

<b>DREF No.</b> MDRCG015	<b>GLIDE No.</b>
<b>EPoA Update No. 1; date of issue:</b> 11 September 2018	<b>Timeframe covered by this update:</b> 13 June to 05 September 2018
<b>Operation start date:</b> 13 June 2018	<b>Operation timeframe:</b> 4 months (new end date: 13 October 2018)
<b>Overall budget:</b> CHF 83,438	<b>Initial amount allocated:</b> CHF 83,438
<b>Number of people to be assisted:</b> 50,000 people (10,000 households)	
<b>Red Cross and Red Crescent Movement partners actively involved in the operation:</b> CRC, IFRC	
<b>Other partner organizations actively involved in the operation:</b> Government (MoH), WHO, UNICEF	

### Summary of major revisions made to emergency plan of action:

Following difficulties encountered on the ground in some very isolated riparian zones with irregular nautical transport, community sensitizations have not been conducted in these areas. As such, the Congolese Red Cross is requesting a no-cost one-month timeframe extension (new end date: 13 October 2018) to be able to complete these necessary sensitization sessions, especially as these communities are in localities bordering DRC.

Since the above-mentioned activities have not been held yet, this has delayed the lessons learned workshop, initially planned to hold on 3 September 2018. The extension will allow proper completion of activities and holding of the lessons learned workshop.

## A. SITUATION ANALYSIS

### Description of the disaster

On Tuesday, 24 July 2018, DRC's Minister of Public Health, Oly Ilunga, declared the end of the Ebola virus disease (EVD) outbreak that had been plaguing the Equateur Province since May. No new confirmed case of EVD has been reported in this province in the 21 days of monitoring since the last case was found out. Indeed, the last confirmed Ebola patient had been recorded on 6 June and left the Bikoro Treatment Center in the DRC on 12 June 2018.

As a recap of the situation, on 3rd May 2018, more than 56 suspected, probable and confirmed cases of Ebola Virus Disease (EVD) were reported in the Equateur Province of the Democratic Republic of Congo (DRC). As of 7 June, there were a total of 59 confirmed, probable and suspected Ebola cases, of which 27 people had died. The World health organization (WHO) had then declared an EVD outbreak on 8 May in the Bikoro health zone of Equateur province in DRC and some nine countries bordering the affected country were alerted and highlighted as being at-risk of a potential spread of said outbreak. Of these nine countries, the Republic of Congo (RoC) was then mentioned amongst the priority countries, where WHO and the Ministry of Health (MoH) engaged in preventive actions to reduce the impact of an eventual outbreak in the country.



*Demonstration of handwashing technique by volunteers in zones devoid of standard device ©Congo RC*

On 13 June 2018, the International Federation of Red Cross and Red Crescent Societies (IFRC) through its Disaster Relief Emergency Fund (DREF), allocated a CHF 83,438 grant to fund a three months long EVD preparedness operation to contribute to avoiding the spread of the EVD into the Republic of Congo by conducting preparedness and prevention activities in at-risk localities sharing border with Equateur province, epicentre of the 9th EVD outbreak in DRC.

## Summary of current response

### Overview of Host National Society

Through this DREF operation, the Congolese Red Cross has been able to implement the below, with support from IFRC Yaoundé CCST office:

- Hold contact meetings to unfold the project to NS staffs and partners;
- Develop and share the action plan and the terms of reference for staff involved and volunteers;
- Identify 55volunteers dedicated to training in the four targeted divisions
- Complete the procurement process (prepare the call for tender for purchasing planned NFIs, selection of suppliers) in collaboration with two IFRC logisticians
- Setting up operational teams
- Sensitization of households on the disease (see Table 1 below).
- Monitoring of activities with RDRT in Brazzaville
- Monitoring Activities monitoring mission
- Organize training sessions for volunteers and supervisors in Brazzaville (Potopoto, Talangai, Bakongo and Makelekele), then at NGO, Plateaux Divisions ( Mossaka, Loukoléla, Makotipoko and Bouemba) and finally in Impfondo, ( *Dongou and Liranga* ) (see Table 2 below)
- Purchase of media and equipment provided for in the DREF

The below table shows data collected from the sensitization sessions and gotten thanks to two strategies used:

#### 1. Door-to-door:

- Number of households visited: 4,994
- Number of people reached through sensitization in households: 24,955

#### 2. Discussion groups:

- Number of people sensitized during talk group sessions: 25,527

To note, sensitization through discussion groups was not programmed to be used as a strategy in the DREF operation; hence, the data is not recorded in this operation update but kept with the NS.

**Table 1: Partial results of social mobilization (door-to-door), megaphone and discussion groups**

Divisions	Districts	Number of households visited P/P	Total number of people reached in households	Number of people sensitized / talk group sessions				Number of people sensitized per discussion group	Number of people referred to integrated health centres for fever
				Men	Women	Boys	Girls		
Likouala	Liranga	825	4,125	250	312	225	351	1,138	0
	Dongou	532	2,660	213	297	123	205	838	0
<b>Total Likouala</b>		<b>1,357</b>	<b>6,785</b>	<b>463</b>	<b>609</b>	<b>348</b>	<b>556</b>	<b>1,976</b>	<b>0</b>
Cuvette	Mossaka	1,050	5,250	780	1,485	1,033	1,950	5,248	0
	Loukolela	410	2,050	345	414	601	690	2,050	0
<b>Total Cuvette</b>		<b>1,460</b>	<b>7,300</b>	<b>1,125</b>	<b>1,899</b>	<b>1,634</b>	<b>2,640</b>	<b>7,298</b>	<b>0</b>
Plateaux	Makotipoko	454	2,270	212	301	215	150	878	0
	Bouemba	-	-	-	-	-	-	-	0
<b>Total Plateaux</b>		<b>454</b>	<b>2,270</b>	<b>212</b>	<b>301</b>	<b>215</b>	<b>150</b>	<b>878</b>	<b>0</b>
Brazzaville	Potopoto (Beach & River port)	358	1,790	3,735	2,861	935	640	8,171	0

(Riparian neighborhoods)	Talangai (Yoro)	630	3,150	719	1014	745	693	3,171	0
	Makelekele (Main bleue)	375	1,875	735	763	320	364	2,202	0
	Bakongo	360	1,800	502	613	360	356	1,831	0
<b>Total Brazzaville</b>		<b>1,723</b>	<b>15,915</b>	<b>5,691</b>	<b>5,251</b>	<b>2,360</b>	<b>2,053</b>	<b>15,375</b>	<b>0</b>
<b>Grand total</b>		<b>4,994</b>	<b>24,955</b>	<b>7,491</b>	<b>8,060</b>	<b>4,557</b>	<b>5,399</b>	<b>25,527</b>	<b>0</b>

**Table 2: Summary table of localities, number of volunteers and supervisors selected, trained and deployed by CRC**

Divisions	Districts	Number of volunteers		Number of supervisors		Total of participants	
		Planned	Achieved	Planned	Achieved	Planned	Achieved
Likouala	Liranga	10	10	1	1	11	11
	Dongou	5	5	1	1	6	6
<b>Total for Likouala</b>		<b>15</b>	<b>15</b>	<b>2</b>	<b>2</b>	<b>17</b>	<b>17</b>
Cuvette	Mossaka	3	3	1	1	4	4
	Loukolela	3	3	1	1	4	4
<b>Total Cuvette</b>		<b>6</b>	<b>6</b>	<b>2</b>	<b>2</b>	<b>8</b>	<b>8</b>
Plateaux	Makotipoko	4	4	1	1	5	5
	Bouemba	4	0	1	1	5	1
<b>Total Plateaux</b>		<b>8</b>	<b>4</b>	<b>2</b>	<b>2</b>	<b>10</b>	<b>6</b>
Brazzaville (Entry points)	Potopoto	8	8	1	1	9	9
	Talangai	8	8			8	8
	Makelekele	5	5	1	1	6	6
	Bakongo	5	5	1	1	5	6
<b>Total Brazzaville</b>		<b>26</b>	<b>26</b>	<b>2</b>	<b>3</b>	<b>28</b>	<b>28</b>
<b>Grand total</b>		<b>55</b>	<b>51</b>	<b>8</b>	<b>9</b>	<b>63</b>	<b>59</b>

#### Overview of Red Cross Red Crescent Movement in the country

The IFRC Central Africa country cluster support team (CCST) based in Yaoundé provided support through this DREF operation, which allowed for the deployment of a RDRT member, and CCST staff (Logistics, PMER, finance) for support.

#### Overview of non-RCRC actors in country

See [EPoA](#) published.

### Needs analysis and scenario planning

#### Needs analysis

The main needs identified by CRC are same as planned in the [EPoA](#) and include the sensitization of the population, in order to reduce to zero, the risks of a possible importation of the EVD epidemic into Congo from the borders of neighbouring DRC.

In addition, an EVD alert was reported on 9 August 2018, in the locality of Mboki, located about 1,000 km in the East of the Central African Republic -- the tests results, conducted by the *Institut Pasteur* in Bangui, were fortunately negative. That said, it only reinforces the fact that although the 9<sup>th</sup> EVD outbreak has been declared over, risks still exist, thus the need for all planned communities to be sensitized.

#### Operational Risk Assessment

Please, refer to [EPoA](#).


### B. OPERATIONAL STRATEGY

#### Proposed strategy

Contribute to avoiding the spread of the EVD in the republic of Congo by conducting EVD preparedness and prevention activities in at-risk localities sharing border with Equateur province, epicentre of the epidemic in DRC. This will be done

in line with recommendations and directions provided by WHO and the MoH in Republic of Congo and following same strategy elaborated in the [Emergency Plan of Action](#).

### C. DETAILED OPERATIONAL PLAN

 <p><b>Health</b></p> <p><b>People targeted: 50,000</b></p> <p><b>Number of people reached: 24,955</b></p> <ul style="list-style-type: none"> <li>- Men: 7,491</li> <li>- Women: 8,060</li> <li>- Boys: 4,557</li> <li>- Girls: 5,399</li> </ul>		
<b>Health Outcome 1: Communities living in localities at risk (Likouala, Central Cuvette and Plateaux) are informed about EVD and observe good practices with regard to Ebola prevention and detection measures.</b>		
<b>Indicators</b>	<b>Target</b>	<b>Actual</b>
Number of people reached with Ebola awareness messages	50,000	24,955
<b>Health output 1.1: The risks of EVD importation are reduced in border areas thanks to the involvement of CRC's volunteers in social mobilization and community-based surveillance</b>		
<b>Indicators:</b>	<b>Target</b>	<b>Actual</b>
Number of households visited	10,000	4,994
Number of people reached with Ebola virus sensitization messages	50,000	24,955
Number of volunteers trained and deployed for community surveillance	55 volunteers and 8 supervisors	51 volunteers and 9 supervisors
Number of supervisors trained and deployed	8	9
Number of fever cases referred to CSI (health centres)	100%	0%
<b>Health Output 1.3: Community-based prevention of EVD and health promotion are provided to the target population</b>		
<b>Indicators:</b>	<b>Target</b>	<b>Actual</b>
Number of people reached with Ebola awareness messages	50,000	24,955
Number of social mobilization activities organized	6	10
Number of volunteers deployed for field monitoring	8	9
Number of contact meetings held with local leaders in 9 selected zones	16	12
<b>Progress towards outcomes</b>		
<ul style="list-style-type: none"> <li>• The NS attended 12 out of the planned 16 meetings and held 3 face to face meetings with strategic partners such as the MoH, WHO and UNICEF.</li> <li>• As at now, to achieve the set objectives, three (3) training sessions have been conducted for 51 volunteers and 8 supervisors from the four (4) targeted divisions. The sensitization of communities also started and is going on in the 4 divisions. Some localities like Bouemba could not have activities implemented because the local committee is not operational.</li> <li>• A total of 51 volunteers were trained instead of the planned 55, because the locality of Bouemba does not have a functional local committee as indicated above. As such, the training for four (4) volunteers supposed to be held for this local committee did not take place. On the other hand, nine (9) supervisors were trained instead of the planned eight (8) because the workload in Brazzaville was huge.</li> <li>• The plan was for three (3) awareness sessions per week for two weeks; however, this was revised to five (5) sessions for the two weeks, as per field needs.</li> <li>• The budget restriction with regard to training sessions for volunteers and supervisors was not sufficient to cover all the 4 divisions of Congo. As such, a grouping of volunteers and supervisors of Plateaux and Cuvette Divisions in NGO district, gateway city of these two divisions, was chosen to host the training session. Thus, the budget line for the training of volunteers has undergone a consensual adjustment with the support of RDRT and IFRC Yaoundé CCST Disaster Coordinator.</li> <li>• The NS has been facing difficulties in accessing some remote areas among the selected localities to reach the number of households / people targeted with awareness on Ebola. As such, the NS is requesting for a no-cost timeframe extension of one month to be able to conduct awareness in all planned localities. This</li> </ul>		

extension will also allow supervision of activities launched in these localities and to recover the invoices for the working advances from the local committees.

- Looking at the remaining period of implementation and the difficulties in reaching the more isolated localities outside Brazzaville, an amendment of the operational action plan was envisaged to comply with the 24 days of sensitization. As such, instead of 3 days a week, volunteers were required to work 5 days a week for 5 weeks.
- During implementation, the NS noted good community support for the operation, the involvement of local authorities and partners, availability of volunteers, the effective support of IFRC in the implementation of activities, which helped them implement most of the planned activities with ease. Unfortunately, difficult and expensive means of transport to riparian areas (Plateaux, Cuvette and Likouala Divisions) and the non-transfer of funds to be paid to suppliers who delivered the materials and inputs (logistics) is to be deplored.
- Given the huge difficulties the NS is facing in accessing the riparian localities, the NS is requesting support for the purchase of a means of transport (engine boat or canoe) for its local headquarters in Mossaka and Loukolela.

<b>Outcome S2.1: Effective and coordinated international disaster response is ensured</b>		
<b>Indicators</b>	<b>Target</b>	<b>Actual</b>
Number of RDRT members deployed for the operation	1	1
<b>Output S2.1.4: Deployment of surge capacity</b>		
<b>Indicators</b>	<b>Target</b>	<b>Actual</b>
Number of volunteers deployed for the operation	63 (55 volunteers and 8 supervisors) in 10 districts and 4 divisions	59 (51 volunteers and 8 supervisor) in 09 districts and 4 divisions
Number of NS staff deployed for the operation	18	11
<b>Progress towards outcomes</b>		
<ul style="list-style-type: none"> <li>• The deployed RDRT had contacts with the MoH Directorate for Diseases (DGLM) and other partners to explain IFRC support to the NS.</li> <li>• IFRC Yaoundé CCST deployed four (4) to support CRC in implementing this operation including 2 Logisticians, 1 PMER Officer, 1 Finance Officer. During these deployments, meetings 3 meetings were organized with the NS to refocus the operation.</li> <li>• Of the planned 63 persons (55 volunteers and 8 supervisors) planned to be deployed in 10 districts and 4 divisions, only 59 persons (51 volunteers and 8 supervisor) in 09 districts and 4 divisions. Aside from the Bouemba district (in the Plateaux division) which was not covered because the Red Cross local committee is not operational, all other planned districts were covered. As such, the planned training for volunteers in this district was not held.</li> </ul>		

<b>Outcome S3.1: The IFRC secretariat, together with National Societies uses their unique position to influence decisions at local, national and international levels that affect the most vulnerable.</b>		
<b>Indicators</b>	<b>Target</b>	<b>Actual</b>
Number of communication materials produced (leaflets, posters, inputs and other acquired devices)	1 lot	1 lot
<b>Output S3.1.1: IFRC and NS are visible, trusted and effective advocates on humanitarian issues</b>		
<b>Indicators</b>	<b>Target</b>	<b>Actual</b>
Number of radio spots produced and broadcast (news)	1	2
Number of translation works produced	3	2
<b>Output S3.1.2: IFRC produces high-quality research and evaluation that informs advocacy, resource mobilization and programming.</b>		
<b>Indicators</b>	<b>Target</b>	<b>Actual</b>

Number of lessons-learned workshops organised	1	0
<b>Progress towards outcomes</b>		
As awareness activities are still underway, the lessons learned workshop, initially planned to be held on 3 September 2018 has been postponed to the first week of October, when hopefully, awareness activities would have been conducted in all targeted localities to allow the participation of all the supervisors from the 8 localities selected.		

**Table 3: Number of items purchased and distributed in targeted localities**

No.	Designation:	Quantity	Unit
1	YDC-1 FOLDING STRETCHER	10	Item
2	Printing of leaflets on 02-sided coated paper, 170 grs in A5 format	700	Item
3	Four-color printing of posters on 01 face coated paper, 170 grs in A2 format	300	Item
4	Household soap 200g	500	Item
5	Waterproof (jacket and pants)	50	Item
6	Rubber boots	50	Item
7	Sprayer (15 litres)	15	Item
8	Rubber gloves	50	Pair
9	Megaphone and battery	10	Item
10	Mufflers	50	Item
11	Hand sanitizer	500	Item
12	20 litre plastic bucket with cover	50	Item
13	Calcium Hypochlorite (45 Kg)	5	Buckets
14	Production of body numbers + flocking the logo of the Congolese Red Cross (front and back)	83	Item
15	Production of Tee-shirts + flocking the logo of the Congolese Red Cross (front) and communication message (back)	82	Item
16	Emergency kit	14	Item
<b>Content of the kit</b>	100 g absorbent cotton	14	Packet
	40*40 sterile compress bandage	14	Packet
	Medium Velpeau bandage	14	Packet
	Yellow betadine, 125 ml	14	Bottle
	Cambric tape	14	Item
	General purpose soap	14	Item
	A5 note pad	14	Item
	90° denatured alcohol	14	Bottle
	Pair of 12 cm surgical scissors	14	Item
	Dressing cutter	14	Item
	15 cm x 5 m perforated adhesive tape	14	Packet
	12 cm surgical chisel	14	Item
	Paracetamol 500 mg	14	Pack
	Maalox	14	Sachet
	Efferalgan 1g	14	Pack
HB pencil	14	Item	
Kit or bag	14	Item	

#### **D. BUDGET**

The overall budget for this operation remains unchanged from the amount allocated at the launch of the operation, that is CHF 83,438.

## Reference documents



Click here for:

- **Previous appeals and updates**
- **Emergency Plan of Action (EPoA)**

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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 (NGO's) in **Disaster Relief and the Humanitarian Charter and Minimum Standards in Humanitarian 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.

The IFRC's work is guided by Strategy 2020 which puts forward three strategic aims:



**Save lives,**  
protect livelihoods,  
and strengthen recovery  
from disaster and crises.



Enable **healthy**  
and **safe** living.



Promote **social inclusion**  
and a culture of  
**non-violence** and **peace**.