

# PROGRAMME UPDATE



International Federation of Red Cross and Red Crescent Societies  
Fédération internationale des Sociétés de la Croix-Rouge et du Croissant-Rouge  
Federación Internacional de Sociedades de la Cruz Roja y de la Media Luna Roja  
الاتحاد الدولي لجمعيات الصليب الأحمر والهلال الأحمر

## REPUBLIC OF CONGO

30 June, 2001

*This Programme Update is intended for reporting on Annual Appeals.*

*Appeal No. 01.08/2001*

*Appeal Target CHF 3,087,000*

*Programme Update No. 2; Period covered: April - June, 2001; last Programme Update (No. 1) issued 25 April, 2001*

### “At a Glance”

*Appeal coverage: 23.5%*

*Related Appeals: 01.07/2001 (Central Africa Regional Delegation)*

*Outstanding needs: CHF 2,362,397*

*Summary/Update: During the second quarter of the year, the Federation’s assistance programme for the Congolese Red Cross (CRC), continued to receive limited funding. Programmes and activities planned earlier this year were adjusted due to the severe lack of funds. A revised budget will be forthcoming. Despite the constraints encountered, the Federation has continued to undertake coordination efforts with the CRC and other partners (UNICEF, UNFPA, UNDP, WHO, OCHA) related to disaster response, health and care, and organisational development. Activities started during the first quarter were continued and concentrated particularly on assistance to the Cabinda refugees, the polio eradication vaccination campaign, women victims of sexual violence, and people affected by HIV/AIDS.*

### **The Context**

While political stability has been maintained and consolidated through the national dialogue conference in mid-April in Brazzaville, limited conflicts broke out in May between militia and government forces. The situation seems to have calmed and is otherwise stable. Tensions have been eased and hopes that relations between both Congos may improve. Despite the positive direction, the population’s needs still remain immense.

### **Operational Developments**

Over the past year progress has been made in rebuilding a civil society after the recent conflict, with a focus on economic elements (reopening of the railway between Brazzaville and Pointe-Noire), promoting the culture of peace, and the safeguarding of humanitarian values. There has also been a resumption of negotiations with the international funding agencies. The Congolese Red Cross (CRC), supported by the International Federation of Red Cross and Red Crescent Societies (Federation), has had to revise its assistance strategies because of a lack of funding. Work has concentrated mainly on four projects: the refugee operations in Pointe-Noire, the polio vaccination eradication campaign (separate appeal), the reproductive health programme, and the AIDS campaign. Because of the lack of funds, budgets are being reviewed, some severely reduced and some frozen

to focus on achievable activities. Increased collaboration between the national societies of the Democratic Republic of Congo Red Cross and the Congolese Red Cross has occurred in the last months and the sister societies are exchanging valuable experience and technical knowledge.

**Disaster Response and Preparedness (DR/DP)**

The national society continues to be responsive to small disasters thanks to the DR/DP training sessions which were held the previous year, concentrating particularly on community-based first aid (CBFA). The collaboration as an auxiliary to the local authorities is being increasingly recognised and the society was recommended for its intervention last quarter in the Dolisie train accident.

**Pointe-Noire, Cabinda - Rural & Urban refugees**

Having acquired greater autonomy, the assistance programme to refugees has been limited to strengthening the capacities of the refugees to take charge of their own lives, reducing their dependency on assistance programmes and preparing them for a possible return. As in the first quarter, the CRC and the Federation have focused on primary health care where there are still strong needs among the refugee population.

**Health, water & sanitation and sensitising activities**

A health and nutrition survey (see findings shown in the table below) list the most often occurring pathologies during the reporting period:

PATHOLOGIES (10 most current)	CHILDREN <5years		CHILDREN > 5 years		TOTAL	%
	female	male	female	male		
Malaria	5	10	23	13	51	31,67
Respiratory infections (high)	5	5			10	6,21
Respiratory infections (acute)		3	3		6	3,72
Bloody diarrhoea						
Non-bloody diarrhoea	1	7	2	4	14	8,69
Intestinal parasitosis		2	2	2	6	3,72
Urinary infections			1	2	3	1,86
Rhumatism			5	4	9	5,59
Gastroenteritis			3		3	1,86
Scabies	1				1	0,62
Other	5	8	32	13	58	36,02
Total	17	35	71	38	161	~100

Social mobilisation and IEC activities were organised and concentrated on family planning, sexually transmitted disease and HIV/AIDS and brought together 80 youths. Additionally, training of trainer activities were held in all three refugee sites (Kondi-Mbaka, Komi and Mavoadi) to strengthen the IEC activities. Two training sessions aimed at 50 people were held on water and sanitation. These focused on better hygiene and water delivery point maintenance. Some 30 people also attended prenatal care training for future mothers and their spouses. Basic and essential vaccinations were performed on the three sites and targeted infants, children and pregnant women.

**Increase the independence and self-sufficiency of the refugees in regard to food production and revenue generation, environment protection**

Women from the Kondi-Mbaka site merged with a cassava co-operative group and received basic tools from the Angola Consulate which allowed for more autonomy. Basic agricultural techniques are being regularly taught. All refugee families that want to start a market garden are allotted a piece of land of 20m2.

By means of transportation and logistics support, the CRC and the Federation assisted refugees in the programmes to increase independence and self-sufficiency in regard to food and revenue generation. Refugees have been driven between the refugee sites and the markets points where they sell the agricultural produce.

Various micro-projects that have been put at the disposal of the refugees have boosted their pride and confidence and allow them to take charge of their lives.

Re-forestation efforts are succeeding with trees (Acacias) that were planted in 1999 being monitored and cared for (these had been planted in order to protect the soil and diminish erosion).

### **Schooling of the refugee children**

A commission on grant finance subsistence assistance met in May to review 99 applications that had been received from the children of urban refugees. The commission awarded grants to 15 of the 23 applications (6 to the primary schools, 4 to the secondary levels and 5 to higher education levels - "Lycée Général et Technique et enseignement supérieur).

### **Strengthen operational capacities of the Congo Red Cross**

For over four consecutive years the CRC teams have been working with the refugee operation and have acquired the capacity in much of the requirements to be able to run most of the activities without support from the Federation. For the last two quarters of 2001, activities were planned to further concentrate and focus on eventual needs to reinforce and train the national society to take over the operation at the end of the year.

### **Health and Care:**

The position of health co-ordination for the Republic of Congo which was opened over a year ago has finally been filled and the Swiss Red Cross has put at the disposal of the Federation a health co-ordinator who arrived in Congo at the end of April. Health activities of the previous year and during the first quarter of 2001 had been running thanks to the expertise of the head of the health department of the national society, however these were hindered by the heavy work load and the lack of technical support expected by a Federation delegate.

### **Health and HIV/AIDS**

A draft project proposal has been drawn up with the national society and the Federation health co-ordinator and is awaiting the green light for implementation and funding during the next quarter. Some of the activities included:

- A co-ordination meeting held in May between the main actors engaged in the fight against HIV/AIDS, including the Federation and CRC, various international agencies and organisations involved discussions concentrating on a common programme defining roles and responsibilities in targeted areas of intervention and defining the target groups of each working partner. Efforts are being made to keep all implementing partners regularly informed on progress and developments.
- Surveys were conducted with implementing partners to obtain the latest figures of the affected population.
- The contract with the "Centre de Traitement Ambulatoire" (French Red Cross and CRC health centre project) was maintained, working with victims of HIV/AIDS in order to broaden collaboration and promote coaching and home visits to patients, promote peer education and IEC.
- the creation of community centres, support to cultural and sport activities, creation of theatre groups, training of parents of HIV/AIDS patients, radio and television social awareness shows, printing of campaign props (85,000 pamphlets distributed among the young population in Brazzaville) and the running of a youth camp.

### **Polio Eradication Campaign**

Thanks to a donation of radios by the ICRC and the active participation of a Telecommunication Delegate put at the disposal of the Federation for a little over a month to install five radio stations in Owando, Djambala, Kinkala, Dolisie Sibiti and Madingou. This communication network set-up was imperative to assist in the polio eradication campaign and focused also in training two volunteers in the use and maintenance of the equipment, this has reinforced the capacity structures of the national society and will help greatly in the implementation of the HIV/AIDS programmes as well.

The CRC and the Federation participated in the planning of the vaccination campaign in Owando, Brazzaville and Impfondo. Community awareness sessions, door to door visits, social mobilisation sensitising the community

and parents were held in neighbourhoods, schools, markets and in churches. In June the CRC volunteers have been actively involved with the Ministry of Health and WHO in setting up communications, plans of actions and co-ordination in preparation for the National Immunisation Days (NIDs) which took place during July and August 2001. Items such as megaphones, batteries, vehicles and tea shirts have been prepared for the event.

### **Community-based First Aid**

The regional ARCHI delegate spent 14 days during April to refresh the training sessions performed last year and reinforced the capacities of the volunteers so that all activities planned such as the Polio and HIV/AIDS programmes may be performed by capable volunteers.

### **Reproductive Health Programme**

The project in partnership with UNFPA has allowed the CRC to exercise its active role in the care of sexually abused women. Social mobilization activities in the fight for the prevention of STDs and HIV/AIDS, and sensitization activities have been held with 1,500 posters distributed and 50 banners set up in the six targeted localities. Some 79,600 out of the 1,036,600 condoms received from UNFPA were distributed in the health posts during the IEC sessions. Approximately 3,000 benefited from IEC sessions held in observation posts in Brazzaville, in markets, military camps, and churches in both Brazzaville and Pointe-Noire. Activities on medical-psychological support to abused women were also held during this reporting period (as a reminder, since October 2000, 329 women victims of sexual abuse have been registered in the Reference Centres and have been followed on a regular basis).

In the planned promotion of social reinsertion of women victims of sexual violence a plan on "Reinforcing Reproductive Health Services" with a focus on the care to the victims was drafted by the CRC and other partners and presented to UNFPA.

### **Organisational Development**

Funding has been a real obstacle in assisting the national society in running its provincial assemblies and assisting in the preparation of the General Assembly planned for the last quarter of the year. Plans and budgets were presented to the Federation by the CRC regarding the rehabilitation of damaged premises that can be used as offices for the Headquarters of the CRC and for the Federation Delegation. These have been reviewed and a priority is now focused in moving out of the currently rented offices and into the rehabilitated premises. The Federation will then be able to contribute to some of the core costs by paying a rent to the national society.

### **Conclusion**

Despite the fact that all partners concerned agree that the Federation's presence in the Republic of Congo is needed and valued, sister Red Cross and Red Crescent societies, apart from the United Arab Emirates Red Crescent, have not substantially contributed to support the CRC and Federation activities. As the political situation has stabilised, and according to the Seville Agreement, the Federation should have a more active role in supporting the national society in its rehabilitation efforts particularly in the health sector. Many plans and programmes reflected in the appeal 2001 have unfortunately not been able to take place due to a lack of funding and efforts have been concentrated mainly on locally funded activities, such as the refugee operation in Pointe-Noire funded by UNHCR and the Netherlands Red Cross and UNFPA's Reproductive Health Programme. Thanks to the global appeal on the Polio Eradication programme, funds allowed the planned NIDs to take place as planned. The CRC has organized a very ambitious fight against HIV/AIDS programme but funds are needed to start the planned activities.

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*All International Federation Operations seek to adhere to the Code of Conduct and are committed to the Humanitarian Charter and Minimum Standards in Disaster Response (SPHERE Project) in delivering assistance to the most vulnerable. For further information concerning*

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<b>Congo Republic</b>						ANNEX 1
<b>APPEAL No. 01.08/2001</b>		<b>PLEDGES RECEIVED</b>				10.10.2001
DONOR	CATEGORY	QUANTITY	UNIT	VALUE CHF	DATE	COMMENT
<b>CASH</b>						
REQUESTED IN APPEAL CHF ----->				<b>3'087'372</b>		<b>TOTAL COVERAGE 23.5%</b>
CASH CARRIED FORWARD						
AMERICAN - GOVT		80'000	USD	137'056	14.05.2001	
UNITED ARAB EMIRATES - RC		5'000	USD	8'140	20.02.01	REFUGEES IN CENTRAL AFRICA
UNHCR - 410(A)		1'732'998'687	XAF	406'388	13.03.01	
UNHCR - 400(B)		28'897'500	XAF	67'765	13.03.01	
SUB/TOTAL RECEIVED IN CASH				619'349	CHF	20.1%
<b>KIND AND SERVICES (INCLUDING PERSONNEL)</b>						
DONOR	CATEGORY	QUANTITY	UNIT	VALUE CHF	DATE	COMMENT
SWITZERLAND RC	DELEGATE			41'396	24.03.2001	HEALTH DELEGATE
NETHERLANDS	DELEGATE			64'230		
SUB/TOTAL RECEIVED IN KIND/SERVICES				105'626	CHF	3.4%