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Disaster relief emergency fund (DREF) Central Africa Republic: Measles Outbreak

 International Federation
of Red Cross and Red Crescent Societies

DREF operation n° MDRCF015
GLIDE n° [EP-2013-000059-CAF](#)
16 May, 2013

The International Federation of Red Cross and Red Crescent (IFRC) Disaster Relief Emergency Fund (DREF) is a source of un-earmarked money created by the Federation in 1985 to ensure that immediate financial support is available for Red Cross and Red Crescent emergency response. The DREF is a vital part of the International Federation's disaster response system and increases the ability of National Societies to respond to disasters.

Summary: CHF 126,352 has been allocated from the IFRC's Disaster Relief Emergency Fund (DREF) to support the National Society in delivering immediate assistance to some 124,176 direct beneficiaries and 884,000 indirect beneficiaries. Unearmarked funds to repay DREF are encouraged.

Measles outbreaks have been reported in several regions of the Central African Republic, notably in the towns of Ngaoundaye, Abba and Carnot, Begoua and Mbaiki, in suburbs of the capital city, Bangui. From January to April of this year, 63 cases of measles were reported in the capital city, Bangui, including 11 cases in April. Large population movements from rural areas to Bangui due to insecurity have increased the risk of a large-scale outbreak. The Central African Republic (CAR) Red Cross (RC) National Society (NS) has started raising awareness among the population, pending intensive social mobilisation during an immunisation campaign scheduled for the end of May for the promotion of routine immunisation.



Mass awareness campaign on the benefits of routine immunization of children. Picture: F.E GBAGBA – DSAS /CARRC

This operation is expected to be implemented over 3 months, and will therefore be completed by 15 August, 2013; a Final Report will be made available three months after the end of the operation (by 15 November, 2013).

[<click here for the DREF budget; here for contact details >](#)

The situation

Since last December, almost all basic social and health services have stopped functioning, due to insecurity in occupied towns. During this period, the Central African Republic recorded pockets of measles outbreak in several regions. Between January and April, 63 cases of measles were reported in the capital, Bangui,

including 11 cases in April. There is also massive movement, with people fleeing hostilities in areas hit by the epidemic, to the capital Bangui, thus raising fears of a large-scale epidemic. The health authorities, in collaboration with partners, are planning to organize a follow-up campaign to target children aged 6 to 59 months in the No. 7 health region (suburbs of Bangui). This campaign scheduled to run from 23 to 27 May 2013; will go on simultaneously with the administration of vitamin A and systematic deworming treatment.

Reported cases of measles in No 7 health region from January to March 2013

Subdivision	Health facility	January	February	March	April	TOTAL
1 st Subdivision	Emergency health centre	2	7	11	1	21
	Office centrafricain de sécurité sociale health centre	2	3	1	1	7
2 nd Subdivision						0
	Lakouanga health centre	0	0	2	0	2
	Yapele health centre	0	0	1	0	1
3 rd Subdivision						0
	Notre Dame de Fatima health centre	0	0	3	1	4
	Castor health centre	0	0	0	1	1
	Mamadou Mbaïki health centre	0	0	3	2	5
5 th Subdivision						0
	Malimaka health centre	0	3	1	2	6
8 th Subdivision						0
	Bede Combatant	0	7	6	3	16
TOTAL		4	20	28	11	63

Coordination and partnerships

The Ministry of Public Health and Population convened an emergency meeting of the Technical Support Committee of the Expanded Programme on Immunisation (CTAPEV). The meeting was attended by all organizations that work in the health sector (WHO, UNICEF, MSF Holland, Merlin, IRC, IM, etc.). During this meeting, technical issues related to the organization of the immunisation campaign in Bangui were discussed, clarification of inputs, training of supervisors and mobilisation agents, the contributions of partners, and especially the micro planning of needs according to health districts.

Red Cross and Red Crescent action

After taking part in the information exchange meeting of the Technical Support Committee of the Expanded Programme on Immunisation (CTAPEV), the CAR RC organized a one-day briefing on epidemics common in the CAR. This briefing targeted local Red Cross branches of the ten subdivisions of Bangui, including its suburb communes of Bimbo and Begoua. During this briefing, emphasis was laid on epidemiological surveillance, at a time when most urban health facilities are not functional due to looting, while the security situation makes it difficult for health care professionals to resume work.

The Ministry of Public Health and Population has appealed for the support of the CAR RC in the carrying out of social mobilisation activities.

The needs

Measles outbreak has occurred in a number of pockets across CAR, notably in the towns of Ngaoundaye (health region No. 3), Abba and Carnot (health region No. 2), Begoua and Mbaiki (health region No. 1, a suburb of the capital city, Bangui). Because of the security situation, the CAR RC is only able to access locations in Bangui. Also due to the insecurity, Bangui is experiencing population movement from rural areas into the capital, which creates risk of a large scale measles outbreak. The CAR RC, in collaboration with the MoH and other health stakeholders, will provide social mobilization of the target population in order to ensure a successful immunization campaign.

The proposed operation

During this campaign, some 124,176 children aged 6 to 59 months will be immunized and will be given vitamin A in eight health districts and in the two suburb communes of Bimbo and Begoua (10 locations in total). Children aged 9 to 59 months will receive deworming treatment. This number could be increased due to the massive movement of people from rural areas to the capital, Bangui. After immunisation, volunteers will continue raising awareness on the strengthening of routine immunization and promote healthy feeding habits.

The CAR RC will deploy 300 volunteers, 20 supervisor. As the situation is volatile and potentially insecure, identification and acceptance will be important security tools. The volunteers will also receive coats and boots, since the rainy season has just started. Several banners will be displayed in Bangui. In order to raise awareness among the general population, megaphones and thousands of posters and leaflets will be used.

Emergency health

Outcome: Contribute to reducing measles-related morbidity and mortality among 124,176 children aged 6 to 59 months in the town of Bangui in 10 locations; direct beneficiaries, and the entire population of these towns, estimated at 884,000 inhabitants; indirect beneficiaries.

Outputs (expected results)	Activities planned:
<ul style="list-style-type: none"> • Contribute to the Immunisation of at least 95% of children aged 6 to 59 months against measles in the towns of Bangui; • Contribute to administering vitamin A capsules to at least 95% of children aged 9 to 59 months; • Contribute to deworming treatment for children aged 9 to 59 months; • Put in place a system to strengthen routine EPI based on epidemiological surveillance, the active search for missing cases, early diagnosis, monitoring signs of malnutrition and referring cases. 	<ul style="list-style-type: none"> • Recruit 300 volunteers, 30 per health district of Bangui and in suburb communes of the town, 10 immediate supervisors and 10 central supervisors; • Organize a 3-day training for volunteers and supervisors on measles, malnutrition, the immunisation campaign and social mobilization techniques (at the rate of 100 volunteers per day); • Produce communication tools (500 posters, 2000 leaflets) and Red Cross visibility materials , radio broadcast and TV • Organize proximity awareness sessions (door-to-door) during the 7 days of the campaign (2 days before and five days during the campaign); • Actively search for vaccine adverse events and refer them to health centres during the 3 days following the campaign; • Strengthen routine immunization through awareness-raising and active search for missing cases; • Promote balanced feeding, in line with the local context through posters, leaflets, TV and radio broadcast; • Ensure coordinating and monitoring/evaluation of all activities.

Contact information

For further information specifically related to this operation please contact:

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For Resource Mobilization and Pledges:

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For Performance and Accountability (planning, monitoring, evaluation and reporting)

- **In IFRC Zone:** Robert ONDRUSEK, PMER/QA Coordinator, Africa; Phone: +254 731 067277; email: robert.ondrusek@ifrc.org

How we work

All IFRC assistance seeks to adhere to the Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGOs) in Disaster Relief and the Humanitarian Charter and Minimum Standards in Disaster Response (Sphere) in delivering assistance to the most vulnerable.

The IFRC's vision is to inspire, encourage, facilitate and promote at all times all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.

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The IFRC's work is guided by Strategy 2020 which puts forward three strategic aims:

1. Save lives, protect livelihoods, and strengthen recovery from disaster and crises.
 2. Enable healthy and safe living.
 3. Promote social inclusion and a culture of non-violence and peace.
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DREF OPERATION

16-05-13

Central African Republic: Measles Outbreak (MDRCF015)

Budget Group	DREF Grant Budget CHF
Shelter - Relief	
Shelter - Transitional	
Construction - Housing	
Construction - Facilities	
Construction - Materials	
Clothing & Textiles	0
Food	
Seeds & Plants	
Water, Sanitation & Hygiene	0
Medical & First Aid	0
Teaching Materials	10,500
Utensils & Tools	0
Other Supplies & Services	0
Emergency Response Units	
Cash Disbursements	
Total RELIEF ITEMS, CONSTRUCTION AND SUPPLIES	10,500
Land & Buildings	
Vehicles Purchase	
Computer & Telecom Equipment	0
Office/Household Furniture & Equipment	
Medical Equipment	
Other Machinery & Equipment	
Total LAND, VEHICLES AND EQUIPMENT	0
Storage, Warehousing	0
Distribution & Monitoring	0
Transport & Vehicle Costs	8,250
Logistics Services	
Total LOGISTICS, TRANSPORT AND STORAGE	8,250
International Staff	0
National Staff	0
National Society Staff	7,000
Volunteers	67,900
Total PERSONNEL	74,900
Consultants	
Professional Fees	
Total CONSULTANTS & PROFESSIONAL FEES	0
Workshops & Training	3,850
Total WORKSHOP & TRAINING	3,850
Travel	6,000
Information & Public Relations	8,750
Office Costs	3,000
Communications	2,400
Financial Charges	990
Other General Expenses	0
Shared Support Services	
Total GENERAL EXPENDITURES	21,140
Programme and Supplementary Services Recovery	7,712
Total INDIRECT COSTS	7,712
TOTAL BUDGET	126,352