staff	19,913	20,366					**20,366**	**-453**
Total Personnel	**19,913**	**22,731**					**22,731**	**-2,818**
General Expenditure								
Travel	1,575	2,353					**2,353**	**-778**
Information & Public Relation	13,413	8,266					**8,266**	**5,147**
Office Costs	6,259	1,834					**1,834**	**4,425**
Communications	1,500	388					**388**	**1,112**
Financial Charges		1,212					**1,212**	**-1,212**
Total General Expenditure	**22,747**	**14,053**					**14,053**	**8,694**
Programme Support								
Program Support	3,250	2,787					**2,787**	**463**
Total Programme Support	**3,250**	**2,787**					**2,787**	**463**
TOTAL EXPENDITURE (D)	**50,000**	**42,874**					**42,874**	**7,126**
VARIANCE (C - D)		**7,126**					**7,126**	