

## Responding With Emergency Assistance to Communities and Displaced Households in North Kivu (REACH)

FY17 Q1 Quarterly Report  
October – December 2016



Community Theater, part of REACH's sensitization activities on hygiene promotion - Photo Credit: Mercy Corps

## **Executive Summary**

The Responding with Emergency Assistance to Communities and Displaced Households in North Kivu (REACH) program seeks to reduce mortality and morbidity related to water-borne illnesses amongst conflict-affected populations in Eastern Congo. The program will provide comprehensive WaSH services to an estimated 100,000 people, including 95,000 Internally Displaced Persons (IDPs), to address the populations' most critical WaSH needs, including access to water, access to sanitation, and a clean and safe environment. While delivering essential services, our approach will focus on inclusive community participation and ownership, which are instrumental to the program strategy in order to achieve and sustain improvements in health outcomes.

For the period of October to December 2016, Mercy Corps improved access to water, sanitation and hygiene services in 14 camps for IDPs in the Mweso (7 camps) and Masisi (7 camps) health zones, as well as responded to emergency needs of the host community of Muhongozi, located within the Mweso health zone, North Kivu, Eastern DRC. Mercy Corps completed all activities within the Mweso health zone according to national WaSH cluster standards, and continued responding to the population's most critical WaSH needs in the Masisi health zone, including access to water, access to sanitation, and a clean and safe environment, which will be completed to WaSH cluster standards in the next quarter. As a part of completing activities in the Mweso health zone, Mercy Corps developed and put in a place a strategy for a sustainable departure from the camps to ensure populations could continue to meet their WaSH needs.

According to Camp Coordination and Camp Management (CCCM) statistics in December 2016, 46% of IDPs in the province of North Kivu came from Rutshuru territory and 40% from Masisi territory. During this reporting period, Mercy Corps continued to carry out evaluations to update key statistical information from within our intervention sites and surrounding camps to understand existing vulnerabilities and gaps in WaSH services to ensure an effective response, and contribute to the government's strategy for effective service coverage in IDP sites.

Within Masisi territory, the WaSH response by humanitarian actors covered 55% of all camps validated by CCCM, which translates to covering the needs of 69% of IDPs. Mercy Corps' intervention ensured 17% of all sites, or the needs of 29% of beneficiaries, were met within the last quarter. The lower than average assistance that took place over the last quarter was due to higher than normal insecurity throughout the province, including targeted attacks against humanitarian agents, as well as higher levels of activity by armed groups, and offences with the Forces Armées de la République démocratique du Congo (FARDC). The rise in insecurity over the quarter follows yearly patterns in the rise of armed-group activity in North Kivu (particularly around the holiday season) and was exacerbated by the tensions and uncertainty of elections on December 19, 2016.

Mercy Corps continued to regularly participate in coordination meetings of the WaSH cluster, in the CCCM working group in Goma, and the bi-weekly inter-organizational meetings in Kitchanga. These coordination mechanisms allow for improved collaboration and adapted interventions to respond to the urgent needs of IDP populations in North Kivu. Mercy Corps also continued to follow the movements of populations touched by conflict in the province of North Kivu.

### **1. Program Overview**

The REACH program's objective is to improve access to and use of emergency WASH services for conflict-affected populations in the North Kivu Province. The program targets essential emergency assistance to communities and displaced households in North Kivu through the provision of water, sanitation and hygiene (WaSH) services to roughly 100,000 people, including 95,000 individuals living in IDP camps.

REACH's program design incorporates regular monitoring and ongoing needs assessments to respond to shifting dynamics and the changing needs of vulnerable households throughout the province. These needs are often driven by forced camp closures and on-going offensives between competing armed groups, which is notable as insecurity continues to increase given the current political impasse. In this context, IDP households and host communities will continue to face recurrent, yet unpredictable shocks in many zones throughout the province. The program will therefore support these households to adapt to and absorb these shocks to the greatest extent possible.

In order to respond to the multiple spaces occupied by displaced populations, the REACH program has a two-fold intervention strategy for meeting the immediate humanitarian needs of displaced populations in North Kivu: (1) Respond to on-going emergency needs in IDP camps within Karisimbi, Birambizo and Mweso health zones and (2) Respond to the needs of newly displaced populations throughout the province. REACH's program goal will be met by focusing activities in 4 sectors: water supply infrastructure, sanitation infrastructure, hygiene promotion and environmental health.

The program promotes self-sufficiency strategies to increase the involvement of camp residents in the management of water and sanitation services and to decrease the dependence on external support for these services. These strategies seek to build the resilience of conflict-affected populations by strengthening their adaptive capacity and reducing the vulnerability of local communities to the shocks that accompany recurrent crises. Cholera is endemic and inadequate sanitation infrastructure and hygiene practices increase the risk of outbreak. In response to this chronic emergency, Mercy Corps continues to provide essential WASH services in IDPs camps in North Kivu, preventing the spread of cholera.

### Award Level Beneficiaries

Sector	Cumulative Period Targeted		Reporting Period Reached		Cumulative Period Reached	
	Total	IDPs	Total	IDPs	Total	IDPs
WASH	100,000	95,000	37,221	26,842	65,771	54,522

## 2. Contextual Update

### 2.1. Security

During the quarter, the province of North Kivu experienced a high level of offences between rebel armed groups and the FARDC, driving population movements in both precautionary and reactionary patterns. Beyond armed offences between the state and rebel armed groups, inter-ethnic tensions, kidnappings, and targeted harassment of civilian populations were also on the rise during this period.

According to the International NGO Safety Organization (INSO), from October to December 2016 in Rutshuru territory, there were bi-weekly offences between conflicting armed groups, as well as kidnappings of civilian populations. Specific offences took place within the limits of Virunga National Park, limiting access in the surrounding area. Further, inter-ethnic conflict resulted in the burning of the homes of one ethnic group, in a targeted incidence of violence.

In November, in towns bordering Uganda, notably Binza, insecurity has also been mounting as FARDC forces have been drawn into armed offences with rebels thought to have entered the country from Uganda, potentially aligned with existing armed groups in the province. The sporadic and violent nature

of these offences has severely limited humanitarian access to the zones, despite growing vulnerability among the civilian population.

Finally, the territory of Masisi was the least affected by insecurity this quarter, when compared to the high number of incidents in Beni and Rutshuru. In Masisi, between the end of October and beginning of December, offences between armed groups (FDLR/FOCA, Mai Mai Nyatura, Mai Mai UPDE, CNRD) in the zones of Kitshanga-Kibarizo and Mpati-Bibwe were recorded. Further, violence which targeted civilians and humanitarians in the zones of Sake-Kirotshe and Sake-Kitshanga-Mweso reduced humanitarian access to the zone, resulting in the suspension of humanitarian assistance by several organizations for up to two-weeks, including NRC and Caritas in Masisi, Solidarités International and Save the Children in Lubero, and ICRC in Rutshuru. The southeast of Masisi remained the most suitable for humanitarian access during the reporting period.

## **2.2. Movements of Population**

Statistics updated by Camps Coordination and Camps Management (CCCM) in December 2016 registered a total of 153,891 displaced persons in the province of North Kivu, spread across a total of 41 displacement sites. Among these sites, the REACH program intervened in 14, meeting the needs of an estimated 37,221 IDPs. In addition to beneficiaries within displacement sites, the program also intervened in the community of Muhongozi, to meet the needs of vulnerable IDPs residing with host families, totaling roughly 1,984 additional direct beneficiaries. In the last quarter, violent offences between the FARDC and different armed groups in the territories of Rutshuru and Masisi, as well as inter-communal violence were the principle factors driving displacement.

### **Masisi and Rutshuru**

Updated CCCM statistics for North Kivu as of December 2016 indicate that roughly 94% of the 153,891 IDPs in the province live in displacement sites within Rutshuru (52% or 80,200 people) and Masisi (42% or 65,481) territories. The territories of Walikale and Goma host 2% and 4% of IDPs respectively. While these figures present a higher concentration of IDPs residing in Rutshuru and Masisi as compared to last quarter, the number of IDPs in Rutshuru and Masisi actually decreased by 2% and 7%, as compared to last quarter. In fact, there was an overall reduction of roughly 1,000 IDPs recorded in the province overall. This decline could be related to the updating of site statistics around the Mweso and Masisi health zones, as well as voluntary returns.

To meet the WaSH needs of vulnerable populations in these territories, the REACH program implemented activities in 55% of the camps in Masisi, and 17% of the camps in Rutshuru utilizing strategies which encourage beneficiary empowerment and ensure the sustainability of our interventions. In addition to the above mentioned trends for Masisi and Rutshuru displacement sites, a high number of displaced families are residing with host communities in Beni and Lubero. In the next reporting period, Mercy Corps will continue to follow trends in the Grand North (Beni, Lubero) of North Kivu, to assess if a REACH intervention might be feasible in these zones in order to respond to any critical gaps related to WaSH needs.

## **2.3. Staff Movement**

Mercy Corps' staff use vehicles purchased through USAID/OFDA funding for all movements, while the transport of materials to the field is carried out using a rental truck. No vehicles were purchased under the current award. All movements are carried out under the supervision of Mercy Corp's in-country security focal point, who coordinates with security contacts throughout the province.

### **3. Performance Summary**

#### **Sector 1: Water, Sanitation and Hygiene (WaSH)**

##### **a) Achievements during reporting period**

During the quarter, Mercy Corps' WaSH intervention in the Masisi health zone continued, including work in seven displacement sites (Burora, Bonde, Bukombo, Bushani, Kalinga, Lushebere and Nyabiondo). Work completed in these IDP camps, was found to have a positive impact on community relations, as the REACH program was able to concurrently improve access to potable drinking water for the host community. Mercy Corps also improved the water supply network and sanitation infrastructure in the host community of Munongozi where a high number of IDPs are residing, including in schools attended by IDPs.

In addition to providing comprehensive camp-based WaSH services during the quarter, Mercy Corps carried out an evaluation to determine the gaps in available WaSH services in the Katele camp, located in Masisi territory. This evaluation, which was validated by the WaSH cluster in North Kivu, found that the number of latrines did not meet National WaSH cluster standards; and that there was a spike in both the population size of the camp and the incidence of diarrhea. As a result, the North Kivu WaSH cluster has validated an intervention for this site, which Mercy Corps began in January 2017 (results for this intervention will be reported on in the next quarterly report).

In the camps of Ibuga and Kashuga, due to the security risks highlighted above, Mercy Corps was required to adapt its program strategy to ensure that program materials already delivered to the camps could be recovered and that partially-constructed latrines could be completed. The camp committees, normally involved in the mobilization of daily Cash for Work laborers, were enlisted to supervise the work of the laborers. Additionally, the National Refugee Committee, an outside body that typically makes visits to the camps to monitor responses to IDP movements and with which Mercy Corps had previously signed a Memorandum of Understanding (MoU), made a few visits to the camps to monitor the work. Upon completion of the latrines, Mercy Corps hired an individual through a service contract to take GPS points and photos of completed latrines to verify their construction. The strategy was used to enable Mercy Corps to complete all the works that had been started by our program teams; however under this strategy we did not start any additional works. These activities fell below (25%) the national WaSH standard - ie a lower number of latrines constructed than necessary. Mercy Corps plans to monitor the security situation in these camps, and if access to the camps improves, Mercy Corps can bring the work up to the standards.

This reporting period was marked by the rainy season in North Kivu, which presented several challenges, including limited physical access to target communities despite program teams being equipped with 4x4 vehicles. On numerous occasions, main roads to target field sites were blocked either due to muddy road conditions, or vehicle breakdowns of private transporters that left road passages blocked for days at a time.

Additionally, heavy rains caused several latrine and waste pits to collapse, adding extra work to the intervention, and also causing delays to field activities because of the challenges of transporting construction materials to field sites. Despite these difficulties, Mercy Corps was able to complete its WaSH response, including its strategy of improving beneficiary self-sufficiency, in the Mweso health zone camps of Mungote, Kahe, Kizimba, Mweso, Kashuga and Ibuga, as well as the community of Muhongozi.

For a more nuanced understanding of how the REACH program impacted the lives of its beneficiaries in the last quarter, please see Annex A for a programmatic success story. Specific achievements during the reporting period include:

### ***Water Supply Infrastructure***

Based on monthly in-camp assessments conducted by the program team, the Commission National des Réfugiés (CNR), CCCM and other implementing partners, water supply infrastructure in camps is regularly assessed throughout the province. Assessment information collected prior to Mercy Corp's intervention demonstrated that the infrastructure did not adhere to WaSH cluster standards, validating the need for Mercy Corps to intervene.

In response, with the goal of improving the quality and availability of water for IDPs and host communities, Mercy Corps carried out the following activities in Masisi and Rutshuru territories over the last quarter (see Annex 3 for further detail):

- Constructed 10 water sources to benefit IDPs camps and surrounding host communities in Masisi territory;
- Conducted regular water bacterial analysis in all targeted camps. This analysis demonstrated differing levels of water pollution and contamination between household, and community water access points, which demonstrates that water storage containers utilized by IDPs living within the camps are unclean, or water could become un-potable during transportation. In response to these findings, Mercy Corps implemented sensitization campaigns in IDP camps to encourage residents to use the appropriate storage and transport mechanisms.
- Carried out minor maintenance (replacing taps, valves, piping, etc.) for 10 water systems that provide water to the camps of Kalinga and Muhongozi communities, benefitting the entire population of each camp;
- Carried our water chlorination activities in response to an elevated rate of diarrhea found in Mongote, Mweso and Kahe camps, which are all served by the same water network;
- Collected data on water point utilization in order to track the number of direct beneficiaries. Based on this data, including calculations of liters per person per day, Mercy Corps was able to determine whether existing water points were sufficient for the populations' needs. Mercy Corps found that the water supply infrastructure in certain camps, notably Kalinga and Lushebere as well as in the Mutiri community was not sufficient to meet WaSH cluster standards. As a result Mercy Corps is currently constructing nine additional water points for these camps, to be completed in the next reporting period. .
- Rehabilitated 10 public laundry facilities; (1) in the Muhongozi community, (3) in Kizimba, (1) in Kahe, (4) in Kalinga and (1) in Nyabiondo camps to benefit both IDPs and host communities.

To ensure the sustainability of the program's successes, including the continued maintenance of water sources, Mercy Corps equipped local committees in IDP camps and host communities with the necessary skills to make small-scale repairs to the water network. This capacity building ensures communities are more self-reliant in the management of local water networks. These activities took place in all of the targeted camps, through hands-on training.

### ***Sanitation Infrastructure***

Over the last quarter, Mercy Corps constructed and rehabilitated sanitation facilities in seven camps in the Mweso health zone (Mungote, Kahe, Kizimba, Mweso, Kashuga, Ibuga, and the community of Muhongozi), and seven camps in the Masisi health zone (Burora, Bonde, Bukombo, Bushani, Kalinga, Lushebere and Nyabiondo. Mercy Corps also supported IDP communities in the establishment of community based-sanitation frameworks. Specific results included (see Annex 3 for further detail.):

- 639 latrine doors constructed (104 of those in the community of Muhongozi for private use);
- 100 latrine doors re-purposed;
- 674 latrine doors sealed;
- 113 latrine doors repaired;
- 272 shower doors constructed (16 of those in the community of Muhongozi for private use);
- 130 shower doors repaired;
- 12 doors constructed for feminine hygiene laundry areas (4 of those in the community of Muhongozi for private use);
- 217 waste pits emptied;
- 3 waste pits dug;
- 272 hand washing stations constructed and repaired (108 of those in the community of Muhongozi for private use)

### ***Hygiene Promotion***

During the quarter, in a continued effort to reduce the impact and spread of water borne diseases, Mercy Corps carried out the following activities collaboratively with camp-based hygiene committees and community mobilizers. Sensitization activities were carried out via focus group discussions and household visits, and focused on the five key hand washing moments (see Annex 3 for further detail):

- Sensitization of 857 individual Relais Communautaire (RECOs) and WaSH committee members
- Sensitization of IDPs and host communities through 87 discussion groups;
- Sensitization of IDPs and host communities through 22 theater performances;
- Sensitization on the contamination chain of water borne diseases; self-sufficiency in positive hygiene management; and maintenance of sanitation infrastructure in the camps;
- Coaching and support to IDP populations on the evacuation of waste pits; the reuse of latrine materials and the sealing of full waste pits; hand washing with soap or ash in camps; and management of water resources and the maintenance of water systems.

### ***Environmental Health***

To complement the above mentioned activities and ensure a safe and healthy living environment, Mercy Corps also carried out awareness raising campaigns on best practices of environmental management in the camps. The following results were achieved:

- Successfully mobilized the camps' residents (to empty 96 solid waste pits);
- Created 3 new solid waste pits;
- All new sanitation infrastructure (latrines) was constructed in secure areas (ie a safe distance away from under-ground water tables) to avoid contamination;
- Implemented a sanitation schedule to ensure in-camp latrines are cleaned twice daily by volunteers, supervised by Mercy Corps' community mobilizers, as well as the camp management committees.

## **b) Challenges and Lessons Learned**

### **Security and Access**

As discussed above, the security situation in North Kivu, especially in the territories of Rutshuru, Beni and Masisi, presented several challenges for program implementation. The following key events took place during the quarter, driving insecurity:

- Road-side ambushes and the abduction of humanitarian staff (CONCERN, Solidarites, NRC) and civilians by militias in early November 2016 in Rutshuru territory;
- Armed robberies and ambushes within the Sake-Kitshanga-Mweso area in Masisi territory in both November and December 2016;
- Armed offences between rebel groups and the FARDC, as well as weekly armed conflict caused by inter-ethnic tensions in the territories of Rutshuru, Beni and Masisi.

Mercy Corps continues to operate in many areas through key focal points that disseminate key security information, assessments and warnings, including Mercy Corps' own in-country security liaison. During the quarter, because of a high level of insecurity in the zones of REACH's operation, as well as the pending uncertainty around the presidential election, Mercy Corps limited field operations during the period of mid-December to early January.

Limited access to camps and host communities as a result of this insecurity, as well as the heavy rainfall, caused a delay in the implementation of program activities. These delays will be made up for in the following quarter.

Mercy Corps has significant experience operating in insecure environments with challenging political contexts. Based on this experience, as well as recent the lessons learned from the REACH program, the REACH team continues to amend its programmatic approaches and activities to ensure impactful programming. Lessons learned from the REACH program include:

- The importance of strengthening the technical and organizational capacity of IDPs to implement activities in the camps. The same applies to activities in the community, for example, building the capacity of health and WaSH sector focal points to ensure the quality and sustainability of the WaSH infrastructure;
- In intervention areas that are hard-to-reach, limit the volume of materials stored on site to mitigate possible looting of materials. No materials were looted during the current reporting period;
- For zones that are inaccessible to Mercy Corps team members, develop a database of consultants or SMEs (Small and Medium Enterprises) for the implementation of WaSH activities according to humanitarian and WaSH cluster standards. (No activities have been subcontracted to date, and Mercy Corps will discuss with the donor prior to any potential future sub-grants or sub-contracts.);
- Ensure procurement and payment procedures are responsive to the needs and urgent nature of emergency projects in North Kivu. In order to ensure emergency responses can continue to be timely and effective, payment and procurement processes must ensure appropriate delays in the treatment of documents (whether for services, or the delivery of materials etc). Mercy Corps is constantly working to adapt and modify our internal procedures to ensure emergency responses are fast, efficient, and also transparent;
- Ensure Cash for Work opportunities for host communities are on-par with those used within camps to mitigate potential animosity between the two groups.

#### **4. Monitoring and Evaluation**

Monitoring and evaluation data is collected in IDP camps once every month by WaSH committees who have been trained by the REACH team. These committees were trained and equipped with the

necessary tools to assess the state of infrastructure in camps, to identify infrastructure which needs repairs, and to inform Mercy Corps of other gaps and needs as they arise.

Mercy Corps also carries out its own regular monitoring and evaluation of all WaSH activities in North Kivu. Data collected from assessments are compiled regularly into a data base, and shared with other humanitarian actors through cluster meetings, as well as OCHA coordination meetings. Mercy Corps contributes to the monitoring of WaSH infrastructure needs throughout North Kivu by supporting the collection and analysis of statistics in coordination with the government, including through the CCCM and UNHCR.

By analyzing the data gathered from the regular monitoring and evaluation exercises, Mercy Corps is able to identify trends of changing hygiene situations in the camps, allowing the REACH program to adapt activities and approaches according to beneficiaries' current needs. During the reporting period, Mercy Corps began to utilize site-specific statistics (including GIS points) to develop a comprehensive map, detailing the state of infrastructure in each camp. This provided a comprehensive overview of the activities of the REACH program, and gaps that need to be filled. This map will be shared with both USAID and the North Kivu wash cluster to improve coordination for interventions needed in each camp (available in Annex B).

## **5. Coordination**

Mercy Corps participates regularly in coordination meetings to ensure the coherence of WaSH response strategies, including that organizations intervening throughout North Kivu adhere to the national WaSH cluster standards. In these meetings, partners exchange information about the advancement of activities, best practices, challenges, as well as information related to cholera responses.

Several key meetings include:

- Meetings with the CCCM, the CNR, the WaSH cluster, UNHCR, as well other partners implementing camp close out and camp integration in North Kivu;
- Meetings with the CCCM, the CNR, OCHA and other intervention actors on the strategic direction of WaSH activities in the province, as well as discussions on how to improve the capacities of each actor in the province;
- Meetings between various organizations responsible for camp management and coordination and the Goma-based working group organized by UNHCR, to discuss estimates of available space in camps, as well as other problems faced in IDP camps;
- Meetings with the working group on coordination and management of IDP sites, organized by IOM, in which organizations diffuse available information on the movements of populations in the province;
- Coordination meetings organized by OCHA in Kitchanga, during which partners exchange information on security situations in the intervention areas. The partners share both progress related to security, as well as gaps to which authorities may respond;
- Weekly emergency meetings with steering committee/Rapid response Mechanism for movement of population (RRMP) organized by OCHA and UNICEF in an effort to define the priority needs in zones with the greatest number of displaced persons, and to direct partner organizations to that response, based on their capacity.
- Every two weeks, participate in meetings organized by the CNR (which serves as the head of the camps in the Mweso Health Zone) to obtain information about the advancement of activities in the camps, as well as challenges – like those relating to space – within IDP camps.

- Quarterly program meetings with the WaSH program teams to review project advancements, challenges to implementation, and to work together towards identifying solutions.

## **6. Conclusion**

During the quarter, Mercy Corps carried-out interventions to provide comprehensive water, sanitation and hygiene (WaSH) services to reduce mortality and morbidity related to water-borne illnesses for populations in 14 displaced persons camps, as well as surrounding communities in the territories of Masisi and Rutshuru, in the province of North Kivu, Eastern DRC. Program achievements in the last quarter have allowed the REACH program to reach 66% of the total targeted program beneficiaries from May to December 2016. Of the 66%, 55% lived in IDP camps and 11% were IDPs living in host communities.

The security situation during this period was characterized by inter-communal conflict, kidnappings, and offences between armed groups and the FARDC in Rutshuru, Beni, Masisi and Lubero. Additionally, heavy rainfall reduced access to intervention sites, causing delays to the program schedule. With regard to the fragile political situation in the country, while Mercy Corps prepared for the worst-case scenario, the REACH program did not need to adjust the program strategy to respond to higher than normal vulnerabilities, or all-out crisis.

Finally, all sanitation infrastructure activities, as well as the improvements to the water supply systems, will be finalized during the next quarter. These targeted activities are taking place in eight camps in the territory of Masisi to meet the needs of both displaced populations and host communities. As usual, Mercy Corps is ensuring an accent is put on the exit-strategy for the departure from these camps, largely through trainings and community empowerment.

Mercy Corps is continuing to follow the security situation throughout the province and plans to carry out further multi-sectorial assessments (MSA) to respond to gaps in services in order to meet the needs of displaced populations in Rutshuru, Masisi, East Beni and South Lubero.