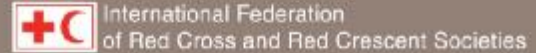


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Emergency Plan of Action Final Report

Burundi complex Emergency



Emergency Appeal	MDRBI012
Date of Issue: 30 June 2017	Glide number: CE-2015-000182-BDI
Date of disaster: 1 April 2016	
Operation start date: 1 April 2016	Operation end date: 30 April 2017
Host National Society: Burundi Red Cross	Operation budget: 285,802 CHF (IFRC) + 565,000 Euro (CRNL)
Number of people affected: At least 645,000 people approx.	Number of people assisted: Over 20,000 people (3,881 families)
Red Cross Red Crescent Movement partners currently actively involved in the operation: Belgian Red Cross (FL), Belgian Red Cross (FR), Finnish Red Cross, International Committee of Red Cross, International Federation of Red Cross and Red Crescent Societies, Luxembourg Red Cross, Netherlands Red Cross, Norwegian Red Cross and Spanish Red Cross.	
Other partner organizations actively involved in the operation: Civil Protection Unit, Concern Worldwide, France Volontaire, Geographic Institute of Burundi, International Organisation for Migration, United Nations Children's Emergency Fund, United Nations Population Fund.	

A. Situation analysis

Description of the disaster

April 2015: Following the President's decision to run for another term tensions and violence erupts in the capital of Bujumbura and some provinces. This resulted in a number of casualties in the capital and large numbers of people fleeing the country.

June and July 2015: Presidential elections went ahead, however following Nkurunziza's electoral success, opposition groups in exile aligned to form the National Council for the Restoration of the Arusha Accords.

September 2015: The El Niño weather phenomenon brings extensive rains, winds, landslides and floods in 15 out of 18 provinces causing extensive and widespread destruction. Many of the affected provinces do not normally have problems with flooding, and the others experience heavier rainfall than usual. The floods result in 80 deaths, 170 people injured, 821 houses damaged, 4,112 houses destroyed along with 15,265 hectares of cultivated fields; 154 schools and 50 bridges were also destroyed/damaged. It is estimated that 30,408 people have been affected (Burundi Red Cross Society).

January–February 2016: IFRC deploys a one-person surge team (supported by British Red Cross) to work with BRCS to identify the priority needs and response actions.

March 2016: An IFRC surge operations manager (supported by Swedish Red Cross) is deployed to support the start-up of the operation and ensure coordination of activities with Movement and non-Movement partners.

April 2016: Emergency Appeal launched for CHF1, 532,090. IFRC's Disaster Emergency Relief Fund (DREF) of CHF161,922 allocated to support the start of assistance.

May 2016: There were floods and landslides in Bujumbura, BRCS launched two camps to relocate the affected people in Mushasha I and Mushasha II. EA supported the activity.

July 2016: Cholera epidemics launched by health minister because Cholera outbreak was spread in different areas KABEZI, KANYOSHA, KINAMA, BUTERERE, NYANZA-LAC and RUMONGE with 240 affected people and 5 deaths. Emergency Appeal supported the activity.

December 2016: Cholera epidemics had been launched by the MoH in Cibitoke Province. In total 169 persons had been affected and fortunately no case of death noticed.

People affected by cholera epidemics: disaggregation by age and gender

<i>Under 5 years old</i>		<i>5 to 18 years old</i>		<i>19 to 50 years old</i>		<i>50 years old and +</i>	
M	F	M	F	M	F	M	F
31	13	36	24	14	40	3	8
44		60		54		11	

Since the declaration of cholera epidemic, from December 2016 to February 2017, BRCS carried out these activities: community door-to-door sensitization, mobile cinema, household disinfection, water supply via water trucking and water treatment from Lake Dogodogo using LMS Kit.

February 2017: Burundi Government declared food insecurity in 14 provinces due to the El Nina phenomenon. BRCS and others humanitarian actors (FAO and Mo Agriculture) conducted a field assessment and a report had been shared.

March 2017: Burundi Government, declared a Malaria epidemic. The MoH said that malaria cases had been decreased to 13% (1.823.012 cases had been notified) from January to March 2017)

Summary of response

Overview of Host National Society

The Burundi Red Cross Society (BRCS) is accepted as the leading humanitarian agency in Burundi, with a country-wide presence. At national headquarters (NHQ) (68 employees), provincial (18 Branches, with 99 employees), municipal (communes, with 119 staff), and collines level (2,936 Red Cross units in collines or hills), as well as a network of 610,000 volunteers. The BRCS has a pool of 40 specialized National Disaster Response Team (NDRT) volunteers who were trained in first aid, emergency needs assessments, SPHERE standards, WASH and camp management. However, given the current situation in the country, there is a need to expand the number of NDRT that can be mobilized. BRCS is the main implementing partner of many United Nations (UN) agencies because of the consistency they provide and their extensive presence throughout the country.

In 2014, the BRCS developed an election contingency plan, which was implemented between January–April 2015, but then the preparedness was interrupted by the beginning of the violence.

Following the civil unrest, and other multiple emergencies such as food security, Cholera and Malaria that have since been experienced across the country, the BRCS has focussed on the following areas of intervention:

Assessment

The BRCS at branch level played an important role in the coordination of rapid assessments, which were carried out at provincial and commune level in collaboration with the government, Civil Protection Unit (CPU) as well as INGO/NGOs representatives. For the El Niño operation and political violence, BRCS shares rapid assessment findings in a daily SITREP, published on the BRCS website. Food insecurity assessment had been conducted during March 2017.

Health and care

Since July 2016, the BRCS has been working in Bujumbura and the provinces of the cholera belt zone that have been identified as being most affected by the Cholera epidemics. A total of 240 people have been affected by cholera disease from July until October. During the response to Cholera, 100 volunteers were equipped with Sprayers for the disinfections of affected area and door-to-door sensitization in affected areas such as KABEZI, KANYOSHA, KINAMA, BUTERERE, NYANZA-LAC and RUMONGE. Since December 2016 to February 2017, 169 people have been affected by cholera disease in Cibitoke Province.

In partnership with the UNICEF and other WASH sector actors, the BRCS was involved in preventing the spread of cholera, through the following activities: carry out assessments, vector control (spraying of chlorine), as well as supporting safe household water treatment and hygiene promotion.

Shelter and settlements

In partnership with IOM, UNHCR, UNICEF and UNFPA, as well as donations received from the public, the BRCS was involved in the distribution of one-off standard NFI and hygiene kits to populations affected by the multiple emergencies (specifically the civil unrest and El Niño responses). The BRCS has distributed a few NFI kits from their own preparedness stocks.

Since November 2015, the BRCS was responsible for the management of four temporary camps in Rumonge and Bujumbura provinces. The BRCS worked with the local authorities, UN agencies and international non-governmental agencies (INGOs) to help meet the immediate needs of IDPs affected by El Niño related floods and landslides, who have relocated to the Cashi, Gitaza, MUSHASHA I and MUSHASHA II camps. In partnership with UNICEF, the BRCS supported the installation of infrastructure including bladders, cooking facilities, latrine and shower blocks, as well as a perimeter fence (to prevent hippos entering the camp at night). It was expected that the camps would open for a maximum of three months. The land had been allocated by the government in Rumonge province.

A breakdown of the number of people in the camps where BRCS are providing camp management assistance.

CAMP	TOTAL	Sex		0-5 yrs		6-8 yrs		9-13 yrs		14-17 yrs		18-30 yrs		30-50 yrs		Above 50 yrs	
		M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Mushasha I	2,032	1,032	1,000	208	204	156	146	165	146	141	134	120	136	188	189	54	45
Mushasha II	759	376	383	46	84	81	49	74	75	66	65	48	50	50	50	11	10
Cashi	1,317	634	683	80	65	90	0	128	130	110	100	98	6	88	2	40	50
Gitaza	396	203	193	98	80	45	42	15	14	12	15	11	10	15	20	7	12

The BRCS was the lead in camp management in the Congolese transit refugee camp of Cishemere, which was established in 2013 and has a capacity to assist 1,000 people. Each arrival stayed a minimum of two-three days before on ward referral or return to the Democratic Republic of Congo. In total, there were more than 55,000 Congolese refugees living in Burundi. UNHCR is currently working on an exit strategy for the transit camp, although with the forthcoming elections in DRC a new influx of refugees is anticipated and therefore it seems unlikely to close.

In partnership with IOM, BRCS was involved in assessing major population movement trends and the related humanitarian needs of IDPs who have sought refuge in host communities using the DTM (Displacement Tracking Matrix). BRCS volunteers conducted monthly monitoring in three provinces—Kirundo, Makamba and Rutana. IOM plans to expand this monitoring to all seventeen provinces (all provinces except Bujumbura Town) by end of 2017. With Luxembourg RC and IOM, BRCS is still working to delocalize the two camps (Cashi et Gitaza) on a new land given by the Government at Rumonge Commune (Kigwena Zone).

Food security, nutrition and livelihoods

In 2015, in partnership with WFP, the BRCS was involved in the distribution of general food rations to 36,000 families (180,000 people) per month in Bujumbura, Kirundo, Makamba, Rumonge and Rutana. Following joint assessments carried out in collaboration with other partner organizations, and informed by monthly monitoring of malnutrition, there was need of the targeted beneficiaries to be increased to 50,000 families (250,000 people) per month in 2016. In addition, in partnership with WFP the BRCS are also targeting children less than 20 months, pregnant and lactating women with specialized food rations in Kirundo and Makamba. As Burundi Government declared food insecurity in March 2017, BRCS lead a field assessment and a was shared.

Overview of Red Cross Red Crescent Movement in country

Partner	Role
ICRC	Refresher training on first aid and simulation, provision of first aid kits, dissemination of IH Red Cross Principles and Values in the army and police institutions, financial, logistical and material support, tracing Giving LMS kit, motor pump and other components (aniofloc, alufloc, etc. for water treatment.
IFRC	Supports BRCS in disaster risk reduction and disaster preparedness (including flood, election and cholera preparedness) in response to the increased El Niño season, humanitarian diplomacy and communication with beneficiaries.
Finnish Red Cross	Model households in Kirundo and Ngozi provinces through the integrated Health project.
Belgian Red Cross(FI)	WASH and organisational development in Muramvya, Bubanza and Mwaro provinces, and strengthening first aid services in all provinces.
Belgian Red Cross(Fr)	Nutrition in Ruyigi and Cankuzo provinces, Community resilience and organisational development in Bururi, Gitega and Kirundo provinces.
Belgian Red Cross (RKV)	Malaria fighting programme in the northern provinces (Ngozi, Muyinga and Kirundo)
Luxembourg Red Cross	Livelihood and shelter support to most vulnerable Burundian returnees in Muyinga province
Netherlands Red Cross	Reduction of maternal and infant morbidity and mortality in Cankuzo province, Gender Base-Violence in Bujumbura City.
Norwegian Red Cross:	Capacity building, finance development and leadership trainings in Ruyigi, Rutana, Cibitoke, Muramvya provinces; integrated health in Muramvya and Rutana provinces; and road safety and DRR in Ruyigi, Rutana, Cibitoke, Muramvya provinces. OVC in Cibitoke and Ruyigi provinces GBV in Ruyigi, Rutana, Cibitoke, Muramvya and Kirundo provinces.
Spanish Red Cross	Food security and livelihoods in Rutana and Makamba provinces.

A Movement Coordination Agreement (MCA) was finalized between BRCS, ICRC and IFRC to improve coordination. To date, ICRC has had a major role in Burundi and future efforts will focus on preparedness to respond to escalation in armed violence. ICRC focus will continue to be on civil unrest and IFRC and PNS will support other emergency situations. Given the multiple emergencies the country is experiencing and from the many partner organizations.

Overview of non-RCRC actors in country

	BRCS partner s	Nature of support being provided	Who is being targeted and in which provinces?	Estimates on people being reached?
Sector Health and care	UNFPA	Dignity kits for women	Bujumbura Rural, Kirundo, Makamba and Muyinga	7,100people
	MSF Belgium	Assistance of wounded and victims of conflicts	Bujumbura Rural and Bujumbura Town	As required
	Cholera belt around Lake Tanganyika and 8	Dissemination of messages on Cholera, Malaria, Nutrition, Diarrhoea through Mobile cinema (Community Engagement and Accountability); spraying campaigns, distribution of long lasting insecticide treated nets, sanitation works, etc.	Makamba, Cibitoke, Bubanza, Bujumbura Mairie, Bujumbura Rural, Bururi Rumonge, Mwaro, Muramvya	126,000 people

	provinces IFRC and PNS		Ruyigi, Gitega, Cankuzo, Karuzi, Ngozi, Kayanza,	
	U- REPOR T	U-Report (UNICEF) and Mobile cinema (IFRC and PNSs) for health messaging	18 provinces (whole country)	40,400 people (covered by the first campaign)
Shelter and settlements	UNHCR	Camp management	Cibitoke	Gitaza camp currently houses 141 families (869people) with a further 68 families awaiting shelter; and Cashi camp 135 families (859people).
	IOM	DTM–Monitoring of IDPs	Bujumbura Rural, Bururi, Kirundo, Makamba, Muramvya, Mwaro, Cankuzo, Ruyigi, Karuzi, Rutana, Ngozi, Muyinga, Kayanza, Cibitoke, Bubanza, Gitega, Rumonge	
Food security, nutrition and livelihoods	WFP	General food distributions	In case of disaster	250,000people
		Specialised food distributions targeting children under 20 months, pregnant and lactating women	Kirundo and Makamba	28,719people
Water, sanitation and hygiene promotion	UNICEF and ICRC	Training in WASH in emergencies WASH equipment's	Cholera Belt six provinces)	2,000families
2Protection	ICRC	Monitoring of separated and unaccompanied Children in different cities of Bujumbura town. Monitoring of wounded and or arrested or hospitalized children. Providing training	Bujumbura Rural Bujumbura town, Cibitoke, Gitega and Ngozi Prisons for ICRC, Ruyigi	>11.250persons
	UNICEF and ICRC	Monitoring of separated and unaccompanied Children	18 provinces (whole country)	Of which>5years olds are18%-20%
	UNHCR	Monitoring of returnees	15 provinces: Makamba, Cibitoke, Bubanza, Bujumbura Mairie, Bujumbura Rural, Bururi, Ruyigi, Gitega, Cankuzo, Karuzi, Ngozi, Kayanza, Muyinga, Rutana, Kirundo	

Needs analysis and scenario planning

Please refer to the revised Emergency Plan of Action (MDRBI012) launched in September 2016, for information on the operation, including on the operational strategy and plan, and operational support needs.

B. Operational strategy and plan

Overall objective

Immediate survival and basic needs of the population affected by the emergency situation in Burundi are addressed through the provision of essential emergency relief and early recovery services targeting at least at least 20,504 people (3,881 families) living in the most affected and at-risk areas, for a period of twelve months.

BREAKDOWN OF EMERGENCY APPEAL TARGET POPULATION:

Health and Care	Contribution to cholera response <i>BRCS is one of multiple agencies responding to the cholera outbreak.</i> Procurement of 50 Personal Protective Equipment for staff and volunteers to enable them to assist in the cholera treatment facilities. Procurement of 50 pumps spray for disinfection. Community sensitisation and mobile cinema during	Direct but partial contribution	Population in affected area through community education.
Shelter and Settlements	140 NDRT volunteers trained on distribution techniques Distribution of NFI kits to 1,500 families (within timeframe of appeal if new needs arise or prepositioned for future use) Procurement of CGI sheets for 300 families for use when relocation from camps proceeds Procurement of 400 family tents for prepositioning for future emergency needs Camp Management support for the communities living in Cashi (135 families/1317 people), Gitaza (141 families/396 people), Mushasha I (303 families/2032 people) and Mushasha II (102 families/759 people) camps.	Indirect Direct Direct Direct Direct	1,500 HH's 300 HH's 400 HH's 681 HH's/ 4,504 Families
NS Capacity Building	Increased capacity in safety and protection of staff and volunteers including: the procurement of RCRC visibility items; communication equipment (mobile phones and satellite phones); emergency stocks (food and water), and identification of safe places for hibernation at NHQ. Increased logistics capacity (stock and fuel management)	Indirect Indirect	
Common Areas	140 NDRTs trained in needs assessment Information management systems CTP Final evaluation	Indirect Indirect Indirect Indirect	

Overall Objective

Immediate survival and basic needs of the population affected by the emergency in Burundi are addressed through the provision of essential emergency relief and early recovery services targeting at least at least 20,504 people (3,881 families) living in the most affected and at risk areas, for a period of twelve months.

Proposed strategy

The Emergency appeal supported the provision of immediate life-saving support to populations that had been affected by the emergencies. This was through the provision of Health and care, Shelter and NFI distributions and strengthening the capacity of the National Staff and volunteers.

- The NS Carried out continuous needs assessment and analysis
- Ensured integrated programming between sectors is being ensured
- Promoted early recovery
- Procured Personal protective equipment that enabled the volunteers carry out Cholera prevention activities.
- In Shelter and Settlements, The NS trained 140 NDRT volunteers, procured and distributed family kits , procured CGI sheets. This was done with support from Netherlands Red Cross and IFRC.
- The National society capacity building activities which were planned were completed which included printing of T shirts to enhance visibility, stocking of emergency foods, procurement of communication equipment's training of warehouse management and prepositioning of fuel strategic stock.

Human resources (HR)

Netherlands RC and Other Partner National Societies and IFRC.

The positions were:

1 Project Coordinator, PMER officer, Logistics officer, Driver, IT, warehouse keeper and Team Leader.

Logistics and supply chain

The IFRC supported the BRCS's logistics needs namely procurement, fleet and stock management, plus capacity strengthening of logistics staff. Procurement for this EA was done with the BRCS logistics department with support of the Logistics Delegate and IFRC's Global Logistics Service (e.g. for international purchases) BRCS's procurement procedures was followed, and supplemented where required to ensure they are no less rigorous than IFRC's.

Donors were encouraged to give un-earmarked cash donations. Mobilization of relief goods including in-kind donations were coordinated through the Global Logistics Unit, Dubai office. A mobilization table was maintained by the IFRC Africa Regional Logistics Unit and shared with the relevant parties.

Communications

Due to the sensitive information and the government regulations, this was very difficult to achieve. The National Society was also very careful on the information shared.

Security

Security management was vital element to the operation to ensure security of personnel, assets and programmes. BRCS continuously monitored the security environment and responded to changes in the threat and risk situation by implementing adequate security risk reduction measures. This included measures related to safety-related threats and risks, e.g. road traffic accidents, fire safety, and health-related concerns. The IFRC Africa Region security coordinator supported and worked with the BRCS mainly through the monitoring of the security situation and providing strategic security risk management advice. The BRCS Security Officer shared security related information and provided adequate advice to BRCS and IFRC staff in the capital and the field.

Planning, monitoring, evaluation, & reporting (PMER)

Monitoring visits were conducted regularly with the support from IFRC EAIOI CCST in close collaboration with external partners. The IFRC PMER and Netherlands RC assisted in the establishment of monitoring and evaluation tools. an internal evaluation and lesson learned workshop was conducted to evaluate the implementation of the activities.

C. DETAILED OPERATIONAL PLAN

Health and Care

Health and Care
Outcome 1: Immediate impact of the range of complex emergencies to the health of population is reduced, over a period of six months (Target: 2,000 people / 400 families)
Output 1.1. Rapid medical management of injuries and diseases is provided to the affected population living in most affected and at-risk areas (Target: 2,000 people / 400 families)
Activities Planned <ul style="list-style-type: none"> Dissemination of first aid messages and IFRC principles in hotspots areas by spot radio (Target: 2,160 messages) Procurement of an ambulance operating from Bujumbura (Target: one ambulance) Provision of referral and ambulance services for more specialized management of the injured
Output 1.2: National emergency hotline service to provide advice on health and first aid; as well as referral information as appropriate to the affected population is operational (Target: Up to 10 million people (the estimated population of Burundi))
Activities Planned <ul style="list-style-type: none"> Secure toll-free number (165) Develop health and first aid advice sheets for volunteers to provide remote assistance Conduct a training of volunteers on the hotline service training (Target: 15 volunteers) Conduct on the job refresher training on the hotline service (Target: 20 volunteers – including five existing volunteers) Running of the national emergency hot line service for six months Develop a communication and dissemination plan for the hotline service
Achievements
<ul style="list-style-type: none"> For cholera response, the Staff and volunteers conducted activities such as door-to-door sensitisation, mobile cinema, household disinfection and water treatment and supply using LMS kit to eradicate Cholera epidemic. The appeal aims to enhance this work by have a secure toll free number and volunteers who are more trained to improve their skills and capacity to respond to the variety of complex calls received. 50 Personal Protective Equipment's for staff and volunteers were procured that enabled them to assist in the cholera treatment facilities. 50 pumps spray for disinfection were procured Community sensitisation and mobile cinema were conducted.
Challenges
<ul style="list-style-type: none"> Delay in the implementation of certain activities following the late disbursement The complexity of the vulnerability aggravated by the occurrence of other emergencies during the response phase (malaria outbreak)
Lessons learned
<ul style="list-style-type: none"> The complex emergency response gave the National Society the status of leadership in humanitarian aid. This includes the National Platform every week at the HQ.

Shelter and Settlement

Needs analysis: Following the floods and civil unrest many people have had their homes destroyed or had to flee their homes for safety This has left many people without sufficient safe shelter to house their families BRCS aims to support these families with shelter materials and basic essential household items

Population to be assisted: At least 20,000 families/100,000 people whose houses have been damaged or destroyed (in partnership with IFRC, ICRC, IOM, UNFPA, UNHCR and UNICEF).

Outcome 2: Immediate shelter and settlement needs of the population affected by the emergency situation in Burundi, are addressed over a period of six months (Target: At least 20,000 families/100,000 people)

Output 2.1: Non-food items (NFI) and emergency shelter items are provided to the affected population (Target: At least 20,000 families/100,000 people in partnership with ICRC, IOM, UNFPA, UNHCR and UNICEF)

Activities Planned

- Conduct a training on distribution techniques and protocol (Target: 140 NDRTs)
- Conduct a training on shelter construction techniques (Target: 140 NDRTs)
- Identification and selection of beneficiaries
- Procure NFIs to enable continued response to the multiple disasters range of emergencies (Target: 1,250 family kits)
- Procure emergency shelter items (Target: 22,050 CGI sheets, 2,500 poles, 2,500 slats, 1,250 tool kits and 2,500 tarpaulins)
- Distribution of NFIs; including demonstration on their use (Target: 1,250 families)
- Distribution of NFIs; including demonstration on their use in Cibitoke, Bubanza, Bujumbura Mairie, Bujumbura Rural, Makamba, Bururi, Muyinga and Rutana – supplies provided in partnership with ICRC, IOM, UNFPA, UNHCR and UNICEF (Target: At least 20,000 families)
- Distribution of emergency shelter items (Target: 1,250 families) Replenishment of NFIs used in the response for repositioning (Target: 1,000 family kits)

Achievements

- Trainings on distribution techniques and protocol and on shelter construction techniques were conducted in 14 Branches such as Bujumbura Mairie, Bujumbura Rural, Bubanza, Cibitoke, Rumonge, Bururi, Makamba, Rutana, Muyinga and Kirundo. 280 NDRT have been trained.
- Procurement of NFI kits.
- Procurement of emergency shelter items:
- Procurement of tents
- CGI sheets for 300 families were procured
- Emergency family tents for 400 families
- Camp management support for Internally Displaced People has been done

Challenges

- Difficulties to get a land from the government to relocate the IDPs
- Purchases of products outside the country delay response to emergency
- The length of the IDPs camps beyond the time envisaged led to difficulties in their management

Lessons learned

- The diversity of services provided on the basis of needs has made the response efficient
- Flexibility of the partners in relation to the clauses has made it possible to respond to other forms of emergencies (cholera in Cibitoke)

National Society capacity building

Needs analysis: Given the multiple emergencies the country is experiencing and from the many partner organizations including non-RCRC partners who seek the support of the BRCS volunteers and its branch network for their activities, there is a need to increase skills, capacity and ensure our people are protected. As noted, the BRCS is the main implementing partner of many UN agencies, however such partnerships often do not provide the necessary support for BRCS's capacity or infrastructure, and strengthening support is urgently needed to enable them to continue to deliver the services, especially in logistics and warehousing.

Outcome 3: Capacity of the Burundi Red Cross Society to respond to the emergency situation in Burundi and needs of the affected population is strengthened

Output 3.1: Adequate protection is given to staff and volunteers involved in the response to the of the EA operation

- Activities Planned
- Procure and distribute RC visibility materials (caps, jackets, t-shirts etc.) to active staff and volunteers (Target: 300 staff and volunteers)

- Procure emergency food and water stocks for headquarters
- Prepare a safe area in BRCS headquarters to compound for staff and volunteers who may have to hibernate during times of civil unrest.
- Ensure suitable communication equipment is available to active staff and volunteers (HF/VHF/satellite phones)
- Roll out “Stay Safe” e-learning modules for active staff and volunteers
- Provide psychological support to active staff and volunteers
- Ensure staff and key volunteers have the means to work from home during emergencies (mobile phone credit, internet access)

Output 3.2: Logistics and supply chain systems are strengthened to enable effective service delivery

Activities Planned

- Rapid emergency needs and capacity assessments of the existing systems/gaps (in collaboration with the ICRC) – including fleet
- Installation of temporary/permanent warehouse facilities at NHQ/branch level
- Reorganize NHQ/branch level warehouse systems (including the introduction of LOGIC software)
- Conduct training on warehouse management for BRCS logisticians (Target: 20 logisticians)
- Introduction of manual inventory control system
- Set-up supply chain and control supply movements from point of dispatch to final distribution point
- Maintain fuel stocks to central and four regional warehouses

Output 3.3: National contingency plans are developed or updated

Activities Planned

- Develop a medium/longer term multi-hazard contingency plan including the return of 250,000+ people who have fled to neighbouring countries;

- Strengthen stock management capacity (SOPs, training costs)
- Stock organisation and security
- Logistics capacity assessment and development of strategic plan (field trips, to branches, fuel, FM etc.)
- Development of warehousing infrastructure (contribution to construction of national warehouse)
- Establishment of strategic fuel stock
- Strengthen fuel management (SOPs, training, basic equipment)

Activities performed by the NLRC:

Procure 300 t-shirts

Procure 300 umbrellas

Procure 300 caps

Procure 300 rain jackets

Distribute RC visibility materials to active staff and volunteers

Procure 2500 COTEBU cloths

Camp management and supervision

Procure dry food rations to HQ for staff and volunteers during civil unrest in case of hibernation in safe area in BRC

Procure 15 tablets /smart phone with GPS

Coordination meetings

Maintenance of truck

Security control system (*Fingerprint readers, surveillance cameras, fire extinguishers, solar panels for the Hotline, defibrillator*)

Simulation exercise on urgent situation

Food insecurity monitoring

Cash distribution to 480 beneficiaries

Volunteers insurance

Construction of central NHQ warehouse

NFI Distribution by NDRT

Development of contingency plan workshop (20 personsx4 days per session@ CHF 28 per day for costs for venue, materials, copies, facilitators etc.)

Achievements

- 285 t-shirts, umbrellas, caps and jackets were procured for volunteer's visibility.
- 2500 clothes have been procured
- RC visibility materials were distributed to active staff and volunteers
- Dry food rations for staff and volunteers were purchased during civil unrest for an event if hibernation in safe area in BRCS have been procured. This was part of preparedness activities.
- 10 tablets /smart phones with GPS have been procured for the volunteers and staff.
- 20 BRCS logisticians were trained on warehouse management
- A central NHQ warehouse has been built and another National warehouse is under construction in Gitega province
- Logic system has been introduced and the National Society will continue work with IFRC and Partner National Societies to adapt
- An assessment of cash transfer programming (CTP) as an option for displaced and returnee families was conducted in Bujumbura Mayorship. 480 beneficiaries in Bujumbura Mayorship benefited. This was cash for work that targeted the youth.
- 2 Communal Risk Reduction Platforms have been set up which will be used to engage with community and other actors.
- Security control system was set up (Fingerprint readers, surveillance cameras, fire extinguishers, solar panels for the Hotline, defibrillators)
- Volunteers were insured during this during period in an event of any accident.
- 20 VHF were procured and installed.
- 1 server (low capacity for current existing) was procured
- 5 HF radios were purchased and installed.
- A mechanism to enable beneficiary complaints/feedback was set up to establish accountability to beneficiaries

Challenges

- The occurrence of new emergencies such as cholera epidemic, food insecurity prevalence, led the appeal intervention to be extended for 14 months. In addition, IDP camps that were scheduled to close in June 2016 are

still in place. The relocation sites were donated by the State in April 2017 and are not yet prepared, which includes the construction works of the houses.

- lack of certain products on the local market led to the delay in responding to emergencies. This is the case for NFI kits for IDPs which were blocked at the Port of Bujumbura. The government of Bujumbura claimed that customs duties should be paid for those items, while the BRC has an exemption from these duties in its capacity as a humanitarian organization providing support to the public authorities in the field of relief and that the texts devoting this exemption are available.
- A small number of youth trained in CTP. All the Jobless youth did not participate in cash transfer program. This was due to funding. NLCS only supported this output.
- Low storage capacity in the warehouse was a challenge.
- The increase in product prices in the market affected the budget allocated hence the quantity of products expected to decrease and a lot of variance is expected in the financial reports.
- Inadequate funds allocated to certain activities lead to delays in their implementation. This was the case with the activity related to the updating of the National Contingency Plan. Such activity should be carried out jointly with the National Platform for Risk Prevention and Disaster Management and should bring together practically all humanitarian actors involved in Disaster Management at the national level. After drawing up the detailed budget for this activity, it was found that the cost was approximately 13,425 Euros instead of 3486 Euros planned. As the supplementary sum could not be found, the parties concerned agreed to re-allocate the amount foreseen in the workshops for setting up two communal disaster management platforms in two communes.

Lessons learned

- The information obtained from the beneficiaries via the hotline enabled the National Society to improve the services rendered to the vulnerable people
- During emergencies, the CTP (cash Transfer program) is a very effective program and should be scaled up.
- Regular monitoring of the implementation of activities by the partners improved the quality of services delivered to vulnerable people.
- The coordination mechanism that was used during the development of the Appeal and budget led to a coherent approach in supporting the BRCS activities by the in country PNS and ICRC. The partners were able to support the NS based on their strengths and capacity as well as contribute to their ongoing programs.

Quality Programming / Areas Common to all Sectors

Outcome 4: Continuous assessment, analysis, and final evaluation is used to inform the design and implementation of the EA operation

Output 4.1: Initial needs assessment are updated following consultation with beneficiaries; and Emergency Plan of Action is updated and revised as necessary to reflect needs during the timeframe of the EA operation

Activities Planned

- Conduct training Emergency Needs Assessment (ENA); and SPHERE standards (Target: 280 NDRTs)
- Conduct information sharing sessions with authorities on the Emergency Plan of Action (Target: Three sessions)
- Establish accountability to beneficiaries' mechanisms (complaints mechanism)
- Continuous assessment using the ENA methodology (by; monitoring and documentation of the activities planned in the EA; including updating of the EPoA as required.
- Preparation of reporting as required (including Operations Updates)
- Programme information on the implementation of the Complex EA is communicated regularly and through appropriate channels
- Conduct final evaluation and lessons learned workshop

Output 4.2: Cash transfer / voucher solutions are considered and incorporated into the Emergency Plan of Action where appropriate

Activities planned

- Commission a detailed assessment of cash transfer programming
- Training of staff/volunteers on cash programming at national and provincial levels on (Target: 20 staff/volunteers)
- Test CTP in pilot provinces (Target: Two)

Achievements

- 140 NDRTs (10 per branch across 14 branches) were trained on the IFRC Emergency Needs Assessment and SPHERE standards have been conducted for 10 NDRT per branch in 14 branches

<ul style="list-style-type: none"> Final evaluation was conducted and lessons learned workshop held which identified strengths and weaknesses of the operations.
Challenges
<ul style="list-style-type: none"> Lack of simulation exercise in the needs assessment in the field. Existence of several implementers complicating Project coordination
Lessons learnt
The presence in the branches of the NDRTs trained on the emergency needs assessment enabled the supervision of the food insecurity situation assessment

Food Security, Nutrition and Livelihoods

Needs analysis: Following the current food situation in the country, there was need to Conduct Emergency Needs Assessment on food insecurity in 17 provinces.

Population to be assisted:

Food security, nutrition and livelihoods
Conduct ENA on food insecurity in 17 provinces.
Achievements
<p>Activity performed by NLRC: Emergency Needs Assessment on food insecurity was conducted in 17 provinces. The evaluation touched all the collines (hills) of these provinces and sought to discover the consequences of the succession of El Nino and La Nina phenomena on the populations. The results of the evaluation showed that food insecurity was prevalent in Almost the entire country, however, 6 provinces were more threatened than others. There have been reports of deaths due to food insecurity or associated causes such as internal and external population displacement, the scarcity and high cost of food on the markets, cases of and acute malnutrition. The provinces rates as with high are: Bubanza, Kirundo, Makamba, Muyinga, Rumonge and Ruyigi.</p> <p>During the National Platform for Risk Prevention and Disaster Management, the results of the evaluation were used as a basis for advocacy to ensure that the affected populations were able to obtain assistance from the humanitarian actors involved. As a result, WFP provided food assistance to the populations of Gihanga and Mpanda communes. Advocacy will continue to provide assistance to the populations of other affected municipalities and provinces. BRC volunteers have also been engaged in raising awareness of the adoption of resilience actions to food insecurity.</p>
Challenges
One of the challenges was the reluctance of some administrative authorities to accept the assessment of the food insecurity situation on their territory
Lessons learned
<ul style="list-style-type: none"> To advocate for the regular update of the national contingency plan. The launching of the extensive decentralized network of volunteers has made it possible to assess food security information in the entire National territory in a short time.

D. THE BUDGET

This report is issued as a preliminary final report because the final financial report is not ready, once the final financial report is ready the report will be published.

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[Click here](#)

1. Revised Emergency Appeal budget (*if needed*) [below](#)
2. Click [here](#) to return to the title page

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.

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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.

