

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

ZAMBIA

29 March 2004

FOCUS ON CONGOLESE REFUGEES

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. For more information: www.ifrc.org

In Brief

Appeal No. 01.19/2004; Programme Update no. 1, Period covered: January – March 2004; Appeal coverage: 27.2%; Outstanding needs: CHF 3,327,416 (USD 2,592,280 or EUR 12,139,913).
([Click here to go directly to the attached Contributions List \(also available on the website\).](#))

Appeal target: CHF 4,573,698 (USD 3,434,995 or EUR 2,944,124)

Programme summary: this Programme Update focuses specifically on the Congolese refugee operation in Zambia, and provides a narrative to elaborate and support the initial appeal budget (CHF 1,842,148) to assist the [Zambia Red Cross Society](#) in implementing a care and maintenance assistance operation for Congolese refugees in camps and transit centers. Under a tripartite agreement with UNHCR and the Government of Zambia, UNHCR has contributed 51% of the budget for the refugee operation. This Programme Update, *Focus on the Refugee Operation*, therefore seeks the outstanding amount of CHF 942,647 to support a care and maintenance assistance program over the next nine months through the provision of health services, nutrition, water and sanitation, logistics, relief distribution and registration, transit centers, camp management, population movement contingency planning, and the coordination of activities. At the same time, the Federation emphasizes that this is part of an overall appeal programme, and encourages donors to provide timely and adequate for the other key activities planned in this appeal.

For further information specifically related to this operation please contact:

- In Zambia: Sam Phiri, Secretary General, Zambia Red Cross Society, Lusaka; Email zrcs@zamnet.zm; Phone 260 1 25 36 61/22; Fax 260 1 25 22 19
- In Zambia: Stephen Omollo, Federation Head of Delegation, Zambia Delegation, Lusaka; Email ifrczmb063@ifrc.org; Phone 260 1 25 23 56/40 Fax 260 1 25 15
- In Geneva: Terry Carney, Federation Regional Officer, Africa Department, Geneva; Email terry.carney@ifrc.org; Phone 41 22 730 42 98, Fax 41 22 733 03 97

This Programme Update reflects activities to be implemented over a one-year period. This forms part of, and is based on,

longer-term, multi-year planning (refer below to access the detailed logframe documents). 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>

Operational developments

Despite the peace agreement signed in the Democratic Republic of Congo (DRC) in early 2003, and the withdrawal of foreign troops from eastern Congo, rebel groups continue to operate, with a disproportionate impact on the local population and vulnerable groups, and forcing continued flight of the civil society from eastern Congo to Zambia in search of protection and assistance. Refugees who enter Zambia through the established transit centers in the Northern and Luapula Provinces are mainly from Kalemie, Mboa, Pweto, Uvira, and other towns bordering Zambia. According to UNHCR, an estimated 325 refugees flee from the DRC into Zambia every month. At present, these refugees are accommodated in Mwange Camp in Mporokoso District; a new camp will be established this year to accommodate more refugees because Mwange has reached its maximum capacity.

Given the limited prospects for voluntary repatriation, the short-term scenario is troubling, and even more uncertain in the long-term. The decimation of basic social services in eastern DRC and continual insurgencies by the rebels continue to cause significant and sporadic population movements in the region, and new influxes into northern Zambia. The Zambia Red Cross, supported by the Federation, will continue to provide humanitarian assistance to 26,000 Congolese refugees in Mwange Camp and the transit centers in Zambia under a tripartite arrangement with UNHCR and the Government of Zambia until conditions conducive for repatriation are created in the DRC.

UNHCR's earmarked contribution to the Congolese refugee operation in Zambia was reduced by 50% in 2004 due to reduced donor funding as a result of the peace agreement in the DRC, and hopes for increased numbers of Congolese returning voluntarily. Recent developments in the DRC, however, have proved to be an obstacle to voluntary or scheduled repatriations.

The most prominent ethnic groups in the refugee population at Mwange Camp are the Tabwa, Kasai, Tumbwe and Kivu originating from Mooba, Peepa and Kalemie (southeast Congo) regions. Tabwa, Kiswahili and French are the most prevalent languages among the population. The majority of the refugees are Christians, and a significant number are Muslims. The main occupational activities among the refugees are fishing and agriculture, while a few engage in medical, nursing, teaching, engineering (physical sciences), tailoring and wood carving, and fine and performing arts. The current population in the Mwange refugee camp stands at 25,490 (7,650 families), with the following age and sex demographic distribution details:

Table 1: Demographic distribution at Mwange camp

	>60 years	18 – 59years	5 – 17years	0 - 4 years	Total	Percentage
Males	934	3,612	3,658	3,828	12,032	47%
Females	988	4,325	4,144	4,001	13,458	53%
Total	1,922	7,937	7,802	7,829	25,490	
Percentage	7%	31%	31%	31%	100%	

Achievements

Objective 1: Water: Adequate, safe and good quality water is availed to all refugees in Mwange camp and transit centres for drinking, cooking and personal hygiene, according to SPHERE¹ minimum standards.

¹ SPHERE: 15 litres per person per day; Flow = 0.125 litres per second; 1 water point per 250 people; Nearest water point < 500 m;

Expected results

- Appropriate water system is provided, maintained and installed in the camp and transits centres.
- Refugee committees are trained to man water systems.
- Water services provided to refugees meet SPHERE standards.

Activities planned

- Procure a new water pump engine, a motor for the water pump and sufficient spare parts to maintain the water pump engine, fuel for water pumps and a booster pump.
- Conduct a geological survey and drill of five bore holes.
- Carry out routine preventive and corrective maintenance of the complete water supply system.
- Procure tool kits for the hand pumps and three Oxfam tanks.
- Replace worn-out water tank liners, worn-out taps and tap stands.
- Provide electricity to water treatment plan and maintain the water source.
- Train and orient national society staff and refugee operation staff.

Activities implemented

The national society and the Federation delegation in Zambia are responsible for the water and sanitation sector. Water for consumption is managed through a reticulation system – where it is pumped from a stream or spring into a reservoir. Chlorinated water is channeled through the pipe distribution outlets to 46 tap stands strategically located in the camp. In addition to the reticulated water system, 25 boreholes have been sunk in the camp and both water systems ensure adequate supply of water to meet the minimum requirement of 15 litres per person per day.

Objective 2: Sanitation: Community and environmental sanitation availed to the refugee community in the camps and transits centers that is culturally acceptable and gender sensitive.

Expected results

- Environmental sanitation services are provided by qualified and experienced staff in all duties involved according to SPHERE standards.
- There are sufficient number of appropriate latrines, close to dwellings to allow rapid, safe and acceptable access at all times of the day and night.
- Refugees are able to protect themselves from disease vectors and nuisance pests.

Planned activities

- Construction of five improved ventilated pit latrines in public places.
- Continue casting and distributing sanitation platforms (SanPlats) and the lids.
- Procure a motorbike, fuel lubricants and maintenance spare parts for intensive and thorough inspections in the camp.
- Train the refugee community to empower them.
- Continue to design and construct social and cultural amenities.
- Supply protective clothing to 36 Zambia Red Cross staff and volunteers.
- Procure a lap top computer to enhance reporting and monitoring.

Activities implemented

The family latrine coverage for Mwange is generally above average with a total of 3,863 family latrines constructed ensuring a minimum utilization standard of one latrine for every six persons. There are 1,913 refuse pits (80.6% coverage) and 2,870 bathing shelters (67.8% coverage). Public health education and hygiene promotion are standard activities carried out by the Red Cross health teams and volunteers. The refugee community is actively involved in the health education and public awareness campaigns. In the area of solid waste management, a 100-litre refuse container is available per 10 families and a burial site has been identified and is recognized by the government. Population of malaria bearing mosquitoes are kept at low levels enough to avoid excessive malaria infection and routine intensive fly control is carried out by the health teams.

Objective 3: Health: Preventive and curative health services are provided to all refugees in the camp and at the transit centers with special emphasis on reproductive health, under-five immunization and growth monitoring, nutrition and rehabilitation as well as ambulance services for referrals. These services will also be extended and available to surrounding host community.

Expected results: a suitable, appropriate and professional health intervention is in place at Mwanze and transit centers. Sufficient qualified and experienced health staff is in place during the year. Appropriate health infrastructure and equipment is in place. All refugees at the camp and transit centers have free access to health services.

Activities planned

- Screen, diagnose, treat and manage common illnesses and epidemics and provide quality laboratory case diagnosis and treatment.
- Facilitate referrals to first, second and third level hospitals.
- Provide voluntary counselling and testing (VCT) services at the clinic.
- Improve existing health infrastructure.
- Procure drugs, laboratory reagents and cleaning materials.
- Assist in the provision of a wide range of sexually transmitted infection (STI) and HIV/AIDS drugs.
- Providing health education on tuberculosis and leprosy.
- Conduct staff training on rational drug use.
- Conduct six refresher courses on safe motherhood and peer education.
- Conduct three training sessions for Congolese and Zambian staff in primary health care.
- Promote safe motherhood practices.
- Conduct advocacy and public awareness campaigns on sexual and gender-based violence (SGBV).
- Sensitize and carry out routine vaccination and monitoring of the growth of children.
- Promote and conduct de-worming activities.
- Conduct school health services to promote adolescence health.
- Strengthen adherence to STI treatment protocols.
- Enforce counselling services to clients suffering from STI.

Activities implemented

The clinic at the refugee camp is managed by the Zambia Red Cross and the Federation. The programme is supported by two health clinicians, two midwives, two nurses, one pharmacist and one laboratory technician under the overall supervision of the Health Coordinator. The clinic has three wards, an outpatient department and a mother-and-child health care clinic. Four health satellites have been constructed strategically in the camp as referral points to the clinic, while Mporokoso district hospital serves as the main referral centre from the camp clinic.

Crude mortality rate stands at 0.196/10,000/day and under-five mortality is 0.213/10,000/day. Both indicators are within the minimum standards illustrating the well being of the refugee population. Immunization coverage as at end of July 2003 was: BCG at 47%, DPT at 87%, polio at 62% and measles at 100%.

Objective 4: Relief distributions : Food and non-food items distributed to 26,000 refugees in Mwanze and transit centers according to SPHERE minimum standards.

Expected result: Adequate supply of food and non-food items culturally acceptable to refugees and according to SPHERE standards

Planned activities

- Deploy trained volunteers at Kaputa, Chiengi, Mwanze, Mpulungu and Mwanze to carry out food and non-food distributions.

[<Click here to return to title page>](#)

Zambia; Appeal no. 01.19/2004; Programme Update no. 1; Focus on the Refugee Operation

- Continue carrying out monthly food and non-food distributions to refugees.
- Ensure the distribution centres meet the minimum health and hygiene standards.
- Conduct regular food distribution courses for volunteers and staff including refugees assisting with in the distribution.
- Zambia Red Cross staff to participate in the regional disaster management training.
- Procuring protective clothing for safe handling of chemically preserved food.

The national society and the Federation have been distributing food provided by the WFP. Food is delivered by the WFP to the extended delivery points where a 300 MTS capacity warehouse is erected and managed by the Zambia Red Cross/Federation. The food basket consists of 450gms/day maize grain, 120gms/day beans/peas, 10gms/day salt and 20gms/day cooking oil to give 2,100 kcal per person per day. The monthly distributions are conducted by Red Cross staff and volunteers and assisted by the refugee distribution council. High energy protein supplements are provided by the WFP to the clinic for highly malnourished children and expectant mothers.

Every household benefiting from this is provided with at least one cooking pot, enough fuel for food preparation, water containers to store 40 litres and 250gms of soap per person per month. Other household items distributed include one cooking pot, one basin, one kitchen knife, two wooden spoons, one eating plate, one metal spoon and one mug per person, according to the SPHERE minimum standards.

The agricultural programme has started encouraging refugees to grow their own food. Each refugee family is given 2.5 hectares of land and is provided with seeds, tools and other farm implements. It is anticipated that increased production from these small farms may result in reduction of WFP food basket.

Objective 5: Education: Support other agencies in the provision of education and community services according to UNHCR standards.

Expected results

Appropriate health services, WatSan, food and non-food items, shelter and general camp management are provided according to SPHERE standards. Supplementary feeding is provided to severely malnourished persons.

- New refugees who present themselves at the transit centres are received and registered according to UNHCR guidelines.
- New refugees are relocated safely from the transit centres to the camps, are settled and have access to humanitarian assistance without discrimination.
- Update refugee caseload database regularly.

Activities planned

- Avail volunteers trained in updating population registers at Kaputa, Chiengi, Mwense, Mpulungu and Mwangwe camp.
- Maintain and manage reception centre in accordance with applicable standards.
- Construct temporary sleeping shelters in transit, reception centre and repair distribution centre.
- Registration of new born babies on a monthly basis and deregistration of the dead, repatriated and reunification of outbound families.
- Train national society staff in data collection and management.
- Ensure 95% measles vaccination coverage.

Educational activities are implemented by HODI³ contracted by the UNHCR to oversee implementation of community services in the camps. The educational system is composed of pre-school, primary, secondary, adult literacy and English as a foreign language programmes. There is also post-secondary education sponsorships awarded on merit for selected students. There are 6,420 pupils at primary with a pupil teacher ratio school is 64:1 pupil classroom ration is 70:1, pupil desk ratio is 4:1 and desk classroom ration is 21:1. The pupil classroom ratio is above acceptable standards. The secondary school has 661 pupils. About 40% of the students that graduated in

³ HODI – An indigenous Zambia organization involved in relief and developmental work

Zambia; Appeal no. 01.19/2004; Programme Update no. 1; Focus on the Refugee Operation

2002 from the school found formal employment with non governmental organizations and other implementing partners working in the camp, whilst others have established their own small-scale private businesses.

Community services promote the involvement of refugee women in camp management and administration, relief distribution, education and in all major decision-making forums. Today, women constitute 50% of the leadership at camp level.

Impact

The capacity of the national society to deliver services to vulnerable communities in high risk areas has remarkably improved as a result of the increasing Zambia Red Cross and Federation intervention at Mwanze refugee camps. Decreased morbidity and mortality are indicators of an improved health care system in the camp. Staff and volunteers experienced in relief operations are rotated in new operational areas thus encouraging cross learning and knowledge sharing at all levels and between different branches of the national society.

Red Cross interventions have not only helped save lives but also have ensured that the basic human rights of the refugees are upheld. The quality of assistance and the accountability of humanitarian system given to the refugee population have improved. Assistance provided in key relief sectors have been guided by SPHERE standards.

Operational security for both refugees and humanitarian staff increased significantly due to participation of refugee leaders in program implementation by the Zambia Red Cross and the Federation. Involvement of refugees in the distribution and registration sector and continued assistance to the Government and UNHCR in the registration and maintenance of statistical database is indicative of this participatory approach.

Refugee women have been included in leadership and programme implementation at all levels. This has been instrumental in the success of the program. Efforts will be directed to ensuring that this approach is strengthened by increasing the participation of refugee women to 50%. Women relief committees trained by WFP in food distribution have been used as an entry point to address sexual reproductive health issues, as well as issues of sexual abuse and exploitation.

Zambia Red Cross volunteers are engaged in awareness and prevention campaigns supported by UNHCR which had significant impact on behavioral patterns of the refugee community. Condom use has increased and stigmatization has reduced considering the number of VCT visits by the refugee community at the camp and the Government health centers. Persons infected with HIV/AIDS have increased nutritional needs and underscore the need to provide an enriched food basket and micronutrient-fortified blended foods to address micro-nutrient deficiencies that affect the frequency, severity and rate of recovery from HIV/AIDS-related opportunistic infections and extend the quality of life for PLWHA⁴.

Strong coordination at national and local level is key in view of the complexity of the program and the actors involved in the response. This demands strong leadership and vision through the Inter-agency coordination meetings, Government counterparts and requires a practical framework for intervention that pulls together all actors.

Constraints

The decreased funding has created instability in program implementation. Reduced donor support has necessitated humanitarian organizations, including the national society, to curtail program support and delay their response to increased population displacement in the north. As a result, assistance provided to refugees is deemed inadequate according to internationally recognized SPHERE standards. The shortfall in the response has been largely due to limited contributions from donors to the refugee program in Mwanze. This imbalance in support must be redressed in the current planning year and in recognition of the need to address the long term objectives (repatriation preparedness) simultaneously with action to address immediate needs.

⁴ PLWHA – Persons Living with HIV/AIDS

Zambia; Appeal no. 01.19/2004; Programme Update no. 1; Focus on the Refugee Operation

The existing imbalance between the refugee community and local host population has created tension and conflict. Programs have been initiated to compensate the local host community in the refugee populated areas to redress those imbalances.

Coordination and implementation

The refugee program is implemented through a new tripartite agreement signed between the Zambian government, Zambia Red Cross, the Federation and the UNHCR. The Zambia Red Cross continues to undertake day-to-day operational activities with support from the Federation's country delegation. The Federation's country delegation is also responsible for financial and administrative management to build the capacity of the national society. UNHCR will retain the overall responsibility for the operation and monitor and evaluate program implementation.

The Federation's head of delegation and the Zambia Red Cross Secretary General will continue to participate in the inter-agency coordination meetings in Lusaka. At the field level, both the Federation programme coordinator delegate and the national society project coordinator continue to participate actively in the camp coordination meetings with all implementing partners.

Overall coordination of the refugee program is the responsibility (and mandate) of UNHCR and includes:

- Backstopping services, including procurement and logistics, protection, advocacy and public relations.
- Provide overall program management and project control, reporting and training.
- Provide policy direction and adjustment in the implementation of the country refugee program, in accordance with the evolution of the situation.
- Ensure effective and efficient coordination of all implementing agency partners and Government.

WFP is responsible for:

- Internal transport, shipping and handling costs of all food needs and distribution with a calorific intake of 2,100 Kcal/day as follows: Cereals (maize grain) 450 grams, pulses (beans /peas) 120 grams, cooking oil 20 grams and iodized salt 10 grams per person per day.
- Ensuring stable food pipeline and effective and timely reporting to partners and donors.

The Government of Zambia is responsible for:

- Provision of physical protection.
- Provision of security in and around the camp.
- Ensuring free movement of agencies to their area of operation.
- Controlled movement of refugees.
- Facilitating refugee status determination⁵.

The refugee community will be involved in:

- Designing programs.
- Community leadership.
- Manpower for participation in various sectors.
- Monitoring and feedback of program implementation.
- Ownership of activities for sustainability.

Other organizations are also working in the camp. For example, World Vision International handles general shelter and construction work in the camp in addition to providing agricultural support; and HODI is implementing education and community service activities in the camp.

Federation support:

The Federation's Country Delegation in Zambia will manage Federation programming and resources in support to the refugee programme and build the capacity of the Zambia Red Cross. The delegation consists of a head of delegation, a finance and administration delegate and a refugee programme coordinator. A finance development delegate will be on board to support the implementation of the national society's recovery plan - with particular

⁵ Refugee Status determination – According to Refugee Act of 1951

Zambia; Appeal no. 01.19/2004; Programme Update no. 1; Focus on the Refugee Operation

reference to finance development. A health delegate will also be posted in the camps, as requested by the UNHCR, to address the increased health needs in both the camps and the transit centers.

The Federation Regional Delegation in Harare and the finance and reporting units in Nairobi will continue to provide technical support to the Zambia Delegation to provide quality and timely information for programme management and accountability to partners and donors. In addition, substantial field management support capacity is also needed to provide professional and accountable services according to standard operating procedures.

Monitoring and evaluation

Planning, monitoring and accountability for all programmes in the country are an essential management function. The Federation's programme coordinator, in conjunction and the Zambia Red Cross counterpart, will carry out monitoring of day-to-day operations with the UNHCR field officer. The head of delegation and technical delegates from the Harare regional delegation will monitor progress and conduct periodic, interim and yearly evaluations. Joint monitoring and evaluation with the UNHCR and the WFP will be carried out during the planning period.

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

APPEAL No. 01.19/2004

PLEDGES RECEIVED

24/03/2004

CASH

REQUESTED IN APPEAL CHF ----->						TOTAL COVERAGE	
						4,573,698	27.2%
BRITISH - RC	105,000	GBP	247,747	09.03.04	WATER SANITATION		
UNHCR (200aa\$)	702,786	USD	890,078	27.01.04	LUAPALA & NORTHERN PROVINCES		
WFP	86,835	USD	108,457	09.01.04			
SUB/TOTAL RECEIVED IN CASH						1,246,282	27.2%

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	