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DREF operation update Central African Republic: Floods



International Federation
of Red Cross and Red Crescent Societies

DREF operation n° MDRCF016 GLIDE n° FL-2013-000112-CAF Update No.1 – 30 November 2013 Timeline extension

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.

Period covered by this update: 17
September to 15 November 2013.

CHF120,702 was allocated from the IFRC's Disaster Relief Emergency Fund (DREF) to support the Central African Republic Red Cross (CAR Red Cross) to provide immediate assistance to 1,785 beneficiaries (337 families). Unearmarked funds to repay DREF are encouraged.

Summary: On 3-4 September 2013, the districts of Issongo, Bea-Rex Makambo, Sara Banga-2-Gbaya Dombia, Bibalé, Souma Poto Poto, Fondo Yakite and Sara-Dah in Bangui were flooded following heavy rains that resulted in significant damage in those towns. Up to 75 volunteers from the local Red Cross branch conducted a rapid assessment and found 337 families were badly affected in 10 sub-districts. The total number of people whose homes were either damaged or destroyed is 1,785, including 716 children, 612 women (15 pregnant women) and 457 men. Also, almost all wells and latrines in these areas had been damaged by floodwaters.



Distribution of NFIs to flood victims in Bangui / Photo: CARRC

With financial support from the IFRC's DREF, the CARRC is already providing rapid assistance to the affected in the form of emergency water and sanitation, shelter, distribution of non-food items (NFIs), emergency health and health and hygiene promotion. All these activities are carried out by 45 CARRC volunteers mobilized for this purpose, and are aimed at reducing the risk of outbreak of flood-related diseases and to restore the dignity of the affected population, under the supervision of a member of the IFRC Regional Disaster Response Team (RDRT) deployed for this purpose.

Due to expected arrival of stock replenishment after the end of the operational timeframe, this operation update announces an extension of the operational timeframe until end of January 2014. The extension will not affect the implementation of activities in the field. A final report will be made available by 30 April 2014.

[<click here to view contact details>](#)

The situation

On 3-4 September 2013, the districts of Issongo, Bea-Rex Makambo, Banga Sara-2-Gbaya Dombia, Bibalé, Yakite, Fondo and Sara-Dah, Souma Poto Poto in the third district of Bangui in the Central African Republic faced floods following heavy rains that lasted for hours at a time, resulting in significant damage in those towns.

Of a total population of 90,000 people in the third district, about 32,993 people were affected by the floods, with 337 families (1,875 people) recorded as the most vulnerable, having their homes either completely destroyed or partially damaged. Also, other damage recorded includes the destruction of wells and latrines. The situation on the ground is as follows:

Areas of the 3rd district	Number of affected people	Number of vulnerable families	Distribution of the most vulnerable population			Total most vulnerable people	Houses completely destroyed	Houses partially destroyed
			Children	women	men			
Gbaya-Dombia	2.703	110	236	217	139	592	62	48
Makambo	6.762	65	79	36	77	192	27	38
Bibalé	2.824	26	55	21	36	112	8	18
Sara-dah	2.540	19	59	60	29	148	6	13
Banga-Sara 2	2.211	13	39	33	23	95	6	7
Issongo	2.371	24	54	63	35	152	5	19
SoumaPotoPoto	4.300	20	56	54	28	138	6	14
Béa- Rex	2.157	26	53	46	36	135	14	12
Fondo	5.272	18	59	39	28	126	6	12
Yakité	1.853	16	26	43	26	95	6	10
Total	32.993	337	716	612	457	1.785	146	191

Source: Central African Red Cross Society

It should be noted that among the 612 women identified, 15 were pregnant. About 30% of the most vulnerable sought refuge in host families and this may result in an overburdening of host family resources if their stay therein is prolonged. The remaining affected populations are currently living out in the open, where they are exposed to adverse weather conditions, risk of malaria and potential respiratory tract infections, with the situation expected to worsen, based on weather forecasts. The situation is further complicated by a potential outbreak of diseases related to the use of contaminated water and an unhealthy environment. Throughout this neighbourhood, there are also 97 infected wells and about 106 latrines in bad shape. All these vulnerable families face enormous difficulties because they have lost their homes, most of their tools and belongings, and have expressed an urgent need for shelter materials and basic necessities.

The situation has significantly improved, two month after the implementation of the DREF aimed at assisting flood victims of the third district of Bangui. The 337 most vulnerable families each received materials for the reconstruction of their partially destroyed shelters. Those who had left their homes and sought refuge with relatives have managed to rebuild temporary shelters where they live in, while waiting for the setting in of the dry season to actually start reconstructing their destroyed houses. The 1785 individuals that make up the 337 most vulnerable families were all sensitized on the rules of hygiene and disease prevention and are actually applying them. They all received Aquatabs tablets for water treatment at home, for a period of 75 days (2.5 months) and all wells in affected Neighbourhoods (424 wells) have been treated. Populations of the 10 targeted Neighbourhoods now have access to safe drinking water.

All those who lost utensils during the disaster have received a bucket, a jerry can, a kitchen set and two mats. These materials have enabled them to regain their dignity as they can once again cook in their own pots, fetch and store drinking water.

These activities are being implemented with some difficulties, since the cause of flooding in the third district is due to the fact that drains (Kokoro collector) are full of garbage. The Neighbourhood is always flooded when it rains. Wells are not covered, and their openings are low-lying, making it very easy for polluted water to get into them (see photos).



A flooded latrine in the Makambo Neighbourhood



A well in the Makambo Neighbourhood (3rd district of Bangui)

These pictures were taken after a rainfall that lasted about an hour.

Since the openings of most wells are low-lying and most latrines are destroyed during floods, it is, therefore, evident that with the least flooding, all wells are re-contaminated.

Coordination and Partnership

Communication with the ICRC is excellent at the level of activities being implemented in the field and regarding the monitoring of the security situation. IFRC and the CARRC are communicating effectively with each other, in order to ensure the success of this operation.

It should be noted that local administrative authorities are now involved in activities that are being carried out by CARRC volunteers. NFI distribution was coordinated with the Minister of Social Affairs, in the presence of the Mayor of the 3rd district. Distributed sanitation materials will be managed by the 3rd district local Red Cross committee, while the maintenance of these materials will be monitored by the 3rd district council, for the benefit of its population.

The Community Disaster Response Teams (CDRT) put in place in the 3rd district are composed of members of the Council, women's and youth groups of the 3rd district.

Red Cross and Red Crescent Action

All activities have so far been carried out by 45 CARRC volunteers who were trained in distribution methods and techniques. These volunteers are being supervised in the field by five specialized NDRT members who all worked under the coordination of the Disaster Management Coordinator of the CARRC. These volunteers live in different affected neighbourhoods and are ready to continue these activities for the benefit of their people, even after the project.

NFIs were transported from Yaounde to Bangui by the IFRC Central Africa Representation. The CARRC mobilized five pickup vehicles to transport NFIs from warehouses to distribution sites. An IFRC vehicle was also provided to transport the RDRT member during the monitoring of activities throughout his stay in Bangui.

The most pressing actions include the cleaning and rebuilding of drains “Kokoro”, in order to stop floods in the 3rd district of Bangui.

Progress towards outcomes

Emergency shelter and non-food items	
Outcome: To contribute to improving the living conditions of 337 families (1,785 people).	
Output (Expect Results)	Planned activities

<ul style="list-style-type: none"> • 337 vulnerable families (1,785 people) identified receive assistance. 	<ul style="list-style-type: none"> • Purchase and transport 674 tarpaulins and fixings (including rope and poles) 674 blankets, 892 mats, 337 cooking kits, 1685 pieces of soap, 1,011 mosquito nets, 337 buckets (17 litre), 337 jerry cans (20 litre), and 612 toiletry kits. • Brief 45 volunteers on methods and techniques distribution. • Package the items according to the list of beneficiaries, with the following breakdown: tarpaulins (2 per family), rope (30 metres per family), poles (6 x 5metres per family), mats (1 for every 2 people), covers (1 for every 2 people), and kitchen kits (1 per family) • Distribute the non-food items in the ten districts of the third district of Bangui. • Ensure monitoring, evaluation and reporting on activities.
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Progress:

The refresher workshop for 45 volunteers on distribution methods and techniques and disaster risk reduction took place from 4 to 6 October 2013.

The workshop was opened by the 3rd district Local Committee President, in the presence of local governance members. The workshop began with the presentation of facilitators. Group exercises and field trips also enabled participants to better understand the topics treated.

At the end of the workshop, recommendations were made to the CARRC and the Federation, followed by a word of gratitude.

The 45 trained volunteers then familiarized themselves with distribution tools.

Distribution proper took at the national headquarters of the CARRC, following an official ceremony presided over by the Minister of Social Affairs, in the presence of the National President of the CARRC, the Mayor of the third district, members of the Steering Committee of the CARRC, the Secretary General of the CARRC, heads of Neighbourhoods concerned and members of the Local Committee of the 3rd district of Bangui and the resource person (RDRT) of the Federation.

Before distribution, beneficiaries were notified on the quantity of various items they were to receive, and they were allowed to ask for clarifications if they did not receive what was promised. Still under this initiative, the distribution process and the beneficiary identification procedure was explained.

Each identified family received:

- Two blankets;
- Three mosquito net;
- Two tarpaulins ;
- One kitchen kit ;
- One bucket;
- One jerry can;
- Five pieces of soap;
- One or two hygiene kits, depending on the number of women of childbearing age in the family;
- Two battens of 6m;
- Two rafters of 3m each;
- Two or Three sleeping mats depending on household size.
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In sum, 674 tarpaulins, 674 blankets, 892 mats, 337 kitchen kits, 1,685 pieces of 200-gram soap, 1,011 mosquito nets, 337 buckets, 337 jerry cans, 612 hygiene kits and 1,348 pieces of wood (battens and rafters) were distributed to 337 families or 1,785 people, out of the 337 families planned (1785 persons).

In a bid to ensure transparency, a clearance list was placed at the exit of the distribution site for each recipient to certify that they have actually received the planned items. The distribution operation was a success for the

CARRC as most victims continue to express gratitude to the CARRC and its partners. At the end of the distribution exercise, a special report was sent to the Federation office in Yaounde.

Beneficiaries are general satisfied because they have regained their dignity, and also have access to safe drinking water. Many beneficiaries have made it a point of duty to call round and express their appreciation to the CARRC. The Minister of Social Affairs also expressed the gratitude of the Government of the CAR to the CARRC and its partners.

Volunteers have been trained in NFI distribution and awareness-raising techniques. They can now use Aquatabs and effectively disinfect well and latrines. They will use these skills to help their families and communities.

Challenges:

A few cases of fraud were noticed and immediate solutions have been found to deliver items to the rightful owners.

People affected by the recent floods continue to come to the CARRC headquarters for assistance.

Emergency Health	
Outcome: The immediate risks to the health of the 337 selected families are reduced	
Outputs (Expected Results)	Activities planned:
<ul style="list-style-type: none"> • The health situation and immediate risks to malaria in the aftermath of the floods are assessed and responded to; • Community-based disease prevention and health promotion is provided to the target population; • Epidemic prevention and control measures are carried out. 	<ul style="list-style-type: none"> • Procure first aid kits. • Provide first aid to people who are injured. • Provide referrals for affected people to health centres. • Encourage pregnant women to consult health centres for antenatal care. • Train 45 volunteers on the installation and use of treated mosquito nets as well as epidemic control for volunteers (ECV) • Purchase 1,011 nets and distribute 3 per family to 337 families identified. • Sensitize the 337 families targeted in on how to install and use mosquito nets. • Sensitize communities on the risks of malaria and relevant prevention. • Monitoring, evaluation and reporting on the activities.

Progress:

On Saturday, 12 October 2013, the CAR Red Cross organized a ceremony at the Makambo neighbourhood to officially launch awareness activities on disease prevention and the fight against epidemics in the 3rd district of Bangui.

This activity was divided into three main phases:

- 1 - Mass awareness-raising
- 2 - Proximity awareness-raising
- 3 - Awareness-raising over local community radios stations

1 - The mass awareness-raising:

It was organized by CARRC volunteers in each neighbourhood of the 3rd district of Bangui, and was heavily attended. The theatrical troupe of the CARRC was used to facilitate awareness-raising sessions and to pass on the intended awareness message in a humorous style (Sketches and theatre). During these meetings that were held in the 10 neighbourhoods of the 3rd district, volunteers delivered their awareness message which included:

- The causes of flooding (the case of the 3rd district). It should be noted that drains in this district were built by the State, but the population have blocked them with garbage and when it rains, water cannot flow freely through its usual channel. Water is, therefore, forced to overflow and cause damage in the neighbourhoods. Volunteers have, therefore, sensitized the population to mobilize themselves and clean the drains and stop dumping garbage in these drains, and rather do so in places indicated by the city council.

- Early warning system in the event of local storms or floods;
- Demonstration of mosquito net hang up;
- Awareness-raising on the use of mosquito nets;
- How to avoid water-borne and water-related diseases;
- How to treat water before consumption;
- Construction and use of latrines by all households;
- Systematic washing of hands with soap after using the latrine and before each meal and before feeding children;

All awareness messages were disseminated in the local language (Sango), used by the entire population of Bangui. Mass awareness was done with megaphones.

After covering the 10 neighbourhoods, 20,827 people were reached with awareness-raising messages.

Proximity awareness was done through home visits. For ten (10) days, 40 volunteers and 5 CARRC team leaders visited 2,472 homes wherein they disseminated awareness messages. During these numerous home visits, they reached 20,701 people.

Awareness materials included leaflets, posters and image boxes produced by the CARRC for these awareness campaigns.

Awareness messages disseminated by volunteers in household were repeated over the airwaves of radio stations (radio Ndeke Luka and the CAR radio). All messages found on image boxes, posters and leaflets were repeated on the radio for wider broadcast. Some volunteers and beneficiaries were interviewed and they revealed the role of volunteers during community awareness sessions.

Apart from the number of people who heard these awareness messages over the radio, 41,528 persons were reached through the two awareness techniques mentioned above.

Considering the total number of persons (32,993) affected by the floods, we can conclude that 130% of the population was reached through awareness sessions.

Water, sanitation and hygiene promotion	
Outcome 1: The floods risk and water-related diseases in the third district of Bangui are reduced.	
Outputs (Expected Results)	Activities planned:
<ul style="list-style-type: none"> • Measures are taken to ensure that all families affected by floods in the third arrondissement of Bangui live in a healthy environment. • Affected families are informed of key messages to reduce the risk of flooding. • Risk of diseases related to water and sanitation are reduced in the ten districts of the third district of Bangui • Red Cross Central has contributed to capacity building for vulnerable families in the ten districts of the third district of Bangui for the prevention of water-related diseases. 	<ul style="list-style-type: none"> • Purchase leaflets, posters and flipcharts with related hygiene promotion messages • Organize and carry out a sensitization campaign to reduce flood risk and improve sanitation and hygiene promotion in the 3rd district of Bangui. • Train 45 volunteers on technical awareness and hygiene promotion. • Raise awareness of flood risk and hygiene using leaflets, posters and boxes images. • Monitor, evaluate and report on water, sanitation and hygiene activities.
Outcome 2: Access to drinking water and sanitation facilities for the 337 most vulnerable families are improved	

Outputs (Expected Results)	Activities planned:
<ul style="list-style-type: none"> The 337 families have access to drinking water and sanitation facilities 	<ul style="list-style-type: none"> Purchase and distribute chlorine tablets for household water treatment and demonstrate usage. Purchase chlorine for the treatment of contaminated wells. Purchase and distribute family buckets (1 17-litre bucket per family), jerry cans (1 20-litre jerry can per family), soap (5 pieces of 250gms each per family) and a hygiene/ toiletries kit per woman (612 in total). Disinfect contaminated latrines. Clean contaminated wells. Monitor, evaluate and report on the activities related to facilitating access to safe drinking water and disinfection of latrines.

Progress:

Under the three awareness types conducted by volunteers on hygiene promotion, more than 41,528 people were reached, making a 130% coverage rate.

10 Community Disaster Response Teams (CDRT) were put in place in the ten neighbourhoods of the third district. These teams consist of seven members: three volunteers and four community members recruited among women's groups in the neighbourhood, youth groups, and a representative of the Mayor of the 3rd district.

10 sanitation kits and 10 first aid kits were handed over by the CARRC to local Red Cross committees of the 3rd district to ensure hygiene promotion in neighbourhoods of the 3rd district. These kits will be used by the CDRT.

Awareness materials included leaflets, posters and image boxes produced by the CARRC for these awareness campaigns.

CARRC volunteers distributed 1685 pieces of 200g soap, 337 buckets, 337 jerry cans and 612 hygiene kits to 337 vulnerable families.

45 CARRC volunteers living in the 3rd district were trained in water purification techniques, the use of Aquatabs, well treatment with chlorine, awareness and hygiene promotion techniques.

500 leaflets, 50 posters and 10 image boxes were produced for the awareness campaign.

Awareness messages on water purification techniques were disseminated through mass awareness and proximity campaigns, and by radio broadcast. Drinking water purification with Aquatabs was demonstrated in each household and 235 Aquatabs tablets to cover a period of two and a half months distributed to each of them. A total of 79,900 tablets were distributed to 340 flood-affected families.

Furthermore, 424 contaminated wells in 10 flood-affected neighbourhoods were identified and chlorinated in order to provide potable water to flood victims.

10 Community Disaster Response Teams (CDRT) were put in place in ten neighbourhoods. These teams consist of 7 members: 4 volunteers and 3 community members recruited among local women's groups, youth groups and a representative of the Mayor of third district. 10 sanitation kits were distributed by the CARRC to ensure hygiene promotion in neighbourhoods of the 3rd district.

Treatment of wells

No.	Neighbourhood (Site)	Number of wells treated	Number of beneficiary families	Number of beneficiaries
1	MAKAMBO	50	500	2566
2	GBAYA DOMBIA	62	614	3190

3	FONDO	47	417	2356
4	BEA REX	39	390	1958
5	BIBALE	52	468	2645
6	YAKITE	41	492	2059
7	SRA DAH	33	330	1658
8	BANGA SARA	36	504	1816
9	SOUMA POTOPTO	44	484	2207
10	ISSONGO	20	240	1005
TOTAL		424	4439	21460

Distribution of Aquatabs

No.	Neighbourhood (Site)	Aquatest distributed	Family heads	Aquatest planned
1	MAKAMBO	15275	65	15275
2	GBAYA DOMBIA	25850	110	25850
3	FONDO	4230	18	4230
4	BEA REX	6110	26	6110
5	BIBALE	6110	26	6110
6	YAKITE	3760	16	3760
7	SARA DAH	4465	19	4465
8	BANGA SARA	3055	13	3055
9	SOUMA POTOPTO	4700	20	4700
10	ISSONGO	6345	27	6345
TOTAL		79900	340	79900

Challenges:

The third district has 29 neighbourhoods and only 10 hygiene promotion kits were provided to the district. These kits are insufficient.

During awareness sessions, the population instead expected the Red Cross to clean the drains for them. It should be noted that this is the main cause of the flooding.

Only 337 targeted families had to receive Aquatabs, but many people whose names were not on the list showed up and asked for the tablets simply because they had participated in awareness sessions.

Most wells that were treated are poorly constructed or not constructed at all because the openings are low-lying and contaminated water can infiltrate them.

Wells have been treated; but mindful of the recurrent floods in the 3rd district, these wells may still be contaminated when the next flood occurs.

Latrines are poorly constructed and not up to standard. They are near homes and flood-prone areas. These latrines are not always locked and are favourable breeding grounds for mosquitoes.

Recommendations:

Drain-cleaning programs should be put in place and the population should be sensitized to construct openings of wells and provide sewage channels around them. They should also be sensitized on where to build latrines and to always lock them in order to prevent the proliferation of mosquitoes.

Communications

Outcome: Contribute to the prevention and reduction of flood risks through a media campaign to raise public awareness of the affected areas and risks.

Output (Expected Results)

Activities planned:

<ul style="list-style-type: none"> The population from the affected areas and surrounding is sensitized through radios and print media using previously designed key prevention messages and actions taken by the National Society in the operation. 	<ul style="list-style-type: none"> Create a two-minute radio spot in the local dialect (Sango). Broadcast the radio spot twice a week on alternate radio waves Ndeke Luka and Central Africa. Broadcast weekly news on alternate radio stations Ndeke Luka and Central Africa. A weekly 25-minute live on national radio CAR. Insertion of a quarter page weekly in print with a rotation between <i>Confident</i>, <i>Citoyen</i> and <i>Hirondelle</i> newspapers.
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Progress:

All activities conducted by CARRC volunteers within the context of this project were covered by local community radio stations and newspapers. A ten-minute spot was designed and two press releases broadcast over *radio Centrafrique* and *Ndeke Luka*. A weekly half-page article was published in *Hirondelle* newspaper. An NDRT member granted an interview in French and *Sango* (local language). Two beneficiaries also granted interviews in *Sango* to thank the Red Cross. *Radio Centrafrique* and *Ndeke Luka* broadcast information on the distribution of NFIs, Aquatabs, awareness activities, the handing over of sanitation materials and first aid kits in French and *Sango*.

The Disaster Manager of the CARRC and the Vice President of the 3rd district committee also granted interviews in French and *Sango*.

Security:

The security situation in the Central African Republic in general and Bangui in particular is still uncertain. Physical harassments have reduced, but vehicles are robbed on a regular basis. About two or three vehicles of NGOs are robbed every week. The latest on this list is that of the IFRC that was robbed on Tuesday, 12 November 2013.

Some neighbourhoods of the city have been identified by the ICRC as high risk neighbourhoods. They include the 4th and 5th districts, PK12, Combattant, and all hotspots and popular neighbourhoods (including bars) in the city.

The CARRC has issued a service memo prohibiting the movement of vehicles from 4 pm and calling on expatriates to return to their hotels and residences before 6 pm everyday.

Contact information

For further information specifically related to this operation please contact:

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DREF history:

- This DREF was initially allocated on 18 September 2013 for CHF 120,702 for 03 months to assist 1785 (337 families).
 - 1DREF operation updates issued (present)
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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 (NGO's) 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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