



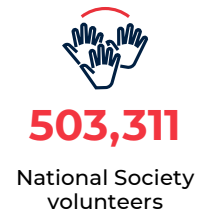
THE DEMOCRATIC REPUBLIC OF CONGO

2025 IFRC network annual report, Jan-Dec



7 July 2026

IN SUPPORT OF RED CROSS OF THE DEMOCRATIC REPUBLIC OF THE CONGO



PEOPLE REACHED

Emergency Operations



1,985,299

Climate and environment



3,721,213

Disasters and crises



4,433,171

Health and wellbeing



3,751,592

Migration and displacement



209,566

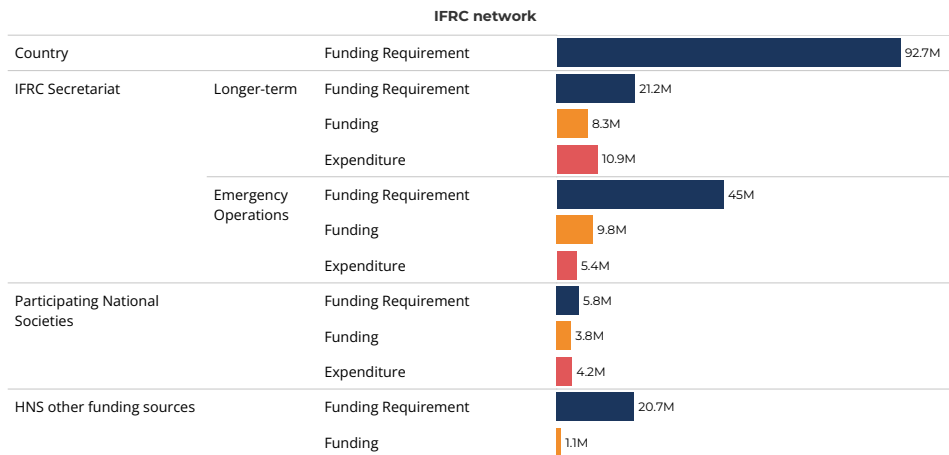
Values, power and inclusion



1,607,129

FINANCIAL OVERVIEW

in Swiss francs (CHF)



Appeal number **MAACD002**

*Information on data scope and limitations is available on the back page

ONGOING EMERGENCY INDICATORS

MRDS1003 / Mpox Epidemic

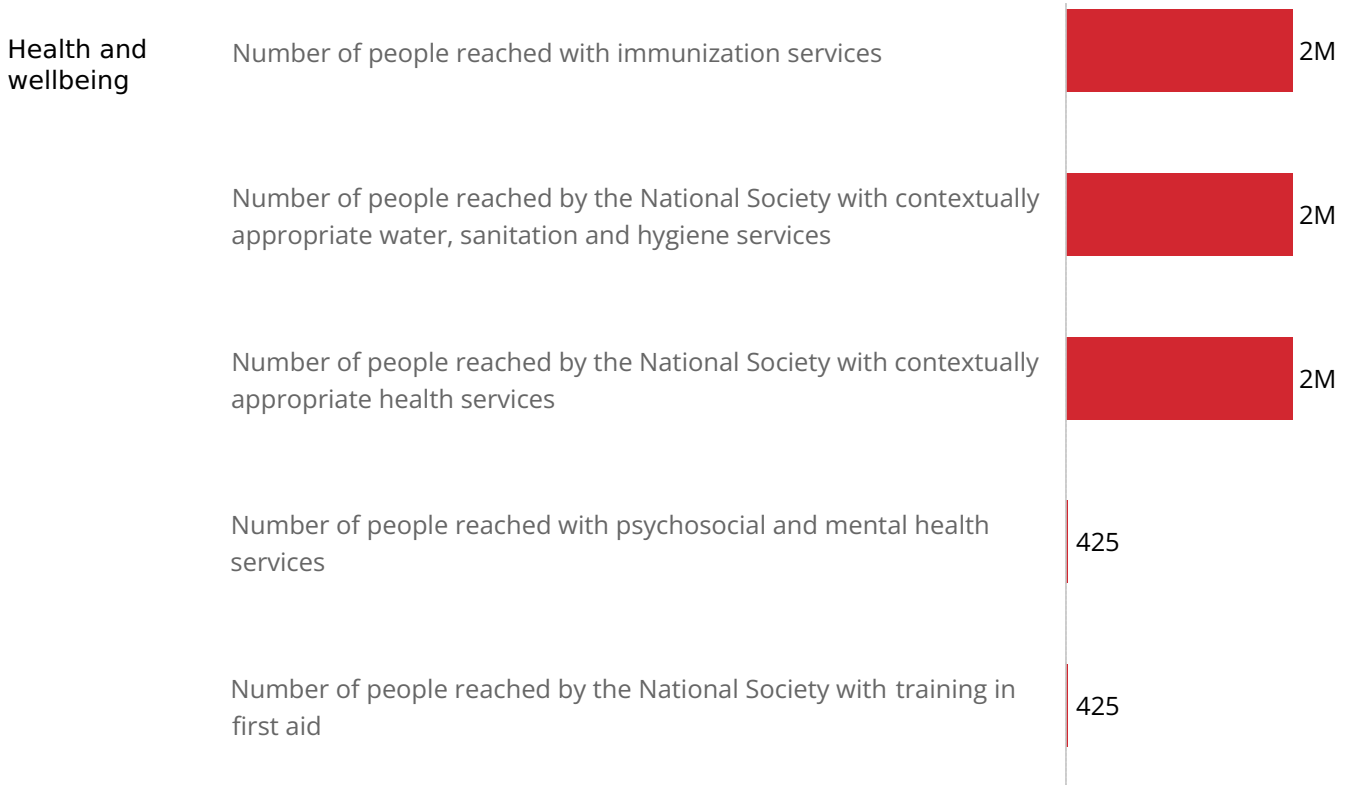
Accountability and agility	National Society has a PSEA Action Plan to enforce prevention and support survivors	1
	National Society is implementing a digital transformation roadmap in line with the IFRC strategy	Yes
	National Society has strengthened its integrity and reputational risk mechanism	Yes
	National Society has a Protection of Sexual Exploitation and Abuse (PSEA) policy to enforce prevention and support survivors	Yes
	National Society has a functioning data management system that informs decision making and supports monitoring and reporting on the impact and evidence of its actions	Yes
Disasters and crises	Number of people reached with emergency response and early recovery programmes	828
Health and wellbeing	Number of people reached by the National Society with contextually appropriate health services	5.2M
	Number of people reached with psychosocial and mental health services	759,000
	Number of people reached by the National Society with contextually appropriate water, sanitation and hygiene services	457,000
	Number of people reached with immunization services	140,000
Humanitarian diplomacy	National Society participates in IFRC-led campaigns	Yes
	National Society has a domestic advocacy strategy developed aligning, at least in part, with global IFRC advocacy strategies	Yes
Migration and displacement	National Society has undertaken any data collection, research, analysis or other information management initiatives to better assist and protect people on the move	Yes

National Society development	There is a National Society Development plan in place	Yes
	National Society has developed and/or implemented a strategy for strengthening their auxiliary role	Yes
	National Society has created and implemented youth engagement strategies	Yes
	National Society covers health, accident and death compensation for all of its volunteers	Yes
Strategic and operational coordination	Number of government-led coordination platforms the National Society is part of	1
	Number of formal interagency/international coordination platforms the National Society is part of	1
Values, power and inclusion	Number of people reached by protection, gender and inclusion programming	435,000
	National Society has a Community Engagement and Accountability policy, strategy or plan	Yes

MDRCD043 / Mouvement de Populations

Climate and environment	Number of people reached with activities to address rising climate risks	24,000
	Number of people reached with heatwave risk reduction, preparedness or response activities	14,000
	Number of people reached with activities to address environmental problems	6,000
	National Society implements nature-based solutions (including those with a particular focus on the planting of trees and mangroves)	Yes
	National Society implements environmental or climate campaigns focused on behaviour change, plastic reduction, clean-ups or reducing GHG emissions	Yes

Disasters and crises	Number of people reached with disaster risk reduction	34,000
	Number of people reached with emergency response and early recovery programmes	6,000
Health and wellbeing	Number of people reached with psychosocial and mental health services	26,000
	Number of people reached by the National Society with training in first aid	106
Migration and displacement	Number of migrants and displaced persons reached with services for assistance and protection	29,000
	National Society has undertaken any data collection, research, analysis or other information management initiatives to better assist and protect people on the move	Yes
	National Society has undertaken any advocacy, dialogues, educational or communication initiatives to change the legal, policy, or operational environment to better assist and protect people on the move	Yes
Strategic and operational coordination	Number of formal interagency/international coordination platforms the National Society is part of	7
Values, power and inclusion	Number of people whose access to education is facilitated through National Society's programming	34
	Percentage of those surveyed report receiving useful and actionable information	85%
	National Society has a Community Engagement and Accountability policy, strategy or plan	Yes



STRATEGIC PRIORITIES



	Number of people reached with livelihoods support	2M
	Number of people reached with shelter support	397,000
	Percentage of assistance delivered using cash and vouchers	100%
Health and wellbeing	Number of people donating blood	201,000
	Number of people reached by the National Society with contextually appropriate health services	8.4M
	Number of people reached by the National Society with contextually appropriate water, sanitation and hygiene services	2.5M
	Number of people reached by the National Society with training in first aid	15,000
	Number of people reached with immunization services	3.8M
	Number of people reached with psychosocial and mental health services	604,000
	Migration and displacement	National Society has undertaken any advocacy, dialogues, educational or communication initiatives to change the legal, policy, or operational environment to better assist and protect people on the move
National Society has undertaken any data collection, research, analysis or other information management initiatives to better assist and protect people on the move		Yes
Number of Humanitarian Service Points (HSPs) providing assistance and/or protection to people on the move along migration routes		48
Number of migrants and displaced persons reached with services for assistance and protection		210,000

Values, power and inclusion	National Society has a Community Engagement and Accountability policy, strategy or plan	Yes
	Number of people reached by protection, gender and inclusion programming	1.5M
	Number of people reached by the National Society's educational programmes	1.6M
	Number of people whose access to education is facilitated through National Society's programming	1.6M
	Percentage of those surveyed report receiving useful and actionable information	100%

ENABLING FUNCTIONS

Accountability and agility	National Society has a functioning data management system that informs decision making and supports monitoring and reporting on the impact and evidence of its actions	Yes
	National Society has a Protection of Sexual Exploitation and Abuse (PSEA) policy to enforce prevention and support survivors	Yes
	National Society has strengthened its integrity and reputational risk mechanism	Yes
	National Society is implementing a digital transformation roadmap in line with the IFRC strategy	Yes
Humanitarian diplomacy	National Society has a domestic advocacy strategy developed aligning, at least in part, with global IFRC advocacy strategies	Yes
	National Society participates in IFRC-led campaigns	Yes
National Society development	National Society covers health, accident and death compensation for all of its volunteers	Yes
	National Society has created and implemented youth engagement strategies	Yes
	National Society has developed and/or implemented a strategy for strengthening their auxiliary role	Yes
	There is a National Society Development plan in place	Yes

IFRC NETWORK BILATERAL-SUPPORTED ACTIVITIES

National Society	Funding Reported	Climate and environment	Disasters and crises	Health and wellbeing	Migration and displacement	Values, power and inclusion	Enabling Functions
Belgian Red Cross	1.1M	●	●	●	●	●	
French Red Cross		●	●	●	●	●	
Luxembourg Red Cross			●				
Netherlands Red Cross	236,000						
Spanish Red Cross	1.7M	●	●	●	●	●	
Swedish Red Cross	745,000	●	●	●		●	
Turkish Red Crescent	21,000						

Total Funding Reported **CHF 3.8M**

Q1. OVERALL PERFORMANCE

Context

The Democratic Republic of Congo (DRC) is about the size of Western Europe and is the largest country in sub-Saharan Africa. It is endowed with exceptional natural resources, including minerals like cobalt and copper, hydropower potential, significant arable land, immense biodiversity, and the world's second-largest rainforest. Most people in the DRC have not benefitted from this wealth. The country is experiencing a complex, protracted crisis resulting from a combination of factors such as conflict, environmental hazards, and disease outbreaks. Internal and cross-border displacement, acute food insecurity and malnutrition, epidemics and protection issues affect the population. In 2025, the humanitarian context remained shaped by overlapping security, health and climate crises, reinforcing the need for integrated, multisectoral responses combining humanitarian assistance, protection, health and community engagement.

A long history of conflict has led to a grave humanitarian crisis. There are more than 120 active non-state armed groups in eastern DRC, with a resurgence of violence in 2022. The most active groups include the 23 March Movement (M23), and the Allied Democratic Forces (ADF) which have escalated violence in the Kivu region, leading to severe humanitarian consequences. Médecins sans Frontières (MSF) notes that Kivu is experiencing its worst crisis in 30 years, with nearly 1.5 million displaced people, including 600,000 in Goma.

Living conditions are dire, marked by epidemics of measles and cholera, inadequate sanitation and drinking water, widespread insecurity, and frequent incidents of rape. Persistent insecurity in North Kivu, South Kivu and Ituri continued to drive large-scale displacement and intensify humanitarian needs. Since January 2025, more than 400,000 people have been newly displaced in North and South Kivu. An estimated 2.7 million people in Ituri, North Kivu and South Kivu face severe food insecurity, with a 10 per cent increase between September 2024 and May 2025. The total people in need for the country exceeds 28 million - the highest level for more than a decade. Over four million internally displaced persons and 3.2 million returnees are currently in eastern DRC, with 96 per cent of displacements linked to armed violence. Armed conflict and grave human rights violations continue to force millions from their homes, with the DRC now hosting the highest number of internally displaced persons in Africa—more than 6.8 million (OCHA June 2025).

Displaced individuals lack access to adequate services, and preventable epidemics like measles, yellow fever, cholera, and malaria persist. Maternal mortality is high, with four women dying every hour during childbirth or due to pregnancy-related complications. The infant mortality rate is alarming at 70 per 1,000 live births. The country has also seen outbreaks of Mpox, compounding existing health system challenges. On 4 September 2025, the Ministry of Health declared a new Ebola Virus Disease outbreak in Kasai Province, further compounding public health pressures and requiring an intensified emergency response.

The DRC faces one of the highest stunting rates in sub-Saharan Africa, with malnutrition causing nearly half of all deaths in children under five. Unlike other African countries, the prevalence of stunting in the DRC has not decreased in the past two decades, partly due to a high fertility rate. Almost 60 per cent of the population is below 20 years of age. Urbanization is growing rapidly, at a rate of 4.5 per cent annually, placing further strain on basic services in major cities.

In 2025, severe flooding caused by torrential rains in Kinshasa and Tanganyika Province further exacerbated displacement, damaged homes and infrastructure, disrupted livelihoods and increased public health risks, including surges in cholera cases and worsening food insecurity.

Key achievements

Climate and environment

During the reporting period, the Red Cross of the Democratic Republic of the Congo (DRC Red Cross) carried out awareness-raising activities in Nundu, Vizi, Baraka and Uvira on respect for the environment, climate risks and recovery and developed and implemented a project focused on Nature-based Solutions in districts of Kinshasa to address flood risks caused by rising river waters. The National Society appointed and trained green response focal points from multiple communes in Kinshasa and conducted an institutional assessment on green response that resulted in an

action plan. It implemented some risk mitigation actions in the two target municipalities of Kinshasa. The DRC Red Cross reforested at-risk sites to prevent erosion and strong winds, planted trees in the courtyards of several schools in Kinshasa and conducted a school sanitation project as part of environmental interventions. It committed to the [Pan-African Tree Planting and Care](#) initiative and engaged communities in reforestation through its Community Resilience Programme and other climate-related activities.

Disasters and crises

In 2024, the DRC Red Cross [responded to floods](#), armed conflict and epidemics including cholera, measles, COVID-19 and Mpox and carried out [disaster risk reduction](#) through environmental awareness-raising. It implemented the [Zero Hunger initiative](#) through [food security](#) interventions in North Kivu, Tanganyika and Kasai, supported malnourished children with agricultural and food processing assistance, distributed food and non-food items and established community-based surveillance for population movements. The National Society strengthened volunteers and branches in Kasai, conducted needs assessments and post-distribution monitoring and implemented a project on resilient communities and disaster preparedness in Kinshasa. In South Kivu, it delivered preparedness activities in Baraka, Nundu and Fizi Centre, mobilized volunteers on environmental sustainability and [disaster risk management](#), participated in coordination platforms and provided cash assistance.

Health and wellbeing

From January to December 2024, the DRC Red Cross maintained ambulance services, continued health training and strengthened financial and technical resources. It carried out cholera prevention in Lubumbashi, Kasenga, Pweto and Niunzu, distributed condoms to sex workers in Kenge and Kikwit and raised awareness on waterborne diseases in Kinshasa. The National Society contributed to [epidemic and pandemic preparedness](#) through coordination platforms and developed a national Community Risk Engagement and Communication plan for Mpox vaccine integration. It supported COVID-19 vaccination through routine healthcare, reaching priority groups and zero-dose children through home visits and mass awareness activities. Through the Community Epidemic and Pandemic Preparedness Programme (CP3), the DRC Red Cross promoted commercial first aid services, strengthened monitoring tools and conducted social behaviour change. It also conducted community health promotion through household visits, mobile cinema, radio and school-based health activities. It strengthened staff and volunteer capacity in [mental health and psychosocial support](#) and provided these services during crises. Additionally, the National Society distributed drinking water in displacement camps, built water structures in multiple provinces and supported school sanitation infrastructure in Kinshasa while raising awareness on safe water, latrine use and prevention of sexual violence.

Migration and displacement

During the reporting period, the DRC Red Cross provided assistance and protection services to migrants and displaced persons by identifying health zones for establishing [Humanitarian Service Points](#) to support migrants and vulnerable host communities in Kasenga, Tanganyika, Mitumba, Kabindula, Saint Paul, Kavinvira and displacement sites Kilomoni I and II and Kasenga CEAPAC. It formalized partnerships with local authorities and community leaders and established standard operating procedures for Humanitarian Service Points, including psychological assistance, medical support and counselling. Volunteers were trained in protection principles, health protocols, legal assistance, the 'Do No Harm' principle and [Enhanced Vulnerability and Capacity Assessments](#). The National Society also provided [Restoring Family Links](#) services by identifying and reuniting unaccompanied children with families, registering tracing requests and facilitating free calls through call points in displacement camps.

Values, power and inclusion

In 2024, the DRC Red Cross integrated [Protection, Gender and Inclusion](#) and [Community Engagement and Accountability](#) approaches across its programmes, adapted community feedback tools and trained staff on feedback systems. It organized workshops focused on fraud and corruption, disseminated its [Youth Policy](#) and [Code of Conduct](#) and [engaged young](#) people through the National Youth Council. The National Society strengthened emergency response preparedness with a focus on dignity, access, participation and security and retrained teams in protection principles, volunteer ethics and conduct. It also engaged in advocacy for displaced persons, migrants and host communities through coordination platforms on child protection and gender-based violence. The DRC Red Cross provided [psychosocial support](#), referrals, counselling and listening sessions for survivors of sexual and gender-based violence and sensitized communities on gender and diversity vulnerabilities. It rehabilitated school infrastructure in Kisenso through a project entitled 'Water, Sanitation and Hygiene in Schools' and provided first aid training and dignity kits. It also conducted educational activities through its Higher Institutes of Health Sciences. The National Society trained emergency response

preparedness focal points across Kinshasa and provided humanitarian and protection assistance in response to the M23 crisis and population movements by identifying safe gathering spaces. Additionally, it worked to reduce stigma, discrimination and xenophobia in Kwango and Kwilu.

Enabling local actors

The DRC Red Cross strengthened its technical and material capacities through the implementation of operations and programmes, recruited new staff, deployed additional personnel and prioritized the rehabilitation and equipping of its headquarters to support local committees in implementing operational action plans. It utilized the [IFRC Capacity Building Fund](#) and the [IFRC/ICRC National Society Investment Alliance](#) to improve operational and institutional effectiveness. The National Society organized the Ordinary General Assembly in Kinshasa, held elective general assemblies of branches, trained branch leaders in good governance and volunteers in [food security](#) and nutrition, created a volunteer database, launched the popularization of normative documents and developed a unified National Society development plan while involving political, administrative and health authorities to ensure sustainability. It strengthened engagement in humanitarian diplomacy by training provincial presidents and secretaries. Its leadership met with the President of the DRC to reinforce its [auxiliary role](#) and mandate. The DRC Red Cross developed strategic plans, policies and procedures to ensure community involvement in early action and planning systems. It also maintained robust financial and logistical procedures and strengthened control mechanisms for fraud prevention and [Protection Against Sexual Abuse and Exploitation](#), while ensuring effective human resource management and the well-being of staff and volunteers.

Q2. CHANGES AND AMENDMENTS

In this reporting period, no changes or amendments were made by the National Society.

Q3. MEASURING RESULTS OF THE IFRC NETWORK ACTION

ONGOING EMERGENCY RESPONSE

For real-time information on emergencies, see the [IFRC GO DRC](#).

1.

Emergency Appeal Name	Population Movement
Emergency Appeal number	MDRCD043
People affected	2.5M
People to be assisted	500,000
Duration	9 July 2022 to 31 December 2025 (Emergency Appeal maybe extended)
Funding requirements	Federation-wide funding requirement: CHF 50 million IFRC Secretariat funding requirement: CHF 30 million
Link to Revised Emergency Appeal	Population Movement Emergency Appeal
Link to Latest Operational Strategy	Population Movement Operational Strategy
Latest Operations Update	Operational Update No.4

The protracted conflict in North Kivu, Democratic Republic of Congo (DRC), has persisted for nearly 30 years, escalating significantly since 2022. This has created a complex emergency with numerous armed actors, mass displacement, and a dire humanitarian crisis.

Since March 2022, around 1.6 million people have been displaced, with Goma and Nyiragongo territory experiencing multiple waves of displacement. Between 28 January and 12 February 2024, approximately 135,000 IDPs fled from

Sake to Goma, and 60,000 more sought refuge in South Kivu. The conflict has neared Goma, causing civilian casualties and straining healthcare facilities. Blocked roads have disrupted food supplies, and displaced individuals lack access to basic necessities, forcing them into negative coping mechanisms. The spread of cholera further exacerbates the crisis.

Urgent interventions are needed to provide healthcare, food, water, and shelter while also focusing on long-term resilience-building efforts.

Short description of the emergency operational strategy

Through this emergency appeal, the DRC Red Cross aims to assist up to 500,000 people, including 400,000 IDPs and 100,000 host community members. The National Society has set up humanitarian service points across North Kivu and South Kivu to provide essential services to those affected. It has been actively coordinating with the DRC authorities and humanitarian partners to ensure an effective response.

The National Society's interventions under the emergency appeal focus on the following areas: Health and healthcare, Water, sanitation and hygiene (WASH), Shelter, Livelihoods, Cash transfer assistance, Protection Gender and Inclusion, Migration and Displacement.

The operation is planned to end on December 31, 2025. An extension of the operation in 2026 has not yet been decided, but it is important to note that humanitarian needs will remain high if the armed conflict continues. The National Society will also continue to provide humanitarian assistance through long-term programs.

2.

Emergency Appeal Name	Africa Regional Mpox Epidemic
Emergency Appeal number	MDRS1003 (MDRCD045)
People affected	300 million
People to be assisted	30 million
Duration	16 months (20 August 2024 to 31 December 2025) (Emergency Appeal maybe extended)
Funding requirements	Federation-wide funding requirement: CHF 40 million IFRC Secretariat funding requirement: CHF 30 million
Link to Revised Emergency Appeal	Africa – Regional Mpox Epidemic
Link to Latest Operational Strategy	Mpox Epidemic Operational Strategy
Latest Operations Update	Operations Update No.3

In 2024, a concerning surge in Mpox cases and deaths has been reported across 12 African countries, with over 17,000 cases and 500 deaths. While the Democratic Republic of the Congo (DRC) remains the epicentre, accounting for 92 per cent of cases, cross-border transmission has extended to Burundi, Rwanda, Uganda and Kenya. Outbreaks have also been observed in other endemic countries such as Nigeria, Cote d'Ivoire and Central African Republic. The DRC Red Cross Society is actively involved in preparedness and response efforts, with support from the IFRC and other National Societies. The IFRC is mobilizing its vast network across Africa to provide critical interventions, including community-based surveillance, risk communication, vaccination efforts and psychosocial support to curb the spread of the virus.

Short description of the emergency operational strategy

The regional Mpox emergency appeal aims to assist National Societies in preparing for and responding to the Mpox epidemic. The strategy includes scaling up Health and water, sanitation and hygiene (WASH) services, community engagement and accountability (CEA) and addressing socio-economic impacts. The operation will be guided by a risk-based approach and regional coordination, prioritizing preparedness, readiness and response. The DRC Red Cross will receive support to develop country-specific response plan, enhance community-based advocacy and mitigate the spread of the virus, particularly in areas with imported cases or established transmission. The operation will also target vulnerable populations, including marginalized and immuno-compromised groups, with a focus on protection, gender and inclusion. The highlights of the assistance are:

Integrated assistance: Affected people and families are provided with a safety net scheme, including multipurpose cash to meet immediate needs and cover basic necessities while recovering from Mpox infections. Affected people who have lost their livelihoods due to Mpox are aided in reintegrating into the labor market through skills enhancement and diversification.

Health and care, including water, sanitation and hygiene (WASH): Affected people are provided with community-based surveillance to detect and actively find suspected Mpox cases, feeding into existing surveillance systems. Clinical care pathways for screening, triage, isolation, testing and assessment are identified through national plans and guidelines, ensuring awareness among clinical facilities. Communities are sensitized on Mpox transmission, symptoms and preventive actions. Health services ensure individuals with Mpox symptoms seek care, with support for isolation and referral. Vaccination efforts are supported through community engagement. WASH facilities are improved in health centres, with ongoing hygiene promotion to reduce transmission.

Cross-cutting approaches: The operational strategy integrates community engagement and accountability (CEA) and protection, gender and inclusion (PGI) as pivotal elements, in an approach that recognizes and values all community members as equal partners, with their diverse needs shaping the response. Activities include the provision of dignity kits and establishment of two-way feedback mechanisms. The strategy emphasizes local voice amplification, collaborative engagement and transparent communication, extending into long-term resilience building through initiatives such as the IFRC Pan-Africa Zero Hunger Initiative.

The operation is planned to end on December 31, 2025. An extension of the operation into 2026 has not yet been decided, but the Red Cross will also contribute through long-term health programs.

3.

Emergency Appeal Name	Ebola Epidemic
Emergency Appeal number	MDRCD047
People affected	680,000 at immediate risk 2 million at extended risk
People to be assisted	965,000
Duration	12 months (15 September 2025 to 30 September 2026)
Funding requirements	Federation-wide funding requirement: CHF 20 million IFRC Secretariat funding requirement: CHF 14.5 million
Link to Revised Emergency Appeal	Ebola Epidemic emergency appeal
Link to Latest Operational Strategy	Ebola Epidemic operational strategy
Latest Operations Update	Operations update no.1

The 16th outbreak of Ebola virus disease (EVD) in the Democratic Republic of Congo (DRC) was declared in the province of Kasai on September 4, 2025, by the Minister of Public Health, Hygiene and Prevention. As of 6 October, the Ebola Virus Disease (EVD) outbreak in the Democratic Republic of the Congo has reached a total of 64 cases (53 confirmed, 11 probable), including 43 deaths, for a case fatality rate of 67.2 per cent.

The Red Cross of the Democratic Republic of the Congo (DRC) is contributing to the humanitarian response through an emergency appeal launched on 15 September 2025 for 12 months by the International Federation of Red Cross and Red Crescent Societies (IFRC). 506 volunteers have been mobilized. Their interventions have made it possible to reach 82,878 people through health services.

Short description of the emergency operational strategy

The operation focuses on Mweka and Bulape while preparing the neighboring health zones in Kasai Central, Sankuru and KwangoLa operational strategy balances urgent and life- saving interventions with institutional strengthening, aimed at strengthening CRRDC sections, training of volunteers and staff, while improving preparedness in preparedness and outbreak areas.

Key interventions include safe and dignified burials, which prevent transmission while respecting local customs, with trained funeral teams, family involvement when safe, and reduced-risk burials in hard-to-reach areas.

WASH activities ensure access to safe drinking water, PPE, disinfectants, hygiene kits, decontamination of homes and public spaces, handwashing stations and hygiene promotion. With the deployment of Public Health ERUs, support to health facilities for the establishment of screening areas, the provision of essential supplies, the improvement of access to water and waste management as well as the training of health workers, including traditional healers.

The Public Health ERU will also support the DRC Red Cross in the establishment of an SBC system in coordination with the Ministry of Health. Risk communication and community engagement will provide timely, accurate and accessible information, using reliable two-way channels, local languages and multiple media, while CEA mechanisms will track rumours, gather feedback and empower communities, while mental health and psychosocial support will provide patient care, families, children, GBV survivors and responders. ERP considerations are integrated into all activities, including child protection, dignity kits, safe spaces, and partnerships with women's and disability rights organizations. National Societies' capacities are strengthened through retraining volunteers, pre-positioning of SDB supplies, PPE and contingency plans, while regional preparedness includes support to Angola, relying on the Red Cross volunteer network for cross-border surveillance, risk communication, training and coordination to prevent the importation of Ebola cases.

STRATEGIC PRIORITIES



Climate and environment

Progress by the National Society against objectives

In 2025, the Red Cross Society of the Democratic Republic of the Congo, with support from the IFRC network, continued to strengthen community resilience to climate and environmental risks. Through preparedness, anticipatory action, and response interventions, 3.7 million people were reached with activities aimed at reducing the impacts of extreme heat and other climate-related hazards. In addition, more than 881,000 people benefited from environmental initiatives focused on awareness-raising, risk management, ecosystem protection, and safeguarding livelihoods.

The National Society also concluded the final year of implementation of the Programmatic Partnership (PPP-ECHO) in South Kivu Province, covering the territories of Uvira and Fizi. The programme reached 402,573 people, including 204,132 women and 198,441 men, through integrated interventions in disaster risk management, epidemic and pandemic preparedness and response, humanitarian assistance and protection, cash and voucher assistance, and risk communication and community engagement and accountability (CEA).

A project capitalization workshop held in Uvira on 17 June 2025 brought together key stakeholders to reflect on achievements, challenges, and lessons learned. The findings confirmed that the programme successfully met its objectives and contributed to strengthening both community and institutional capacities to anticipate, prepare for, and respond to climate and environmental risks, while supporting longer-term resilience and sustainable development outcomes.

IFRC network joint support

The **IFRC** supported the National Society in the implementation of its programmes focused on climate and environment action.

The **Belgian Red Cross** supported the DRC Red Cross in carrying out reforestation through the Community Resilience Programme.

The **Swedish Red Cross** supported the National Society in its project on Nature-based Solutions, green response training and institutional assessment. It also provided assistance to the DRC Red Cross in conducting risk mitigation activities and supported its school sanitation and tree planting project.



For real-time information on IFRC emergencies, visit IFRC GO page [Democratic Republic of Congo](#).

Progress by the National Society against objectives

In 2025, the DRC Red Cross Society reached at least 4.4 million people through [disaster risk reduction](#) and resilience-building programmes implemented across the country.

A key contribution to these results was the continued strengthening and deployment of Community Disaster Response Teams (CDRTs) and Provincial Disaster Response Teams (PDRTs), which enhanced local preparedness, response, and risk reduction capacities. Enhanced Vulnerability and Capacity Assessments (EVCAs) were conducted in several high-risk areas, including villages in Kwango Province under the Community Resilience Building Programme, communities in the Nundu Health Zone in South Kivu through the PPP-ECHO programme, Bulape as part of the Ebola Virus Disease (EVD) response, and targeted locations in Tanganyika under the Resilience Programme. These assessments informed community-led action plans and strengthened understanding of local risks, vulnerabilities, and capacities.

With support from the IFRC, the National Society continued to advance anticipatory action approaches aimed at reducing the impact of disasters before they occur. A training workshop for 32 National Society staff strengthened institutional capacities in anticipatory action planning and implementation. Community awareness and preparedness activities were subsequently conducted to promote risk-informed decision-making and early action at the local level. An evaluation is planned to capture lessons learned from this initial phase and inform future scale-up efforts.

The National Society also actively participated in technical meetings and coordination platforms under the IFRC–FAO–MAP Consortium as part of the DG ECHO-funded project, Disaster Preparedness: Pioneering Innovations in Flood Risk Management in the DRC. Through this initiative, collaboration with national meteorological and civil protection services, including METELSAT, contributed to strengthening forecasting, early warning, and anticipatory action mechanisms. Community consultations and preparedness activities were carried out to support local ownership of flood risk management measures and enhance readiness for climate-related hazards.

IFRC network joint support

The IFRC supported the National Society in its [food security](#) and [disaster risk reduction](#) activities. It also supported the Community Preparedness Programme for Epidemics and Pandemics.

American Red Cross / U.S. Government-supported Movement partners through food security interventions in North Kivu and Tanganyika provinces, enabling assistance to 262,355 people affected by conflict and food insecurity through life-saving food distribution activities.

Under the global [Pilot Programmatic Partnership](#) between the IFRC and the Directorate-General for European Civil Protection and Humanitarian Aid Operations (DG ECHO) and with implementing support from, the **French Red Cross**, as lead EU National, **Luxembourg Red Cross** and **Spanish Red Cross**, the DRC Red Cross received support disaster risk reduction activities.

The **Spanish Red Cross** also supported the DRC Red Cross in the provision of agricultural support, food processing and in-kind distributions in Kasai and cash assistance in South Kivu.



DRC Red Cross volunteers respond to the Ebola outbreak in Kasai Province with support from the IFRC Emergency Appeal (Photo: IFRC)



Health and wellbeing

Progress by the National Society against objectives

In 2025, the Red Cross Society of the Democratic Republic of the Congo made substantial progress towards its health objectives, reaching at least 8.4 million people with health services and interventions. Ambulance services remained operational, while training continued across the National Society's seven health training institutions, contributing to stronger national health system capacities.

The National Society strengthened community preparedness and response to disease outbreaks through cholera prevention and awareness activities in several provinces. Mental health and psychosocial support remained a key component of emergency operations, reaching more than 501,000 people affected by disease outbreaks, food insecurity, conflict and urban emergencies.

The Community Pandemic Preparedness Programme was implemented in Kinshasa, Kongo Central and Equateur provinces, reaching 404,721 people through community awareness, preparedness and referral services. Despite the early termination of external funding, the programme achieved most of its planned results, including the delivery of health promotion messages to more than 362,000 people and the referral of nearly 12,000 children for nutritional support.

In water, sanitation and hygiene (WASH), the National Society reached nearly 2 million people through hygiene promotion, community awareness and infrastructure rehabilitation activities. As part of the community resilience programme, more than 5,800 awareness sessions were conducted, promoting safe water management, sanitation practices and protection measures.

IFRC network joint support

The IFRC supported the National Society in epidemic and pandemic preparedness as well as COVID-19 vaccination integration.

The **Belgian Red Cross** supported the DRC Red Cross in the construction of water infrastructure and first aid training. The **Belgian Red Cross (Flanders)** also provided support to the National Society in conducting humanitarian protection training.

The **French Red Cross** supported the National Society in conducting water, hygiene and sanitation activities in South Kivu.

The **Swedish Red Cross** supported the DRC Red Cross in conduction water and sanitation activities in schools in Kinshasa.



Migration and displacement

Progress by the National Society against objectives

The National Society continued to strengthen protection and assistance for internally displaced persons and vulnerable host communities. In 2025, a total of 225,431 internally displaced persons received at least one protection or assistance service, helping to reduce vulnerabilities and improve access to essential support.

Through the HP2 programme, 470 people received cash assistance to help meet their basic needs, while protection activities in the Kikwit North and South health zones reached 94,781 people through awareness-raising, psychosocial support and referrals to specialized services. In addition, the AMOPAH2 project assisted 1,014 displaced and vulnerable people through targeted protection and support activities.

The DRC Red Cross engaged with local authorities and community leaders to formalize partnerships initiated during previous exchanges. Standard operating procedures were established for the implementation of Humanitarian Service Points, outlining the necessary equipment for providing psychological assistance, medical support and counselling. Volunteer teams were trained in protection principles, health protocols, legal assistance and the 'Do No Harm' principle to enhance their capacity to respond to various shocks within communities and mitigate the psychosocial and disaster-related impacts of these events. Training also included the [Enhanced Vulnerability and Capacity Assessment](#) to enable communities to identify and address local problems.

The DRC Red Cross also provided [Restoring Family Links](#) services by identifying and registering unaccompanied children, reuniting them with their families, registering tracing requests and facilitating free calls for separated families. Call points were established in displacement camps to support these activities.

IFRC network joint support

The **IFRC** and the **Luxembourg Red Cross** supported the DRC Red Cross in the analysis and identification of areas for the establishment of [Humanitarian Service Points](#).

The **Belgian Red Cross** (French-speaking Community and Flanders) supported humanitarian protection interventions in Kwango and Kwilu provinces, integrating Protection, Gender and Inclusion approaches into multisectoral assistance programmes.



Values, power and inclusion

Progress by the National Society against objectives

In 2024, the DRC Red Cross integrated [Protection, Gender and Inclusion \(PGI\)](#) and [Community Engagement and Accountability \(CEA\)](#) approaches across its programmes. The National Society adapted community feedback tools to project operational contexts and systematically collected feedback was systematically during community surveillance and behaviour change communication activities. Additionally, it provided training in feedback systems and capacity building across other programmes and operations of the DRC Red Cross.

The DRC Red Cross organized capacity-building workshops on fraud and corruption for Executive Committee members and management staff. The National Society disseminated its [Youth Policy](#) and [Code of Conduct](#) through coordination

meetings and engaged young people through the National Youth Council. The DRC Red Cross also conducted advocacy in schools in North Kivu for the integration of school-age children.

The DRC Red Cross strengthened its capacity in minimum emergency response preparedness standards with a focus on dignity, access, participation and security. PGI teams and volunteers were retrained through workshops in protection principles and Red Cross volunteer ethics and conduct. The National Society engaged in advocacy for displaced persons, migrants and host communities, participating in meetings with the Sub Working Group on Child Protection and the head of L'Arche d'Alliance to coordinate protection and gender-based violence actions.

Additionally, the National Society implemented emergency response preparedness activities and provided training in the Code of Conduct, Protection from Sexual Exploitation and Abuse (PSEA) and emergency response preparedness. Psychosocial support services and messaging were provided to people affected by disasters. Survivors of sexual and gender-based violence were referred to specialized health centres and communities were sensitized on vulnerabilities related to gender and diversity, including persons with disabilities and provided with listening sessions, counselling and referrals for abuse cases. The National Society also continued to popularize its gender policy across branches.

The DRC Red Cross rehabilitated school infrastructure in Kisenso under its project named 'Water, Sanitation and Hygiene in Schools'. Students and teachers received training in community-based first aid and lifesaving gestures and female students were sensitized on menstrual hygiene and received dignity kits. The National Society also conducted educational activities through its Higher Institutes of Health Sciences.

Emergency response preparedness focal points across the twenty-four communes in Kinshasa were trained in emergency response preparedness. In response to the M23 crisis and population movements, the National Society provided humanitarian and protection assistance and supported host communities, displaced persons and migrants to strengthen social cohesion and inclusion by identifying community spaces for safe gathering and reducing stigma, discrimination and xenophobia. It also conducted humanitarian protection programmes in Kwango and Kwilu provinces.

In 2025, the National Society strengthened the integration of Protection, Gender and Inclusion (PGI) across its programmes and operations, reaching 1.79 million people. Efforts focused on reducing vulnerabilities and ensuring equitable, safe and dignified access to humanitarian assistance, particularly for women, girls, people with disabilities and other at-risk groups.

The National Society prioritized capacity strengthening for staff and volunteers through training on protection, humanitarian principles, prevention of sexual exploitation and abuse, codes of conduct and community-based approaches.

Under the ECHO Programmatic Partnership, the National Society developed shelter solutions adapted to the needs of displaced families and further strengthened protection mainstreaming across emergency operations. Psychosocial support, referrals for survivors of sexual and gender-based violence, disability inclusion measures and community awareness activities were systematically integrated into emergency responses.

The National Society also strengthened Community Engagement and Accountability systems through training, feedback mechanisms and the development of policies, guidelines and operational procedures that promote meaningful community participation in programme design, early warning systems and anticipatory action planning. Efforts to expand and strengthen Community Engagement and Accountability focal points continued throughout the year to support consistent implementation across programmes and operations.

IFRC network joint support

The IFRC supported the National Society in conducting capacity-building workshops in the prevention fraud and corruption.

The **Belgian Red Cross** supported the DRC Red Cross in conducting humanitarian protection programmes in Kwango and Kwilu provinces.

The **Spanish Red Cross** mobilized emergency funds that enabled the CRRDC to carry out priority actions, including for the protection of health workers in health centres in Kinshasa that had reported more than eight suspected cases, as well as to strengthen the institutional visibility and mobility of staff in the context of coordination meetings and interventions in the field.

The **Swedish Red Cross** supported the National Society in the dissemination of [Protection, Gender and Inclusion](#) policies

The **International Committee of the Red Cross (ICRC)** provided support to the National Society in conducting capacity-building workshops in the prevention fraud and corruption.

ENABLING LOCAL ACTORS



Strategic and operational coordination

IFRC membership coordination

IFRC membership coordination involves working with National Societies to assess the humanitarian context, agree on common priorities and jointly develop common strategies. This includes addressing issues such as obtaining greater humanitarian acceptance and access, mobilizing funding and other resources, clarifying consistent public messaging and monitoring progress. It also entails ensuring that strategies and programmes in support of people in need incorporate clarity of humanitarian action while linking with development assistance and contribute to reinforcing National Societies in their respective countries, including through their auxiliary role.

The DRC Red Cross is part of the four [IFRC Pan-African Initiatives](#) focusing on Tree Planting and Care; Zero Hunger; Red Ready; and National Society Development.

The DRC Red Cross is part of the global [Pilot Programmatic Partnership](#) between the Directorate General for European Civil Protection and Humanitarian Aid Operations of the European Commission and the IFRC. It is implemented with support from the French Red Cross as lead EU National, Luxembourg Red Cross, Spanish Red Cross and the IFRC in the areas of [disaster risk management](#), [epidemic and pandemic preparedness](#) and response, humanitarian assistance and protection for people on the move, cash and voucher assistance and [community engagement and accountability](#). The ECHO PPP will continue to provide a common framework to enhance coordination and joint monitoring, with the partners providing technical assistance in different areas.

The DRC Red Cross, with the support of participating National Societies, is implementing several programmes in different geographical locations on thematic areas clearly identified in its strategic plan and which contain elements of National Society capacity building. The participating National Societies supporting the DRC Red Cross are the Belgian Red Cross, **Belgian Red Cross (Flanders)**, **French Red Cross**, **Red Crescent Society of the Islamic Republic of Iran**, **Luxembourg Red Cross**, **Spanish Red Cross** and **Swedish Red Cross**.

Movement coordination

The DRC Red Cross ensures regular exchanges with the IFRC, the International Committee of the Red Cross and participating National Societies, for the alignment of support and action between Movement partners. In times of emergencies, closer coordination is organized. This is carried out in line with the Strengthening Movement Coordination and Cooperation ([SMCC](#)) principles and the newly adopted [Seville Agreement 2.0](#).

The ICRC has been working in the Democratic Republic of the Congo since 1978, providing protection and assistance to victims of the armed conflicts and other violence that regularly afflict the country. It also strives to promote respect for international humanitarian law and its incorporation into domestic legislation.

External coordination

The DRC Red Cross enhanced its partnerships with key external actors, including GAVI, UNICEF, ministries and other stakeholders. Through these partnerships, the National Society reinforced its traditional cooperation within the Red Cross and Red Crescent Movement and aligned it with its cooperation strategy while also developing mechanisms to enhance collaboration with government authorities.

The DRC Red Cross technical teams actively participated in coordination meetings with partners such as UNICEF, GAVI, SLL CDC and MasterCard Foundation, under the leadership of Ministry of Health structures such as PEVI and DPS, to improve synergies in programme implementation. The National Society also strengthened collaboration with other partners, including the Against Malaria Foundation, and participated in coordination mechanisms led by the Ministry of Health, Provincial Health Divisions and Expanded Programme on Immunization structures to reinforce joint planning and complementarity of interventions. The National Society maintained regular engagement in coordination meetings with UNHCR, United Nations agencies and monthly Humanitarian Country Team meetings with heads of humanitarian organizations in the Democratic Republic of Congo.

The DRC Red Cross also formalized contractual agreements with new radio stations to support communication efforts. Under the [CP3](#) programme, in collaboration with AFROHUN and under the leadership of the Ministry of Health, the National Society participated in a workshop on integrating One Health modules into nursing training curricula, with participation from its School of Nursing and the Ministry of Health.

Staff from the National Society regularly participated in national and provincial cluster meetings on water, sanitation and hygiene, health, food security, nutrition and shelter. Additionally, the DRC Red Cross remained actively engaged in coordination meetings with health directorates and in the Expanded Programme on Immunization at the national level, particularly contributing to responses to MPOX outbreaks and polio vaccination campaigns. As part of the MPOX response, the National Society participated in the Ministry of Health's Public Health Emergency Operations Centre technical secretariat, contributing to strategic and technical coordination. The International Federation of Red Cross and Red Crescent Societies and the DRC Red Cross also convened regular coordination meetings with targeted branches and Partner National Societies, while interactive radio programmes featuring Ministry of Health experts supported advocacy, coordination and the dissemination of reliable health information to communities. In addition, a network-wide strategic response plan was developed and shared with support from technical experts deployed by the International Federation of Red Cross and Red Crescent Societies.



National Society development

Progress by the National Society against objectives

Efforts focused on enhancing governance, accountability, volunteer management and branch performance in line with the National Society's strategic priorities and organizational development objectives.

Capacity-strengthening initiatives included training for branch leaders on good governance, integrity, fraud and corruption prevention, and the prevention of sexual exploitation, abuse and other forms of misconduct. These actions contributed to reinforcing accountability, ethical standards and institutional effectiveness across the National Society.

To improve volunteer management and emergency readiness, a volunteer database was established in two model provinces, enabling better skills tracking, deployment planning and rapid mobilization during emergencies. Investments through programmes and operations further strengthened the National Society's technical, logistical and operational capacities through equipment acquisition, training and the enhancement of internal systems.

IFRC network joint support

The IFRC supported the DRC Red Cross through the IFRC Capacity Building Fund for the digitization of financial, logistics, human resources and volunteer management through Integrated Management Software (ERP Next). The Model Branch Project under the [IFRC/ICRC National Society Investment Alliance](#) helped the National Society improve operational and institutional effectiveness and enhance crisis response.



Humanitarian diplomacy

Progress by the National Society against objectives

The National Cross strengthened its engagement in humanitarian diplomacy. It trained provincial presidents and provincial secretaries in humanitarian diplomacy. The leadership of the National Society, including the national

president and members of the management committee, met with the President of the DRC to reinforce its auxiliary role and mandate.

At the institutional level, the National Society organized elective general assemblies at the headquarters and branch levels, thus contributing to the renewal and legitimacy of its governance bodies. In this vein, training in humanitarian diplomacy was provided to 26 Provincial Presidents and 26 Provincial Secretaries, strengthening their capacities in advocacy, institutional positioning and strategic engagement with the authorities and partners.

IFRC network joint support

The IFRC supported the DRC Red Cross in its humanitarian diplomacy efforts.



Accountability and agility (cross-cutting)

Progress by the National Society against objectives

The National Society advanced anticipatory planning and early action by developing and updating strategic plans, policies, guidelines and operational procedures that promote community participation in early warning, preparedness and response systems. These efforts contributed to more relevant, transparent and community-centred interventions while strengthening trust and accountability to affected populations.

The National Society also maintained sound financial management practices and prepared for an external financial audit, demonstrating its commitment to transparency, compliance and institutional credibility with partners and donors.

Operational adaptability was further demonstrated through the response to the MPOX outbreak, where headquarters teams provided continuous remote technical support, coaching and field supervision to provincial branches. This approach enabled harmonized implementation, strengthened performance monitoring and facilitated the rapid adjustment of operational strategies in response to evolving humanitarian needs and contexts.

IFRC network joint support

The IFRC provided support to the National Society to develop strategic plans, policies, guidelines and operational procedures.

Q4. AFFECTED PERSONS (PEOPLE REACHED)

See cover pages

Q5. PARTICIPATION AND ACCOUNTABILITY FOR AFFECTED PEOPLE – COMMUNITY ENGAGEMENT AND ACCOUNTABILITY

See Strategic Priority on 'Values, power and inclusion' under Q3: MEASURING RESULTS OF THE IFRC NETWORK ACTION

Q6. RISK MANAGEMENT

This information is not available in Annual Reports

Q7. EXIT STRATEGY AND SUSTAINABILITY

See Strategic Priorities or Enabling Local Actors, where relevant under Q3: MEASURING RESULTS OF THE IFRC NETWORK ACTION

Q8. LESSONS LEARNED

The interventions carried out have made it possible to identify several key lessons to strengthen the quality and effectiveness of the and the sustainability of the actions of the DRC Red Cross:

- Strengthening the capacities of partners and local communities remains an essential lever to ensure the sustainability of projects and programmes. Continued investment in training helps to consolidate achievements and empower local actors.
- The active and early involvement of communities from the design phase of projects or operations promotes better ownership of activities, strengthens accountability and improves long-term impact.
- Close coordination with Movement partners, authorities and other local stakeholders improves complementarity of interventions, avoids duplication and optimizes the use of resources.
- Stronger mentoring of volunteers, including in community-based monitoring activities and in the drafting of feedback sheets, is needed to improve the quality of the data collected and to address the gaps observed.
- Regular updating of operational tools, including frequently asked questions for volunteers, is essential to enable them to effectively respond to community concerns and to combat rumours and misbeliefs.
- The systematic organisation of coordination and communication meetings with the different departments and National Partner Societies (SNPs/SNPs) contributes to strengthening the coherence of the Movement's message and the visibility of humanitarian action.
- The sharing and harmonization of the new reporting tools (monthly, quarterly and annual) has improved the quality of reporting between the branches and Headquarters, while facilitating alignment with the requirements of the Unified Plan.
- The lack of volunteers trained in communication and dissemination in some areas limits awareness of the Movement and its acceptance within some communities, highlighting the need to invest more in local capacity development.
- The cross-cutting integration of Community Engagement and Accountability (CEA) into all programs strengthens community ownership of interventions and helps to consolidate trust and acceptance of the Red Cross.
- As a recognized humanitarian actor in the DRC, the DRC Red Cross plays a key role in responding to humanitarian needs throughout the country. However, increased resource mobilization, at the local, national and international levels, is still needed to scale up its response to the most vulnerable populations.
- As part of the Mpox emergency appeal, support for the Cash Action Plan at the national level offers an opportunity to capitalize on current gains, particularly through the empowerment of provincial focal points. The availability of adequate funding for close monitoring of interventions will make it possible to draw structuring lessons for future operations.

ANNEX 1. IFRC APPLICATION OF THE 8+3 REPORTING TEMPLATE

The IFRC network structures its result-based management along five Strategic priorities and four Enabling functions, developed based on the IFRC network's [Strategy 2030](#):

IFRC network Strategic Priorities	IFRC network Enabling Functions
SP 1 - Climate and environment	EF 1- Strategic and operational coordination
SP 2 - Disasters and crises	EF 2 - National Society development
SP 3 - Health and wellbeing	EF 3 - Humanitarian diplomacy
SP 4 - Migration and displacement	EF 4 - Accountability and agility
SP 5 - Values, power and inclusion	

The Federation-wide results matrix provides a standard way for the IFRC network to measure its progress towards Strategy 2030 implementation and supports consistent quality of the IFRC network planning, monitoring and reporting. To further advance coherence in monitoring across the IFRC network, a [Federation-wide Indicator Bank](#) has been developed and integrated into the Federation-wide monitoring systems for emergencies and longer-term work, structured along the Federation-wide results matrix as well. Signatory of the Grand Bargain Agreement, the IFRC has committed to its monitoring and reporting standards through integration of the [8+3 reporting template](#) contents into its results-based management approach. The following mapping demonstrate the way in which this report aligns with 8+3 reporting:

8+3 template	IFRC network Annual Report (with variance in structure in red)
Core Questions	
1. Overall Performance	Overall Performance
2. Changes and Amendments	Changes and amendments
3. Measuring Results	Measuring Results
4. Affected Persons	Cover pages with indicators values
5. Participation & AAP	Under Q3 Strategic Priority 5: Values, power and inclusion – Community Engagement and Accountability
6. Risk management	Risk management
7. Exit Strategy and Sustainability	Under Q3 sub-sections by Strategic Priority/Enabling Function where relevant
8. Lessons Learned	Lessons learned
Additional Questions	
1. Value for Money/ Cost Effectiveness	Not included in annual reports
2. Visibility	Not included in annual reports
3. Coordination	Under Q3 Enabling Function 1: Strategic and operational coordination
4. Implementing Partners	Cross-cutting, with a focus on support to localization through the Q3 Enabling Functions 1 to 4
5. Activities or Steps Towards implementation	Cross-cutting in Q3 Strategic Priorities and Enabling Functions
6. Environment	Under Q3 Strategic Priority 1: Climate and environment



The International Federation of Red Cross and Red Crescent Societies (IFRC) is the world's largest humanitarian network, with 191 National Red Cross and Red Crescent Societies and around 15 million volunteers. Our volunteers are present in communities before, during and after a crisis or disaster. We work in the most hard to reach and complex settings in the world, saving lives and promoting human dignity. We support communities to become stronger and more resilient places where people can live safe and healthy lives, and have opportunities to thrive.

DATA SCOPE AND LIMITATIONS

- **Timeframe and alignment:** The reporting timeframe for this overview is covering the period from 1 January to 31 December 2025. However, due to the diversity of the IFRC and differences in fiscal years, this coverage may not fully align for some National Societies.
- **Financial overview:** This overview consolidates data reported by the National Society and its IFRC network partners, as well as data extracted from IFRC's financial systems. All reported figures should include the administrative and operational costs of the different entities. The financial data with a grey background is solely reported by the National Society, including the funding sources. Financial reporting is often times estimated depending on availability of financial figures, closing of financial periods, and may be incomplete. 'Not reported' could sometimes mean 'not applicable'. Also note that funding requirements are already reflected in the published 2025 IFRC network country plan. The total funding requirements show what the IFRC network has sought to raise for the given year through different channels: funding through the IFRC, through participating National Societies as bilateral support, and through the host National Society from non-IFRC network sources. All figures should include the administrative and operational costs of the different entities.
 - » Host National Society funding requirements not coming from IFRC network sources can comprise a variety of sources, as demonstrated when reporting on income in the IFRC Federation-wide Databank and Reporting System
 - » Participating National Society funding requirements for bilateral support are those validated by respective headquarters, and often represent mainly secured funding
 - » IFRC funding requirements comprise both what is sourced from the IFRC core budget and what is sought through emergency and thematic funding. This includes participating National Societies' multilateral support through IFRC, and all other IFRC sources of funding
- **Missing data and breakdowns:** National Societies have diverse data collection systems and processes that may not align with the standardized indicators. Data may not be available for some indicators, for some National Societies. This may lead to inconsistencies across different reporting tools as well as potential under or over-estimation of the efforts led by all.
- **Reporting bias:** The data informing this Federation-wide overview is self-reported by each National Society (or its designated support entity) which is the owner and gatekeeper, and responsible for accuracy and updating. IFRC tries to triangulate the data provided by the National Societies with previous data and other data in the public domain.
- **Definitions:**
 - » **Local units:** ALL subdivisions of a National Society that coordinate and deliver services to people. These include ALL levels (provincial, state, city, district branches, sections or chapters, headquarters, and regional and intermediate offices, as well as community-based units)
 - » **Branches:** A Branch has its roles, responsibilities and relationship with the National Headquarters defined through the National Society's Statutes, including the level of autonomy given, especially in the area of its legal status, mobilising local resources and building local partnerships, and the decisions it makes. It has a local-level decision-making mechanism through its Branch members, board and volunteers, equally defined through the National Society's Statutes

ADDITIONAL INFORMATION

- [CD_Democratic Republic of Congo AR Financials.pdf](#)
- [IFRC network country plans](#)
- [Subscribe for updates](#)
- [Live Disaster Response Emergency Fund \(DREF\) data](#)
- Operational information: [IFRC GO platform](#)
- National Society data: [IFRC Federation-wide Databank and Reporting System](#)
- [Evaluations database](#)

Contact information

Red Cross of the Democratic Republic of the Congo www.croixrouge-rdc.org

Ariel Kestens

Head of Delegation
IFRC Country Cluster Delegation
for DRC, Congo, Rwanda & Burundi,
Kinshasa

T +41-79-955 4312

ariel.kestens@ifrc.org

Franciscah Cherotich Kilel

Acting Head of Strategic Partnerships
& Resource Mobilization
IFRC Regional Office for
Africa, Nairobi

franciscah.kilel@ifrc.org

Sumitha Martin

Lead
IFRC Global Strategic Planning
& Reporting Centre
New Delhi

sumitha.martin@ifrc.org