

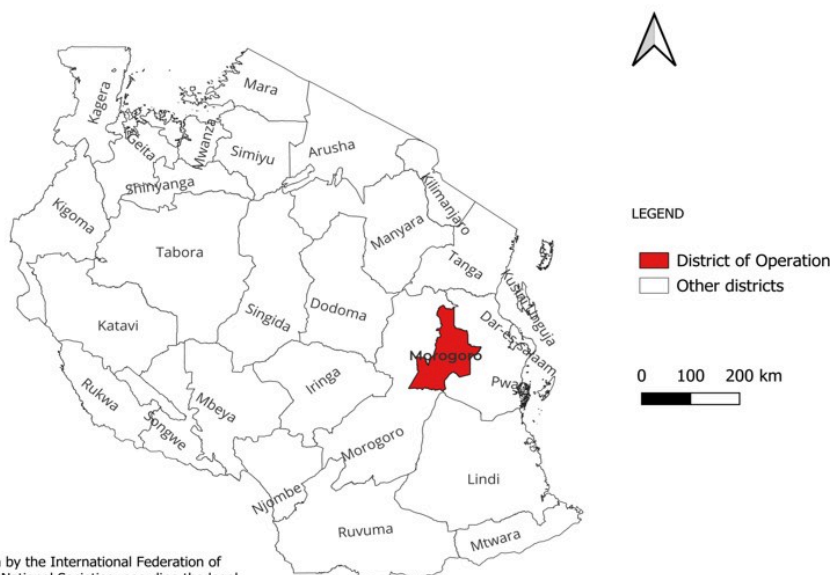


TRCS setting up emergency shelter tents at Tindiga ward @TRCS

Appeal: MDRTZ043	Total DREF Allocation: CHF 185,455	Crisis Category: Yellow	Hazard: Flood
Glide Number: -	People Affected: 5,045 people	People Targeted: 3,250 people	People Assisted: 8,356 people
Event Onset: Sudden	Operation Start Date: 15-01-2026	Operational End Date: 30-04-2026	Total Operating Timeframe: 3 months
Targeted Regions: Morogoro			

Description of the Event

Tanzania : Flood DREF Intervention Area Map



Production date: 13/01/2025
The maps used do not imply any position by the International Federation of Red Cross and Red Crescent Societies or National Societies regarding the legal status of any territory or its authorities.
Map data sources: IFRC, OCHA,
Map produced by the IFRC Juba Cluster Office, South Sudan.

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Map of area affected district

Date of event

10-01-2026

What happened, where and when?

Between 28 and 31 December 2025, heavy rainfall in Kilosa District, Morogoro Region, combined with runoff from the adjoining Dodoma highlands, caused severe river overflows and widespread flooding across Tindiga, Magole, and Dumila wards. The floods directly affected 1,009 households (5,045 people), with 382 households (1,910 people) displaced after their homes were destroyed or rendered uninhabitable, particularly in low-lying areas along the Mkondoa River in Tindiga ward. In addition, 301 households in Magole and Dumila wards had roofs blown off by strong winds, leaving their houses weakened and unsafe. The disaster damaged housing, washed away crops and food stocks, killed livestock, and disrupted livelihoods. Public infrastructure, including roads, water supply systems, sanitation facilities, and community services, was also affected, limiting access to safe water, adequate sanitation, health services, and education. However, road access was restored within a few weeks through government rehabilitation efforts, and access to basic services such as health and education improved.

The evacuation of families to temporary camps increased pressure on basic services, heightened protection risks, and increased the risk of waterborne and vector-borne disease outbreaks. To date, the 382 displaced households remain in temporary camps while awaiting allocation of relocation plots promised by the government.

As of 30 April 2026, displaced households continued to face WASH-related challenges, including limited access to safe water and sanitation facilities, which increased the risk of waterborne diseases. Remaining humanitarian needs included hygiene kits, referrals for medical services, school materials for children, mental health and psychosocial support services, and shelter construction materials.





Assessment following the floods in Kilosa District.

Scope and Scale

The heavy rains in Morogoro and runoff from highland areas of Dodoma and Arusha regions between December 2025 and January 2026 forced many people to leave their homes and disrupted livelihoods, particularly among farming communities in Kilosa District, Morogoro Region. A total of 5,045 people were affected by the floods. At the onset of the emergency, 650 households (3,250 people) were displaced and targeted by TRCS through this response operation. As of 30 April 2026, 382 households (1,910 people) remained displaced and continued to stay in government-established temporary evacuation centres while awaiting allocation of relocation plots promised by the government. The government continues to provide basic support to the displaced households, primarily through food assistance and other essential services.

Source Information

Source Name	Source Link
1. Government moves to end Kilosa floods	https://www.africa-press.net/tanzania/all-news/government-moves-to-end-kilosa-floods
2. Tanzania Meteorological Authority WEATHER REVIEW FOR DEKAD No. 08 (11th - 20th MARCH), 2025 AND OUTLOOK FOR DEKAD No. 09 (21st - 31st MARCH), 2025	https://www.meteo.go.tz/index.php/language/en
3. Tanzania - Floods (IFRC, TMA) (ECHO Daily Flash of 9 January 2026	https://reliefweb.int/report/united-republic-tanzania/tanzania-floods-ifrc-tma-echo-daily-flash-9-january-2026

IFRC Network Actions Related To The Current Event

Secretariat	IFRC has no presence in the country, but TRCS works closely with the IFRC Juba cluster that covers Tanzania, Uganda and South Sudan. The cluster is supporting TRCS with technical support and guidance on the response.
Participating National Societies	Finnish Red Cross is currently supporting the implementation of the Early Warning Early Action (EWEA) project in Morogoro Region, including Kilosa District, one of the areas affected by the floods. While Finnish Red Cross did not provide direct operational or financial support to MDRTZ043, the EWEA project contributed to the response through prior capacity strengthening of volunteers in the affected area. Volunteers deployed during the operation had previously received training through the EWEA project on community preparedness, early action, and emergency response, requiring only refresher training before deployment.

ICRC Actions Related To The Current Event

Currently, ICRC are located in TRCS HQ building and are closely supporting different initiatives. ICRC did not provide direct assistance under MDRTZ043. However, its support to the development of the TRCS Multi-Hazard Contingency Plan in 2025, which included flood scenarios, strengthened staff capacities in preparedness, planning, scenario development, budgeting and reporting. These capacities supported TRCS in preparing for and responding to the Kilosa flood operation.

Other Actors Actions Related To The Current Event

Government has requested international assistance	No
National authorities	The government through the Disaster Management Committees in Kilosa District identified evacuation centres where affected people were accommodated and continue to reside. The district disaster team, district security committee, and the Council Executive Director visited and inspected the affected areas and conducted the rapid needs assessment that informed the DREF application. The Prime Minister directed the District Administration to relocate affected households and allocate new plots. The government, through PMO-DMD, led the detailed assessment and provided relief items including 90 mattresses, 90 buckets, and 90 blankets, reaching approximately 450 people.
UN or other actors	No other agency has so far been seen responding to these thundershowers with strong winds. TRCS will continue to engage with the government, in-country movement partners and other partners including UN Agencies towards a coordinated humanitarian response.



Are there major coordination mechanism in place?

Major coordination in place includes the activation of the disaster management committee at all levels from national to village, with the active participation of the TRCS. Additionally, the regional administrative secretariat in Morogoro region will continue to host the coordination meetings where TRCS will continue to be part of these meetings. The secretariat will also plan for the detailed assessment especially to identify shelter needs among other things.

Needs (Gaps) Identified



Shelter Housing And Settlements

Approximately 650 households from Tindiga ward were severely affected by the floods and displaced to temporary camps established by the government. In addition, 301 households in Magole and Dumila wards had their roofs blown off by strong winds. A detailed assessment was identified as a priority need and was conducted during the operation, providing critical information to guide the response and identify needs across sectors.

As of 30 April 2026, shelter needs had only been partially addressed. While the assessment was completed and temporary accommodation remained available, 382 households (1,910 people) were still residing in government-established temporary camps while awaiting allocation of relocation plots. These households continued to require support for durable shelter solutions, including shelter construction materials to facilitate relocation and recovery.



Livelihoods And Basic Needs

The floods caused significant damage to livelihoods in Kilosa District, particularly among households dependent on agriculture. Crops and food stocks were washed away, livestock was lost, and livelihoods were disrupted. Damage to roads and infrastructure also limited access to markets and other essential services. The government provided food assistance to displaced households residing in temporary camps to address immediate food needs. At the end of the operation, livelihood recovery needs remained, as affected households continued to face challenges in restoring their livelihoods and recovering losses associated with crops, food stocks, livestock, and other productive assets.



Health

A total of 650 households has been displaced and are in the temporary camps. They have been affected psychologically and mentally, and the health infrastructure at the camps is not adequate. This call for provision of the mental and psychosocial support to the affected population since they were in the temporary camps, and provision of the health promotion campaigns to capacitate them especially in proper health practice. The need for the campaign is still there as affected people are still in the camps. At the end of the operation, the needs were reduced, and it was discovered that access to mental health and psychological support services is still a need.



Water, Sanitation And Hygiene

In Tindiga ward, 650 households (3,250 people) were left homeless due to floods, and they are in the camps with inadequate health and WASH facilities. Among other things, these people required access to clean and safe drinking water, sanitation, and hygiene promotion to prevent any possible outbreak of the waterborne diseases. Priority needs identified included the water purification tabs, hygiene kits, and WASH promotion campaign that went parallel with the health promotion campaign. At the end of the operation the needs under this sector were reduced, and hygiene kits and water purification tabs remained to be the needs to some extent.





Protection, Gender And Inclusion

To ensure the vulnerable groups are well protected especially as they are in the camps, TRCS identified the need to set up a feedback mechanism that included confidential mechanism to receive, handle and respond to sensitive complaints, including reports of sexual and gender-based violence, and potential sexual exploitation and abuse. TRCS also identified the need for conducting the PGI risk analysis to identify the magnitude and extent of vulnerability. At the end of the operation, these needs had largely been addressed through the establishment of feedback mechanisms and completion of the PGI risk analysis. However, some needs remained, particularly the need for continued safe spaces and psychosocial support for vulnerable groups.



Community Engagement And Accountability

Displaced and affected communities usually face psychological distress and require transparent communication to ensure trust in relief efforts. Community Engagement and Accountability is crucial during any response to ensure effective communication, address community needs, and build trust of the affected community. TRCS ensured CEA mainstreaming by conducting regular meetings with community members to gather information on their needs, concerns, and priorities, seeking input on decision-making processes as well as dissemination of timely information about the ongoing situation. Additionally, TRCS deployed community volunteers with knowledge of local language to communicate with the community, engage community leaders during response, establish help desk to the affected areas and sensitize hotline number. Needs under this sector were resolved.

Operational Strategy

Overall objective of the operation

Through this DREF Application, TRCS aimed at implementing response actions to reach 382 households (1,910 people) of Kilosa district by providing humanitarian assistance for the following sectors; Health services, WASH, PGI, and CEA for the period of three months from January to April 2026.

While the National Society continues its ongoing response, the operation will facilitate a multisectoral assessment to validate and refine the current approach. The findings from this assessment will guide a revision of the plan to confirm targeting, sectoral interventions and implementation methodologies.

Operation strategy rationale

The operational strategy is designed to 1. Address the immediate and life-saving needs of flood-affected populations identified through the latest rapid assessments conducted in Kilosa District, Morogoro Region. 2. Carry out a detailed multisectoral assessment will be conducted at the early stage of the operation to validate and refine needs, ensuring that the response remains relevant, responsive, and adaptable should the situation evolve. Findings from the assessment may inform revisions to targeting, modalities, and sectoral interventions to enhance effectiveness and accountability. The response prioritizes displaced households, host communities, and the most vulnerable groups, including children, women, older persons, and persons with disabilities.

Multisectoral assessment

TRCS will work jointly with government assessment teams to conduct detailed shelter assessments to identify the extent of damage, actual shelter needs, and appropriate assistance options for affected households. This joint assessment will also support identification of safe locations for relocation, following the Government's directive announced by the Prime Minister that flood-affected families should be allocated new land for permanent resettlement in order to reduce recurrent exposure to flash floods.

Shelter and Basic Needs

A total of 650 households is displaced and hosted in different temporary camps at Tindiga ward Kilosa district in Morogoro region and are in need of basic emergency Household items. TRCS plans to support 650 households that are displaced and hosted in tents and Tindiga primary school as emergency camps with Emergency Household kits. As part of the early actions, TRCS has so far supported



government distribute 90 blankets, 90 mattress, 90 Buckets and Food to the affected families from Prime Minister Office Disaster Management Department. Based on assessment findings, TRCS will provide emergency shelter and essential household items to displaced households hosted in temporary camps and public facilities, prioritizing families whose houses have been destroyed and those with heightened vulnerabilities. Shelter support will be coordinated closely with public authorities to ensure alignment with national recovery and resettlement plans and to promote safer, longer-term solutions.

Health

Flood-affected communities face increased risks of communicable diseases and psychosocial distress due to displacement, overcrowding, and disruption of basic services. TRCS will deploy trained Psychosocial Support (PSS) focal points to provide technical support and supervision to volunteers delivering community-based PSS services, ensuring quality and adherence to IFRC guidelines. Volunteers will be oriented on health promotion, including prevention of waterborne diseases, malaria control, personal hygiene, and early healthseeking behavior. Following orientation, volunteers will be deployed for 34 days to conduct community-level health promotion activities in temporary camps and host communities, with a focus on high-risk groups such as children, pregnant women, and older persons. Health promotion and PSS activities will be coordinated with district health authorities to ensure consistency with national health messaging and referral pathways.

Water, Sanitation and Hygiene (WASH)

Flooding has compromised water sources and sanitation facilities, increasing the risk of waterborne diseases among displaced and host communities. To reduce public health risks, TRCS will procure and distribute water purification tablets to ensure access to safe drinking water at household level. In addition, TRCS will procure and distribute hygiene kits to affected households, promoting safe hygiene practices in temporary shelters and host communities. Hygiene promotion sessions will be conducted by trained volunteers, focusing on handwashing, safe water handling, sanitation, and disease prevention. To maintain emergency preparedness capacity, the operation will also include replenishment of Emergency Household Item (EHI) kits, including soap, buckets, and mosquito nets, following the utilization of these contingency stocks during the early response phase distributed to 650 households.

Protection, Gender and Inclusion (PGI) PGI will be mainstreamed throughout the operation to ensure assistance is safe, dignified, and inclusive, with particular attention to women, girls, children, older persons, and persons with disabilities. TRCS will conduct a gender analysis (which would also consider disability, age, child protection, and other intersecting protection risks) to identify vulnerabilities, protection risks, and barriers to access for different population groups, and to inform safe and appropriate response design. To address heightened protection risks in displacement settings, TRCS will establish safe spaces for women and girls, providing a supportive environment for peer interaction, information sharing, and access to basic psychosocial support (PSS) through trained volunteers. In coordination with local authorities and service providers, TRCS will establish and communicate SGBV referral pathways to ensure survivors of sexual and gender-based violence have access to confidential, safe, and timely support services. Child protection measures will also be strengthened to support children and reduce their exposure to violence, abuse, neglect, and exploitation. In addition, safeguarding measures including Protection from Sexual Exploitation and Abuse (PSEA), child safeguarding, and safe reporting mechanisms will be integrated across all activities to ensure that assistance is delivered in a safe, dignified, and accountable manner. All volunteers involved in the response will be oriented on PGI minimum standards, PSEA, and safe referral mechanisms to ensure protection concerns are identified and managed appropriately.

Community Engagement and Accountability (CEA)

Community Engagement and Accountability will be mainstreamed across all sectors to ensure that affected populations are informed, consulted, and able to provide feedback throughout the response. TRCS will engage communities through community meetings, camp level discussions, and volunteer-led sensitization, providing clear information on available assistance, targeting criteria, distribution schedules, and complaint mechanisms. A feedback and complaints mechanism (FCM) will be established and communicated to communities, enabling two-way communication and timely response to community concerns. Community feedback will be systematically collected, analyzed, and used to adapt programming and improve service delivery.

Partnerships and Coordination

The Tanzania Red Cross Society (TRCS), in coordination with government authorities, IFRC, and Movement partners, will ensure strong operational management, coordination, and advocacy. Particular emphasis will be placed on linking emergency response actions with early recovery and longer-term resilience initiatives, including disaster preparedness, health promotion, and community-based risk reduction, in alignment with national and district disaster management frameworks.



Targeting Strategy

Who was targeted by this operation?

The operation targeted a total of 650 households (3,250 people) affected by the floods, which impacted their shelter, livelihoods, food stocks, health, water supply systems, and sanitation facilities. The target population was further informed by the detailed assessment and included households residing in temporary shelters. Priority was given to child-headed households, women-headed households, persons with disabilities, and low-income households. The targeted area was Morogoro Region.

Explain the selection criteria for the targeted population

As part of the CEA approach, TRCS conducted the registration and verification process through community meetings involving key stakeholders, including local government leaders, disaster management committees, and traditional leaders, to verify selected households and ensure that the selection criteria were properly applied. In addition, the selection criteria were widely communicated through trusted channels, including community engagement forums led by traditional leaders and local authorities, to ensure that community members understood the targeting process.

TRCS staff and volunteers also collected feedback and complaints from targeted households during the selection process and throughout the operation, using the communication channels identified during the needs assessment as preferred by the affected communities. Feedback received was shared with and analysed by the Disaster Management (DM) and PMERL teams to strengthen the selection process where necessary and ensure that any complaints related to beneficiary selection were promptly investigated and addressed.

Total Assisted Population

Assisted Women	4,261	Rural	-
Assisted Girls (under 18)	-	Urban	100%
Assisted Men	4,095	People with disabilities (estimated)	2%
Assisted Boys (under 18)	-		
Total Assisted Population	8,356		
Total Targeted Population	3,250		

Risk and Security Considerations (including "management")

Does your National Society have anti-fraud and corruption policy?	Yes
Does your National Society have prevention of sexual exploitation and abuse policy?	Yes



Does your National Society have child protection/child safeguarding policy?	Yes
Does your National Society have whistleblower protection policy?	Yes
Does your National Society have anti-sexual harassment policy?	Yes
Please analyse and indicate potential risks for this operation, its root causes and mitigation actions.	
Risk	Mitigation action
Safeguarding.	Child protection measures were strengthened. All volunteers involved in the response were oriented on PSEA.
The affected community experienced cholera outbreak and other waterborne diseases in Kilosa district due to destruction of the water supply system and overcrowding in the camps that lead to inadequate supply of clean and safe water and sewage system that leads to contamination of the available water for consumption.	In response to the identified risk, TRCS provided water purification tablets, promoted safe water storage practices, and conducted hygiene awareness campaign to educate the community about preventing the spread of diseases.
The affected communities experienced loss of food stocks and destruction of crops (as reported) could lead to food shortages and malnutrition, especially among vulnerable populations.	Beneficiaries were registered and their needs were verified to prevent fraud and ensure that aid reaches those who need it most. TRCS volunteers were used from the specific locations to distribute the available food to the affected community.
The displaced populations, especially children, women, older persons, and persons with disabilities, experienced exploitation, violence, and psychological distress due to the loss of secure shelter, livelihoods, and community structures.	The risk was managed by setting up dedicated and supervised safe spaces within evacuation camps for vulnerable groups and systematically integrate protection monitoring, psychosocial support, and referral mechanisms into all humanitarian assistance activities.
Please indicate any security and safety concerns for this operation:	
Given the ongoing rainfall in Morogoro region in January to April during implementation of the flood response, the TRCS's operation faced medium safety and security concerns, including challenges related to accessing affected communities due to damaged infrastructure, and the potential for outbreaks of waterborne diseases necessitating distribution of water treatment tablets. TRCS intensified resource mobilization and provided insurance to 50 volunteers who were deployed for this operation.	
Has the child safeguarding risk analysis assessment been completed?	No

Implementation



Shelter Housing And Settlements

Budget: CHF 7,458

Targeted Persons: 3,250

Assisted Persons: 3,250

Targeted Male: 1,594



Targeted Female: 1,656

Indicators

Title	Target	Actual
Number of detailed assessments conducted	1	1

Narrative description of achievements

Conduct a Joint Detailed Assessment: A joint detailed assessment was conducted in collaboration with the Kilosa Local Government Authority and the Prime Minister's Office Disaster Management Department (PMO-DMD) to further assess the impact of the floods and identify the priority needs of affected communities. The assessment verified the affected population, confirmed the target caseload of 650 households (3,250 people), and provided a comprehensive understanding of vulnerabilities and sectoral needs, including shelter, health, WASH, and protection concerns. The findings informed the targeting and prioritization of assistance under the DREF operation, strengthened coordination with government and other stakeholders, and supported planning for the relocation of displaced households awaiting allocation of plots by the government. This ensured that the response was aligned with the identified needs and priorities of the affected population.

Lessons Learnt

- Joint detailed assessments are critical for generating reliable information and ensuring that humanitarian interventions are informed by the actual needs of affected communities.
- Early and active involvement of Local Government Authorities and PMO-DMD strengthens the credibility, ownership, and validation of assessment findings and facilitates coordination of the response.
- Collaborative assessments support more effective targeting and prioritization of assistance by bringing together complementary expertise and local knowledge.

Challenges

- Delays were experienced in finalizing and sharing the detailed assessment report due to the need to validate beneficiary and impact figures with PMO-DMD.
- Differences in the timing of data verification and approval processes affected the timely dissemination of assessment findings and reporting.
- Strengthening information-sharing and validation mechanisms among response partners could help expedite future assessment and reporting processes.



Health

Budget: CHF 12,507

Targeted Persons: 3,250

Assisted Persons: 8,356

Targeted Male: 4,095

Targeted Female: 4,261

Indicators

Title	Target	Actual
Number of volunteers deployed as PSS focal points	2	2
Number of volunteers oriented on health promotion	50	50



Number of people reached with health messages, disaggregated by gender (male, female).	3,250	8,356
# Families reached with mosquito nets	650	650

Narrative description of achievements

Orientation of Volunteers on Health Promotion: A total of 50 TRCS volunteers from Kilosa District were trained over three days on Epidemic Preparedness and Control (EPiC), Mental Health and Psychosocial Support (MHPSS), and key cross-cutting themes, including Red Cross principles, WASH, Community Engagement and Accountability (CEA), and Protection, Gender and Inclusion (PGI). The training strengthened volunteer capacity to deliver effective health promotion and psychosocial support services within flood-affected communities.

Provide IEC Materials as Job Aids for Volunteers: Health promotion activities were further strengthened through the provision and distribution of IEC materials, which supported community sensitization on disease prevention, health-seeking behaviours, and hygiene practices. These interventions contributed to increased awareness and strengthened community capacity to prevent and respond to public health risks.

Deployment of Volunteers to Conduct Health Promotion for 34 Days: Following the training, all 50 volunteers were deployed for 34 days to conduct community-based health promotion activities and disseminate IEC materials. Through these efforts, 8,356 people were reached with health promotion messages, exceeding the target of 5,405 people. The increased reach was achieved through the expansion of awareness activities to additional villages and wards identified as being at risk of waterborne disease outbreaks following continued rainfall between January and April.

Deployment of PSS Focal Points to Support Volunteers on Provision of PSS Services: To address the psychosocial impacts of the disaster, two MHPSS focal points were deployed to support volunteers in the delivery of psychosocial support services. As a result, 1,477 people received MHPSS services, representing 77 per cent of the target. Women and children demonstrated higher uptake of these services than men, highlighting the need for continued efforts to increase participation among all population groups.

Distribution of Mosquito Nets to Prevent Against Vector-Borne Diseases: The planned distribution of mosquito nets was not implemented as a standalone health activity but was carried out through the WASH response as part of the distribution of 650 essential household kits. The kits included mosquito nets alongside other household items. Consequently, the achievement was reported under the WASH sector.

Lessons Learnt

- The training of volunteers was crucial in enhancing their capacity and facilitated the smooth implementation of the DREF operation.
- Health awareness promotion within the community was crucial in preventing the outbreak and spread of waterborne diseases among affected populations.
- The provision of Mental Health and Psychosocial Support (MHPSS) was crucial in promoting the wellbeing of affected people, particularly with regard to their mental health.
- TRCS is highly trusted within the community, which facilitated the delivery of health awareness and promotion activities.
- Continued community-based health promotion activities are required to sustain disease prevention practices and strengthen community resilience.

Challenges

- Due to the destruction of some road networks, it was difficult for volunteers to reach certain areas in a timely manner to provide health awareness promotion, particularly during the first two weeks of the operation.
- Men were generally more reluctant to receive MHPSS services, as many did not attend the scheduled sessions, requiring some sessions to be rescheduled in order to reach them.



Water, Sanitation And Hygiene

Budget: CHF 105,105

Targeted Persons: 3,250



Assisted Persons: 8,356

Targeted Male: 4,095

Targeted Female: 4,261

Indicators

Title	Target	Actual
Number of water purification tablets procured and distributed	200,000	200,000
# of IEC materials printed	1,000	1,000
# Number of EHI kits replenished for the 650 households ((soap, buckets, water treatment, mosquito nets)	650	650
# of dignity kits procured and distributed	1,500	1,500
Number of EHI kits replenished for the 650 households	650	650

Narrative description of achievements

Procure and Distribute Water Purification Tablets: Under the WASH sector, the DREF operation in Kilosa District successfully procured and distributed 200,000 Aquatabs to affected households. The water purification tablets played a critical role in improving access to safe drinking water and reducing the risk of waterborne diseases among flood-affected communities throughout the operation period.

Training the Community on the Proper Use of the H/H Purification Tablets Before Distribution. Sensitize the Community on the Importance of Drinking Treated Water and Take Them Through the Various H/H Water Treatment Methods: Prior to the distribution of Aquatabs, community members received training and sensitization on the proper use of water purification tablets and other household water treatment methods. These sessions were conducted by the District Health Officer and TRCS volunteers and focused on promoting safe water handling practices, the importance of drinking treated water, and preventing waterborne diseases. The training enhanced community knowledge and supported the effective utilization of the distributed water treatment supplies.

Procure and Distribute Hygiene Kits: The operation procured and distributed 1,500 dignity kits to support women and girls affected by the floods. These non-food items (NFIs) contributed to the dignity, health, and well-being of beneficiaries and supported affected households in resuming their daily routines. In addition, 1,000 IEC materials containing key WASH messages were printed and distributed to reinforce hygiene promotion activities within the targeted communities.

Replenishment of EHI Kits (Soap, Buckets, Mosquito Nets): A total of 650 essential household item (EHI) kits were procured and distributed to affected households. The kits contained soap, buckets, mosquito nets, and emergency toilet slabs, helping families meet their immediate hygiene and household needs while reducing exposure to waterborne and vector-borne diseases.

Carry Out Post Distribution Follow-Up of the H/H Purification Tablets and Use of EHIs: Post-distribution monitoring and follow-up activities were conducted by trained volunteers to assess the utilization of Aquatabs and essential household items. The follow-up visits provided an opportunity to reinforce key WASH messages, address challenges related to the use of distributed items, and monitor adoption of safe water treatment and hygiene practices. Through WASH awareness campaigns and community engagement activities, the operation reached 8,356 people in temporary camps and surrounding villages, strengthening disease prevention and promoting healthier behaviours.

Lessons Learnt

- Waterborne disease outbreaks do not respect geographical boundaries; therefore, it was crucial to extend awareness and education activities to surrounding communities as well.
- The provision of Aquatabs for household water treatment contributed significantly to improving access to clean and safe drinking water for affected communities.



•The provision of hygiene kits and other NFIs was critical in helping affected households resume their daily activities and maintain basic hygiene standards.

Challenges

• Transportation challenges affected volunteers conducting health and WASH awareness activities, as some of the targeted areas were located more than 5 kilometres away and were difficult to access.



Protection, Gender And Inclusion

Budget: CHF 3,274

Targeted Persons: 3,250

Assisted Persons: 3,481

Targeted Male: 1,706

Targeted Female: 1,775

Indicators

Title	Target	Actual
Number of safe spaces and psychological support set up for women and girls	2	2
Number of PGI risk analysis conducted	1	1
Number of SGBV referral pathways established to support the survivors of SGBV	10	10
Number of affected population reached with PGI messages	3,250	3,481
Number of staff and volunteers trained on Minimum standard	40	50

Narrative description of achievements

Gender Analysis: Gender considerations were integrated into the PGI assessment and response planning process to better understand the different needs, vulnerabilities, and capacities of affected population groups. The assessment identified women, girls, women-headed households, persons with disabilities, older persons, and other vulnerable groups as requiring targeted attention during the response. The findings informed the design of inclusive interventions, including awareness activities, safe spaces, psychosocial support services, and referral mechanisms to ensure that assistance was accessible and responsive to the needs of the most vulnerable populations.

Conduct PGI Risk Analysis to Identify Vulnerability: A Protection, Gender and Inclusion (PGI) risk analysis was conducted to identify the specific vulnerabilities, protection concerns, and support needs of populations affected by the floods in Kilosa District. The analysis highlighted the heightened risks faced by women, girls, persons with disabilities, older persons, child-headed households, and other vulnerable groups. Key protection concerns included risks of gender-based violence, family separation, reduced access to essential services, and psychosocial distress resulting from displacement and loss of livelihoods. Findings from the assessment informed the design and implementation of protection-sensitive activities, including community awareness sessions, safe space interventions, and referral mechanisms for survivors of violence and individuals requiring specialized support.

Training on PGI for Staff and Volunteers: A total of 50 volunteers from Kilosa Branch were oriented on PGI Minimum Standards, safeguarding principles, and the identification and referral of protection concerns. The training strengthened volunteer capacity to deliver inclusive and protection-sensitive humanitarian assistance and to support vulnerable groups throughout the response.

Set Up Safe Space and Psychological Support for Women and Girls: Two safe spaces were established to provide women, girls, women-



headed households, and survivors of violence with access to psychosocial support, information, and protection services. The safe spaces enhanced community-based protection mechanisms and provided a confidential environment for individuals requiring support and referral.

Set Up Referral Pathway to Support Survivors of SGBV: Ten Sexual and Gender-Based Violence (SGBV) referral pathways were established in collaboration with local authorities and service providers to ensure survivors could access appropriate health, psychosocial, legal, and protection services. Through these referral pathways, 32 cases were successfully referred and supported, with the majority of reported cases relating to sexual violence and physical violence affecting women and girls.

Safeguarding: Safeguarding measures were integrated throughout the operation through briefings for staff and volunteers, establishment of reporting and feedback mechanisms, and community awareness activities. These efforts promoted safe programming, strengthened accountability to affected populations, and contributed to preventing sexual exploitation, abuse, neglect, and other forms of harm during the implementation of the operation.

Lessons Learnt

- PGI is a crucial component of any humanitarian response, as it helps ensure that all groups, particularly the most vulnerable, are protected and their needs addressed.
- It is necessary to mainstream PGI across all interventions to promote inclusive and equitable assistance.
- Risk assessments were key to identifying needs, vulnerabilities, and service gaps, enabling a more targeted response.

Challenges

Overcrowding in temporary accommodation reduced as some affected households moved in with relatives and host families. While this eased pressure on communal shelters, it did not fully resolve protection and shelter-related concerns, as displaced households continued to require safe accommodation, psychosocial support, and access to protection services.



Community Engagement And Accountability

Budget: CHF 3,273

Targeted Persons: 3,250

Assisted Persons: 3,250

Targeted Male: 1,594

Targeted Female: 1,656

Indicators

Title	Target	Actual
% of volunteers and staff mobilised for the intervention that confirmed they have been trained and have integrated minimum CEA standards in emergencies	100	100
Number of after-action reviews or PDM conducted	1	1
% of community members who feel the aid provided by the operation currently covers their most important needs.	85	90
Number of and type of methods established to share information with communities about what is happening in the operation, including selection criteria if these are being used.	3	2

% of operation complaints and feedback received and responded to by the National Society	100	100
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Narrative description of achievements

Volunteers and Staff Oriented on CEA in Emergencies: The DREF operation successfully oriented 50 volunteers on Community Engagement and Accountability (CEA) in emergencies, ensuring they understood and applied participatory approaches throughout the humanitarian response. The orientation strengthened volunteer capacity to engage communities effectively, facilitate two-way communication, and support accountability to affected populations. As a result, 100% of the volunteers and staff mobilised for the intervention confirmed their understanding of CEA approaches and their application during the response.

Set Up Feedback and Complaints Mechanisms: The operation established two feedback and complaints mechanisms to enable affected communities to raise concerns and contribute to decision-making processes. These mechanisms included a community-based CEA desk managed by volunteers and a hotline operated by TRCS Headquarters. Throughout the operation, feedback received through these mechanisms was reviewed and addressed in a timely manner. Consequently, 100% of complaints and feedback received were responded to appropriately, strengthening accountability and community trust.

Trained Staff and Volunteers Support Community Meetings, Camp-Level Discussions, and Volunteer-Led Sensitization: The operation conducted seven community meetings, exceeding the planned target of four. These meetings provided communities with information about the operation and created opportunities to collect feedback and address concerns. The meetings were conducted during beneficiary registration, NFI distributions, camp and tent construction, food distributions, post-distribution monitoring activities, and the distribution of water purification tablets.

Trained volunteers actively facilitated community engagement activities throughout the operation, including community awareness sessions, camp-level discussions, sensitization activities, and engagement with affected populations during registration and distribution activities. These efforts strengthened two-way communication and supported adaptive programming. Findings from community feedback mechanisms and post-distribution monitoring indicated that 90% of community members felt that the assistance provided met their priority needs, exceeding the target of 85%.

After-Action Reviews Conducted: One After-Action Review (AAR) was conducted to document achievements, challenges, and lessons learned from the operation. The review provided an opportunity for reflection among staff and volunteers and generated recommendations to inform future emergency responses and strengthen organizational learning. The operation met its target by conducting one after-action review/PDM exercise, which also provided valuable feedback for future programming.

Lessons Learnt

- CEA orientation was crucial in enhancing volunteers' capacity to inform communities about ongoing activities, collect feedback, and provide timely responses to community concerns.
- Community meetings were essential in ensuring that communities received accurate information about the project while providing opportunities for feedback and engagement.
- The collection of community feedback was critical in understanding community perceptions of the project and monitoring progress throughout the implementation period.

Challenges

- During some community meetings, discussions occasionally shifted away from the planned agenda and operational matters, requiring additional facilitation to refocus participants on humanitarian priorities and community needs. Throughout the response, TRCS maintained its neutrality and ensured that discussions remained centred on humanitarian issues and the needs of affected communities.



Secretariat Services

Budget: CHF 8,910

Targeted Persons: 0

Assisted Persons: 0

Targeted Male: -

Targeted Female: -



Indicators

Title	Target	Actual
Number of IFRC monitoring visits	3	3
Number of IFRC Finance spot checks reviews	2	2

Narrative description of achievements

The project successfully achieved its objectives under Secretariat Services through the completion of two financial spot checks and three monitoring missions conducted by IFRC in collaboration with TRCS. These activities strengthened transparency, accountability, and oversight throughout the operation while supporting the identification and mitigation of potential risks.

The monitoring missions and financial spot checks provided an opportunity to review implementation progress, assess adherence to operational plans and procedures, and support timely follow-up on implementation and reporting matters. Regular financial and programme oversight enhanced resource management and contributed to compliance with IFRC policies and requirements. The monitoring and review processes also strengthened coordination between IFRC and TRCS and supported the overall quality of project implementation. As a result, project interventions were more effectively managed, closely monitored, and aligned with planned objectives throughout the operation.

Lessons Learnt

- Financial spot checks are essential for ensuring that project funds are utilized appropriately and in accordance with approved plans, budgets, and objectives.
- Regular monitoring missions by IFRC play a critical role in supporting TRCS compliance with operational guidelines, standards, and reporting requirements.
- Continuous financial and programme oversight contributes to early risk identification and timely corrective actions, enhancing overall project performance and accountability.



National Society Strengthening

Budget: CHF 33,608

Targeted Persons: 60

Assisted Persons: 60

Targeted Male: 29

Targeted Female: 31

Indicators

Title	Target	Actual
Number of staff mobilized	5	5
Number of coordination meetings held	8	8
Number of TRCS monitoring visits conducted	8	8
Number of lesson learnt conducted	1	1



Number of visibility procured and distributed	50	50
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Narrative description of achievements

The DREF response in Kilosa District successfully mobilized all five targeted staff members, conducted all eight planned coordination meetings, and completed eight monitoring visits to the field, ensuring effective oversight and coordination throughout the operation.

In addition, all 50 volunteers were covered by health insurance for the duration of the response, contributing to their safety, well-being, and motivation. The procurement and distribution of IFRC-branded bibs further strengthened volunteer visibility and identity during field activities.

Regular coordination meetings and monitoring visits enhanced programme implementation, facilitated timely decision-making, and strengthened accountability across all levels of the operation. Support for logistics, including vehicle leasing, mileage, and flight costs, enabled efficient field movement and coordination. Overall, these efforts contributed to effective operational management, strengthened duty of care for staff and volunteers, and supported the successful implementation of the DREF response.

Lessons Learnt

- Effective coordination among regional, district, and local government authorities was critical to the successful implementation of the DREF operation.
- Regular coordination meetings and monitoring visits strengthened oversight, facilitated timely problem-solving, and improved implementation quality.
- Providing adequate duty of care measures, including volunteer insurance and visibility materials, enhanced volunteer safety, motivation, and operational effectiveness.

Challenges

Scheduling conflicts and competing operational priorities required adjustments to the timing of monitoring visits. However, through close coordination among the teams, all planned monitoring visits were successfully completed.



Financial Report



DREF Operation

Final Report (CHF)

Date from: 15 Jan 2026 to 31 May 2026

MDRTZ043 - Tanzania - Flood

Operating timeframe: *Start date: 15-Jan-2026 End date: 30-Apr-2026*

Appeal launch date: *24-Jan-2026*

I. Summary

	Actual (CHF)
Opening Balance	0
Funds & Other Income	185,455
DREF Response Pillar	185,455
Expenditure	-159,601
Closing Balance	25,854

II. Expenditure by planned operations / enabling approaches

Description	Budget	Expenditure	Variance
PO01 - Shelter and Basic Household Items			
PO02 - Livelihoods			
PO03 - Multi-purpose Cash			
PO04 - Health			
PO05 - Water, Sanitation & Hygiene	42,900	87,698	-44,798
PO06 - Protection, Gender and Inclusion		1,106	-1,106
PO07 - Education			
PO08 - Migration			
PO09 - Risk Reduction, Climate Adaptation and Recovery	130,530	66,063	64,467
PO10 - Community Engagement and Accountability			
PO11 - Environmental Sustainability			
Planned Operations Total	173,430	154,867	18,563
EA01 - Coordination and Partnerships			
EA02 - Secretariat Services	8,910	4,734	4,176
EA03 - National Society Strengthening	3,116		3,116
Planned Operations Total	12,026	4,734	7,292
Total	185,455	159,601	25,855

III. Expenditure by budget category & group

Prepared on 07-Jul-2026

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[Click here for the complete financial report](#)

Please explain variances (if any)

The variance observed in some budget lines is attributable to differences in the categorization and presentation of expenditures within the IFRC financial reporting system, and not deviation from the approved budget or planned activities.

All funds were utilized as per the approved budget. Expenditures were incurred against the authorized budget allocations. The apparent misalignment between budget lines in the IFRC financial report and the approved budget framework results from reporting structures



applied within the IFRC financial management system. As the National Society operates under the funds transfer mechanism, expenditure recording and financial reporting are maintained primarily through the National Society's accounting and reporting systems. Consequently, certain expenditure categories may be reflected under different budget headings in the IFRC reporting system for consolidation and reporting purposes.

For an accurate representation of expenditure utilization against the approved budget, reference should be made to the National Society's financial report, which aligns expenditures with the original approved budget lines.



Contact Information

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[Click here for reference](#)

