



THE DEMOCRATIC REPUBLIC OF THE CONGO



2024 IFRC network annual report, Jan-Dec

21 July 2025

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



26

National Society branches



314

National Society local units



503,311

National Society volunteers



124

National Society staff

PEOPLE REACHED

Emergency Operations



3,000,159

Climate and environment



1,896,195

Disasters and crises



1,484,209

Health and wellbeing



6,953,551

Migration and displacement



510,337

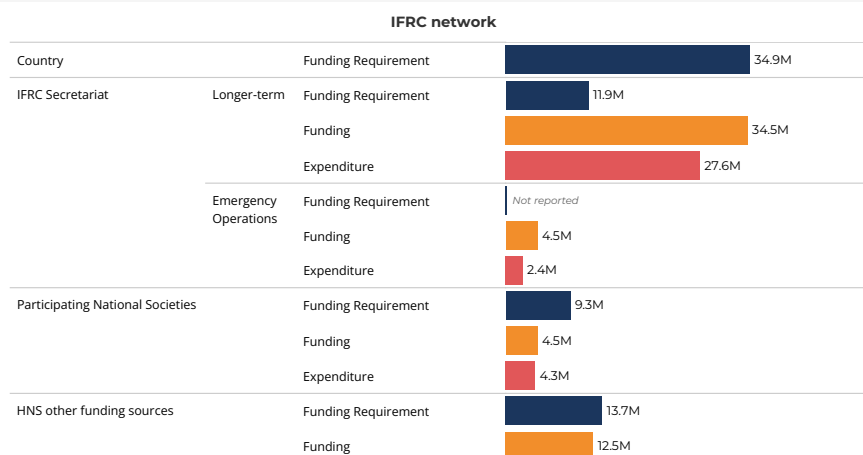
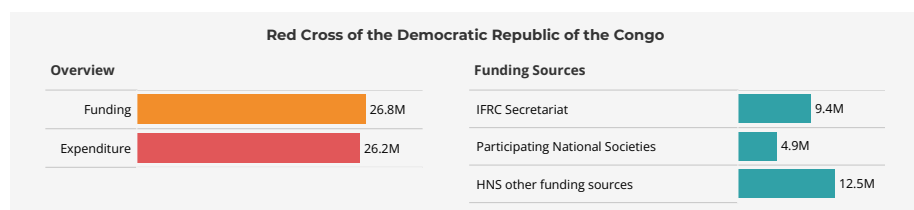
Values, power and inclusion



642,910

FINANCIAL OVERVIEW

in Swiss francs (CHF)



Appeal number **MAACD002**

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

ONGOING EMERGENCY INDICATORS

MDRCD037 / *Hunger Crisis*

EF1 - Strategic and operational coordination	Number of government-led coordination platforms the National Society is part of	2
	Number of formal interagency/international coordination platforms the National Society is part of	1
EF2 - National Society development	There is a National Society Development plan in place	Yes
	National Society has created and implemented youth engagement strategies	Yes
	National Society covers health, accident and death compensation for all of its volunteers	Yes
EF3 - Humanitarian diplomacy	National Society participates in IFRC-led campaigns	Yes
	National Society has a domestic advocacy strategy developed aligning, at least in part, with global IFRC advocacy strategies	Yes
EF4 - Accountability and agility	National Society is implementing a digital transformation roadmap in line with the IFRC strategy	Yes
	National Society has strengthened its integrity and reputational risk mechanism	Yes
	National Society has a PSEA Action Plan to enforce prevention and support survivors	Yes
	National Society has a Protection of Sexual Exploitation and Abuse (PSEA) policy to enforce prevention and support survivors	Yes
	National Society has a functioning data management system that informs decision making and supports monitoring and reporting on the impact and evidence of its actions	Yes
SP1 - Climate and environment	Number of people reached with activities to address rising climate risks	<div></div> 10,000
	National Society implements nature-based solutions (including those with a particular focus on the planting of trees and mangroves)	Yes
	National Society implements environmental or climate campaigns focused on behaviour change, plastic reduction, clean-ups or reducing GHG emissions	Yes
	National Society has received IFRC Network's support to adapt to longer-term impacts of climate change	Yes
SP2 - Disasters and crises	Number of people reached with disaster risk reduction	<div></div> 15,000
	Number of people reached with livelihoods support	<div></div> 14,000
	Number of people reached per year with support services, in-kind, cash and voucher assistance for emergency response and recovery	<div></div> 8,000

SP3 - Health and wellbeing	Number of people reached by the National Society with contextually appropriate health services	46,000
	Number of people reached by the National Society with contextually appropriate water, sanitation and hygiene services	20,000
	Number of people reached with psychosocial and mental health services	2,000
	Number of people trained by the National Society in first aid	102
SP4 - Migration and displacement	Number of migrants and displaced persons reached with services for assistance and protection	7,000
	National Society has undertaken any data collection, research, analysis or other information management initiatives to better assist and protect people on the move	Yes
SP5 - Values, power and inclusion	Number of people reached by protection, gender and inclusion programming	33,000
	Percentage of people surveyed who report receiving useful and actionable information	95%
	National Society has a Community Engagement and Accountability policy, strategy or plan	Yes

MDRCD043 / Appel d'urgence Mouvement des Populations

EF1 - Strategic and operational coordination	Number of formal interagency/international coordination platforms the National Society is part of	7
	Number of government-led coordination platforms the National Society is part of	5
EF2 - National Society development	There is a National Society Development plan in place	Yes
	National Society has developed and/or implemented a strategy for strengthening their auxiliary role	Yes
	National Society has created and implemented youth engagement strategies	Yes
EF3 - Humanitarian diplomacy	National Society participates in IFRC-led campaigns	Yes
	National Society has a domestic advocacy strategy developed aligning, at least in part, with global IFRC advocacy strategies	Yes
EF4 - Accountability and agility	National Society has strengthened its integrity and reputational risk mechanism	Yes
	National Society has a PSEA Action Plan to enforce prevention and support survivors	Yes
	National Society has a Protection of Sexual Exploitation and Abuse (PSEA) policy to enforce prevention and support survivors	Yes
	National Society has a functioning data management system that informs decision making and supports monitoring and reporting on the impact and evidence of its actions	Yes











SP1 - Climate and environment	Number of people reached with activities to address rising climate risks	23,000
	Number of people reached with heatwave risk reduction, preparedness or response activities	13,000
	Number of people reached with activities to address environmental problems	6,000
	National Society implements nature-based solutions (including those with a particular focus on the planting of trees and mangroves)	Yes
	National Society implements environmental or climate campaigns focused on behaviour change, plastic reduction, clean-ups or reducing GHG emissions	Yes
	National Society has received IFRC Network's support to adapt to longer-term impacts of climate change	Yes
SP2 - Disasters and crises	Number of people reached with disaster risk reduction	22,000
SP3 - Health and wellbeing	Number of people reached by the National Society with contextually appropriate water, sanitation and hygiene services	490,000
	Number of people reached by the National Society with contextually appropriate health services	433,000
	Number of people reached with psychosocial and mental health services	22,000
	Number of people trained by the National Society in first aid	100
SP4 - Migration and displacement	Number of migrants and displaced persons reached with services for assistance and protection	11,000
	Number of Humanitarian Service Points (HSPs) providing assistance and/or protection to people on the move along migration routes	6
	National Society has undertaken any data collection, research, analysis or other information management initiatives to better assist and protect people on the move	Yes
	National Society has undertaken any advocacy, dialogues, educational or communication initiatives to change the legal, policy, or operational environment to better assist and protect people on the move	Yes
SP5 - Values, power and inclusion	Number of people reached by protection, gender and inclusion programming	92,000
	Percentage of people surveyed who report receiving useful and actionable information	85%
	National Society has a Community Engagement and Accountability policy, strategy or plan	Yes

MDRCD045 / Mpox Epidemic

EF1 - Strategic and operational coordination	Number of government-led coordination platforms the National Society is part of	1
	Number of formal interagency/international coordination platforms the National Society is part of	1
EF2 - National Society development	There is a National Society Development plan in place	Yes
	National Society has developed and/or implemented a strategy for strengthening their auxiliary role	Yes
	National Society has created and implemented youth engagement strategies	Yes
EF3 - Humanitarian diplomacy	National Society participates in IFRC-led campaigns	Yes
	National Society has a domestic advocacy strategy developed aligning, at least in part, with global IFRC advocacy strategies	Yes
EF4 - Accountability and agility	National Society has strengthened its integrity and reputational risk mechanism	Yes
	National Society has a PSEA Action Plan to enforce prevention and support survivors	Yes
	National Society has a Protection of Sexual Exploitation and Abuse (PSEA) policy to enforce prevention and support survivors	Yes
	National Society has a functioning data management system that informs decision making and supports monitoring and reporting on the impact and evidence of its actions	Yes
SP2 - Disasters and crises	Number of people reached with livelihoods support	121
	Number of people reached per year with support services, in-kind, cash and voucher assistance for emergency response and recovery	25
	Percentage of assistance delivered using cash and vouchers	100%
SP3 - Health and wellbeing	Number of people reached by the National Society with contextually appropriate health services	2.5M
	Number of people reached by the National Society with contextually appropriate water, sanitation and hygiene services	177,000

	Number of people reached with psychosocial and mental health services	2,000
SP5 - Values, power and inclusion	Number of people reached by protection, gender and inclusion programming	3,000
	National Society has a Community Engagement and Accountability policy, strategy or plan	Yes

STRATEGIC PRIORITIES


















Climate and environment	Number of people reached with heatwave risk reduction, preparedness or response activities	 1.9M
	Number of people reached with activities to address environmental problems	 450,000
	Number of people reached with activities to address rising climate risks	 409,000
	National Society implements nature-based solutions (including those with a particular focus on the planting of trees and mangroves)	Yes
	National Society implements environmental or climate campaigns focused on behaviour change, plastic reduction, clean-ups or reducing GHG emissions	Yes
	National Society has received IFRC Network's support to adapt to longer-term impacts of climate change	Yes
Disasters and crises	Number of people reached with disaster risk reduction	 1.5M
	Number of people reached with livelihoods support	 971,000
	Number of people reached per year with support services, in-kind, cash and voucher assistance for emergency response and recovery	 403,000
	Number of people reached with shelter support	 316,000
	Percentage of assistance delivered using cash and vouchers	100%
Health and wellbeing	Number of people reached by the National Society with contextually appropriate health services	 7M
	Number of people reached by the National Society with contextually appropriate water, sanitation and hygiene services	 3.3M
	Number of people reached with immunization services	 1.2M

	Number of people donating blood	171,000
	Number of people reached with psychosocial and mental health services	125,000
	Number of people trained by the National Society in first aid	12,000
Migration and displacement	Number of migrants and displaced persons reached with services for assistance and protection	510,000
	Number of Humanitarian Service Points (HSPs) providing assistance and/or protection to people on the move along migration routes	48
	National Society has undertaken any data collection, research, analysis or other information management initiatives to better assist and protect people on the move	Yes
	National Society has undertaken any advocacy, dialogues, educational or communication initiatives to change the legal, policy, or operational environment to better assist and protect people on the move	Yes
Values, power and inclusion	Number of people whose access to education is facilitated through National Society's programming	643,000
	Number of people reached by the National Society's educational programmes	643,000
	Number of people reached by protection, gender and inclusion programming	281,000
	Percentage of people surveyed who report receiving useful and actionable information	91%
	National Society has a Community Engagement and Accountability policy, strategy or plan	Yes

ENABLING FUNCTIONS

Strategic and operational coordination	Number of formal interagency/international coordination platforms the National Society is part of	7
	Number of government-led coordination platforms the National Society is part of	5
National Society development	National Society covers health, accident and death compensation for all of its volunteers	Yes
	National Society has created and implemented youth engagement strategies	Yes
	National Society has developed and/or implemented a strategy for strengthening their auxiliary role	Yes
	There is a National Society Development plan in place	Yes
Humanitarian diplomacy	National Society has a domestic advocacy strategy developed aligning, at least in part, with global IFRC advocacy strategies	Yes
	National Society participates in IFRC-led campaigns	Yes
Accountability and agility	National Society has a functioning data management system that informs decision making and supports monitoring and reporting on the impact and evidence of its ..	Yes
	National Society has a Protection of Sexual Exploitation and Abuse (PSEA) policy to enforce prevention and support survivors	Yes
	National Society has a PSEA Action Plan to enforce prevention and support survivors	Yes
	National Society has strengthened its integrity and reputational risk mechanism	Yes
	National Society is implementing a digital transformation roadmap in line with the IFRC strategy	Yes

IFRC NETWORK SUPPORTED ACTIVITIES

National Society	Funding Reported	Climate and environment	Disasters and crises	Health and wellbeing	Migration and displacement	Values, power and inclusion	Enabling Functions
Belgian Red Cross	902,000						
French Red Cross							
Luxembourg Red Cross							
Monaco Red Cross	120,000						
Spanish Red Cross	2.2M						
Swedish Red Cross	1.2M						

Total Funding Reported **CHF 4.5M**

Q1. OVERALL PERFORMANCE

Context

The Democratic Republic of Congo (DRC) is about the size of Western Europe and is the largest country in sub-Saharan Africa. It is endowed with exceptional natural resources, including minerals like cobalt and copper, hydropower potential, significant arable land, immense biodiversity and the world's second-largest rainforest. Most people in the DRC have not benefitted from this wealth. The country is experiencing a complex, protracted crisis resulting from a combination of factors such as conflict, environmental hazards and disease outbreaks. Internal and cross-border displacement, acute food insecurity and malnutrition, epidemics and protection issues affect the population.

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

The underestimation of the crisis may have devastating consequences for the entire Great Lakes region. The OCHA DRC 2023 reports that conflict, forced displacement and disasters caused by natural hazards have left 26.4 million people food insecure, while gender-based violence affects 7.6 million Congolese women.

Displaced individuals lack access to adequate services and preventable epidemics like measles, yellow fever, cholera and malaria persist. Maternal mortality is high, with four women dying every hour during childbirth or due to pregnancy-related complications. The infant mortality rate is alarming at 70 per 1,000 live births. 7.4 million people are in need of health services and 6.8 million require humanitarian assistance for water, sanitation and hygiene.

The DRC faces one of the highest stunting rates in sub-Saharan Africa, with malnutrition causing nearly half of all deaths in children under five. Unlike other African countries, the prevalence of stunting in the DRC has not decreased in the past two decades, partly due to a high fertility rate. Almost 60 per cent of the population is below 20 years of age.

Key achievements

Climate and environment

During the reporting period, the Red Cross of the Democratic Republic of the Congo (DRC Red Cross) carried out awareness-raising activities in Nundu, Vizi, Baraka and Uvira on respect for the environment, climate risks and recovery and developed and implemented a project focused on Nature-based Solutions in districts of Kinshasa to address flood risks caused by rising river waters. The National Society appointed and trained green response focal points from multiple communes in Kinshasa and conducted an institutional assessment on green response that resulted in an action plan. It implemented some risk mitigation actions in the two target municipalities of Kinshasa. The DRC Red Cross reforested at-risk sites to prevent erosion and strong winds, planted trees in the courtyards of several schools in Kinshasa and conducted a school sanitation project as part of environmental interventions. It committed to the Pan-African Tree Planting and Care initiative and engaged communities in reforestation through its Community Resilience Programme and other climate-related activities.

Disasters and crises

In 2024, the DRC Red Cross responded to floods, armed conflict and epidemics including cholera, measles, COVID-19 and Mpox and carried out disaster risk reduction through environmental awareness-raising. It implemented the Zero Hunger initiative through food security interventions in North Kivu, Tanganyika and Kasai, supported malnourished children with agricultural and food processing assistance, distributed food and non-food items and established community-based surveillance for population movements. The National Society strengthened volunteers and

branches in Kasai, conducted needs assessments and post-distribution monitoring and implemented a project on resilient communities and disaster preparedness in Kinshasa. In South Kivu, it delivered preparedness activities in Baraka, Nundu and Fizi Centre, mobilized volunteers on environmental sustainability and [disaster risk management](#), participated in coordination platforms and provided cash assistance.

Health and wellbeing

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

Migration and displacement

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

Values, power and inclusion

In 2024, the DRC Red Cross integrated [Protection, Gender and Inclusion](#) and [Community Engagement and Accountability](#) approaches across its programmes, adapted community feedback tools and trained staff on feedback systems. It organized workshops focused on fraud and corruption, disseminated its [Youth Policy](#) and [Code of Conduct](#) and [engaged young](#) people through the National Youth Council. The National Society strengthened emergency response preparedness with a focus on dignity, access, participation and security and retrained teams in protection principles, volunteer ethics and conduct. It also engaged in advocacy for displaced persons, migrants and host communities through coordination platforms on child protection and gender-based violence. The DRC Red Cross provided [psychosocial support](#), referrals, counselling and listening sessions for survivors of sexual and gender-based violence and sensitized communities on gender and diversity vulnerabilities. It rehabilitated school infrastructure in Kisenso through a project entitled 'Water, Sanitation and Hygiene in Schools' and provided first aid training and dignity kits. It also conducted educational activities through its Higher Institutes of Health Sciences. The National Society trained emergency response preparedness focal points across Kinshasa and provided humanitarian and protection assistance in response to the M23 crisis and population movements by identifying safe gathering spaces. Additionally, it worked to reduce stigma, discrimination and xenophobia in Kwango and Kwilu.

Enabling local actors

The DRC Red Cross strengthened its technical and material capacities through the implementation of operations and programmes, recruited new staff, deployed additional personnel and prioritized the rehabilitation and equipping of its headquarters to support local committees in implementing operational action plans. It utilized the [IFRC Capacity Building Fund](#) and the [IFRC/ICRC National Society Investment Alliance](#) to improve operational and institutional effectiveness. The National Society organized the Ordinary General Assembly in Kinshasa, held elective general assemblies of branches, trained branch leaders in good governance and volunteers in [food security](#) and nutrition, created a volunteer database, launched the popularization of normative documents and developed a unified National

Society development plan while involving political, administrative and health authorities to ensure sustainability. It strengthened engagement in humanitarian diplomacy by training provincial presidents and secretaries. Its leadership met with the President of the DRC to reinforce its auxiliary role and mandate. The DRC Red Cross developed strategic plans, policies and procedures to ensure community involvement in early action and planning systems. It also maintained robust financial and logistical procedures and strengthened control mechanisms for fraud prevention and Protection Against Sexual Abuse and Exploitation, while ensuring effective human resource management and the well-being of staff and volunteers.

Q2. CHANGES AND AMENDMENTS

In this reporting period, no changes or amendments were made to the plan

Q3. MEASURING RESULTS OF THE IFRC NETWORK ACTION

ONGOING EMERGENCY RESPONSE

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

1.

Name	Revised Africa Hunger Crisis Emergency Appeal
Appeal number	MGR60001
Duration	For DRC, 29 months (9 July 2022 to 31 December 2024)
People affected	157 million people across sub-Saharan Africa (143m in the 25 countries covered in this operation/watch list)
People to be assisted	In DRC 2,500,000 people
Funding requirements	Total funding requirements: <ul style="list-style-type: none">• Through the IFRC Appeal: CHF 232.5 million• Federation-wide: CHF 318 million Funding requirement for DRC for 2024: <ul style="list-style-type: none">• Through the IFRC Appeal CHF 35 million• Federation-wide CHF 40 million
Emergency Appeal	Revised Africa Hunger Crisis Emergency Appeal
Operational Strategy	DRC Country Plan of Action (2022-09-23)

The DRC Red Cross has been responding to the food security crisis in the country through a Disaster Response Emergency Fund (DREF) allocation since July 2022. A further deterioration of the food security in a number of countries in Africa, including in the DRC prompted, the IFRC to launch a Regional Hunger Crisis Emergency Appeal in October 2022. Due to the prolonged and deepening food crisis across the region and an urgent need to sustain and increase resources, this Regional Emergency Appeal, Africa Hunger Crisis, has been extended until the end of 2024, in order to continue to provide an overarching structure for hunger crisis responses across the continent. By end 2023, it was estimated that a quarter of the population in the DRC was facing food insecurity (IPC 3 or above). Under the Revised

Emergency Appeal, the DRC Red Cross aims at supporting 2,5 million people, representing about ten per cent of all affected by food insecurity.

This Revised Regional Emergency Appeal is built on a foundation of strong, national country response plans. Through a series of coordinated activities in the sectors of WASH, cash, health and nutrition and livelihoods support, it ensures that National Societies in the region meet the urgent needs of people facing what has been classed as an IFRC red-level emergency in many countries of the region, including in the DRC. The Revised Regional Emergency Appeal is fully aligned with the [IFRC's Pan-Africa Zero Hunger Initiative](#), which informs the long-term food security and livelihood plans of National Societies in Africa.

The IFRC has mobilized a “Zero Hunger Cell” tasked with overseeing the operational coordination of the Hunger Crisis response across the African continent and the regional services provided by the IFRC and partners include:

- operations coordination and technical support
- surge deployments
- information management, foresight and analysis
- regional and global level advocacy and humanitarian diplomacy
- communications and visibility
- Federation-wide planning, monitoring, evaluation and reporting (PMER)
- tailored support to National Societies on implementation, development and accountability
- resource mobilization, including national resource mobilization plans

Short description of the emergency operational strategy

The DRC Red Cross' planned operations are aligned with the regional operational strategy's three response pillars and include:

Food Security and Livelihoods: Provide households with unconditional multi-purpose cash grants to address their basic needs and provide [food security](#) for people from the most vulnerable groups in rural and urban areas who are facing acute food insecurity. Restore and strengthen the livelihoods of communities, especially in disaster and crisis-affected areas.

Health and Nutrition: Reduce the immediate risks to the health of affected populations by providing acute malnutrition support and Nutrition. Screening, referrals, education/awareness-raising and follow-up will also be provided.

Water, Sanitation and Hygiene: Provide access to community-managed water sources and to safe water. Scale-up support to reach people with improved access to water in communities and clinics through rehabilitation, maintenance and running of community water points. Reach people with WASH communication on improved hygiene and sanitation awareness.

Protection, Gender and Inclusion: Ensure meaningful inclusion of women, youth, refugees host communities, displaced persons and other groups in hunger response and recovery initiatives in the DRC. Ensure a maximum of 50 per cent men and 50 per cent women in the teams and a minimum of 30 per cent women and 70 per cent men in decision-making. Integrate Gender Based Violence (GBV) risk mitigation activities into interventions, including referral of GBV cases and what to do if GBV services are not available in intervention areas.

Community Engagement and Accountability: Develop and deploy standardized approaches for community engagement, collection and use of qualitative community feedback data to better understand community perspectives. Ensure that people affected by crises are aware of their rights and know how it works and what it can and cannot do during an emergency response.

Risk Reduction, Climate Adaptation and Recovery: Prepare communities in high-risk areas to be able to respond to disasters. Reducing risk includes training community members in first aid, disaster preparedness and response and the establishment of multi-hazard early warning systems.

Name	DRC Population Movement
Appeal number	MDRCD043
Duration	22 months (20 February 2024 to 31 December 2025)
People affected	2.5 million people
People to be assisted	500,000 people
Funding requirements	<ul style="list-style-type: none"> • Through the IFRC Appeal CHF 30 million • Federation-wide CHF 50 million
Emergency Appeal	DR Congo Population Movement
Operational Strategy	Operational Strategy
Operational Update	Operational Update No.4

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

Since March 2022, around 1.6 million people have been displaced, with Goma and Nyiragongo territory experiencing multiple waves of displacement. Between 28 January and 12 February 2024, approximately 135,000 IDPs fled from Sake to Goma and 60,000 more sought refuge in South Kivu. The conflict has neared Goma, causing civilian casualties and straining healthcare facilities. Blocked roads have disrupted food supplies and displaced individuals lack access to basic necessities, forcing them into negative coping mechanisms. The spread of cholera further exacerbates the crisis.

Short description of the emergency operational strategy

The DRC Red Cross aims to assist up to 500,000 people, including internally displaced persons and host communities, through the establishment of [humanitarian service points](#) across North and South Kivu. The National Society is providing first aid, [mental health and psychosocial support](#), referrals for medical and nutrition services and distributing household items, hygiene kits and dignity kits. It is supporting water trucking, constructing handwashing facilities and emergency latrines and ensuring access to clean water in schools and health centres. Emergency shelters, cash assistance for rent, transport and livelihoods and food distribution are being provided alongside support for reintegration through training and income-generating activities. Protection efforts include safeguarding against sexual exploitation, establishing women- and child-friendly spaces and [Restoring Family Links](#). The DRC Red Cross is also scaling up its work on migration and displacement while ensuring community engagement through feedback mechanisms, risk communication and coordination with humanitarian partners.

For the period [20 February 2024 to 20 February 2025](#), the following assistance was provided by the DRC Red Cross:

Health and care

Health and hygiene promotion was undertaken through risk communication and community engagement activities, including door-to-door awareness sessions on Mpox prevention in displacement sites in North Kivu. Cholera surveillance teams were established in Goma to address epidemic risks. [Mental health and psychosocial support](#) services were provided to survivors of sexual violence and affected households through listening centres. Safe and dignified management of deceased individuals was ensured through medical services supported with technical and logistical resources, including body bags and protective equipment.

Water, sanitation and hygiene

Drinking water was provided to affected households. Latrines were constructed in IDP sites and improved sanitation facilities were established.

Protection, Gender and Inclusion

Communities were provided with awareness-raising sessions on prevention and response to sexual exploitation and abuse (PSEA).

Community Engagement and Accountability

Community feedback was integrated and responded to. Awareness-raising on human rights and humanitarian principles and values was carried out through community meetings.

3.

Name	Africa Regional Mpox Epidemic
Appeal number	MDRS1003
Duration	20 August 2024 to 30 June 2025
People affected	People affected/at risk: 300 million people
People to be assisted	30 million people
Funding requirements	Total IFRC funding requirement through the Appeal: CHF 30 million Total Federation-wide funding requirements: CHF 40 million
Emergency Appeal	Africa – Regional Mpox Epidemic
Operational Strategy	Operational Strategy
Operational Update	Operational Update No.3

In 2024, Mpox cases and deaths surged significantly in Africa, with over 17,000 cases and 500 deaths reported across 12 countries, marking a sharp increase from 2023. The Democratic Republic of the Congo (DRC) remains the epicentre, contributing 92 per cent of cases, with transmission spreading across all its provinces and into neighbouring Burundi, Rwanda, Uganda and Kenya. Non-endemic countries like South Africa have also reported cases, while endemic regions, including Nigeria and Côte d’Ivoire, continue to see expanding outbreaks. The emergence of Clades 1a, 1b and 2 in disparate areas highlights the heightened risk, prompting organizations such as the Africa CDC, WHO and the IFRC to declare the outbreak a public emergency. Red Cross Red Crescent Societies are working closely with governments to provide community-based surveillance, risk communication and [community engagement](#) and vaccination support to mitigate the spread and reduce mortality.

Short description of the emergency operational strategy

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

Integrated assistance

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

Health and care, including water, sanitation and hygiene (WASH)

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

Cross-cutting approaches: the operational strategy integrates **community engagement and accountability** (CEA) and **protection, gender and inclusion** (PGI) as pivotal elements, in an approach that recognizes and values all community members as equal partners, with their diverse needs shaping the response. Activities include the provision of dignity kits and establishment of two-way feedback mechanisms.

For the period 22 August 2024 to 23 February 2025, the following assistance was provided by the DRC Red Cross:

The DRC Red Cross provided extensive assistance through health, care and hygiene interventions. The National Society mobilized and trained volunteers across high-risk provinces to support vaccination campaigns, reaching thousands of people including health workers, volunteers and vulnerable groups. It engaged in risk communication, community-based surveillance and psychosocial support, identifying and referring suspected cases, providing home visits and delivering awareness sessions in schools, markets, churches and households. The DRC Red Cross supported infection prevention through the provision of handwashing kits, water supply and disinfectants at health centres, schools and households affected by mpox. Food assistance was provided to patients in treatment centres. It also conducted mass sensitizations, door-to-door visits and collaborated with community radios to disseminate prevention messages.



The DRC Red Cross conducting a radio programme at an IDP site in Minova (Photo: DRC Red Cross)

STRATEGIC PRIORITIES



Climate and environment

Progress by the National Society against objectives

During the reporting period, the Red Cross of the Democratic Republic of the Congo (DRC Red Cross) carried out awareness-raising activities in Nundu, Vizi, Baraka and Uvira on respect for the environment, climate risks and recovery. The National Society developed and implemented project focused on [Nature-based Solutions](#) in districts of Kinshasa to address flood risks caused by rising river waters. The DRC Red Cross appointed and trained [green response](#) focal points from multiple communes in Kinshasa in green response and Nature-based Solutions and carried out an institutional assessment on green response that resulted in an action plan. Although planned activities from this assessment were not carried out due to funding constraints, the DRC Red Cross implemented some risk mitigation actions in the two target municipalities of Kinshasa. Additionally, the DRC Red Cross reforested at-risk sites to prevent erosion and strong winds and planted trees in the courtyards of several schools in Kinshasa and conducted a school sanitation project as part of environmental interventions. It committed to the [Pan-African Tree Planting and Care initiative](#) and engaged communities in reforestation through its Community Resilience Programme and other climate-related activities.

IFRC network joint support

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

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

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



Disasters and crises

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

In 2024, the IFRC Disaster Response Emergency Fund ([IFRC-DREF](#)) was approved for two separate flood emergencies and also utilized for election readiness.

1.

NAME OF THE OPERATION	DR Congo Election Readiness
MDR-CODE	MDRCD041
DURATION	3 months (04 December 2023 to 31 March 2024)
FUNDING ALLOCATION	CHF 149,210
PEOPLE TARGETED	15,000 people
DREF OPERATION LINK	DRC Election Readiness

The IFRC-DREF allocation of CHF 149,210 in December 2023 supported the DRC Red Cross in assisting approximately 15,000 people at risk of election-related violent demonstrations and riots in the areas of Haut-Katanga, Kongo Central,

Kwilu and Maniema. The National Society supported the targeted people over a three-month period with assistance comprising the training of volunteers in emergency first aid, establishment of internal crisis management units and the provision of first aid kits to at-risk individuals. Assistance also inclusion of minority groups through localized messaging focusing on acceptance and peace within communities.

2.

NAME OF THE OPERATION	DRC Floods
MDR-CODE	MDRCD042
DURATION	3 months (23 January 2024 to 30 April 2024)
FUNDING ALLOCATION	CHF 396,254
PEOPLE TARGETED	12,000 people
DREF OPERATION LINK	DRC Floods

The IFRC-DREF allocation of CHF 396,254 in January 2024 supported the DRC Red Cross in assisting approximately 12,000 people affected by severe flood in Kasai Central, Nord-Ubangi, Sud-Ubangi and Tshopo. The National Society supported the targeted people over a three-month period with assistance including essential household items, drinking water, water treatment kits and sanitation kits, complemented by hygiene promotion. Affected people were also supported with the provision of mosquito nets and essential first aid.

3.

NAME OF THE OPERATION	DRC Floods in Tanganyika
MDR-CODE	MDRCD044
DURATION	4 months (16 May 2024 to 30 September 2024)
FUNDING ALLOCATION	CHF 499,831
PEOPLE TARGETED	11,400 people
DREF OPERATION LINK	DRC Floods in Tanganyika

The IFRC-DREF allocation of CHF 499,831 in May 2024 supported the DRC Red Cross in assisting approximately 11,400 people affected by flooding of Lake Tanganyika. The National Society supported the targeted people over a four-month period with assistance including the provision of shelter kits, multi-purpose cash grants, first aid and psychosocial support as well as mosquito nets. Support also comprised the distribution of sanitation and hygiene kits and water treatment systems, complemented by messages focused on hygiene.

Progress by the National Society against objectives

In 2024, the DRC Red Cross responded to floods, armed conflict and epidemics including cholera, measles, COVID-19 and Mpox. It maintained its commitment to [disaster risk reduction](#) by carrying out awareness-raising sessions on environmental risks within communities.

The DRC Red Cross implemented the Zero Hunger initiative through its country plan and carried out [food security](#) interventions in North Kivu, Tanganyika and Kasai provinces. The National Society established a community-based surveillance system for population movements in North Kivu and Tanganyika. It provided agricultural support and food processing services for malnourished children in Kasai and delivered in-kind distributions of food and non-food items to community groups across three target territories. The DRC Red Cross strengthened the capacities of its volunteers and branch committees in Kasai through these activities.

The National Society conducted needs assessments, distributed non-food item kits and carried out post-distribution monitoring for emergency operations including the Hunger Crisis emergency and flood operations in Tanganyika,

North Ubangi, South Ubangi, Tshopo and Kasai-Central. The DRC Red Cross implemented a project named 'Sustainable National Society and Resilient Community' in Kinshasa and mobilized communities to organize flood prevention activities and respond to disasters. Community Disaster Response Teams were retrained and deployed during floods in Kinshasa and affected communities were supported through early assessments, damage evaluation and the provision of psychological first aid.

In South Kivu, the DRC Red Cross implemented disaster preparedness activities in the health zones of Baraka, Nundu and Fizi Centre, mobilized volunteers trained in environmental sustainability and [disaster risk management](#) and participated in the provincial disaster risk management platform alongside actors from health, education and civil protection sectors. The National Society provided cash assistance to households in South Kivu as part of these interventions.

IFRC network joint support

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

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

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



Health and wellbeing

Progress by the National Society against objectives

From January to December 2024, the DRC Red Cross maintained its ambulance services and continued training at its health training institutions. These efforts contributed to strengthening the financial and technical resources of the National Society.

The DRC Red Cross strengthened awareness-raising activities on cholera prevention in health zones in Lubumbashi, Kasenga, Pweto and Niunzu territories. Volunteers distributed condoms to sex workers in Kenge and Kikwit to help protect displaced and host communities from sexually transmitted infections. Through the National Sustainable Society and Community Resilience project in Kinshasa, people were sensitized on waterborne diseases through door-to-door activities. The DRC Red Cross strengthened its role in national and local planning for [epidemic and pandemic preparedness](#) by participating in immunization platforms and working groups and attending health zone and provincial coordination meetings. It contributed to establishing a coordination mechanism for the Community Risk Engagement and Communication platform within the framework of Mpox and helped develop a national CREC plan for the use of vaccines integrated into the national vaccination plan.

The DRC Red Cross continued to support preparedness and response activities against COVID-19 through the integration of vaccination into routine Expanded Programme on Immunization and primary healthcare services. Volunteers were trained in Kinshasa, North Kivu and Kongo Central on relevant modules, reaching people through home visits and indirectly through radio broadcasts, mass awareness-raising, educational discussions and engagement with local authorities. The DRC Red Cross supported the vaccination of people against COVID-19, including diabetics, hypertensive individuals, people living with HIV, pregnant women and other priority groups. In addition, zero-dose children were vaccinated, alongside the recovery of under-vaccinated children through home visits.

The DRC Red Cross continued activities on commercial first aid by promoting quality services in vulnerable communities through public and private sector institutions, training people in first aid. National and provincial focal points regularly supported these services. The National Society organized a workshop on the [NYSS tool](#) and the general review of monitoring and evaluation tools related to community preparedness activities. Volunteers and staff from the Community Epidemic and Pandemic Preparedness Programme ([CP3](#)) project conducted social behaviour change and community health promotion through household visits, mobile cinema and radio programmes. These activities included home

visits, mobile cinema sessions and community radios used for community risk communication and engagement. The National Society reached schools through health and hygiene awareness activities, involving teachers.

The DRC Red Cross continued to build the capacity of staff and volunteers in mental health and psychosocial support in emergencies. People were reached through psychosocial support activities during responses to Mpox, the hunger crisis, the eastern crisis and emergencies in Kinshasa. These activities also supported volunteers and staff involved in operations.

The National Society mobilized volunteers for the distribution of drinking water in camps for displaced people in North Kivu. Water structures were built in Kwango, Tanganyika, South Kivu and North Kivu. Additional water and sanitation infrastructure were under construction in Kinshasa schools in Kisenso and Matete. Through the community resilience programme, awareness-raising sessions reached people on topics such as safe water treatment, latrine use and the prevention of sexual violence.

IFRC network joint support

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

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

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

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



Migration and displacement

Progress by the National Society against objectives

During the reporting period, the DRC Red Cross provided assistance and protection services to migrants and displaced persons. It identified health zones where migrants were expected to settle in order to establish Humanitarian Service Points for the provision of humanitarian assistance to migrants and vulnerable host communities. The National Society also carried out analysis of the targeted areas and identified areas including Kasenga, Tanganyika, Mitumba, Kabindula, Saint Paul and Kavinvira, along with displacement sites Kilomoni I and II and Kasenga CEAPAC.

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

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

IFRC network joint support

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



Values, power and inclusion

Progress by the National Society against objectives

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

The DRC Red Cross organized capacity-building workshops on fraud and corruption for Executive Committee members and management staff. The National Society disseminated its [Youth Policy](#) and [Code of Conduct](#) through coordination meetings and [engaged young people](#) through the National Youth Council. The DRC Red Cross also conducted advocacy in schools in North Kivu for the integration of school-age children.

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

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

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

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

IFRC network joint support

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

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

The **Swedish Red Cross** supported the National Society in the dissemination of Protection, Gender and Inclusion policies and in the implementation of its 'Water, Sanitation and Hygiene in Schools' project.

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

ENABLING LOCAL ACTORS



Strategic and operational coordination

Progress by the National Society against objectives

IFRC membership coordination

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

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

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

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

Movement coordination

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

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

External coordination

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

The DRC Red Cross technical teams actively participated in coordination meetings with partners such as UNICEF, GAVI, SLL CDC and MasterCard Foundation, under the leadership of Ministry of Health structures such as PEVI and DPS, to improve synergies in programme implementation. The National Society maintained regular engagement in coordination meetings with UNHCR, United Nations agencies and monthly Humanitarian Country Team meetings with heads of humanitarian organizations in the Democratic Republic of Congo.

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

Staff from the National Society regularly participated in national and provincial cluster meetings on water, sanitation and hygiene, health, food security, nutrition and shelter. Additionally, the DRC Red Cross remained actively engaged in coordination meetings with health directorates and in the Expanded Programme on Immunization at the national level, particularly contributing to responses to MPOX outbreaks and polio vaccination campaigns.



National Society development

Progress by the National Society against objectives

During the period January to December 2024, the DRC Red Cross strengthened its technical and material capacities through the implementation of all operations and programmes. The National Society recruited new staff and deployed additional personnel in operations. It prioritized strengthening weaker local committees by rehabilitating and equipping its headquarters to support sub-areas in implementing operational action plans. It also utilized the [IFRC Capacity Building Fund](#) and the [IFRC/ICRC National Society Investment Alliance](#) for the improvement of its operational and institutional effectiveness.

The DRC Red Cross organized the Ordinary General Assembly in Kinshasa, attended by leaders at national and provincial levels and partners of the Red Cross and Red Crescent Movement. Branch presidents and delegates reflected on strategies and management methods for institutional development.

The DRC Red Cross conducted key activities including the organization of elective general assemblies of the branches, training of branch leaders in good governance and training of volunteers in food security and nutrition. It created a volunteer database and officially launched the popularization of its normative documents following the validation of texts by the Ordinary General Assembly. The National Society developed a unified National Society development plan. It regularly involved political, administrative and health authorities in implementation to ensure sustainability of programme achievements.

IFRC network joint support

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



Humanitarian diplomacy

Progress by the National Society against objectives

In 2024, the DRC Red Cross strengthened its engagement in humanitarian diplomacy. It trained provincial presidents and provincial secretaries in humanitarian diplomacy. The leadership of the National Society, including the national president and members of the management committee, met with the President of the DRC to reinforce its [auxiliary role](#) and mandate.

IFRC network joint support

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



Progress by the National Society against objectives

During the period January to December 2024, the DRC Red Cross developed specific strategic plans, policies, guidelines and operational procedures to ensure that communities were actively involved in the design of early action, anticipation and planning systems.

The National Society ensured that financial management was well executed and carried out activities in compliance with financial and logistical procedures related to the actions undertaken during the reporting period. The DRC Red Cross maintained robust control mechanisms for the prevention of fraud and corruption and Protection Against Sexual Abuse and Exploitation.

The DRC Red Cross effectively managed human resources and safeguarded the well-being of its staff and volunteers.

IFRC network joint support

The IFRC provided support to the DRC Red Cross to develop strategic plans, policies, guidelines and operational procedures.

Q4. AFFECTED PERSONS (PEOPLE REACHED)

See cover pages

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

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

Q6. RISK MANAGEMENT

This information is not available in Annual Reports

Q7. EXIT STRATEGY AND SUSTAINABILITY

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

Q8. LESSONS LEARNED

The DRC Red Cross learned that strong coordination with partners, proactive planning and effective technical support ensured smooth and well-targeted activities. Increasing visibility through materials and integrating protection themes helped build trust and improve access. The National Society also found that active involvement of stakeholders and community acceptance, supported by regular dialogue and deploying familiar teams, contributed to the successful delivery of activities without incidents.

SUCCESS STORIES



1

From Hunger to Hope: A Displaced Mother's Story of Survival at Lwashi Site

On February 13, 2024, a mother of nine arrived at the Lwashi displacement site after fleeing intense bombing in Sake. "I am displaced from Sake. What pushed me to leave Sake, after having resisted, was the bombing of the authorities," she recalled. In Sake, she had supported her family through farming, livestock and small businesses. But as the violence escalated, they were forced to flee. "We had gone out to go to Mubambiro where it didn't hold either, following the situation that had become complicated."

Life at Lwashi was dire. "We were living here without any assistance. We suffered in this place," she said. Although they eventually received some water and limited medicine, they had no food. "We had already started burying the dead because of hunger," she said, describing how desperate the situation had become.

Everything changed when the DRC Red Cross visited the site. The National Society registered families and began food distributions. "We received maize flour, beans, rice, oil and salt. The food was in sufficient quantity. We were happy and we continue to be happy with it."

The food assistance came at a critical time. While expressing her profound appreciation for the DRC Red Cross she said, "I am a mother of nine children and married, but my husband is a person with reduced mobility because he has a problem with his leg," she shared. "We don't have any other sources of income here. No shops, no fields. We continue to depend on the assistance the DRC Red Cross has given us. Without it, we would have continued to bury the starving."

2

Thanks to This Assistance, Our Children Have Regained Their Health”: A Story of Recovery at Terres Noires Site

The violence between the Bakata Katanga armed group and the national army (FARDC) forced entire communities to flee their homes in search of safety. Among those uprooted was the Kasongo chief of the Terres Noires site. “I am the Kasongo chief of the Terres Noires site. We are here because of the disturbances that took place between the Bakata Katanga and the FARDC, this disturbance had caused the displacement of the population, the loss of our houses and equipment.”

Life after displacement brought immense hardship. “We suffered a lot, it was really difficult to find food, our children developed malnutrition, medical care was not easy for us.”

Hope returned when the DRC Red Cross arrived. “They came to give us assistance in food, then

they came back again for the same assistance.” The assistance brought immediate relief and lasting impact. “Thanks to this assistance, our children have regained their health and so we are very happy and we say thank you to our friends from the DRC Red Cross.”

With their children recovering, the community began to find its footing again. “This assistance allowed everyone to organize themselves by creating a few small fields.”

Looking ahead, the chief shared his hopes for support that could help the community build a more stable future. “Therefore, we suggest that you continue to assist us and provide us with the tillage tools as well as the seeds that can strengthen our crops.”

He closed with quiet dignity, reaffirming both his role and his gratitude. “I am the Kasongo chief of the black earth site.”

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

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

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

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

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



The International Federation of Red Cross and Red Crescent Societies (IFRC)

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

DATA SCOPE AND LIMITATIONS

- **Timeframe and alignment:** The reporting timeframe for this overview is covering the period from 1 January to 31 December 2024. However, due to the diversity of the IFRC and differences in fiscal years, this coverage may not fully align for some National Societies.
- **Financial overview:** This overview consolidates data reported by the National Society and its IFRC network partners, as well as data extracted from IFRC's financial systems. All reported figures should include the administrative and operational costs of the different entities. The financial data with a grey background is solely reported by the National Society, including the funding sources. Financial reporting is often times estimated depending on availability of financial figures, closing of financial periods, and may be incomplete. 'Not reported' could sometimes mean 'not applicable'. Also note that funding requirements are already reflected in the published 2024 IFRC network country plan. The total funding requirements show what the IFRC network has sought to raise for the given year through different channels: funding through the IFRC, through participating National Societies as bilateral support, and through the host National Society from non-IFRC network sources. All figures should include the administrative and operational costs of the different entities.
 - » Host National Society funding requirements not coming from IFRC network sources can comprise a variety of sources, as demonstrated when reporting on income in the IFRC Federation-wide Databank and Reporting System
 - » Participating National Society funding requirements for bilateral support are those validated by respective headquarters, and often represent mainly secured funding
 - » IFRC funding requirements comprise both what is sourced from the IFRC core budget and what is sought through emergency and thematic funding. This includes participating National Societies' multilateral support through IFRC, and all other IFRC sources of funding
- **Missing data and breakdowns:** National Societies have diverse data collection systems and processes that may not align with the standardized indicators. Data may not be available for some indicators, for some National Societies. This may lead to inconsistencies across different reporting tools as well as potential under or over-estimation of the efforts led by all.
- **Reporting bias:** The data informing this Federation-wide overview is self-reported by each National Society (or its designated support entity) which is the owner and gatekeeper, and responsible for accuracy and updating. IFRC tries to triangulate the data provided by the National Societies with previous data and other data in the public domain.
- **Definitions:**
 - » **Local units:** ALL subdivisions of a National Society that coordinate and deliver services to people. These include ALL levels (provincial, state, city, district branches, sections or chapters, headquarters, and regional and intermediate offices, as well as community-based units)
 - » **Branches:** A Branch has its roles, responsibilities and relationship with the National Headquarters defined through the National Society's Statutes, including the level of autonomy given, especially in the area of its legal status, mobilising local resources and building local partnerships, and the decisions it makes. It has a local-level decision-making mechanism through its Branch members, board and volunteers, equally defined through the National Society's Statutes

ADDITIONAL INFORMATION

- [CD_Democratic Republic of Congo AR Financials.pdf](#) (Note: This financial report link will be fed upon the completion of the audit. For emergencies for which a financial report is not yet available, see [MGR60001](#), [MDRS1003](#), [MDRCD041](#), [MDRCD042](#), [MDRCD043](#), [MDRCD044](#))
- [IFRC network country plans](#)
- [Subscribe for updates](#)
- [Live Disaster Response Emergency Fund \(DREF\) data](#)
- Operational information: [IFRC GO platform](#)
- National Society data: [IFRC Federation-wide Databank and Reporting System](#)
- [Evaluations database](#)

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