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Emergency appeal final report

Comoros: Flash Floods

 International Federation
of Red Cross and Red Crescent Societies

Final report

Emergency appeal n° MDRKM004
GLIDE n° FL-2012-000066-COM
30 November, 2013

Period covered by this Final: May 2012 to March 2013

Appeal target (current): CHF 624,074

Appeal coverage: 100% [<click here to go directly to the final financial report, or here to view the contact details>](#)

Appeal history:

- This [Emergency Appeal](#) was initially launched on 4 May 2012 with for CHF 801,629 to assist 20,000 beneficiaries (4,000 families) affected by Flash Floods for 6 months.
- CHF 100,000 was initially allocated from the Disaster Relief Emergency Fund (DREF) to support the National Society in the initial emergency phase.
- An [operations update n° 1](#) was issued on 15 June 2012 and [operations update n° 2](#) issued on 15 August 2012 to provide a progress report of the response operation.
- A [6 months summary update](#) of the operation was issued on 8 January 2013.
- Based on available funds, the population needs and in coordination with Comoros Red Crescent (CRCo) and other actors, a [Revised Emergency Appeal](#) was issued enabling the National Society to use the available funds in the most efficient and sustainable manner and extended the operation until 31 March 2013.



Mapping of a vulnerable community on Grand Comore Island – DRR Activity – December 2012. Photo/IFRC

Summary: Heavy rains inundated Comoros Islands from 20 April 2012, and caused the worst flooding since decades. As of 26 April, over 64,987 people were affected, with more than 9,000 displaced on Grand Comore, Mohéli and Anjouan Islands. Following the request of Comorian Red Crescent Society (CRCo) and with support from the International Federation of the Red Cross and the Red Crescent Societies (IFRC), an Emergency Appeal was launched to assist up to 20,000 affected beneficiaries (4,000 households) through relief distribution of non-food items, water and sanitation hygiene (WASH) kits, hygiene promotion activities, as well as health and care interventions, including first aid and psychosocial support.

A total of 1,703 households (11,139 beneficiaries) received non-food items (NFIs), including kitchen sets, sleeping mats, lanterns, stoves and mosquito nets. WASH kits including buckets, jerry cans, soap bars, chlorine tablets and water purification sachets were also distributed to beneficiaries. Emergency kits were rapidly distributed by Red Crescent volunteers. Moreover, CRCo was the implementing partner for World Food Programme (WFP) in distribution of energy biscuits, and for United Nations Children's Fund (UNICEF) for distribution of WASH kits.

NFI goods that were not distributed were prepositioned in CRCo warehouse in the capital, Moroni, and later pre-positioned in high risk areas for increased preparedness for new crisis.

African Development Bank (AfDB) signed an agreement with CRCo and Comorian Government, for financing a USD 1 million food and Non Food Items (NFI) distribution on Comoros Islands for approximately 6,000 households. This cooperation was initiated during 2013, which has strengthened the CRCo relief capacity.

Following a one week training provided by Head of Programs and Health, 85 volunteers conducted hygiene promotion and epidemiological surveillance activities in 48 communities on all three Islands. Overall, 23,359 households were sensitized; 8,923 in Grand Comore, 4,500 in Mohéli and 9,936 in Anjouan. Sensitisation covered topics including Hygiene and Food, Safe Water, Malaria and Measles prevention, as well as the use of mosquito nets for disease prevention. A KAP (Knowledge, Attitude and Practice) survey was conducted in the beginning of this activity upon a sample of 360 households in order to assess population knowledge and habits related to hygiene and diseases. This survey was carried out after the implementation to determine the efficiency and impact of this activity. A report showing a comparison of the results was produced in January by CRCo.

In order to prevent water borne diseases and to improve livelihood and hygiene of vulnerable beneficiaries, CRCo cleaned and disinfected 306 water tanks (upon 522 assessed) between 17 May and 29 July 2012 across 17 communities, covering an estimated population of 18,054 beneficiaries. A total of 56 water tanks serving a population of 3,289 beneficiaries was repaired (and covered) to offer beneficiaries a safer source of water. The sum of these 56 water tanks represents a volume of 1,774 cubic metres of water. The average capacity is 32 cubic metres by cistern for an average population of 59 beneficiaries.

In order to reduce the vulnerability of beneficiaries, 24 trained volunteers (eight on each Island) conducted disaster risk reduction (DRR) trainings in 12 communities across the country. Joint assessments were carried out in the communities, and key DRR Projects developed.

In order to reinforce CRCo activities in hygiene promotion, epidemiological surveillance, WatSan, and DRR, a weekly radio show was undertaken during 3 months. This was an efficient way to reach beneficiaries across all three Islands in order to communicate prevention messages and to inform them about activities done in the field.

Contributions to this appeal have been received from British Red Cross, Canadian Red Cross, Canadian Government, Japanese Red Cross, French Red Cross, Swedish Red Cross, European Commission - DG ECHO, Red Cross of Monaco, and WHO Voluntary Emergency Relief.

On behalf of the Comorian Red Crescent Society, the IFRC would like to thank all partners and donors for their generous support to this appeal.

The situation

In an already intense rainy season, heavy rains inundated the Comoros islands from 20 April 2012, and caused the worst flooding in decades. The heavy downpours resulted in landslides, collapsed bridges, loss of livestock and contamination of rain water tanks, isolating many areas and impeding the evacuation of affected communities. In total, four people lost their lives in the disaster, 83 persons were severely injured, 174 houses were completely destroyed, 307 houses lost their roof and 1,774 were flooded. (COSEP – May 29th 2012). Comorian Red Crescent Society (CRCo) responded immediately to this Emergency.

According to United Nations Disaster Assessment and Coordination¹ (UNDAC) figures, 64,987 people (8 percent of the total population) were directly affected by the floods (17,232 in Grande Comore; 30,063 in Anjouan and 17,592 in Mohéli). Another 80,000 people in Moroni and 3,900 in Mitsoudje were indirectly affected by broken water pumps.

¹ United Nations Disaster Assessment and Coordination - Union of the Comoros. Flash Floods. Situation Report #7- 04 June 2012.

Communities suffered loss of livelihoods and means of production. Most small scale farmers lost their crops, which typically include bananas, coconuts, sweet potato, vanilla and cloves, as a result of the extensive damaged caused by rocks and debris as a result of flooding. The floods covered the affected land with stones and sand, and the flooding resulted in hydro-geography changes in the landscape, opening new water ways, which increased the risk in terms of future floods.

Six months after the flooding, the situation improved in the country. Nevertheless, water quality remained a concern especially for households who were using water tanks. Landslide left a significant amount of sand and rocks, especially in Vouvouni area on Grand Comore Island. Local population worked hard to clean fields by selling bags of sand and rocks collected in the fields.

Road sections were cleaned and repaired but the road condition was generally in a bad state. As a result, vehicles speed was reduced, which had a positive consequence on the number of road accidents. Projects were initiated to rebuild strategic roads in order to improve transport inside and between communities.

It was noted that the average food prices increased on all three islands. The three main products that increased the most (around 40percent each) were banana, manioc and potatoes.

Coordination and partnerships

In the initial stage of this operation, coordination meetings were held, facilitated by the Government's General Direction of Civil Protection (COSEP). Stakeholders included CRCo, OCHA, UNDP, UNICEF and a representative from each of the government ministry representing relevant sectors. After the emergency phase, meetings took place once a month. During the time of the operation, stakeholders continued to share information informally. Also, a strong partnership was maintained with COSEP during the course of the emergency response.

Discussions took place with the Indian Ocean Regional Intervention Platform (PIROI 2) Consultant regarding the continuity of DRR activities beyond the Appeal. The consultant made a three weeks field visit aimed at assessing hazards, needs and capacities on all three Islands, and discussions were undertaken on how to continue the activities. The partnership and support provided from PIROI has been very important for the emergency response undertaken by CRCo which was recognized in the final evaluation of the emergency operation.

The intervention was coordinated with UNICEF that distributed NFI Kits and WASH kits to affected households. CRCo was also the implementing partner for WFP in distribution of energy biscuits, and for United Nations Children's Fund UNICEF for distribution of WASH kits.

Red Cross and Red Crescent action

The CRCo provided rapid emergency response, immediately involving in evacuation of affected communities and individuals, and first aid services to injured.

During the operation, CRCo provided emergency response through distributing NFIs and WASH kits, implementing emergency health and watsan activities. Emergency health included health and hygiene awareness and disease surveillance activities, while the watsan activities involved rehabilitating and cleaning water tanks. CRCo also involved in important risk reduction initiatives through undertaking vulnerability and capacity assessments (VCAs) and developing community disaster risk reduction projects.

IFRC provided support to launch the emergency appeal and put in place an Operation Manager to support implementation of the operation. A relief RDRT member from Benin supported the operation for one month,

² The PIROI's main objective is to contribute to reduce vulnerabilities of population threatened by disasters and their consequences; to reinforce Institutional, logistic and human capacities regarding disaster preparedness and response of NS located in south west of Indian Ocean. Since 2000 PIROI works building on disaster preparedness and disaster response capacities by training response teams, stocking relief items and equipment in 6 warehouses in the region, supporting national society institutional development and community capacity building.

between 11 June and 12 July. He provided technical assistance and capacity building for the national society in collaboration with the logistics department and relief officer. The RDRT provided relief training for 51 staff and volunteers, topics included RCRC history, logistics, relief tools, undertaking assessments and organising distributions.

PIROI provided extensive support towards the operation in terms of in kind donation and technical support. Additionally, the input and support in regards to developing DRR activities have been particularly valuable.

ICRC provided 900 mosquito nets to be distributed to most affected families. Those mosquito nets were pre-positioned on Anjouan Island.

Achievements against outcomes

Overview

Through the emergency appeal, CRCo managed to implement most of the planned activities, which substantially contributed to improve the situation for the affected population. The activities were undertaken in many times extremely challenging conditions.

A total of 11,139 beneficiaries (1,703 families) across 42 communities were provided with emergency items to respond towards some of their immediate needs. The NFIs provided included kitchen sets, buckets, jerry cans, soaps, stove, sleeping pads, mosquito nets, and lanterns. In order to improve hygiene and to minimize the risk for water borne diseases, aqua tabs were also distributed to the affected families.

306 water tanks were cleaned and disinfected across 17 communities, which resulted in safe water for a population of 18,054 beneficiaries. Additionally, 56 water tanks serving a population of 3,289 beneficiaries were repaired and covered to offer beneficiaries a safer source of water.

515 families were evacuated and first aid was provided to 26 beneficiaries of the evacuated families. Additionally, around 100 wounded persons were supported through the support of CRCo first aid interventions. Psychological support was provided to wounded and evacuated population in high distress.

23,359 households were sensitized by CRCo in health and hygiene awareness. A total of 3,406 mosquito nets were distributed to 1,703 families on Grand Comore, Mohéli and Anjouan Islands.

The capacity of CRCo was strengthened through the targeted trainings of staff and volunteers prior activities. 30 CRCo volunteers were trained on water tanks disinfection, and 20 additional volunteers were trained on WatSan assessment. 50 staff and volunteers were trained in water and sanitation by the RDRT member. 85 volunteers from all three Islands were trained in prevention messages to minimize risk of contamination and diseases and increase hygiene practices. The capacities of 24 volunteers were enhanced through one week training on DRR.

Volunteers conducted community trainings, and together with local authorities, undertook VCAs in high risk communities. The VCAs contributed to the development of five disaster risk reduction projects.

The main challenges faced included logistical challenges working in a difficult situation trying to provide emergency relief when large parts of the infrastructure and support structures in the society were disrupted. Also, relief had to be provided to affected Islands, which was a challenge in terms of access.

Relief distributions (basic non-food items)	
Outcome: 11,139 displaced persons (1,703 households) in Grand Comore, Mohéli and Anjouan are provided with emergency assistance for a period of one month	
Outputs (expected results)	Activities planned
<ul style="list-style-type: none"> 1,703 households are provided with appropriate non-food items. 	<ul style="list-style-type: none"> Develop beneficiary targeting strategy and registration system to deliver intended assistance. Purchase and distribute non-food items (kitchen sets, sleeping pad, lantern, stove) to 1,703 households (401 in Grand Comore, 644 in Mohéli and 658 in Anjouan) Monitor and evaluate the relief activities and provide reporting on relief distributions Conduct a lessons learnt workshop

Impacts: Following April 2012 Floods, in order to respond to immediate needs, CRCo organized a non-food items (NFI) distribution aimed at helping most affected families. Thanks to the support provided by IFRC and from PIROI (in kind donations, technical and logistic support since 4 May 2012), the distribution started shortly after the floods. Overall, 11,139 beneficiaries (1,703 families) received kitchen sets, buckets, jerry cans, soaps, stove, sleeping pads, mosquito nets, and lanterns. 51 CRCo volunteers were trained in Food and NFI distribution by an IFRC distribution specialist (RDRT).

In order to improve hygiene and to minimize the risk for water borne diseases, aqua tabs were distributed to affected families. Beneficiaries were identified through field assessments executed by CRCo volunteers. Overall, CRCo distributed NFI Kits to 1,703 families across 42 communities. This distribution was organized as follows:

- Grand Comore Island: 25 volunteers distributed NFIs in 13 communities to 401 families.
- Mohéli Island: 30 volunteers distributed NFIs in 17 communities to 644 families.
- Anjouan Island: 30 volunteers distributed NFIs in 12 communities to 658 families.

NFI goods that were not distributed were prepositioned in CRCo warehouse in the capital, Moroni, and later pre-positioned in high risk areas for increased preparedness for new crisis.

French Red Cross, through PIROI, provided for NFIs for this operation. Some of the items were already prepositioned on Grand Comore Island and the rest was flown from La Réunion and Mayotte.

CRCo conducted an evaluation of NFI distribution upon a sample of 401 families in Grand Comore, Anjouan and Moheli Islands. This study aimed at assessing the level of planning, quality and pertinence of distributed items. It also examined beneficiaries' satisfaction level and uncovered needs. Overall, 73.6percent of the beneficiaries said that the distribution had been good. To improve this distribution, they asked for better planning (58.8percent), increased security during the distribution (29.5percent) and better information regarding the distribution (11.6percent). The three main answers regarding what beneficiaries would do in the future to avoid flooding of their house are as follow: to build a dam (36.7percent), to build a house with concrete blocks (20.2percent) and to build a water canalization (19.9percent). Based on the results, a participatory document showing lessons learnt was produced and corrective actions to be taken by CRCo in the future. This document will be shared with volunteers, employees and governing Board. Upcoming AfDB food distribution will be a good opportunity for CRCo to readjust its distribution strategy before the implementation phase.

Challenges:

Part of the NFI stock was provided by PIROI, and part was from local procurement; however the market could not meet the operations demands. For example, even if sleeping mats were available in Comoros, the market was unable to provide to the scale and timeframe required for the operation. Because Comoros is composed by three Islands, inter islands transportation was an additional cost and challenge for this distribution.

There were also challenges encountered with uploading and unloading containers. Transferring containers from barges to the seaport is a very lengthy and time consuming process. Nevertheless, it may be possible to quickly ship by air the most important items (such as emergency rescue items for instance) to Comoros

through PIROI, who can ask the support of French Army Air force. Prepositioned emergency stock should be stored in each warehouse located on each island.

Table 1: NFI distribution to 1703 Households

Location	Benef. Famil	NON FOOD ITEMS							
		STOVE	LANTERN	KITCH	MATTRESS	SOAP	BUCKET	MOSK NET	JERRYCAN
MOHELI ISLAND	644	-	644	644	644	-	644	1 288	644
REGION DE MLEDJELE	127	-	127	127	127	-	127	254	127
HAMBA	37	-	37	37	37		37	74	37
MIRINGONI	24	-	24	24	24		24	48	24
NIMACHUWA	26	-	26	26	26		26	52	26
BARAKANI	40	-	40	40	40		40	80	40
DJANDO REGION	182	-	182	182	182	-	182	364	182
NDRONDRONI	21	-	21	21	21		21	42	21
OUALLAH II	15	-	15	15	15		15	30	15
HAMAVUNA	54	-	54	54	54		54	108	54
HANYAMOIDA	13	-	13	13	13		13	26	13
MLABANDRA	46	-	46	46	46		46	92	46
WALLAH I	33		33	33	33		33	66	33
CENTRE	335	-	335	335	335	-	335	670	335
FOMBONI ISLAMIQUE	21	-	21	21	21		21	42	21
FOMBONI COMOTEL	16	-	16	16	16		16	32	16
FOMBONI MIJIMBIYA	8	-	8	8	8		8	16	8
FOMBONI CANALENI	10	-	10	10	10		10	20	10
FOMBONI MDJAWASHE	39	-	39	39	39		39	78	39
DJOIEZIE	85	-	85	85	85		85	170	85
MBATSE I & II	21	-	21	21	21		21	42	21
MBOIGOMA	26	-	26	26	26		26	52	26
HOANI GNAMBO	46	-	46	46	46	-	46	92	46
HOANI MJANGA	9	-	9	9	9		9	18	9
HOANI BAJANANE	11	-	11	11	11		11	22	11
HOANI MITRENI	12	-	12	12	12		12	24	12
DOMONI	31	-	31	31	31		31	62	31
GRAND COMORE ISLAND	401	299	401	401	401	1 502	401	802	401
HAMBOU REGION	131	75	131	131	131	478	131	262	131
BANGOI	56	-	56	56	56	224	56	112	56
SALIMANI HAMBOU	11	11	11	11	11	44	11	22	11
MDJOIEZI HAMBOU	12	12	12	12	12	48	12	24	12
DAWENI	2	2	2	2	2	8	2	4	2
MITSOUDJE	23	23	23	23	23	46	23	46	23
DJOUMOI CHONGO	27	27	27	27	27	108	27	54	27
BAMBAO REGION	270	224	270	270	270	1 024	270	540	270
SELEA BAMBAO	28	28	28	28	28	56	28	56	28
MKAZI	4	4	4	4	4	16	4	8	4
BWENI BAMBAO	35	35	35	35	35	140	35	70	35
NDROUANI	4	4	4	4	4	16	4	8	4
MWANDZAZA BOINI	8	8	8	8	8	32	8	16	8
VOUVOUNI	191	145	191	191	191	764	191	382	191
ANJOUAN ISLAND	658	72	658	658	658	1 326	658	1 316	658
DOMONI REGION	143	-	143	143	143	286	143	286	143
OUTSA	13	-	13	13	13	26	13	26	13
NGANDZALE I	22	-	22	22	22	44	22	44	22
OZINI	7	-	7	7	7	14	7	14	7
OZINI SALAMANI	101	-	101	101	101	202	101	202	101
POMONI REGION	515	72	515	515	515	1 040	515	1 030	515
DZINDRI	50	-	50	50	50	110	50	100	50
NGANDZELE II	100	72	100	100	100	200	100	200	100
DZINDRI YA NTSINI	8	-	8	8	8	16	8	16	8
POMONI	121	-	121	121	121	242	121	242	121
KOWE	14	-	14	14	14	28	14	28	14
SALAMANI YA DZINDRI	40	-	40	40	40	80	40	80	40
NINDRI	58	-	58	58	58	116	58	116	58
VOUANI	84	-	84	84	84	168	84	168	84
VASI	40	-	40	40	40	80	40	80	40
Total	1 703	371	1 703	1 703	1 703	2 828	1 703	3 406	1 703

Water, Sanitation and Hygiene Promotion

Outcome: The risk of water-borne and water-related diseases is reduced through the provision of drinking water and hygiene promotion to 1,703 households for one month.	
Outputs (expected results)	Activities planned
<ul style="list-style-type: none"> • Safe water is provided to 1,703 households as damaged systems are restored. • The health status of the population is improved through behaviour change and hygiene promotion activities. • Sanitation activities are undertaken within affected communities, including disinfection of habitats and water storage facilities. • The risk of water tanks being damaged by floods is reduced for targeted 50 households 	<ul style="list-style-type: none"> • Train 50 volunteers on water and sanitation activities • Procurement and distribution of WASH kits consisting of 1 bucket, 1 jerry can, 2 soap bars, 50 chlorine tablets and 50 water purification sachets to 1,703 households:401 in Grand Comore, 644 in Mohéli and 658 in Anjouan • Undertake community awareness campaigns of prevention of communicable and water borne disease in the three islands • Hygiene promotion and information dissemination on the safe use of water treatment chemicals. • Identification and disinfection of houses on all three islands. • Identification and cleaning of 300 rain water collection tanks in Grand Comore. • Identification of 50 most damaged rain water collection tanks on Grand Comore. • Protection of these tanks by elevating the structure, covering the tank and by installing or improving rain water collection system.

Impacts: At the beginning of the operation, volunteers started cleaning and disinfecting houses. However it was quickly realized that affected beneficiaries cleaned and disinfected their house themselves. Therefore, this activity stopped and the focus was put on water tanks, where there was a greater need for support.

After the heavy rains, water tanks were filled by dirty water and sludge coming from landslides and overflowing rivers. As a consequence, affected communities faced a high risk of contamination. CRCO therefore prioritized prevention of water borne diseases and provision of safe water to improve the lives of the affected beneficiaries. 30 CRCO volunteers were trained in Grand Comore on water tanks disinfection, and 20 additional volunteers were trained on WatSan assessment. At the beginning of the operation, a WASH RDRT provided training in water and sanitation for 50 staff and volunteers.

Overall, out of 522 assessed water tanks, 306 were cleaned and disinfected across 17 communities. These tanks provided safe water for a population of 18,054 beneficiaries. The sum of these 306 water tanks represents a volume of 7,629 cubic metres of water (Table 3). Additionally, 56 water tanks serving a population of 3,289 beneficiaries were repaired and covered to offer beneficiaries a safer source of water (Table 4). Through covering the water tanks, the risk for children to fall into the water tanks was reduced.

Challenges:

Coordination with partners regarding distribution activities was a challenge in the beginning of the operation. More emphasis should be put by all partners, especially in the initial phase of an emergency situation, to reinforce coordination in the field. This will increase overall efficiency of an operation like this one.

Discussions are ongoing with CRCO regarding hygiene promotion and epidemiological surveillance activities continuity after the end of the appeal in order to capitalize on trainings and material provided to volunteers during the appeal. Implementation of a community based health and first aid (CBHFA) programme could be a way to continue these activities.

Table 2: Summary of water tanks cleaned and disinfected

Region / Community	Nb. of Water Tanks	Estimated Population	Volume in Cubic Meters
Bambao	182	10 738	4427,5
Boueni	10	590	142,2
Daoueni	16	944	376,0
Dzahani	7	413	217,5
Mboudé Adjou	10	590	115,9
Mkazi	26	1 534	859,9
Moindzaza	12	708	298,9
Mvouni	22	1 298	653,7
Ndrouani	7	413	76,9
Nioumadzaha	18	1 062	534,9
Selea	43	2 537	775,7
Vouvouni	11	649	376,0
Hambou	124	7 316	3201,6
Bangoi	18	1 062	319,0
Chouani	30	1 770	819,3
Djoumoichongo	25	1 475	779,0
Mdjoiezi	15	885	331,0
Mitsoudje	21	1 239	514,4
Salimani	15	885	438,8
Grand Total	306	18 054	7629,1

Table 3: Summary of water tanks covered and repaired

Region / Community	Nb. of Water Tanks	Volume in Cubic Meters	Population	Nb. of Children below 5 years	Nb. of Single Parent Family	Nb. of benef. over 65 years old	Nb. of Handicapped Benef.	Nb. of Pregnant Women
BAMBABO	33	1039,3	1953	73	19	53	9	6
BOUENI	3	88,2	180	5	6	4	1	0
DAWENI	4	155,0	234	10	0	3	2	1
MBOUDE ADJOU	3	47,7	202	10	0	4	0	1
MKAZI	3	147,0	185	6	1	2	1	1
MOINDZAZA MBOINI	2	33,9	120	1	5	7	0	1
MVOUNI	4	187,1	227	5	0	9	1	0
NDROUANI	2	27,9	90	6	3	3	1	0
NIOUMADZAHA	4	180,9	245	10	1	8	2	2
SELEA	4	75,9	260	15	1	6	1	0
VOUVOUNI	4	95,6	210	5	2	7	0	0
HAMBOU	23	734,9	1336	56	19	30	4	4
BANGOI	4	95,8	250	15	4	4	0	0
CHOUANI	4	118,3	221	7	1	6	1	1
DJOUMOICHONGO	4	114,7	230	11	2	5	1	0
MDJOIEZI	4	139,7	220	13	7	4	0	1
MITSOUdje	4	153,6	230	6	3	6	1	0
SALIMANI	3	112,8	185	4	2	5	1	2
Grand Total	56	1774,1	3289	129	38	83	13	10

Emergency Health and Care

Outcome: The risk of deaths, illnesses and impact from diseases is reduced among affected communities through the provision of preventive measures at community-level

Outputs (expected results)	Activities planned
<ul style="list-style-type: none"> • First aid and rescue provided to those affected by the disaster. • Health services are supported on the primary and possibly secondary levels to meet the health needs and fill the health service gaps resulting from the emergency. • The scope and quality of the Comoro Red Crescent health and care services are improved and the risk of epidemic outbreaks reduced. 	<ul style="list-style-type: none"> • Procure and distribute mosquito nets to 1,703 households (2 per household) in Grand Comore, Mohéli and Anjouan. • Conduct 3 trainings on ECV for 85 volunteers already trained in CBHFA in Grand Comore, Mohéli and Anjouan. • Monitor epidemics for 3 months. • Health education. • Support health authorities in health centre to treat and refer patients. • Provide the first aid and rescue and refer those affected to the health facilities. • Provide psychological support to affected people.

Impacts: Directly after the disaster, over 200 volunteers were mobilized to support local authorities to evacuate 515 families and provided First Aid to 26 beneficiaries. Three paramedics from CRCo were deployed to support health services in assisting the population with first aid and referrals to health centres and hospitals. Around 100 wounded persons were supported through the support of CRCo. Psychological support was provided to wounded and evacuated population in high distress.

Hygiene promotion activities started with the training of 85 volunteers on all three Islands. The goal was to reinforce prevention messages in 48 affected communities in order to minimize risk of contamination and death. Topics included information on hygiene practices and food/nutrition, safe water, malaria, measles and the importance of mosquito nets to prevent diseases. A total of 3,406 mosquito nets were distributed to 1,703 families on Grand Comore, Mohéli and Anjouan Islands. The efficiency of this activity was measured through a KAP survey (Knowledge, Attitude and Practice) aimed at assessing population behaviour regarding health and hygiene.

Volunteers promoted hygiene among communities and conducted epidemiological surveillance. Epidemiological surveillance is generally a neglected area in the country. Therefore, in order to maximise CRCo efficiency, this activity was conducted in partnership with the Ministry of Health. Results gathered in the field were shared with authorities, so quick alerts could be launched in order to plan actions accordingly.

Overall, 23,359 households were sensitized by CRCo in health and hygiene awareness. Volunteers across 48 communities undertook the awareness activities reaching 8,923 households in Grand Comore, 4,500 households in Mohéli, and 9,936 households in Anjouan.

Challenges:

One of the main challenges faced by the DRR teams was to identify realistic projects together with the communities. Most of the projects proposed surpassed CRCo's available budget and capacity. Some of the projects have been shared with other partners, such as the French Red Cross, for discussion on potential partnership and possibilities of implementing some of the DRR projects.

In forthcoming years, food production will be reduced in the country due to the loss of lands surfaces. Therefore, it will be important to provide communities with seeds and to implement DRR projects in order to protect lands from landslides. Planting of trees would be a solution among others to prevent landslides.

Table 4: Summary of hygiene promotion activities conducted

Hygiene Promotion and Epidemiological Surveillance Activity				
	Grand Comore	Mohéli	Anjouan	Total
Nb. of CRCo Volunteers	30	25	30	85
Nb. of targeted Communities	17	17	14	48
Nb. of Participants				
September	2 329	2 100	1 903	6 332
October	6 594	2 400	8 033	17 027
Sub Total	8 923	4 500	9 936	23 359
Total	23 359			

Disaster Risk Reduction

Outcome: Floods and landslide risk is reduced for targeted communities in Grand Comore, Mohéli and Anjouan.	
Outputs (expected results)	Activities planned
<ul style="list-style-type: none"> Flood and landslide affected communities are better prepared to predict, respond and recover to disasters. 	<ul style="list-style-type: none"> Train 24 volunteers on Vulnerability Capacity Assessment (VCA) guidelines and tools. Conduct VCA with 12 communities in targeted districts on all three Islands. Develop community hazard maps for each of the communities. Develop mitigation micro projects in targeted communities based on VCA findings. Public awareness and public education for DRR activities

Impacts: The capacities of 24 volunteers (two teams of four on each Island) were enhanced through one week training on DRR. Six teams worked in 12 communities (two communities by team) that were affected by the flooding and vulnerable to natural hazards. National CRCo Branch offices together with Regional branches assisted with the identification of these communities.

Volunteers conducted community trainings, and, together with local authorities, undertook Vulnerability Capacity Assessments (VCA). The target was to identify key and realistic DRR projects for implementation following the appeal intervention. Five projects were identified and included for example: Rehabilitation/construction of four water tanks in health facilities in Hoani, Wanani and Nioumachoua on Moheli Island and in Vouvouni on Grand Comore Island; building a protective wall along a river in Bangoi Hambou (Grand Comore Island); further conducting of VCAs in the vulnerable community of Mara Haré located on Anjouan Island. All these projects were implemented in January 2013.

Table 5: Summary of Disaster Risk Reduction activities initiated in Communities

Grand Comore Island			
Location	Project	Characteristics	Beneficiaries
Salimani Hambou	Rehabilitation of a 4 in 1 water tank located in the Community	Capacity of 126 cubic meters	2,000 people
Bangwa Hambou	Reconstruction of a protective wall along the river	150 meters long	3,000 people protected
Vouvouni	Rehabilitation of a water tank located in a Hospital	Capacity of 84 cubic meters	50 consultations per day, local population

Moheli Island			
Location	Project	Characteristics	Beneficiaries
Hoani	Rehabilitation of a water tank located in a Hospital	Capacity of 8 cubic meters	32 consultations and 5 deliveries per month, local population
Wanani	Rehabilitation of a water tank located in a Hospital	Capacity of 24 cubic meters	300 consultations per month, 40 hospitalization per month, local population
Nioumachoua	Rehabilitation of a water tank located in a Hospital	Capacity of 18 cubic meters	420 consultations and 45 hospitalizations per month, local population

National Capacity Building

This operation aimed at reinforcing CRCo Organisational Development and capacity building in a sustainable manner leaving behind a stronger set of skills and capacities at headquarters and branch levels. With the support of IFRC and PIROI, systems and procedures have been improved in relation to financial management, logistics, monitoring and reporting. The support of an Operation Manager and Regional Disaster Response Team (RDRT) members have helped to strengthen disaster response. Staff and volunteers have benefited from water and sanitation training as well as relief training. The IFRC and PIROI assistance in terms of technical support will continue during and after this operation. So far, capacities have been reinforced as follows:

- **Logistics:** Anticipation of risks by having fuel reserve, costs calculation and comparison of different means of transportation, planning of activities, set up of an emergency vehicle for quick and safe response.
- **Finance:** Expenses tracing, budget forecast and monitoring, requisition orders system improvement, the use of Excel on a daily basis and standardisation of a double verification system (“spot checks”).
- **Communication:** RCRC logos on CRCo cars, a weekly radio show, articles in the main newspapers, information sharing between employees.
- **Program Management:** Planning of resources (human and material) and activities, costs planning, budget forecast and monitoring, increase of efficiency based on improvements in coordination and management.
- **Partnerships:** Management of emergencies together with COSEP and donation of medical material to Moroni General Hospital operating theatres.

Generally, good practice has been reinforced by systematically involving logistics and finance departments on each aspect of the operation. Also, excel was put in the centre of each activity as a planning and monitoring tool. Importance of setting up a full database for each activity was also reinforced. Finally, recommendations have been made to set up activities that could generate revenues for CRCo.

Logistics

Logistics has been a key aspect of any operation. CRCo had a dedicated Logistics Department run by two logisticians, financed by PIROI. All the NFI kits were provided by PIROI. Some kits were stored in CRCo main warehouse and unavailable kits were shipped by boat from la Réunion and Mayotte. Only 72 stoves were bought in Anjouan. CRCo ran three vehicles in the course of this appeal: one Prado, one Land Cruiser and one Hilux.

A strategic reserve of petroleum (200 litres of Gazoil and 150 of Fuel) is prepositioned at all time in CRCo main warehouse in Moroni in order to be self-sufficient and to have the capacity to respond to emergencies when a penalty happens. All the purchases related to the operation were done through the Logistics Department in respect with IFRC SOP's and in close collaboration with the Finance Department. A Purchase Committee comprising Logistics, Finance, Head of Operation and CRCo Coordinator was set up regarding the purchasing of an important quantity of construction material related to WatSan activities. The objective was to find the best article based on price, quality, and availability and transport criteria.

The use of excel software on a daily basis as a planning, monitoring, operational and reporting tool improved overall efficiency of logistics work.

Communications-Advocacy and Public Information

As stated at the beginning of the Operation, the aim was to maintain a regular flow of reliable information between the field and other key stakeholders. Following communication activities took place:

- A radio show was undertaken for 3 months and was an efficient way to reach beneficiaries across all three Islands in order to communicate prevention messages and to inform them about activities done in the field.
- In December 2012, a field visit of a radio journalist accompanied by CRCo communication officer and WatSan Coordinator was organized in order show and explain the work related to the rehabilitation of 56 water tanks. IFRC encouraged on a regular basis CRCo communication officer to write and send articles to national and local media. Some articles were published in national newspapers.
- Photographs were taken throughout the Emergency Appeal in order to document activities done in the field.
- Regular communication with UNDP, OCHA, COSEP and other stakeholders, including members of the Government.

Evaluations and lessons learned:

KAP surveys were undertaken to assess impact of the health awareness raising and hygiene promotion activities. The results were positive in regards to knowledge of different types of disease but seemed to have less impact on changing hygiene behaviour which seems to indicate a need for a longer term education programme to promote change.

A final evaluation of the operation was undertaken by an external consultant, stating the following:

“The overall conclusion is that the CRCo managed an effective initial response, conducted excellent WatSan and DRR programmes, and managed distributions of NFI to 1,600 families and partially implemented hygiene promotion programmes. The CRCo has learned some lessons in regard to vulnerability assessment and distribution planning which will be incorporated into future responses. PIROI proved instrumental in providing effective support and materials to the CRCo and should be relied upon for similar interventions in the Indian Ocean Islands. Donors should be encouraged to continue investments in further DRR mitigation projects in the Comoros.”

Main recommendations from the evaluation included:

- If a national society has not conducted assessments, registration of distributions for some time, or on the scale of a new disaster, a quick training is recommended to refresh volunteers on the use of assessment, registration and distribution tools and guidelines.
- In an operation such as a floods response, changes to needs and population movements can be anticipated requiring a follow-up(s) to an initial assessment.
- If there are few other national organisations in the country of operation one should be prepared for additional demands on the national society from UN Agencies and other organisations, especially if the national disaster management authorities are weak, and plan accordingly, noting the overall capacity of the national society.
- KAP exercises can bring real value to an operation, but it is important to invest the time in volunteer training before starting a KAP survey.
- The use of Aqua Tabs or chlorination sachets should only be distributed where there is existing experience of using such products or where the distributions are strongly reinforced with information and training on the use of such products.
- Opportunities should be taken to promote the image and visibility of the national society, be it through the media, a presence at IASC meetings or other methods.

- Documents, including tools, procedures and guidelines need to be in the language of the national society and brought to the attention of the national society, especially where the national society may be new to managing DREF Operations or Emergency Appeals.

Financial Summary:

The utensils and tools budget line recorded an overspend as a result of the in kind donation from French Red Cross recorded as expenses. There were also coding errors on the expenses related to national staff costs not being correctly budgeted for at the planning stage thereby ending with an overspend. The expenses on consultancy fees relate to consulting services for an external consultant undertaking a final evaluation of the operation which had not been budgeted for in the initial planning stage.

Office costs were overspent by CRCO, as was also the case on the communication costs budget line. The Pledge earmark and pledge reporting fee was not budgeted for and are automated fees generated by the IFRC system and applied on earmarked pledges and pledges where the donor has put particular reporting requirements.

Contact information

For further information specifically related to this operation please contact:

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- **In IFRC regional representation:** Diana Ongiti, Senior RM Officer; phone +254 20 2835 276; email: diana.ongiti@ifrc.org

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

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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.
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Disaster Response Financial Report

MDRKM004 - Comores Islands

Timeframe: 04 May 12 to 31 Mar 13

Appeal Launch Date: 04 May 12

Final Report

Selected Parameters

Reporting Timeframe	2012/5-2013/	Programme	MDRKM004
Budget Timeframe	2012/5-2013/	Budget	APPROVED
Split by funding source	Y	Project	*

All figures are in Swiss Francs (CHF)

I. Funding

	Raise humanitarian standards	Grow RC/RC services for vulnerable people	Strengthen RC/RC contribution to development	Heighten influence and support for RC/RC work	Joint working and accountability	TOTAL	Deferred Income
A. Budget		624,074				624,074	
B. Opening Balance		0				0	
Income							
<u>Cash contributions</u>							
British Red Cross		29,732				29,732	
European Commission - DG ECHO		241,629				241,629	
Japanese Red Cross Society		26,500				26,500	
Red Cross of Monaco		6,007				6,007	
Swedish Red Cross		66,024				66,024	
The Canadian Red Cross Society		27,492				27,492	
The Canadian Red Cross Society (from Canadian Government*)		45,756				45,756	
VERF/WHO Voluntary Emergency Relief		300				300	
C1. Cash contributions		443,439				443,439	
<u>Inkind Goods & Transport</u>							
French Red Cross		136,450				136,450	
C2. Inkind Goods & Transport		136,450				136,450	
<u>Inkind Personnel</u>							
French Red Cross		26,996				26,996	
C3. Inkind Personnel		26,996				26,996	
<u>Other Income</u>							
Programme & Services Support Recover		8,869				8,869	
C4. Other Income		8,869				8,869	
C. Total Income = SUM(C1..C4)		615,754				615,754	
D. Total Funding = B + C		615,754				615,754	

* Funding source data based on information provided by the donor

II. Movement of Funds

	Raise humanitarian standards	Grow RC/RC services for vulnerable people	Strengthen RC/RC contribution to development	Heighten influence and support for RC/RC work	Joint working and accountability	TOTAL	Deferred Income
B. Opening Balance		0				0	
C. Income		615,754				615,754	
E. Expenditure		-614,488				-614,488	
F. Closing Balance = (B + C + E)		1,266				1,266	

Disaster Response Financial Report

MDRKM004 - Comores Islands

Timeframe: 04 May 12 to 31 Mar 13

Appeal Launch Date: 04 May 12

Final Report

Selected Parameters

Reporting Timeframe	2012/5-2013/	Programme	MDRKM004
Budget Timeframe	2012/5-2013/	Budget	APPROVED
Split by funding source	Y	Project	*

All figures are in Swiss Francs (CHF)

III. Expenditure

Account Groups	Expenditure						TOTAL	Variance
	Budget	Raise humanitarian standards	Grow RC/RC services for vulnerable people	Strengthen RC/RC contribution to development	Heighten influence and support for RC/RC work	Joint working and accountability		
	A					B	A - B	
BUDGET (C)			624,074			624,074		
Relief items, Construction, Supplies								
Clothing & Textiles	43,940		38,787			38,787	5,153	
Water, Sanitation & Hygiene	103,555		101,642			101,642	1,913	
Teaching Materials	9,814		9,348			9,348	466	
Utensils & Tools	52,034		70,106			70,106	-18,072	
Other Supplies & Services	21,029		8,443			8,443	12,585	
Total Relief items, Construction, Sup	230,372		228,326			228,326	2,046	
Land, vehicles & equipment								
Computers & Telecom	1,126		1,126			1,126	0	
Total Land, vehicles & equipment	1,126		1,126			1,126	0	
Logistics, Transport & Storage								
Storage	71		71			71	0	
Distribution & Monitoring	25,540		26,071			26,071	-531	
Transport & Vehicles Costs	29,149		31,272			31,272	-2,123	
Total Logistics, Transport & Storage	54,760		57,413			57,413	-2,654	
Personnel								
International Staff	104,520		79,779			79,779	24,741	
National Staff			8,558			8,558	-8,558	
National Society Staff	19,543		18,141			18,141	1,402	
Volunteers	50,358		48,958			48,958	1,401	
Total Personnel	174,421		155,435			155,435	18,986	
Consultants & Professional Fees								
Consultants			14,078			14,078	-14,078	
Total Consultants & Professional Fees			14,078			14,078	-14,078	
Workshops & Training								
Workshops & Training	10,564		10,780			10,780	-216	
Total Workshops & Training	10,564		10,780			10,780	-216	
General Expenditure								
Travel	34,400		39,104			39,104	-4,704	
Information & Public Relations	3,698		2,883			2,883	815	
Office Costs	9,086		12,557			12,557	-3,471	
Communications	6,043		10,205			10,205	-4,162	
Financial Charges	43,558		42,605			42,605	953	
Other General Expenses	14,709		281			281	14,429	
Shared Office and Services Costs	1,935		201			201	1,734	
Total General Expenditure	113,429		107,836			107,836	5,593	
Indirect Costs								
Programme & Services Support Recover	38,004		35,620			35,620	2,384	
Total Indirect Costs	38,004		35,620			35,620	2,384	
Pledge Specific Costs								
Pledge Earmarking Fee			875			875	-875	
Pledge Reporting Fees	1,400		3,000			3,000	-1,600	
Total Pledge Specific Costs	1,400		3,875			3,875	-2,475	
TOTAL EXPENDITURE (D)	624,074		614,488			614,488	9,586	
VARIANCE (C - D)			9,586			9,586		

Disaster Response Financial Report

MDRKM004 - Comores Islands

Timeframe: 04 May 12 to 31 Mar 13

Appeal Launch Date: 04 May 12

Final Report

Selected Parameters

Reporting Timeframe	2012/5-2013/	Programme	MDRKM004
Budget Timeframe	2012/5-2013/	Budget	APPROVED
Split by funding source	Y	Project	*

All figures are in Swiss Francs (CHF)

IV. Breakdown by subsector

Business Line / Sub-sector	Budget	Opening Balance	Income	Funding	Expenditure	Closing Balance	Deferred Income
BL2 - Grow RC/RC services for vulnerable people							
Disaster response	624,074	0	615,754	615,754	614,488	1,266	
Subtotal BL2	624,074	0	615,754	615,754	614,488	1,266	
GRAND TOTAL	624,074	0	615,754	615,754	614,488	1,266	