

# OPERATIONS 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

## ***DEMOCRATIC REPUBLIC OF CONGO: CHOLERA IN SOUTH KIVU***

3 October 2005

*The Federation's mission is to improve the lives of vulnerable people by mobilizing the power of humanity. It is the world's largest humanitarian organization and its millions of volunteers are active in over 181 countries.*

### **In Brief**

**Appeal No. 05EA004; Operations Update no. 2; Period covered: 24 March to 20 June 2005; Appeal coverage: 105.7%;** ([Click here to go directly to the attached Contributions List, also available on the website.](#))

#### **Appeal history:**

- **Launched on 24 February 2005 for CHF 285,000 (USD 217,000 or EUR 167,700) for four months to assist 200,000 beneficiaries.**
- **Disaster Relief Emergency Funds (DREF) allocated: CHF 50,000.**
- **This Operations Update extends the Operation's timeframe until 24 August 2005.**

**Outstanding needs:** N/A

**Related Emergency or Annual Appeals:** Democratic Republic of the Congo 2005 Annual Appeal no. 05AA035 – [http://www.ifrc.org/cgi/pdf\\_appeals.pl?annual05/05AA035.pdf](http://www.ifrc.org/cgi/pdf_appeals.pl?annual05/05AA035.pdf)

**Operational Summary:** The cholera epidemic which first hit South Kivu in 1998, reached its peak early this year with an average of 300 cases per week. The [Red Cross of the Democratic Republic of the Congo](#)<sup>1</sup> has continued activities since the onset of the epidemic in Bukavu and in Uvira and Fizi territories which are among the most affected areas nationwide.

Consequently, 350 trained volunteers sensitized more than 16,000 people on hygiene promotion and community-based cholera monitoring. In addition, 128 other volunteers chlorinated about seven million litres of water at household level in Bukavu, Uvira and Fizi cities. These Red Cross activities greatly reduced the number of cases within the last weeks. A strong indicator that the situation is under control is the absence of new cases since the epidemic was first reported in January in Bukavu. Furthermore, the affected communities have a better understanding and attitude in the implementation of actions against cholera.

It will be useful to continue actions for two more months to consolidate activities undertaken and allow soft transition to development context.

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<sup>1</sup> Red Cross of the Democratic Republic of the Congo – <http://www.ifrc.org/where/country/check.asp?countryid=187>

## Democratic Republic of Congo: Cholera in South Kivu; Appeal no. 05EA004; Operations Update no 2.

*All International Federation assistance seeks to adhere to the Code of Conduct and is committed to the Humanitarian Charter and Minimum Standards in Disaster Response in delivering assistance to the most vulnerable. For support to or for further information concerning Federation programmes or operations in this or other countries, or for a full description of the national society profile, please access the Federation's website at <http://www.ifrc.org>*

### Background

This year, there was a particularly notable rise in the number of cholera cases in the cholera-endemic South Kivu, with figures reaching 300 cases per week. The epidemic- the worst since 1998- spread all over the South Kivu province, particularly Bukavu, Uvira and Fizi.

After conducting an initial assessment, the Red Cross of DRC- through its provincial committee- actively engaged itself to provide support to cholera treatment centers implanted in the province for disinfecting and up keeping. It also embarked on community sensitization on basic hygiene and sanitation rules and on water chlorination at provision points at Bukavu, Uvira Fizi and their neighborhood.

The national society and the Federation discussed the possibility of strengthening their efforts at community level, in accordance with the Congo Initiative Programme (PIC) process, an action strategy of the Red Cross of DRC, which aims at the grass root community training for their overall self-care.

### Operational developments

This year's cholera epidemic in the DRC appeared to be more critical than ever before. In Bukavu city, the number of cases has however reduced from 57 recorded on the 15th week, to 11 cases on the 21st week finally to zero during the 24th epidemiological week. Even so, the high level of crime in all the major cities, including Bukavu, has exacerbated the unstable security situation in the South Kivu province. In addition, the arrival of soldiers in the mixing centre aggravated the already precarious access to potable water and health care in Luberizi (a territory of Uvira). There is an estimate of 5,500 people in the affected community with no appropriate reception facilities. The return of refugees is still in progress and more persons arrive regularly in the reception centres set up in Uvira and Fizi territories.

The national society set up a community sensitization mechanism of proximity (in accordance with the PIC process) and epidemiological surveillance after the deployment of 128 trained chlorine users (28 in Bukavu, 80 in Uvira and 20 in Fizi). Earlier, it had briefed 430 volunteers on the key message concerning the struggle against cholera. The volunteers carried out sensitization campaigns in markets, schools, churches and other public places.

The Red Cross of DRC created 35 operational teams to sustain the struggle against cholera in the 20 Bukavu communities and in 15 of the most affected villages of Uvira and Fizi. The teams are responsible for the follow up in the implementation of the community activities against cholera. The actions the teams are involved in include the spread of educative messages, hygiene and sanitation activities as well as identification of basic sanitation needs in water quality control and clean toilets.

## Red Cross and Red Crescent action - objectives, progress and impact

### Health and care

#### **Objective 1: The treatment of people affected by cholera is reinforced in cholera treatment centres (CTC's)**

The national society sustained the activities of the 18 volunteers (two per each of the nine operational CTC's) deployed alongside the medical team. The volunteers participated in the disinfection of items used by affected persons and the vehicles used to transport them to the CTC's. The volunteers also controlled access to the CTC by ensuring disinfection of shoes and hand washing of visitors (during entry and exit), and sensitization of those in charge of the sick and the visitors. So far, no serious case of contamination has been reported within the CTC's.

Provision of two kits to the operational CTC's in Bukavu (within the framework of the Federation's support to the Provincial Health Inspection of South Kivu) is in the pipeline.

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### **Objective 2: A community-based cholera epidemic monitoring and early alert system is put in place.**

The Red Cross of DRC constituted an operational team, comprising of seven community members and three national society volunteers, in each of the 20 Bukavu communities and 15 of the most affected villages of Uvira and Fizi. In total, there are 35 teams made up of 245 community volunteers and 105 volunteers from the national society. These teams carry out the community-based monitoring of the cholera epidemic.

The national society also organized two cholera training sessions (transmission mode, fighting and preventive measures, and early detection and communication techniques) in favour of 62 leaders of the constituted operational teams. 44 of the leaders were from the community while 18 were from the local branch of the Red Cross of DRC.

## **Water and sanitation**

### **Objective 3: Good personal and environmental hygiene practices are promoted.**

Through 350 trained volunteers, the national society has sensitized more than 16,000 people on hygiene issues in Bukavu, Uvira and Fizi.

### **Objective 4: Access to water and basic sanitation is improved.**

The Red Cross of DRC organized the chlorination of 7 million litres of water to the benefit of 170,000 families. 128 volunteers were involved in chlorine water processing in 37 watering points in Bukavu, Uvira, Sange, Bakara and Fizi. The number of cholera cases has notably decreased. The operational teams were equipped with WatSan equipment/materials and transport means. The materials include:

#### *Sanitation material*

50 wheel barrows	150 spades	Mattresses
50 cartons of soap	150 machetes	Blankets
150 hoes	100 rakes	500 kg of chlorine
100 pairs of boots	50 pickaxes	
20 vaporizers	200 litres of detergent	

#### *Sensitization material*

30 megaphones and 100 picture boxes

#### *Rolling equipment*

3 motorbikes and 20 bicycles for field supervision activities.

About 20 volunteers from the national society and 100 community members provided latrines maintenance support to households. They also undertook channel cleaning to prevent floods that can increase the risk of the epidemic spreading. A WatSan engineer provided technical support in facilities construction to the concerned communities.

## **Coordination**

The Red Cross has been working closely with other humanitarian actors, non-governmental organizations (NGO's) and the government's health authorities. The inter-agency coordinating committee, led by the provincial governor, is responsible for the coordination of the operation. The committee is made up of four commissions and the Red Cross is represented in the sensitization, hygiene, and sanitation and logistics commission. The inter-agency committee brings together all partners involved in the operation- UN agencies, NGO's, the Red Cross of DRC and the Federation among others.

Within the Movement, working sessions bringing together the Federation, ICRC and the Red Cross of the Democratic Republic of Congo are organized to make an inventory of fixtures on the actions undertaken in the field so as to avoid duplication, enhance joint actions and promote information sharing. At the provincial committee level, the commission is run with the assistance of a coordinator, a hydraulic engineer and 19 supervisors- 7 at provincial level, 6 at community/territorial level and 6 in quarters. The committee is responsible for the follow up of activities.

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The Federation's field delegate attends all the meetings of the inter-agency committee and technical meetings organised at the Provincial Medical Inspectorate or other agencies. The field delegate provides technical support in the planning, implementation and supervision of activities as well as in the funds management.

**National society capacity building**

The Red Cross of the Democratic Republic of Congo's provincial committee in South Kivu has strategic, action and development plans involving motivation with regard to the Congo Initiative Programme (PIC) process.

Based on the Strengths, Weaknesses, Opportunities and Threats (SWOT) analysis conducted in mid-February 2005, it was evident that there were some weaknesses in management issues and financial resource inadequacy. Consequently, the Federation continued trainings using "learning-by-doing" methods and working sessions amongst others. The operation emphasized on improvement of administrative and financial matters. A hydraulic engineer has been identified for on-site technical support/capacity building of the national society's provincial committee in South Kivu. In addition, the operation has made it possible to get some transportation means and equipment - motorbikes, bikes, didactic materials, office stationery.

The final report on this operation will be available in due course.

[Contributions list below; click here to return to the title page.](#)

# DR Congo - cholera

ANNEX 1

APPEAL No. 05EA004

## PLEDGES RECEIVED

27/09/2005

DONOR	CATEGORY	QUANTITY	UNIT	VALUE CHF	DATE	COMMENT
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### CASH

REQUESTED IN APPEAL CHF ----->					<b>TOTAL COVERAGE</b>	
					<b>258,000</b>	<b>105.7%</b>
BRITISH - RC		40,000	GBP	87,240	05.02.05	
CANADIAN - CIDA/HAPS		74,250	CAD	69,795	08.03.05	
ICELANDIC - RC		250,000	ISK	4,900	26.08.05	
JAPAN - RC		1,000,000	JPY	11,095	10.03.05	
MONACO - RC		5,000	EUR	7,745	21.04.05	
NETHERLANDS - RC		37,433	EUR	57,628	15.03.05	
SWEDISH - RC		200,000	SEK	34,200	24.02.05	
SUB/TOTAL RECEIVED IN CASH				272,603	CHF	105.7%

### KIND AND SERVICES (INCLUDING PERSONNEL)

DONOR	CATEGORY	QUANTITY	UNIT	VALUE CHF	DATE	COMMENT
SUB/TOTAL RECEIVED IN KIND/SERVICES				0	CHF	0.0%

### ADDITIONAL TO APPEAL BUDGET

DONOR	CATEGORY	QUANTITY	UNIT	VALUE CHF	DATE	COMMENT
SUB/TOTAL RECEIVED				0	CHF	