

# Annual report



International Federation  
of Red Cross and Red Crescent Societies

## DEMOCRATIC REPUBLIC OF CONGO

Appeal No. MAACD001

18/05/2011

This report covers the period from  
01/01/2010 to 31/12/2010



A Red Cross of DRC volunteer administers polio vaccine during the October - November 2010 mass immunisation campaign.

Photo: Red Cross of DRC

### In brief

**Programme outcome:** The IFRC 2010 support strategy and plan for the Red Cross of the Democratic Republic of Congo (Red Cross of DRC) was based on the National Society's (NS) 2009-2013 Strategic Development Plan and was designed to help the NS provide vulnerable communities with life-saving first aid, clean water and sanitation, health and hygiene promotion, HIV/AIDS support, sexual and gender based violence support, anti-discrimination and social inclusion services. Its intention was to build a solid basis for the development of bilateral programmes and also build and diversify partnerships with non-Red Cross stakeholders while strengthening the National Society's auxiliary role.

**Programme summary:** The services provided to vulnerable people by more than 10,000 Red Cross volunteers in 2010 focused on first aid and voluntary blood donation, disaster risk reduction, emergency preparedness and response (in conflicts, natural disasters and health emergencies), mother and child health, disease surveillance, HIV/AIDS, water and sanitation, food security and livelihood, protection of minority groups (Pygmies), sexual & gender based violence (SGBV) prevention and response, advocacy, international humanitarian law (IHL) and restoring family links (RFL).

In addition to the above, the Red Cross of DRC was actively involved in improving the national disaster management framework in the country. It supported the government to develop a national disaster response master plan (Plan ORSEC) and emergency funding mechanisms, harmonize disaster response tools and build the capacities of its technical departments through training and technical advice. Based on this, the Red Cross of DRC gained greater recognition from the

government and many stakeholders as a key partner with outstanding competencies in disaster management.

However, through intensive engagement with the National Society's leadership and volunteers and in coordination with Movement partners, a comprehensive review and reflection was conducted in relation to the relevance of the Red Cross of DRC programmes, methods and partnerships to the changing national context, its competitiveness and credibility. The aim was to further strengthen the image and the acceptance of the NS to enhance its auxiliary role (especially in disaster management) and diversified partnerships with local and international actors, including the private sector. The strategy included for the first time a more structured IFRC approach to the strengthening of the Red Cross of DRC's working relations with the media through the "club of journalist friends of Red Cross", building on the power of media to influence both decision makers and the actors including within the Red Cross itself.

Specific efforts were made towards longer term planning with increased programme reach and enhancing existing partnerships with donors such as Sida, DFID and GAVI as well as developing new working relations with the EU, USAID and ECHO. However, governance and financial management challenges faced by the National Society have so far prevented these efforts from leading to increased funding. Nonetheless the mandate and technical expertise of the Red Cross is being increasingly acknowledged by many of the above donors.

**Financial situation:** The original budget for 2010 was CHF 2,025,930, of which CHF 1,900,006 (94%) was covered during the reporting period, including opening balance. Expenditure overall was CHF 1,893,112, corresponding to 100% of available funding and 93% of the original budget.

[Click here to go directly to the financial report](#)

**Number of people we have reached:** It is estimated that in 2010, the Red Cross of DRC reached some 700,000 direct beneficiaries with the activities funded through the Federation.

**Our partners:** Multilateral financial support was received from Finnish, Irish, Netherlands, Norwegian and Swedish Red Cross Societies, and from the UK Department for International Development (DFID) and Swedish International Development Agency (Sida). Also, the Red Cross of DRC has also received bilateral support from, Belgian, Danish, Spanish, French and Italian Red Cross, Iranian or Red Crescent, ICRC, UNICEF, GAVI Alliance, the US Emerging Pandemic Threats programme and the Government of DRC.

## Context

In 2010, the government of DRC succeeded with support from its partners, especially MONUSCO, in restoring peace in Equateur Province which was shaken in November 2009 by ethnic violence and a subsequent rebellion which resulted in the internal displacement of hundreds of thousands of people and drew out of the country some 100,000 refugees to Congo Brazzaville. Peace returned slowly to many of the war-torn provinces in the East of the country, making it possible to organise voluntary repatriation of some 9,200 refugees to Katanga province while more than 1,000 other refugees were assisted to return to South Kivu province. At the same time more than 36,000 IDPs returned to their area of origin in North Kivu province. Furthermore the Government successfully completed negotiations with IMF, World Bank and other multilateral donors which resulted into 90% debt cancellation, representing about USD 10 billion. Alongside other successful funding negotiations with China, the debt cancellation has certainly played a major role in encouraging the government to embark on infrastructure and basic services development projects. Also a new national poverty reduction strategy paper (Document de la Stratégie de Croissance et de Réduction de la Pauvreté-DSCR) enhances the Government's efforts to move forwards to achieving the Millennium Development Goals (MDGs).

Despite the positive developments mentioned above, some negative highlights of the overall humanitarian situation in 2010 included:

- The persistence of fighting between the national army “Forces Armées de la République Démocratique du Congo” (FARDC) and rebel groups mainly the “Lord’s Resistance Army” (LRA) and the “Forces Démocratiques pour la Libération du Rwanda” (FDLR) in the East resulting in hundreds thousands of IDPs, reduced access to basic services for the affected population, inhuman behaviour such as the use of collective and individual rape as a means of war, and forced migration across the borders between DRC and Angola.
- Frequent natural and health emergencies including floods and mudslides, fire disasters, road accidents, boats capsizing, plane crashes, cholera outbreaks. In general, these emergency situations are caused by very high levels of poverty and low disaster risk awareness among the population, and nonexistent or inefficient national and local disaster management frameworks. Subsequently, human lives and livelihoods are permanently at risk in all parts of the country.
- The uncertainties created by the preparations for the second democratic presidential and parliamentary elections which are due in November 2011 and the discussions on possible amendments to the country’s constitution. The constitution was later amended. This has made the contest between the ruling party and the opposition even more uncertain. The elections will be held on 28 November 2011, the results announced on 6 December and the president elect will be sworn in on 20 December 2011.

More information on the humanitarian context can be accessed through the links below:

[http://www.ifrc.org/cgi/pdf\\_appeals.pl?annual10/MAACD00110p.pdf](http://www.ifrc.org/cgi/pdf_appeals.pl?annual10/MAACD00110p.pdf)  
<http://www.rdc-humanitaire.net>

As the overall social, economic and political situation slowly stabilizes, humanitarian and development aid is less and less channelled through the NGO system as Government institutions play greater roles in decision making and coordination. This shift in aid strategy provides solid grounds for promoting the auxiliary role of the Red Cross. To that effect, with support from the Federation, the NS has proactively positioned itself by enhancing its working relations with key line ministries for capacity building in disaster risk reduction, disaster preparedness and disaster response. It is already playing a key role in disaster related advocacy, preparedness and response.

However, due to weaknesses within the NS in decision making, implementation and quality control, coupled with donor driven reporting requirements and staff turnover as a result of non-competitive working conditions, the operational alliances could not be finalised. Therefore, during the reporting period the Federation organisational development support to the NS prioritized activities to mitigate the impact of these weaknesses. Well qualified staff were recruited into senior management positions and the HR management framework improved. This included developing staff regulations and employee remuneration procedures. Furthermore financial and performance audits were conducted and the findings serve as the basis for the development of a plan of action to enhance the NS’s finance and administration functions. This was further transformed into a more comprehensive recovery plan for the National Society early in 2011.

## Progress towards outcomes

### Disaster management

#### Outcomes

- Improved Red Cross of DRC disaster preparedness and response framework that enables efficient early warning/early action in disaster situations (natural or technological disasters, conflicts, epidemics).

- Enhanced national Disaster Management Committee (NDMC) to provide effective and efficient disaster response coordination through the formulation of a national disaster response plan (Plan ORSEC).
- Enhanced resilience of individuals and communities to public health emergencies and disasters.
- Improved resilience of 5,000 households affected by food insecurity in 2 districts of Maniema Province through Food security Community Based Program as long term sustainable development strategy.

## Achievements

In 2010 the Red Cross of DRC further strengthened its disaster response mechanisms by training additional 22 National Disaster Response Team (NDRT) members, drafting a disaster management policy, enhancing standard operating procedures and increasing warehousing capacities by building a 15m<sup>3</sup> warehouse in Kinshasa. Currently, the disaster response human resource base of the Red Cross of DRC comprises 10 Regional Disaster Response Team (RDRT) members, 51 NDRT members and 114 Provincial Disaster Response Team (PDRT) members. They are supported by 25 permanent emergency task force members and about 50,000 trained first-aid volunteers. In addition, 7 emergency response teams (brigades) comprising 270 first-aid volunteers and 14 first-aid team leaders were trained and equipped as part of Red Cross of DRC EW/EA mechanism, especially for cross border population movements between Angola and DRC. These EW/EA teams send timely information bulletins to the Headquarters. They also regularly provide first-aid and RFL services to both Congolese and Angolan populations affected by forced migration across the border.

Registration of about a thousand of the most active volunteers started towards the end of 2010 with a view to creating the National Society's Disaster Response volunteers' database and of contracting insurance coverage through IFRC for the most frequently used volunteers in times of emergencies. With support from IFRC and ICRC, the NS have at their disposal stocks of non-food items (NFIs) to enable them provide timely response to the needs of up to 2,000 disaster and/or conflict affected households. Despite prepositioning of small strategic stocks in a few provinces, huge distances and weak transport facilities have impeded the timely delivery of emergency items where they are needed.

Working toward a better disaster management framework in the country at the request of the Minister of Home Affairs and the Minister of Social Welfare and Humanitarian Affairs, the Red Cross of DRC supported by the Federation provided financial and technical support and hosted 15 meetings of an interministerial technical working group on the preparation of a national disaster management plan framework and plan (Plan ORSEC). A final draft of the ORSEC plan supported by three draft laws was prepared by the working group and is being analysed at cabinet level. They will be circulated to major stakeholders in the coming weeks. Also, the Red Cross trained 50 government officials from 6 ministries in emergency needs assessment methodology in two separate workshops. Apart from transferring skills, knowledge and experience, the ultimate aim is to harmonize and enhance emergency needs assessment methodologies and tools in the country. Feedback from the various ministries confirmed that the training was useful and timely as it gave government officials adequate skills and tools for disaster needs assessment. Harmonising assessment tools across the key ministries, the Red Cross and other partners is still to be achieved.

To adequately plan food security interventions in Maniema province, the Red Cross of DRC conducted a VCA in Kailo area (21,749km<sup>2</sup>; 203,000 inhabitants; 75km from Kindu the provincial capital). Based on the findings of the VCA, a sample of 150 most vulnerable households were selected and supported with seeds, tools, training and follow up support to pilot the Red Cross of DRC food security strategy in the area. Based on the lessons learnt a more comprehensive plan of action was to be developed and implemented including 2011 but this was delayed by the lack of funding and a serious road accident involving the DM coordinator who was incapacitated for more than four months.

To ensure sustainability of the Food Security programme implemented in Dumi (Kinshasa province) by the NS in partnership with Spanish Red Cross and EuropeAid, the Federation supported the

rehabilitation of farming machines. The Food security programme in Dumi benefited 21 farmer associations with a total membership of 439 people (239 women and 200 men).

Seen from the angle of humanitarian diplomacy, the disaster management programme of the Red Cross of DRC has induced positive government steps towards the creation and/or restructuring of disaster management and mitigation units at both provincial and national level: for example the interministerial working group on national disaster management master plan (Plan ORSEC) in Kinshasa, the Civil Protection Unit in North and South Kivu. It has also encouraged government in developing mechanisms to ensure emergency disaster response funds in some provinces, e.g. the parliamentary decision to introduce disaster emergency taxes in North Kivu. Strategic partnerships are also being discussed with OCHA and USAID (RESPOND project) to ensure a timely and coordinated response to small scale disasters and for effective community-based disaster risk reduction in communities most at risk of natural disasters and epidemics.

## Health and Care

### Outcomes

- Healthier communities that are able to cope with health and disaster challenges through Red Cross of DRC community based health and first-aid (CBHFA) activities.
- Reduced number of injuries and deaths from accidents through Red Cross of DRC emergency first aid and commercial first-aid interventions.
- Increased voluntary blood donation awareness and adequate safe blood supply through Red Cross of DRC interventions.
- Adequate and sustainable access to safe and clean drinking water and sanitation for 100,000 people in two provinces.

### Achievements

The National Society enhanced its capacity to support community based health initiatives by conducting its first training of trainers' workshop in CBHFA. 280 staff and volunteers from the headquarters and the 11 branches were trained and equipped with CBHFA tools. These volunteers further organised CBHFA activities in communities across the country. Preparation of comprehensive statistics on this community-based work is still under way, and the volunteers focused mainly on first aid, disease surveillance, hygiene promotion and sanitation, and social mobilisation.

To further develop the PIC strategy (Programme Initiative Congo), the Red Cross of DRC started in 2010 to develop and pilot test an integrated approach to HIV/AIDS and CBHFA in Bas-Congo province. Key to this new approach was the training of CBHFA trainers, HIV/AIDS and CBHFA thematic VCAs, joint planning with the Ministry of Health, NGOs and beneficiary groups, and the development of skills for the conduct of KAP surveys. In doing so, the Federation CBHFA toolkits were tested in the field. Furthermore, the toolkit was shared with the technical departments of the Ministry of Health and partners such as USAID. Discussions were held to explore the feasibility of adapting the CBHFA manual and toolkit to the national context, thus developing it into national standardized tools for community-based health programming in the country. This needs further follow up.

Health activities conducted in 2010 also included joint Polio and Malaria campaigns with the Ministry of Health, WHO, UNICEF and other partners. During the Polio campaign in October and November 2010, in addition to conducting routine mass sensitization activities in tandem with other community actors, 1,000 Red Cross volunteers succeeded in mobilizing a total of 10,350 children who otherwise would have missed their vaccinations in 25 health districts from three provinces (Maniema, Kasai Occidental and Kasai Oriental). This represented 82% of the total of such children mobilized by all the community volunteers during the campaign, and demonstrated the unique added value of Red Cross volunteers to public health activities at community level.

Another 1,000 Red Cross volunteers (755 male and 255 female) were deployed for the mass distribution of ITNs in 10 health districts in Bandundu province in December 2010 and January 2011.

Alongside other stakeholders, these volunteers participated in the distribution of 790,000 nets to 268,745 households. Distinct from other organisations, the Red Cross volunteers opted for additional hang up activities which will be followed by a larger CBHFA programme in two out of the ten health districts. The hang up and CBHFA elements were planned to be implemented in 2011 and are currently ongoing.

Red Cross volunteers were also involved in the prevention of and response to HIV/AIDS and H1N1 pandemics. During 2010, they conducted sensitization activities in schools, government institutions and market places in the cities most at risk in Katanga and South Kivu, reaching 85,500 people with prevention and control messages. Demonstration of safe hand washing was conducted with pupils in targeted schools.

While working on the integrated HIV/AIDS and CBHFA project to commence in 2011 in Bas-Congo, the National Society continued implementation of HIV/AIDS projects in Kinshasa and Bas-Congo provinces. Red Cross volunteers carried out peer education activities reaching 4,984 youths (2,684 girls and 2,300 boys) as well as 1,492 pregnant women, 2,976 truck drivers and 2,940 sex workers. Also, they oriented 200, 108 sex workers and 152 pregnant women for voluntary counselling and testing. In addition some 5,700 condoms were distributed.

Commercial first aid and voluntary blood donation activities were also conducted in 2010 by the Red Cross of DRC in 2010. The statistics of the NS show that 1,200 packs of blood were donated by Red Cross volunteers while some hundred employees from three embassies and three companies benefited from the commercial first aid programme in Kinshasa. Other commercial first aid services were carried out in some provinces but related statistics have not yet been compiled. Commercial first aid activities did not benefit from financial support from the Federation due to lack of funding.

With funding from Swedish Red Cross, UNICEF and the Ministry of Planning, 120 Red Cross volunteers conducted a door-to-door cholera awareness campaign and water chlorination at water collection points in the city and surrounding villages. This benefited 18,400 households (82,600 people among whom 17,800 male, 35,600 female, and 29,200 children) who were sensitized in hand washing, water treatment and conservation, personal and household hygiene. Kalémie is known to be the major source of cholera outbreaks in DRC, but thanks to the work done by Red Cross volunteers and other community animators, the prevalence and lethality rates are becoming less and less alarming. This was particularly the case during the 2010 outbreak where the city accounted for only 5 cases over the 748 cases recorded throughout the province (<http://www.rdc-humanitaire.net>).

IFRC in partnership with the Red Cross of DRC and Swedish Red Cross submitted a 3-year proposal to the EU targeting the water facility grant to provide water and sanitation services to the population in Kalémie (Tanganyika district in Katanga province) but was unsuccessful in the bid.

## Organisational Development/Capacity Building

### Outcomes

- Effective and empowered Red Cross of DRC leadership, governance and management.
- Effective and efficient planning and implementation of community based activities by Red Cross of DRC branches and their volunteers.
- Enhanced Red Cross of DRC (branches and headquarters) fund-raising and resource mobilisation capacity.
- Enhanced Red Cross of DRC capacity to manage increased number and volume of programmes and partnerships (operational alliances).

### Achievements

The management team of the Red Cross of DRC was further strengthened with the replacement of the Secretary General and two Directors (OD and Communication) by more qualified and experienced professionals. A bilingual reporting officer was also recruited. The new staff brought into the National

Society not only their proven professional expertise, but also new ways of strengthening working relations with colleagues and stakeholders which boosted team work and team spirit. To maximise the benefit of these changes, the organisational chart at the headquarters is being reviewed with a view to enhancing complementarity, performance and cost efficiency.

In 2010 the Red Cross of DRC further developed their participatory assessment and planning capacities. Following the training of the national VCA team in 2009 with technical support from WFP VAM facilitators, the team conducted 7 comprehensive thematic VCAs and participatory planning in different locations in the country. This resulted into better planned long term community based projects such as the integrated HIV/AIDS and CBHFA project in Bas-Congo province; the disaster risk reduction and malaria prevention projects in Bandundu province ( Maidombe districts); the food security and livelihood project in Maniema province (Kailo district); water and sanitation projects in Katanga province (Kalemie in Tanganyika district); the Pygmies social integration and empowerment project in Equateur province. It should be noted that adequate funding for most of these projects is yet to be raised.

The management team at the NS' headquarters also developed greater understanding and practical skills in the use of the logical framework and long term impact based planning. This was demonstrated by the development of three-year project documents mentioned above.

Furthermore, training and coaching as well as general technical and financial support were provided to the Governing Board and branch committees on specific governance issues such as the revision of the Constitution, the review of the implementation of the strategic development plan, the conduct of statutory meetings and the follow up of their decisions, open discussions on integrity issues. Also, the Federation facilitated joint meetings and networking between the NS top leadership (the president, secretary general and programmes coordinator) and OCHA, USAID, Sida, DFID, EU and government officials. This resulted in increased acknowledgement by key partners of the potentials of the NS and the value the Red Cross can add to the humanitarian and the development agenda in DRC at strategic and programme levels. The NS was registered into the EU partners identification database (PADOR).

In many ways, the most important achievements of the OD programme in 2010 were the conduct of the external financial and performance audit and the furthering of the integration process. The integration process resulted into putting more IFRC financial and HR resources at the disposal of the NS (IFRC salary costs drastically reduced while the total salaries paid to the National Society staff increased) and enhancing 'learning by doing' by the staff of the National Society. Though some challenges were faced throughout the process, integration is undoubtedly the way forward in the quest to build the National Society.

The findings of the audit by STRONG-NKV (covering the 2007 and 2008 accounts, programmes implementation, decision making and internal control systems) offered the opportunity to engage the NS leadership in substantive and constructive discussions on issues related to performance and relevance, accountability, transparency, integrity and leadership styles. These discussions lead towards developing a comprehensive financial and HR development plan that would result in greater credibility and competitiveness of the NS, and in renewed donor confidence and trust. The main focus was placed on enhancing the NS chart of accounts, bringing it closer to national standards, and introducing NAVISION accounting software. Key in this process was the improvement of staff regulations (recruitment, training, appraisal, rewarding, termination, welfare etc.) and the identification and exploration of tailored leadership development avenues for governance and management teams, staff and volunteers. In 2011, with support from Swedish Red Cross and other Movement partners, the initial plan further evolved into a more comprehensive recovery plan which is seen as an important milestone in the development of the NS.

While the governance challenges faced by the NS have a real impact on donor support, it is anticipated that successful implementation of the recovery plan would help to regain donor confidence and trust.

# Humanitarian Values

## Outcomes

- Gradual behaviour change of target population in respect for the Fundamental Principles and Humanitarian Values.
- Fundamental Principles and Humanitarian Values are integrated in Red Cross of DRC operations and programmes.
- Scaled up and expanded Red Cross of DRC SGBV planning and implementation.
- Reduced stigma and discrimination against Pygmies in Equateur and Kasai provinces through scaled up and expanded anti-discrimination programming.

## Achievements

Dissemination of the seven Red Cross and Red Crescent Fundamental Principles and of Humanitarian Values has been carried out in all provinces. However the NS continues to face challenges in capturing related statistics, especially in terms of increased acceptance and access for the NS and reduced intolerance, discrimination and violence in the general population (and among the various interest groups) as a result of Red Cross/Red Crescent action. To overcome these challenges, the NS recruited a professional communication team that is working in tandem with the Africa Zone Humanitarian Diplomacy team, towards developing and disseminating assessment, reporting and other tools. The NS also improved dissemination of IHL through further restructuring of the disseminators' networks.

To mainstream gender in programming, the NS's head of gender and development division benefited from an on-line training on the "Theories, concepts and basic tools of Gender and Development" at the University of Geneva and a training in Dakar. This was followed by a national gender seminar in Kinshasa where 22 heads of gender and OD units from all 11 provinces discussed ways of enhancing gender based approach in implementation strategies across all programmes. In this view, the NS further enhanced its network of mothers' clubs as agents of change throughout the country to improve participation of female associations in programming as well as decision making processes throughout organization. Currently there are 160 mothers' clubs with a total membership of more than 4,000 people in the country. They undertake mother and child health activities, general community awareness, income generating activities aiming to establish community based health promotion funds, hygiene promotion and diseases surveillance.

As mentioned in the 2009 final report, the Red Cross of DRC with support from the Federation developed a 4-year water and sanitation and social integration project to be implemented from 2010 in areas with high concentration of Pygmy populations in Equateur province. Unfortunately implementation of this project could not start due to serious management and governance issues in the provincial Red Cross committee. Nonetheless, as a continuity of 2009 activities, the NS mobilized a team from the headquarters to the village of Bogonde in February 2010 to implement social integration activities that brought together the majority Bantus and the minority Pygmies around shared social services and infrastructures. Thus hygiene education and environmental clean-up campaigns were conducted and benefitted 7,000 people, 53% of whom are Bantus and 47% are Pygmies. Demonstration of the construction of VIP latrines was also done with some 37 families (400 people both Bantus and Pygmies). While looking for sustainable solutions to the malfunctioning of the provincial committee in Equateur province, the NS has embarked on identification of projects that would improve the living conditions of Pygmies in Kasai Occidental and Kasai Oriental provinces. These projects will form part of the revised 2011 plan of action.

Under the sexual violence programme in North and South Kivu provinces, Red Cross volunteers received and provided psychosocial support to more than 3,200 women in 2010 and about 3,000 of them were referred for appropriate medical care, socio-economic integration or legal support. Also, SGBV prevention messages were delivered to some 100,000 people including information on related national law.

Learning from the experience in North and South Kivu, the Red Cross of DRC subsequently decided to expand the SGBV programme to Kinshasa province. This will be supported by Spanish Red Cross.

Table 1: Comparative statistics of the VSV programme

	Jan-Dec 2009	Jan-Dec 2010
Number of women received and counselled in counselling centres	1,671	3,266
Number of women referred (within 72 days or after)	311	1,028
Number of women assisted with transportation to referral centres	0	1,775
Number of women assisted with successful social integration activities (mediation and income generating activities)	363	1,711
People reached through awareness raising campaigns on SGBV social, medical and economic consequences and national legislation	57,000	101,500
Vulnerable women and children assisted with Food and NFIs	298	1,188

## Working in partnership

In 2010, Movement coordination was enhanced through more thematic meetings, joint assessment and planning events allowing better understanding of the humanitarian context and complementarity among the components of the Movement. The initiatives also proved useful in designing harmonised approaches in support to the National Society on key institutional and programmatic challenges faced, and in promoting the identity of the Movement.

The Red Cross of DRC is member of the GAVI Alliance and actively contributes to routine vaccination in the country. As part of the CSO advocacy network, the National Society made positive contributions to the successful discussions between the government and donors on finance management issues.

The National Society maintained and further developed close collaboration with many line ministries, especially the Ministry of Health, the Ministry of Interior (Civil Protection Unit), the Ministry of Social Welfare and Humanitarian Affairs, the Ministry of Agriculture and the Ministry of Environment. Also, Red Cross volunteers continued to participate in various cluster meetings at national and provincial level, despite the fact that the National Society was restricted in its access to the pooled fund due to misuse of UNDP funds by one branch in 2007.

A most effective example of strategic partnership development was found in the joint activities between the Red Cross of DRC (supported by IFRC) and the US Emerging Pandemic Threats programme in the area of community disaster risk reduction and response, using the “One Health” and Red Cross/Red Crescent CBHFA tools.

## Contributing to longer-term impact

The Red Cross of DRC makes steady efforts towards long term impact-driven programming in all sectors. Though no structured methodology is yet in place to adequately capture and quantify the contribution of the Red Cross of DRC to the attainment of the Millennium Development Goals, assessing vulnerabilities and capacities at every step of programming still makes it possible to focus on elements of community and household vulnerability. This ensures the relevance of the programmes and their effective contribution to national efforts to reduce poverty and contribute to the other Millennium Development Goals by ensuring safer living conditions and building resilience of the

population to social, economic, technological and natural shocks. It is hoped that through its active participation in the pilot phase of the Federation-wide reporting system (FWRS), the NS will acquire the necessary skills to be able to adequately capture and report on the impact that the Red Cross is making on the achievement of the MDGs in the country.

Through the training of government officials in disaster management and supporting national authorities in the formulation of the national disaster response master plan (ORSEC plan), of sector or hazard specific emergency response plans, and of community based disaster risk reduction initiatives, the Red Cross of DRC has strengthened its unique position as auxiliary to the public authorities. Thus the NS has strategically positioned itself as a key player that could and should engage national and provincial authorities on issues addressed through humanitarian diplomacy, especially the enacting of International Disaster Response Law (IDRL) and the Hyogo framework for action on climate change and climate adaptation.

From a wider organizational development perspective the slow but positive steps undertaken by the Red Cross of DRC will, if consolidated, transform the NS into a credible and key national humanitarian organization whose role will be fundamental in the transition from the emergency phase to post-conflict recovery and development phase in the country. In this view, it is important to fully support the NS recovery plan.

## Looking ahead

The trends show that more capacity building demands will be placed before the Red Cross of DRC and IFRC by the government and other partners, both in disaster management and community based health programming. In view of this, the NS and IFRC should strategically increase their training and facilitation capacities to be able to meet the needs.

The new Red Cross of DRC senior management staff has potential to achieve high performance if it is adequately supported with improved HR framework and cost effective learning opportunities. However, a lesson learned during the process of developing the recovery plan was that the leaders of the NS do not fully comprehend the implication of their endeavours and behaviours for the integrity of the Movement. It is therefore important to focus more on leadership development in Red Cross context throughout the NS and, where possible, put in place one-to-one coaching mechanisms for those who are in key governance and management positions. Amongst the solutions foreseen was the registration of the leaders of the NS on the Federation e-learning platform and the subsequent improvement of IT facilities at headquarters. To complement this, technical skills in coaching for Federation staff need to be strengthened.

As potential partnerships and funding opportunities with donors such as ECHO, EuropeAid and USAID will likely materialize as a result of successful completion of the recovery plan, the PMER capacity of the Red Cross and the NS' finance management systems will attract more attention from the IFRC country representation. This will include among others the recruitment of an expatriate programmes coordinator with sound PMER skills and experience.

In preparation for the general elections in 2011, the NS will enhance its preparedness capacities by formulating contingency plans for the districts most at risk, with IFRC and ICRC support. This will involve among other things negotiating strategic arrangements with key players, training and networking for emergency first-aid teams, prepositioning of emergency relief materials and stocks. IFRC started discussions on possible funding arrangements with ECHO in Kinshasa; if the negotiations are successful, plans will be finalised in 2011.

The recent world economic crisis coupled with the decentralization of financial decisions by key donors has resulted in PNS having less and less access to funding in their own countries. As funding becomes available in DRC, IFRC country representation will take a step further in supporting PNS by assessing with them the opportunity to use Federation global agreements with donors to attract funding for bilateral PNS support to the Red Cross of DRC. This will involve mapping of funding

sources and identifying what is possible and what is not in relation to accountability-related risks for the Secretariat. This will also involve negotiating and implementing integration or service agreements or other partnership modalities with increasing numbers of PNS working bilaterally. IFRC needs to enhance its capacities in DRC to that effect.

<b>How we work</b>	
<p><b>All Federation assistance seeks to adhere to the <a href="#">Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGOs) in Disaster Relief</a> and is committed to the <a href="#">Humanitarian Charter and Minimum Standards in Disaster Response (Sphere)</a> in delivering assistance to the most vulnerable.</b></p>	
<p>The IFRC's vision is to:</p> <p>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.</p>	<p>The IFRC's work is guided by Strategy 2020 which puts forward three strategic aims:</p> <ol style="list-style-type: none"> <li>1. Save lives, protect livelihoods, and strengthen recovery from disaster and crises.</li> <li>2. Enable healthy and safe living.</li> <li>3. Promote social inclusion and a culture of non-violence and peace.</li> </ol>
<b>Contact information</b>	
<p><b>For further information specifically related to this operation please contact:</b></p> <ul style="list-style-type: none"> <li>• In <b>DRC</b>: Prof. Shutsha Ya Dingenga Real, Secretary General DRC Red Cross Society, email: <a href="mailto:sgcroixrougerdc@yahoo.fr">sgcroixrougerdc@yahoo.fr</a>; phone:+243 998 225 214; Dominique Lutula, president DRC Red Cross Society, e-mail: <a href="mailto:prsidentcrrdc@yahoo.fr">prsidentcrrdc@yahoo.fr</a>; phone:+243 999 926 823</li> <li>• In <b>DRC</b>: Yawo Gameli Gavlo, Federation Representative in DR Congo, Kinshasa, email: <a href="mailto:yawogameli.gavlo@ifrc.org">yawogameli.gavlo@ifrc.org</a>; phone: +243 818 801 400 / +243 998 011 801</li> <li>• In <b>South Africa</b>: Dr Asha Mohammed, Federation Head of Operations for Africa Zone, Johannesburg, email: <a href="mailto:asha.mohammed@ifrc.org">asha.mohammed@ifrc.org</a>; phone: +27 71 876 8745</li> </ul>	