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Emergency appeal operations update

Rwanda: Burundi Refugees

 International Federation
of Red Cross and Red Crescent Societies

Emergency Appeal	Appeal n° MDRRW013; GLIDE n° OT-2015-000129-RWA
Operations update n° 1	Timeframe covered by this update: 17 September to 2 October 2015
Date of issue: 5 October 2015.	
Operation start date: 17 September 2015	Expected timeframe: 10 months (End date: 17 July 2016).
Operation manager: Andreas Sandin, Operations Manager IFRC East Africa office, Nairobi	Point of contact: Apollinaire Karamaga, Secretary General, Rwanda Red Cross Society.
Appeal budget: CHF 549,020	DREF allocated: CHF 58,190
Disaster Relief Emergency Fund (DREF) allocated: CHF 58,190	
N° of people being assisted: 10,000 people: 7,500 people (1500 households) within the refugee camps and 2,500 people (500 households) within Munini host community around Mahama camp.	
Host National Society presence (n° of volunteers, staff, branches): Rwanda Red Cross Society - 80 volunteers, six staff, and six National Disaster Response Team members.	
Red Cross Red Crescent Movement partners actively involved in the operation: Belgian Red Cross, Danish Red Cross, International Federation of Red Cross and Red Crescent Societies and International Committee of the Red Cross.	
Other partner organizations actively involved in the operation: ADRA, Africa Humanitarian Action, American Refugee Committee, Care International, Ministry of Disaster Management and Refugees Affairs (MIDMAR), Ministry of Health, PAJER Plan Rwanda, Save the Children, United Nations High Commissioner for Refugees, United Nations Population Fund, World Food Programme, World Health Organization, and World Vision.	

Appeal History:

- This [Emergency Appeal](#) was launched on 18 September 2015 for CHF **549,020 Swiss francs** to enable the IFRC to support the Rwanda Red Cross Society (RRCS) to respond to the health, hygiene and PSS conditions of 7,500 Burundi Refugees (1,500 families) living in Mahama camp and to address the hygiene, food security and violence prevention needs of 2,500 members (500 families) of the host community of Munini surrounding the Mahama camp.
- **Disaster Relief Emergency Fund (DREF):** CHF 58,190 was initially allocated from the Federation's DREF to support the national society to start up the operations by meeting immediate needs of affected people.
- This update provides information regarding the first 15 days of the operation since the launch.

The IFRC, on behalf of the Rwanda Red Cross, would like to encourage other partners to consider supporting the Appeal to enable RRCS provide assistance to the targeted beneficiaries through the planned activities as detailed in the [Emergency Plan of Action \(EPoA\)](#).

[<click here to view the contact details >](#)

Summary:

It has been more than four months since election violence in Burundi resulted in a number of casualties in the capital of Bujumbura. More than 160,000 people have fled Burundi, seeking safety in the neighbouring countries of the Democratic Republic of the Congo, Rwanda, Tanzania, Uganda and Zambia. Since April 2015, over 77,000 Burundi nationals have sought refuge in Rwanda due to tension and violence occurring before and after presidential elections held in Burundi in July 2015. On 25 April 2015, Burundi's incumbent president announced he would stand for a third term in the elections which took place 21 July 2015; he was re-elected and sworn in on 24 July 2015.

Mahama camp is located in Rwanda's Eastern Province in Kirehe District (270 km from Kigali), and serves as the only permanent camp hosting Burundian refugees in Rwanda. Three smaller transit camps and dozens of entry points host incoming refugees for a few days at a time, until they can be transported to Mahama. There are over 47,000 refugees in Mahama camp alone. Throughout August there were approximately 150 Burundian refugees arriving in Rwanda per day. There remain ongoing and urgent needs within the entry points, transit camps, and Mahama camp, particularly in hygiene promotion, psychosocial support, beneficiary communication, first aid, protection, and environmental protection. The entry points and transit centers have minimal support from humanitarian agencies.

According to UNHCR, there are also more than 20,000 urban refugees living in Rwanda's capital city Kigali, and other urban centers in eastern Rwanda. All of these refugees have been registered at a designated venue by UNHCR, and the majority are renting houses and rooms within host communities. There are increasing needs amongst the urban refugee population, as they struggle to access markets, healthcare, education and affordable housing. UNHCR recently announced its commitment to begin offering health and education services to this community.

A third group in need, identified by Rwandan Red Cross Society (RRCS), is the host community surrounding Mahama camp, consisting of six small villages which make up Munini (population 5,923 people). Following a needs assessment within this community, RRCS have identified urgent needs in food security, water and sanitation, and violence prevention (considering potential conflict between the host and refugee communities). There are no agencies currently supporting this Munini host community.

Due to overcrowded living conditions within Mahama camp and the Munini host community (which the Mahama refugees visit daily for supplies and entertainment), both groups are also at high risk of waterborne diseases and acute water diarrhoea (cholera) outbreaks. With the influx of refugees in recent months, the resources within Munini are depleted as the refugees and host community compete for water, firewood, and market supplies. This has led to minor incidents of conflict between the two groups, but has the potential to worsen if not addressed quickly. The initial 50ha of land that the Rwanda Government had allocated to UNHCR had the capacity to host about 25,000 people has already been exceeded with the main camp population recorded at over 44,000 people. An additional 150ha was recently allocated by the government to the UNHCR to expand Mahama camp, and UNHCR is now beginning to build semi-permanent houses, schools and other infrastructure for the refugees, who are expected to stay in Rwanda for many months to come. It is estimated that approximately 70 per cent of the Burundian refugees who arrived in Rwanda in the past five months are women and girls, while an estimated 30 per cent of the total is children under 18 years who are unaccompanied. According to American Refugee Committee (ARC), 20 per cent of all child refugees are said to have a deteriorating nutritional status including cases of malnutrition and anaemia in total, there are more than 25,516 children among the Burundian refugee population in Rwanda.

Coordination and partnerships

On 8 May 2015, the International Federation of Red Cross and Red Crescent Societies (IFRC) released CHF 244,580 to support RRCS respond to the needs of the refugees located in camp settings and at entry points, for a period of three months (until 8 August 2015, which was later extended until 15 September 2015). Activities planned within the [DREF operation](#) were supplemented with bilateral funds from the Belgian Red Cross, Danish Red Cross and Spanish Red Cross. The overall strategy of RRCS during this period was to focus on the most urgent needs of incoming refugees from their point of arrival in Rwanda (at dozens of entry points), through the transit camps, and within the permanent camp of Mahama. In the initial months of the response, very few humanitarian actors were offering services in the entry points and transit camps, so RRCS served a crucial role in those areas. Activities focused on first aid, NFI distributions, hygiene promotion, psychosocial support, and family reunification (RFL).

From September through to December 2015, the Belgian, Danish and Spanish Red Cross Societies are providing bilateral consortium funding to RRCS to continue and somewhat expand the activities included in the DREF operation. RRCS will continue working in the entry points, transit camps, and Mahama camp to provide services in areas of: Health and Care (first aid, psychosocial support, violence prevention); Water, Sanitation and Hygiene Promotion, Shelter and Settlements, as well as the addition of Food Security, Nutrition and Livelihoods, and a component of Disaster Preparedness and Risk Reduction. Given that the needs of refugees will be met by this consortium funding for the next four months, RRCS is seeking funds through this EA to meet some of the urgent needs of the Munini host community for the next 10 months (September 2015 – June 2016), and to continue supporting the Mahama camp activities from January to June 2016.

RRCS strategic focus on Mahama camp and the Munini host community is logical for a number of reasons. First, RRCS has confirmed for itself (through assessments and observation) that there are persistent and urgent needs in both communities. Since the two communities neighbour each other, this will allow RRCS to concentrate its resources in a single geographic area, and indeed a number of these resources (HR, Logistics, equipment, etc.) will be used for activities in both communities. This resource sharing and cost efficiency will allow RRCS to maximize its impact for a longer period, which is crucial to the need for medium term programming. Since RRCS invested in much of the required response equipment and volunteer training during the DREF period, the remaining activities (if concentrated in the Mahama and surrounding area) are not so costly. The UNHCR also anticipates closing all of the transit centres in coming months, under the assumption that most refugees will be centralized in Mahama by the end of 2015. While there are certainly needs amongst the urban refugee population in Kigali and other cities, RRCS strategic focus will be the Mahama camp and the Munini host community for the next 10 months.

Operational implementation

Overview

Since the Appeal was issued on September 18, the IFRC and RRCS have been preparing for the launch of new activities, as well as the continuation of ongoing ones. The Letter of Agreement (MoU between IFRC and RRCS) has been signed by both parties, and the initial DREF loan transfer will be sent to RRCS by October 2 to allow activities to continue. The recruitment process for an Operations Manager has also been launched and interviews will be conducted the week of October 5. Planning is also underway for a detailed needs assessment, including an analysis of CTP options, within the host Munini community and wider Mahama camp. A ToR for this assessment will be finalized the week of October 5, and planning is being led by RRCS with support from IFRC and the Danish Red Cross.

Planned interventions	Implementation (%)
Quality programming /Areas common to all sectors	
Outcome 1: Continuous assessment, planning, analysis and evaluation are used to inform the design and implementation of the operation.	5%
Output 1.1: Comprehensive monitoring and reporting framework and system for ensuring accountability to beneficiaries established.	5%
Activities Planned <ul style="list-style-type: none"> • NHQ monitoring missions (of activities planned within the EPoA) • Conduct CTP and market assessment (in the host community) • Conduct coordination meetings at branch level • Final external evaluation (external) and internal lessons learned workshop 	
Health and care	
Outcome 1: Immediate risks to the health and well-being of the refugee camp and host communities are reduced over a period of 10 months.	0%
Output 1.1: Target population provided with access to first aid and psychosocial support services; (September 2015 – June 2016); with focus on Mahama camp (Target: 7,500 people / 1,500 families)	0%
Activities Planned <ul style="list-style-type: none"> • Installation of additional equipment in the first aid and psychosocial support tents • Replenishment of first aid kits (Target: Eight kits) • Provide first aid services; and referral transport by motorbike (from Mahama to Munini host community) • Refresher training of volunteers on psychosocial support (Target: 30 volunteers) • Procure psychosocial support kits (Target: Six kits) • Provide psychosocial support to incoming refugees into Mahama camps • Conduct psychosocial support activities (joint sports and cultural activities) for primary school aged children (from both the Mahama and Munini communities) • Conduct community based health sensitization sessions (including information on nutrition, family planning and GBV information) through use of mobile cinema and an information/listening desk (Target: 48 sessions) 	
Output 1.2: Target population provided with community based health sensitization; with focus on Munini host community (Target: 2,500 people / 500 families)	
Activities Planned <ul style="list-style-type: none"> • Training of volunteers on community based health sensitization (cholera, diarrhoea, hygiene and malaria) (Target: 35 volunteers) • Conduct community based health sensitization sessions (providing including nutrition, family planning and GBV information) through use of mobile cinema (Target: 10 sessions / one per month) • Facilitate transportation of volunteers between Mahama and Munini host 	

<p>community to provide first aid /referral services</p> <ul style="list-style-type: none"> Conduct psychosocial support activities (joint sports and cultural activities) for primary school aged children (from both the Mahama and Munini communities) 	
Water, sanitation and hygiene promotion	
Outcome 1: Immediate risks of waterborne and water related diseases to the refugee camp and host communities are reduced over 10 months	0%
<p>Output 1.1: Target population provided with access to safe drinking water supply in accordance with SPHERE and WHO standards; with focus on Munini host community (Target: 2,500 people / 500 families)</p> <p>Activities Planned</p> <ul style="list-style-type: none"> Conduct repair to host community water supply pipeline system <p>Output 1.2: Target population provided with adequate environmental sanitation facilities; with focus on Munini host community (Target: 2,500 people / 500 families)</p> <p>Activities Planned</p> <ul style="list-style-type: none"> Construction of community pit latrine (Target: one block / 14 latrines) Production/distribution of SanPlats (Target: 500 SanPlats) Procure personal protective equipment (for latrine cleaning) (Target: Two sets) <p>Output 1.3: Target population provided with hygiene promotion activities, which meet SPHERE standards; with focus on Munini host community (Target: 2,500 people / 500 families)</p> <p>Activities Planned</p> <ul style="list-style-type: none"> Refresher training of volunteers on PHASTER (Target: 20 volunteers) Conduct household level hygiene promotion using PHASTER methodology (Target: 40 sessions) Production/distribution of IEC materials (Target: Three kits) <p>Output 1.4: Target population provided with hygiene promotion activities, which meet SPHERE standards; (May – August 2015, and January – June 2016); with focus on Mahama camp (Target: 7,500 people / 1,500 families).</p> <p>Activities planned</p> <ul style="list-style-type: none"> Conduct radio broadcasts (Target: 10 months) Conduct hygiene promotion through use of mobile cinema (Target: 48 sessions) 	0%
Shelter and settlements	
Outcome 1: Immediate shelter and settlement needs of the refugee communities are met over a period of 10 months	0%
<p>Output 1.1: Target population is provided with basic Non-Food Items; with focus on Mahama camp (Target: 7,500 people / 1,500 families).</p> <p>Activities Planned</p> <ul style="list-style-type: none"> Distribution of NFIs (family kits: basins, blankets, mats, soap etc.) to families not targeted through the initial DREF operation (Target: 1,500 families) Distribution of clothing (kitenge for women and assorted for men and children to families not targeted in 2015 (Target: 1,500 families) Distribution of MHM kits to women (Target: 500 women) 	0%
Food security, nutrition, and livelihoods	
Outcome 1: Immediate risks of food insecurity, malnutrition and lost livelihoods to the refugee camp and host communities are reduced over 10 months	0%
<p>Output 1.1: Target population provided with access to nutritious food and better understanding of environmental protection; with focus on Mahama camp (Target: 7,500 people / 1,500 families).</p>	0%

<p>Activities Planned</p> <ul style="list-style-type: none"> • Conduct sensitization on methods to encourage environmental protection and food security (Target: 500 families) • Establish vegetable gardens (Target: 500 gardens) • Establish nursery beds (of forest trees) (Target: 10 nurseries) <p>Output 1.2: Target population provided with access to nutritious food and better understanding of environmental protection; with focus on Munini host community (Target: 2,500 people / 500 households)</p> <p>Activities Planned</p> <ul style="list-style-type: none"> • Training of volunteers on CTP (Target: 10 volunteers and six staff) • Refresher training of volunteers on CTP (Target: 10 volunteers and six staff) • Procure equipment for CTP (hardware and software) • Procure agricultural seeds and tools (Target: 500 families x eight months) – pending CTP and market assessment • Establish vegetable gardens (Target: 500 gardens) • Community sessions to establish nursery beds (of mixed trees - fruit and forest trees) (Target: 12 sessions) • Training of host community families on use of energy saving sources (use of local materials to produce briquettes) (Target: 500 families) • Production/distribution of fuel efficient stoves (Target: 500 fuel efficient stoves) 	
Disaster preparedness and risk reduction	
<p>Outcome 1: Improve capacity of the Rwanda Red Cross Society in the areas of disaster preparedness and response in the refugee camp and host communities</p>	0%
<p>Output 1.1: Disaster preparedness and risk reduction activities carried out to support effective implementation of the operation; and inform medium/long term planning.</p> <p>Activities Planned</p> <ul style="list-style-type: none"> • Develop contingency medium/long term contingency plan for the response to Burundi refugee situation in Rwanda beyond the timeframe of the Emergency Appeal 	0%

Contact information

For further information specifically related to this operation please contact:

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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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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.