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# Revised Emergency appeal

## Uganda: Population Movement

 International Federation  
of Red Cross and Red Crescent Societies

(Revised) Appeal n° MDRUG040	18,000 people to be assisted	Appeal launched January 2018
Glide n° OT-2018-000021-UGA	206,305 Swiss francs DREF allocated	Revision n° 1 issued September 2018 Revision n° 2 issued December 2018
	3,200,000 Swiss francs current Appeal funding requirements	Appeal ends June 30, 2019
	2,222,000 Swiss francs funding gap	(If Appeal extended) Extended 6 months

This revised Emergency Appeal seeks a total of 3.2 million Swiss francs (increased from 2.4 million Swiss francs), to enable the International Federation of Red Cross and Red Crescent Societies (IFRC) to continue supporting the Uganda Red Cross Society (URCS) to deliver assistance and support for 18,000 people for 18 months (extended from 12 months), with a focus on the following areas of focus: Shelter; Health; Water, Sanitation and Hygiene promotion (WASH) and Protection, Gender and Inclusion (PGI).

Due to continued influx of refugees throughout 2018, it has been challenging for partners to design and implement longer term solutions, including water supply. The revision will give the IFRC and the URCS the time required to handover to other actors/donors and to phase out the water treatment activity. Implementation of some activities was delayed due to funding gap and extra time and resources are therefore needed to finalize all planned activities.

This revised Emergency Appeal results in a funding gap of 2.2 million Swiss francs. The budget has been increased due to the extended water treatment activity, the change in implementation modality of some of the activities (including shelter design) and a timeframe extension. An extension is requested to continue the production of safe water for an additional six months and to finalize smooth implementation of all planned activities. The planned response reflects the current situation and information available at this time of the evolving context. Details are available in the Emergency

## The disaster and the Red Cross Red Crescent response to date

**December 2017:** A period of inter-communal unrest and conflict in the Democratic Republic of Congo (DRC) Ituri and North Kivu Provinces prompts mass displacements movements with people fleeing violence and human rights abuses and seeking shelter and assistance in neighboring Uganda. The refugees are being accommodated in Kyangwali and Kyaka II refugee settlements. With support from IFRC, the URCS is providing assistance and scaling up its efforts to respond to the humanitarian needs of the affected population.

**January 2018:** 206,305 Swiss francs allocated from the IFRC's Disaster Relief Emergency Fund (DREF) to respond to the humanitarian needs.

**February 2018:** The number of refugees entering Uganda escalated significantly, with on average 3,875 new arrivals per day. IFRC and URCS conduct a joint mission in the Mid-Western region to assess needs.

**February 2018:** A cholera outbreak was declared, causing 45 deaths. URCS rapidly mobilized a Kit5 and mobilized volunteers to conduct hygiene promotion.



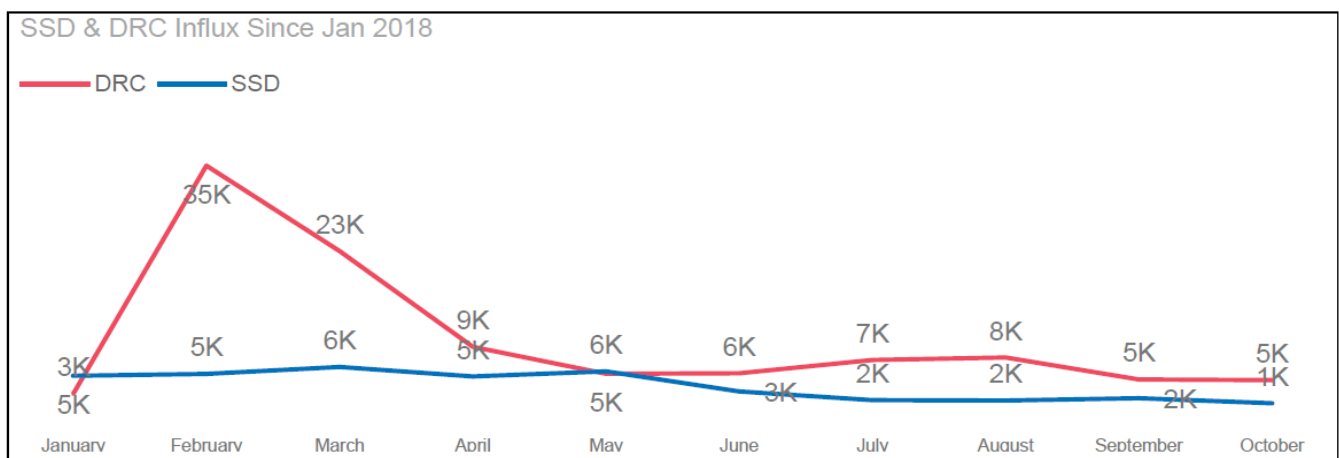
Picture: URCS Water Treatment Unit in Kyangwali Refugee Settlement

- **March 2018:** IFRC Surge Capacity deployed a Field Assessment and Coordination Team leader (FACT), to support the development of the Emergency Appeal, identify gaps, mobilize resources, and support URCS and IFRC with in country coordination. The Netherlands Red Cross deployed WASH technical surge support.
- **March 2018:** Responding to the humanitarian needs and based on a request from the National Society an Emergency Appeal was launched for 1,930,176 Swiss francs for 18,000 people.
- **May 2018:** The Uganda Refugee Response Plan (RRP) partners agree to revise the planning figure of expected number of Congolese refugees to arrive in Uganda in 2018, from 60,000 to 150,000 people.
- **August 2018:** According to the latest UNHCR Inter-Agency Emergency update on the DRC situation, dated 13 August 2018 the total number of Congolese refugees in Uganda as of June 30, 2018 is 288,766. Of this total number 99,447 people arrived between January and June 2018.
- **September 2018:** IFRC issues revised Appeal, revised to 2,382,533 Swiss francs and extended to 31 December 2018.
- **December 2018:** IFRC issues revised Appeal, revised to 3,201,596 Swiss francs and extended to 30 June 2019.

## The operational strategy

Between January 1 and 28 October 2018, 105,415 people from the Democratic Republic of Congo (DRC) arrived in Uganda, fleeing from interethnic violence that erupted in the Ituri and North Kivu Provinces of the DRC. The main refugee hosting districts receiving DRC refugees in Uganda are: Isingiro (106,026 people), Kamwenge (64,088 people), Kyegegwa (66,896 people) and Hoima (76,717 people). The latest hosts Kyagwali refugee's settlement were the Emergency Appeal is implemented. The influx of DRC refugees is characterized by fluctuations but remains constant since January 2018.

Figure 1: Influx from South Sudan versus DRC. OPM and UNCHR Influx Data, 28<sup>th</sup> October 2018.



Between January and March 2018, three new transit centres were opened in Kanungo (Matanga transit centre), Ntoroko (Kanara transit centre) and Hoima/Kikuube (Sebagoro transit centre) districts. Two reception centres at Kyaka II and Kyangwali were expanded to prevent congestion before the permanent settlements. Moreover, to provide adequate space to new comers six new settlement areas opened in Kyangwali and Kyaka II settlements. As of December 2018, discussions are ongoing on the possibility to open additional areas within the two refugees' settlements. RRP partners constructed 72 kilometres of access roads in Kyangwali and Kyaka II and rehabilitated another 43 kilometres of district roads in Hoima and Kyegegwa to ease relocation and settlement of new arrivals.

In May 2018, Refugee Response Plan (RRP) partners in Uganda agreed to revise the planning figure for 2018 upwards, from 60,000 to 150,000 Congolese refugees expected to arrive in Uganda in 2018, with a worst-case scenario of 300,000. As per UNCHR 2019-2010 RRP Population Planning Figures dated 16 August 2018, 45,000 more refugees from DRC were expected to arrive in Uganda before the end of 2018 and 100,000 to arrive in 2019, with an anticipated 10,000 refugees returning home in 2019. The expected new influx towards the end of the year

is directly linked with the tensions raised from the delay of scheduled 2016 and rescheduled 2017 presidential elections, organized for December 2018.

Refugees arrived in Uganda in 2018, as well as other refugees that have lived in the country for longer periods of time, face similar challenges dealing with the effects of being displaced from their homes, such as experiencing trauma, and attempting to rebuild their lives in refugee settlements. In addition to dealing with the psychological aspects of displacement, many have lost their livelihoods and are unable to afford basic necessities (food, non-food items (NFIs), education, health services, etc.) due to their lack of income. Other issues such as access to land and fertility of soil in the location of settlement present challenges for refugees. Aggravating the primary and secondary effects of the crises are underlying factors relating to Uganda's relatively weak economy and lacking public services (Join Multi Sector Needs Assessment – August 2018 – REACH). This situation coupled with the continue influx and the restricted funding and resources for the entire humanitarian community makes more difficult to move towards long term solutions. Therefore, lifesaving activities remain essential for an extended period of time.

The areas of intervention remain unchanged, however, due to developments in the field, the planning of the activities and/or the modality of implementation has been revised for the following activities:

- **The shelter component** could not be implemented due to a funding gap in the Emergency Appeal. In the field discussions have been ongoing with shelter partners on the design of the People with Special Needs (PNS) shelter. One PNS shelter design has been adopted by all partners, and through the revision the budget has been adapted to the new design. In addition, the budget was increased to: extend the construction of URCS basecamp to realize permanent latrines and bathing shelters; to include shelter strategy development in the EPoA.
- **Safe water production:** Although throughout 2018 OPM and WASH partners have worked towards the identification of alternative and sustainable water sources, such as drilling boreholes or motorizing wells, the volatility of ground water sources does not allow yet to completely phase out from the water trucking activity. Between May and July 2018 UNCHR and implementing partners equipped 4 motorized wells with the intention to realize a piping system which could have served different parts of the settlement. Unfortunately, the operation was unsuccessful due to low water table within Kyangwali refugee settlement. Therefore, URCS will continue the water production activity through the management of a Water Treatment Unit (WTU) for an additional 6 months, bringing to a total of 18 months the water treatment activity, initially conceived for 3 months only to respond to emergency needs. The aim continues to be to gradually decrease the quantity of water production, in line with the expected reduction in water trucking activity and the development of alternative sources of water supply.
- **Health:** URCS has launched an Ebola Virus Disease (EVD) preparedness DREF operation, after the announcement in August 2018 declaring the 10<sup>th</sup> Ebola outbreak in DRC, in the DRC districts neighbouring Uganda. Based on the countries risk profile WHO categorized Uganda as a Priority-1 country for preparedness actions. Due to the proximity and exposure to DRC and the high mobility between the DRC-Uganda border Uganda is considered by WHO at very high risk of an EVD outbreak. The district hosting Kyangwali refugee settlement, will be included in the EVD preparedness operation. URCS volunteers in Kyangwali refugee settlement, will receive trainings and conduct community sensitizations on EVD, complementing the EPoA of the EVD preparedness DREF. The volunteers contributing to EVD sensitization are the same volunteers conducting community activities as per the Appeal Emergency Plan of Action. The EVD training for volunteers will be funded through the DREF. In addition, as per current needs, 500 additional dignity kits will be procured.
- **Protection, Gender and Inclusion:** An additional training on Protection principles and Safe identification and referral for local authorities (e.g. Police, Local Council) has been added, as well as the procurement and distribution of 630 wonder bags. The wonder bags allow women to save time and energy while cooking, and save on expenditures for wood, fuel and charcoal. The experience in the West Nile demonstrated that utilization of wonder bags contributed to i.) addressing protection concern related to the practice of women to collect fire wood; ii.) to address environmental concerns related to the use of wood, fuel and charcoal, reducing their quantity.

With exception of the above-mentioned activities, all other activities have remained the same as per initial EPoA.

Throughout the implementation of the Emergency Appeal, IFRC and URCS will continue to ensure the involvement of community members in all activities. The Community Engagement and Accountability (CEA) approach is mainstreamed throughout the proposed action. CEA provides innovative approaches to effectively understand and engage with communities to better encourage safer and healthier practices and inform context specific response

options. With the right information, communities can make informed decisions, find answers to their problems and connect with others to organize their own response.

The recent establishment of an IFRC shelter profile in the Africa region, will strengthen IFRC technical support to the implementation of the Emergency Appeal shelter component. Through regional shelter profile, technical guidance will be provided to the construction of PSN shelter as well as in building URCS shelter capacity, the development of a shelter strategy for the National Society and trainings for staff and volunteers.

The IFRC Appeal implementation area is Kyangwali refugee settlement. All I activities that were planned for Ntoroko landing side are supported through a bilateral project with the Netherlands Red Cross and therefore removed from the EPoA through the first Appeal revision. At the onset of the Population movement response in January 2018, Austrian Red Cross supported the WTU in Kyangwali bilaterally, through the provision of chemicals and fuel.

### **Operational challenges**

- The UNHCR appeal for the Congolese refugee crisis is funded for only 10%. Therefore, partners have limited capacity and resources to stabilize existing programmes and embark upon longer-term sustainable approaches;
- The volatility of ground water sources, the technical difficulties of seeking sustainable boreholes, as well as the constant influx of refugees put constraints on the availability of water and the development of more sustainable solutions. UNHCR and OPM requested URCS to extend the management of the WTU for an additional period, maintaining the WTU at a minimum level of functionality while longer term solutions are being developed. Throughout the transition to alternative water sources, the WTU will continue to serve as a back-up system in case of water scarcity.
- The risk of EVD outbreak put further pressure on already overstretched stakeholders. URCS is doubling their efforts through community activities, including community sensitization EVD, and PSS activities to reduce the panic among community members. This brings additional pressure on volunteers engaged in health sessions, household level health surveillance activities and PSS activities;
- The EVD outbreak might trigger more people to flee to Uganda.
- Upcoming elections in DRC might trigger more people to flee to Uganda.
- Shelter actors delayed in taking a decision on the preferred design for PSN shelter constructions, delaying the implementation of the activity.
- The continued influx of refugees challenges the development of longer-term intervention modalities.

### **Operational progress to date**

#### **Shelter:**

- A shelter assessment was conducted to identify shelter needs for PSN;
- An internal assessment was conducted to assess URCS Shelter capacity and identify capacity building needs;
- IFRC shelter unit and URCS engaged further in bilateral discussions to define IFRC support to the design of a shelter strategy and identify capacity building needs.

#### **Health**

- Implementation of mobile cinema sessions (6/month) on Cholera, Ebola, immunization, HIV and personal hygiene;
- URCS is the main focal point in Kyangwali refugee settlement for EVD information. Volunteers provide information on EVD through community sensitization sessions;
- Conduct information sessions on EVD for volunteers already engaged in health promotion activities and surveillance to support EVD preparedness and readiness in case of an outbreak in the settlement;
- Collaboration with 10 community structures to support health prevention and early disease detection;
- Conduct PSS sessions for volunteers, staff and beneficiaries.



### WASH

- Manage the Water Treatment Unit (WTU) in Maratatu, providing 150-200 m<sup>3</sup>/day;
- Procurement and distribution of hygiene and sanitation NFIs;
- Conducting daily community mobilization and sensitizations sessions with IEC materials developed by the Ministry of water and WASH partners.

### PGI

- Identification and orientation of “Peer champions” and involvement in sensitization sessions as part of the Peer to Peer (P2P) youth programme;
- Identification of Protection Committee members;
- Conduct community discussions on gathering places to rehabilitate and equip to be used as CFS and WGSS;
- Support the development of and update existing referral pathways in cooperation with other partners.

### Operational support

- IFRC Operations Manager and Finance Delegate continue to support the operation in Uganda;
- Three National Disaster Response Team (NDRT) members DRTs have been deployed to support the operation and strengthen volunteer capacities in Health, Hygiene and Sanitation and Safe water production;
- A PMER plan has been developed, including a revision of the Emergency Appeal indicators, the development of KoboCollect monitoring tools and an indicator tracking table. Staff and volunteers were trained on KoboCollect and volunteers are currently collecting data systematically through the Kobo system;
- CEA mechanisms have been implemented, including focus group discussion, post distribution assessments and feedback mechanisms;
- Two mini-vans in addition of 2 vehicles were deployed to support field activities;
- The operation actively involves community members, through volunteerism and the development of Sanitation Committees, Protection Committees and Peer to Peer groups.

### Coordination

The emergency response interventions will continue to be coordinated within the existing refugee coordination structure established in Uganda. The response to the refugee influx from the DRC is led and coordinated by the Office of the Prime Minister and UNHCR, in broad consultation with URCS, UN agencies and Non-Governmental Organisations (NGOs) involved in the response.

In addition to the mandate given to URCS in the National Disaster Preparedness and Management Policy by the GoU, Office of the Prime Minister and the UNHCR recognize URCS as a key Operational Partner (OP) in the provision of lifesaving humanitarian assistance during refugee influxes and other population movements.

At the country level, URCS partners with the IFRC, International Committee of the Red Cross (ICRC), and Partners National Societies (PNSs); including the Netherlands Red Cross, German Red Cross, Belgium Red Cross-Flanders, Austrian Red Cross, and the Canadian Red Cross. For internal Movement cooperation, URCS hosts monthly operational coordination meetings, chaired by the Disaster Management director.

In addition to PNSs support to the refugee operation, partners support emergency health, food security, livelihood as well as capacity building initiatives in various branches. In 2017 Belgian-Flanders Red Cross supported surge trainings in WASH and Logistics for the NDRT. NDRTs were deployed during various operations, including the Marburg DREF and the South Sudanese and Democratic Republic of Congo Population Movement Appeals.

URCS has been implementing the EVD preparedness operation in nine districts bordering DRC, with funds from IFRC (DREF and the Community Pandemic and Preparedness Programme, CP3), UNICEF and WFP.

**Security**

To reduce the risk of RCRC personnel falling victim to crime or violence, active risk mitigation measures have been adopted. This includes situation monitoring and implementation of minimum-security standards. All RCRC personnel actively involved in the operations must have completed the respective IFRC security e-learning courses (i.e. Stay Safe Personal Security, Security Management, or Volunteer Security).

**Logistics**

Logistics will support the operations, delivering a range of relief items in line with operational priorities. The primary tasks of the existing IFRC team in country will be:

- ensure procurement activities are conducted in line with IFRC procedures.
- ensure construction activities are tendered and completed in a satisfactory manner and files are submitted to PLSCM Nairobi for technical review and approval.
- support training and capacity strengthening of the Uganda Red Cross Logistics department.

IFRC Regional Logistics Unit in Nairobi is available to support as and when necessary.

## Proposed Areas for intervention

**Overall objective:** To provide lifesaving emergency services to 18,000 newly arrived Congolese Refugees (3,000 families), including women and children in Kyangwali Refugee Settlement for a period of 18 months.

## Areas of Focus

**Shelter**

People targeted: 500

Male: 390

Female: 110

Requirements (CHF): 177,000

**Proposed intervention**

A shelter assessment was conducted between May and June 2018. Based on this assessment key priority activities were identified to respond to existing needs on the ground and have been included in the EPoA. Due to a funding gap, the proposed activities could not be implemented.

Through the revision, PNS shelter design has been revised, and URCS basecamp renovation is expanded, to include permanent sanitation and bathing structures. Finally, the revision will include support to the development of a URCS Shelter Strategy in addition to capacity building initiatives for URCS.

**Activities:**

**Outcome 1: Communities in disaster and crisis affected areas restore and strengthen their safety, well-being and longer-term recovery through shelter and settlement solutions.**

*Output 1.1: Long-term shelter and settlement assistance is provided to affected households of People with Special Needs.*

Activities completed:

- An assessment was conducted with support from Luxembourg RC to assess URCS Shelter capacity and identify Shelter needs. Based on the assessment, shelter was added to the EPoA through the first Emergency Appeal Revision.

- IFRC shelter unit and URCS engaged further in bilateral discussions to define IFRC support to the design of a shelter strategy and identify capacity building needs.

Activities remaining to be completed:

- Construction of 100 PSN shelters, 100 PSN latrines and 100 bathing shelter adapted to individual needs.
- Construction of office space and accommodation at Kyagwali base camp in addition to permanent latrines and bathing shelters.
- Draft the URCS Shelter Strategy with support from the IFRC regional shelter unit.

- Organization of shelter trainings at national and regional level to strengthen URCS capacity.



## Health

People targeted: 18,000  
 Male: 8,820  
 Female: 9,180  
 Requirements (CHF): 183,000

### Proposed intervention

The refugee influx has placed a burden on the health systems, which is exacerbated by pre-existing conditions, poor living conditions and lack of information among the refugee population. There is a notable upsurge in numbers of refugees affected by respiratory tract infections, malaria, diarrheal diseases and psychosocial issues. There is limited capacity to manage this increased disease burden at primary health care level due to the increased caseloads of patients seeking care and therefore the treatment and care of chronic conditions, including diabetes, HIV and tuberculosis (TB) has been disrupted.

This operation aims at reducing the immediate risks to the health of 3,000 households (18,000 people) through community-based disease prevention and health promotion, including minimum initial maternal and neonatal health services and epidemic prevention, including EVD. In light of the heightened risk of an Ebola outbreak in Uganda, URCS aims at reinforcing community awareness and household level surveillance within the refugee settlement, including the reception centre. It is important to underline that the EVD activities are part of the national URCS EVD preparedness operation, funded by IFRC, UNICEF and WFP.

### Activities:

#### Outcome 1: The immediate risks to the health of affected populations are reduced

*Output 1.1: The health situation and immediate risks are assessed using agreed guidelines*

##### Activities completed:

- Rapid health needs assessment to identify most common diseases and available services.
- WASH and Health survey commissioned to KEITH Consulting Group.

##### Activities remaining to be completed:

- End-line assessment.

*Output 1.2: Community-based disease prevention and health promotion is provided to the target population*

##### Activities completed:

- Training on Psychosocial support (PSS) in Emergencies, 3 days, 40 volunteers.
- PSS for staff and volunteers including individual support counselling and monthly self-care sessions;
- Integration of PSS into all sectors on interventions as per PGI recommendation.
- Conduct safe identification and referral activities of protection cases following the established referral pathways.
- Daily health sensitization on immunization, Ebola prevention, Cholera prevention, menstrual hygiene, breastfeeding and nutrition.
- Establishment of 10 community structures (9 people/community structure) supporting disease prevention and disease early detection (4 are supported by UNICEF, 6 through the Emergency Appeal);
- Referral of health cases following the established referral pathways.
- Procurement of an infotainment kit and implementation of mobile cinema activities in Kagoma reception center and in Kyangwali refugee settlement.
- Procurement of Community Based Health and First Aid (CBHFA) toolkits for volunteers adapted to context, including cholera and Ebola prevention material.

##### Activities remaining to be completed:

- CBHFA training, 5 days, 18 volunteers.
- Distribution of the CBHFA toolkit.
- Continuation of the daily health sensitization sessions through community meetings, focus group discussions and one-on-one sessions.

- Procurement and distribution of 6,000 Long Lasting Insecticide Treated Mosquito Nets (LLINs) for 3000 HH (2/HH).

**Output 1.3: Epidemic Prevention and control measures carried out**

Activities completed:

- Training on Epidemic Control for Volunteers (ECV); 3 days, 40 volunteers participated.
- Identification and training of 90 community members in disease prevention and control.
- Deployment of Oral Rehydration Point (ORP) kits to support the community during the cholera outbreak;
- Realization of 6 mobile cinema sessions per month starting from August, focused on cholera, Ebola, immunization, HIV and personal hygiene.
- Participation in Epidemic preparedness/coordination meetings organized at settlement level.
- URCS has been acting as the focal point for the dissemination of information on Ebola at settlement level.
- Information session on Ebola preparedness for volunteers conducted.
- Procurement of ECV toolkit for volunteers has been initiated.

Activities remaining to be completed:

- Distribute ECV toolkits to volunteers.
- Procurement of IEC materials including posters and leaflets, including Ebola preparedness and prevention messages.
- Procurement of NFI for mobile cinema sessions (e.g. soap and sanitary pads) to strengthen the health messages through practice.
- Mass media campaign via radio on prevention of priority diseases through radio talk show and involvement of community drives.
- Continuation of daily health sensitization sessions through community meetings, focus group discussions and one-on-one sessions.

**Output 1.4: Minimum initial maternal and neonatal health services provided to target population**

Activities completed:

- Participation in external trainings on Maternal and Child Health and communicable disease surveillance;
- Training on Prevention/Elimination of Mother to Child Transmission (P/EMTCT) of HIV and immunization in collaboration with District Local Government and Action Africa Help, 2 days, 33 volunteers;
- Supporting the massive mobilization for immunization resulting in the immunization of 1,600 children;
- Daily community mobilization sessions on maternal and child health;
- Referral of pregnant women following the established referral pathways.
- Procurement of 500 dignity kits for pregnant women

Activities remaining to be completed:

- Massive mobilization for immunization campaign organized by MoH.
- Distribution of 500 dignity kits for pregnant women. and procurement of an additional 500 kits.



### Water, sanitation and hygiene

People targeted: 18,000

Male: 8,820

Female: 9,180

Requirements (CHF): 1,232,000

#### Proposed intervention

This operation aims at reducing the risk of waterborne and water related diseases by ensuring daily access to safe water, adequate sanitation as well as by carrying out hygiene promotion activities and hygiene-related goods distributions. The activities will assist the people in Kyangwali refugee settlement.

Although throughout 2018 OPM and WASH partners have worked towards the identification of alternative and sustainable water sources, such as drilling boreholes or motorizing wells, the volatility of ground water sources does not allow yet to completely phase out from the water trucking activity. Between May and July 2018 UNCHR

and implementing partners equipped 4 motorized wells with the intention to realize a piping system which could have served different parts of the settlement. Unfortunately, the operation was unsuccessful due to low water table within Kyangwali refugee settlement. URCS continues the water production through the management of a WTU for an additional 6 months.

#### **Activities:**

#### **Outcome 1: Immediate reduction in risk of waterborne and water related diseases in targeted communities**

*Output 1.1: Continuous assessment of water, sanitation, and hygiene situation is carried out in targeted communities*

##### Activities completed:

- Participation in 70 House Hold (HH) survey tool training organized by the International Organization for Migration (IOM).
- Conducting continued assessments to determine WASH conditions within URCS operational area with the 70 HH tool methodology.
- Collect data through Kobo, including data on WASH indicators.
- Conduct daily quality surveillance activities at HH and distribution points.
- Participate in WASH coordination meetings.

##### Activities remaining to be completed:

- Continuation of data collection through Kobo Collect.
- Continuation of daily quality surveillance activities at HH and distribution points.
- Procurement of water quality testing kits and conduction water quality spot checks.

*Output 1.2: Daily access to safe water which meets Sphere and WHO standards in terms of quantity and quality is provided to target population*

##### Activities completed:

- Daily management of the WTU in Maratatu, providing 150-200 m<sup>3</sup>/day.
- Distribution of 2,756 jerry cans received from UNICEF (2000) and IFRC (1000) of 20 litres to 1,378 HH. 10 boxes of water purifiers containing 200 sachets of 10 litres each received by UNICEF for turbid water and 1,400 strips of aqua tabs received from UNICEF.
- 144 Sanitation Committee members trained on the use of water purification chemicals.
- Procurement process for water filters for 500 PSN HH has been initiated.

##### Activities remaining to be completed:

- Procurement of 4 storage tanks for the WTU replenishment.
- Procurement of pumps for the WTU replenishment.
- Distribution of water filters for 500 PSN HH.
- Realization of fencing in the WTU area.
- Procurement and distribution of additional protective materials.
- Demobilization of WASH Kit5.

*Output 1.3: Adequate sanitation which meets Sphere standards in terms of quantity and quality is provided to target population*

##### Activities completed:

- Construction of 60 communal emergency latrines 100% decommissioned.
- Construction of 100 communal bathing shelters 100% decommissioned.
- Procurement and distribution of 20 sanitation tool kits.
- Conduct environmental sanitation/cholera prevention activities such as drainage, vector control and solid waste management during cholera outbreak.
- Vector control activities through fumigation in identified high risk environments at HH where cholera cases were identified during the outbreak.
- Completion of 603 HH bathing shelters supported with support from UNICEF.
- Completion of 750 HH pit latrines supported with support from UNICEF.
- Completion of 240 HH rubbish pits.
- Completion of 357 HH drying racks.
- Sensitization of use of tippy taps at HH level (water + soap).
- Sensitization sessions on hygiene and sanitation at HH, community, reception center and public institutions.
- Distribution of 405 hand washing facilities (Tiptap) provided by UNICEF.
- Procurement process started for construction materials for 100 HH latrines and bathing shelters.
- Procurement process started for construction of 75 HH PSN latrines and bathing shelters.
- Procurement process started for hygiene kits for 500 PSN HH.

- Procurement of 400 hand washing facilities (Tiptap).
- Procurement of 20 boxes of soap bars.

Activities remaining to be completed:

- Procurement of spray pumps for infection control activities.
- Distribution of construction materials for 100 HH latrines and bathing shelters and 75 HH PSN latrines and bathing shelters.
- Procurement of construction materials for 2,400 HH latrines and bathing shelters.
- Construction of 425 HH PSN latrines and bathing shelters.
- Provision of latrine digging kits to facilitate 3,000 HH latrines construction, including 500 PSN HH.
- Provision of construction materials to facilitate 3,000 HH latrines constructions, including 500 PSN HH.
- Provision construction materials to facilitate 3,000 HH bathing shelter constructions, including 500 PSN HH.
- Distribution of latrine digging kits to 24 groups (10 HH/group) to facilitate latrines construction.
- Distribution of 40 hand washing facilities (Tippy-tap).
- Distribution of 20 boxes of bar soaps.
- Distribution of 400 hygiene kits and procurement of additional 100 for PSN HH.
- Realization of cleaning campaigns together with community members.

*Output 1.4: Hygiene promotion activities which meet Sphere standards in terms of the identification and use of hygiene items provided to target population*

Activities completed:

- Procurement of megaphones to support community mobilization and sensitizations.
- Adoption of IEC materials developed by Ministry of water and WASH partners.
- Procurement process started for PHASter training and toolkits.
- Procurement process started for ECV training and toolkits.

Activities remaining to be completed:

- Procurement and distribution of hygiene and sanitation toolkits in schools.
- Realization of PHASter and ECV trainings for volunteers, 5 days, 31 volunteers.
- Procurement and distribution of PHASter and ECV tool kits.
- Procurement and distribution of hygiene and sanitation toolkits for schools.

*Output 1.5: Hygiene-related goods (NFIs) which meet Sphere standards and training on how to use those goods is provided to the target population*

Activities completed:

- Procurement and distribution of 18,000 liters of liquid soap for 3 months for communal sanitation facilities.
- Procurement of disinfection materials (JIK and IMO) for communal sanitation facilities;
- Procurement of ORP kits.
- Needs assessment for menstrual hygiene kits.

Activities remaining to be completed:

- Procurement and distribution of hand washing facilities to 2,195 HH to promote hand washing practices after latrine use.
- Procurement of hygiene kits for 500 PSN HH.
- Procure and distribute 18,000 liters of liquid soap for 3 months for 3,000 HH sanitation facilities.
- Procurement and distribution of 3,000 Menstrual Hygiene Management (MHM) kits.
- Procurement and installation of suggestion boxes for Protection and CEA.
- Conduct 12 radio talk shows.
- Procurement and distribution of 900 portable radios with set of battery.
- Procurement of 6,000 Long Lasting Insecticide Treated Mosquito Nets (LLINs) for 3000 HH (2/HH);
- Procurement of hygiene related prizes for model HH (e.g. boxes containing sanitary towel, sanitary pad, soap).

**Outcome 2: Sustainable reduction in risk of waterborne and water related diseases in targeted communities in the recovery phase.**

*Output 2.1: Community managed water sources giving access to safe water is provided to target population*

Activities completed:

No activity was implemented due to the fact that the development of long terms solution for water supply provision was delayed.

Activities remaining to be completed:

The implementation of the activity will depend on the available resources and the results of hydrological studies conducted by WASH partners.



## Protection, Gender and Inclusion

People targeted: 18,000

Male: 8,820

Female: 9,180

Requirements (CHF): 133,000

### Proposed intervention

Displacement of DRC refugees tends to affect men, women and children in different ways, as people with specific needs (PSN) such as persons with disabilities and elderly. The structure of families and households can be altered, and gender roles changed. Due to the sudden loss of family and communitarian structures, women, children, adolescents, and PSN face serious protection risks such as military recruitment, exploitation and neglect. Women and girls are particularly affected. Sexual and gender-based violence (SGBV) is frequently present during conflict and continues into the emergency settings. The operation aims at improving equitable access to basic services (considering different needs) and at preventing and respond to sexual and gender-based violence and all forms of violence against children.

Through the Emergency Appeal revision two activities have been added into his area of intervention: one training for local authorities and the distribution of wonder bags.

#### Activities:

**Outcome 1: Communities identify the needs of the most vulnerable and particularly disadvantaged and marginalised groups, as a result of inequality, discrimination and other non-respect of their human rights and address their distinct needs**

*Output 1.1: NS programmes improve equitable access to basic services, considering different needs based on gender and other diversity factors*

Activities completed:

- Training on Minimum standards and Protection Principles, 1 day, 40 volunteers.
- Training on SGBV and CP, 3 days, 10 volunteers.
- Development of Plan of Action for protection, focusing on mainstreaming gender and diversity into existing activities.
- Development of PMER plan in cooperation with PGI surge, to ensure that sex and age disaggregated data is collected and analyzed to inform the implementation.
- Initiated the reproduction of the protection manual for staff and volunteers.
- Integrated PGI into the Kobo tool and data analyzed monthly.

Activities remaining to be completed:

- Base line and hand line surveys on protection needs and of the affected population based on criteria selected from the Minimum Standard Commitments on Gender and Diversity.
- Refresher training for staff and volunteers on the Minimum Standard Commitments and Protection principles, 1 day, 45 volunteers and 5 staff.
- Reproduce Protection manuals for staff and volunteers.
- Procurement and distribution of 630 Wonder bags.
- Conduction of community demonstration and cooking competition of Wonder bags.
- Conduct base line and end line on Wonder bags.

*Output 1.2 Emergency response operations prevent and respond to sexual- and gender-based violence and all forms of violence against children*

Activities completed:

- Conduction of 50 home visits/month.
- Identification of Protection Committees.

- Selection of 30 “peer champions” for the realization of community awareness session in the framework of the Peer to Peer (P2P) youth programme.
- Initiation of procurements related to the implementation of the P2P youth programme and for Protection Committees: materials for awareness sessions, bicycles and visibility items.

***Activities remaining to be completed:***

- Refresher training on SGBV and CP, 4 days, 15 people.
- Hold training for local authorities (e.g. Police, Local Council, zonal leaders) on protection principles and referral pathways, 1 day.
- Training of Protection Committees.
- Identification, rehabilitation and equipment of gathering places to be used as CFS and WGSS.
- Establishment of an Inclusive Information Centre Information to make accessible information on referral pathways for any CP and SGBV concerns.
- Run and evaluate P2P youth programme.
- Distribution of awareness sessions materials, bicycles and visibility to P2P and Protection Committees.

## **Strategies for Implementation**

### **Requirements CHF 1,475,000**

**Outcome SFI 1.1: National Society capacity building and organizational development objectives are facilitated to ensure that National Societies have the necessary legal, ethical and financial foundations, systems and structures, competences and capacities to plan and perform**  
Requirements (CHF): 771,575

**Output S1.1.4: National Societies have effective and motivated volunteers who are protected**

*Progress towards outcomes*

The following URCS staff and surge were deployed to the operation:

- 1 Operation manager;
- 1 PSS officer
- 1 Public Health officer
- 1 PMER/CEA officer
- 3 NDRT members
- 45 volunteers

Gum boots, rain coats and umbrellas have been procured for all volunteers. However, visibility of URCS operation needs to be strengthened further.

The construction of an office space and accommodation for staff and volunteers in Kyangwali refugee settlement did not start as planned due to delays both internal and at OPM level of drawings and bill of quantities.

The budget for this output has been increased due to a readjustment in the budget for the construction of office space and volunteer accommodation in Kyangwali basecamp, including permanent sanitation and washing facilities. In addition, the budget has been increased due to extended timeframe, including an increase of staff and volunteer costs.

**Outcome SFI 2.01: Effective and coordinated international disaster response is ensured**  
Requirements (CHF): 671,897

**Output S2.1.3: NS compliance with Principles and Rules for Humanitarian Assistance is improved**

*Progress towards outcomes*

***Activities completed:***

- CEA training provided by a CEA Surge deployed in the framework of the South Sudanese Emergency Operation, 4 days
- 4 mobile cinema sessions targeting 1,800 people at Kagoma reception centre on cholera prevention and adoption of good practices in overcrowded places.
- 100 home visits/month to collect and provide feedbacks.
- Soap post distribution monitoring survey.
- Focus group discussions to evaluate jerry cans distribution activity. Main feedback was the preference of beneficiaries to receive 2 jerry cans of 10 litres instead of 1 of 20 litres to facilitate water transportation from water points to house hold, operation usually undertaken by women and children. The information was presented by URCS at WASH working group level to influence stakeholders' choices in procuring and distributing NFIs. URCS will as well take into consideration beneficiaries' feedbacks in the realization of WASH activities.

***Activities remaining to be completed:***

- Conduct formal assessment on community information needs and preferred communication channels;
- Establish mechanism for sharing information with communities (i.e. mobile radio, notice boards) and develop with community participation their contents.

***Establish formal feedback and complaint system******Progress towards outcomes***

At the onset of the disaster, a FACT team leader was deployed to support in country coordination and the development of the EPoA.

Currently there are two IFRC staff deployed to support the operation:

- 1 IFRC Operations Manager
- 1 IFRC Finance delegate

Due to limited funding, a logistic delegate could not yet be recruited.

In May an IFRC PMER support mission was conducted with the objective to:

- Draft a PMER plan, including the development of monitoring tools, an indicator tracking table and PMER planning table;
- Training key people involved in the operation both at field level and head quarter level on KoboCollect/ODK mobile data collection software.

A kobo collect questionnaire has been developed, including all areas of focus, and tested in the field. Due to the temporary lack of mobile phones in the field, URCS staff and volunteers could only start using the tool in the month of July. The kobo collect system is now completely rolled out and data are shared on a monthly base for analysis.

The budget under this outcome has increased due to the extended timeframe, including extended support from IFRC in country staff.

**Outcome S3.2: The programmatic reach of the National Societies and the IFRC is expanded.  
Requirements (CHF): 31,528**

**Output S3.2.1: Resource generation and related accountability models are developed and improved**

***Progress towards outcomes***

In May an IFRC PMER support mission was conducted with the objective to:

- Draft a PMER plan, including the development of monitoring tools, an indicator tracking table and PMER planning table.
- Training key people involved in the operation both at field level and head quarter level on KoboCollect/ODK mobile data collection software.

A kobo collect questionnaire has been developed, including all areas of focus. Volunteers are now systematically collecting data on all indicators through Kobo.

**Funding requirement**

SHELTER	177,000
HEALTH	183,000
WATER, SANITATION AND HYGIENE	1,232,000
PROTECTION, GENDER AND INCLUSION	133,000
STRENGTHEN NATIONAL SOCIETY CAPACITIES	847,000
ENSURE EFFECTIVE INTER'L DISASTER MANAGEMENT	628,000
<b>TOTAL FUNDING REQUIREMENTS</b>	<b>3,200,000</b>

**Elhadj As Sy**  
Secretary General

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## Reference documents



Click here for:

- Previous Appeals and updates
- Emergency Plan of Action (EPOA)

**For further information, specifically related to this operation please contact:**

**In the Uganda National Society**

- Secretary General M. Robert Kwesiga; email: [rkwesiga@redcrossug.org](mailto:rkwesiga@redcrossug.org)

**In the IFRC**

- **IFRC Regional Office for Africa:** Adesh Tripathee, Head of DCRPRR; email: [adesh.tripathee@ifrc.org](mailto:adesh.tripathee@ifrc.org)
- Khaled Masud Ahmed, Regional Disaster Management Delegate, phone: +254 20 283 5270, Mob +254 (0) 731 067 286; email: [khaled.masud@ifrc.org](mailto:khaled.masud@ifrc.org);
- **IFRC Country Cluster Support Team:** Andreas Sandin, Emergency Operations Coordinator; email: [andreas.sandin@ifrc.org](mailto:andreas.sandin@ifrc.org); phone: +254 732 508 060
- Lisa Zitman, Disaster Management Delegate; email: [lisa.zitman@ifrc.org](mailto:lisa.zitman@ifrc.org);

**In IFRC Geneva**

- Antoine Belair, Operations Coordinator (Africa) +41 79 708 3149; email: [antoine.belair@ifrc.org](mailto:antoine.belair@ifrc.org)

**For IFRC Resource Mobilization and Pledges support:**

- IFRC Regional Office for Africa, Kentaro Nagazumi, Head of Partnership and Resource Development, Nairobi; email: [kentaro.nagazumi@ifrc.org](mailto:kentaro.nagazumi@ifrc.org); phone: +254 202 835 155

**For In-Kind donations and Mobilization table support:**

- **IFRC Africa Regional Office for Logistics Unit:** Rishi Ramrakha, Head of Africa Regional Logistics Unit, email: [rishi.ramrakha@ifrc.org](mailto:rishi.ramrakha@ifrc.org); phone: +254 733 888 022

**For Performance and Accountability support (planning, monitoring, evaluation and reporting enquiries)**

- **IFRC Africa Regional Office:** Fiona Gatere, PMER Coordinator; email: [fiona.gatere@ifrc.org](mailto:fiona.gatere@ifrc.org); phone: +254 780 771 139

## 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.

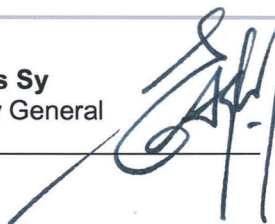


Promote **social inclusion**  
and a culture of  
**non-violence** and **peace**.

**Funding requirement**

SHELTER	177,000
HEALTH	183,000
WATER, SANITATION AND HYGIENE	1,232,000
PROTECTION, GENDER AND INCLUSION	133,000
STRENGTHEN NATIONAL SOCIETY CAPACITIES	847,000
ENSURE EFFECTIVE INTER'L DISASTER MANAGEMENT	628,000
<b>TOTAL FUNDING REQUIREMENTS</b>	<b>3,200,000</b>

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Secretary General

 12/12/2018