

DEVELOPMENT OPERATIONAL REPORT

Central Africa Regional Representation

DOCUMENT INFORMATION		
Version number 01		
Individual responsible for this report: Denis DUFFAUT on 21 August 2013		
INTERVENTION INFORMATION		
Implementing Secretariat body / host National Society/ies:	Geographical coverage	Type of intervention (sector/area):
IFRC's Central Africa Regional Representation (CARREP), and the Red Cross National Societies of Cameroon, Central African Republic (CAR), Gabon, Republic of Congo (RoC), Democratic Republic of Congo (DRC), Equatorial Guinea and Sao Tome & Principe (STP)	Covering seven countries: Cameroon, CAR, Gabon, RoC, DRC, Equatorial Guinea and STP	Development priorities for seven national societies covered
Expected start date:	Expected duration:	Number of people to be reached:
01 January 2013	31st December 2013	3,500,000 people in all seven countries
Project Manager:	Project Code:	Annual Budget:
Denis DUFFAUT	MAA62001	CHF 3,500,141
Partner National Societies		
American, Netherlands, Irish, Norwegian, Swedish, British, Monaco, Japanese and Finnish Red Cross national societies		
Other partner organisations		
Japanese government, Korean Government, UNHCR, WFP, DFID, Bill & Melinda Gate Foundation, the European Commission – Humanitarian Aid & Civil Protection (ECHO) and the European Union (EU), Roll Back Malaria, OCEAC		

1. Executive Summary

Overall Status:

During the first half of 2013, several socio-political and natural events occurred in Central Africa. Political unrest in Central African Republic (CAR) led to the overthrow of President Bozize, and the displacement of thousands of CAR populations in neighbouring countries. Internal conflict in the DRC led to the displacement of thousands of people. Internal conflicts in Nigeria pushed thousands to flee into neighbouring Cameroon. Unprecedented floods in Cameroon left thousands homeless and with no means of survival. As a result of these events, focus was on the response to emergency situations. DREF operations and emergency appeals were launched to mitigate the sufferings of affected people in Cameroon, Congo Brazzaville, DRC and CAR.

Another consequence of these events was little concentration on planned development projects and programmes. Adding to that was the late disbursement of available funding towards the end of the first half of 2013, thereby allowing little time to implement planned activities before the end of June 2013.

Moreover, CARREP's staff, including the Regional Representative, dedicated a substantial percentage of their time to the development of core documents for the Round 8 Malaria programme in CAR, to be funded by the Global Fund to fight against AIDS, Malaria and Tuberculosis (GFAMT). In addition, CARREP's Senior Regional Programmes Officer in charge of PMER was seconded to Niger for three months to support the development of

core documents (M&E) for the Round 10 Tuberculosis programme, to be funded by the GFAMT. This delayed the timely production of reports expected from CARREP.

Nevertheless, during this reporting period, Cameroon Food Security project, funded by the Japanese government was launched. The implementation of the operation to assist CAR refugees in Cameroon, the launching of an emergency appeal to assist CAR refugees in DRC, and the implementation of various DREF operations to assist people affected by minor emergencies in Cameroon, CAR, Congo Brazzaville and DRC were also initiated.

Key Issues. One of the key issues during this reporting period was the deployment of CARREP's key staff to support other offices outside the region that impacted negatively on the implementation of activities as planned.

Key Accomplishments. The major accomplishment during this reporting period was the launching and implementation of emergency operations, as well as the launching of a food security project in Cameroon. In addition, more than half of CARREP's staff was involved in the preparation of the upcoming round 8 of the malaria programme in the Central African Republic.

Plans for next quarter. During the second half of 2013, focus will be on the completion of on-going emergency operations in DRC, Cameroon and Congo Brazzaville. Another priority area will be finalizing the documents for the Malaria programme in CAR.

People reached for reporting period

Sectors	People reached
DREF operations	271,486
Emergency appeal on Floods in Cameroon	25,000
Emergency appeal on Population movement in DRC	15,000
Food security project in Cameroon	2,500
Operation to assist CAR refugees in Cameroon	87,000
HIV (PPSAC) project in Central Africa	100,000
Total	500,986

2. Financial Status

Budget and expenditure analysis (CHF)	
A. Annual approved budget	3,500,141
B. Total funding to date	1,606,135
C. Funding to date as % of annual budget (B ÷ A)	46%
D. Year To Date Budget	1,750,070
E. Total expenditure to date	1,138,331
F. Expenditure to date as % of YTD budget (E ÷ D)	65%
G. Expenditure to date as % of annual budget (E ÷ A)	33%

The expenditure rate is relatively low because most funding was received late in the reporting period.

Financial situation

Click [here](#) to go directly to the financial report:

3. Situation/Context Analysis

The first half of 2013 in the Central Africa region was marked by socio-political and military tensions in the Central African Republic (CAR) and in the Democratic Republic of the Congo (DRC). In CAR, rebels attacked villages, moved to Bangui and overthrew President Bozize. In the DRC, rebels appeared in Kivu and started moving towards Kinshasa to overthrow President Kabila. Unprecedented floods in Northern Cameroon and in Pointe Noire (Republic of Congo) left close to 80,000 people homeless in Northern Cameroon, and another close to 5,000 in Pointe Noire. In March, neighbourhoods in several subdivisions of Bangui, capital of the CAR, were

ravaged by violent winds. The towns of Bimbo and Bouar experienced heavy rains accompanied by violent winds that caused extensive material damage and left several persons wounded.

A new government is now in place in CAR, though having some security concerns (looting and assassinations) to grapple with. Still in the CAR, a mine collapsed, killing some persons, while local storms were also reported in Bozoum, not forgetting floods in Bangui. In Cameroon, 4,709 Nigerians confirmed by UNHCR as refugees, arrived in Cameroon and are presently in Mokolo, 80 km from Maroua (Far North region of Cameroon). UNHCR has set up a camp for these refugees. Additional 1,250 CAR refugees also arrived Nandougué (East region of Cameroon) and are currently being managed by UNHCR. An outbreak of yellow fever occurred in Douala, Littoral region of Cameroon, and a response campaign is scheduled to take place in July and August 2013 in 13 districts of the Littoral region. A yellow fever immunization campaign is planned for July and August 2013, in 13 health districts of the Littoral region)

IFRC's Central Africa Regional Representation was mobilized during the first half of 2013 to prepare the core documents for the Malaria Round 8 Programme for CAR, to be supported by The Global Fund to fight against AIDS, Tuberculosis and Malaria (GFATM), with the involvement of IFRC Regional Representative, Regional Programmes Coordinator, Senior Regional Programmes Officer in charge of PMER, Regional Finance and Administration Delegate, and Regional HR Officer. CARREP has been following the proposal submitted to UNAIDS for the implementation of a project to fight against HIV/AIDS in DRC. These events severely affected the implementation of planned and on-going activities. The food security project in the CAR, which was supposed to continue until February 2013, ended prematurely in December. The floods in Cameroon and Pointe Noire caused the IFRC team to stop all on-going activities and concentrate on the emergency response.

4. Analysis of Implementation

Business line 1

CARREP's Regional Representative and Regional Programmes Coordinator travelled to Cameroon, CAR, Equatorial Guinea, RoC, ST&P, Gabon and DRC to help the respective Red Cross National Societies (NSs) to understand the humanitarian situation in their respective countries and plan response actions. The result of this support was the preparation and implementation of various emergency operations and projects. For 2013, CARREP's focus is on 3 out of 7 countries; namely Gabon, DRC and Cameroon. These countries have conducted their SWOT analysis within the framework of the implementation of emergency operations.

In the second quarter of 2013, a learning opportunity was offered to two officers of Regional Representation who have participated in a training on proposal writing for ECHO in Belgium.

Business line 2

Outcome 1: The National Societies of Cameroon, CAR, Gabon, RoC, DRC, EG and STP are supported to build-up robust essential disaster preparedness, response, and recovery capacities that also integrate risk reduction measures and enable them to deal predictably and effectively with anticipated disasters and crises

Indicators	Baseline (where available)		Quarter1 & 2			Annual Target	Year to Date Actual	YtD % of target
	Date	Value	Target	Actual	% of Target			
Output 1.1: The strategic preparedness capacities of the National Societies of Cameroon, Congo Brazzaville, DRC, CAR, Gabon, Equatorial Guinea and Sao Tome & Principe, and those of vulnerable communities in these countries are strengthened								
Number of National Societies that are well prepared to manage	January 2013	03 (Cameroon, CAR & Congo Brazzaville)	07	04 (Cameroon, RCA, Congo Brazzaville et DRC)	57.14%	07	04	57.14%

disasters								
Type of disaster preparedness activities carried out in each National Society.	January 2013	07 DM SPs and CPs developed; DM matrix developed	07 DM SPs and 4 CPs (Gabon, RCA, STP, Cameroon) developed; 7 DM matrix developed	2 DM SPs (Cameroon & CAR) 7 DM matrix developed (1 for each NS covered)	28.57% (DM SPs) 0% CP 100% DM matrix developed	07 DM SPs and 4 CPs (Gabon, RCA, STP, Cameroon) developed; 7 DM matrix developed	2 DM SPs (Cameroon & CAR) 7 DM matrix developed (1 for each NS covered)	28.57% (DM SPs) 0% CP 100% DM matrix developed
Output 1.2: The Red Cross National Societies of Cameroon, Congo Brazzaville, DRC, Sao Tome & Principe and CAR have put in place well-structured disaster management departments, with qualified and well-organized volunteers, through the creation of well-trained national and community disaster response teams (NDRT & CDRT); and a regional disaster response team (RDRT) is trained								
Number of National Societies with well-structured disaster management departments.	January 2013	05 (Cameroon, CAR, Congo Brazzaville, DRC & Equatorial Guinea)	07	07	100%	07	07	100%
Number of NDRTs and CDRTs created.	January 2013	1 NDRT for Gabonese Red Cross	03 (Cameroon, STP, RCA)	0	0%	03 (Cameroon, STP, RCA)	0	0%
Number of RDRT members trained	January 2013	NA	13	0	0%	13	0	0%
Output 1.3: The Red Cross National Societies of Cameroon, Congo Brazzaville, DRC, and CAR have updated their risk maps through the VCA training and their respective communities have a better understanding of disaster risks and threats within their environment and have developed more efficient preventive actions, with special focus on food crisis, climate change and illegal migration								
Number of National Societies with updated risk maps	January 2013	07	07	07	100%	07	07	100%
Number of VCA training conducted	January 2011	01	04 (RCA, Congo Brazzaville, Cameroon, DRC)	0	0%	04 (RCA, Congo Brazzaville, Cameroon, DRC)	0	0%
Percentage of community members assisted declaring to have better understanding of disaster risks and threats within their environment.	January 2013	50%	50%	20%	20%	50%	20%	20%
Type of preventive actions taken by communities.	January 2013	Early alerts on weather threats were disseminated in all 7 countries covered, in close collaboration	Early alerts on weather threats were disseminated in all 7 countries covered, in close collaboration	Weather information disseminated	Weather information disseminated	Weather information disseminated	Weather information disseminated	Weather information disseminated

		with the respective directorates for civil protection in the countries of Central Africa. The partnership with ACMAD was strengthened, which enabled the participation of CARREP in a workshop to disseminate weather forecasts in Brazzaville.	n with the respective directorates for civil protection in the countries of Central Africa. The partnership with ACMAD was strengthened which enabled the participation of CARREP in a workshop to disseminate weather forecasts in Brazzaville.					
Output 1.4: The food security capacities of the National Societies of Cameroon, Congo Brazzaville, DRC and CAR are strengthened								
Number of food security projects implemented in each country with the host National Society.	January 2013	01 in CAR	03 (Cameroon, RCA, Congo Brazzaville)	01 (Cameroon)	33%	03 (Cameroon, RCA, Congo Brazzaville)	01 (Cameroon)	33%
Number of National Societies declaring to have benefited from food security capacity building	January 2013	02	03 (Cameroon, RCA, Congo Brazzaville)	01 (Cameroon)	33%	03 (Cameroon, RCA, Congo Brazzaville)	01 (Cameroon)	33%
Output 1.5: The risks associated with climate change are known and reduced in Cameroon, Gabon, Congo Brazzaville, DRC, Equatorial Guinea, Sao Tome & Principe and CAR through the intervention of their respective Red Cross National Societies								
Number of climate change projects implemented in each country with the host National Society.	January 2013	01 (Cameroon Red Cross volunteers continued to sensitize the populations on the effects of climate change using the communication tools that had been developed in 2010.	02 (Cameroon, RCA)	01 (Cameroon)	50%	03 (Cameroon, RCA, Congo Brazzaville)	01 (Cameroon)	33%

Number of National Societies declaring to know the risks associated with climate change in their respective countries.	January 2013	02	02 (Cameroon, RCA)	01 (Cameroon)	50%	03 (Cameroon, RCA, Congo Brazzaville)	01 (Cameroon)	33%
Output 1.6: In collaboration with their partners within and outside the Movement, the Red Cross National Societies of Cameroon, Gabon, Congo Brazzaville, DRC, Equatorial Guinea, Sao Tome & Principe and CAR have responded effectively and quickly to emergency situations								
Number of emergency situations to which each National Society covered has responded effectively and quickly.	January 2013	07	07	05 (2 in Congo Brazzaville, 1 in DRC, 1 in Cameroon, 1 in RCA)	71.42%	07	05 (2 in Congo Brazzaville, 1 in DRC, 1 in Cameroon, 1 in RCA)	71.42%
Number of people assisted in emergency situations	January 2013	67,195	70,000	69,075	98.67%	70,000	69,075	98.67%
Output 1.7: A warehouse is well-managed and enables CARREP to facilitate rapid response to emergency situations by the National Societies of Central Africa								
Number of warehouses maintained by CARREP.	January 2013	01 in Cameroon	01	1	100%	01	1	100%
Quantity of goods stored in the warehouse	January 2013	Relief items for 2,500 families in Yaoundé	Relief items for 2,500 families in Yaoundé	Relief items for 2,500 families in Yaoundé	100%	Relief items for 2,500 families in Yaoundé	Relief items for 2,500 families in Yaoundé	100%
Number of people assisted with the goods stored in the warehouse	January 2013	67,195	70,000	69,075	98.67%	70,000	69,075	98.67%
Output 1.8: CARREP has improved on its human and material resources in order to be able to provide adequate technical and operational support to National Societies								
Number of people working in CARREP's DM department	January 2013	01	02	01	50%	02	01	50%
Results of the performance evaluation of CARREP's DM team.	January 2013	18	Excellent	Excellent	Excellent	Excellent	Excellent	Excellent

Output 1.9: The National Societies covered by this plan have received technical support from CARREP's DM department								
Number of monitoring missions conducted in each National Society covered.	January 2013	09 (05 in RoC, 02 in CAR, 01 in Gabon, 01 in DRC)	10	07 (RCA, Cameroon, DRC, Congo Brazzaville)	70%	10	07 (RCA, Cameroon, DRC, Congo Brazzaville)	70%
Number of evaluation missions conducted in each National Society covered.	January 2013	04 (01 in RoC, 01 in Gabon and 02 in CAR)	08	07	87.5%	08	07	87.5%

Comments on progress

Support was given to NS in terms of monitoring implementation of DREFs and emergency appeals launched in the first half of the year. NS were also supported to participate in the Africa Drought Forum and DRR workshop.

Central Africa Disaster Management Coordinator participated in a conference on environmental disasters (AGEE/Advisor Group on Environmental Emergencies) organised by UNEP OCHA in Geneva. There was also participation in the 4th global platform on disaster risk reduction in Geneva and at the round table conference of donors for the Central Africa strategy on the prevention, management of disasters and adaptation to climate change, under the auspices of the ECCAS/OCHA/UNSIDR/IFRC/IOM/OIPC. There was also participation in the meeting for the development of a national strategic plan for Cameroon within the framework of activities of International Civil Defence Organization on (ICDO).

Outcome 2: Enable healthy and safe living

Indicators	Baseline (where available)		Quarter 1 & 2			Annual Target	Year to Date Actual	YtD % of target
	Date	Value	Target	Actual	% of Target			
Output 2.1: STIs or HIV-positive sex workers have received appropriate treatment in Cameroon, Central African Republic (CAR), DRC, and Congo Brazzaville.								
1. Number of STI-positive sex workers treated within the framework of Red Cross interventions in the countries covered.	January 2013	6,691	800	420	52.5%	800	420	52.5%
2. Number of HIV-positive sex workers treated within the framework of Red Cross interventions in the countries covered.	January 2013	1,294	1,500	525	33.33%	1,500	525	33.33%
3. Percentage of STI and HIV-positive sex workers declaring to have received appropriate treatment through Red Cross	January	29.55%	100%	49%	49%	100%	49%	49%

interventions in their respective countries.								
Output 2.2: The supply of blood products to national blood transfusion centres is improved and benevolent blood donors have adopted risk-free behaviours.								
1. Quantity of blood donated through Red Cross interventions.	January 2013	NA	7	7	100%	7	7	100%
2. Number of benevolent blood donors sensitized to the importance of adopting risk-free behaviours.	January 2013	NA	70	350	500%	350	350	100%
Output 2.3: Communities in Central Africa are sensitized to the fact that it is free to live with PLWH.								
1. Number of people sensitized.	January 2013	11,458	100,000	4,400	4.4%	10,000	4,400	44%
Output 2.4: Red Cross and community volunteers in Central Africa are actively engaged in social mobilization to facilitate immunization campaigns.								
1. Number of people sensitized.	January 2013	11,458	100,000	118,679	118.70%	150,000	118,679	79.11%
2. Number of immunization campaigns covered.	January 2013	07	07	01	14.28%	07	01	14.28%
3. Immunization coverage rates.	January 2013	99%	100%	99%	99%	100%	99%	99%
Output 2.5: Red Cross and community volunteers in Central Africa are trained on the use of community-based health and first-aid (CBHFA) tools.								
1. Number of Red Cross volunteers trained.	January 2013	7,500	400	219	54.75%	400	219	54.75%
2. Number of community volunteers trained.	January 2013	750	300	150	50%	300	150	50%
3. Number of training sessions organized.	January 2013	120	7	5	71.43%	7	5	71.43%
Output 2.6: An increased number of children are reached by anti-measles and polio massive immunization campaigns and Expanded Immunization Programmes in Central Africa.								
1. Immunization coverage rates	January 2013	99%	100%	99%	99%	100%	99%	99%
2. Number of people sensitized.	January 2013	11,458	100,000	127,369	127.36%	150,000	127,369	84.91%
3. Number of immunization campaigns covered.	January 2013	07	07	01	14.28%	07	01	14.28%
Output 2.7: The populations in Central Africa actually sleep under Long Lasting Impregnated Mosquito Nets (LLIMN), and have access to malaria treatment.								
1. Number of LLIMN distributed in each country covered.	January 2013	14,225	7,000	0	0%	7,000	0	0%

2. Number of families actually sleeping under LLIMN.	January 2013	7,770	7,000	0	0%	7,000	0	0%
3. Number of people having access to malaria treatment in each country covered.	January 2013	NA	NA	NA	NA	NA	NA	NA
Output 2.8: Moderate and acute malnutrition is controlled in refugees and host populations in Cameroon.								
1. Number of cases of moderate and acute malnutrition controlled.	January 2013	3150	NA	NA	NA	NA	NA	NA
Output 2.9: The National Societies of Central Africa have contributed to the prevention and response to epidemics, particularly to cholera in Cameroon, Equatorial Guinea, Congo Brazzaville, DRC, and Sao tome & Principe, meningitis in Cameroon and CAR, Ebola in Gabon and Congo Brazzaville, yellow fever in CAR and Cameroon, and chikungunya in Gabon and Congo Brazzaville.								
1. Number of cholera prevention and response projects implemented.	January 2013	03	03	01	33.33%	03	01	33.33%
2. Number of meningitis prevention and response projects implemented.	January 2013	01	01	0	0%	01	0	0%
3. Number of Ebola prevention and response projects implemented.	January 2013	01	01	0	0%	01	0	0%
4. Number of yellow fever prevention and response projects implemented.	January 2013	01	01	0	0%	01	0	0%
5. Number of chikungunya prevention and response projects implemented	January 2013	NA	NA	NA	NA	NA	NA	NA
Output 2.10: CARREP's Health Department has enough human resources to implement activities as planned.								
1. Number of people working in CARREP's Health and Care department.	January 2013	02	03	02	66.66%	3	02	66.66%
2. Results of the performance evaluation of CARREP's Health and Care team.	January 2013	NA	NA	NA	NA	NA	NA	NA
Output 2.11: The National Societies covered by this plan have received technical support from CARREP's Health department.								
1. Number of monitoring	January 2013	01	01	01	100%	02	01	50%

missions conducted in each National Society covered.								
2. Number of evaluation missions conducted in each National Society covered.	January 2013	02	01	01	50%	02	01	50%

Comment on progress

Throughout the first half of 2013, within the framework of the fight against HIV/AIDS and STIs, the Project to Prevent HIV-AIDS in Central Africa (PPSAC) trained 18 sex workers on peer education. 420 sex workers who received treatment against STIs were reached, and 4,400 people sensitized (truckers, people living along the Yagoua-Bongor cross border area). Despite the progress made, the Global Alliance project that was being implemented in the CAR was interrupted due to insecurity in the country.

Voluntary blood donation campaigns were also organized in the CAR in order to strengthen the capacity of the national blood transfusion centre that always experienced stock outs due to the military and political crisis raging in the country.

A mass vaccination campaign against measles was organized in the CAR, and saw the participation of 300 Red Cross volunteers at the rate of 30 volunteers per subdivision in social mobilization activities. This campaign recorded a 99% immunization coverage rate. The volunteers also helped in improving routine immunization indicators in the DRC. These Red Cross volunteers conducted intensive activities in the Ubangi province for one month, in collaboration with other community outreach workers.

Five CBHFA (community-based health and first aid) training sessions were held, during which 75 volunteers were trained in Cameroon, following the requirements of the floods DREF, while the rest of the volunteers were trained in the DRC.

A vaccination campaign against measles took place in the DRC, and saw the participation of the Red Cross. The efforts of the Red Cross helped in the immunization of 122,900 children aged 6 to 59 months. In addition, 48 cases of refusal were resolved by Red Cross volunteers.

The LLINs distribution campaign that had to be organized by the end of the year in Bangui has not yet taken place. Negotiations are underway with the Global Fund for a universal LLINs coverage in the CAR.

Following the cholera epidemic that occurred in Pointe Noire, Republic of Congo, a DREF was granted and is being implemented. Furthermore, no Meningitis, Ebola or Chikungunya epidemic has been reported in the Central Africa region, though a response to a yellow fever outbreak in the Littoral Region of Cameroon is planned by the World Health Organization (WHO), for the second half of this year.

