

# DREF operation update



## Republic of Congo: Cholera Operation Objectives and Budget Revision

DREF operation n° MDRCG004  
GLIDE n° EP-2008-000100-COG  
Update n° 01  
1 September, 2008

The International Federation's 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 response to emergencies. 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:** 9 July to 21 August, 2008.

**Summary:** CHF 69,310 was initially allocated from the Federation's Disaster Relief Emergency Fund (DREF) on 9 July, 2008 to support the Congolese Red Cross National Society in delivering assistance to some 400,000 beneficiaries. The situation in the field deteriorated as the epidemic has now expanded to new localities, including Brazzaville, the capital of the country. An additional CHF 57,000 is therefore being requested to assist 460,000 beneficiaries in Brazzaville and other newly affected localities.



Congolese Red Cross volunteers have been trained on IEC techniques International Federation/Yvette Mve

This DREF operation was initially launched to respond to the cholera epidemic that was hitting the Loudima district, in the Bouenza division which is located 375 km South-East of Brazzaville, the capital of the Republic of Congo. The activities planned in that locality have been progressing satisfactorily, but new cases have been registered in neighbouring villages like Houdin (2 cases on 19 July, 2008), Sibiti (1 case on 29 July, 2008), and Madingou (1 case on 30 July, 2008). In addition, the epidemic has reached the town of Brazzaville (2 cases were registered on 17 August, 2008), and there is the fear that the situation may come out of hand if nothing is done to kick the epidemic out of the capital of the Republic of Congo. This has prompted the definition of new objectives of the operation to cover the new localities, taking into consideration the financial consequences. Thus, this operation update highlights what has been achieved so far and the revision of objectives and budget in order to respond to the epidemics in the newly affected localities. With this revision, the operation is being to 21 December, 2008.

This operation was initially expected to be implemented in 03 months, and completed by 09 October,

2008. This operation update also revises the timeframe from 3 months to 5 months. Therefore, the operation will be completed by 21<sup>st</sup> December, 2008. In line with Federation reporting standards, the Final Report (narrative and financial) is due 90 days after the end of the operation (by 21 March, 2009). [<click here to view the budget and map, or here for contact details>](#)

## The situation

This DREF Operation was initially launched to respond to the cholera epidemic that was hitting the Loudima district, in the Bouenza division which is located 375 km South-East of Brazzaville, the capital of the Republic of Congo. The activities planned in that locality have been progressing satisfactorily, but new cases have been registered in neighbouring villages like Houdin (2 cases on 19 July, 2008), Sibiti (1 case on 29 July, 2008), and Madingou (1 case on 30 July, 2008). In addition, the epidemic has reached the town of Brazzaville (2 cases were registered on 17 August, 2008), and there is the fear that the situation may come out of hand if nothing is done to kick the epidemic out of the capital of the Republic of Congo. A joint team composed of representatives of the Ministry of Health and those of the Congolese Red Cross Society went on the field to assess the situation and realised that the epidemic came as a result of lack of potable water and appropriate latrines, coupled with the consumption of unsafe water and the disrespect of hygiene and sanitation rules. It should be noted that 208 cases and 8 deaths were registered in Brazzaville alone when an outbreak of the same epidemic occurred in 2007. This has prompted the definition of new objectives of the operation to cover the new localities, taking into consideration the financial consequences. Thus, this operation update highlights what has been achieved so far and the revision of objectives and budget in order to respond to the epidemics in the newly affected localities. With this revision, the operation will be extended from 09 October, 2008 to 21<sup>st</sup> December, 2008.

## Coordination and partnerships

The Crisis Committee that was set up to respond to the epidemics has been holding sporadic meetings. However, there is constant and fruitful exchange of information between the various actors in the operation, notably Government and the Congolese Red Cross Society. The five commissions that were created within this committee have been living no stone unturned to meet the requirements of their mandate. A joint team made up of representatives of the Ministry of Health, Social Affairs and Family went on the field on 30 July, 2008 to re-evaluate the situation and reassess the needs one month into the operation. WHO has been supporting government in the Bouenza locality. In addition, Government donated two chairs to the Congolese Red Cross to build their operational capacities.

## Red Cross and Red Crescent action

### Progress towards objectives

#### Emergency Health

**Objective: To improve the health condition of the population affected by cholera.**

#### Activities planned:

- Training 70 volunteers on IEC techniques to enable them to maintain a permanent sensitisation campaign in their respective communities.
- Making the trained 70 volunteers to sensitise the populations and carry out sanitation activities for two months, on the basis of three sessions per week.
- Promoting individual and body sanitation
- Advocating before administrative authorities and partners for support.

Mindful of the new developments in the field, the following activities will be carried out in Brazzaville and the other localities newly affected by the cholera epidemics:

- Training 50 Congolese Red Cross volunteers on the PHAST process;
- Encourage the communities concerned to get themselves involved in ongoing sanitation activities in their respective localities;
- Organising campaigns to clean gutters and other waste water pipes;
- Building 10 Sanplat latrines in the areas most exposed to faecal-borne diseases;
- Cleaning water points;

- Advocating before Government for the collection and disposal of garbage in the areas most exposed to cholera.

### Progress and impact:

Thanks to the first DREF allocation, the Congolese Red Cross Society supported by a Federation regional disaster response team (RDRT) trained 65 Red Cross volunteers and 5 heads of neighbourhood on IEC techniques and on cholera epidemic management using the PHAST process. The trainees included 30 women and 40 men. Community-based relays have also been trained in Mouindi and Loudima, on the basis of 10 in Mouindi, 36 in Loudima Station, and 24 in Loudima Post.

So far, the sensitisation campaign conducted by Red Cross volunteers has made it possible to reach 6,020 people in Loudima (13,000 inhabitants) and 1,191 people in Mouindi (3,000 inhabitants). In addition, while Red Cross volunteers are almost completing the construction of 108 new latrines in Loudima, 132 have been disinfected in the same locality from 30 July to 5 August. The same activities are being replicated in Mouindi. The decision to build and/or rehabilitate the latrines came as a result of the sensitisation campaign and the advocacy conducted by Red Cross volunteers. No new case of cholera has been registered in Loudima and Mouindi since 1 August, 2008.

Government authorities decided to launch a general clean up campaign in the Bouenza division. This was inspired by the action taken by the Red Cross to respond to the cholera epidemics. In addition, Government donated 2 houses to host the local councils of the Congolese Red Cross society in Mouindi and Loudima.

**Challenges:** The populations in the affected localities are used to remove night-soil with their bare hands. Afterwards, they through it in the Louvila, Loudima and Kayes Rivers where they normally get their drinking water. At times they use night-soil as fertilizer or animal food for pork and other domestic animals. If a lasting and final solution must be found to cholera outbreak in those localities, this problem must be solved in advance.

Moreover, the localities targeted by the first DREF are enclosed, and this delayed the action taken by the Red Cross. The nonexistence of a local council of the Congolese Red Cross in Mouindi also delayed the rapid implementation of activities as planned in the DREF operation. The situation is further worsened in Nkayi, an area located 35 km from Loudima, by an outbreak of a bilharziasis epidemic.

## How we work

All International Federation 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 is committed to the [Humanitarian Charter and Minimum Standards in Disaster Response](#) (Sphere) in delivering assistance to the most vulnerable.

The International Federation's activities are aligned with its Global Agenda, which sets out four broad goals to meet the Federation's mission to "improve the lives of vulnerable people by mobilizing the power of humanity".

### Global Agenda Goals:

- Reduce the numbers of deaths, injuries and impact from disasters.
- Reduce the number of deaths, illnesses and impact from diseases and public health emergencies.
- Increase local community, civil society and Red Cross Red Crescent capacity to address the most urgent situations of vulnerability.
- Reduce intolerance, discrimination and social exclusion and promote respect for diversity and human dignity.

## Contact information

### For further information specifically related to this operation please contact:

- In Congo Brazzaville: Christian Ndinga, President, Congolese Red Cross, Brazzaville; email: [chrised\\_ndinga@yahoo.fr](mailto:chrised_ndinga@yahoo.fr), Tel:+242.662 03 11
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[<budget and map below; click here to return to the title page>](#)

## **BUDGET SUMMARY**

<b>TYPE</b>	<b>VALUE IN CHF</b>
<b>SUPPLIES FOR BENEFICIARIES</b>	
Water & Sanitation	4,225
Medical and First Aid	5,450
Teaching Materials	2,163
<b><u>TOTAL BENEFICIARIES NEEDS</u></b>	<b>11,838</b>
<u>PROGRAMME SUPPORT</u>	
Programme support (6,5% of total)	3,701
<u>TRANSPORT AND STORAGE</u>	
Transport & Vehicles	1,600
<u>PERSONNEL</u>	
NS Staff	24,200
<u>WORKSHOP &amp; TRAINING</u>	
Workshop & training	1,470
<u>GENERAL EXPENSE</u>	
Travel	11,250
Other General Expense	750
Communications	1,700
Other Admin Costs	430
<b><u>TOTAL OPERATIONAL NEEDS</u></b>	<b><u>45,101</u></b>
<b>TOTAL APPEAL CASH, KIND, SERVICES</b>	<b>56,939</b>