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Emergency appeal Democratic Republic of Congo: Population Movement



International Federation
of Red Cross and Red Crescent Societies

Emergency appeal n° MDRCD013
GLIDE n° [OT-2012-000154-COD](#)
27 March 2013

This Emergency Appeal seeks CHF 1,122,910 in cash, kind, or services to support the Democratic Republic of Congo Red Cross (DRC RC) assist an estimated 15,000 direct beneficiaries (3,000 households) arising from the influx of refugees from the Central African Republic for 6 months, and will be completed by the end of September, 2013. A CHF 150,000 start up loan has been allocated from the IFRC Disaster Relief Emergency Fund (DREF) to enable this operation to begin immediately. A Final Report will be made available by end of December, 2013 (three months after the completion of the planned operation).



*A CAR refugee in northern DRC waits for tarps to complete an emergency shelter to protect his family of seven from the elements.
Photo/DRC SC*

Summary:

This Emergency Appeal seeks to address the priority needs of the most vulnerable segments of the 21,352 Central African Republic (CAR) refugees and their host communities. This displaced population has been forced to migrate due to the ongoing conflict in CAR, between rebel and government forces which culminated in an overthrow of CAR government on 24 March, 2013. Assistance will include life and dignity-sustaining interventions in Emergency Shelter and the re-establishment of family links (RFL) to pre-identified pockets of refugee populations; while emergency water and sanitation and community-based health services will assist both the refugees and their host communities along the Ubangi River. The pre-identified individuals will be those persons who have been registered by the national migration authority (DGM) and UNHCR as having refugee status.

In addition to the assistance along Ubangi River, the Red Cross intends to offer RFL services within the planned UNHCR managed camp in Inke and to continue to offer this service in the UNHCR managed camp in Worobe. Other in-camp support services are currently being covered by UNHCR in-country partner organizations.

This Red Cross operation will prioritize areas of intervention, where there will likely be gaps in assistance due to the limited number of actors currently responding to this population movement. It is understood that UNHCR's operational foot-print within the next 1 to 3 months will be primarily focused on their planned camp in Inke, which will entail ensuring medium-to-long term protection as per their mandate as well as service provision.

The proposed areas of intervention as discussed and agreed upon with the leadership of the DRC RC will span from Mobayi-Bongo westerly towards Zongo on the western border area with the Central African Republic (CAR). Working through a community-based approach will directly strengthen

community infrastructures especially in the Health Sector which has been weakened due to increased numbers of individuals utilizing already limited resources. In addition, the Red Cross will build upon existing local capacities, further reinforcing and strengthening their local committee structures at the grass-roots level in the areas of Emergency Shelter, WatSan and Health during the emergency phase.

From August 2012 to January 2013, the DRC RC implemented a DREF supported operation, providing assistance to 1,727 beneficiaries in two river-side communities, Ngele and Pandu. In addition to other planned areas of intervention, Ngele and Pandu are once again within the planned area of intervention, as the numbers and needs of people in these communities have increased since the previous intervention. This DREF has now been completed and the final report will be issued by the end of April. A new DREF has been requested to allow this operation to begin immediately.

As a result of this ongoing crisis, an international Field Assessment and Coordination Team (FACT) has been deployed to assess the situation and recommend how to best address the needs of the refugees and their host communities. This team included Red Cross staff from the DRC RC, the IFRC Regional Office in Yaounde as well as three FACT delegates.

Relief items in terms of tarpaulins, shelter tools kits and support materials, kitchen sets, mosquito nets, jerry cans, soap and water purification tablets for immediate assistance has been dispatched from the IFRC emergency stocks in Yaounde, Cameroon. These items will be transported to the target areas and distributed to the most vulnerable households. Due to the recent evolution of the conflict in Central African Republic transport by road is not possible and air freight is being arranged. Dispatch, transport and distribution are covered by the start-up loan from the IFRC DREF. These relief distributions will be supported by deployment of a Regional Disaster Response Team (RDRT), which will provide IFRC operational management until an operations manager is in place.

This emergency appeal will focus exclusively on the population movement needs of refugees as a result of the on-going dispute between the Seleke rebels and CAR pro-government forces; and not other population movement activity in other areas of the country. If the situation escalates in the coming weeks, or months, this emergency appeal may be revised to address the situation, and additional needs.

[<click here to view the attached Emergency Appeal Budget; here for map; or here to view contact details>](#)

The situation

Since March 2012, fighting in the Central African Republic (CAR) between Seleke rebels and forces loyal to the government led to the cross-border forced migration of an estimated 21,352 refugees. The first migration of 1,700 CAR refugees across the Ubangi River and into the Equateur province of the Democratic Republic of Congo (DRC) was reported in March 2012. As fighting intensified in the CAR in December 2012, the influx of refugees increased significantly. On 24 January 2013, the estimated CAR refugee population in northern Equateur province was estimated at 4,000 individuals. On 15 February 2013, the Government of the DRC officially recognized the refugee status "*Prima Facie*" of the CAR population in DRC. On 20 February 2013, a joint assessment led by the UNHCR revised the number of refugees to 21,352, including an alleged large proportion of unaccompanied minors. Following the Seleke rebels overthrow of the CAR government on March 24, this number is likely to increase in the coming days and weeks.

Most refugees that were forced to flee have settled in spontaneous sites along the DRC bank of the Ubangi River. These sites are generally located in the periphery of host communities, with a fraction of the population being housed within host families. Persons, who are not accommodated in host families, settle in spontaneous sites and have to cope on their own. In response to the on-going crisis, the UNHCR opened the first camp on the western edge of Equateur province in the community of Worobe, 18Km North east from the town of Zongo. This site is located directly across from the CAR capital, Bangui. This camp currently has a total population of 689 individuals. According to UNHCR, between 1,200 and 1,800 additional refugees are expected to move and settle in the camp from coastal refugee spontaneous settlements along the Ubangi River.

The UNHCR is also planning to open a second, larger camp, 40 Km inland from the town of Gbadolite, 240 Km to the East of Zongo. The goal is that this camp will accommodate a portion of the refugees currently located along a 600Km stretch of the Ubangi River stretching from Yakoma to Pandu. The decision to locate this camp inland is based on the mandate of the UNHCR to protect the refugees from potential cross-border threats. The site for this camp has been selected by local authorities and UNHCR and preparations for its opening are underway. Most services within the camp (including the provision of

shelter, clean water, sanitation infrastructure, health services, food aid and education) will be provided by local UNHCR-funded partners with prior signed national-level agreements with the UNHCR.

The rationale and decision for UNHCR to build a camp away from the border is clear based on the possible cross-border threats and its mandate to ensure the protection of refugees. However, many refugees are reluctant to leave their traditional river lifestyle, where they subsist mostly on fishing, for a camp where they will have no access to a river, and reduced contacts with their communities of origin on the CAR side¹. It has been acknowledged by the authorities, as well as the UNHCR, that a portion of the CAR refugee population will remain in riverside communities for the foreseeable future despite the living conditions in those settlements being extremely difficult.

In the meantime, the UNHCR through its partner organizations are actively working to identify, source and work to construct the basic infrastructure needed to open the camp. Until the camp opens, WFP through its implementing partners will provide immediate food aid and basic NFIs such as tarps and soap. This immediate relief will cease once the camp officially opens, in approximately four to six weeks' time. Beyond that time-frame, refugees that elect not to move inland will be left to cope on their own or rely on overstrained host communities or host families.

While the ultimate goal is for refugees to regroup into camps where they can benefit from a full range of services, including protection, it is acknowledged that a portion of the refugees will not move. For these refugees not willing to move to the camp, the Red Cross will work closely in close collaboration with local authorities and UN actors, to ensure that their most immediate needs are met. This will ensure that people live in dignity, with access to the provision of non-food items, access to community-based health services, emergency water and sanitation services, and restoring family links. As most communities are extremely remote, the DRC RC will rely on its extensive network of volunteers to access beneficiaries by small boat (pirogue) and motorbikes. This proposed intervention will ensure that life saving assistance is provided to the most vulnerable while aiming to not trigger a new wave of migrations.

Coordination and partnerships

The lead agency for the protection of the refugee population in the intended area of intervention is the UNHCR, supported by other UN actors such as the WFP, UNICEF, WHO and the UN peacekeeping force in the DRC, MONUSCO. Services are currently being coordinated by the UNHCR to target refugees where they are currently located. This support will continue until the planned refugee camp in Inke is operational.

Beyond the date of the opening of the camp, the UNHCR as well as local authorities (namely the national migration authority [DGM] and the national refugee council [CNR]) have invited the DRC RC, supported by the IFRC, to assist refugees that will remain outside UNHCR managed camps. This intervention will be conducted in close coordination with UN and DRC actors active in the region, including the Ministry of Health, the DGM and the CNR.

As detailed in the "Proposed Operation" section, the basis for the intervention will be to primarily target individuals that have been issued the UNHCR registration card. As the Red Cross assists refugee communities, the DRC RC and IFRC will update the UNHCR and the humanitarian community on its progress and share beneficiary lists to avoid any duplication with refugees being assisted within UNHCR camps.

The DRC RC community health personnel will also coordinate their intervention with the Ministry of Health and support some of the local health infrastructure as detailed in the health section.

At the national level, the RC focal point will ensure the efforts of the DRC RC are coordinated with the Cluster System and national-level echelons of the UNHCR.

This operation has been formulated in consultation with the ICRC delegations present in DRC and CAR and will be implemented according to the Red Cross Red Crescent Movement coordination mechanisms established for these countries. Regular consultations between all Movement partners present in DRC and CAR will enable the operation to keep informed of the evolving contexts in CAR and DRC

¹ Through focus groups and interviews, it was determined that, given the non-existence of mobile communication networks, many refugees cross the Ubangi river on a regular basis to assess the situation in their home communities and keep in touch with members of their extended families that have remained behind.

Red Cross and Red Crescent action

On 31 August 2012, the IFRC allocated CHF 131,815 from its Disaster Relief Emergency Fund (DREF) to support the DRC RC in delivering assistance to 1,727 beneficiaries fleeing the armed violence in the CAR. As the situation evolved, the budget was revised to CHF 295,691 on 14 November 2012. The intervention was focused on the communities of Ngele and Pandu and included the provision of relief items (blankets, sleeping mats, mosquito nets, tarpaulins, buckets, jerry cans and hygiene kits), facilitating access to safe drinking water and proper sanitation facilities as well as the restoration of family links. This operation was supported logistically from the IFRC regional office in Yaoundé, Cameroon. Goods were trucked from this location to the CAR capital, and then barged over to Zongo in the DRC. Commodities were then transferred onto small boats commissioned by the DRC RC to travel upriver along the Ubangi. The resolve and resourcefulness of the DRC RC in reaching these remote vulnerable communities has been commended by the UNHCR and the ICRC. This DREF has now been completed and the final report will be issued by the end of April.

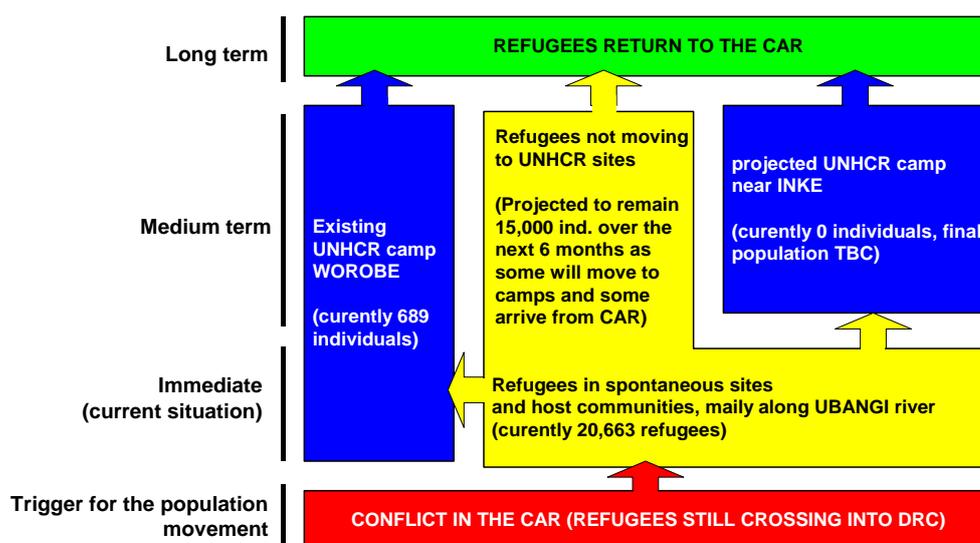
As the situation worsened, the IFRC Regional Office in Yaounde called for the deployment of a FACT, which assessed the situation and designed this operation in close cooperation with DRC RC. A new DREF has been requested to allow this operation to begin immediately

In Equateur province, the **Belgian Red Cross** have contributed to the reinforcement of the DRC RC capacities as recently as 2009, namely in Water and Sanitation through trainings in Hygiene Promotion, the digging of wells and the construction of latrines. The **ICRC** is also supporting the DRC RC RFL program across the country.

The needs

The specific interventions and areas targeted by this Appeal have been selected on the basis of a needs assessment carried out between March 8 -13, 2013; by the DRC RC and the IFRC FACT.

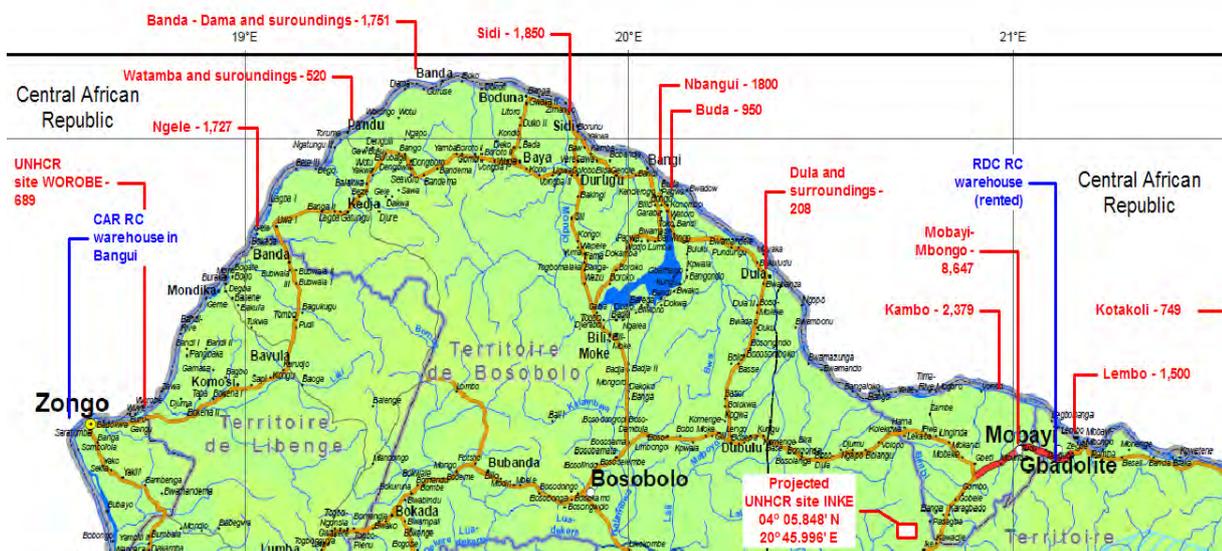
The graph below illustrates the different types of population pockets and projected movements. The needs of refugees in riverside communities are extreme (yellow box in the graph). These refugees are currently exposed directly to the weather elements (living in open-sided basic huts offering no protection from the daily rain, nor cookware as well as limited food). Some are hosted by over-stressed families. At present, the UNHCR and WFP have started to build emergency shelters and distribute food for a limited number of individuals with pre-identified vulnerabilities. This practice has raised expectations and may lead to tensions as the UN is not planning to continue supporting all refugees on spontaneous sites; beyond the opening of their camp. Therefore, an urgent need for basic NFI has been identified in order to provide a minimum standard of living to those that will elect not to move into a UNHCR camp where many of their needs could be covered (blue boxes).



As refugees have no access to even the most basic health services - or have overwhelmed the local host community's health services - the need exists to provide basic emergency community-based health services to both the refugees and their hosts. In an environment where 47.9% of the population is

suffering from malaria², this will need to be accompanied by malaria-prevention activities. The refugees also do not have access to clean water or latrines and are in dire need of basic water treatment solutions.

Given that a number of refugees (both inside and outside UNHCR camps) have lost contact with their families, including a number of unaccompanied minor, there is an acute need to support the re-establishment of family links, something that is part of the DRC RC core business.



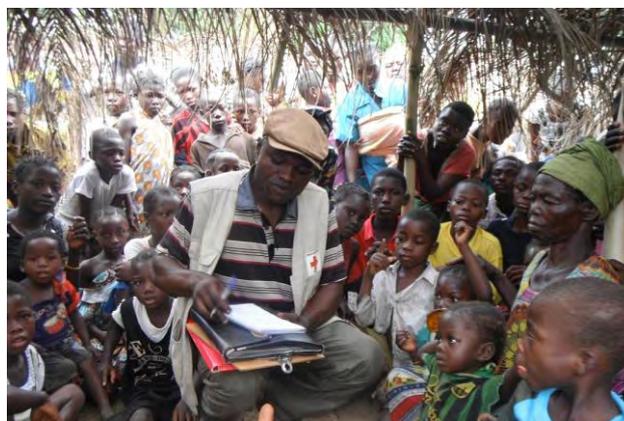
Map of the proposed area of intervention, showing refugee sites above 200 individuals (in red) and proposed RC logistical hubs (in blue)

The proposed operation

Interventions: The Red Cross / Red Crescent response aims to address the priority needs of the refugee population and its host communities. The intervention is targeting the relief emergency phase only. Outside UNHCR camps, this assistance will take the form of:

- A targeted distribution of a tailored relief package to refugees; based on the context and operational realities.
- The provision of community-based health and care services to refugees and their hosts as required;
- The improvement of access to safe water and to basic sanitation services for refugees and their hosts as required; and
- The re-establishment of family links.

Inside the UNHCR camps, where standard services are being provided by UNHCR partners, the Red Cross / Red Crescent response will focus on the re-establishment of family links.



Jean Sindani Mulenga, a DRC RC RFL volunteer interviews unaccompanied minors in a spontaneous refugee settlement. Photo/DRC SC

Beneficiary selection: In designing the intervention described below, careful consideration has been given to reduce the risk that the assistance provided could trigger a new influx of refugees that would overwhelm the host communities. Accordingly, only refugees already registered by the UNHCR will benefit from relief items. The operation has been designed with careful consideration not to undermine the efforts of the UNHCR to encourage refugees to move to a safer camp environment located inland. As a result, there are no permanent structures or infrastructure assistance included in this Emergency Appeal. The selection of beneficiaries will be done in close coordination with the UNHCR and the Congolese migration authorities (DGM). Beneficiaries having already received a refugee or ration card will be given a Red Cross distribution ticket to track the distribution of goods. In instances where the UNHCR/DGM may have missed a pocket of refugees, the information will be relayed to their field office

² Based on statistics from the Mobayi-Mbongo and Gbadolite health district.

so that registration and selection can be done jointly. One Red Cross ticket will be issued to every household. In the case of unaccompanied minors, a community mobilisation approach will be used to pair children with a foster mother. The health/nutrition status of these children will be monitored closely by the RC community-based health workers.

Community visits: The table below describes planned activities per sector, including health, hygiene promotion, water/sanitation, and RFL visits. Whenever feasible, these community visits, scheduled to happen every 7 to 10 days, will be conducted jointly by a community-based health worker or nurse accompanied by a water and sanitation volunteer as well as an RFL volunteer when required. For efficiency sake given the serious logistical constraints associated with travel in the region, the community health worker or nurse will also cover hygiene promotion and the water and sanitation volunteer will also monitor the emergency shelter situation. These visits will be staged out of two logistical hubs, one in Zongo and one in Mobayi. Pirogues and motorbikes will travel from these hubs to the 18 targeted communities on a regular basis.

Trainings and capacity building: Refresher trainings are scheduled to take place for most sectors as per the activities outlined below. This training will build on existing capacities of the DRC RC and be facilitated by the Regional and International delegates that will support this operation (see “Human Resources” section).

Operational goal: The immediate needs of refugees and host community populations are addressed through the provision of emergency shelter, community-based health and water/sanitation services, as well as the re-establishment of family links.

EMERGENCY SHELTER	
Outcome 1: The immediate shelter needs of the targeted refugee population are met	
Outputs (expected results)	Activities planned
3,000 households provided with materials and training required to construct emergency shelters	<ul style="list-style-type: none"> Mobilise/train DRC RC volunteers in the construction of emergency shelter to ensure knowledge transfer to beneficiaries, as well as on relief distributions and logistics practices; Conduct beneficiary registration of refugees; Transport and deliver (or make available for pick-up³) shelter materials to spontaneous settlements; Train refugees in the construction of emergency shelters, based on the construction of model shelters and in line with Sphere standards; Distribute basic tools required for the construction of emergency shelters; Distribute 2 tarpaulins per household, and 20 m of rope per household Monitor the construction of shelters and their upkeep over time, access permitting based on the rainy season.
3,000 households are provided with essential household items (NFIs)	<ul style="list-style-type: none"> Transport and deliver (or make available for pick-up) NFIs to spontaneous settlements; Distribute NFIs to registered households as follows: One solar light per household, one kitchen set per household and one nylon grain (rice) bag per household for the storage and transportation of NFIs.

Target Population: 3000 HH for 6 months		
No.	Item	Qty/HH
1	Tarps	2
2	Rope	20m
3	Tools for latrines and e. shelter	1 kit/5 HH
4	Kitchen Set	1
5	Grain Bag	1

³ See distribution strategy under “Logistic” - Same applies to all relief items

6	Solar Light Square	1
7	Soap 200g/person	30
8	Sanitary Pads (12 packs of 10)	12
9	Buckets (14L)	1
10	Jerry Can (20L)	1
11	PUR or similar (Box)	1
12	ITNs (Mosquito Nets)	2

Summary table of NFIs per HH

HEALTH AND CARE	
Outcome 2: The immediate risks to the health of targeted refugee and host population are reduced	
Outputs (expected results)	Activities planned
The health situation and immediate risks are assessed using IFRC guidelines in approximately 18 pre-identified communities	<ul style="list-style-type: none"> Conduct refresher training for DRC RC nurses and community health workers in the assessment of the health situation and immediate risks Conduct initial assessment of the health situation and immediate risks in 18 refugee sites and host communities, including immunisation coverage Continuous monitoring of the health situation.
15,000 beneficiaries reached with community-based disease prevention and health promotion activities, mostly via river access by pirogue	<ul style="list-style-type: none"> Conduct refresher training for DRC RC nurses and community health workers in community-based disease prevention and health promotion activities including HIV/AIDS prevention Visit target communities every 7 to 10 days* for the duration of the operation to conduct disease prevention and health promotion activities Implement health promotion interventions Ensure access to mosquito nets for 15,000 beneficiaries and sensitise communities on their use Facilitate the vaccination of beneficiaries from vaccines available through the DRC health system Exchange disease surveillance data with ministry of health
15,000 beneficiaries are provided with rapid medical management of injuries and diseases	<ul style="list-style-type: none"> Conduct refresher training for DRC RC nurses and community health workers on the medical management of injuries and disease Visit target communities every 7 to 10 days* for the duration of the operation with a view to screen the targeted population for injuries, diseases and malnutrition Offer first aid when appropriate and/or refer patients to a community health reference centre or medical outpost In extreme cases, facilitate emergency medical transportation for patients to reach reference centres For beneficiaries suffering from malnutrition, refer to UNHCR camps for comprehensive treatment, including the facilitation of transport as required Provide medicines to 10 selected health posts acting as first-line reference centres for local health care

WATER, SANITATION AND HYGIENE PROMOTION	
Outcome 3: Immediate reduction in risk of waterborne and water related diseases in targeted communities	
Outputs (expected results)	Activities planned
Continuous assessment of water, sanitation, and hygiene situation is carried out in 18 pre-identified communities	<ul style="list-style-type: none"> Conduct refresher training for DRC RC volunteers on the conduct of water/sanitation and hygiene assessments Conduct initial assessment of the water/sanitation and hygiene situation in 18 communities Monitor the water/sanitation and hygiene situation in 18 communities every 7 to 10 days*

Hygiene and water/sanitation-related NFIs are accessed by 15,000 beneficiaries; which meet Sphere minimum standards	<ul style="list-style-type: none"> • Transport and deliver (or make available for pick-up) hygiene and water/sanitation related NFIs to spontaneous settlements; • Distribute NFIs to registered households as follows: One collapsible jerry can per household, one bucket with lid per household, 200 grams of soap per beneficiary per month and 200g of laundry soap per household per month
Hygiene promotion activities which meet Sphere standards in terms of the identification and use of hygiene items provided to target population	<ul style="list-style-type: none"> • Conduct refresher training for DRC RC volunteers on hygiene promotion activities • Identify and train community volunteers in the delivery of hygiene promotion messages using a train the trainers approach • Monitor the ongoing delivery of hygiene promotion messages into 18 communities every 7 to 10 days*, and through the use of mass communication media (Radio)
Adequate sanitation in line with minimal Sphere standards in terms of quantity and quality is provided to 18 communities	<ul style="list-style-type: none"> • Conduct refresher training for DRC RC volunteers on emergency sanitation • Using a community mobilisation approach, regionally procured tools will be distributed to the communities, supervise the digging and maintenance of emergency latrines in 18 communities • Conduct monitoring visits every 7 to 10 days*
Access to safe drinking water is improved for 15,000 beneficiaries	<ul style="list-style-type: none"> • Conduct refresher training for DRC RC volunteers on the treatment of water using pūr™ (or a similar flocculent/disinfectant product, based on availability, given the high turbidity of the water at most sources) • Transport and deliver (or make available for pick-up) water treatment products for 15,000 beneficiaries • Distribute water treatment products in sufficient quantity to purify 5,000L of drinking water per household • Using a trainer-of-trainer approach, train communities on the use of pūr™ (or similar product) • Monitor water treatment practices into 18 communities every 7 to 10 days*

RESTORING FAMILY LINKS

Outcome 4: Family links are restored whenever people are separated from, or without news of, their loved ones as a result of the population movement

Outputs (expected results)	Activities planned
People in affected areas and relatives outside these areas have access to appropriate means of communication to re-establish and maintain contact with loved ones	<ul style="list-style-type: none"> • Strengthen the DRC RC RFL offices in Zongo and Gbadolite • Activate the RFL office in Bosobolo • Based on demand, visit communities and camps to collect and return Red Cross messages administered through the national DRC RC RFL network, supported by the ICRC*

*Activities that happen during the same visit to communities, conducted by pirogue or motorcycle

DISASTER PREPAREDNESS AND RISK REDUCTION

Outcome: Communities at risk will benefit from an improved early warning early action mechanism managed by DRCRC at all levels.

Outputs (expected results)	Activities planned
Enhanced preparedness for population movement through increased awareness and analysis of hazard risks and increased volunteer engagement.	<ul style="list-style-type: none"> • Development of population movement contingency plan for DRCRC • Raise awareness of staff and volunteers of mainstreaming of DRR in emergency relief activities. • Strengthen early warning communication mechanisms from field to headquarter level.

Human resources

The DRC RC operation will be supported technically through the recruitment of one Operations Manager (OM), and four RDRTs in the areas of Relief/Shelter (emergency), Logistics, Health, and WatSan.

Working hand-in-hand with the HNS, the OM will coordinate and manage the entire operation at the field level; providing over-sight and leadership to both the DRC RC and IFRC RDRT field teams.

Based on this Emergency Appeal, the OM and RDRTs will jointly develop and manage an Operational Plan of Action, in-line with expected outputs/results, planned activities, and within budget. Field teams will ensure that the implementation activities are aligned and realistic with the overall response strategy. Work plans will be adjusted based on field operational realities and constraints on an as needed basis. RDRTs will work towards reinforcing local capacity by sector, ensuring that there is a clear understanding of the overall response strategy, as well as working towards a clear exit strategy.

As a community-based approach will be used to maintain the momentum of activities implemented in the field, 54 community-based volunteers will be required, in addition to the volunteers that will travel to sites for the delivery of services such as health, WatSan, Hygiene Promotion and RFL.

Logistics

Logistics is a challenge in this region due to limited access to paved roads, resulting in possible extreme access issues, particularly during the rainy season. Many areas where the refugees are currently located are mostly accessible by motorbike or pirogue. In addition the annual heavy rain season contributes to impassable roads, heightened travel delays, with the possibility to experience a break in the commodity pipeline. Although there are local transport and warehousing options that have been identified locally by the FACT, there are other humanitarian actors who will likely also compete for these limited resources. One could expect an increase in demand for such resources, and as a result a direct increase in the market price.

The Regional Delegation in Yaounde, Cameroon has some capacity to support this operation with the release of pre-positioned stocks that can be trucked immediately to jump-start operations. Resupply of NFI for the 2nd and 3rd distribution is budgeted to be shipped in by ocean freight. Should there be an urgent need to secure air transport for a one-off urgent distribution; the airport in Gbadolite can be accessed directly during day light hours. A confirmation by the civil aviation authority in Kinshasa is necessary to operate direct flights to Gbadolite.

This appeal will cover the logistical resources necessary for the DRC RC to implement its distribution, monitoring and evaluation activities. Relief items will be procured, delivered, and distributed in a timely, transparent, and cost-effective manner. Commodities will be cleared from customs and delivered to pre-identified warehouses.

For the DRC RC to efficiently run the logistics aspects of this appeal, the logistics capacity in the areas of the intervention will need to be considerably reinforced and scaled-up to meet the operational demands of this operation. The volunteers will also need to be reinforced with support from the Logistics RDRT. In addition, the Logistics Officer from the IFRC Regional Representative in Yaounde will support the Logistics Officer in Kinshasa.

Outputs (expected results)	Logistics Focus
Logistics support enables the delivery of all sector activities and services outlined above	<ul style="list-style-type: none"> • Establish the supply chain and control of supply movement from point of entry to final distribution point. • Procurement and mobilization of goods and services (coordinated by the Global Logistics Service Dubai Office). • Reinforce and increase the DRC RC logistics capacity through one training workshop, as well as on-the-job training.

Communications – Advocacy and Public information

Given the fluidity and unpredictability of the situation in terms of escalation or de-escalation, and given the fact that donor interest in DRC is relatively high, it is crucial that the operation maintains a timely and deliberate flow of information between the field and stakeholders, both internal and external. This will be vital for fundraising efforts and advocacy, as well as raising the profile of the National Society and capacity building.

The flow of information will be maintained between NDRT and RDRT members working in the field, through the zone communications manager, as well as and other key stakeholders at the national and regional level, including the media and donors, to promote greater quality, accountability, and transparency. Materials gathered will increase the profile of the DRC RC, while providing a platform on which to advocate in the interests of refugees.

Donors and National Societies will receive a regular flow of information and materials. Relevant information and advocacy materials, including audio-visual products, will be channelled through the zone communications manager to IFRC's public website. In addition, Teleconferences with donors will be held as needed, to share information and perspectives.

Expected Results	Activities Planned to Meet the Results
Objective 1: To raise international awareness of the humanitarian context in DRC and position the National Society and the IFRC as key humanitarian partners in the region.	
<p>Outcome: The humanitarian context of DRC is widely reported and the unique position of the IFRC and DRC RC as humanitarian actors is recognized.</p>	<ul style="list-style-type: none"> • Maintain a regular flow of communication materials for donors including facts and figures, key messages, issues and reactive lines, questions and answers • Maintain a regular flow of communications materials for distribution to the media including news releases, fact sheets, beneficiary stories, video and photographs • Maintain a media relations focal point to respond to interview requests, pitch story ideas, brief media, and position spokespeople with key international and regional media • Generate public information content including web stories, blogs, social media, video footage and photo galleries that will be posted to ifrc.org and shared with other global humanitarian web portals • Support field visits by donors and media • Develop advocacy tools in coordination with the Africa zone advocacy delegate and DRC RC
Objective 2: To build the capacity of communications within DRC RC.	
<p>Outcome: DRC RC communications staff increase their skills, and are equipped with tools and resources to support their fundraising, marketing and communications efforts.</p>	<ul style="list-style-type: none"> • Support DRC RC to produce effective and engaging media resources; press releases, photographs, videos, stories • Support DRC RC to develop social media strategies and manage social media accounts and online media • Work with DRC RC to identify and develop relationships with local media. • Provide brand management training and support for DRC RC • Work with the DRC RC to develop templates for emergency and disaster communication

Capacity of the National Society

The core of DRC RC response capacity is its strong and active network of more than 100'000 volunteers throughout the country at community level, enabling the DRC RC with a broad surge-capacity. In Equateur province alone, the DRC RC can rely on an estimated 6,552 active volunteers with training on relief, water sanitation, hygiene promotion and community-based health.

In their day to day operations, nationwide, the sectors of strategic focus of the DRC RC include disaster management, water, sanitation and hygiene promotion services, health services (including HIV prevention, psychosocial health and community-based health), violence prevention (including the prevention of gender-based and sexual violence) and the re-establishment of family links.



DRC RC volunteers based in Gbadolite, Equateur province. Photo/DRC SC

The DRC RC is currently actively responding to the consequences of the conflict in Eastern DRC, the Ebola outbreak in province Orientale and the return of Congolese refugees from Angola. It also routinely responds to cholera outbreaks, vaccination and malaria prevention campaigns on a regular basis.

Capacity of the Federation

The IFRC previously had an office in the DRC until 2012. The DRC is now supported by the IFRC Regional Office in Yaounde, Cameroon. The RO has recently supported the DRC with the implementation of a DREF operation; which was extended due to logistical constraints and delays, was successfully completed in January 2013. Further support was provided through the deployment of two Regional RDRT members in Relief and Logistics. These very same RDRT members have been integrated onto the FACT, which was triggered by the Federation Office in Yaounde, helping to assess the well-being and status of the Refugees from CAR along the Ubangi River. It is the understanding of the FACT that additional resources beyond HR could be available such as access to pre-positioned NFI stocks as well as transport options.

Security

According to the UNDSS in Kinshasa, the security situation in the Northern DRC is stable, but fragile. However, this could change very quickly if the situation in CAR deteriorates. There have been several reports of exchange of gun-fire across the border, and local DRC authorities are maintaining a close-eye on the situation in the event there is cross-border activity between parties to the conflict. The local authorities and MONUC in the DRC have made it very clear that they do not want either side to the conflict to use DRC soil for any conflict related activities. Given that the border area is so close to areas of conflict and that large pockets of refugees are living on the banks of the river on the DRC side, local authorities worry for infiltration of rebels into the areas where refugees are currently seeking refuge. It is for this reason that the UNHCR is focused on ensuring that their Protection mandate is fulfilled by encouraging refugees to move closer in-land to the planned camp in Inke. Should infiltration occur, this could severely impede RC/RC operations in the area. The main concern is banditry, and due to the increased number of people in the area, crime could increase.

It is unclear if a consensus will be reached anytime soon between the parties to the conflict in CAR. There were initial indications in mid-March that peace-talks and negotiations were being considered. However, there are no formal indications to a peace deal to-date. As a result, it is difficult to gauge with a degree of predictability when the situation will improve.

The situation is being monitored by the IFRC Africa Zone security team in Nairobi. A security plan is being developed based on the findings and recommendations of the FACT. The security plan will be developed in accordance with IFRC's Minimum Security Regulations (MSR), and will include measures to address both medical and security related evacuation of personnel. In conjunction with these measures the security team will need to carry out an in-country assessment with specific focus into the areas that IFRC will be conducting field operations in, and therefore the appropriate budget allocations will need to be in place.

The high degree of acceptance enjoyed by DRC RC across all parts of society is a positive factor in its capacity to reach and assist the vulnerable parts of the population.

Budget summary

See attached budget (Annex 1) for details.

Walter Cotte
Under Secretary General
Programme Services Division

Bekele Geleta
Secretary General

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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 \(NGOs\) 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.

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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.

EMERGENCY APPEAL

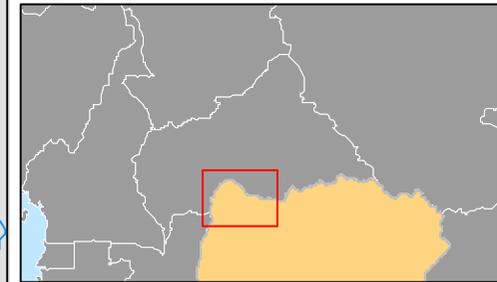
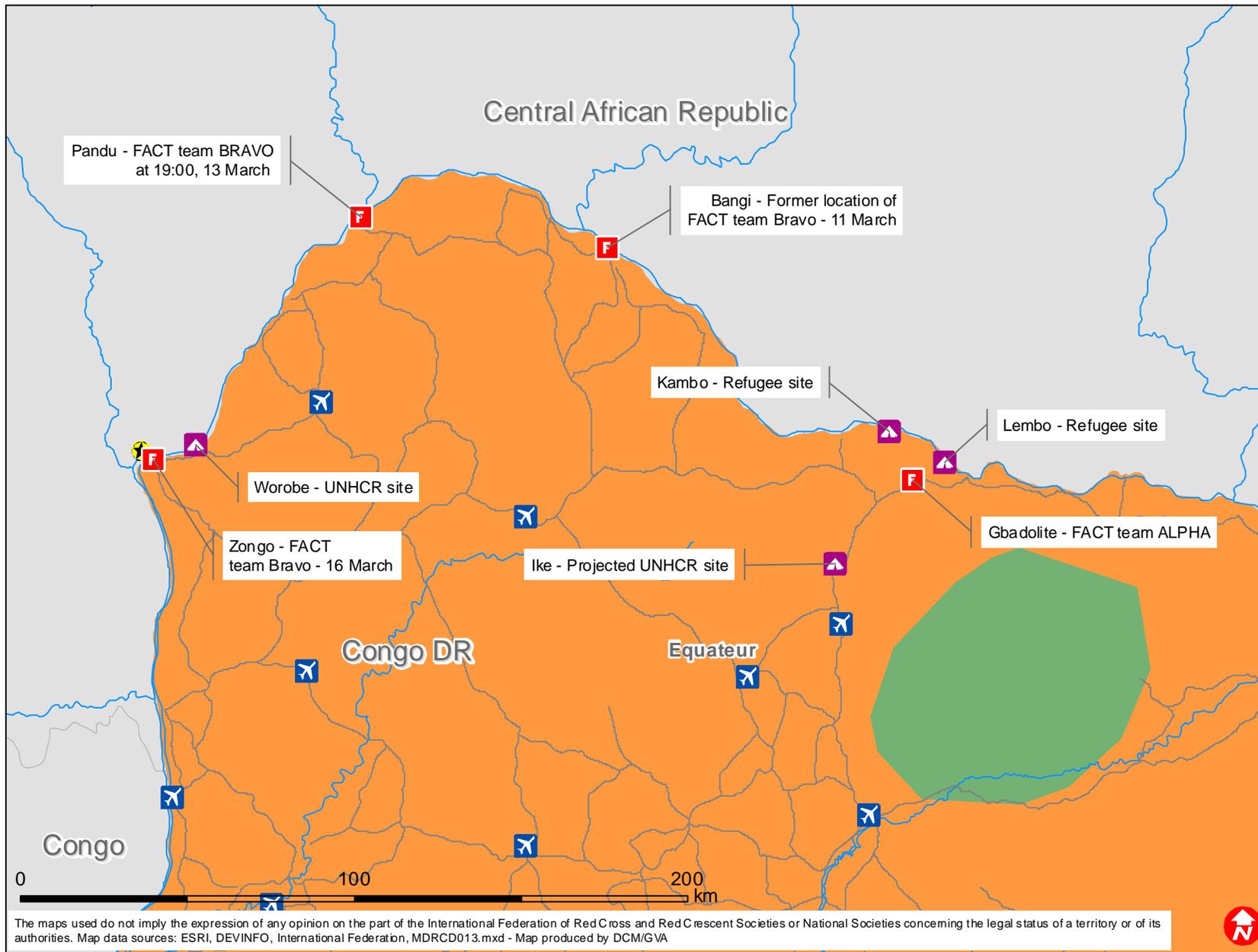
MDRCD013 DRC - Population movement

27/03/2013

Budget Group	Multilateral Response	Inter-Agency Shelter Coord.	Bilateral Response	Total budget (CHF)
Shelter - Relief	114,000			114,000
Clothing & Textiles	1,500			1,500
Water, Sanitation & Hygiene	65,020			65,020
Medical & First Aid	70,900			70,900
Teaching Materials	2,000			2,000
Utensils & Tools	107,900			107,900
Total RELIEF ITEMS, CONSTRUCTION AND SUPPLIES	421,320	0	0	421,320
Vehicles Purchase	76,000			76,000
Computer & Telecom Equipment	4,000			4,000
Office/Household Furniture & Equipment	12,000			12,000
Other Machinery & Equipment	6,800			6,800
Total LAND, VEHICLES AND EQUIPMENT	98,800	0	0	98,800
Storage, Warehousing	20,600			20,600
Distribution & Monitoring	151,000			151,000
Transport & Vehicle Costs	62,820			62,820
Total LOGISTICS, TRANSPORT AND STORAGE	234,420	0	0	234,420
International and Regional Staff	116,000			116,000
National Staff	10,100			10,100
National Society Staff	51,300			51,300
Volunteers	41,856			41,856
Total PERSONNEL	219,256	0	0	219,256
Workshops & Training	12,000			12,000
Total WORKSHOP & TRAINING	12,000	0	0	12,000
Travel	25,000			25,000
Information & Public Relations	21,800			21,800
Office Costs	3,380			3,380
Communications	15,400			15,400
Financial Charges	3,000			3,000
Total GENERAL EXPENDITURES	68,580	0	0	68,580
Programme and Supplementary Services Recovery	68,534	0	0	68,534
Total INDIRECT COSTS	68,534	0	0	68,534
TOTAL BUDGET	1,122,910	0	0	1,122,910
Available Resources				
Multilateral Contributions				
Bilateral Contributions				
TOTAL AVAILABLE RESOURCES	0	0	0	0
NET EMERGENCY APPEAL NEEDS	1,122,910	0	0	1,122,910



Democratic Republic of Congo: Population movement



-  Refugee site
-  FACT

