

# DREF operation update



## Benin: Cholera

**DREF operation n° MDRBJ004**  
**GLIDE n° EP-2008-000149-BEN**  
**Update n° 1**  
**20 March, 2009**

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 and 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.

**Period covered by this update:** 9 October to 19 December, 2008.

**Summary:** CHF 28,500 (USD 24,560 or EUR 19,308) was allocated from the Federation's Disaster Relief Emergency Fund (DREF) on 9 October 2008 to support the national society in delivering assistance to some 10,000 beneficiaries in the north of Benin.

Another cholera outbreak was reported in the northern part of Benin during the last week of September 2008. By the first week of October, cases have risen to 600 with no death. The Red Cross of Benin mobilized and deployed volunteers to the affected communities to carry out sensitization activities and assist health authorities in referral of cases. The volunteers conducted sensitization activities on good hygiene practice and health education in the affected districts to reduce the spread of the epidemic.

In collaboration with the Ministry of Health (MoH) and local traditional heads, they have assisted in detection and referral of cases to health centres. The national society mobilized and trained 100 volunteers from the affected districts to carry out sensitization activities. The national society has also procured cholera kits for its volunteers for effective intervention. Red Cross activities, carried on in collaboration with government health authorities, have contributed to the reduction of cases of cholera in the affected districts.



Timely intervention by the Red Cross of Benin has contributed to reducing the spread of the epidemic/  
**Red Cross of Benin**

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## The situation

Towards the end of the third quarter of 2008, cases of cholera were reported in the northern districts of Malanville and Karimama in Benin. Some 90 suspected cases were referred to health facilities in the two districts. By the first week of October 2008, the outbreak had spread to the neighbouring districts of Djougou and Bassila with over 600 cases reported in these districts. The outbreak was attributed to poor

hygiene and sanitation habits of the population. Lack of sanitation facilities, heavy rainfalls during the period, and polluted sources of drinking water in the affected areas were also other causes of the epidemic, according to the local branches of the Red Cross and health officials in the districts.

To reduce the spread of the epidemic, the Red Cross deployed its team of volunteers in the affected communities to carry out good hygiene sensitization activities in the districts. In collaboration with government health authorities in the areas, the national society engaged in identifying suspected cases and refers them to health centres. This has helped in reducing the spread of the disease in the northern part of the country.

With the support of the Federation through the DREF allocation, the national society intensified its sensitization activities in the affected communities and other neighbouring communities. Based on the experience acquired in a similar operation during the outbreak of cholera in Cotonou, the Red Cross mobilized and trained its volunteers. The activities focused on good hygiene practice, health education, detection and referral of cases to health centres. The outcome of these activities coupled with that of the local authorities has contributed to the reduction in cases.

The operation was delayed due to some logistic constraints as some communities were not easily accessible because of the rain. But the Red Cross has been able to deliver its sensitization messages to the communities through its volunteers.

## Coordination and partnerships

The Red Cross of Benin (RCB) as auxiliary to government authorities is working in close collaboration with the Ministry of Health, local health authorities, and traditional leaders. The national society has been participating in coordination meetings to harmonize all efforts to fight the epidemic. The national society taking the lead in sensitization is also working together with health officials in identifying cases and referral to health centres. It has also mobilized local chiefs in persuading populations to refer cases to health facilities. It is liaising with the Federation regional office in Lagos for technical support during the operation.

## Red Cross and Red Crescent action

### Progress towards objectives

#### Hygiene promotion

**Objective: To complement government's effort in the prevention and control of the disease by reducing the morbidity and avoiding mortality in the most affected communities in the northern part of Benin.**

Activities planned	Expected outcomes
1. Participate actively in collaboration meetings at national and local levels in order to have relevant statistics.	<ul style="list-style-type: none"> <li>All Red Cross activities are implemented in a coordinated way thus avoiding duplication of services with other actors. Red Cross experience is also shared with others at coordination meetings and during surveillance, reporting, response and advocacy activities at national and district levels.</li> </ul>

<p>2. Deploy 100 trained volunteers from three local branches and coaches to support the activities planned.</p>	<ul style="list-style-type: none"> <li>• 100 well trained and motivated volunteers have been able to reach the most affected people and have provided life saving support to cholera victims.</li> </ul>
<ol style="list-style-type: none"> <li>1. Distribute volunteer cholera kits to volunteers.</li> <li>2. Engage in community cholera control activities such as surveillance, referrals, sensitization, education and distribution of hygiene items in collaboration with the MoH and other stakeholders.</li> <li>3. Provide volunteers and team with welfare, logistics support and protective materials.</li> <li>4. Promote and respect the Fundamental Principles of the Red Cross/Red Crescent Movement.</li> </ol>	<ul style="list-style-type: none"> <li>• 1 volunteer cholera kit and other disaster response materials are supplied to the volunteers.</li> <li>• Hygiene and health education, early case detection and referral and sensitization have been useful in reducing the number of cases.</li> <li>• The regional resource team from the West Coast regional office will have increased the capacity of the Red Cross of Benin by providing technical support and advice.</li> <li>• Volunteers have been provided with welfare, insurance, protective materials and logistics assistance.</li> </ul>

**Progress and impact:** The participation of the Red Cross of Benin in various coordination meetings afforded the national society the opportunity to inform others of its area of intervention in supporting the government to control the epidemic. While the government appreciated its lead role in sensitization, it also requested its assistance in case detection and referral. This has assisted in getting accurate statistics on the number of suspected cases. The meetings have also helped in avoiding duplication of tasks between government agencies and volunteers.

To effectively reach the target communities, the Red Cross with technical support from the West Coast regional health team mobilized and trained 100 Red Cross volunteers from the local branches of Malanville, Karimama, Djougou and Bassila. The training focused on the causes, symptoms and effects of cholera. They were also trained in sensitizing the population on the rules of good hygiene practice and how to avoid cholera epidemic. With the knowledge acquired and cholera kit, the volunteers carried out sensitization activities in the affected communities. People were sensitized on good hygiene practices, regular sanitation activities and health education. The activities of the Red Cross have contributed to the reduction in suspected cases of cholera in the four districts. Communities have also enhanced their knowledge in good hygiene practice as most of them have commenced regular cleaning of their environment.

In collaboration with government health authorities and the local community heads, volunteers assisted government in referral of cases to health centres. They also assisted in monitoring treated and discharged people who were affected to ensure their aftercare, medication and make sure they keep good hygiene habit. The collaborative effort between communities' heads, government health authorities and Red Cross not only contributed in reducing the number of cases, but also constituted an effective strategy in the successful implementation of activities planned to reduce the suffering of the most vulnerable.

Volunteers are presently mobilizing communities in a regular environmental cleaning exercise in the affected communities.

**Challenges:** The delay in the commencement of the operation was due to logistic constraints. Some of the affected communities were not accessible due to the deplorable state of roads. Communities also requested the assistance of the Red Cross to access potable drinking water sources. Their main sources of water have been polluted by floods.

## 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

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