

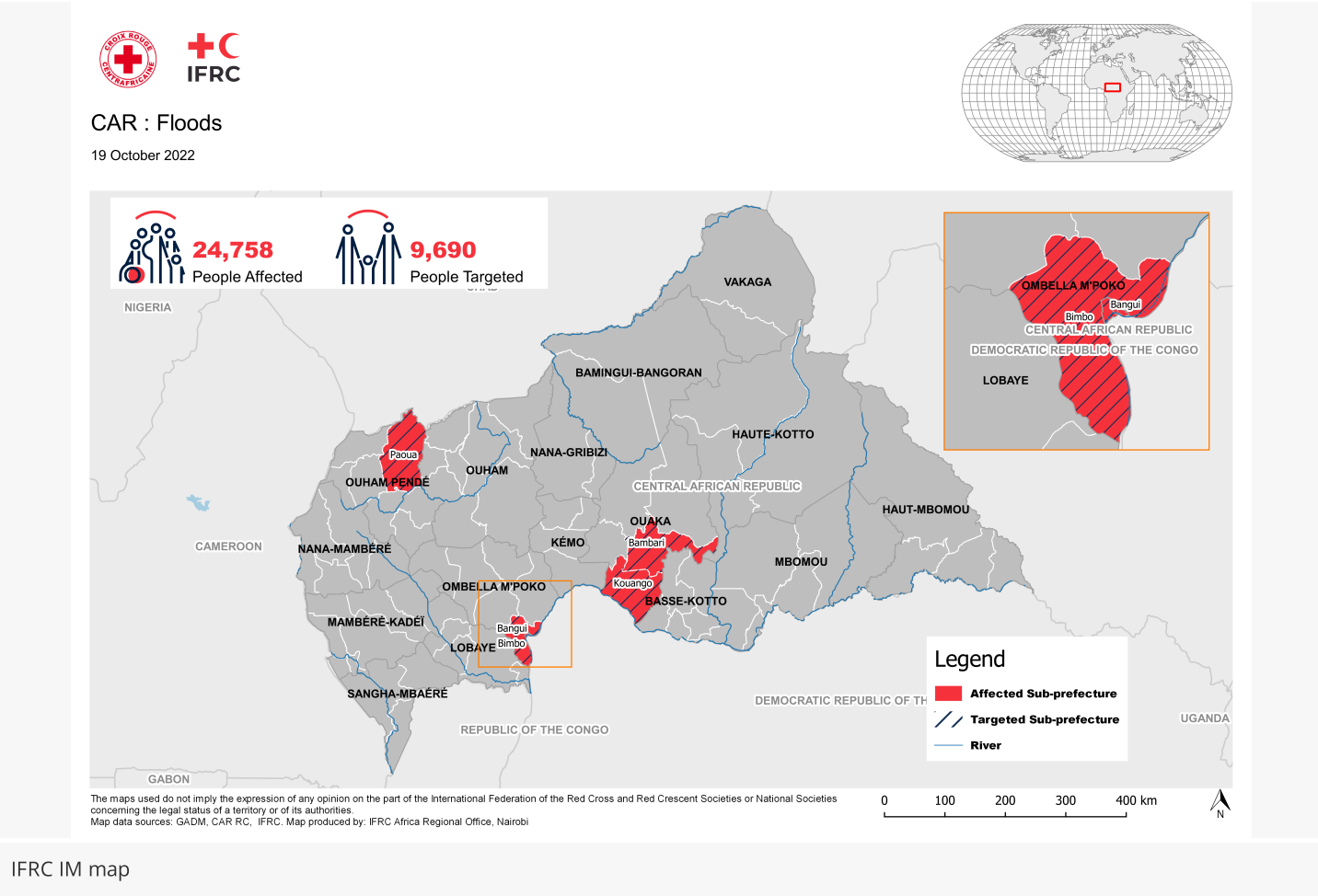


The SG of the CA RCS with beneficiaries receiving their kits

Appeal: <b>MDRCF029</b>	Total DREF Allocation: <b>CHF 425,627</b>	Crisis Category: <b>Yellow</b>	Hazard: <b>Flood</b>
Glide Number: <b>FL-2022-000330-CAF</b>	People Affected: <b>24,758 people</b>	People Targeted: <b>9,690 people</b>	People Assisted: <b>9,690 people</b>
Event Onset: <b>Slow</b>	Operation Start Date: <b>20-10-2022</b>	Operational End Date: <b>30-04-2023</b>	Total Operating Timeframe: <b>6 months</b>
Targeted Regions: <b>Bangui, Ouaka, Ouham-Pendé</b>			

The major donors and partners of the IFRC-DREF include the Red Cross Societies and governments of Australia, Austria, Belgium, Britain, China, Czech, Canada, Denmark, German, Ireland, Italy, Japan, Luxembourg, Liechtenstein, Malta, Norway, Spain, Sweden, Switzerland, Thailand, and the Netherlands, as well as DG ECHO, Mondelez Foundation, and other corporate and private donors. The IFRC, on behalf of the National Society, would like to extend thanks to all for their generous contributions.

# Description of the Event



## Date when the trigger was met

28-09-2022

## What happened, where and when?

By the end of the intervention, the humanitarian situation in the flood-affected areas had partially stabilized. The rains had stopped since early December 2022, causing the level of the Oubangui River to drop and living conditions in the affected neighborhoods to gradually improve. The strong winds recorded in February 2023 did not cause any further major flooding, and the immediate risks had diminished. Thanks to the support of the Central African Red Cross (CARC) and the International Federation (IFRC), several affected households received humanitarian assistance, including non-food items, emergency shelters, hygiene kits, and access to drinking water through the rehabilitation of 50 wells. Awareness campaigns on hygiene, health, malaria prevention, COVID-19, and gender-based violence were also carried out.

Despite these efforts, some families remained in precarious conditions, particularly those whose homes had been completely destroyed. Health and water supply infrastructure remained fragile in several localities. Continued vigilance and longer-term recovery actions were still needed to strengthen communities' resilience to future rainy seasons.





Une beneficiaire portant son NFI qu'elle vient de recevoir



Les volontaires de la CRCA en construction d'abris d'urgence



Distribution des kits NFI

## Scope and Scale

The intervention brought a significant humanitarian response to 1938 households (or 9690 people) affected by flooding in 11 localities, including Bangui, Bimbo, Bégoua, Bambari, Kouango and Paoua. Key results include:

- Distribution of essential goods: emergency shelters, NFI kits (mosquito nets, blankets, mats, kitchen kits), hygiene and dignity kits.
- Rehabilitation of 50 water wells and disinfection of latrines, improving access to drinking water and sanitation.
- Awareness campaigns on hygiene, health, malaria prevention, COVID-19 and gender-based violence (GBV), reaching over 22,000 people.
- Construction of 571 emergency shelters in the worst-affected areas.
- Reduced health risks and improved living conditions in reception sites.

These actions have helped to reduce morbidity, prevent epidemics and strengthen community resilience to future flooding.

The operation also had a positive impact on CRCA's institutional and operational strengthening:

- Training of 300 volunteers in:
  - distribution techniques,
  - emergency shelter construction,
  - disinfection of latrines,
  - hygiene and health promotion,
  - GBV prevention and compliance with the Code of Conduct.
- Strengthened coordination between local branches, national headquarters and Movement partners.
- Raising CRCA's profile with local authorities and communities.
- Drawing up and validating the CRCA's Strategic Development Plan.
- Establishment of monitoring, reporting and feedback mechanisms, in particular through a lessons-learned workshop.

## National Society Actions

Have the National Society conducted any intervention additionally to those part of this DREF Operation?	Yes
Please provide a brief description of those additional activities	<ul style="list-style-type: none"> <li>- Kits provided : The ICRC provided 298 emergency family kits.</li> <li>- These kits were integrated into CRCA's overall stock of 748 kits.</li> <li>- Distribution was carried out by CRCA volunteers, particularly in the hardest-hit areas of Bangui, targeting the most vulnerable households (pregnant women, the elderly, families whose homes had been totally destroyed).</li> <li>- The distributions were gradual, according to the vulnerability criteria defined in the action plan.</li> </ul>

## IFRC Network Actions Related To The Current Event

Secretariat	The IFRC cluster office in Bangui provided support to the CARCS in the needs assessment, the coordination of activities and planning of this DREF intervention.
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#### Participating National Societies

Two participating national societies are present in the Central African Republic: The French Red Cross and the Dutch Red Cross. They took part in assistance coordination meetings led by the Ministry of Humanitarian Action. In implementing the operations, only the Dutch Red Cross was involved in supplying NFI kits to 400 households.

## ICRC Actions Related To The Current Event

The ICRC also has a strong presence in the country, with capacity in water, hygiene and sanitation (WASH) management and security. At the end of the meeting members of the Red Cross Movement under the leadership of the CARCS, made available 450 family kits consisting of toothbrushes, hygiene kits for women, towels for this response.

## Other Actors Actions Related To The Current Event

Government has requested international assistance	Yes
National authorities	<ul style="list-style-type: none"><li>- The Prime Minister, head of government, had issued a statement to the press deploring the consequences of the floods and calling on humanitarian actors to take concerted emergency measures to help those affected.</li><li>- The Ministry of Social Action convened an emergency meeting with all humanitarian actors and reactivated the crisis committee on disaster response. - At the same time, the Minister insisted on the proper coordination of actions and communication of information within the crisis committee. The following instructions had been given to the various partners.</li><li>- The need to provide reliable data on the extent of the damage in order to better plan and coordinate response actions through joint assessment.</li><li>- Aid to victims must be immediate and proportional to their degree of vulnerability.</li><li>- Involving local authorities and raising community awareness of the causes of flooding and risk communication.</li><li>- Consideration of sustainable recovery solutions in recurrently flooded and at-risk areas.</li></ul>
UN or other actors	<p>The coordination of humanitarian actions through OCHA, WFP, WHO, IOM, MINUSCA, UNFPA, UNHCR, UNICEF and FAO has held regular meetings to consult and assess the level of preparedness of the response to this emergency situation, with a firm pledge of support to the government.</p> <ul style="list-style-type: none"><li>- Since the start of the floods, IOM and UNHCR have been positioned in temporary sites for displaced people and in part of Bangui's 6th arrondissement. WHO has supported the organization of mobile clinics in collaboration with the Ministry of Health. Awareness-raising campaigns on risk communication were carried out in all affected areas, with the aim of raising awareness and changing people's behavior, particularly in terms of hygiene and environmental sanitation.</li><li>- At the start of the floods, IOM had already distributed NFIs to victims in Bangui's 6th arrondissement.</li></ul> <p>The following actions were carried out following the impact of the September floods:</p> <ul style="list-style-type: none"><li>- Stock assessments were carried out at cluster level (WASH, Shelter &amp; Protection, Health, Food Security and GBV).</li><li>- A joint assessment by was led by OCHA and the government to improve aid planning with reliable data.</li></ul>

#### Are there major coordination mechanism in place?

The CARCS has consistently prioritized effective coordination with partners in its response operations. At the national level, CARCS actively participates in the coordination mechanism established by the Prime Minister, with leadership from the Ministry of Humanitarian Action through the Crisis Committee. The CARCS/IFRC operations coordination team contributes to this platform by attending all scheduled meetings, ensuring alignment and collaboration with other stakeholders. Similarly, CARCS local committees engage in meetings organized within municipalities in their respective jurisdictions, guaranteeing that response activities at the community level are integrated into the broader framework.



Efforts to avoid duplication have been a focal point, with actions coordinated alongside other partners. Information sharing through technical clusters facilitates synergy and efficiency in operations. Lessons learned and best practices from these activities are shared across intervention zones, fostering continuous improvement in response strategies and ensuring impactful assistance to affected populations.

By maintaining these structured coordination practices, CARCS reinforces its capacity to deliver targeted humanitarian assistance, addressing diverse needs while fostering collaboration and inclusivity. Such commitment ensures streamlined efforts that are responsive to the challenges faced by vulnerable communities.

## Needs (Gaps) Identified



### Shelter Housing And Settlements

The damage was significant for the affected communities. The severity of impact on families' houses was due to the type of construction characteristics. In these areas, the houses are built of non-durable materials, generally earth. Among the priority needs identified, there were:

- Immediate shelter for homeless populations across all areas.
- The families needed a provision of essential materials to help them restoring their lives. Where the floods have not swept away their furniture and belongings, it has severely damaged them. Very few were saved following the floods.
- Focused attention was needed on vulnerable groups identified during the assessment, such as children, pregnant women, and the elderly, especially in the villages with access challenges for other actors.
- Construction materials and expertise to rebuild houses that are durable and suited to the local climate. While the majority need to protect their families against the weather and find safer sheltering solutions, affected families also lack resources to cover for their basic needs, sleeping materials, protection of their belongings, etc.
- Risk communication on the safe construction and floods incidence on health, livelihood.

The assessments conducted by the CARCS on 28 September have made it possible to calculate the damage to shelters in each locality or town (See below).

i. For Bangui and its surroundings (Arrondissement 2, 3, 4, 5, 6, 8, Bimbo and Bégoua, i.e., 8 localities with the highest number of damages and impact listed).

- Number of households affected: 3,949.
- Number of homeless people: 21,904 people, including 6,156 men, 7,516 women and 8,232 children, pregnant women: 687, and elderly people: 238.
- In terms of affected houses, there are 1,823 destroyed and partially destroyed houses: 2126

ii. Paoua has 156 affected households

- Number of homeless people: 780 people, including (148M 256F and 376 children, 34 pregnant women and 59 elderly people.
- Houses totally destroyed: 132
- Houses partially destroyed: 24

iii. Bambari has 109 affected households

- Number of homeless people: 545 including 109M, 155F and 281 children, 39 pregnant women, 57 elderly people.
- Houses totally destroyed: 99
- Houses partially destroyed: 10

iv. Kouango with a total of 306 affected households:

- Number of homeless people: 1,530, including 430 men, 525 women, 574 children. But also 56 pregnant women and 119 elderly people.
- Houses totally destroyed: 240
- Houses partially destroyed: 66



### Livelihoods And Basic Needs

The floods caused many livelihood losses among affected households, and many material losses affecting their economic planning. These losses, added to the context of generalized economic crisis that prevailed prior to the floods, would eventually lead to an exaggerated increase in market prices for food and non-food products.



The food security situation in the country was already worrying, and the losses caused by the floods exacerbated the economic and food insecurity of households, with the destruction of hectares of crops. Although this overview of the economic context had been carried out, food security needs had not been assessed for this operation. The scale of the needs and the communities affected limited assistance capacity to the most immediate priorities. However, the joint assessment with OCHA and the Ministry of Humanitarian Action had taken this aspect into account.

Given the current humanitarian situation in CAR, it was important that livelihood assistance took into account pre-disaster vulnerabilities, particularly in terms of food security.



## Health

The health situation in flood-affected areas presented serious risks for affected households and surrounding populations. Malaria and the transmission of water-borne diseases remained major concerns, particularly for those living outdoors without adequate protection. Exposure to mosquito bites - known to transmit malaria parasites and respiratory illnesses - was increased by outdoor living conditions. In addition, the proximity of stagnant water and riverbeds had created breeding grounds for mosquitoes, which posed a direct threat to public health. Young children were particularly at risk, as these areas were often used as informal playgrounds, further exposing them to hazardous environments.

Sanitation problems compounded the risks, with widespread exposure to fecal-oral diseases due to contaminated water sources in the affected districts. With open defecation a common practice in some of the affected villages, the risk of deterioration in water, sanitation and hygiene was significant. Overcrowding had become a pressing problem, as many displaced people were forced to seek refuge in schools or host families, often in cramped and congested living conditions. These circumstances increased the likelihood of disease transmission, including viral diseases such as COVID-19, where close contact and limited ventilation further exacerbated the threat.

To address these health risks, immediate and targeted intervention was required to reduce the risk of disease, improve sanitation, provide protective measures against exposure to mosquitoes and ensure safe and dignified living conditions for affected populations. Coordinated efforts to promote hygiene education, strengthen access to healthcare and prevent epidemics were essential to protect vulnerable communities in these difficult circumstances.



## Water, Sanitation And Hygiene

The assessment by the Central African Red Cross Society (CARCS) highlighted the considerable damage caused by the floods to essential water and sanitation facilities. In and around Bangui, including arrondissements 2, 3, 4, 5, 6, 8, as well as Bimbo and Bégoua, a total of 1,350 latrines and 200 wells were damaged. Similarly, in Paoua, 99 latrines and 107 wells were affected. The situation in Bambari reported 76 damaged latrines and 88 damaged wells, while Kouango reported the highest number of damaged wells (275) and 155 damaged latrines.

The floods aggravated the already difficult access to drinking water and adequate hygiene. Affected populations were thus exposed to increased risks of water-borne diseases. The destruction of family latrines, damage to water points and the loss of water storage containers created critical sanitation problems. The inaccessibility of social and sanitary infrastructures in the affected communities forced some families to resort to open defecation, often around their homes or in stagnant water, which greatly increased the risk of diarrhoeal diseases and even cholera epidemics.

These conditions posed a serious threat to public health, particularly in communities already vulnerable to disease transmission due to overcrowding and inadequate hygiene facilities. Immediate action was needed to repair damaged infrastructure, provide access to drinking water and promote appropriate hygiene practices in order to mitigate the risk of further health crises in the affected areas. The coordinated effort of humanitarian actors was crucial to meeting these urgent needs and safeguarding the well-being of the affected populations.



## Protection, Gender And Inclusion

The assessment and registration process confirmed that flood-affected communities were made up of diverse groups with varying levels of vulnerability, access to basic services and impact. Understanding and taking account of this diversity was a key issue in this intervention. The assessment identified groups such as women, children, the elderly and the disabled.

The promiscuity and grouping of populations, coupled with their vulnerability, are often the source of abuse and sexual exploitation in a variety of ways, so it was essential to take ESP into account in awareness campaigns and volunteer training.

In line with IFRC standards, the CRCA DREF operation aimed to remain consistent with the Red Cross Red Crescent Movement's commitment to gender equality and diversity by adapting beneficiary selection criteria to the target population (female-headed households, children and people with disabilities).



## Community Engagement And Accountability

The needs raised by the flood situation and the significant risk of increased health and WASH vulnerabilities highlighted significant challenges that required active community engagement.

With the major threats to public health posed by the flooding situation, social mobilization and risk communication were essential for adherence to preventive measures and safe WASH practices.

Construction practices observed in flood-prone areas and certain WASH practices could indicate a lack of overall understanding of flood risks and the various consequences for the lives and livelihoods of these families. By raising awareness of building safety and best practices, people had been empowered to take informed action to reduce the risks associated with current and future flooding.

Social mobilization, risk communication and community engagement activities were carried out to limit the risk of illness and explain to the community the causes and consequences of flooding. Although some of the affected communities were accustomed to returning to their places of origin after the waters receded, risk communication aimed to maintain this awareness and ensure adequate decision-making for the next flood season.

## Operational Strategy

### Overall objective of the operation

The aim of this operation was to provide integrated assistance to 1,938 families affected by flooding in and around Bangui, in Paoua, Kouango and Bambari. The sectors targeted by these operations were: livelihoods, health, water, sanitation and hygiene, shelter and civic education, with the aim of improving the living conditions of those affected.

This objective was achieved within an overall timeframe of 6 months.

### Operation strategy rationale

The Central African Red Cross Society (CARCS) successfully implemented the strategy outlined under plan of action. The strategy aimed to address the urgent needs of populations affected by the 28 September 2022 floods. Immediate emergency health, WaSH (Water, Sanitation, and Hygiene), and shelter services were provided to reduce vulnerability among the most at-risk households, particularly those who had lost their homes. The intervention also alleviated financial burdens, enabling affected populations to access basic needs and necessities. The strategy was informed by a gap analysis, the level of vulnerability in targeted areas, the broader context of economic crisis and insecurity, and lessons learned from past operations.

The implemented response strategy covered actions for 6 months. The initial approved 4 months were extended for an additional 2 months to complete some of the activities. Intervention organized by sector, achieved the following:

#### - Shelter

Emergency shelter was provided to 571 of the most vulnerable households, distributed as follows: 156 in Paoua, 109 in Bambari, 306 in Kouango, and 1,367 unassisted households in Bangui and its surroundings.

#### - WASH

Access to clean and sufficient water was restored for affected communities. Damaged water points were treated and repaired, while latrines were disinfected and restored. Families were provided with essential materials for drawing, transporting, and storing water (e.g., buckets and jerry cans) and for disinfecting and maintaining latrines (e.g., chlorine and gresyl). Hygiene promotion targeted specific behaviors to minimize risks and encourage best practices. Beneficiaries shared responsibilities in maintaining sanitation, and both volunteer teams and families received sanitary materials and equipment.

#### - Health

The health strategy was essentially around first aid, PFA and intensive awareness. On that health strategy, Volunteers successfully delivered first aid, health and hygiene promotion, and psychosocial support (PSS) to affected communities, ensuring improved well-being and resilience.

Throughout the operation, the mobilized teams underwent targeted training and received ongoing technical and managerial support from NS headquarters and the IFRC office. Capacity building, as well as individual and collective security measures, formed the foundation of their deployment across various response sectors. Community leaders and representative groups were actively engaged from the onset, ensuring that all assistance aligned with the needs of affected populations. Communities participated in validating the content of relief kits and establishing communication and feedback mechanisms through discussion groups and exchanges with local leaders and representatives of target groups. The coordinated implementation of this strategy strengthened community resilience and facilitated recovery while addressing the immediate needs of flood-affected populations. The collaboration with local stakeholders and engagement of community representatives were key to ensuring that the response was targeted, efficient, and impactful.



# Targeting Strategy

## Who was targeted by this operation?

The distribution of targets was as follows:

- In Bangui, a total of 1,367 households out of the 3,949 affected were targeted for emergency assistance thanks to this DREF funding. The target population in Bangui was those whose homes had been totally destroyed, and included assistance provided by partners.
- In the towns of Bambari, Kouango and Paoua, the 571 households whose homes had been totally or partially destroyed were assisted during this operation.

According to the mid-term evaluation, local authorities and beneficiaries thanked the Central African Red Cross for this assistance.

At least 75% of affected populations are protected against disease, and the same percentage have also seen their living conditions improved.

## Explain the selection criteria for the targeted population

For this operation, the following vulnerability criteria were considered the most vulnerable:

- 1) Households that had not received any material assistance
- 2) Families whose homes had been completely destroyed, including sleeping equipment and kitchen utensils
- 2) Households with the following vulnerabilities: female-headed households, pregnant women, nursing mothers, children under 10 at high risk of disease and the elderly.

Local authorities (mayors, deputies, neighborhood chiefs and religious /community leaders) were informed of the identification criteria and had participated in the selection of affected households. The NS targeting took into account the priority defined by the Central African government's forecasts. It concerned Bangui and the surrounding area (Arrondissements 2, 3, 4, 5, 6, 8, Bimbo and Bégoua) i.e. 8 localities, the town of Paoua, Bambari and Kouango.

Targeting was sensitive to the interventions of other actors. In Bangui, in particular, the humanitarian response was significant, where assistance was concentrated on those households most affected by the floods who had not yet received aid, thus avoiding duplication of effort. Local committees, with the participation of community leaders, oversaw the selection of beneficiary households. Children under the age of 10, who make up 37.6% of the population, were given priority to consider their heightened vulnerability.

## Total Assisted Population

Assisted Women	2,762	Rural	61%
Assisted Girls (under 18)	2,102	Urban	39%
Assisted Men	2,684	People with disabilities (estimated)	12%
Assisted Boys (under 18)	2,142		
Total Assisted Population	9,690		
Total Targeted Population	9,690		

## 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
Increased prices of basic necessities	Local procurement will be preferred with a close monitoring of market.
Low infrastructure and communication facilities due to no electricity in all three cities making it difficult to reach some branches and team members for days.	As this was out of the NS control, the monitoring system was adapted to the condition and mainly calls were planned. the team also needed some specific installation during the trainings and the sessions with volunteers like generators.
No materials for the various awareness campaigns.	Thankfully, NS used stocks from other messages for WaSH campaign.
Low access due to road quality;	Adapted vehicles were rent for the purpose of the transport of goods and distribution activities. Time to reach the areas were taking into consideration in the activities' agenda.
Overall demand being above capacity of NS with identified surplus of beneficiaries (6000 households enumerated) in Paoua and some Contradictory lists of beneficiaries (CRCA and NGOs) in Bambari	NS has engaged community leader to explain the response capacity, criteria and beneficiary selection. The community has continued to be engaged in the beneficiary selection, making it easier and more peaceful the acceptance of the distributions.
Tense political climate with risk of security deterioration.	Regular monitoring of safety information. Observance of safety measures and rules for travel in hazardous areas.

**Please indicate any security and safety concerns for this operation:**

In Bangui, insecurity and political tensions are likely in areas affected by the pending constitutional review.  
Specifically, the security situation in other areas is as follows:

- Paoua area in Ouham-Péndé: while the situation is relatively calm in the town, on the axes and in the outskirts, it remains very volatile and uncertain due to the activism of armed 3R groups that rob and loot the civilian population.  
The use of improvised explosive devices by armed actors in the area is recurrent. The most recent mine incident in the area occurred on 3 October 2022, when a vehicle of the Bangladesh contingent of the UNMISCA was blown up by an explosive device on the Kouï-Bocaranga road. Movement by UNHAS flight to Paoua is essential, with movement out of the city restricted to minimize risk.
- Kouango, Ouaka: The town of Kouango remains relatively calm under the control of government forces for the time being, despite rumors of an attack on the town by UPC armed groups last month. However, access to the town by road is often risky due to the presence of UPC armed groups via Bambari and anti-balaka groups via the town of Grimari. The phenomenon of robbery, sometimes followed by physical violence against the targets, is recurrent. Theft by UNHAS is essential, with movement out of the city restricted to minimize the risks.

Security challenge has been experienced by NS during the implementation of this DREF, delaying the implementation and monitoring. The team has tried to mitigate this as well as insecurity in the outskirts of Bambari, Kouango and Paoua. This situation requires to observe security requirements with our team that are on standby for days, sometimes for weeks.

Has the child safeguarding risk analysis assessment been completed?	Yes
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# Implementation



## Shelter Housing And Settlements

**Budget:** CHF 253,951

**Targeted Persons:** 1,938

**Assisted Persons:** 1,938

**Targeted Male:** -

**Targeted Female:** -

### Indicators

Title	Target	Actual
Number of households Supported by shelter houses construction	1,938	1,938
Number of households that received shelter materials	1,938	1,938

### Narrative description of achievements

The emergency shelter component was one of the most successful activities during this operation. The CRCA rehabilitated emergency shelters in Bambari, Kouango, and Paoua. In total, a total of 1,938 households benefited from the emergency shelters.

#### Summary of the PDM

Following the floods that hit several localities in the Central African Republic in 2022, the Central African Red Cross (CRCA), with the support of the International Federation of Red Cross and Red Crescent Societies (IFRC), carried out a post-distribution survey (PDM) in the Bambari, Kouango and Paoua areas. The aim of the survey was to assess beneficiary satisfaction, the relevance of the assistance received, and the effectiveness of the accountability mechanisms put in place.

The survey was carried out in 321 households, selected according to a rigorous statistical method guaranteeing representativeness of the beneficiary population. The results show that 93% of those surveyed had been directly affected by the floods, and all confirmed that they had received the planned assistance. This comprehensive coverage testifies to effective targeting and logistical coordination.

As for the use of the items received, 71% of beneficiaries said they had used them directly, while 29% said they had shared or resold them, often to meet other urgent needs such as food. Tarpaulins were among the most widely distributed items, underlining their importance in emergency situations for providing temporary shelter.

The majority of respondents (nearly 60%) felt that the kits they received were perfectly suited to their needs, while 38% expressed reservations, citing unmet needs or insufficient quantities. On the other hand, the quality of the items was widely praised: 97% of beneficiaries rated it as good or very good, reinforcing the credibility of the intervention and confidence in CRCA.

In terms of accountability, 88% of beneficiaries were aware of the selection criteria, and 66% had access to a complaints mechanism. The suggestion box was the best-known channel, but other means such as the telephone or face-to-face exchanges were also identified. However, a third of those surveyed were not aware of these mechanisms, underlining the need to strengthen community communication.

Finally, the survey highlighted certain difficulties encountered during distributions, reported by almost 48% of respondents. These challenges, combined with logistical constraints and the absence of exhaustive lists of beneficiaries, sometimes limited the effectiveness of the intervention.

In conclusion, this post-distribution survey confirms the relevance and positive impact of the assistance provided by CRCA. It also highlights concrete areas for improvement, notably in terms of communication, diversification of accountability channels and multi-sectoral response. These valuable lessons will serve to strengthen the quality of future humanitarian interventions in the country.



## Lessons Learnt

The operation strengthened the technical skills of 300 local branch volunteers in emergency shelter construction. CRCA now has a pool of trained volunteers with which to intervene effectively in similar operations in the future.

## Challenges

Logistical delays due to insecurity:

- The provision of tarpaulins and tool kits was significantly delayed due to insecurity in certain intervention zones.
- This slowed down the rehabilitation of emergency shelters, particularly in Kouango and Paoua.



**Budget:** CHF 64,593

**Targeted Persons:** 252,000

**Assisted Persons:** 326,560

**Targeted Male:** -

**Targeted Female:** -

## Indicators

Title	Target	Actual
Number of personnes reached by hygiene and sanitation promotion awareness sessions	9,690	9,690

## Narrative description of achievements

As part of the operation, 1,938 households received 3,876 impregnated mosquito nets to prevent malaria. Awareness campaigns on health, hygiene, COVID-19, and gender-based violence were conducted through 4,500 home visits and 550 public sessions. At the same time, psychosocial support was provided to affected individuals, and 300 volunteers were trained to support these actions.

## Lessons Learnt

### 1. Building local capacity

The training of 300 volunteers in health promotion, disease prevention and psychosocial support has strengthened local skills and created a base of human resources that can be mobilized for future emergencies.

### 2. The importance of logistical anticipation

Delays in the delivery of mosquito nets and health kits highlighted the need to better anticipate logistical requirements and secure supply chains from the outset of the operation.

### 3. Usefulness of community-based approaches

Home visits and public sessions were effective in raising awareness. This confirms the importance of involving communities in health prevention.

### 4. Need for appropriate media

The lack of awareness-raising materials (posters, leaflets, etc.) limited the impact of the campaigns. It is essential to provide communication tools adapted to local contexts.

### 5. Intersectoral coordination essential

As health is linked to water, hygiene and protection, better coordination between sectors would have enabled a more integrated and effective response.

## Challenges

### 1. High risk of spreading COVID-19

Overcrowded conditions at reception sites, combined with a lack of preventive equipment (masks, hand-washing kits), made it difficult to comply with barrier measures.

### 2. Poor hygiene conditions

Flooding damaged latrines and water points, increasing the risk of water-borne diseases and malaria.



### 3. Logistical delays

Delays in the transfer of funds and the delivery of mosquito nets and health kits slowed down the implementation of health activities.

### 4. Lack of communication materials

Awareness campaigns were carried out without visual or educational materials, which limited their scope and effectiveness.

### 5. Difficult access to certain areas

Insecurity and damaged roads complicated access to the most affected communities, particularly in Kouango and Paoua.



## Water, Sanitation And Hygiene

**Budget:** CHF 54,350

**Targeted Persons:** 13,545

**Assisted Persons:** 13,545

**Targeted Male:** -

**Targeted Female:** -

### Indicators

Title	Target	Actual
Number of households that received Water Conservation and Purification Kits	1,938	1,938
Number of community wells rehabilitated	50	50
Number of people reached With awarresses	9,690	9,690
Number of water point management committees	50	50
Number of chlorinated wells	500	500

### Narrative description of achievements

As part of the DREF operation carried out in response to the 2022 floods, the Central African Red Cross, with support from the IFRC, has implemented a series of water, sanitation and hygiene (WASH) activities to reduce the risk of water-borne diseases and improve the health conditions of the affected population. The project has rehabilitated 50 water wells in Bambari, Kouango, Paoua and Bangui, and treated them with chlorine to ensure safe access to drinking water. At the same time, latrines were disinfected with cresyl, and awareness campaigns were organized to promote hygiene, prevent the spread of COVID-19 and combat gender-based violence (GBV). These actions were carried out by 240 trained volunteers, who also carried out 4,500 home visits, reaching around 22,500 people, and ran 550 public awareness-raising sessions. However, implementation faced several challenges, including the need to wait for water to recede in flooded areas, the absence of visual aids for the campaigns, and the lack of involvement of the WASH cluster. Despite these constraints, the operation provided important lessons, notably on the need for greater involvement of beneficiaries and technical partners in future WASH interventions to enhance their effectiveness and sustainability.

### Lessons Learnt

1. Importance of community involvement: Beneficiary involvement in WASH activities is essential to ensure local ownership, sustainability of actions and adoption of good hygiene practices.
2. Need for better inter-agency coordination: The involvement of the WASH cluster and other technical partners is crucial to enhance the effectiveness of interventions, avoid duplication and fill any gaps.
3. Enhanced logistical preparation: It is important to plan in advance the communication tools and equipment needed for awareness campaigns, to ensure smooth and effective implementation.

### Challenges

1. Late withdrawal of water: We had to wait for the water to recede completely from the flooded areas before we could begin well rehabilitation and latrine disinfection activities, which delayed implementation.





2. Lack of communication media: Awareness campaigns were conducted without visual aids (posters, leaflets, picture boxes), which limited the impact of the messages conveyed to communities.



## Protection, Gender And Inclusion

**Budget:** CHF 8,511

**Targeted Persons:** 18,000

**Assisted Persons:** 104,970

**Targeted Male:** -

**Targeted Female:** -

### Indicators

Title	Target	Actual
Number of days with SGBV and PSEA messages diffusion	60	60
Number of volunteers briefed on PGI notion	300	300

### Narrative description of achievements

As part of the DREF operation carried out in response to the 2022 floods in the Central African Republic, CRCA, with the support of the International Federation (IFRC), integrated a Protection, Gender and Inclusion (PGI) component into its humanitarian activities. This intervention aimed to ensure that actions carried out were sensitive to the specific needs of vulnerable groups, notably women, children, the elderly and people with disabilities. To this end, 300 volunteers were trained on sexual and gender-based violence (SGBV), the code of conduct, and the principles of protection and inclusion. Awareness-raising campaigns on SGBV were organized in the 11 localities targeted by the operation, to complement distribution activities and hygiene and health awareness campaigns. However, these campaigns were conducted without appropriate visual aids or communication tools, which limited their impact. No cases of SGBV were reported during the operation, which may reflect both a lack of secure reporting mechanisms and low community awareness. Despite these limitations, the intervention helped strengthen collaboration with neighborhood chiefs, community leaders and beneficiaries, laying the foundations for better consideration of protection issues in future humanitarian responses.

### Lessons Learnt

- Good community collaboration:

Volunteers enjoyed strong acceptance from disaster victims, neighborhood leaders and communities, facilitating awareness-raising activities.

- Capacity building:

300 volunteers were trained specifically on SGBV, which is an important asset for future interventions.

### Challenges

1. Lack of awareness-raising materials:

SGBV awareness campaigns were carried out without visual or material aids, which may have limited their effectiveness.

2. Lack of reported cases:

- No cases of SGBV were reported to volunteers during their interventions, which may reflect under-reporting due to stigma or lack of trust; or a lack of accessible reporting mechanisms.



## Community Engagement And Accountability

**Budget:** CHF 17,559

**Targeted Persons:** 300

**Assisted Persons:** 300

**Targeted Male:** -

**Targeted Female:** -



## Indicators

Title	Target	Actual
Number of volunteers trained in RCCE and the code of conduct	300	300
Number of community meetings held	33	33
Number of feedback mechanisms implemented and validated by communities	2	2
Number of feedbacks collected	300	300
Percentage of feedback processed	100	100

## Narrative description of achievements

As part of the DREF operation carried out in response to the 2022 floods in the Central African Republic, the CEA (Community Engagement and Accountability) approach was integrated transversally into the various components of the intervention. The aim was to ensure the active participation of affected communities, reinforce their understanding of health risks and promote protective behaviors. To this end, awareness-raising campaigns were organized in the 11 target localities, focusing on hygiene, health, the prevention of COVID-19 and the fight against gender-based violence (GBV). These campaigns were conducted through public sessions and home visits, mobilizing trained volunteers. However, the lack of appropriate communication media (posters, leaflets, picture boxes) limited the impact of the messages. What's more, no formal feedback or complaint management mechanism was put in place, limiting the ability to measure real beneficiary engagement and adjust interventions according to their feedback. Despite these limitations, the intervention helped strengthen links between volunteers, local authorities and communities, laying the foundations for more structured community involvement in future operations.

## Lessons Learnt

• Good community collaboration:

Strong acceptance of volunteers by communities, neighborhood leaders and local authorities facilitated message dissemination.

Increased visibility of the CRCA:

• The operation enhanced the visibility of the Central African Red Cross among communities and authorities, providing leverage for future communication campaigns.

Enhanced community involvement:

• The home visits and public sessions helped to change behavior and raise awareness of hygiene practices and risk prevention.

## Challenges

• Lack of communication materials:

Awareness campaigns (hygiene, health, COVID-19, GBV) were carried out without visual or material support, which may have limited their impact.

Limited coordination with certain clusters:

• The WASH cluster was not involved in the operation, which may have limited the reach of awareness-raising messages.



**Secretariat Services**

**Budget:** CHF 11,238

**Targeted Persons:** 16

**Assisted Persons:** 16

**Targeted Male:** -

**Targeted Female:** -



## Indicators

Title	Target	Actual
Supervision report on IFRC program activities	5	5
Finance and logistics technical mission report	2	2

## Narrative description of achievements

As part of the DREF operation carried out in response to the 2022 floods in the Central African Republic, the Secretariat's services played a coordinating, supervisory and technical support role in the implementation of activities in the field. The Secretariat, through the International Federation of Red Cross and Red Crescent Societies (IFRC), supported the Central African Red Cross (CRCA) in the planning, monitoring, evaluation and reporting of the operation. It also facilitated the mobilization of human resources, logistics, communication, security and financial management. The Secretariat trained volunteers in humanitarian standards, the Code of Conduct, emergency shelter management, hygiene promotion and the prevention of gender-based violence. It also coordinated relations with local authorities, Movement partners and other humanitarian actors. However, a number of challenges limited the achievement of indicators in this area, including delays in the transfer of funds, the lack of qualified staff within CRCA, the absence of effective monitoring tools and poor documentation of activities. Despite these constraints, the Secretariat has helped to strengthen the National Society's capacities and ensure a coordinated response in line with IFRC standards.

## Lessons Learnt

Enhanced visibility and credibility:

- The operation raised CRCA's profile with local and national communities and authorities.
- Better recognition of CRCA's auxiliary role by public authorities.

Importance of coordination and planning:

- Close collaboration between the DM National, NDRTs and partners (IFRC) enabled effective supervision.
- Rigorous planning with regular briefings/debriefings facilitated follow-up.

Capacity building:

- The operation allowed training of 300 volunteers and strengthening internal skills in disaster management, GBV, hygiene, etc.
- The CRCA's Strategic Development Plan was drawn up and validated, laying the foundations for sustainable institutional development.

## Challenges

1. Limited institutional capacity:

- Some positions within the Secretariat were vacant, which slowed down certain activities.
- Weak technical skills of some staff, limiting the implementation of technical components such as livelihoods.

2. Logistical and administrative delays:

- Delay in transferring funds between banks, impacting the start-up of activities.
- Temporary suspension of the operation for one month.

3. Lack of material resources:

- Lack of cameras for documentation.
- Lack of materials for awareness campaigns.

4. Difficult security context:

- Presence of armed groups in some areas (Paoua, Kouango), slowing down or suspending activities.



## National Society Strengthening

**Budget:** CHF 15,425

**Targeted Persons:** 325

**Assisted Persons:** 325

**Targeted Male:** -



Targeted Female: -

## Indicators

Title	Target	Actual
Number of insured volunteers	300	300
Report of the supervision reports received	33	33
Number of trucks rented	10	10
Number of mobilized vehicles seat and branches	5	5

## Narrative description of achievements

The Central African Red Cross was the key piece in the implementation of the DREF flood operation activities. Therefore, it was important to strengthen the volunteers and employees in VBG in order to perfectly execute the activities. Consequently, the volunteers were provided with vests for visibility.

The eleven NDRT members had coordinated the operation of assistance to the most vulnerable individuals identified and the awareness campaigns on hygiene promotion, health, VSBG, COVID-19, all under the supervision of the National DM.

- The 300 volunteers have been fully insured for the entire duration of the operation.
- The Strategic Development Plan of the CRCA has been developed and validated.
- The CRCA has greatly benefited from the collaborative approach of the IFRC to improve its response mechanisms and develop its skills within the National Society system and with Movement partners, the Authorities, and other organizations.

## Lessons Learnt

The operation increased the visibility of the CRCA among communities and provided broad exposure to Governmental and local Authorities.

## Challenges

The limited number of employees (several vacant positions) at the SN and their lack of technical skills have hindered activities or have not allowed the implementation of certain activities such as livelihoods.





# Financial Report

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## DREF Operation

### FINAL FINANCIAL REPORT

#### MDRCF029 - Central African Rep - Floods

Operating Timeframe: 20 Oct 2022 to 30 Apr 2023

Selected Parameters			
Reporting Timeframe	*	Operation	MDRCF029
Budget Timeframe	*	Budget	APPROVED

Prepared on 09/Feb/2025

All figures are in Swiss Francs (CHF)

### I. Summary

Opening Balance	0
<b>Funds &amp; Other Income</b>	<b>425,627</b>
DREF Response Pillar	425,627
<b>Expenditure</b>	<b>-420,562</b>
<b>Closing Balance</b>	<b>5,065</b>

### II. Expenditure by area of focus / strategies for implementation

Description	Budget	Expenditure	Variance
AOF1 - Disaster risk reduction			0
AOF2 - Shelter	253,951	238,039	15,912
AOF3 - Livelihoods and basic needs			0
AOF4 - Health	64,593	55,937	8,655
AOF5 - Water, sanitation and hygiene	54,350	67,599	-13,249
AOF6 - Protection, Gender & Inclusion	8,511	17,963	-9,452
AOF7 - Migration			0
<b>Area of focus Total</b>	<b>381,405</b>	<b>379,539</b>	<b>1,866</b>
SF11 - Strengthen National Societies	26,914	27,280	-366
SF12 - Effective international disaster management	6,071	12,711	-6,640
SF13 - Influence others as leading strategic partners			0
SF14 - Ensure a strong IFRC	11,238	1,033	10,205
<b>Strategy for implementation Total</b>	<b>44,223</b>	<b>41,023</b>	<b>3,199</b>
<b>Grand Total</b>	<b>425,627</b>	<b>420,562</b>	<b>5,066</b>

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## Please explain variances (if any)

- Construction Materials: Purchase of construction materials, expenses budgeted under Shelter line.
- Medical & First Aid: Wrong accounting code. It was budgeted as Distribution and Water and Sanitation expenses.
- Other Supplies & Services: Purchase of lamps that was budgeted as shelter expense.
- National Staff: not salary, but per diem paid for national staff mission.
- National Society Staff: there was need for more supervision costs by the NS.
- Workshops & Training: budget underestimated versus training costs/needs.
- Communications: budget underestimate vs communications costs during monitoring activities.



# Contact Information

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[Click here for reference](#)

