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# Emergency Plan of Action (EPoA)

## DRC: Floods in Uvira



International Federation  
of Red Cross and Red Crescent Societies

<b>DREF Operation</b>	MDRCD030	<b>Glide n°:</b>	<a href="#">FL-2020-000052-COD</a>
<b>For DREF; Date of issue:</b>	05 May 2020	<b>Expected timeframe:</b>	3 months
<b>Operation start date</b>	01 May 2020	<b>Expected end date:</b>	31 July 2020
<b>Category allocated to the of the disaster or crisis: Yellow</b>			
<b>DREF allocated:</b> CHF 375,388			
<b>Total number of people affected:</b>	70,000	<b>Number of people to be assisted:</b>	15,000 people
<b>Provinces affected:</b>	South Kivu province	<b>Provinces/Regions targeted:</b>	Uvira territory
<b>Host National Society presence (n° of volunteers, staff, branches):</b> The DRC Red Cross (DRC RC) has branches in all the provinces and territories of the country, as well as a vast network of RDRT, NDRT, and CDRT. In total, the DRC RC has 130,000 volunteers trained in First Aid, Shelter, WASH, Cash assistance, etc. In Uvira, a territorial committee is in place, with 523 active volunteers responding to the crisis at the time of writing.			
<b>Red Cross Red Crescent Movement partners actively involved in the operation:</b> International Federation of Red Cross and Red Crescent Societies (IFRC), International Committee of the Red Cross (ICRC), and the Belgian Red Cross.			
<b>Other partner organizations actively involved in the operation:</b> DRC's provincial authorities Civil Protection, United Nations Agencies WFP, UNICEF, etc. as well as national organizations such as the Scouts and POPOLI FRATELLI.			

## A. Situation analysis

### Description of the disaster

The city of Uvira, centre of the eponymous territory, in South Kivu province of the Democratic Republic of the Congo (DRC), experienced heavy rainfalls that caused floods in the whole city and its surroundings during the night of 16 to 17 April 2020. The rains also affected neighbouring Maniema. Initial rapid assessments conducted show that these floods caused great damages in nine (9) out of the 14 districts of the city, affecting approximately 70,000 people who have been obliged to leave their houses to move in with host families or in temporary shelters set up by authorities, in schools and churches. Besides, at least 38 deaths, 185 wounded and 100 separated children have been registered. To note, there are 8 official shelters set up by authorities and 21 unofficial sites. Approximately 12,000 people (18 %) of affected communities now live in shelters while the remaining 58,000 have found refuge in host families.

The rise of the waters of Lake Tanganyika, resulting from continuous rainfall in the area between March and April 2020, reaching about 100 cm above its usual bed, and subsequent floods due to the overflow of rivers has induced several vulnerabilities to the floods affected communities. The main consequence is the displacement of several affected households to host families or to schools and churches/ temporary accommodation sites.

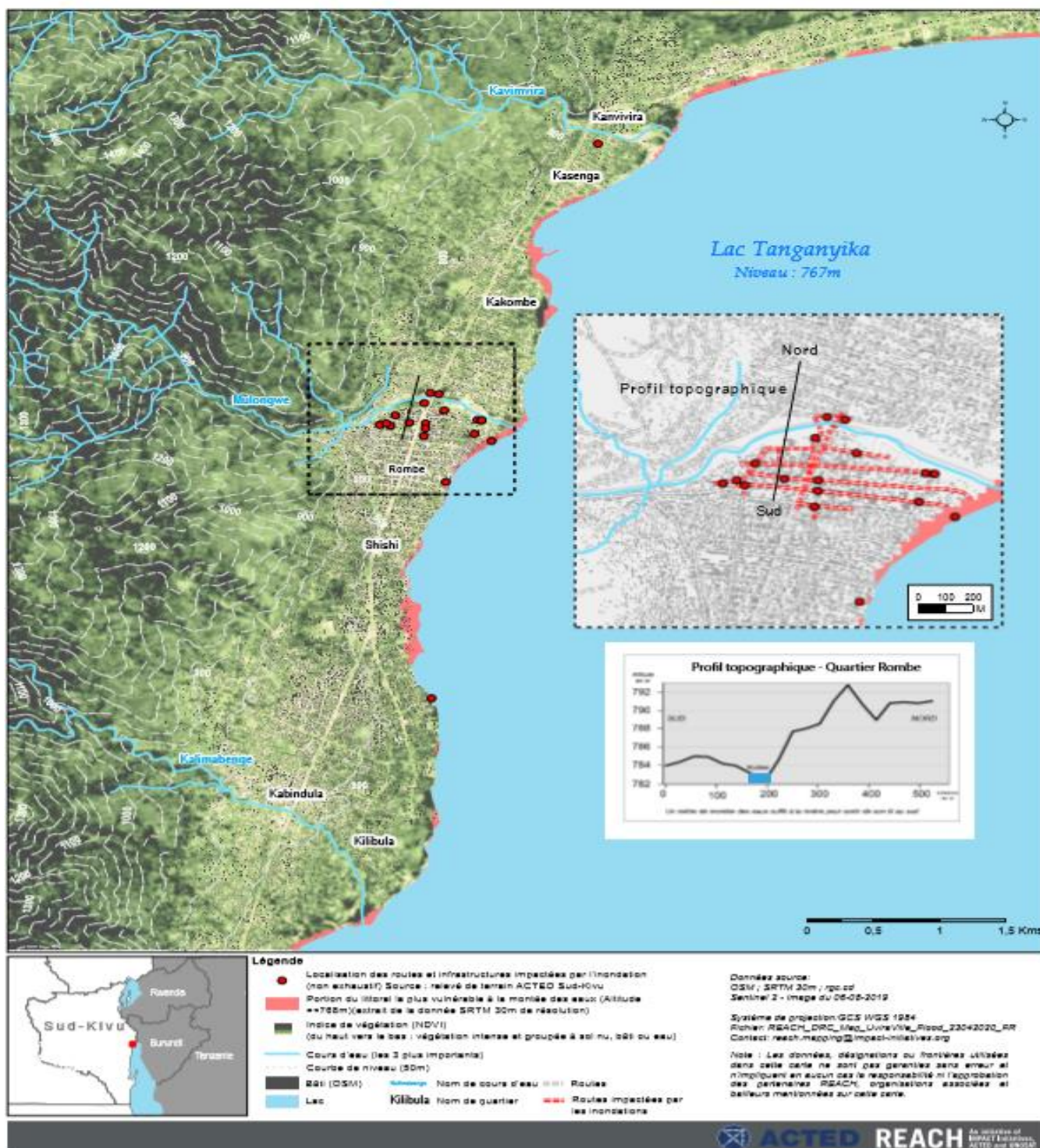


*DRC RC volunteer helping evacuate an affected resident*  
© DRC RC

## République Démocratique du Congo - Sud-Kivu - Ville d'Uvira

### Inondations du 16 Avril 2020 - Identification des vulnérabilités

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In a context of COVID-19 pandemic and Ebola Virus Disease (EVD) epidemic, coupled with several ongoing crises (food insecurity, conflicts, etc.), are expected in the DRC and will likely exacerbate the various humanitarian needs that would have to be met in the coming months.

## Summary of the current response

### Overview of Host National Society Response Action

At the onset of the disaster, the DRC RC South Kivu branch deployed 271 volunteers in several areas to carry out the immediate response actions. Other delegations of volunteers (from Uvira Territory, Fizi Territory and a team of DRC RC / South Kivu provincial assessors) came in to strengthen the teams. Activities undertaken include:

- First aid and evacuation of injured persons, with 159 people rescued and transported to three hospitals;

- Management of mortal remains with 37 deceased people taken to the morgue and buried by DRC RC volunteers. The ICRC supported the DRC RC in this activity, particularly in terms of logistics (equipment and vehicles);
- Establishment of a functional emergency aid station that operated for the first 4 days and night at the EP Kavimvira site (initial care of patients and referral of 22 cases);
- Restoring Family Links (RFL) with 10 volunteers mobilized. Thus far, 17 research files have been opened with the numbers expected to rise;
- Multisectoral (rapid) assessment (from 19 to 22 April 2020) with support from IFRC field office. This initial assessment made it possible to obtain preliminary numbers and take note of needs of the affected, although it, unfortunately, did not allow an assessment of the damages to water and sanitation infrastructures, households' food stocks or livestock assets. However, based on the situation, it is expected that infrastructures and household goods have experienced severe damages. The water plant of the city REGIDESO is out of order and local authorities and UN agencies are looking into fixing it. ;
- Construction of latrines and garbage holes in the accommodation sites.
- Sanitation and disinfection of accommodation sites by 65 volunteers collecting waste and garbage, cleaning canals and pipes, conducting awareness of hygiene rules in the prevention of waterborne diseases and distribution of water purifiers (with material and financial support from the IFRC field office);
- Participation in the various coordination meetings organized by the other partners including the City Council, OCHA, WASH sub-cluster, Protection sub-cluster, health, food security and education.

Based on the preliminary assessments carried out by the DRC RC and its RCRC Movement partners as well as the OCHA consolidated needs assessment on 28 April 2020, about 1,985 households (12,565 people) currently displaced as seen in below table. It is to be noted these numbers are increasing as the rains continue.

**Table 1: Preliminary data on number of households in spontaneous settlements**

**Tableau 2 : Statistiques des ménages hébergés dans des sites**

AIRE DE SANTE	SITE D'HEBERGEMENT	MENAGES	PERSONNES	SOURCE
Kasenga CEPAC	EP Kavuye	30	180	CR-RDC
	Eglise 8° CEPAC Kasenga	7	35	ASED
	EP Kasenga	288	1723	CR-RDC
	Institut Olive Lembe	74	444	CR-RDC
	Institut d'Uvira	35	210	CR-RDC
	Institut Kitundu	8	40	ASED
<b>Total</b>	<b>6</b>	<b>442</b>	<b>2632</b>	
Kiyaya	Institut Conforti	91	546	CR-RDC
	E.P Kimanga	8	40	ASED
<b>Total</b>	<b>2</b>	<b>99</b>	<b>586</b>	
Kavimvira	EP Kavimvira	84	504	CR-RDC
	Maison Privée	23	115	ASED
	Eglise 8° CEPAC Mwenga	5	25	ASED
	Institut kalimabenge	14	70	ASED
<b>Total</b>	<b>4</b>	<b>126</b>	<b>714</b>	
Kasenga Etat	CS Herbart Lola	28	168	CR-RDC
	EP st pierre	42	294	CR-RDC
	Institut ADIDJA	40	200	ASED
	Eglise de Réveil Penuel	9	45	ASED
	Institut Kirungu Sage	14	70	ASED
	Institut ITAV Kasenga	57	324	CR-RDC
	Institut Kitundu	45	321	POPOLI
	Eglise Bashane	12	60	ASED
<b>Total</b>	<b>8</b>	<b>247</b>	<b>1 482</b>	
Mulongwe	Institut Chapelle	11	55	ASED
	EP Espoir	12	60	ASED
	Eglise Notre Dame Aux Larmes	251	1506	CR-RDC
	Eglise Beme CEPAC	8	40	ASED
	Fobi	54	324	CR-RDC
<b>Total</b>	<b>5</b>	<b>336</b>	<b>1 985</b>	
Nyamianda	Action Saidiya	6	30	ASED
	Institut tanganyika	4	20	ASED
<b>Total</b>	<b>2</b>	<b>10</b>	<b>50</b>	
Kilomoni	EP MASUZA	80	400	ASED
	EP EZIO	56	336	ASED
<b>Total</b>	<b>2</b>	<b>136</b>	<b>736</b>	
Rombe	EP Tanganyika	492	3 289	ASED
St Paul	Institut Mwanga	97	1 091	ASED
		<b>589</b>	<b>4 380</b>	
<b>Total General</b>	<b>29</b>	<b>1 985</b>	<b>12 565</b>	

Considering the above, the prevailing situation requires an in-depth analysis that will allow the DRC RC to organize itself to conduct in-depth assessments in the already affected areas. This will help to meet current needs but also to inform the operational strategy that will be adapted accordingly.

To note, the DRC SUD-KIVU Red Cross branch has good capacities in the areas of Water, Hygiene and Sanitation (WASH), Risk Communication and Community Engagement (RCCE), CASH interventions, Psychosocial Support (PSS) and first aid.

In terms of WASH, it should be noted that the Head of the Health and Social Action Department, the Water and Sanitation Office Manager and the Water and Sanitation technicians and the board of provincial supervisors are experienced in water supply and management, as well as chlorination. In December 2017, 500 volunteers from 10 health zones in the province, including Uvira health zone, were trained in water chlorination techniques. Thanks to it, DRCRC / SUD-KIVU volunteers are always at the forefront in the fight against epidemics such as cholera.

With regards to RCCE, two managers from headquarters received training in 2018 in Kinshasa in connection with the CEA. Some 132 DRC RC South Kivu branch volunteers, including 12 trainers and 120 sensitizers, were trained by the IFRC between late 2019 and early 2020.

As far as Cash activities are concerned, DRC RC South Kivu branch volunteers are experienced in initial assessment activities, delivering assistance to disaster-affected communities and post-operation monitoring. As a result, they carried out several operations organized by both the DRC RC and the ICRC, specifically the 2018 ICRC CASH distribution for displaced people from Uvira highlands.

Since 2005, the DRC RC South Kivu branch has gained considerable experience in the psychosocial support of victims sexual and gender-based violence (SGBV) in the “listening houses” where volunteer psychosocial agents and sensitizers operate, initially through the support of the IFRC and then of the ICRC.



*Affected family on the roof of their damaged and flooded house*  
© DRC RC

First aid is the area in which the DRC RC has a long-standing experience. The DRC RC organizes training for its volunteers as well as NGOs and United Nations Agencies. Thanks to its vast network of volunteers, the DRC RC South Kivu branch has already carried out several rescue operations for the benefit of the communities of South Kivu (i.e. evacuation of injured persons from floods, dignified and secure burials, and site clean up after the floods in Uvira).

In view of the above, the DRC RC, South Kivu branch has capacities available which can contribute to the response to the needs identified in Uvira following the floods. This capacity has been strengthened under the IFRC EVD Preparedness program, which will be leveraged to respond to this emergency.

### **Overview of Red Cross Red Crescent Movement Actions in country**

Coordination mechanisms between the DRC RC, the IFRC and all Movement partners in-country are well established. The DRC RC is a very dynamic organization supported by the IFRC and ICRC in disaster management, and partner National Societies (PNS) including the Belgian Red Cross which helped design this EPoA.

The NS receives IFRC technical and financial support through its Country Office based in Kinshasa. With regards to the floods in Uvira, IFRC supported the local branch through the provision of logistic, material and financial means, allowing to carry out initial response activities, specifically the rapid assessment and assistance to the affected people.

As part of the Ebola response, IFRC has a field office located in Goma, which shall provide technical support to DRC RC South Kivu branch in implementing this operation. In addition, IFRC regularly meets with ICRC and in-country PNSs to discuss contributions and joint actions to be carried out in the framework of this intervention.

The ICRC has a huge presence in the DRC because of the conflict situation in the North Kivu and Ituri provinces. In addition to funding and emergency kits, the ICRC can provide additional support on the technical implementation of relief activities such as this DREF. Together with IFRC, ICRC provided support which enabled NS to conduct the initial rapid assessment and depending on how the situation evolves, the ICRC is ready to develop the ECOSEC program to support the victims.

While countrywide the DRC RC relies on the support of several PNS present in the country, notably the Spanish Red Cross, the Swedish Red Cross, the Belgian Red Cross and the French Red Cross, none of these PNS is present in South Kivu: Belgium red Cross provided technical support for the drafting of this DREF.

The strategy proposed in this DREF has been discussed by the DRC RC and its partners present in the country, especially IFRC and ICRC.

### **Overview of non-RCRC actors' actions in country**

With regards to the situation in Uvira, contacts have been established with other humanitarian actors on the ground, such as UNICEF, OCHA, and Norwegian Church Aid. The DRC RC will maintain these contacts and play an active role in initiatives aimed at providing assistance to vulnerable people. This is in line with DRC RC's participation in the various meetings organized by the other partners including the City Council, OCHA, WASH sub-cluster, Protection sub-cluster, health, food security and education. It should be noted that additional consultations with other stakeholders will be needed in a timely manner, including public authorities, international non-governmental organizations (INGOs) and United Nations agencies (UN) to mutualize efforts in concerted actions for the disaster-stricken population.

### **Coordination**

This operation will be implemented by the DRC RC South Kivu branch with support from NS HQ and Movement partners. An inter-Movement coordination mechanism will be put in place to ensure that the DRC RC receives all the necessary support. The IFRC and ICRC are present in South Kivu and maintain very good working relations. The implementation of this operation is part of this cooperation within the Movement.

With regards to coordination with non-Movement partners, DRC RC participates in the Coordination structures in place for Uvira, such as the clusters for the UN system and the provincial coordination mechanisms for the DRC authorities. In this context, the actions implemented in this operation will be best coordinated with other humanitarian and government partners to ensure all needs sectors are responded too without gaps and duplications.

## **Needs analysis, targeting, scenario planning and risk assessment**

### **Needs analysis**

Based on results from the preliminary assessment carried out from 19 to 22 April 2020, immediate needs include first aid, emergency shelters, non-food items (blankets, kitchen utensils, mats, mosquito nets), soap, hygiene kits (for women of childbearing age), environmental sanitation and hygiene promotion.

Needs identified during the assessment can be summarized as follows:

#### **1. Water, Sanitation and Hygiene (WASH)**

- a. **Hygiene and sanitation promotion:** There are acute hygiene and sanitation needs. At least 1,456 latrines were damaged due to the floods. As such, there is an obvious risk of water-borne diseases. In addition, the area is Cholera endemic, so there is a high risk of a Cholera outbreak. To prevent water-borne diseases, wide-spread awareness campaigns on hygiene promotion are needed. This operation will support needs for hygiene and sanitation but NS will work with other partners to meet needs for mosquito nets.
- b. **Handwashing stations:** In accommodation sites and public places, the installation of handwashing stations is necessary, especially in view of COVID-19. Furthermore, the disinfection/spraying of the sites are also actions to be implemented to contribute to the healthiness of the sites.
- c. **Drinking water needs:** Since April 17, the supply of water to the entire city of Uvira has been interrupted following the destruction of the catchment system; the REGIDESO (National Water Authority) water plant. The technical evaluation is underway to determine the real needs for the rehabilitation of the system which will take several months and will require significant resources. As a result, the population is using water from Lake Tanganyika and river water which is obviously very dangerous. Twenty-five (25) of the spontaneous displacement sites have no water or sanitation system. Different humanitarian agencies are exploring the installation of 8 bladders to contribute to the supply of water in sites where affected households are accommodated and will contribute to the reduced likelihood of water-borne diseases. It is important to note that the DRC RC will contribute to this effort with its own bladder. Water trucking is being considered by MONUSCO, ICRC and others. The bladder solution should be reinforced with the distribution of Aquatabs and the chlorination at the draw-off points. As such, 52 draw-off points have been identified. The DRC RC is likely to contribute to the efforts to provide safe water to communities and these activities do not fall under this DREF operation but will likely to be supported through UNICEF.

## 2. Shelters and essential household items

According to preliminary assessments conducted by OCHA, some 5,581 houses have been damaged (979) or destroyed (4,602) due to the floods in Uvira as seen in below table:

**Table 2: Preliminary data on number of damaged or destroyed houses**

**Tableau 1 : Statistiques des ménages ayant perdu soit totalement, soit partiellement leurs Maisons**

Commune	Quartier	Maisons totalement détruites	Maisons partiellement détruites	Total
		Total	Total	
Mulongwe	MULONGWE	106	00	106
	ROMBE I	274	01	275
	ROMBE II	661	26	687
	KASENGA	1 156	153	1309
	KAKOMBE	2 156	44	2200
<b>TOTAL</b>		<b>4 353</b>	<b>224</b>	<b>4 577</b>
Kavimvira	Kavimvira	11	755	766
<b>TOTAL</b>		<b>11</b>	<b>755</b>	<b>766</b>
Kalundu	Songo	88	00	88
	Kilibula	68	00	68
	Kabindula	82	00	82
<b>TOTAL</b>		<b>238</b>	<b>00</b>	<b>238</b>
<b>Gd TOTAL</b>		<b>4 602</b>	<b>979</b>	<b>5 581</b>

Very similar conclusions were reached by the DRC RC assessment team on the ground. It is to be noted that according to local authorities, several families sharing the same house, as such, more information is still being collected about their needs.

In addition to the shelter needs, most households have lost their essential household items. Indeed, affected households did not have time to save anything, including their food stocks. According to OCHA preliminary needs assessment report dated from 28 April, about 98% of affected households indicated they have lost essential household items and food stocks.

Please note that shelter needs will be addressed by other humanitarian actors.

## 3. Food security

Information collected from key informants indicates that several dozen hectares of food crops were squashed, particularly in the villages of Kawizi, Kiliba, Runingu, Biriba, Sange which is the breadbasket of Uvira and Bukavu. Based on the seasonal calendar, it is very likely the 2020 B season will be lost for most communities. That will lead to a very difficult lean season. Short of humanitarian relief, communities will resort to negative coping mechanisms to survive the lean season and that, in turn, will lead to low planting and thus low yield for the next season 2021 A.

## 4. Psychosocial support and first aid

This is a traumatic experience and obviously, such a disaster has created psychosocial vulnerabilities. The psychosocial needs are compounded by the unhealthy and overcrowded shelter sites and all the protection issues such settings generate. In the OCHA assessment of 27 April, it is estimated that 30% of the displaced population has special needs including, exposure to trauma (7 women listed as having lost their husbands), Chronic patients, People with disabilities, elderly, female-headed households, children-headed households, pregnant and lactating mothers, etc.

## 5. Support to health facilities and distribution of mosquito nets

Injured people were evacuated to health facilities in La Pace. Taking charge of the medical costs related to their treatment is important so that the structures do not fall short of the medical treatment and/or affected people do not find themselves burdened by the bills of the health structures, thus increasing their vulnerability. In addition, the equipment of structures with medication and other necessary materials is needed. In addition, the distribution of mosquito nets to affected households is necessary to contribute to the prevention of malaria. These activities will be covered by other humanitarian actors.

## 6. Reforestation of the hills overlooking the city of Uvira:

As a result of the recent rainfalls, the hills overlooking the city of Uvira have been deforested. Reforestation is an appropriate strategy to reduce the increased risk of flooding in the coming days.

## 7. Construction of bridges, schools and other buildings of public services including REGIDESO:

The rehabilitation of damaged infrastructure is a solution to several issues. The restoration of damaged bridges will normalize the movement of people and goods in the area and will positively impact the functioning of the markets. In addition, the rehabilitation of schools and REGIDESO's infrastructures are necessary so that the return of children to school is not impeded and that water flows normally from taps in the disaster areas. The DRC RC will not contribute to these efforts.

A more detailed needs assessment as well as constant monitoring of the situation will be necessary to inform the response and keep response plans in line with the evolving situation as well as the response by other actors.

### Targeting

In total, this DREF operation will target 3,000 most affected households (15,000 people) in the city of Uvira. The targeted households will be identified through thorough needs and vulnerability assessments by DRC RC teams, with the technical support of IFRC and ICRC, both present in South Kivu, as well as the technical guidance from DRC RC Disaster Response Unit.

DRC RC Uvira team will go through a refresher training to ensure all volunteers have up to date information about vulnerability and needs assessment, which will be conducted focusing primarily on the loss of habitat due to the floods as well as a set of criteria including:

- Orphans and vulnerable children
- Female-headed households and pregnant women
- Elderly people
- People with disabilities
- Chronically ill people
- Children head households.

The needs identified will also be based on and adjusted according to the assessment reports. In addition, close coordination will be sought with other humanitarian actors intervening in the area to ensure complementarity and coherence in the response as well as avoid duplications. A geographical distribution between DRC RC and other humanitarian agencies will be considered, if relevant.

### Scenario planning

Scenario	Humanitarian consequence	Potential Response
<b>Scenario 1:</b> Rainfalls' intensity decreases and no additional overflow affects the city of Uvira. No cases of waterborne diseases reported (cholera). Humanitarian actors will be able to access the affected areas and provide assistance.	<b>MEDIUM</b>	The response will be limited to this DREF operation as described and planned in this EPOA.
<b>Scenario 2:</b> According to weather forecasts, heavy rainfalls and floods continue in the city of Uvira and river water rise. The river water levels increase and cause new population displacements. This will create a challenge in accessing affected communities. Several cases of waterborne diseases are reported in the districts of Uvira	<b>HIGH</b>	DRC RC will continue with the response described in this action plan and carry on with monitoring the situation and providing updates as appropriate. If needed, DRC RC will widen its action.
<b>Scenario 3:</b> The rains and floods worsen and affect other areas of Uvira, especially those most vulnerable to floods. Heavy rains and floods affect all areas of Uvira along the rivers of Uvira and Lake Tanganyika. The situation causes increased population displacement and the emergence of water-borne diseases epidemics.	<b>VERY HIGH</b>	DRC RC will consult with Movement partners to identify the best way to respond to the increased humanitarian needs.

### Operation Risk Assessment

Given that it is currently the rainy season, it is possible that the rivers are not cleared and that the floods extend to all 14 districts of the city of Uvira and its surroundings, particularly the districts most exposed to floods. In accordance with the intention to conduct a more detailed needs assessment and gap identification, this DREF operation may be extended to other cities in the province if necessary. This could reduce the supply of safe water available, which exposes the affected population to epidemics, including cholera, which has become widespread in recent years in South Kivu province.

With regards to security, Uvira is relatively stable, if compared to other locations, given the current conflicts situation in South Kivu. The DRC RC intervenes locally in the area and enjoys very good local acceptance. In addition, all

the operations of this DREF will be implemented by applying the Principles of safety (Safer Access). DRC RC volunteers have been trained in that regard and they have been practising for several years in this area, with support from ICRC.

Considering the large population in the city of Uvira, it is essential to take measures to guarantee their access to a supply of clean water (e.g. by the distribution of chemicals for the treatment of water and storage containers), as well as to manage epidemics (e.g. distribution of ORS sachets). It should be noted that there are already three epidemics in the country (Ebola virus disease (EVD), cholera and measles).

There is also the COVID-19 pandemic which is another unpredictable epidemiological situation. Indeed, this disaster occurred at a time when the population of Uvira was already plunged into a psychosis due to the presence of the COVID-19 in the country in addition to the fact that the city of Uvira borders three countries (Burundi, Tanzania and Zambia) all affected by COVID-19. According to [Africa CDC](#), as of 28 April 2020, 471 confirmed cases have been recorded in country with 30 deaths and 56 recoveries. As a mitigation measure, the capital of the country, Kinshasa has been locked down, all flights suspended, and all borders shut. With regards to the risks associated with COVID-19, the DRC RC will apply the IFRC guidelines on the use of protective equipment during interventions. Furthermore, the rules of social distancing, limitation of gatherings and handwashing will be scrupulously applied. These rules are essential aspects of choosing cash intervention rather than goods distributions.

Specific to the city of Uvira, no known case has been registered to date. However, political and administrative authorities and humanitarian organizations including DRC RC are mobilized to ensure that preventive measures against the pandemic are taken. Indeed, Uvira Branch of DRC RC has already set up 39 hand-washing stations, three temperature testing points, provided with several sensitizers across the city of Uvira. That said, with the current floods, lack of water may worsen the vulnerability of the population. There are no movement restrictions related to COVID-19 in South Kivu and even if some restrictions were to be imposed, the DRC RC has secured an exemption on humanitarian basis, with the support of IFRC.

As such, this DREF operation is aligned with and will contribute to the current global strategy and regional Emergency Plan of Action for COVID-19 developed by the IFRC Africa Regional Office, in coordination with global and regional partners. IFRC continues to assess how emergency operations in response to disasters and crisis should adapt to this crisis and provide necessary guidance to its membership on the same. The NS will keep monitoring the situation closely, focusing on the health risks, and revise accordingly if needed taking into consideration the evolving COVID-19 situation and the operational risks that might develop, including operational challenges related to access to the affected population, availability of relief items and procurement issues, and movement of NS volunteers and staff as well as international staff. For more information please consult the [Covid-19 operation page](#) on the IFRC Go platform.

Below table indicates the potential impact of the pandemic on the operation and how DRC RC / Uvira territorial committee will respond to the situation in the event of COVID-19 mitigation measures being implemented in South Kivu province.

COVID-19 measures	Standard epidemic control measures	Temporary lockdown of society (schools, shops, public functions)	Sustained lockdown and restriction of movement during implementation period
Likelihood	<b>High</b> All operation foreseen in this DREF are implementable under standard COVID-19 prevention measures.	<b>Medium</b> DRC RC is exempted from any lockdown decision by decision from South Kivu Governor.	<b>Low</b> DRC RC is exempted from any lockdown decision by decision from South Kivu Governor but FSP and other needed partners are severely constrained.
Impact on operation	None	Delayed implementation	Implementation delayed beyond the DREF timeframe
Mitigating measures	None. This DREF has been designed taking into account COVID-19 prevention measures.	The implementation of cash component of the DREF will take longer than anticipated due to delays. Timeframe will be reviewed but overall implementation period of the DREF remains the same.	An extension of this DREF operation will be requested per procedures.

## B. Operational strategy<sup>1</sup>

### Overall Operational objective:

The objective of this DREF operation is to provide 3,000 households (15,000 people) affected by the floods in Uvira with lifesaving assistance. DRC RC response intervention will focus on the below areas:

- **Livelihoods:** Through a multipurpose cash assistance to cover the most urgent needs for 3,000 households to cover their basic needs (including food, water, wash needs and households items replenishment as per household needs) through unconditional cash transfers through Mobile Money using the service of Orange, an FSP contracted by the IFRC.
- **Health:** Psychosocial support and first aid and COVID-19 awareness.
- **WASH:** Hygiene promotion and community engagement.

As part of its strategy, DRC RC shall conduct an in-depth needs assessment as it kicks off implementation. Indeed, the first rapid assessment carried out in the field provided information on which this EPoA is based. The situation continues to evolve and in order to get a clear picture of the most vulnerable households and their needs, it is necessary to conduct a more in-depth multisectoral needs assessment. This detailed assessment of needs and gaps, conducted in consultation with the partners and targeted communities, will focus on all the districts affected by the floods for which no information on the extent of the floods is available. This assessment will be made in conjunction with the census of affected communities, using tools such as ODK. The results of the assessment will allow to identify the targeted communities/persons based on the predefined criteria under targeting above. This assessment will also serve as the basis for any review of this emergency plan of action.

### Specific Objectives:

#### 1. Livelihoods and basic needs (Target: 3,000 households)

Given the currently destruction of habitat and infrastructure, as well as the disruption of livelihoods activities being suffered by affected communities, DRC RC has opted to implement an unconditional multipurpose cash response to cover the most urgent needs for 3,000 households. The rationale for a multipurpose cash assistance is the assurance of a quick response that ensures the targeted households receive assistance while giving them dignity and the choice of how they want to spend the cash received depending on the specific needs of each household. This will financially support targeted households to cover their most urgent needs including food, water, household items and other basic needs, depending on the specific needs of each household. Some could even use this to restart income-generating projects, as per their needs.

The amount of the cash assistance will be 90 Swiss francs per household and the distribution will be a one-off distribution, to allow the targeted household to recover from this shock. This amount was calculated based on the Minimum Expenditure Basket used by different agencies in South Kivu and in consultation with the South Kivu Cash Working Group, to ensure consistency between different actors. This will go a long way to avoid discrepancies between recipients and non-recipients of this DREF operation, thereby reducing chances of conflict in the community. In addition, during the implementation of this DREF operation, the DRC Red Cross will explore possibilities to provide longer-term assistance to affected population. The need for such assistance as well as the form it will have to take will depend on how other humanitarian actors will respond, the response by public authorities as well as how the situation on the ground evolves, including the possible impact of COVID-19.

The cash grants will be done through Mobile Money using the service of “Orange”, a local mobile operator which provides mobile banking solutions, namely “Orange Money”. This is because IFRC already has a running contract with this FSP and the mobile wallet is used routinely for IFRC operations in Eastern DRC Orange. In addition, Uvira being a busy urban centre with strong trade links with Burundi and availability of various financial service providers, it would be easier and quicker to get support to targeted households. In addition, the FSP that will be used, Orange Money, has a strong presence in Uvira and confirmed their availability to support this operation.

Orange Money costs are 1.78% transfer fees on the “bulk” amount transferred to the mobile money provider and 1USD fee for each withdrawal amount. The cost of registering into Orange Money is 500 Congolese francs, which is 28 cents to cover the cost of the sim card and opening the account. All costs incurred by beneficiaries will be added to the funds transferred to targeted households.

A market analysis will confirm if the market currently operates normally and that essential products to respond to this disaster are available on the markets, including environmental sanitation equipment, construction material to rehabilitate damaged houses, hygiene equipment such as buckets, jerrycan, soap, etc.

### **Identified risks posed by the CVA assistance and mitigation measures:**

<sup>1</sup> The plan should be prepared by the National Society, with support from the Secretariat technical departments and support services.

- **Slower service of financial service providers:** Due to current COVID-19 related restrictions there are fewer staff available amongst providers, service may be reduced/take longer than usual. We have factored this in our planning, and this is one of the key reasons why our clear preference is to use the existing contract IFRC has with Orange Money.
- **Security:** Security risks in Uvira are moderate, considering it is an urban where there are several banks, mobile money agents and cooperatives. It is a large commercial town where people currently carry cash often. The risk will be mitigated by the reduced visibility of individual transactions from cash points around the town provided by mobile money agents (versus large in-kind distributions).
- **Inflation and lack of liquidity:** Due to the COVID-19 border closing, there is currently in DRC a lack of USD. It means payments will probably need to be in CDF. Beneficiaries will be informed of this in advance, ICRC has switched to CDF in recent cash distributions and this has been accepted by beneficiaries. In addition, based on ICRC assessments, there is evidence of inflationary effects from recent restrictions including an increase in the price of staple goods, particularly those imported. The same feedback was received from WFP that monitors staple prices in South Kivu. As such, the purchasing power in CDF has reduced by a little, making cash transfer still a preferred response modality.

### **Reconciliation**

The IFRC and Orange Money have a well-established reconciliation system that allows identifying possible errors and safeguards the integrity of the cash distribution process. This system is used for several hundred thousand CHF every quarter. The same system will be used for this DREF.

In addition, the different departments of the DRC RC headquarters will provide remote support to the Provincial Committee of South Kivu, specifically the Department of Disaster Management, Finance, Communication, etc. If the travel constraints linked to COVID-19 allow it, two missions from the disaster management department will be organized to support this action, one during the preparation of the detailed needs assessment/targeting and the other for post-distribution monitoring activities or the lessons learnt workshop.

The EcoSec Department of the ICRC SK has expressed its willingness to support the DRC RC at the technical and methodological level in the implementation of this DREF. The ICRC regularly organizes cash distributions in this area and has all the human and technical resources to support this type of distribution by the DRC RC, including on registration, targeting, feedback management methodologies, etc.

### **2. Health: First aid and Psychosocial support**

DRC RC plans to purchase 50 first aid kits for volunteers to use during this response operation. This will allow them to conveniently provide first aid services to the affected population. Since Uvira already has first aid volunteers, a refresher day will be organized for 180 selected first aiders (20 per district) on the Code of Conduct and the Principles and Rules for Humanitarian Assistance. These first aiders will be scheduled to work in shifts of 5, every day for 8 weeks, in rotation amongst volunteers.

Twenty-four (24) DRC RC volunteers and 4 supervisors will receive training to provide psychosocial support to affected households to affected households. They will work 3 days a week for 8 weeks.

### **3. Water, Hygiene and Sanitation**

The NS will undertake three days training of 54 volunteers and 09 supervisors in hygiene and health promotion and the use of IEC materials. After the training, volunteers and supervisors will be mobilized to carry out health and hygiene awareness activities with the affected population two to three days per week for eight weeks (depending on other planned activities, such as distributions).

In addition, volunteers will be provided with sanitation equipment (brushes, bleach, chlorine, detergent, hoes, mixing containers, rakes, soap, sprayers and wheelbarrows) and protective equipment (boots, gloves, helmets, mufflers and protective clothing). DRC RC sanitation teams will work with community sanitation committees to clean up drains and gutters in their communities to reduce the risk of water-borne diseases.

**Community Engagement and Accountability (CEA):** The DRC RC has a massive CEA set up in Eastern DRC as part of EVD response. This CEA setup will be leveraged to ensure communities in Uvira can provide feedback and it is properly received and acted upon. In addition, DRC RC is currently working to establish a toll-free helpline that would also serve as a feedback/ complaint system. If ready on time, this helpline will strengthen current feedback mechanisms. A specific feedback desk will be set up at DRC RC local branch in Uvira to receive and act on feedback.

**Protection, Gender and Inclusion (PGI):** Mainstreamed throughout all sectors of intervention, the DRC RC will ensure that the DREF operation is in line with the IFRC's commitment to achieving gender equality and diversity;

by adapting the criteria for the selection of beneficiaries to those targeted (households headed by women, disabled people). Other aspects examined will include the prevention of sexual and gender-based violence and the protection of children.

### **Operational support services**

**Human resources:** For this operation, the DRC RC plans to mobilize 200 volunteers, 5 supervisors (notably Hygiene Promotion, CEA, Psychosocial and First Aid) and 3 provincial coordinators (emergencies, health and psychosocial) through the branches of the Uvira committee.

**Logistics:** The logistics component of this operation is light. This is done on purpose to avoid delays in tenders and deliveries of goods. The SK branch of the DRC RC has what is necessary to carry out this operation. The Logistics of the IFRC based in Goma will intervene in support as much as necessary. As mentioned earlier, there is an ongoing contract with the FSP so there is no need to sign a new contract.

**Planning, Monitoring, Evaluation and Reporting (PMER):** The PMER team of the IFRC EVD operation will provide support to ensure proper PMER of this operation. A one-day lessons learned workshop will be held at the end of the operation. This workshop will bring together recipients of the assistance, local authorities, partners, volunteers, the management team and DRC RC officials. It will allow NS to evaluate the operation and gather learning for future operations.

**Communication:** To support volunteers in their mission as well as the visibility of Red Cross actions on the ground, DRC RC through this DREF operation will procure protection and visibility items for volunteers including Red Cross bibs, raincoats and gumboots. This will be in addition to a megaphone and 3000 IEC materials that will be produced to promote hygiene awareness and measures to protect families from transmissible diseases, including COVID-19.

**Finances and Administration:** The South Kivu branch has a financial service which has been strengthened by the various partners of the Movement, notably the IFRC through the preparedness component of the EVD operation which is still underway. For the implementation of this operation, it will benefit from the support of the IFRC, which has resources in eastern DRC, including 5 staffs in Bukavu (a finance officer, an IM officer and a CEA delegate). The IFRC also has a complete operational structure in Finance, Logistics and IM in the east of the DRC that will support this operation. In addition, the IFRC benefits from the presence within the framework of the EVD operation of several RDRTs including in Cash, Wash and others and a bouquet of skills in the management of DREF and disasters. This IFRC support is part of the EVD Preparedness program which specifically targets the province of South Kivu. This support will, therefore, be provided, not to the detriment of the EVD operation but, on the contrary, In addition, the DRC RC headquarters in Kinshasa and the IFRC in Goma and Kinshasa will provide all the necessary support so that administrative and financial monitoring as well as reporting are carried out correctly and on time.

**Security:** The security environment in South Kivu is affected by the presence of various rebel and militia groups, clashes among them, as well as between these groups and government and UN forces, particularly in the Fizi and Uvira territories. Sporadic but serious outbreaks of violence targeting civilians, including murder, rape, kidnapping, and pillaging, continue throughout South Kivu. Kidnapping for ransom is prevalent throughout many parts of the DRC. Although kidnapping victims are primarily Congolese nationals, there have been several abductions of foreigners. Most kidnappings occur in rural areas during overland travel in North and South Kivu. Major military operations are ongoing in the eastern DRC. The Congolese military continues to target the more than 100 small, armed groups throughout the country but focuses mainly on those operating in South Kivu as well as in other provinces. There are reports of serious clashes between Congolese Armed Forces and militia groups around Uvira in South Kivu Province. To reduce the risk of RCRC personnel falling victim to threats and risks, active risk mitigation measures must be 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).

The DRC RC enjoys a high level of acceptance within local communities. DRC RC has security protocols in place and these protocols will be followed. They include but are not limited to, staff tracking (e.g. via phone or SMS), pre-deployment security/safety briefs, situation monitoring, regular or ad hoc security/safety updates, etc.

IFRC staff that could get involved in this operation will follow the standing L3 agreement with ICRC and all relevant security measures.

## C. Detailed Operational Plan



### Livelihoods and basic needs

**People targeted: 15,000**

Male: Information not available now

Female: Information not available now

**Requirements (CHF): 308,027**

**Needs analysis:** Families had to leave their houses in a hurry and lost essential household items, food stock, etc. Houses were also destroyed by the floods.

**Risk analysis:** FSP will only deliver the cash assistance in local currency due to the lack of USD in-country following COVID-19 situation.

**Population to be assisted:** 3,000 affected and vulnerable households in Uvira.

**Programme standards/benchmarks:** Each household will receive 90 CHF in a one-off distribution. This amount was calculated based on various Minimum Expenditure Baskets used in South Kivu and taking into account the plans of other humanitarian agencies, to ensure consistency.

P&B Output Code	Livelihoods and basic needs Outcome 1: Communities, especially in disaster and crisis-affected areas, restore and strengthen their livelihoods	Number of households receiving cash grants (Target: 3,000 households)											
		<ul style="list-style-type: none"> <li>- Number of assessments conducted ( Target: 2)</li> <li>- Number of PDMs conducted (Target: 1)</li> </ul>											
P&B Output Code	Activities planned Week	1	2	3	4	5	6	7	8	9	10	11	12
AP081	Unconditional/multipurpose cash distributions.												
AP081	Vulnerability assessment to identify the target households and registration												
AP081	Post distribution Monitoring and satisfaction evaluation												
AP081	Market assessment to ensure market operate normally												



## Health

**People targeted: 15,000**

Male: Information not available now

Female: Information not available now

**Requirements (CHF): 13,151**

**Needs analysis:** Population in Uvira in need of First aid and PSS services

**Risk analysis:** Refer to the risk analysis section.

**Population to be assisted:** 15,000 people in Uvira

**Programme standards/benchmarks:** CBHFA first aid as delivered by DRC RC, PSS approach as implemented in the ongoing EVD operation.

P&B Output Code	<b>Health Outcome 2: The immediate risks to the health of the affected populations are reduced through improved access to medical treatment</b>	<i>Number of households reached with health intervention (Target: 3,000 households)</i>											
	<b>Health Output 2.3: Target population is reached with Search and Rescue activities</b>	<i>Number of volunteers providing first aid (Target: 180 volunteers)</i>											
	Activities planned Week	1	2	3	4	5	6	7	8	9	10	11	12
AP082	First aid teams deliver search, rescue and transport to health facilities												
AP082	Provision of First aid services throughout the implementation												
P&B Output Code	<b>Health Outcome 6: The psychosocial impacts of the emergency are lessened</b>	<i>Number of households reached with PSS services (Target: 3,000 households)</i>											
	<b>Health Output 6.1: Psychosocial support provided to the target population as well as to RCRC volunteers and staff</b>	<i>Number of volunteers trained in PSS (Target: 24 volunteers and 4 supervisors)</i>											
		1	2	3	4	5	6	7	8	9	10	11	12
AP023	Identification of and training for volunteers in psychosocial support												
AP023	Assessment of PSS needs and resources available in the community												
AP023	Provide PSS to people affected by the crisis/disaster												
AP023	Provide PSS to staff and volunteers												



## Water, sanitation and hygiene

**People targeted: 15,000**

Male: Information not available now

Female: Information not available now

**Requirements (CHF): 33,764**

**Needs analysis:** Please refer to the Risk analysis section.

**Risk analysis:** The displaced access to wash facilities is reduced due to the limited number of available facilities.

**Population to be assisted:** 15,000 people in Uvira

**Programme standards/benchmarks:** CEA standards in the ongoing EVD operation.

P&B Output Code	WASH Output 2.4: Hygiene promotion activities are provided to the entire affected population.	Number of people reached with WASH services (Target: 15,000 people)												
		Activities planned Week	1	2	3	4	5	6	7	8	9	10	11	12
AP030	Conduct baseline survey to define hygiene issues and assess capacity to address the problem.													
AP030	Select target groups, key messages, and methods of communicating with beneficiaries (mass media and interpersonal communication).													
AP030	Develop a hygiene communication plan. Train volunteers to implement activities from communication plan.													
AP030	Design/Print IEC materials													
AP030	Assess progress and evaluate results.													
AP030	Engage community on design and acceptability of water and sanitation facilities.													
AP030	Construct or encourage construction and maintenance of handwashing facilities in targeted communities.													

## Strategies for Implementation

**Requirements (CHF): 20,446**

P&B Output Code	S1.1: 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, competencies and capacities to plan and perform	Percentage of volunteers involved in the operation who understand their rights and responsibilities (Target: 100%)

<b>Output S1.1.4: National Societies have effective and motivated volunteers who are protected</b>		<b>Number of volunteers insured (Target: 200 volunteers)</b>											
Activities planned Week		1	2	3	4	5	6	7	8	9	10	11	12
AP040	Ensure that volunteers are insured												
AP040	Provide complete briefings on volunteers' roles and the risks they face												
AP040	Provide psychosocial support to volunteers												
AP040	Ensure volunteers are aware of their rights and responsibilities												
AP040	Ensure volunteers' safety and wellbeing												
AP040	Ensure volunteers are properly trained												
AP040	Ensure volunteers' engagement in decision-making processes of respective projects they implement												
<b>P&amp;B Output Code</b>		<b>Percentage of community feedback acted up (Target: 90%)</b>											
Activities planned Week		1	2	3	4	5	6	7	8	9	10	11	12
AP049	Ensure that the Principles and Rules, Emergency Response Framework and DREF procedures are well understood and applied												
AP049	Advocate for engagement with partner and operating NS on the promotion and use of the Principles and Rules												
AP084	Methods are put in place to ensure communities can participate in the response and influence decision-making												
AP084	Community communication activities ensure people are kept informed of operational plans and progress and have the information they need about the response												
AP084	Community feedback systems are established, and feedback acted upon and used to improve the operation												
AP084	Community engagement activities help to promote healthy and safe behaviour in relation to the identified risks and vulnerabilities												
<b>P&amp;B Output Code</b>		<b>Output S3.1.2: IFRC produces high-quality research and evaluation that informs advocacy, resource mobilization and programming.</b>											
Activities planned Week		1	2	3	4	5	6	7	8	9	10	11	12
AP064	Conduct a lessons learnt workshop												
AP065	Ensure translation of working documents for NS												

## Funding Requirements

The approved budget for this DREF operation is CHF 375,388 as detailed below:

International Federation of Red Cross and Red Crescent Societies

*all amounts in Swiss Francs (CHF)*

### DREF OPERATION

MDRCD030 - DRC - FLOODS IN UVIRA

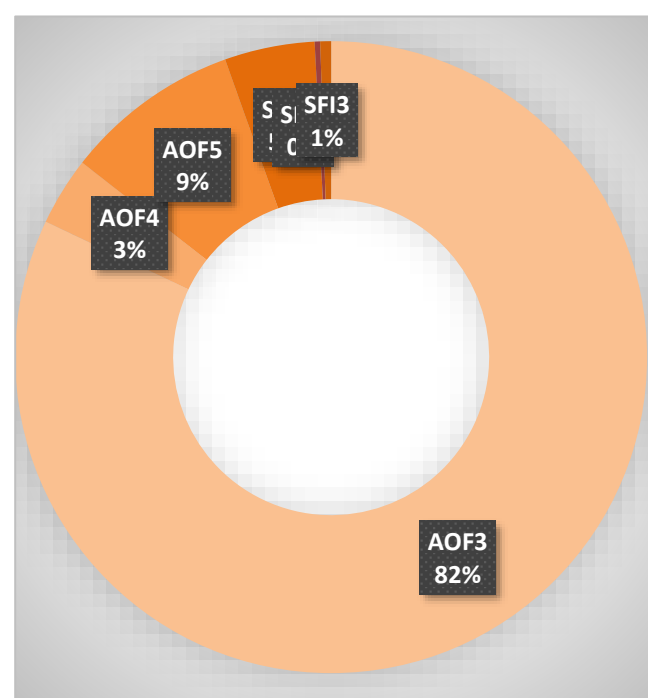
30/04/2020

#### Budget by Resource

Budget Group	Budget
Water, Sanitation & Hygiene	1,470
Medical & First Aid	657
Cash Disbursement	283,122
<b>Relief items, Construction, Supplies</b>	<b>285,249</b>
Transport & Vehicles Costs	3,038
<b>Logistics, Transport &amp; Storage</b>	<b>3,038</b>
National Society Staff	5,194
Volunteers	43,581
<b>Personnel</b>	<b>48,775</b>
Professional Fees	980
<b>Consultants &amp; Professional Fees</b>	<b>980</b>
Workshops & Training	7,536
<b>Workshops &amp; Training</b>	<b>7,536</b>
Information & Public Relations	3,567
Office Costs	980
Communications	2,352
<b>General Expenditure</b>	<b>6,899</b>
DIRECT COSTS	352,477
INDIRECT COSTS	22,911
<b>TOTAL BUDGET</b>	<b>375,388</b>

#### Budget by Area of Intervention

AOF3	Livelihoods and Basic Needs	308,027
AOF4	Health	13,151
AOF5	Water, Sanitation and Hygiene	33,764
SF11	Strengthen National Societies	17,315
SF12	Effective International Disaster Management	1,044
SF13	Influence others as leading strategic partners	2,087
<b>TOTAL</b>		<b>375,388</b>





30 April 2020  
FL-2020-000052-COD



## Democratic Republic of Congo: Floods DREF



The maps used do not imply the expression of any opinion on the part of the International Federation of Red Cross and Red Crescent Societies or National Societies concerning the legal status of a territory or of its authorities. Sources: GADM, HDX, DRC RC, IFRC.

## Reference documents



Click here for:

- 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.**