

A photograph of a woman with short dark hair, smiling and looking to the right. She is carrying a young child on her back. The woman is wearing a red and white patterned short-sleeved shirt and a long, flowing skirt with a vibrant orange, black, and white geometric pattern. The child is wrapped in a grey cloth and is looking towards the camera. They are standing in a field of low-lying green plants under a bright, slightly cloudy sky. The entire image is framed by a thin white border.

DRC HUMANITARIAN FUND

2019

ANNUAL REPORT



DRC HF

Democratic Republic
of the Congo
Humanitarian Fund

THE DRC HF THANKS ITS DONORS FOR THEIR GENEROUS SUPPORT IN 2019



CREDITS

This document was produced by the United Nations Office for the Coordination of Humanitarian Affairs (OCHA) in DRC. OCHA DRC wishes to acknowledge the contributions of its committed staff at headquarters and in the field in preparing this document.

The latest version of this document is available on the DRC HF website at www.unocha.org/democratic-republic-congo-drc/about-drc-hf.

Full project details, financial updates, real-time allocation data and indicator achievements against targets are available at gms.unocha.org/bi.

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Front Cover

Pweto, Tanganyika. © OCHA/Alioune Ndiaye

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FOREWORD

I am pleased to share with you the 2019 DRC Humanitarian Fund (DRC HF) Annual Report, which provides an overview of the Funds' achievements in 2019 and demonstrates how it ensured continuous support to the most vulnerable populations in the Democratic Republic of the Congo (DRC).

Last year, while the elections marked the first peaceful transfer of power in the country, a significant decrease in violence observed in the Kasais and Tanganyika resulted in increased returns. Nevertheless, armed conflicts have intensified in other regions, namely in Ituri and the Kivus.

In this context, the DRC HF once again proved to be a critical strategic tool to address the urgent humanitarian needs of the most vulnerable and affected Congolese. Through six allocations amounting to US\$ 76.9 million, the Fund enabled 63 trusted and best-positioned humanitarian partners to provide assistance to at least 2.4 million people, through the implementation of 102 projects.

In terms of results reported in 2019, the implementing partners reached 1.6 million vulnerable people, including 81 per cent of women and children. Ensuring flexible and timely funding for response efforts in priority locations, the Fund also played a role in strengthening humanitarian coordination and leadership.

I would like to acknowledge the commitment and measured effort of the DRC HF implementing partners (national and international NGOs, Red Cross organization and UN agencies) as well as the cluster coordinators and Advisory Board members, who contributed to ensure that the Fund is an effective and efficient means of response. Despite the extremely challenging and complex operating environment, the humanitarian partners worked tirelessly across the country to reach people in need. Funding enables them to save lives through timely and integrated multi-sector assistance, alleviating acute needs, reinforcing protection, promoting access to basic services for the most vulnerable people, and supporting the capacities of at-risk communities to cope with significant threats to lives, livelihoods and well-being.

The DRC HF continues to demonstrate its commitment to the targets of the Grand Bargain agreed at the World Humanitarian Summit to support national and local actors. In 2019, 25 per cent of all funds went directly to national partners (including the national Red Cross).

None of this work would be possible without the generous support of donors. Their engagement and long-standing trust in the DRC Humanitarian financing mechanism empowers us to fulfill our strategic objectives. At the end of 2019, contributions reached \$73.8 million. Our collective thanks go to the governments of Belgium, Canada, Germany, Ireland, Luxembourg, Netherlands, Norway, Sweden, and the United Kingdom.

The year 2020 is already facing many challenges, as 15.6 million people require humanitarian assistance, which is 2.8 million more than in 2019. Funding to the Humanitarian Response Plan (HRP) is vital to provide protection and humanitarian assistance in a coordinated and effective manner. More than eight million vulnerable people are targeted throughout the country, thus requiring \$1.82 billion funding. Based on the average amount received in the past years, the total contributions of the Fund should not be less than \$84 million, while the aspiration in line with the Grand Bargain will set the target up to \$125 million in order to reach the 15 per cent of funding in 2020.

Your support is therefore crucial to ensure a rapid and effective response. The Fund remains an invaluable tool in this endeavour, reinforcing a collective prioritization and strategic vision with funding at vital moments.



DAVID MCLACHLAN-KARR
Humanitarian Coordinator for DRC

“

The DRC HF remains an invaluable tool, reinforcing a collective prioritization and strategic vision to address the urgent humanitarian needs of the most vulnerable congolese.

DAVID MCLACHLAN-KARR
HUMANITARIAN COORDINATOR FOR DRC

”



DRC HF 2019 ANNUAL REPORT

2019 IN REVIEW

This Annual Report presents information on the achievements of the DRC Humanitarian Fund during the 2019 calendar year. However, because grant allocation, project implementation and reporting processes often take place over multiple years (CBPFs are designed to support ongoing and evolving humanitarian responses), the achievement of CBPFs are reported in two distinct ways:

- **Information on allocations granted in 2019 (shown in blue).** This method considers intended impact of the allocations rather than achieved results as project implementation and reporting often continues into the subsequent year and results information is not immediately available at the time of publication of annual reports.
- **Results reported in 2019 attributed to allocations granted in 2019 and prior years (shown in orange).** This method provides a more complete picture of achievements during a given calendar year but includes results from allocations that were granted in previous years. This data is extracted from final narrative reports approved between 1 February 2019 - 31 January 2020.

Figures for people targeted and reached may include double counting as individuals often receive aid from multiple cluster/sectors.

Contribution recorded based on the exchange rate when the cash was received which may differ from the Certified Statement of Accounts that records contributions based on the exchange rate at the time of the pledge.

2019 IN REVIEW

HUMANITARIAN
CONTEXT**Humanitarian situation in 2019**

While 2019 began with a peaceful electoral process and political transition, the humanitarian crisis in DRC has remained acute, complex and marked by major impacts, such as: population movements, acute food insecurity and malnutrition, epidemics, violations of human rights and international humanitarian law exposing populations to increasing risks of protection.

For the year 2019, 12.8 million people needed humanitarian assistance in DRC, including 43 per cent of children.

Population movements

Armed conflicts continued to generate significant population movements, mainly in the east of the country. In late March, new waves of violence in Kamango, North Kivu, due to clashes between national armed forces and armed groups led to the displacement of more than 100,000 people. In 2019, there were over 5 million displaced people and 2.1 million returnees. DRC has also been hosting 538,000 refugees from neighbouring countries.

Acute food insecurity and malnutrition

Conflicts and population movements have caused greater vital needs among the populations, with a direct impact on their food security. In 2018, the DRC had the second highest number of acutely food-insecure people in the world. At the end of 2019, the situation remained extremely critical, with 15.6 million people in a situation of food insecurity for the period July-December 2019, representing 26 per cent of the rural population compared to 23 per cent in 2018.

Low food availability combined with recurrent epidemics had a considerable impact on the nutritional situation in DRC. More than 4.3 million children suffer from acute malnutrition, including 1.3 million from severe form.

Epidemics

Three major epidemics particularly hit DRC in 2019: measles, Ebola Virus Disease (EVD) and cholera. These epidemics have led to increased morbidity and mortality among vulnerable populations living in landlocked areas with poor access to healthcare and populations affected by population movements.

In June 2019, before the alarming situation, the Ministry of Health declared the measles epidemic. Two months after, the World Health Organization (WHO) activated grade 2 of public health emergency. Nearly 320,000 cases were

recorded during the year, including more than 6,000 deaths, mostly children, in the 26 provinces of the country.

The EVD has impacted areas already affected by other emergencies, mainly 29 Health zones in the provinces of North Kivu, South Kivu and Ituri. It is the second most serious epidemic ever recorded in DRC. It has affected more than 3,400 people since August 2018 and caused 2,240 deaths.

Meanwhile, the average number of cholera cases reported per week over the last three years has remained well above the epidemic threshold in 2019. In October, cholera had affected 21 provinces of DRC, causing 421 deaths, out of 23,138 suspected cases since the beginning of the year.

Protection

Tensions have also increased the need in protection for vulnerable people. Especially in the east of the country and in the Kasai region, where 54,000 cases were identified, with increasing protection incidents between January (538 cases) and December 2019 (7,206 cases). Most victims were displaced people and returnees.

Security and access constraints

Security instability has affected the movement of humanitarian staff in the provinces of North Kivu, Ituri, South Kivu and Tanganyika. Physical access constraints due to the precarious state of road infrastructure have required the continuous support of the Logistics Cluster to transport humanitarian aid workers and assistance in landlocked areas. During the year, 1,525 metric tons of humanitarian inputs and 115,000 aid workers were transported. Access to people in need is still a major logistical challenge in the country.

2019 Humanitarian Response Plan

The humanitarian response strategy in DRC for 2017-2019 is multisectoral and triannual, and targets 9 million people.



12.8M People in need

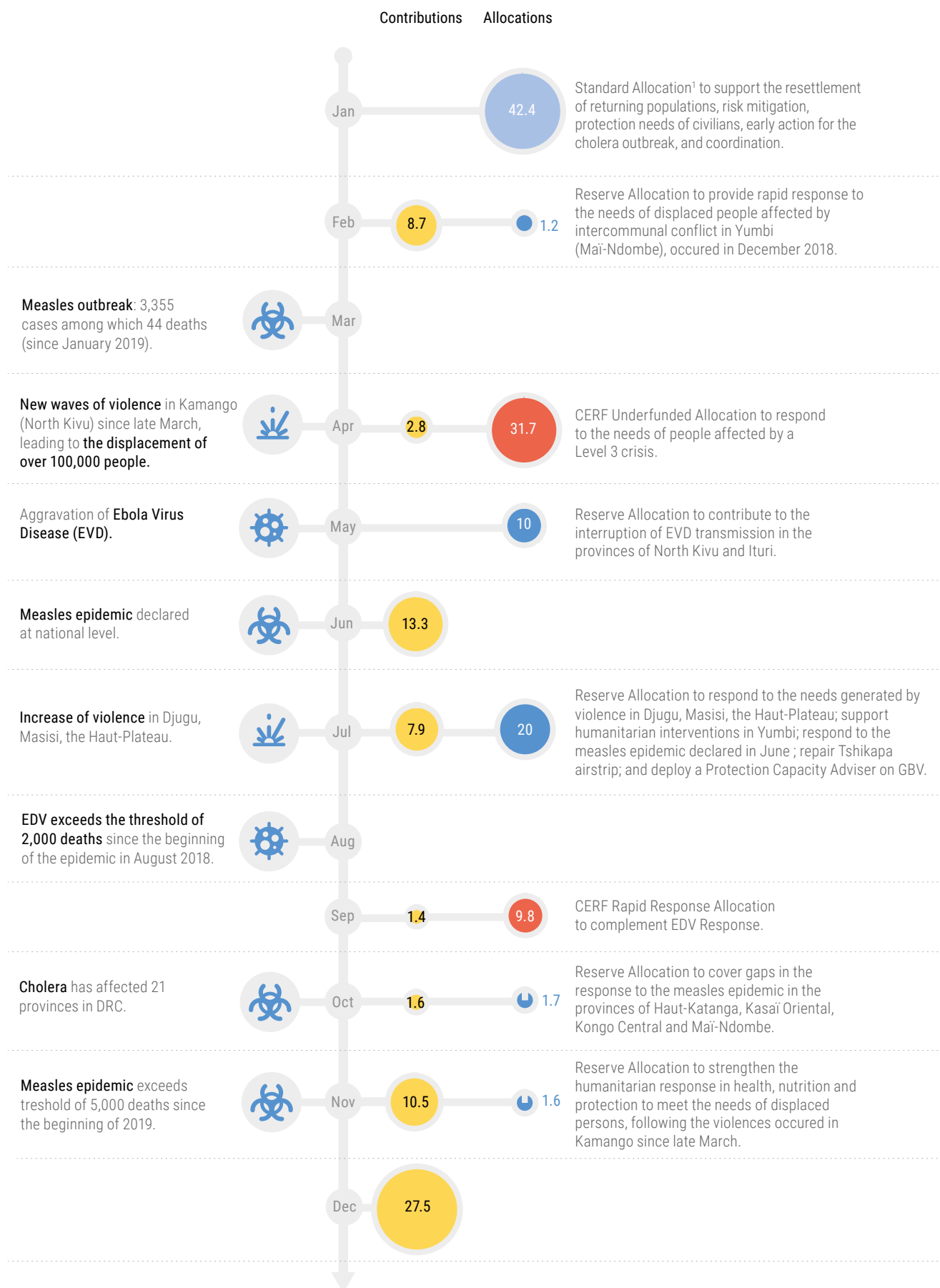


9M People targeted



\$1.65bn Funding requirement

2019 TIMELINE



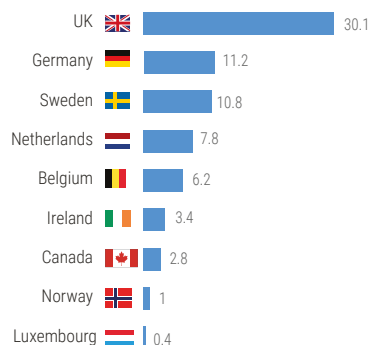
¹ Note that the Standard Allocation was re-opened on GMS in May 2019 to integrate the coordination envelope (that includes eight projects). The coordination strategy required a revision to integrate additional elements recommended by the cluster coordinators.

DRC HUMANITARIAN FUND AT A GLANCE

2019 ALLOCATION



\$73.8M
CONTRIBUTIONS

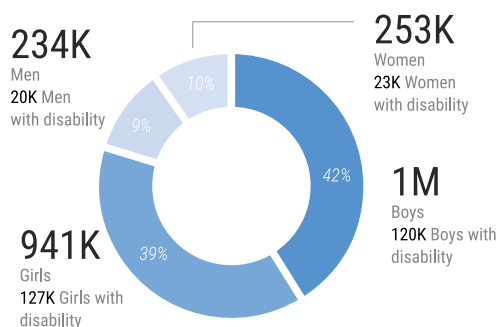


2.4M
PEOPLE
TARGETED

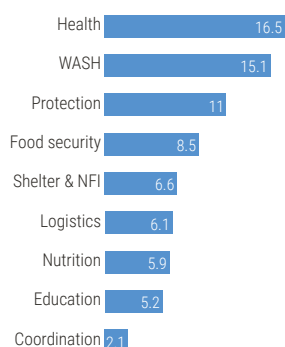


290K
PEOPLE TARGETED
WITH DISABILITY

For people reached visit: http://bit.ly/CBPF_overview

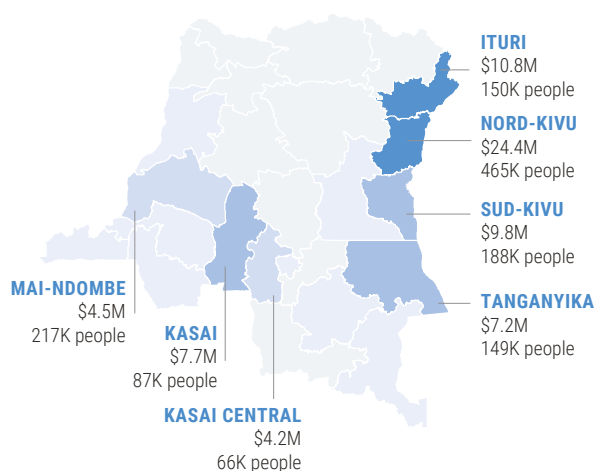


ALLOCATIONS BY CLUSTER 10% OF HRP REQUIREMENTS



\$76.9M
ALLOCATIONS

2.4M
PEOPLE TARGETED

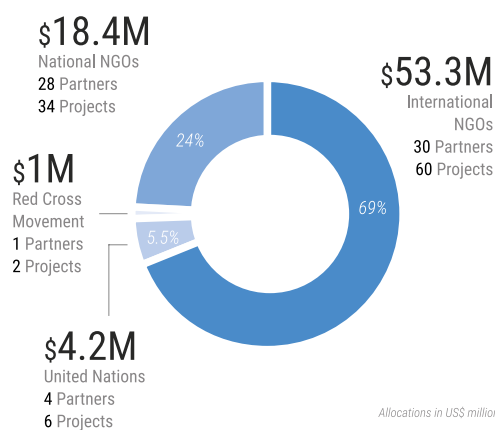


Other regions: Haut Katanga \$2.1M, 170K; Kinshasa \$2M, 99K; Maniema \$1.3M, 51K; Kasai Oriental \$1M, 378K; Haut-Lomami \$745K, 10K; Kongo Central \$350K, 194K; Kwilu \$327K, 121K; Equateur \$162K, 54K; Kwango \$97K, 36K.



63
PARTNERS

102
PROJECTS



RESULTS REPORTED IN 2019¹

\$40.3M
ALLOCATIONS

2016

\$4.3M
ALLOCATIONS

6
PROJECTS

6
PARTNERS

2017

\$5.4M
ALLOCATIONS

4
PROJECTS

4
PARTNERS

2018

\$29.6M
ALLOCATIONS

57
PROJECTS

37
PARTNERS

2019

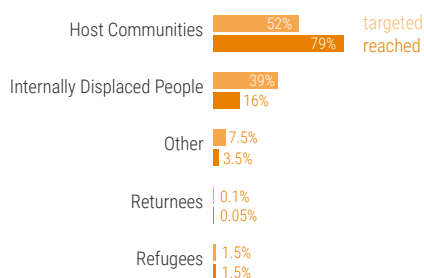
\$1M
ALLOCATIONS

1
PROJECTS

1
PARTNERS

In US\$ million

PEOPLE TARGETED AND REACHED BY TYPE*



*Percentage refers to the total number of people targeted and reached, by type.

PEOPLE TARGETED AND REACHED BY CLUSTER

| | Targeted | Reached | Percentage |
|---------------------------|----------|---------|------------|
| Health | 195K | 414K | 212% |
| Protection | 128K | 128K | 100% |
| Water Sanitation Hygiene | 94K | 517K | 550% |
| Food Security | 57K | 77K | 135% |
| Emergency Shelter and NFI | 51K | 54K | 105% |
| Nutrition | 41K | 39K | 95% |
| Logistics | 13K | 14K | 107% |
| Education | 13K | 19K | 146% |

In thousands of persons



0.8M
PEOPLE TARGETED

1.6M
PEOPLE REACHED

WOMEN 210K TARGETED

460K REACHED



MEN 144K TARGETED

366K REACHED



GIRLS 255K TARGETED

463K REACHED



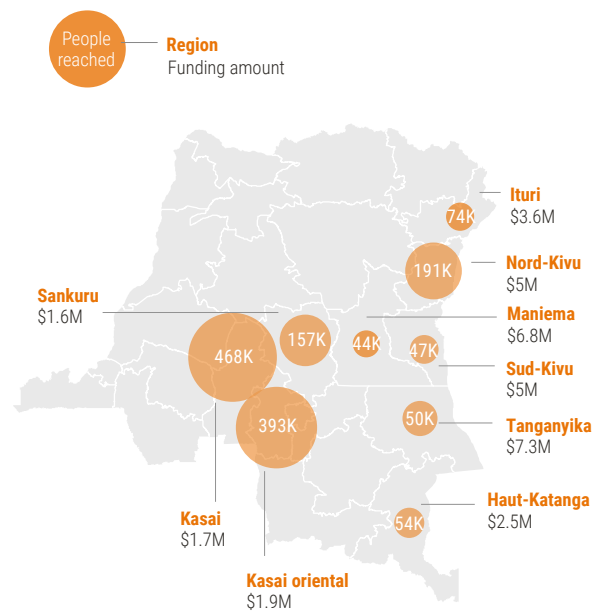
BOYS 221K TARGETED

414K REACHED



In thousands of persons

PEOPLE REACHED AND FUNDING BY PROVINCES



Other provinces: Lomami \$1.3M, 118K; Lualaba \$1.3M, 20K; Kasai central \$1.2M, 8K; Mai-Ndombe \$1M, 11K.

¹ Results are based on data reported by partners in 2019 and may be underreported as implementation of projects and project-level often continue into the subsequent year. A total of 68 final narrative reports were considered, most of them for projects implemented in 2018.

Note that in the figures, there could be instances of double counting as individuals often receive assistance from multiple clusters. This is namely the case with the mass awareness raising activities occurring during vaccination campaigns, prenatal consultation or access to health care, among others.

In 2020, the HFU will work together with its partners to ensure less double counting in the final narrative reports and guarantee more accurate results.

2019 IN REVIEW

ABOUT THE DRC HUMANITARIAN FUND

DRC HF basics

The DRC Humanitarian Fund (DRC HF) is a multi-donor humanitarian funding mechanism established by the Emergency Relief Coordinator (ERC) and managed by the United Nations Office for the Coordination of Humanitarian Affairs (OCHA) under the leadership of the Humanitarian Coordinator (HC).

Officially launched in 2006, the DRC HF is one of the oldest of the 18 existing Country-Based Pooled Funds (CBPF) in the world. It was born out of the Humanitarian Reform Initiative which called for improved accountability and predictability in financing for humanitarian emergencies. With over 14 years of operations, the Fund has been used to support the timely allocation of donor contributions to the most urgent humanitarian needs and critical gaps in the country.

As the custodian of the Fund, the HC for DRC is supported by the Advisory Board (AB) and the Humanitarian Financing Unit (HFU). The strategy, principles, governance and allocation modalities are developed in the Operational Manual (OM) in line with the CBPF global handbook.

What does the DRC HF fund?

Funding is allocated to activities that have been prioritized as the most urgent and strategic to address critical humanitarian needs in the country in close alignment with the Humanitarian Response Plan (HRP). It also funds interventions to immediately respond to sudden onset crises or rapidly deteriorating humanitarian conditions in DRC.

Who provides the funding?

A total of 13 donor countries have contributed to the DRC HF since its creation.

Who can receive DRC HF funding?

Funding is accessible to partners eligible to the DRC HF, including national and international NGOs, Red Cross organizations and UN Agencies. To receive HF funding, NGOs need to undergo a rigorous capacity assessment, triggered by UNDP and aligned with the HACT processes, to ensure they have the necessary administrative, financial and technical capacities to meet the Fund's accountability standards and efficiently implement humanitarian activities. Funding is channeled through partners that are best placed to implement priority activities, as per the strategies endorsed by the HC, in a timely and effective manner.

Who sets the Fund's priorities?

The HC, supported by the HFU and in consultation with the AB, decides on the most critical needs to be funded. The HFU works closely with the cluster coordinators and other coordination forums in DRC such as CRIO and CLIO (HCT field representation).

How are projects selected for funding?

The HC allocates funding through consultative processes with Inter-Agency Standing Committee (IASC) country Clusters based on prioritized humanitarian needs. There are two types of allocation modalities:

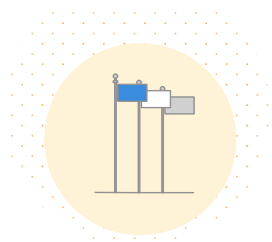
Standard allocations: launched twice a year (if funding allows it) to support sectoral and intersectoral priorities aligned with the HRP; larger and strategic allocations to fund multisectoral humanitarian interventions of up to 24 months with a strong focus on building community resilience. Allocations are targeted thematically or geographically, and focus on prioritized needs, activities and locations identified in the HRP, ensuring a highly strategic and coordinated use of funds.

Reserve allocations: launched on an ad-hoc basis to respond to unforeseen emergencies in line with and outside the HRP; more rapid and flexible mechanism to tackle sudden onset emergencies, outbreaks or the deterioration of the humanitarian situation due to existing crises.

Managing Agent in 2020

In August 2018, it was decided to harmonize all the CBPFs under the single management of OCHA. In preparation of the Managing Agent (MA) transition, the Joint Humanitarian Financing Unit (JHFU) has conducted initial processes including data migration from UNDP to OCHA, ensuring the tracking of all documents on GMS as a compensation of the UNDP programmatic, Risk management and financial capacity (ten additional national and international staff were endorsed by the AB as part of the OCHA HFU direct cost plan for 2020); review of the existing OM to capture the different changes at the governance and programmatic cycle level; as well as assurance activities.

To ensure appropriate closure of projects funded in previous years, the JHFU will be maintained until the 110 projects that will still be ongoing in 2020 and 2021 are completed. While over the long term the MA exercise is intended to lower the HF management cost at Headquarters, this phase will generate a slight increase during the transitional phase, which might go beyond 2020 (at least two projects will end in 2021).



DONOR CONTRIBUTIONS

Donors contribute to the humanitarian funds before urgent needs arise.



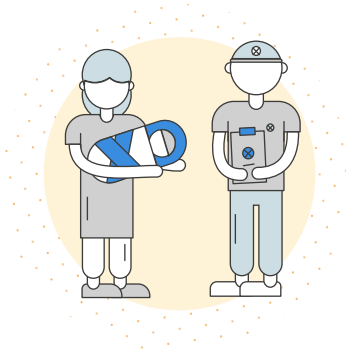
IDENTIFYING HUMANITARIAN NEEDS

Aid workers on the ground identify the most urgent types of humanitarian assistance that affected people need.



MANAGING FUNDS

Contributions are pooled into single funds.



ALLOCATING FUNDS

Based on expert advice from aid workers and on needs, the Humanitarian Coordinator allocates CBPF funding.



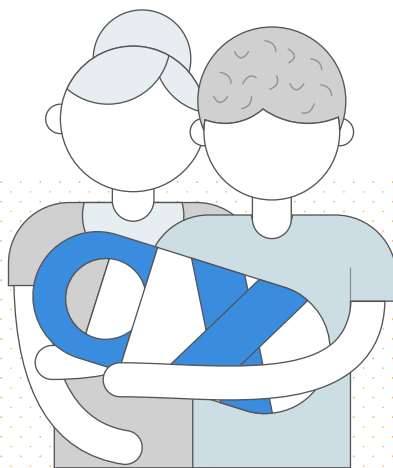
REQUESTING FUNDS

Humanitarian partners work together to prioritize life-saving relief activities. They request CBPF funding through the Humanitarian Coordinator.



HUMANITARIAN RESPONSE

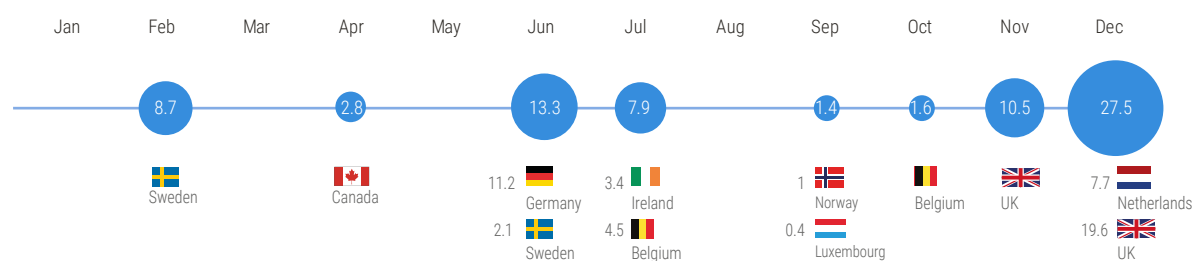
Relief organizations use the money for urgent aid operations. They always track spending and impact, and report back to the Humanitarian Coordinator.



2019 IN REVIEW

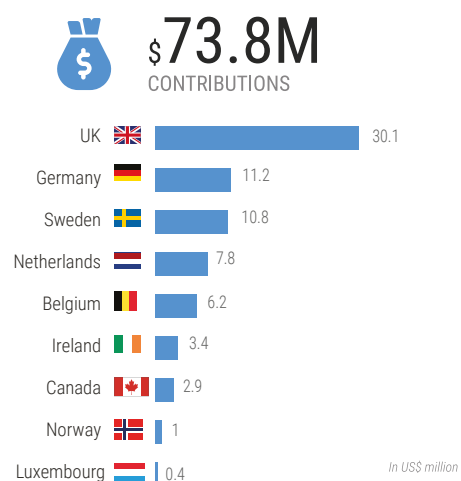
DONOR CONTRIBUTIONS

CONTRIBUTIONS TIMELINE



In US\$ million

DONOR CONTRIBUTIONS



In US\$ million

Donor contributions

In 2019, donors generously contributed to the DRC HF with US\$73.8 million, compared to \$90.1 million in 2018. The DRC HF was ranked fourth globally in terms of contributions received (behind Syria, Yemen and Syria Cross-border Funds), accounting for almost seven per cent of all contributions to the 18 CBPFs in 2019 (\$947 million).

Over the year, nine donors contributed to the DRC HF. Once more, the United Kingdom is the biggest contributor (\$30.1 million), followed by Germany that contributed for the third consecutive year (\$11.2 million) and Sweden that maintained a generous level of funding (\$10.8 million). Belgium, Canada, Ireland, Luxembourg, The Netherlands and Norway collectively contributed \$13.8 million.

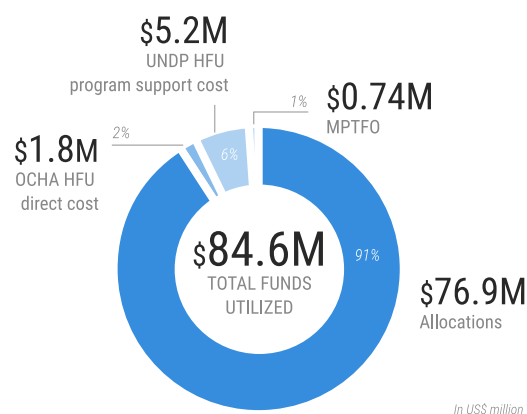
While most donors contributed during the first three quarters, 53.5 per cent of the total contributions arrived in the last quarter of the year, mainly between mid-November and the end of December. Consequently, 2020 will have a carry-over of \$46 million.

The HRP received 46 per cent of the total \$1.65 billion required target objective (\$762.2 million).

The DRC HF contributed ten per cent of the total amount received.

The 2018 carry-over amounting to \$55.5 million enabled the Fund to reach a programable capacity of \$129.3 million in 2019, of which \$76.9 million were allocated to HF partners. However, the total amount of received contributions could not be used since the last contributions arrived at the end of the year.

TOTAL FUNDS UTILIZED



In US\$ million

Management and operation costs

The management and operation costs in 2019 amounted to \$7.8 million. The breakdown is as follows:

- UNDP: 1) \$1.6 million HFU direct costs, including audits (\$165,540); 2) \$3.63 million additional five per cent on the total NGOs allocations, covering assurance activities;
- OCHA: \$1.8 million HFU direct costs;
- MPTFO: \$0.74 million management costs, equivalent to one per cent of 2019 donor contributions.

The JHFU 2019 direct costs (\$3.4 million) were approved in 2018. This amount was deducted from the 2018 expenditures.

In October 2019, the AB approved the JHFU 2020 direct costs (OCHA and UNDP) amounting to \$6.06 million, which were deducted from 2019 expenditures.

Donor trend

As for the previous year, the United Kingdom, Germany, Sweden, The Netherlands and Belgium maintained their support to the DRC HF in 2019.

The **United Kingdom (UK)** has remained the Fund's biggest donor, with contributions amounting to \$30.1 million (signed between November and December), including \$19.6 million for the HRP and \$10.5 million as a non-HRP funding for the EVD Response. The total represents 40.7 per cent of DRC HF 2019 contributions. Since the Fund's creation, UK's funding has represented 46.4 per cent of total contributions.

Germany is placed second with a contribution amounting to \$11.2 million. Since its first commitment in 2017, Germany contributed \$38.9 million to the DRC HF.

Sweden is the third largest donor to the DRC HF, with a total of \$52.2 million contribution since 2016. In line with a two to three-year MoU with the Fund, Sweden paid the last segment in February 2019 amounting to \$8.7 million. An additional contribution of \$2.1 million was received in June 2019 to boost the resilience interventions of the DRC HF.

The Fund received consistent contributions from **The Netherlands**, reaching \$7.8 million in 2019. Since 2006, the country donated \$129.2 million to the DRC HF.

In 2019, **Belgium** contributed \$6.2 million. Between 2016 and 2019, the donor contributed \$20.8 million to the DRC HF, amounting to 7.4 per cent of the total DRC HF contributions for that period (282M\$).

In 2019, **Ireland** contributed \$3.4 million to the Fund. Since 2016, the donor maintained a stable amount, ranging from \$3 to \$4 million.

With \$2.8 million, **Canada** increased its donation to the Fund, representing nearly 4 per cent of the total annual contributions in 2019.

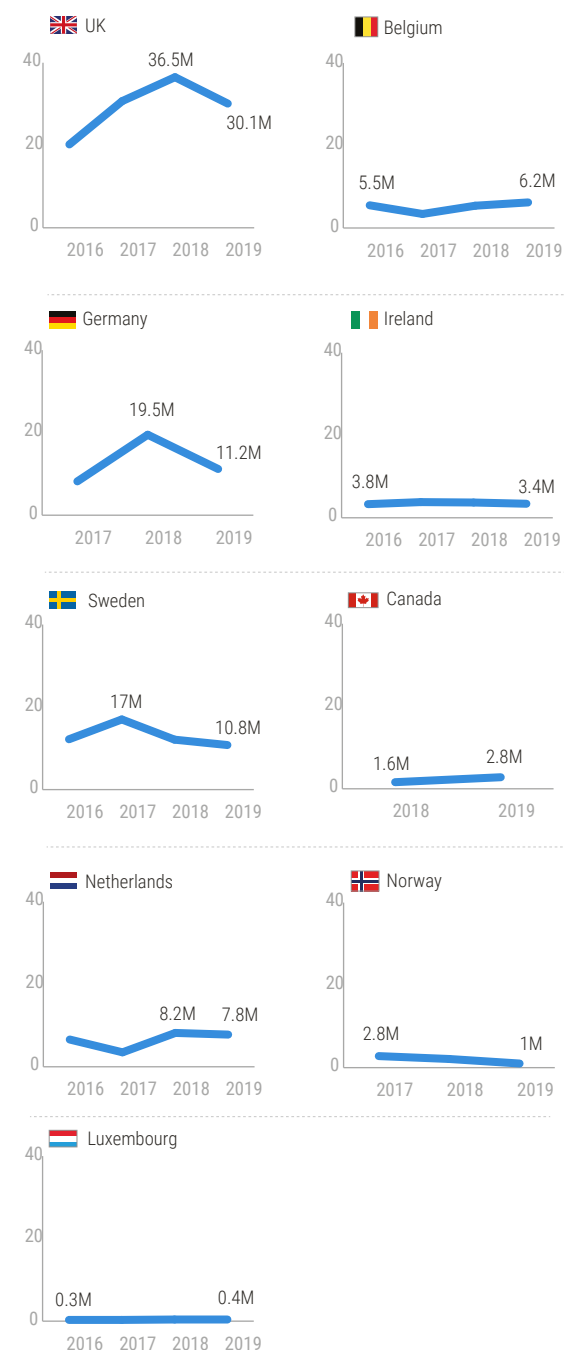
Norway was one of the first donors to support the DRC HF and has been a consistent contributor, reaching a total of \$53.2 million since 2006. With a notable decrease, Norway contributed \$1 million in 2019.

Luxembourg contributed \$0.4 million to the Fund in 2019. Since it first started to donate in 2008, Luxembourg has contributed nearly \$5 million to the DRC HF.




As per the OM, the donor's representation was restricted to top three donors (UK, Germany and Sweden). Nevertheless, the majority has shown interest in the HF operations and strategic discussions through their participation in the AB meetings held throughout the year.

Resource mobilization will be carried out in 2020, reaching out traditional and previous donors (such as Spain, Australia and South Korea) as well as new potential donors to the Fund.

DONOR TREND



DONOR WITH MULTI-YEAR FUNDING

| | | | |
|---|---------|--------------|-------------|
|  | Sweden | 7.57M | 2017 - 2019 |
|  | Sweden | 7.18M | 2018 - 2019 |
|  | Belgium | 3.47M | 2018 - 2019 |

2019 IN REVIEW

ALLOCATION OVERVIEW

The allocation processes were conducted in accordance with the OM approved in November 2018 and in line with the HRP. In 2019, 102 projects amounting to \$76.9 million were funded through six allocations, including one standard allocation and five reserve allocations.

Standard allocation

A standard allocation was launched in January to contribute to the strategic objectives of the 2019 HRP. It was intended to support resettlement of returnee populations; risk mitigation; protection needs of civilian populations; early action in response to the cholera outbreak; and coordination activities.

Under this allocation, a total of 42.4 million, representing 57 per cent of the funds available in 2019, enabled 40 partners (22 international NGOs, 17 national NGOs and one national Red Cross) to implement 56 projects across ten provinces in the country. This allocation enabled the following:

- **Programme sustainability:** projects are part of an integrated and complementary intervention dynamic. The activities are linked to nine clusters, including coordination, and respond to two objectives of the Strategic response plan (SRP): Immediate improvement of the living conditions of people affected by the crisis, with priority to the most vulnerable (SO1); and Protecting people affected by the humanitarian crisis and ensuring respect for their human rights (SO2).
- **Integrated approach:** 15 consortia were established with multiple projects implemented by 32 partners, amounting to \$34.5 million. Two of the consortia have implemented activities only dedicated to the cholera response for a total envelope of \$3.58 million.
- **Enabling programmes:** Three logistics projects with a budget of \$4.27 million have opened inaccessible roads to facilitate the delivery of aid to vulnerable populations. Eight projects were funded through a coordination envelope to reinforce the role of the clusters (including sub-clusters and working groups) in the coordination forums and in the monitoring of the humanitarian response with additional coordination and information management capacities both at national and field levels.
- **Resilience:** 42 multi-year projects were funded through this allocation.

Reserve allocation

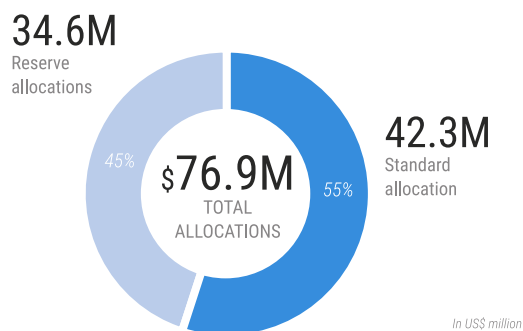
This allocation window has been triggered strategically by alerts and advocacy from the humanitarian community to the

HC and AB members, in order to respond to sudden-onset crises not foreseen in the HRP that marked the Humanitarian Response in 2019.

Through five reserve allocations (RA), 46 projects were funded amounting to \$34.6 million, which represents 47 per cent of all funds available in 2019. Throughout the year, the reserve allocations were dispersed as follows:

- **RA1, February (\$1.2 million):** launched to provide rapid response to meet the needs of displaced people affected by intercommunal conflict in Yumbi in the province of Mai-Ndombe.
- **RA2, May (\$10 million):** while the response to the EVD has been tackled in different response plans, due to the increasing humanitarian impact, the Fund, under the guidance of the ERC, contributed with activities in line with the HRP to respond to the aggravation of EVD and help the interruption of transmission in the provinces of North Kivu, South Kivu and Ituri, with a particular focus on community engagement and strengthening communication through the Community Animation Cells (CACs).
- **RA3, July (\$20 million):** this allocation includes different envelopes that were successively processed between the end of July and mid-September. Funding was used to respond to the needs resulted from increasing violence in Djugu, Masisi and the Haut-Plateau; support the continuity of humanitarian interventions in Yumbi; ensure the first response to the measles epidemic nationally declared in June; repair the Tshikapa airstrip; and deploy a Protection Capacity Adviser on Gender-based violence (GBV).
- **RA4, October (\$1.7 million):** in the face of the violence occurred since late March in Kamango (North Kivu) as reported by the humanitarian community, this allocation supported the humanitarian response in health, nutrition and protection to meet the needs of displaced people who have taken refuge in Mutwanga.
- **RA5, November (\$1.6 million):** following the aggravation of the measles situation (increased cases and needs), the allocation helped to cover existing gaps in the response to the epidemic in the provinces of Haut-Katanga, Kasai Oriental, Kongo Central and Mai-Ndombe.

ALLOCATIONS BY TYPE



ALLOCATIONS BY STRATEGIC FOCUS

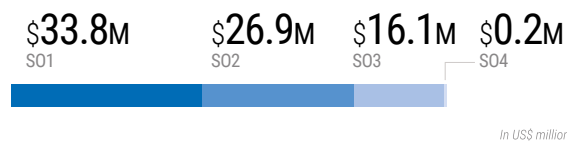
S01 Improve the living conditions of people affected by the crisis, starting with the most vulnerable.

S02 Protect people affected by crisis and ensure respect for their human rights.

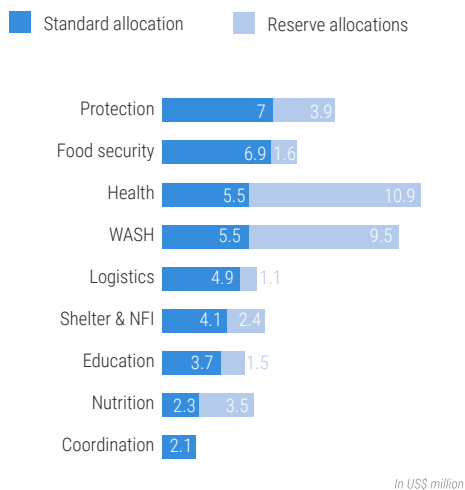
S03 Decrease excess mortality and morbidity among the affected population.

S04 Provide rapid, effective and accountable humanitarian action in accordance with humanitarian principles and standards.

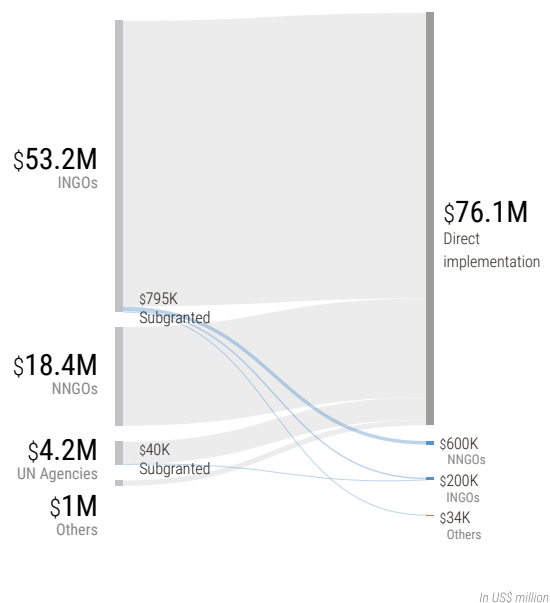
Allocations by strategic focus



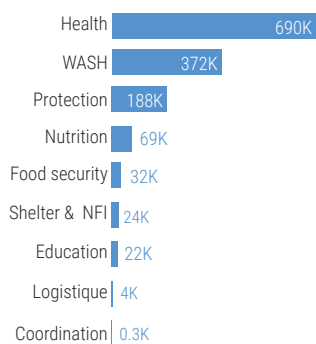
ALLOCATIONS BY CLUSTER



SUBGRANT BY PARTNER TYPE



PEOPLE TARGETED BY CLUSTER



Complementarity with CERF

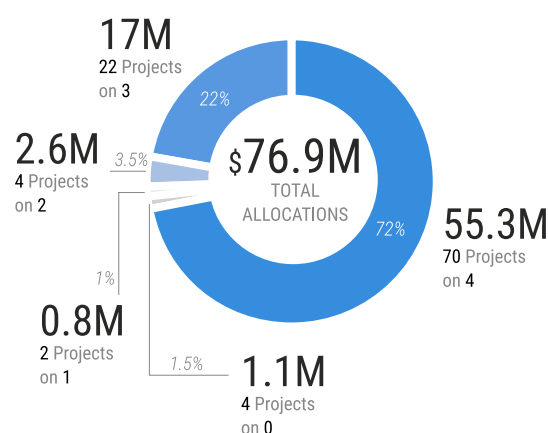
As the allocations of both CERF and HF funds are managed by the JHFU, their complementarity was ensured as to deliver a coherent humanitarian response.

Towards the end of 2018, the ERC decided to allocate \$31.7 million through the Underfunded mechanism, to respond to the needs of 1.4 million people affected by a Level 3 crisis in four provinces. In complementarity with the HF first Standard allocation, the CERF supported life-saving interventions in all cluster activities.

Both HF Standard and CERF Underfunded allocations have supported areas of return, risk mitigation and protection needs of the civilian population with complementary interventions in the provinces of Ituri, North Kivu, Tanganyika and Kasai.

A second CERF allocation of \$9.8 million was triggered in September to complement the HF Reserve allocation for the EVD response, in order to strengthen early detection of the disease, reinforce prevention and infection control measures, provide psychosocial and nutritional support to affected people, and bolster engagement with communities. Consequently, DRC benefitted from a joint intervention of nearly \$20 million for its response to EVD. While the CERF allocation was granted to three UN Agencies, the HF allocation enabled five NGO partners to contribute to the interruption of virus transmission.

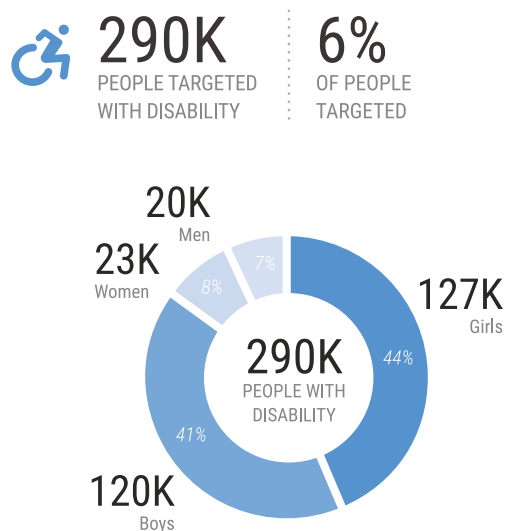
GENDER MARKER PROJECTS



In US\$ million

- 0 - Does not systematically link programming actions
- 1 - Unlikely to contribute to gender equality (no gender equality measure and no age consideration)
- 2 - Unlikely to contribute to gender equality (no gender equality measure but includes age consideration)
- 3 - Likely to contribute to gender equality, but without attention to age groups
- 4 - Likely to contribute to gender equality, including across age groups

TARGETED PEOPLE WITH DISABILITY



In thousands of persons

People with disability

It is estimated that 15 per cent of the world population lives with some form of disability. With HF funding from 2018, the HF partner Handicap International Federation. Humanitarian Aid Direction (FHIDAH) pursued its support to the coordination mechanism in 2019 to ensure the inclusion of people with disability in the humanitarian response.

As a result, 250 humanitarian actors were sensitized on disability, vulnerability, inclusion and inclusive humanitarian action. FHIDAH's technical assistance has enabled 15 national and international organizations to make their strategies, policies and programmes disability inclusive.

This project has also played a key role to ensure that support to people with disability is mainstream in the DRC HRP for 2020.

ERC'S STRATEGIC STEERS

In 2019, the Emergency Relief Coordinator (ERC) Mark Lowcock identified four priority areas that are often underfunded and lack the desirable and appropriate consideration in the allocation of humanitarian funding.

These four priority areas have been duly considered by the DRC HF stakeholders and management, when prioritizing life-saving needs in the allocation processes.



Support for **women and girls**, including tackling **gender-based violence**, **reproductive health** and **empowerment**



Programmes targeting **disabled** people



Education in protracted crises



Other aspects of **protection**

\$55.3M

Allocations

70

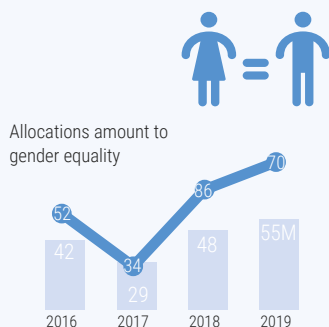
Projects

51

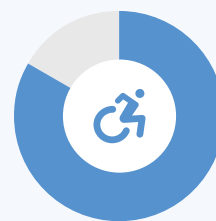
Partners

in 2019 committed to contribute significantly to **gender equality**.

For effective and inclusive assistance, specific vulnerabilities must be considered by humanitarian actors. Ensuring the participation of women and girls, while engaging men and young generations, is fundamental to promote protection from GBV.



DRC HF interventions have supported the clusters in further targeting the needs of disabled people. While no record exists from previous years, as the indicator was integrated on GMS in 2019, the Fund was able to track direct assistance to disabled people, reaching six per cent against the total targeted in all projects funded in 2019. Support was also provided to clusters to promote the inclusion of people with disability in needs analysis and sectoral response strategies.



In 2019, implementing partners targeted people with disability in

68 projects.

Due to the nature of the crises in DRC, funding granted to protection has considerably increased, ranging from \$3.77 million in 2016 to \$11 million in 2019, engaging multiple humanitarian actors including national, international and UN partners across the country, both at operational and strategic level, and ensuring complementarity with other clusters through a comprehensive package (education, child protection and WASH).

Increasing amount of funding in the **protection** sector

\$11M

allocated

31 projects

in 2019

of projects in protection sectors



\$5.2M allocated

supporting **8** projects, targeting **5,902** girls and **6,710** boys in 2019.

In affected communities, access to education helps to keep children safe and rebuild their lives. In 2019, a combined total of \$5.2 million (seven per cent of total allocations) was granted to seven implementing partners to ensure adequate assistance in the field of education, targeting over 21,600 people, 58 per cent of whom are children.

While it has been the least funded cluster by the HF and HRP over the years, with a total contribution not exceeding \$37.1 million since 2015, the HF will work on further supporting the education sector.

DRC HF 2019 ANNUAL REPORT

FUND PERFORMANCE

The DRC HF measures its performance against a management tool that provides a set of indicators to assess how well a Fund performs in relation to the policy objectives and operational standards set out in the CBPF Global Guidelines. This common methodology enables management and stakeholders involved in the governance of the Funds to identify, analyze and address challenges in reaching and maintaining a well-performing CBPF.

CBPFs embody the fundamental humanitarian principles of humanity, impartiality, neutrality and independence, and function according to a set of specific principles: Inclusiveness, Flexibility, Timeliness, Efficiency, Accountability and Risk Management.

PRINCIPLE 1

INCLUSIVENESS

A broad range of humanitarian partner organizations (UN agencies and NGOs) participates in CBPF processes and receive funding to implement projects addressing identified priority needs.

1 Inclusive governance

The AB has a manageable size and a balanced representation of CBPF stakeholders.

Target

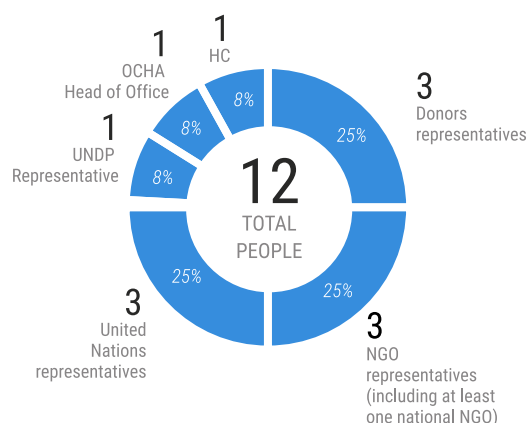
HC; OCHA Head of Office (HoO); UNDP Representative; three UN Agencies; three NGOs (of which at least one is national); and three donors.

Results

Score: 2/5 (low). *Each of the stakeholder's type has equal representation and has one seat.*

In 2019, the AB was composed of the following members: HC, OCHA HoO, UNDP Resident Representative, three UN Agencies (UNICEF, UNHCR, WFP or UNFPA), three NGOs (INGO Forum, Solidarité International or Caritas International Belgique, Caritas Congo) and three donors (DFID, Germany and Sweden). Other contributing and non-contributing donors participated as observers.

COMPOSITION OF ADVISORY BOARD



Analysis

The AB has an appropriate size and includes balanced representation of CBPF stakeholders. In 2019, seven AB meetings were held. While not every member participated each time, adequate representation was achieved for decision-making.

Follow up actions

The governance and strategic role of the AB will be strengthened to support the HC in making the DRC HF a key funding mechanism of the HRP.

The composition of the AB will be reviewed in 2020 and approved by the HC, including for better inclusion of the national NGOs. OCHA HFU will ensure that each constituency carry an appropriate consultation.

2 Inclusive programming

The review committees of the Fund have the appropriate size and a balanced representation of different partner constituencies and cluster representatives.

Target

The size of the Review Committees may vary according to the size of the cluster and the type of allocation.

Strategic Review Committee (SRC): for a Standard allocation modality, the SRC has representatives of three stakeholder groups (Cluster, JFHU and CRIQ). For a Reserve allocation modality, the SRC has representatives of two stakeholder groups (JFHU and Cluster). Care is taken to ensure UN and NGO participation, and organisations submitting proposals are barred from participating. Membership is determined by the Cluster and JFHU at the beginning of each allocation.

Technical Review Committee (TRC): the TRC includes at least two members (one Cluster coordinator or co-facilitator for technical aspects; and one representative of JFHU for programmatic and financial aspects), up to a maximum of five members.

Results

Score: 3/5 (medium). *Each stakeholder's type has equal representation (one seat) and OCHA is playing an active role.*

REPRESENTATIVES IN THE REVIEW COMMITTEES

of representatives that participated in average in
Strategic Review Committee

1 active member of Cluster 1 CRIQ 2 JFHU

of representatives that participated in average in
Technical Review Committee

1 Coordinator or Co-facilitator 1 Active member of Cluster 2 JFHU

PRINCIPLE 1

INCLUSIVENESS

Strategic Review Committee (SRC): one Cluster; one CRIO; two from the JHFU.

- Cluster: represented by a Lead and/or Co-lead; an NGO representative at national level and, through the above, by Cluster Lead(s) of clusters relevant to the project at regional level.
- JHFU: represented by two representatives for programme and finance.
- CRIO: In the case of the Standard allocation, for strategic guidance on projects recommended for funding, on an advisory basis and with no right of veto. In the case of Reserve allocations, for recommendation of partners.

Technical Review Committee (TRC): At least four members: National Coordinator (s) or co-facilitator(s); Regional Cluster coordinator(s) of all clusters relevant to the project; and two representatives of the JHFU. A technical evaluation was conducted through a global evaluation grid developed by the JHFU.

Analysis

The JHFU provided oversight to ensure process and language standardization.

In the case of the Standard allocation, two score cards were used for this exercise; one was filled by the review committee, taking into consideration the feedback from the field through the regional cluster lead; and the other was filled by the JHFU. The combination of both scores helped in the final recommendation to the HC.

The list of recommended projects was shared afterwards with the CRIO for feedback. It is worth mentioning that the process was done offline, since the cluster coordinators did not have access to GMS at that stage. Therefore, the JHFU acted on behalf of the cluster coordinators in the system to share the feedback to partners. The same process applied for the technical review.

In August 2019, the clusters were trained and given access to GMS to ensure that they comply with their role, as defined both in the Global handbook and the OM.

As a result, the review exercise for the last two reserve allocations was in line with the Global process. This had an impact on the timeline of the project reviews and ensured transparency towards the partners with real time reporting on GMS, using the standard score card.

Follow up actions

Equal representation will be ensured in all review committees. As a permanent member of the review committees, OCHA HFU will take part in decision-making and will support the committees in the exercise of their functions. It will ensure that each decision is properly and sufficiently justified. Concerted efforts will be made to ensure adherence with the requirements of the Global guidelines.

The use of GMS will be maximized, ensuring that access is provided to the national cluster coordinators. OCHA HFU will make sure that the cluster coordinators play a key role in ensuring effectiveness, quality and transparency in the strategic and technical reviews, and that feedback on projects is properly reported and shared with the applicants through the system.

Moreover, OCHA HFU will ensure that all committees are supported by an expert in gender approach to ensure that the identification of needs is based on gender analysis and that the system for classifying activities by degree of contribution to the gender approach is accurately assessed.

3 Inclusive implementation

CBPF funding is allocated to the best-positioned actors, leveraging the diversity and comparative advantage of eligible organizations.

Target

Prioritization of direct implementation through international and national non-governmental partners, accounting for at least 80 per cent of DRC HF funding annually.

Results

Score: 5/5 (very high). *The percentages are within the five per cent margin from the target for all categories.*

In 2019, 69 per cent of funding was granted to international NGOs; 24 per cent to national NGOs; six per cent to UN Agencies and one per cent to the national Red Cross.

Analysis

In 2019, the DRC HF has enabled the best-positioned partners to respond to the most urgent needs of vulnerable populations in the ongoing crises. Indeed, 25 per cent of the funding was granted to national partners (including

PRINCIPLE 1

INCLUSIVENESS

NGOs and Red Cross). Partners are chosen based on the following criteria:

- the partner's absorption capacities and performance with the HF;
- their level of access;
- their participation in the coordination mechanism.

It is worth mentioning that an important envelope was allocated to local administration identified by the partners to support the implementation, including incentives to a large number of health workers, teachers, monitors, among others.

Follow up actions

In 2020, OCHA HFU will maintain its efforts to fund the best-positioned partners to respond efficiently. It will also ensure compliance with the Grand Bargain, by striving to channel at least 25 per cent of available funds directly to national partners.

Better attention will be paid to the participation of eligible partners to coordination mechanisms at field level; and to all aspects related to the accountability and performance of partners towards the Fund. OCHA HFU will also have a better tracking of funding channeled to the local administration.

4 Inclusive engagement

Resources are invested by the HFU in supporting the capacity of local and national NGO partners within the scope of CBPF strategic objectives.

Target

Six training rounds of training and systematic information sessions (three rounds per standard allocation; multiple sessions by round in different locations).

This includes trainings and information sessions on:

- Allocation strategies and submission processes;
- Management and implementation of HF projects;
- Accountability framework and fraud mitigation.

Results

Score: 4/5 (high). *All planned activities took place with positive partner feedback.*

In 2019, three rounds were organized throughout the year:

GMS and Gender with Age Marker (GAM): As a preparation for the first Standard allocation, 165 participants representing 43 HF partners were trained in Kananga, Bukavu and Goma on GMS's use and tools along with an awareness-raising session on GAM.

Programme and monitoring: In May 2019, the JHFU conducted one round of information session in five locations: Kalemie, Kananga, Goma, Bukavu and Kinshasa. The session targeted the successful 40 partners of the Standard allocation to address potential challenges and based on lessons learned of previous allocations.

Accountability and Finance: In December 2019, a comprehensive training on Financial management was organized in eight locations: Bukavu, Bunia, Goma, Lubumbashi, Kalemie, Kananga, Kinshasa and Tshikapa. As a result, 101 partners participated, including 76 national NGOs. In addition, the participants followed an online training on Raising awareness on fraud prevention and control.

TRAININGS



3 rounds of trainings/information sessions



184 NGOs trained

| Training type | Organizations type | # of organizations trained |
|--------------------------|--------------------|----------------------------|
| GMS & GAM | INGOs | 6 |
| | NNGOs | 37 |
| Programme & monitoring | INGOs | 22 |
| | NNGOs | 18 |
| Accountability & Finance | INGOs | 25 |
| | NNGOs | 76 |
| Total | | 184 |

Analysis

Considering that only one Standard allocation was launched in 2019, the HF only conducted three rounds of trainings.

Follow up actions

In 2020, induction sessions on HF rules, processes and assurance activities will be conducted throughout the programme cycle of the Fund. Online GMS clinics will be

PRINCIPLE 2

FLEXIBILITY

The programmatic focus and funding priorities of CBPFs are set at the country level and may shift rapidly, especially in volatile humanitarian contexts. CBPFs are able to adapt rapidly to changing priorities and allow humanitarian partners to identify appropriate solutions to address humanitarian needs in the most effective way.

5 Flexible assistance

CBPF funding is allocated for cash assistance.

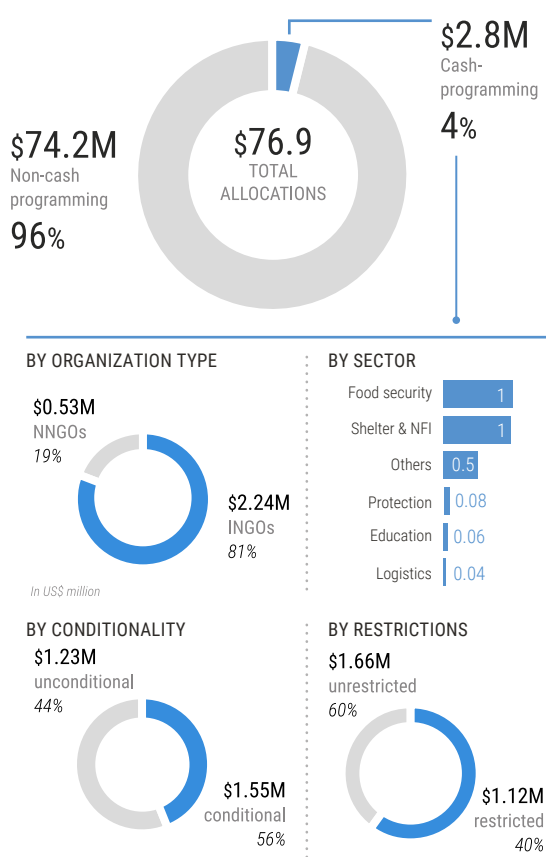
Target

Cash as a response modality will be strategically prioritized and operationally considered, where appropriate, as per CBPF cash guidance note. Eighty per cent of project proposals consider cash as a modality.

Results

Score: 3/5 (medium). *Cash is prioritized and used, but very modestly (up to 10 per cent).*

CASH TRANSFER PROGRAMMING



Analysis

In collaboration with the Cash Working Group (CWG), cash as a response modality was recommended when appropriate in the different types of allocations launched in 2019.

Out of 260 project proposals submitted in 2019, 15 per cent (40 project proposals) considered cash as a modality for intervention. As a result, only 14 projects were recommended for funding, reaching a total of \$2.8 million, which represents four per cent of the 2019 allocations.

Due to logistics constraints, cash was prioritized for projects targeting hard-to-reach areas for direct distribution. Low results may therefore be linked to the enabling environment: the nature of the allocations did not encourage cash for intervention, especially for allocations targeting vulnerable populations in insecure areas.

Challenges observed and reported by the partners and monitoring team include the following:

- Security incidents due to increasing armed conflicts; implying a change of modality from cash intervention to direct non-food items (NFI) or food assistance distribution;
- Discrepancies between the market assessment and the values of the goods during the implementation;
- The exchange rate; while the amount awarded to the beneficiaries is provided in US dollars, the Congolese franc is more often used in the communities. The exchange rate from US dollars to Congolese francs is often revised upwards by suppliers who are willing to take the risk of transferring cash to beneficiaries in less secure areas;
- Insufficient capacity among financial service providers, in particular mobile money providers, to increase the use of electronic transfers in remote and insecure areas, instead of in-kind assistance or direct cash distributions.

Follow up actions

OCHA HFU must ensure more follow-up on activities with a cash component during implementation.

Since 2019, the CWG has been working on a set of strategic tools to enable better environment for cash programming. The CWG has also elaborated an action plan on capacity building in cash programming for humanitarian actors.

OCHA HFU will work closely with the CWG to ensure that partners and OCHA HFU team would both benefit from the capacity building exercises as needed.

PRINCIPLE 2

FLEXIBILITY

6 Flexible operation

CBPF funding supports projects that improve the common ability of actors to deliver a more effective response.

Target

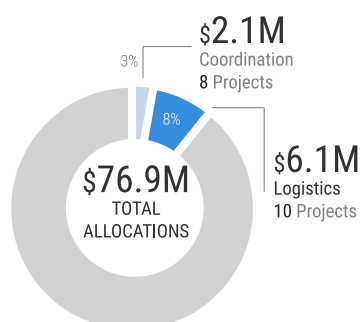
Support funding for strategic programmes, as defined in the revised Operational Manuel, up to a maximum of 20 per cent of DRC HF annual funding.

Results

Score: 4/5 (high). *Funding made available for common services and enabling programmes strategically, up to ten per cent of all allocations.*

In 2019, 11 per cent of total funding supported an enabling operational environment

ALLOCATION THROUGH COMMON SERVICES



Analysis

In 2019, the Fund demonstrated flexibility in supporting activities that improve the common ability of actors on the ground to deliver a more effective response, with 11 per cent of total funding supporting coordination and logistics projects enabling operational environment (\$8.2 million).

In the frame of the Standard allocation, eight projects were funded through a coordination envelope to reinforce the role of the clusters (including sub-clusters and working groups) in the coordination forums and in the monitoring of the humanitarian response with additional coordination and information management capacities both at national and field levels.

HF partners were identified by the respective clusters to host the co-facilitators and IM officers. The Allocation encountered several challenges, such as:

- Capacity of the hosting NGOs to co-fund the management and the logistics-related costs. The Host organization for the Logistics Cluster was only conconfirmed in November 2019;
- Delays in the recruitment process;
- Turnover of staff in DRC;
- An exit strategy was not foreseen in these projects to ensure continuity.

Regarding activities related to logistics, the access of humanitarian partners to affected populations was facilitated through the rehabilitation of road infrastructure in eight provinces. While three partners managed to open access to impassable routes, the rehabilitation of one airstrip and other roads was considerably delayed because of weather forecast and security incidents. Other partners encountered delays in rehabilitating identified routes for the following reasons: the approved technical specifications were not adapted to the physical environment; the raw material prices increased compared to the initial approved budget; the recruitment process of engineers and technical experts was delayed.

Follow up actions

In 2020, a follow-up of the coordination projects is planned. Partners are encouraged to share and coordinate their results with the clusters, as well as develop and prepare an exit strategy.

The HF jointly with the ICN and the hosting organizations will conduct an impact analysis exercise to decide whether an extension (no-cost or cost extension) of the project or a second contribution from the HF will be made, so as to ensure the continuity of this crucial capacity alongside the resource mobilized by the clusters.

In coordination with the Logistics Cluster, the HF will have a close follow up on the ongoing projects and will ensure that feasibility studies are well developed before the approval of any logistics projects.

PRINCIPLE 2

FLEXIBILITY

7 Flexible allocation process

CBPF funding supports strategic planning and response to needs identified in the HRP and sudden onset emergencies through the most appropriate modalities.

Target

30 per cent of funds allocated through Standard allocations.
70 per cent of funds allocated through Reserve allocations (including strategic programs).

Results

Score: 4/5 (high). *Allocation modalities distribution is off target between 20 and 50 per cent, but well-justified (contribution trends, sudden onset needs, etc.).*

In 2019, while 55 per cent of funds were allocated through the standard allocation, 45 per cent were used for the reserve allocations.

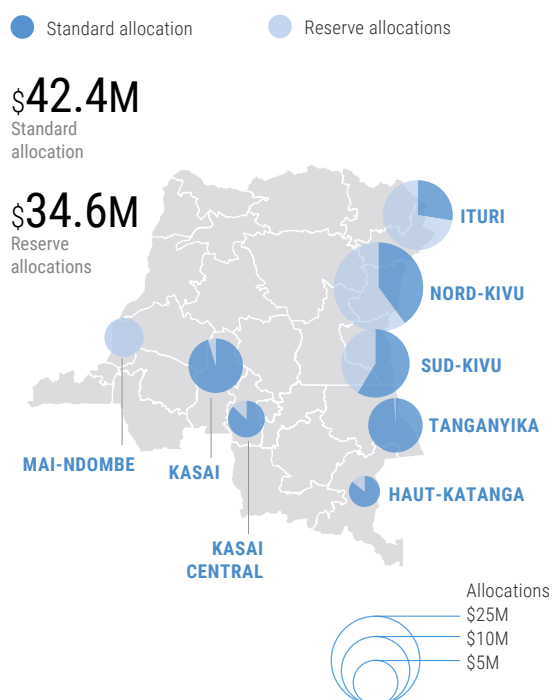
Analysis

An important carry-over of \$55.5 million from the 2018 contributions allowed a significant increase of funding for the standard allocation modality. While it represented only 15 per cent of total funding in 2018, funding for the standard allocation increased to 55 per cent in 2019, amounting to \$42.4 million.

With increasing emergencies and crises during the second half of the year, the AB recommended to allocate most of the remaining paid contributions to respond to the acute needs of vulnerable populations, through the reserve allocation modality. Therefore, the total amount allocated through that specific modality represented 45 per cent of the total commitment of the HF in 2019.

It is worth mentioning that the reserve allocation modality helped to extent the access of HF partners to vulnerable populations affected by armed conflicts and epidemics in four additional provinces across the country, compared to the standard allocation.

ALLOCATION TYPE BY REGION



Other regions: Kinshasa 2M; Maniema 1.3M; Kasai Oriental 1.1M; Haut-Lomami 0.7M; Kongo Central 0.3M; Kwilu 0.3M; Kwango 0.01M

Follow up actions

OCHA HFU will develop a strategy for HF interventions in collaboration with the AB, in order to define scope, processes and percentage of funding to consider as per modality, depending on the evolution of the humanitarian context throughout the year.

PRINCIPLE 2

FLEXIBILITY

8 Flexible implementation

CBPF funding is successfully reprogrammed at the right time to address operational and contextual changes.

Target

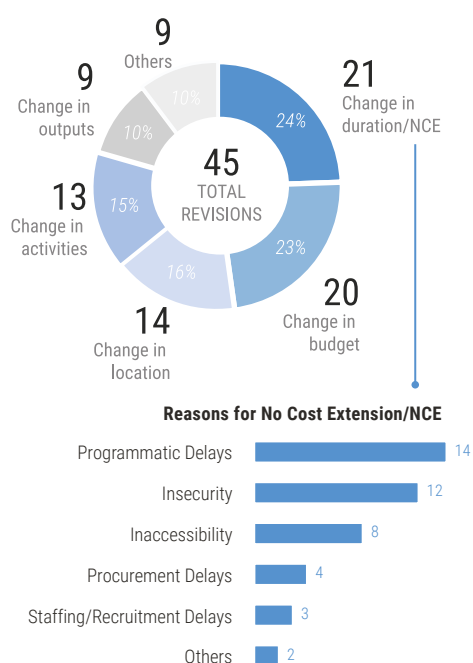
Project revision requests processed within ten working days (measured from submission of the request by partners in GMS to the revised project being approved).

Results

Score: 3/5 (medium). *Revision requests taking between 20 and 30 days, on average, with delays justified or due to partner inaction.*

While project revision requests were processed within 28 working days for the standard allocation in 2019, the process took 15 days in average for the reserve allocations.

NUMBER OF REVISIONS IN 2019



Analysis

During the second semester of the year, enhanced communication with HF partners was necessary to remind them about their obligations towards the Fund. For instance, partners operating in conflict areas were asked to report on the progress of their activities. This has ensured a better traceability of the changes made during the implementation,

especially for those that do not require grant agreement amendments (changes of location, output and targeted beneficiaries), which represent more than 50 per cent of the requests received in 2019.

Furthermore, it is worth mentioning that 20 to 30 days as an average might not reflect the actual timeline of the revision request workflows. More precisely, the first step of the revision request was conducted offline by email until September 2019 and was thereby not tracked on GMS.

The revision requests were conducted offline because the workflow included stakeholders with no access to GMS, more precisely cluster coordinators and CRIO/CLIO.

From the 45 requests submitted in 2019, 42 were approved. Most of no-cost extensions (NCE) were due to insecurity constraints and programmatic delays, including recruitment process, logistics, access to targeted areas and movement of initially targeted population.

As per the results, three revision requests were not approved. However, it is assumed that more cases were reported to different stakeholders involved in the revision process (clusters, CRIO and HF). While the first step was conducted offline, a number of revision requests might have been rejected before a proper tracking was ensured on GMS.

Moreover, audits conducted in 2019 revealed that changes occurred during implementation that required a revision of the approved project were not reported to the JHFU.

On another note, the Board of Auditors (BoA) pointed out in their 2019 report that some approved revision requests did not comply with the HF operational modalities (timeframe and ceiling per project/partner's risk level).

Follow up actions

OCHA HFU will continue its efforts to strengthen communication with partners. It will ensure that all revision request types and reasons are reflected on GMS. It will also enhance the capacity of the clusters and reinforce their role as part of the revision request process to give feedback on requests submitted by HF partners.

The HFU will review the projects for which the calendar exceeded and take steps to ensure that the projects are processed in accordance with the OM of the Fund.

PRINCIPLE 3

TIMELINESS

CBPFs allocate funds and save lives as humanitarian needs emerge or escalate.

9 Timely allocation

CBPFs allocation processes have an appropriate duration vis-à-vis the objectives of the allocation timeline.

Target

The average duration of all launched Standard allocation processes is 49-58 working days. The average duration of all launched Reserve allocation processes is 17-20 working days.

Results

Scores: 5/5 (very high). *Standard: the average duration of all launched standard allocations is 50 days or less. Reserve: the average duration of all launched reserve allocations is 30 days or less.*

| Milestones | Category | 2017 | 2018 | 2019 |
|---|----------------------|------|------|------|
| From allocation closing date to HC signature of the grant agreement | Standard Allocations | 63 | 37 | 46 |
| | Reserve Allocations | 12 | 20 | 22 |

Analysis

In 2018, the methodology approved by the AB was different, as it counted the average working days from the launch of the allocation to the HC final approval.

The average resulted from the 2019 Standard Allocation does not take the coordination envelope (including eight projects) into account. As the coordination strategy needed to be further revised to integrate additional elements recommended by the cluster coordinators, the allocation was re-opened after the closure of the project submission on GMS.

With all the projects included, the average working days would be 52. Considering that one of them reached 197 working days, as the Host organization for the Logistics Cluster was only confirmed in November 2019, it consequently affected the calendar.

Besides, using one single committee for the strategic and technical review of project proposals for the two last reserve allocations has helped to reduce the duration of the allocation process.

Follow up actions

In 2020, OCHA HFU will ensure that the new allocation process and workflows defined in the revised OM are respected.

Access to GMS (granted to clusters in August 2019) will enable a better tracking of the cluster strategic review inputs in real time. It will therefore help identifying the bottlenecks in the process and reinforce the mitigation measures behind.

10 Timely disbursements

Payments are processed without delay.

Target

Ten days from UNDP signature of a proposal to first payment.

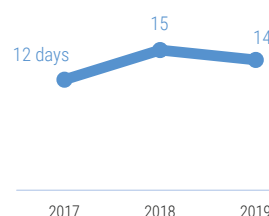
Results

Score: 4/5 (high). *The average duration from HC approval (EO clearance) to first payment is 11 to 20 days.*

The average for the Standard allocation is 11 days; and 19 days for the Reserve allocations.

AVERAGE WORKING DAYS OF PAYMENT PROCESSING

Average working days from EO signature of a proposal to first payment



Analysis

It is worth mentioning that the process may be delayed due to inaccurate information necessary for quick disbursement, including bank account details and inconsistency between partner information and bank statements. Besides, some partners need the approval from Headquarters to sign the agreement, which may also affect timeliness.

PRINCIPLE 3

TIMELINESS

The dual management of UNDP and OCHA (GMS) may have affected data management during the real time reporting of the disbursement on GMS, used as a tracking tool.

Follow up actions

OCHA HFU will ensure a timely update of accurate and complete information on GMS.

While the HF management will be fully handled by OCHA, enhancing real-time reporting of disbursement milestones on GMS, the role of MPTF will be maintained.

Therefore, the dual management of disbursement between MPTF and OCHA Headquarters will still have an impact on the timeline disbursement for NGOs, which is expected to range from 13 to 15 days. This is the case for the four Funds with a transition management. The estimated time of disbursement for UN funded projects ranges from 2 to 10 days.

11 Timely contributions

Pledging and payment of contributions to CBPFs are timely and predictable.

Target

Two thirds of annual contributions committed before the end of the first half of the year.

Results

Score: 4/5 (high). *Between 33 and 66 per cent of contributions committed before the end of the first half of the year.*

Two thirds of annual contributions were paid before the end of the first half of the year.

Analysis

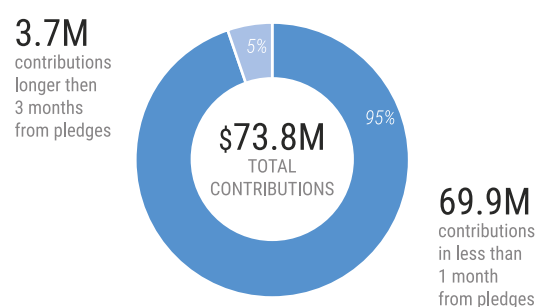
By the end of June 2019, almost 34 per cent of total annual contributions had been paid, compared to 32 per cent in 2018. Most of donor contributions (53.5 per cent) arrived in the last quarter of the year.

Over 95 per cent of all contributions were received less than one month after the pledge, allowing the HF to adopt anticipative approach to allocations' envelopes.

The funding calendar of HF donors may affect the allocation plans. On the one hand, the contributions received at the end of the year ensure an important carry-over to trigger an early response if needed at the beginning of the following year. On the other hand, little or no contribution spread over the year would have a negative impact on ensuring an effective response to potential humanitarian needs identified throughout the year.

It is worth mentioning that among nine donors from 2019 contributions, only two had multi-year commitments.

CONTRIBUTIONS TIMELINESS



Follow up actions

OCHA HFU will endeavour to widen the donor base and ensure closer dialogue with potential and actual contributing donors. A resource mobilization strategy will be developed over the course of the year in collaboration with the AB members.

OCHA HFU will continue to proactively advocate the increase of multi-year funding for more predictable financial resources and set targets for unearmarked funding for greater efforts.

PRINCIPLE 4

EFFICIENCY

Management of all processes related to CBPFs enables timely and strategic responses to identified humanitarian needs. CBPFs seek to employ effective disbursement mechanisms, minimizing transaction costs while operating in a transparent and accountable manner.

12 Efficient scale

CBPFs have a significant funding level to support the delivery of the HRPs.

Target

15 per cent of HRP funding received.

Results

Score: 4/5 (high). Allocations amount to between seven and ten per cent of the received HRP funding.

In 2019, the contributions of the DRC HF represented ten per cent of the total funding received for the HRP in DRC (\$762.2M).

Analysis

Since 2016, the HF has managed to maintain an average of ten per cent funding, channelled through the HRP.

In 2019, DRC operations were among the biggest humanitarian responses worldwide with an appeal of \$1.65 billion that aimed to provide assistance to nine million people. Due to a certain donors' fatigue, and the eruption of other new crises across the world, the contributions of the HRP in 2019 did not exceed 40 per cent of the initial requirement. Nevertheless, the continuous support and trust of HF donors ensured that the ten per cent average to the HRP is maintained. Therefore, the DRC HF has remained an important funding tool of the country HRP.

Follow up actions

In June 2019, the Pooled Fund Working Group agreed to calculate the fundraising target as 15 per cent. The annual target can be set on the basis of the previous year's HRP funding. The fundraising target could be reviewed for adjustment, in consultation with the AB, as part of the 2020 CPF.

13 Efficient prioritization

CBPF funding is prioritized in alignment with the HRP.

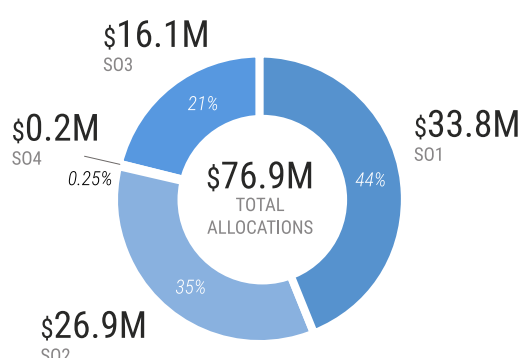
Target

100 per cent of the funded projects address the HRP strategic priorities.

Results

Score: 5/5 (very high). All or almost all projects address HRP strategic priorities and at least 80 per cent of projects are linked to HRP projects.

ALLOCATION BY HRP STRATEGIC OBJECTIVES



S01 Improve the living conditions of people affected by the crisis, starting with the most vulnerable.

S02 Protect people affected by crisis and ensure respect for their human rights.

S03 Decrease excess mortality and morbidity among the affected population.

S04 Provide rapid, effective and accountable humanitarian action in accordance with humanitarian principles and standards.

Analysis

In 2019, 44 per cent was allocated to support S01, representing four per cent of the total amount required for the objective (\$826.9 million); 35 per cent went to activities supporting S02 and 21 per cent to activities supporting the S03.

Besides, through the second reserve allocation, five projects were funded to complement the EVD Response Plan. The implemented activities are in line with the HRP (S02 and S03) and aim to interrupt the virus transmission.

Follow up actions

The DRC HF will maintain its strategic support of the HRP in 2020. The AB will be properly consulted on potential funding for identified needs outside the HRP.

PRINCIPLE 4

EFFICIENCY

14 Efficient coverage

CBPF funding reaches people in need.

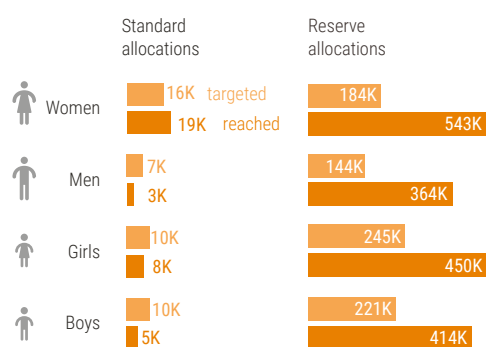
Target

80 per cent of targeted people in need have reportedly been reached.

Results

Score: 5/5 (very high). *More than 100 per cent of targeted people have been reached.*

PEOPLE TARGETED AND REACHED BY GENDER AND AGE



In thousands of persons

Analysis

While 44 per cent of the projects with results reported in 2019 did not reach all their targets due to security and access constraints, 12 projects surpassed their targets. For the latter, an important number of beneficiaries was reached, mostly in the frame of mass awareness raising activities during vaccination campaigns, prenatal consultation or access to health care. It is worth mentioning that most of the results reported in 2019 derive from projects implemented in 2018.

Follow up actions

Enhanced communication with implementing partners must be ensured throughout the project implementation in order to anticipate risks and address challenges as they arise.

Implementing partners with approved projects must provide and ensure the most updated situation assessment analysis as well as accurate information on the operating context. They also must ensure that the needs assessment captures recent developments and evolution of the situation.

15 Efficient management

CBPF management is cost-efficient and context-appropriate.

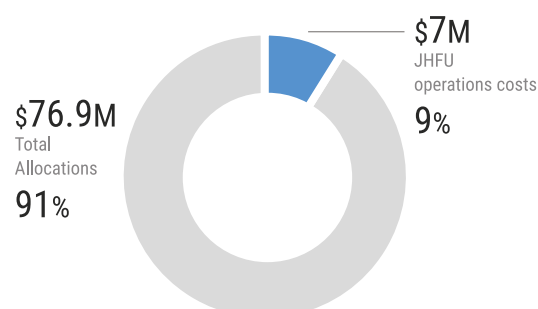
Target

JHFU (OCHA and UNDP) operations costs account for less than ten per cent of total value of utilization of the Fund.

Results

Score: 2/5 (low). *HFU operations costs (execution of cost-plan) account between eight and ten per cent of overall utilization of funds (allocations + operations costs).*

JHFU DIRECT COSTS AGAINST TOTAL ALLOCATION



Analysis

In 2019, the JHFU operations costs accounted for 9.4 per cent of total utilization of the Fund (\$84.6 million), compared to nine per cent of \$74.8 million total funds utilized in 2018.

The additional 0.4 per cent in 2019 was used to ensure that the JHFU has the necessary capacity to conduct the required assurance activities, as per the OM.

It is worth mentioning that the five per cent UNDP HFU operations costs (related to NGO-projects that will still be ongoing after December 31, 2019), was paid upfront. However, additional allocations that could be generated from potential cost extensions (requested by NGOs in 2020) will be added to the UNDP HFU operations costs of the following years.

Follow up actions

In October 2019, the AB approved the JFHU 2020 direct costs (OCHA and UNDP) amounting to \$6.06 million to ensure a smooth continuation of the MA transition.

PRINCIPLE 4

EFFICIENCY

16 Efficient management

CBPF management is compliant with management and operational standards required by the CBPF Global Guidelines.

Target

DRC HF OM updated based on the latest version of global CBPF guidelines by the end of the third quarter.

Results

Score: 3/5 (medium). *OM updated with reasonable delay; and/or annual report and allocation papers mostly compliant with global guidelines.*

The OM revised in 2018 was rolled-out in early 2019 to implementing partners and key stakeholders.

Analysis

The BoA reported in their 2019 report¹ noncompliance and weaknesses of the HF with the global guidelines and country OM in the following areas:

- Role of the Cluster and AB in the allocation processes;
- Use of GMS;
- Discrepancies between figures on GMS and atlas;
- Anti-fraud control system;
- Timely reporting of the partners ;
- Project approval in line with operational modalities;
- Timely execution of assurance activities (audits, monitoring and financial spot checks).

The revision of the DRC HF OM was triggered in 2019, alongside the preparation for the MA transition. The transitional phase has been an opportunity to identify areas of improvements as well as overdue reports and incomplete assurance activities.

Since the last quarter of the year, progress has been made, and it will continue throughout 2020. The JHFU has been ensuring that the use of GMS is maximized for traceability of all milestones in the HF process and transparency towards the different stakeholders.

Follow up actions

In 2020, OCHA HFU will strengthen its capacity to ensure a quality control of the process and the completion of its duties in terms of assurance activities. The new organigram of OCHA HFU, as approved by the AB in October 2019, includes additional programmatic and risk management staff. This additional capacity will ensure effective implementation of the new responsibilities transferred to OCHA.

In 2019, the JHFU did not consider the revision of the CPF targets as a priority, given the transitional phase. Along with the OM, the CPF targets will be revised, endorsed and adopted by the AB, ensuring that the Fund is fully in line with the Global Guidelines and that partners operational modalities are applied in a timely and consistent manner.

¹ [https://undocs.org/en/A/74/5%20\(Vol.%20I\)](https://undocs.org/en/A/74/5%20(Vol.%20I))

PRINCIPLE 5

ACCOUNTABILITY AND RISK MANAGEMENT

CBPFs manage risk and effectively monitor partner capacity and performance. CBPFs utilize a full range of accountability tools and measures.

17 Accountability to affected people

CBPF funded projects have a clear strategy to promote the participation of affected people.

Target

- All proposals are required to indicate the plan on the accountability to affected populations (AAP).
- 60 per cent of projects visited through field site monitoring have a functional complaints and feedback mechanism.
- 100 per cent of partners funded attend an awareness-raising session on their obligations regarding Prevention of Sexual Exploitation and Abuse (PSEA).
- All monitoring instances include the consultation with beneficiaries component.

Results

Score: 5/5 (very high). *All project proposals indicate AAP and all associated monitoring instances include consultation with beneficiaries component (if applicable).*

In 2019:

- All project proposals contained a plan on AAP.
- 75 per cent of the projects visited through field site monitoring in 2019 have a functional complaint and feedback mechanism.
- 100 per cent of partners attended an awareness-raising session on their obligations in terms of PSEA.
- All monitoring instances included consultation with beneficiaries.

Analysis

While most organizations developed a dedicated AAP section in their proposals – varying from complaint boxes to the presence of a staff in site, or hotlines – organizations need to strengthen the explicit involvement of beneficiaries into the design, planning and evaluations of projects. Some organizations rely (mainly) on local committees and governmental representation. Others would refer to AAP in general terms, without putting it into practice.

Follow up actions

In 2020, the AAP will be discussed with the different HF stakeholders to ensure a better elaborated plan and a strategic follow-up of this accountability component across the HF projects. Greater attention will be paid to the effectiveness of the feedback and complaints mechanisms as well as to the PSEA approach.

A Standard operating procedure (SOP) for CBPFs is being developed by the CBPF section. The HF will liaise with the compliance section and update the AB members accordingly.

18 Accountability and risk management for projects

CBPF funding is appropriately monitored, reported and audited.

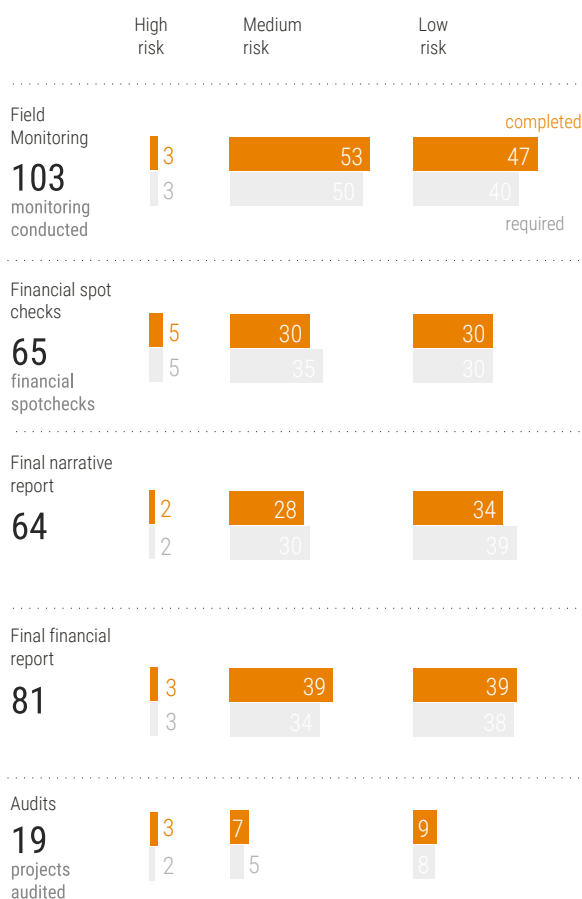
Target

100 per cent compliance with operational modalities, as per OCHA assurance dashboard.

Results

Score: 5/5 (very high). *100 per cent compliance with operational modalities, as per assurance dashboard.*

PROGRESS ON RISK MANAGEMENT ACTIVITIES



PRINCIPLE 5

ACCOUNTABILITY AND RISK MANAGEMENT

Analysis

In 2019, efforts were made to strengthen internal coordination between programme/finance and monitoring teams.

During the second half of the year, the monitoring capacity of the JHFU has been increased with three additional staff. This allowed to complete the 93 monitoring field visits due as per the operational modalities approved by the AB in November 2018. Ten additional ad hoc visits were conducted in order to ensure a follow-up on projects with poor or critical implementation. It is worth noting that 43 per cent of the projects visited did not meet the expectations.

Besides, 74 per cent of the projects faced delays in the implementation due to several factors, such as:

- Delays in recruitment process;
- Security and access issues;
- Displacement of the targeted population;
- Bad programming;
- Weak outreach.

In 2019, out of 70 financial spot checks planned as per the UNDP regulations, the JHFU was able to conduct 65 visits (55 per cent for national NGOs). The main weaknesses are included in the following areas:

- Procurement processes for good and services;
- Holding and handling of cash balances;
- Inconsistency between the total expenses justified to the JHFU and the partner's internal financial report.

In terms of audit, the DRC HF follows a risk-based approach in line with HACT modalities. In 2019, audits were 100 per cent compliant with operational modalities. All 15 required audits have been completed and cleared: a financial audit was carried out with one high-risk partner and 14 partners (low and medium) were subject to an internal control audits to assess their financial management system. Among the latter, 11 partners were rated "partially satisfactory" and were recommended for capacity building training organized by the finance team at the end of the year.

In addition, noncompliance detected through monitoring and quality assurance activities triggered the launch of four special audits. As a result, two qualified and two are still under discussion.

Follow up actions

Sustained efforts will be made to ensure compliance with the operational modalities of the DRC HF.

OCHA HFU will carry a follow-up on recommendations and findings for the different assurance activities through enhanced communication with HF partners.

All suspected fraud issues with implementing partners will be consistently reported as per the global SOPs on Suspected Fraud and Misuse of Funds, including for cases that may still fall under UNDP response management.

Furthermore, OCHA HFU will ensure that the team conducting audits in the high-risk areas is fully briefed on the identified risks and conducts a review of related areas during the audit.

19 Accountability and risk management for implementing partners

CBPF funding is allocated to partners as per the identified capacity and risk level.

Target

The number of eligible partners increases by more than five per cent in comparison to the number of new eligible partners in the previous year.

Results

Score: 2/5 (low). *The number of eligible partners does not increase in comparison to the number of eligible partners in the previous year.*

Analysis

As reported in the 2018 Annual Report, the DRC HF started the year with a pool of 223 partners eligible for funding.

The list was revised down to 177 partners eligible to the DRC HF at the beginning of 2019; 46 NGOs were made non eligible as they did not receive an HF funding for the past three years.

In March 2019, 40 partners were recommended by the clusters to be assessed as per the HACT micro-assessment process, described in the OM. As a result of the exercise, 39 partners were made eligible for HF funding in October. Those new partners were called to finalize their Due Diligence, a step that became mandatory with the transitional phase (OCHA management). Finally, 19 partners did not succeed the exercise and were therefore excluded from the list. The year 2019 ended with 196 eligible partners for funding in 2020.

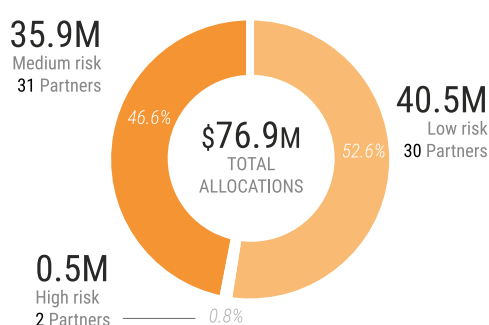
PRINCIPLE 5

ACCOUNTABILITY AND RISK MANAGEMENT

Moreover, four partners undertook a review of their risk level as per the HACT process. The new risk levels were captured in GMS and adopted for future funding during the year.

IMPLEMENTATION BY PARTNER RISK LEVEL TYPE

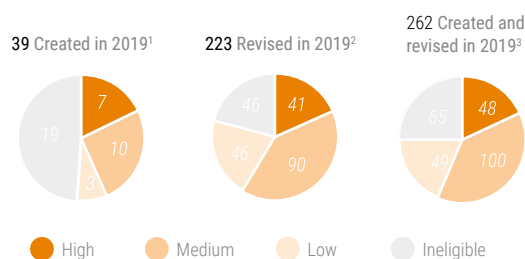
Implementation by partner risk level type



Risk assessed: the partner performance index was not rolled out for the DRC HF in 2019. Partner risk level has been updated in line with HACT re-evaluation of existing HF partners.

Number of capacity assessment conducted

40 New Capacity assessments conducted during the year



¹ Capacity assessment is created and conducted in 2019. Note that only 34 were created in GMS; 2 partners were already registered in GMS; 3 were eventually not created for they did not provide the required documents.

² Capacity assessment is only revised in 2019, regardless of what year it was created

³ Capacity assessment is created, conducted and revised in 2019

Follow up actions

The MA transition revealed that the Partners Performance Index (PPI) was not updated on GMS since the launch of the platform. Therefore, the performance of partners with projects that ended between 2015 and 2019 was reviewed and verified by the JHFU in December 2019.

The results will be shared with partners in early 2020 before approval on the system for confirmation.

As highlighted in the BoA report, more scrutiny will be ensured to reach 100 per cent compliance with the HF modalities (ceiling and timeframes of projects) per partners' risk levels.

Review of existing Due Diligence, micro-assessments and risk levels of partners will be undertaken (as it was made mandatory for the MA transition). OCHA HFU will ensure that all relevant documentation and recommendations or audit findings are on GMS. The accountability framework, including the capacity assessment (CA) and the risk mapping, will be revised in close coordination with the AB. This will inform the CA modality as well as the absorption capacity of HF new partners.

20 Accountability and risk management of funding

Appropriate oversight and assurances of funding administered channeled through CBPFs.

Target

All potential diversion or fraud cases are treated in compliance with CBPF SOPs on fraud management and the UNDP Antifraud policy. Compliance issues are reported to the AB on a quarterly basis.

Results

Score: 5/5 (very high). *All potential diversion or fraud cases are treated in compliance with CBPF SOPs on fraud management.*

In 2019, 21 partners were subject to incidents; including 11 national and seven international organizations. Compliance issues were reported to the AB in February, April and October 2019.

Analysis

In October 2019, as part of the MA data transition, the JHFU identified discrepancies between the actual number of noncompliance cases and incidents that were reported to the AB and Headquarters. Therefore, 21 cases were tracked in detail and a full record was shared at the beginning of 2020.

PRINCIPLE 5

ACCOUNTABILITY AND RISK MANAGEMENT

REPORTED INCIDENTS AND NONCOMPLIANCE CASES



21
reported
cases and
incidents



5
on-going
cases

The breakdown of the 21 cases is as follows:

- Three (3) incident reports were submitted by implementing partners, alerting on the financial impact on activities due to natural hazards and security incidents. The JHFU followed up with partners to ensure compliance with the related SOPs. Given the volatile context of DRC in 2019, this is considered as a low rate reporting from implementing partners.
- Projects of 18 partners were subject of noncompliance with the HF rules and regulations. The total budget affected by the related projects amounted to \$7.1 million. The estimated financial impact on the HF is up to \$1.6 million maximum and exact figure will be defined as progress is made with the verification exercises.

The 18 cases are as detailed below:

- Seven partners under financial audit: six partners reimbursed the due amount and their file is closed; one case is pending, and the partner is made ineligible for funding until action is taken ahead.
- Four noncompliance cases identified under financial spot check: as per the joint action plan with the partner, three cases are closed, and one is still under suspension of eligibility.
- Seven partners under investigation or special audits: four cases are closed; one is still under investigation; final reports of two cases were received and are under final review.

A report detailing the status of these 21 cases was shared with HF donors.

In addition to all the above, in January 2019, a big cash and voucher fraud scheme in the Rapid Response to Population Movements (RRPM) mechanism was reported to the HCT in DRC. Consequently, the former HC informed the DRC HF donors and partners that there was no evidence that DRC HF projects had been affected by this fraud scheme.

The JHFU reviewed the DRC HF allocations for projects in the geographical area, where the fraud scheme took place and identified four projects that could have had a linkage to that specific fraud scheme:

- One project, implemented by UNICEF, contributed to the RRPM. As it was completed in April 2017, the project was not included in UNICEF's investigation process in response to the fraud scheme.
- Two projects started at the end of 2018 and were therefore in the early stages of implementation when the fraud scheme was uncovered. During subsequent financial spot checks, some weaknesses were identified in the internal control mechanisms reported on GMS for the partners' follow-up.
- One project was implemented between July 2018 and June 2019. The financial spot-check conducted in November 2018 was followed by a second spot check exercise in April 2019, but no evidence was found in relation to the RRPM fraud case.

The JHFU has been following up with the partners to ensure the appropriate actions are taken to strengthen their internal controls mechanisms. Furthermore, the three concerned partners were enrolled for the upcoming financial exercise planned for March 2020.

In addition, an HCT anti-fraud task force was established, including a strategic-level cell in Kinshasa and a technical-level cell in Goma. The HCT has been an active member of the anti-fraud task force and will ensure that the group's actions and recommendations are integrated into the day-to-day management of the Fund, when necessary.

Follow up actions

In 2020, the transition of the DRC HF from UNDP to OCHA is seen as another opportunity to review whether any additional measures can further improve compliance and fraud prevention.

Several actions have been taken at the end of the year, and will continue in 2020, in order to strengthen the risk management of the DRC HF, such as the increase of OCHA HFU risk management capacity. This will help to ensure that all instances of potential diversion or fraud are timely reported to donors and treated in compliance with the CBPFs and the HF SOPs on fraud management.

A new cases module will be created on GMS, to ensure a better tracking in respect to the appropriate HF SOPs milestones (OCHA or UNDP).

OCHA HFU will further scale up fraud awareness and prevention activities with HF partners and strengthen communication to ensure better reporting of the upcoming incidents encountered during the implementation phase.

Regarding the RRPM fraud scheme, the anti-fraud task force has developed an action plan with collective and individual risk mitigation measures that humanitarian

actors can use in rapid response operations. In addition, the UK's Department for International Development (DFID) has offered to fund the Operational Review on fraud.

In parallel, the organizations that were potentially impacted by the RRPM fraud have immediately reacted by implementing mitigating measures and triggering their own internal verification mechanisms. Through the Anti-Fraud Task Force, OCHA HFU will analyze the experience and apply the lessons learned, when relevant on future HF activities.



Mutshima, Kasai

Improvement of physical access for humanitarian assistance.
Road opening, by national partner CEILU.

© OCHA/Alioune Ndiaye

DRC HF 2019 ANNUAL REPORT

ACHIEVEMENTS BY CLUSTER

This section of the Annual Report provides a brief overview of the DRC HF allocations per cluster, targets and reported results, as well as lessons learned from 2019.

The cluster level reports highlight indicator achievements against planned targets based on narrative reports submitted by partners within the reporting period, 1 February 2019 to 31 January 2020. The achievements indicated include reported achievements against targets from projects funded in 2016 (when applicable), 2017, 2018 and/or 2019, but whose reports were submitted between 1 February 2019 and 31 January 2020. The bulk of the projects funded in 2019 are still under implementation and the respective achievements against targets will be reported in the subsequent DRC HF reports.

ACHIEVEMENTS BY CLUSTER

EDUCATION



Allocations in 2019

| ALLOCATIONS | PROJECTS | PARTNERS |
|---------------|----------|----------|
| \$5.2M | 8 | 7 |

| TARGETED PEOPLE | WOMEN | MEN |
|-----------------|---------------|---------------|
| 72,821 | 6,358 | 8,402 |
| | GIRLS | BOYS |
| | 28,664 | 29,397 |

Results reported in 2019

| | ALLOCATIONS ¹ | PROJECTS | PARTNERS |
|------|--------------------------|----------|----------|
| 2016 | \$0.7M | 2 | 2 |
| 2017 | \$0.07M | 1 | 1 |
| 2018 | \$1M | 4 | 4 |

| OUTPUT INDICATORS | | TARGETED | ACHIEVED | % |
|--|--------------|----------|----------|-----|
| Children provided with school, educational and recreational supplies | <i>Girls</i> | 8,819 | 10,746 | 122 |
| | <i>Boys</i> | 9,515 | 12,149 | 128 |
| Children (between 5 and 11) reintegrated into the school system | <i>Girls</i> | 1,706 | 1,386 | 81 |
| | <i>Boys</i> | 1,705 | 1,947 | 114 |
| Children (between 6 and 11) who benefited from remedial classes | <i>Girls</i> | 6,903 | 7,609 | 110 |
| | <i>Boys</i> | 7,681 | 8,608 | 112 |

CLUSTER OBJECTIVES

Objective 1: Ensure inclusive access to safe and protective learning spaces contributing to the protection, development and well-being of all girls and boys affected by disaster or conflict.

Objective 2: Improve the quality and the relevance of education as well as the learning conditions in an emergency context.

LEAD ORGANIZATIONS

UNICEF, SCI (co-lead)

As per the HRP 2019, population movements and cholera epidemics left nearly 1.8 million children in need of education in DRC, including 94 per cent internally displaced and returnee children. The DRC HF 2019 allocations targeted return areas affected by conflict, where basic social infrastructures had been destroyed or damaged. Eight funded projects were mainly implemented in the Kivus, Ituri and Kasai central, and continue in 2020. The standard allocation promoted a comprehensive package with Child protection and WASH activities, such as providing handwashing stations and latrines in targeted health facilities schools.

Responding to the dire needs, DRC HF funding helped more than 3,300 children aged between 5 and 11 to reintegrate the education system in 2019. During the year, 30 classrooms were rehabilitated and equipped (including latrines), and nearly 23,000 children were provided with school supplies.

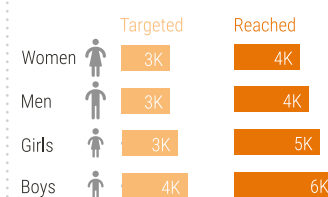
In line with the ERC priority to deliver quality education in protracted crises, the DRC HF will consider increasing funding towards the Education Cluster in 2020.

PEOPLE TARGETED

12,604

PEOPLE REACHED

18,834



| OUTPUT INDICATORS | TARGETED | ACHIEVED | % |
|---|----------|----------|-----|
| Schoolteachers who participated in a training (peace education, national curriculum, psychosocial support in schools) | 1,117 | 1,123 | 100 |
| School kits distributed (educational, recreational) | 7,434 | 7,527 | 101 |
| Rehabilitated and equipped classrooms (including latrines) | 30 | 30 | 100 |

¹ Results are based on 2019 data and may be underreported as implementation of projects and project-level reporting often continues into the subsequent year. For explanation of data see page 6.



Kamiji, Lomami
Community participating in the construction of classrooms for the Katongo primary school.
© OCHA/Richard Mutchapa

Community hands at work !

Olivier, 11, is happy to study in a classroom built with bricks. Since the beginning of his education, Olivier had only known classrooms built with straw. *“After each rain, we had to go to the bush to fetch straw, with the risk of being bitten by snakes”,* he recalls. Today, Olivier is studying in better conditions. The rain no longer prevents him from attending classes. *“My classroom is covered with metal sheets; it also has desks and a blackboard that allows us to read well the lessons. We are very happy.”* His school has now two new buildings as well as latrines that everyone can use.

“We also received uniforms, school bags, notebooks and pens.” With new school supplies, most children have found their way back to school.

The Kasai crisis of 2016 has had devastating effects on education and child protection. In July 2017, the Education Cluster estimated that 309,000 children were deprived of education as a result of the conflict. While the education system was already precarious, several schools in the Kamiji Health zone were burned and looted, leaving thousands of children out of school and vulnerable ones to exploitation, abuse and recruitment by armed groups.

In October 2018, in support of the operational plans implemented in Kasai, the DRC Humanitarian Fund launched a reserve allocation of US\$ 9 million, enabling DRC HF partners like Save the Children to benefit from an envelope to implement a 12-month project in a specific area.

To carry out the intervention in Kamiji, Save The Children first sensitized the beneficiary community to the development of school improvement plans, and encouraged their participation in the construction of the school buildings. *“The members of the organization told us that we could make bricks, bring water or secure the materials. Then, the whole village mobilized to seize the opportunity, and to allow our children to study in good conditions”,* explains François Beya, a parent and community member.

Without the commitment of the beneficiary community, this project would not have succeeded. A total of 90 classrooms made of semi-durable materials and 90 latrines were built in 15 targeted schools in the Kamiji educational sub-division.

Thanks to the partner’s intervention, over 5,630 students (51 per cent girls and 49 per cent boys) benefited from school supplies; 52 children who had left militias were taken care of in transitional host families; and 61 unaccompanied children (31 girls and 30 boys) were reunited with their families and communities.

With a small budget and thanks to the community involvement, children of Kamiji benefit from good learning conditions.

ACHIEVEMENTS BY CLUSTER

FOOD SECURITY



Allocations in 2019

| ALLOCATIONS | PROJECTS | PARTNERS |
|---------------|-----------|-----------|
| \$8.5M | 15 | 13 |

| TARGETED PEOPLE | WOMEN | MEN |
|-----------------|---------------|---------------|
| 179,499 | 44,927 | 34,596 |
| | GIRLS | BOYS |
| | 53,074 | 46,902 |

Results reported in 2019

| | ALLOCATIONS ¹ | PROJECTS | PARTNERS |
|------|--------------------------|-----------|----------|
| 2016 | \$1.2M | 2 | 2 |
| 2017 | \$0.7M | 1 | 1 |
| 2018 | \$4.6M | 10 | 8 |

| OUTPUT INDICATORS | | TARGETED | ACHIEVED | % |
|---|-------|----------|----------|-----|
| People in need, who received food assistance through a fair or voucher programme | Women | 9,238 | 8,289 | 90 |
| | Girls | 13,162 | 12,041 | 91 |
| | Men | 6,988 | 8,439 | 120 |
| | Boys | 11,132 | 9,463 | 85 |
| People in need, who received food assistance through cash transfer or direct distribution | Women | 6,086 | 6,935 | 114 |
| | Girls | 12,033 | 9,323 | 77 |
| | Men | 5,621 | 6,529 | 116 |
| | Boys | 9,835 | 10,314 | 105 |

CLUSTER OBJECTIVES

Objective 1: Ensure access to basic food items for households affected by the crisis.

Objective 2: Ensure the protection and rehabilitation of livelihoods of people affected by the crisis.

Objective 3: Support the production and distribution chain as well as income generating activities.

LEAD ORGANIZATIONS

FAO, WFP, ACTED (co-facilitator)

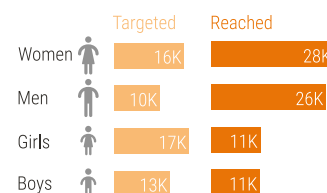
According to the IPC 16th cycle, 12.8 million people were in situation of food insecurity, among which 2.9 million in a state of food emergency. During the year, the DRC HF granted \$8.5 million to assist the most vulnerable families, including displaced people and returnees, through food assistance (cash assistance or in-kind), as well as to strengthen their resilience and improve food security in seven provinces (Haut-Katanga, Ituri, Kasai Central, Maniema, North Kivu, South Kivu, and Tanganyika).

DRC HF funding has been instrumental in supporting CASH-related activities, such as cash and voucher assistance; supporting early recovery cash transfers for vulnerable displaced and returnee families; using Cash for Work to rehabilitate damaged markets, collection points and demonstration crop fields to help revive agricultural production; as well as providing conditional cash assistance to ensure the availability of seeds. Other projects involved home-gardening activities and capacity building.

As per the achievements reported by the partners in 2019, more than 10,000 people, 68 per cent of whom were women, strengthened their knowledge in food production. Over 83,500 people in need received food assistance through a fair or voucher programme, cash transfer or direct distribution.

PEOPLE TARGETED

56,724



PEOPLE REACHED

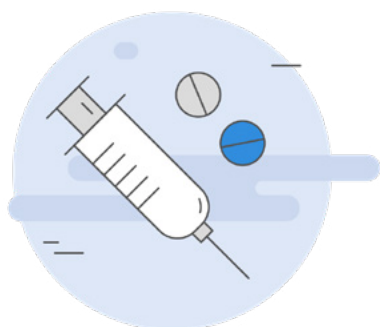
77,244

| OUTPUT INDICATORS | | TARGETED | ACHIEVED | % |
|---|-------|----------|----------|-----|
| Heads of livestock distributed | | 1,510 | 1,510 | 100 |
| Hectares prepared for cultivation (food crops, market gardening) | | 2,424 | 2,390 | 98 |
| Households who received agricultural inputs and farm equipment | | 10,564 | 10,348 | 98 |
| People trained in food production (including fishing, cultivating, rearing, etc.) | Women | 7,311 | 6,928 | 94 |
| | Men | 2,992 | 3,309 | 110 |

¹ Results are based on 2019 data and may be underreported as implementation of projects and project-level reporting often continues into the subsequent year. For explanation of data see page 6.

ACHIEVEMENTS BY CLUSTER

HEALTH



CLUSTER OBJECTIVES

Objective 1: Ensure access to basic healthcare for displaced, returnee and host communities, as well as their empowerment through the Minimum Package of Activities and the purchase of kits.

Objective 2: Ensure the basic rights of victims of violence are respected and necessary remedial actions are taken.

Objective 3: Reduce the impact of epidemics and mortality through care for affected and at risk people.

LEAD ORGANIZATIONS

WHO, MDA (co-facilitator)

Allocations in 2019

| ALLOCATIONS | PROJECTS | PARTNERS |
|------------------|------------------|------------------|
| \$16.5M | 28 | 17 |
| TARGETED PEOPLE | WOMEN | MEN |
| 2,347,480 | 150,784 | 112,314 |
| | GIRLS | BOYS |
| | 1,072,765 | 1,011,617 |

Results reported in 2019

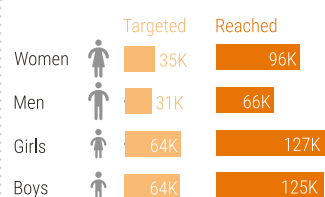
| | ALLOCATIONS ¹ | PROJECTS | PARTNERS |
|------|--------------------------|-----------|-----------|
| 2016 | \$0.3M | 1 | 1 |
| 2017 | \$0.3M | 1 | 1 |
| 2018 | \$6.4M | 17 | 10 |
| 2019 | \$0.6M | 1 | 1 |

PEOPLE TARGETED

194,852

PEOPLE REACHED

414,142



In 2019, the Health Cluster received the highest proportion of DRC HF funding, with \$16.5 million (a considerable increase compared to \$9.3 million in 2018). Through the Standard allocation, the DRC HF prioritized early response to cholera epidemics, supporting medical care and free access to treatment through the installation of cholera-specific structures. During the year, the DRC HF has also been critical to respond to the measles epidemic, with \$4.2 million funding leading to increased vaccination coverage in ten provinces. In May, the Fund supported the response to EVD in North Kivu and Ituri, with complementary health-related activities such as rehabilitating health structures and strengthening the capacities of community relays on the prevention of epidemic diseases. With 8.1 million people in need of assistance in health, other projects were funded to provide health facilities with basic medical equipment and essential medicines; ensure that returnees, displaced people and host families receive free quality health care, including through mobile clinics; and reinforce capacity building and awareness raising among the communities.

As reported by the partners in 2019, over 363,000 people affected by the crisis received access to basic healthcare services, 70 per cent of whom were women and children. To limit the spread of the measles epidemic, more than 21,000 children were vaccinated and 6,855 cases of STI were treated. Additionally, 130 health infrastructures were rehabilitated and equipped with basic medical equipment and essential medicines, and 7,361 childbirths were assisted by a health professional.

¹ Results are based on 2019 data and may be underreported as implementation of projects and project-level reporting often continues into the subsequent year. For explanation of data see page 6.

| OUTPUT INDICATORS | | TARGETED | ACHIEVED | % | OUTPUT INDICATORS | | TARGETED | ACHIEVED | % |
|---|--------------|----------|----------|-----|--|--|----------|----------|-----|
| Affected people with access to basic healthcare | <i>Women</i> | 87,872 | 127,246 | 145 | Children of 6 months to 59 months vaccinated against measles | | 200 | 484 | 242 |
| | <i>Girls</i> | 54,028 | 57,795 | 106 | | | | | |
| | <i>Men</i> | 66,835 | 99,814 | 149 | Children between 6 months and 14 years old vaccinated against measles | | 8,772 | 20,730 | 236 |
| | <i>Boys</i> | 50,279 | 50,548 | 100 | | | | | |
| People sensitized on disease prevention | <i>Women</i> | 96,466 | 212,377 | 220 | Health infrastructures rehabilitated and equipped with basic medical equipment and essential medicines | | 141 | 130 | 92 |
| | <i>Girls</i> | 79,331 | 78,428 | 98 | | | | | |
| | <i>Men</i> | 85,023 | 157,100 | 184 | Medical emergencies, obstetric & neonatal complications supported by qualified staff | | 1,155 | 1,178 | 101 |
| | <i>Boys</i> | 69,187 | 70,035 | 101 | | | | | |
| Cases of STI treated | <i>Women</i> | 6,778 | 2,076 | 30 | | | | | |
| | <i>Men</i> | 3,832 | 1,364 | 35 | | | | | |



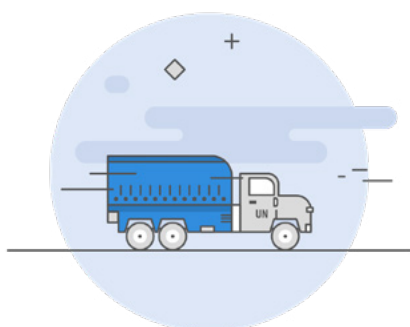
Kalemie, Tanganyika.

Staff of national partner AIDES at a briefing session in a rehabilitated Cholera treatment unit.

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ACHIEVEMENTS BY CLUSTER

LOGISTICS



CLUSTER OBJECTIVES

Objective 1: Improve household immediate access to food through provision of unconditional transfer depending on the severity of food insecurity and seasonality of the livelihoods.

Objective 2: Increase productive capacity of rural and urban livelihoods through the provision of seasonally appropriate and livelihood specific inputs.

Objective 3: Support the rehabilitation and or the restoration of household and community productive assets and capacity to build resilience to withstand future shocks and prevent further deterioration.

LEAD ORGANIZATIONS

WFP, FHIDAH (co-facilitator)

Allocations in 2019

| ALLOCATIONS | PROJECTS | PARTNERS |
|-----------------|--------------|--------------|
| \$6.1M | 10 | 6 |
| TARGETED PEOPLE | WOMEN | MEN |
| 4,341 | 2,134 | 1,997 |
| | GIRLS | BOYS |
| | 30 | 180 |

In 2019, the DRC HF granted \$6.1 million (compared to \$4.3 million in 2018) to improve physical access through emergency rehabilitation of road infrastructure in eight provinces. The removal of physical obstacles should facilitate the delivery of humanitarian aid to vulnerable populations and allow displaced, returnee and refugee populations to access markets. While in 2018 the DRC HF provided emergency funding to UNHAS, it has been once again instrumental in 2019 in supporting the rehabilitation of the Tshikapa airstrip with \$150,000 funding, thereby allowing the humanitarian community to continue to provide assistance to more than 400,000 vulnerable people targeted by the HRP in the Kasai province.

As per the achievements reported by the partners in 2019, 463 km of road were rehabilitated (which is five times more than in 2018), as well as 62 bridges and 603 black spots in five provinces, thus improving access and enabling better reach of humanitarian assistance. Yet, it is worth noting that some partners faced multiple challenges such as security constraints and weather forecast during the year. The DRC HF is following up with them to ensure continuity.

Results reported in 2019

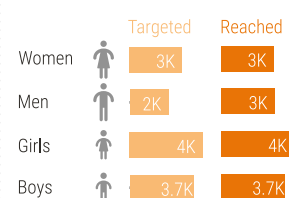
| ALLOCATIONS ¹ | PROJECTS | PARTNERS |
|--------------------------|----------|----------|
| 2016 \$0.4M | 1 | 1 |
| 2017 \$1.4 | 1 | 1 |
| 2018 \$2.1M | 7 | 6 |

PEOPLE TARGETED

13,169

PEOPLE REACHED

14,018



| OUTPUT INDICATORS | TARGETED | ACHIEVED | % |
|--|----------|----------|-----|
| Km of road rehabilitated | 499 | 463 | 93 |
| Black spots rehabilitated (quagmires, water crossings, etc.) | 525 | 603 | 114 |
| Bridges rehabilitated or built | 60 | 62 | 103 |

| OUTPUT INDICATORS | TARGETED | ACHIEVED | % |
|---|----------|----------|-----|
| Day labourers involved in rehabilitation or construction work | | | |
| Women | 60 | 75 | 125 |
| Men | 293 | 322 | 110 |

¹ Results are based on 2019 data and may be underreported as implementation of projects and project-level reporting often continues into the subsequent year. For explanation of data see page 6.

ACHIEVEMENTS BY CLUSTER

NUTRITION



Allocations in 2019

| ALLOCATIONS | PROJECTS | PARTNERS |
|---------------|-----------|-----------|
| \$5.9M | 13 | 10 |

| TARGETED PEOPLE | WOMEN | MEN |
|-----------------|---------------|---------------|
| 195,728 | 58,188 | 30,264 |
| | GIRLS | BOYS |
| | 54,301 | 52,975 |

Results reported in 2019

| | ALLOCATIONS ¹ | PROJECTS | PARTNERS |
|------|--------------------------|-----------|----------|
| 2016 | \$0.1M | 1 | 1 |
| 2017 | \$0.7M | 1 | 1 |
| 2018 | \$2.9M | 11 | 8 |
| 2019 | \$0.4M | 1 | 1 |

| OUTPUT INDICATORS | | TARGETED | ACHIEVED | % |
|---|--------------|----------|----------|-----|
| Children with severe acute malnutrition treated | <i>Girls</i> | 7,143 | 7,367 | 103 |
| | <i>Boys</i> | 6,191 | 6,867 | 110 |
| Children with moderate acute malnutrition treated | <i>Girls</i> | 1,534 | 3,234 | 210 |
| | <i>Boys</i> | 1,495 | 2,851 | 190 |
| Children discharged from nutritional centers | <i>Girls</i> | 3,439 | 1,590 | 46 |
| | <i>Boys</i> | 3,624 | 1,647 | 45 |
| People admitted to nutritional structures | <i>Women</i> | 569 | 579 | 119 |
| | <i>Girls</i> | 2,818 | 3,234 | 114 |
| | <i>Boys</i> | 2,665 | 2,077 | 77 |

CLUSTER OBJECTIVES

Objective 1: Provide an adequate nutritional response to the most vulnerable groups (children under five, nursing and/or pregnant women, people living with tuberculosis or HIV/AIDS).

LEAD ORGANIZATIONS

UNICEF, COOPI (co-facilitator)

As per the HRP 2019, 5.2 million vulnerable people needed assistance in nutrition, among which 3 million children with moderate malnutrition, and 1.3 million children with acute malnutrition. The DRC HF was instrumental in supporting the Nutrition Cluster to improve access to acute malnourished children in seven provinces (Mai-Ndombe, Haut-Katanga, Ituri, Kasai, North Kivu, South Kivu and Tanganyika). Strategically, the DRC HF promoted inter-cluster collaboration between health, WASH and nutrition clusters which contributed to increasing the effectiveness of nutrition interventions. Projects involved mainly helped to establish active mass screening for malnutrition with Nutrition community actors; support nutritional facilities; provide minimum WASH packages in nutritional care centres, additional Plumpy Nut supplies, inputs for water purification and hygiene kits to malnourished children; and ensure awareness raising on hygiene promotion, breastfeeding, complementary feeding, and WASH incidence on malnutrition. In July, DRC HF funding enabled partners operational in Yumbi to continue their activities aimed at providing treatment of severe and moderate acute malnutrition in the populations affected by the crisis.

The results reported by the partners in 2019 show that almost 25,000 children suffering from severe acute malnutrition and more than 6,000 children suffering from moderate acute malnutrition were treated.

PEOPLE TARGETED

40,562

PEOPLE REACHED

38,988

| | Targeted | Reached |
|-------|----------|---------|
| Women | 10K | 12K |
| Men | 3K | 9K |
| Girls | 14K | 10K |
| Boys | 12K | 8K |

| OUTPUT INDICATORS | TARGETED | ACHIEVED | % |
|---|----------|----------|-----|
| Supported and functional nutritional structures | 138 | 141 | 102 |
| Awareness-raising sessions organized (cooking demonstration, social mobilization, support groups) | 9,188 | 9,314 | 101 |
| People reached through awareness-raising sessions | 35,107 | 57,995 | 165 |

¹ Results are based on 2019 data and may be underreported as implementation of projects and project-level reporting often continues into the subsequent year. For explanation of data see page 6.

ACHIEVEMENTS BY CLUSTER

PROTECTION



Allocations in 2019

| ALLOCATIONS | PROJECTS | PARTNERS |
|-----------------|----------------|----------------|
| \$11M | 31 | 26 |
| TARGETED PEOPLE | WOMEN | MEN |
| 881,537 | 227,636 | 192,078 |
| | GIRLS | BOYS |
| | 242,100 | 219,724 |

Results reported in 2019

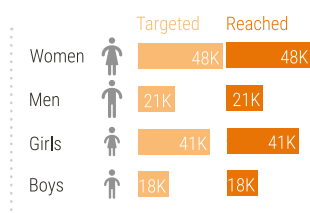
| | ALLOCATIONS ¹ | PROJECTS | PARTNERS |
|------|--------------------------|-----------|----------|
| 2016 | \$0.9M | 4 | 4 |
| 2017 | \$0.3M | 3 | 3 |
| 2018 | \$3.2M | 13 | 8 |

PEOPLE TARGETED

128,348

PEOPLE REACHED

128,348



CLUSTER OBJECTIVES

Objective 1: Prevent and reduce the risk of human rights violations.

Objective 2: Respond to human rights violations while exploring appropriate forms of reparation.

Objective 3: Reinforced efforts to find sustainable and/or resilient solutions for individuals and communities in zones with IDPs, Returnees and resettlement.

LEAD ORGANIZATIONS

UNHCR, NRC (co-facilitator)

Child Protection: UNICEF, SCI (co-facilitator)

Housing, Land & Property: UNHCR, NRC (co-facilitator)

Mine Action: UNMAS

SGBV: UNFPA

Conflict and population movements remained a threat for people in need and their right to protection. In 2019, 5.7 million people needed assistance in protection, including 77 per cent mine risk persons, 14 per cent survivors of GBV and 3.5 per cent in need of child protection. Given the centrality of protection in the humanitarian response, the DRC HF increased funding to protection (with \$11 million, compared to \$7.4 million in 2018).

Thanks to the HF projects, it was possible to respond to the main protection concerns, including the sub-clusters SGBV and Child Protection. In line with the community-based approach, activities helped to strengthen community capacity and protection mechanism as well as reinforce protection monitoring including conflict resolution, anti-mine support actions and peaceful coexistence in return areas. In Child Protection and SGBV respectively, activities related to the reintegration of children released from armed groups, referral systems, prevention and care for victims of SGBV were successfully carried out during the year. Around 406 unaccompanied or separated children were reunited with their families and 2,845 victims of sexual violence received holistic assistance, 83 per cent of whom were women and girls.

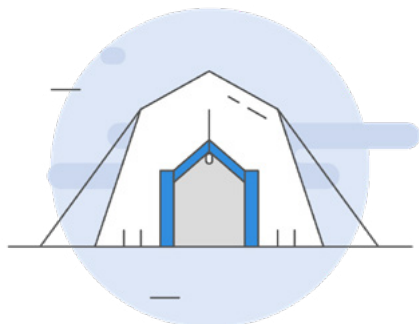
| OUTPUT INDICATORS | | TARGETED | ACHIEVED | % |
|---|-------|----------|----------|-----|
| Victims of sexual violence received holistic assistance (medical, psychosocial, legal, economic care) | Women | 1,095 | 1,290 | 118 |
| | Girls | 1,108 | 1,075 | 97 |
| | Men | 212 | 148 | 70 |
| | Boys | 389 | 332 | 85 |
| Unaccompanied or separated children reunited with their families | Girls | 219 | 196 | 89 |
| | Boys | 231 | 210 | 90 |
| Unaccompanied or separated children provided with assistance (medical, psychosocial, school) | Girls | 295 | 278 | 94 |
| | Boys | 275 | 253 | 92 |

| OUTPUT INDICATORS | | TARGETED | ACHIEVED | % |
|---|-------|----------|----------|-----|
| Children separated from armed groups provided with assistance (medical, psychosocial, school) | Girls | 192 | 205 | 106 |
| | Boys | 508 | 496 | 98 |
| People reached by awareness-raising on international protection standards | Women | 73,168 | 76,112 | 104 |
| | Men | 50,946 | 56,948 | 111 |

¹ Results are based on 2019 data and may be underreported as implementation of projects and project-level reporting often continues into the subsequent year. For explanation of data see page 6.

ACHIEVEMENTS BY CLUSTER

SHELTER & NON-FOOD ITEMS



Allocations in 2019

| ALLOCATIONS | PROJECTS | PARTNERS |
|-----------------|---------------|---------------|
| \$6.5M | 13 | 10 |
| TARGETED PEOPLE | WOMEN | MEN |
| 119,277 | 26,919 | 23,194 |
| | Girls | Boys |
| | 37,563 | 31,601 |

Results reported in 2019

| | ALLOCATIONS ¹ | PROJECTS | PARTNERS |
|------|--------------------------|-----------|----------|
| 2017 | \$1.4M | 1 | 1 |
| 2018 | \$3.6M | 10 | 7 |

PEOPLE TARGETED

50,930

PEOPLE REACHED

54,305

| | Targeted | Reached |
|-------|----------|---------|
| Women | 10K | 11K |
| Men | 10K | 11K |
| Girls | 15K | 16K |
| Boys | 15K | 16K |

CLUSTER OBJECTIVES

Objective 1: Households and/or vulnerable individuals affected by conflicts, population movements and destructive natural phenomena have better access to appropriate MEAs that enable them to carry out their activities and provide them with the basic daily survival, protection, well-being and dignity.

Objective 2: Households and/or vulnerable individuals affected by conflicts, population movements and destructive natural phenomena have better access to quality shelter that ensures their survival, the protection, well-being and dignity.

LEAD ORGANIZATIONS

UNICEF, UNHCR

CCCM: OIM

In 2019, the DRC HF provided \$6.5 million to the Shelter & NFI Cluster, encouraging partners to follow a community-based approach. The activities mainly included needs assessments, market analyses and vulnerability studies; distribution of materials to households for the construction of shelters and latrines; distribution of shelter and NFI kits, and cash assistance. More than 119,000 vulnerable people were targeted by the interventions in eight provinces.

In June, renewed violence in Ituri led to the displacement of over 360,000 people, with urgent humanitarian needs. While there is no Camp Coordination and Camp Management (CCCM) Cluster in DRC, the strategy of the third reserve allocation considered CCCM needs. The DRC HF thereby contributed to the opening of a new displacement site in Bunia with a \$2 million funding aiming to support community infrastructure and roads to accommodate the influx of new IDPs, and to provide shelter & NFI, health, nutrition and WASH services, while decongesting existing sites.

As per the achievements reported by the partners in 2019, nearly 27,000 households received assistance in NFI through cash or voucher assistance. Moreover, over 19,000 long-term displaced and returnees were provided with shelters.

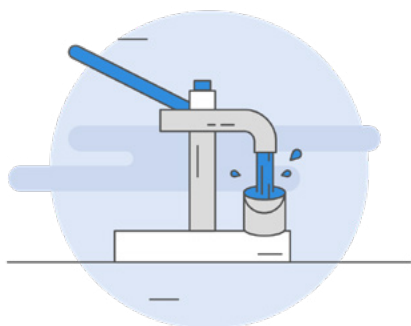
| OUTPUT INDICATORS | TARGETED | ACHIEVED | % |
|--|----------|----------|-----|
| Households assisted in NFI with cash or voucher assistance (including fairs) | 24,160 | 26,771 | 111 |
| Households assisted in NFI with conditional cash | 1,412 | 1,412 | 100 |
| Households assisted in shelter with unconditional cash | 1,760 | 1,762 | 100 |

| OUTPUT INDICATORS | TARGETED | ACHIEVED | % |
|--|----------|----------|----|
| Long-term displaced people & returnees assisted in shelters | 36,010 | 19,331 | 54 |
| Emergency, intimate hygiene kits for women & girls distributed | 9,956 | 7,457 | 74 |

¹ Results are based on 2019 data and may be underreported as implementation of projects and project-level reporting often continues into the subsequent year. For explanation of data see page 6.

ACHIEVEMENTS BY CLUSTER

WATER, SANITATION & HYGIENE



Allocations in 2019

| ALLOCATIONS | PROJECTS | PARTNERS |
|------------------|----------------|----------------|
| \$15.1M | 24 | 18 |
| TARGETED PEOPLE | WOMEN | MEN |
| 1,299,850 | 286,484 | 242,729 |
| | GIRLS | BOYS |
| | 400,436 | 370,201 |

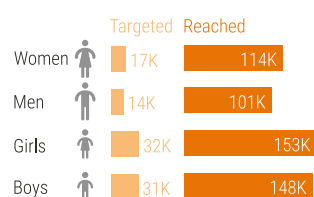
Results reported in 2019

| | ALLOCATIONS ¹ | PROJECTS | PARTNERS |
|------|--------------------------|-----------|-----------|
| 2016 | \$0.4M | 1 | 1 |
| 2017 | \$0.3M | 2 | 2 |
| 2018 | \$5.6M | 15 | 13 |

PEOPLE TARGETED

94,557

PEOPLE REACHED

516,669

| OUTPUT INDICATORS | | TARGETED | ACHIEVED | % |
|--|-------|----------|----------|-----|
| People with access to clean water | Women | 33,339 | 29,848 | 89 |
| | Girls | 27,590 | 31,569 | 114 |
| | Men | 28,715 | 26,570 | 92 |
| | Boys | 17,488 | 25,753 | 147 |
| Health centers equipped with a basic WASH kit | | 6,574 | 6,573 | 99 |
| Sanitation facilities built or rehabilitated (family/public showers, latrines) | | 23,910 | 25,245 | 105 |

CLUSTER OBJECTIVES

Objective 1: Ensure safe access to water, sanitation and hygiene for men, women, boys and girls affected by violence resulting from armed conflict in a suitable and timely manner.

Objective 2: Prevent and reduce water-borne diseases as an aggravating factor of malnutrition in affected zones.

LEAD ORGANIZATIONS

UNICEF, ACF (co-facilitator)

With 8.8 million people in need of assistance in WASH, the DRC HF played a critical role in responding to emerging needs resulting from cholera outbreak, massive displacements and increased needs of assistance for IDPs and host communities. The WASH Cluster received the second highest proportion of DRC HF funding, amounting to \$15.1 million to cover eight provinces. Strategically, the DRC HF promoted inter-cluster collaboration between WASH, Nutrition and Health Clusters, thus enabling more effective WASH interventions. In the cholera response, awareness-raising sessions were organized to address the mode of transmission of waterborne diseases. A WASH-education package was provided in seven provinces, including the rehabilitation of latrines and hand-washing points in schools, and the distribution of hygiene kits. Likewise, a WASH-Shelter&NFI package was provided with the construction of family latrines, latrine doors and incinerators for waste management in health centres to improve the household/ community hygiene conditions.

Moreover, along with the distribution of hygiene kits, families in displacement sites in Ituri were provided with the necessary materials to build family latrines, enabling them to benefit from adequate health facilities. Some projects also enhanced peace building between host communities and displaced people.

Among the 1.6 million people reached by DRC HF funding in 2019, nearly 136,000 people affected by conflict or epidemics were given access to clean water, with the rehabilitation of 451 water points and the installation of 220 chlorination points. To prevent and contain ongoing disease outbreaks, nearly 19,400 Cholera/Ebola emergency kits were distributed, and 25,245 health facilities were built or rehabilitated.

| OUTPUT INDICATORS | TARGETED | ACHIEVED | % |
|---|----------|----------|-----|
| Families of malnourished children who receive a WASH and hygiene kit. | 1,921 | 1,646 | 85 |
| Impluviums installed in the Health centers | 32 | 29 | 90 |
| Chlorination points installed | 193 | 220 | 113 |
| Water points rehabilitated/built | 387 | 451 | 116 |
| Cholera/Ebola emergency kits distributed | 18,299 | 19,394 | 106 |

¹ Results are based on 2019 data and may be underreported as implementation of projects and project-level reporting often continues into the subsequent year. For explanation of data see page 6.

ACHIEVEMENTS BY CLUSTER

COORDINATION



AREAS CONCERNED

Education
Food security
Health
Logistics
Nutrition
Protection
Shelter & NFI
WASH

LEAD ORGANIZATIONS

OCHA

Allocations in 2019¹

| ALLOCATIONS | PROJECTS | PARTNERS | TARGETED PEOPLE | WOMEN | MEN |
|-------------|----------|----------|-----------------|-------|------|
| \$2.1M | 8 | 8 | 295 | 40 | 244 |
| | | | | GIRLS | BOYS |
| | | | | 5 | 6 |

In coordination with the AB, it was decided to integrate a coordination component in the 2019 Standard allocation in order to support the Clusters' capacities in terms of coordination and information management, including the national CWG.

As mentioned in the CPF, DRC HF partners were identified by the respective clusters to host coordination and information management capacities, both at national and field levels (as identified by the ICN). This allocation faced a number of challenges, such as:

- Capacity of the hosting NGOs to co-fund the management and the logistics-related costs: the Host organization for the Logistics Cluster was only confirmed in November 2019.
- Delays in the recruitment process: the WASH coordinator could not be recruited before November 2019.
- Turnover of staff in DRC: two months after recruitment, the Protection co-facilitator resigned. Eventually, the second recruitment did not start before the last quarter of the year.

In the face of these challenges, the impact of the coordination projects in 2019 could not properly be measured.

While the decisions around this allocation are scattered among different stakeholders : clusters, Host NGOs, OCHA coordination and the HFU, the HF will coordinate among the different entities in order to: 1) decide on potential programmatic changes of these particular projects and more specifically, and 2) ensure that a clear exit strategy is foreseen before the end of the projects.

It is worth mentioning that the JHFU ensured a close follow-up on coordination projects funded in 2018 and still ongoing in 2019 up to 2020 such as, the project reinforcing the PSEA network in the country, and the one addressing the inclusion of people with disability in need across the humanitarian response in DRC. The outcome will be captured in the coming AR.

¹ Note that the coordination cluster is not reflected in the CBPF Business Intelligence (BI) portal, as the projects were assigned to the cluster concerned.



A successful inclusive and participative mechanism.

A community in DRC.
© OCHA/Alioune Ndiaye

Through an early warning system developed by an implementing partner funded by the DRC HF in 2019, members of a beneficiary community helped to detect a case of fraud¹.

During the intervention, the beneficiaries have always been at the centre of the partner's activities. From the early stages of the project, trust has been built within the community thanks to the permanent presence of a staff on site, who has been organizing meetings to collect their opinions and provide answers to their questions.

In addition to a close connection with the beneficiaries, inclusive and active participation in the activities has thereby enabled to detect an incident. While some inconsistencies had been noted during an internal audit, community members reported similar information regarding the suspicious sale of fuel by a member of the organization. The information was also quickly relayed to the partner through informal conversations with community members.

The partner directly reported to the Fund and responded with appropriate measures. An investigation was launched to verify the information reported at three levels (internal audit, accountability,

and informal talks), and the staff members involved were suspended. During the investigation, community members voluntarily agreed to testify. Thanks to this early warning mechanism, community members were able to feed back information, while demonstrating their trust in the partner as well as their willingness to preserve the collective interest.

Fraudulent acts may be a challenge in the DRC. Monitoring mechanisms that include beneficiary communities are among the essential measures to detect incidents of fraud. *"If the community had not sent a signal, the incident could easily have gone unnoticed"*, said the Head of mission.

In less than two months, the incident was handled. Internal meetings were held to debrief and weld the team unit, including through sharing meals and recreational activities. Today, the assistance provided continues to yield positive results.

¹ In order to preserve the confidentiality of community members and the partner, the location of the intervention as well as the name of the organization will not be disclosed.

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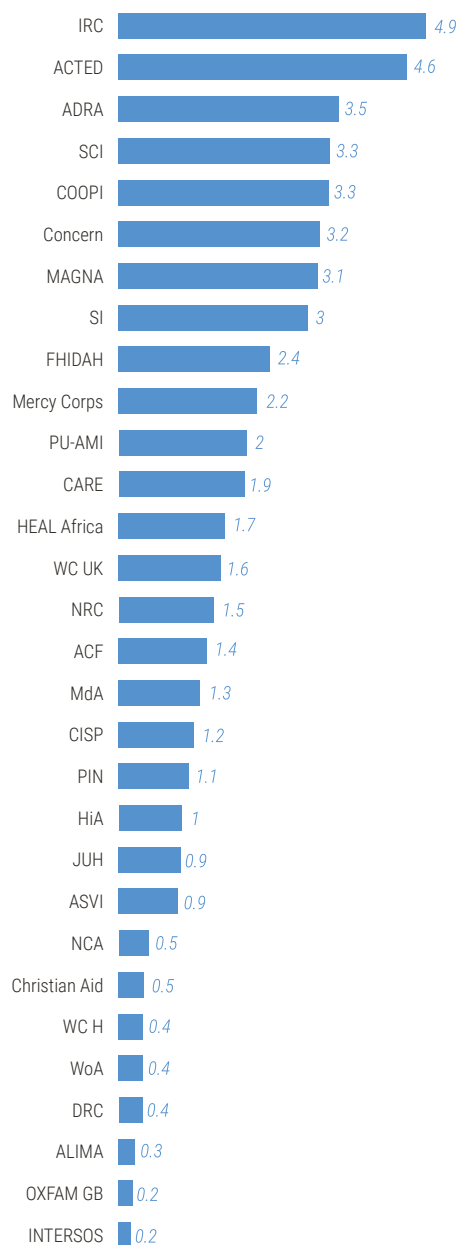
ANNEXES

| | |
|---------|---------------------------------------|
| Annex A | Allocations by recipient organization |
| Annex B | DRC HF funded projects |
| Annex C | DRC HF Advisory Board |
| Annex D | Accronyms and abbreviations |
| Annex E | Reference Map |

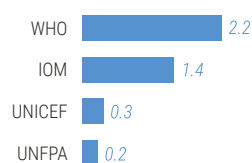
ANNEX A

ALLOCATIONS BY RECIPIENT ORGANIZATION

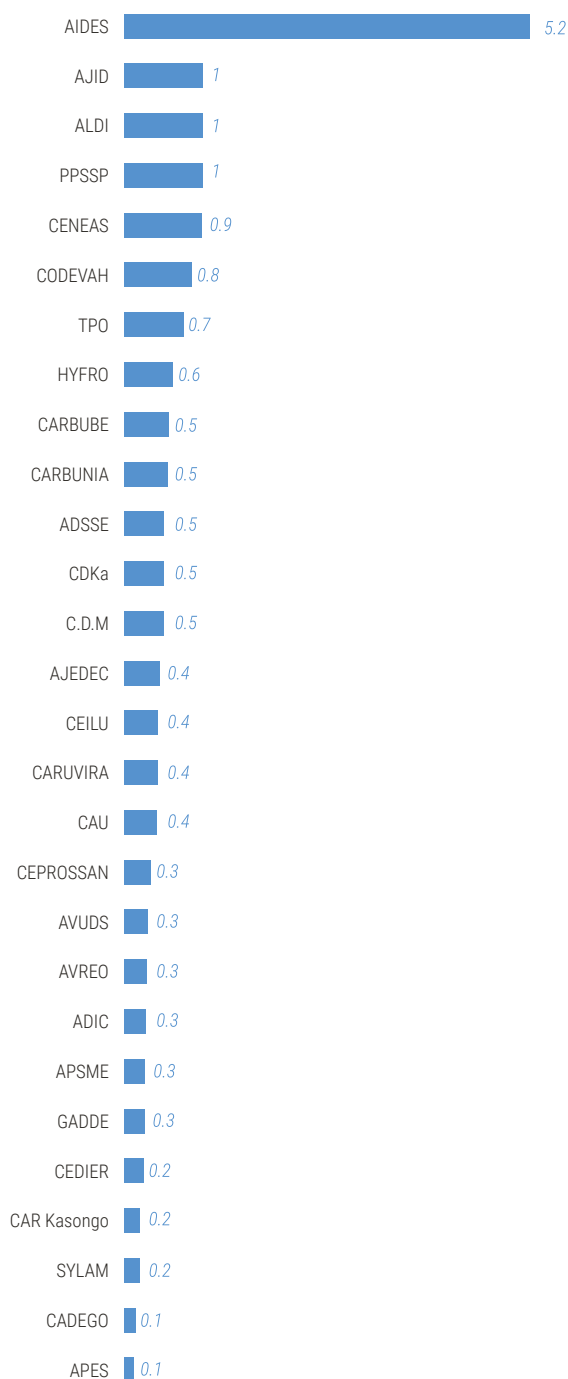
International NGO \$53.3M 69.5%



United Nations \$4.2M 5.5%



National NGO \$18.4M 24%



Others \$1M 1%



ANNEX B

DRC HF-FUNDED PROJECTS

| # | PROJECT CODE | CLUSTER | ORGANIZATION | BUDGET | SUB-IMPLEMENTING PARTNER |
|----|---|--|-------------------------|-------------|--------------------------|
| 1 | DRC-19/HCG10/ST1/WaSH/INGO/13142 | Coordination | ACF | \$304,381 | |
| 2 | DRC-19/HCG10/ST1/NFI-FSEC/INGO/11835 | Shelter & NFI (40%) Food security (60%) | ACTED | \$1,500,000 | |
| 3 | DRC-19/HCG10/ST1/LOG/INGO/12023 | Logistics | ACTED | \$890,500 | |
| 4 | DRC-19/HCG10/ST1/LOG/INGO/12031 | Logistics | ACTED | \$950,001 | |
| 5 | DRC-19/HCG10/ST1/FSEC-NFI/INGO/13113 | Coordination | ACTED | \$517,152 | |
| 6 | DRC-19/HCG10/ST1/PROT/NGO/12061 | Protection | ADIC | \$276,999 | |
| 7 | DRC-19/HCG10/ST1/HLT-NFI/INGO/11969 | Health (15%) Shelter & NFI (85%) | ADRA | \$975,080 | |
| 8 | DRC-19/HCG10/ST1/FSEC-NFI-WaSH/INGO/12048 | Food security (50%) Shelter & NFI (30%) WASH (20%) | ADRA | \$1,400,000 | |
| 9 | DRC-19/HCG10/ST1/HLT-WaSH/INGO/12133 | Health (60%) WASH (40%) | ADRA | \$1,200,000 | |
| 10 | DRC-19/HCG10/ST1/WaSH-HLT/NGO/11839 | Health (85%) WASH (15%) | AIDES | \$1,200,044 | |
| 11 | DRC-19/HCG10/ST1/NFI-WaSH/NGO/12074 | Health (90%) WASH (10%) | AIDES | \$720,237 | |
| 12 | DRC-19/HCG10/ST1/EDU/NGO/12146 | Education | AIDES | \$1,400,000 | |
| 13 | DRC-19/HCG10/ST1/NFI-WaSH-PROT/NGO/12163 | Shelter & NFI (40%) WASH (10%) Protection (50%) | AIDES | \$822,239 | |
| 14 | DRC-19/HCG10/ST1/PROT/NGO/12140 | Protection | AJID | \$1,000,000 | |
| 15 | DRC-19/HCG10/ST1/FSEC-NFI/NGO/11910 | Food security (59%) Shelter & NFI (41%) | ALDI | \$1,009,998 | |
| 16 | DRC-19/HCG10/ST1/PROT/NGO/11947 | Protection | AVREO | \$285,005 | |
| 17 | DRC-19/HCG10/ST1/EDU-PROT/INGO/12062 | Education (70%) Protection (30%) | AVSI | \$945,466 | |
| 18 | DRC-19/HCG10/ST1/LOG/NGO/12096 | Logistics | AVUDS | \$300,456 | |
| 19 | DRC-19/HCG10/ST1/PROT/NGO/12036 | Protection | CAR KASONGO | \$200,000 | |
| 20 | DRC-19/HCG10/ST1/NFI-FSEC/NGO/11946 | Shelter & NFI(33%) Food security (67%) | Caritas Butembo-Beni | \$565,995 | |
| 21 | DRC-19/HCG10/ST1/FSEC-PROT/NGO/12093 | Food security (90%) Protection (10%) | CARUVIRA | \$429,950 | |

| # | PROJECT CODE | CLUSTER | ORGANIZATION | BUDGET | SUB-IMPLEMENTING PARTNER |
|----|---|--|----------------------|-------------|--|
| 22 | DRC-19/HCG10/ST1/NFI/NGO/12073 | Shelter & NFI | CDKa | \$500,000 | |
| 23 | DRC-19/HCG10/ST1/LOG/NGO/11850 | Logistics | CEILU | \$430,000 | |
| 24 | DRC-19/HCG10/ST1/WaSH/NGO/12113 | WASH | CENEAS | \$991,237 | |
| 25 | DRC-19/HCG10/ST1/WaSH-PROT/NGO/12059 | WASH (40%) Protection (60%) | CEPROSSAN | \$333,578 | |
| 26 | DRC-19/HCG10/ST1/FSEC-WaSH/INGO/11930 | Food security (50%) WASH (50%) | Christian Aid | \$400,000 | TEARFUND ; UWAKI/Maniema |
| 27 | DRC-19/HCG10/ST1/FSEC-WaSH/INGO/12150 | Food security (55%) WASH (45%) | CISP | \$1,199,136 | Bureau Central de la Zone de Santé ; IPAPEL ; Société Nationale de l'hydraulique Rurale |
| 28 | DRC-19/HCG10/ST1/LOG/NGO/11978 | Logistics | CODEVAH | \$359,117 | |
| 29 | DRC-19/HCG10/ST1/FSEC-NFI/INGO/12069 | Food security (70%) Shelter & NFI (30%) | Concern | \$1,199,996 | |
| 30 | DRC-19/HCG10/ST1/PROT-EDU/INGO/11831 | Protection (68%) Education (32%) | COOPI | \$1,198,922 | AVREO |
| 31 | DRC-19/HCG10/ST1/PROT-EDU-FSEC/INGO/11891 | Protection (50%) Education (17%) Food security (33%) | COOPI | \$1,199,785 | CEPIFOP; PADI |
| 32 | DRC-19/HCG10/ST1/NUT/INGO/13130 | Coordination | COOPI | \$197,950 | |
| 33 | DRC-19/HCG10/ST1/WaSH-PROT-FSEC/NGO/11879 | WASH | CRRDC/ Tanganyika | \$821,200 | |
| 34 | DRC-19/HCG10/ST1/PROT/NGO/12014 | Protection | CRRDC/ Tanganyika | \$255,000 | |
| 35 | DRC-19/HCG10/ST1/LOG/INGO/11832 | Logistics | FHIDAH | \$812,995 | |
| 36 | DRC-19/HCG10/ST1/LOG/INGO/12149 | Logistics | FHIDAH | \$1,250,000 | |
| 37 | DRC-19/HCG10/ST1/LOG/INGO/13123 | Coordination | FHIDAH | \$190,000 | |
| 38 | DRC-19/HCG10/ST1/PROT/NGO/12043 | Protection | GADDE | \$260,000 | |
| 39 | DRC-19/HCG10/ST1/PROT-HLT/INGO/12001 | Protection (20%) Health (50%) Nutrition (30%) | HEAL Africa | \$373,651 | |
| 40 | DRC-19/HCG10/ST1/PROT-HLT/INGO/12016 | Protection (55%) Health (45%) | HIA | \$1,003,058 | |
| 41 | DRC-19/HCG10/ST1/WaSH/NGO/11990 | WASH | HYFRO | \$616,600 | |
| 42 | DRC-19/HCG10/ST1/HLT-NUT-PROT/INGO/12030 | Health (42%) Nutrition (25%) Protection (33%) | IRC | \$748,910 | |

| # | PROJECT CODE | CLUSTER | ORGANIZATION | BUDGET | SUB-IMPLEMENTING PARTNER |
|----|--|--|------------------------------|-------------|--------------------------|
| 43 | DRC-19/HCG10/ST1/HLT-PROT-NUT/INGO/12164 | Health (45%) Protection (30%) Nutrition (25%) | IRC | \$2,136,659 | |
| 44 | DRC-19/HCG10/ST1/HLT/INGO/13125 | Coordination | MDA | \$115,561 | |
| 45 | DRC-19/HCG10/ST1/COORD/INGO/13200 | Coordination | Mercy Corps | \$197,999 | |
| 46 | DRC-19/HCG10/ST1/FSEC-NFI/INGO/12114 | Food security (30%) Shelter & NFI (70%) | NRC | \$750,000 | |
| 47 | DRC-19/HCG10/ST1/PROT/INGO/13115 | Coordination | NRC | \$228,567 | |
| 48 | DRC-19/HCG10/ST1/NUT-HLT-FSEC/INGO/11845 | Nutrition (43%) Health (30%) Food security (27%) | PIN | \$1,115,312 | |
| 49 | DRC-19/HCG10/ST1/WaSH/NGO/11900 | WASH | PPSSP | \$326,979 | |
| 50 | DRC-19/HCG10/ST1/HLT-NUT/INGO/12089 | Health (55%) Nutrition (45%) | PU-AMI | \$1,399,999 | |
| 51 | DRC-19/HCG10/ST1/PROT-EDU/INGO/13127 | Coordination | SCI | \$356,310 | |
| 52 | DRC-19/HCG10/ST1/FSEC-WaSH/INGO/11902 | Food security (92%) WASH (8%) | Solidarités International | \$1,430,000 | |
| 53 | DRC-19/HCG10/ST1/WaSH/INGO/12169 | WASH | Solidarités International | \$679,979 | |
| 54 | DRC-19/HCG10/ST1/PROT/INGO/11890 | Protection | WC H | \$388,140 | |
| 55 | DRC-19/HCG10/ST1/PROT-EDU/INGO/11959 | Protection (33%) Education (67%) | WC UK | \$1,630,117 | |
| 56 | DRC-19/HCG10/ST1/NUT/INGO/12098 | Nutrition | WOA | \$384,095 | |
| 57 | DRC-19/HCG10/UR1/HLT-NUT/INGO/12233 | Health (60%) Nutrition (40%) | MAGNA | \$1,020,000 | |
| 58 | DRC-19/HCG10/UR1/WaSH/INGO/12241 | WASH | OXFAM GB | \$225,336 | |
| 59 | DRC-19/HCG10/UR3/FSEC/INGO/13863 | Food security | ACF | \$334,000 | |
| 60 | DRC-19/HCG10/UR3/NUT/INGO/14422 | Nutrition | ACF | \$800,000 | |
| 61 | DRC-19/HCG10/UR3/NFI/INGO/13791 | Shelter & NFI | ACTED | \$730,000 | |
| 62 | DRC-19/HCG10/UR3/NFI/NGO/14426 | Shelter & NFI | ADSSE | \$500,000 | |
| 63 | DRC-19/HCG10/UR3/NFI/NGO/13844 | Shelter & NFI | AIDES | \$1,020,096 | |
| 64 | DRC-19/HCG10/UR3/PROT/NGO/14424 | Protection | AJEDEC | \$450,000 | |
| 65 | DRC-19/HCG10/UR3/PROT/NGO/13845 | Protection | APES | \$125,001 | |
| 66 | DRC-19/HCG10/UR3/EDU/NGO/14425 | Education | C.D.M | \$500,001 | |

| # | PROJECT CODE | CLUSTER | ORGANIZATION | BUDGET | SUB-IMPLEMENTING PARTNER |
|----|---|---|---------------------------|-------------|--------------------------|
| 67 | DRC-19/HCG10/UR3/NFI/NGO/13862 | Shelter & NFI | CADEGO | \$143,000 | |
| 68 | DRC-19/HCG10/UR3/PROT-NUT-HLT/NGO/13871 | Protection (36%) Nutrition (28%) Health (36%) | CARBUNIA | \$549,839 | |
| 69 | DRC-19/HCG10/UR3/EDU/NGO/13864 | Education | CAU | \$410,000 | |
| 70 | DRC-19/HCG10/UR3/LOG/NGO/13847 | Logistics | CODEVAH | \$500,001 | |
| 71 | DRC-19/HCG10/UR3/FSEC/INGO/14423 | Food security | COOPI | \$749,951 | APROHDIV |
| 72 | DRC-19/HCG10/UR3/LOG/INGO/13762 | Logistics | FHIDAH | \$149,999 | |
| 73 | DRC-19/HCG10/UR3/PROT/INGO/13865 | Protection | HEAL Africa | \$275,999 | |
| 74 | DRC-19/HCG10/UR3/PROT/INGO/13840 | Protection | INTERSOS | \$199,570 | |
| 75 | DRC-19/HCG10/UR3/WaSH-LOG/UN/13870 | WASH (66%) Logistics (34%) | IOM | \$1,450,000 | |
| 76 | DRC-19/HCG10/UR3/HLT-NUT/INGO/13869 | Health (50%) Nutrition (50%) | JUH | \$986,001 | Ministère de la Santé |
| 77 | DRC-19/HCG10/UR3/NUT-HLT/INGO/13790 | Nutrition (56%) Health (44%) | MAGNA | \$2,370,000 | |
| 78 | DRC-19/HCG10/UR3/NUT-HLT/INGO/13848 | Nutrition (33%) Health (67%) | MDA | \$1,179,511 | |
| 79 | DRC-19/HCG10/UR3/WaSH/INGO/13842 | WASH | NCA | \$476,000 | |
| 80 | DRC-19/HCG10/UR3/FSEC/INGO/13849 | Food security | NRC | \$529,000 | IPAPEL |
| 81 | DRC-19/HCG10/UR3/WaSH/NGO/14420 | WASH | PPSSP | \$700,000 | |
| 82 | DRC-19/HCG10/UR3/HLT/INGO/14042 | Health | PU-AMI | \$630,000 | |
| 83 | DRC-19/HCG10/UR3/HLT/INGO/14421 | Health | SCI | \$1,000,001 | |
| 84 | DRC-19/HCG10/UR3/PROT/NGO/14433 | Protection | SOFEPADI | \$247,383 | |
| 85 | DRC-19/HCG10/UR3/WaSH/INGO/14419 | WASH | Solidarités International | \$900,000 | |
| 86 | DRC-19/HCG10/UR3/EDU-PROT/NGO/13891 | Education (79%) Protection (21%) | TPO | \$755,528 | |
| 87 | DRC-19/HCG10/UR3/PROT/UN/14897 | Protection | UNFPA | \$248,971 | HEAL AFRICA TPO |
| 88 | DRC-19/HCG10/UR3/HLT/UN/13897 | Health | UNICEF | \$173,832 | |
| 89 | DRC-19/HCG10/UR3/HLT/UN/13898 | Health | WHO | \$1,563,148 | |
| 90 | DRC-19/HCG10/UR5/HLT/INGO/14494 | Health | ALIMA | \$262,833 | |
| 91 | DRC-19/HCG10/UR5/HLT/NGO/14437 | Health | APSME | \$260,038 | |

| # | PROJECT CODE | CLUSTER | ORGANIZATION | BUDGET | SUB-IMPLEMENTING PARTNER |
|-----|---|--|--------------|-------------|--------------------------|
| 92 | DRC-19/HCG10/UR2/WaSH/INGO/13236 | WASH | CARE | \$1,998,025 | |
| 93 | DRC-19/HCG10/UR2/WaSH-HLT/INGO/13238 | WASH (80%) Health (20%) | Concern | \$2,000,000 | |
| 94 | DRC-19/HCG10/UR4/PROT/INGO/14735 | Protection | DRC | \$377,985 | |
| 95 | DRC-19/HCG10/UR4/NUT-HLT-PROT-WaSH/INGO/14737 | Nutrition (30%) Santé (35%) Protection (25%) WASH (10%) | HEAL Africa | \$1,044,777 | |
| 96 | DRC-19/HCG10/UR2/HLT-PROT/INGO/13239 | Health (50%) Protection (50%) | IRC | \$2,000,000 | |
| 97 | DRC-19/HCG10/UR5/HLT/INGO/14440 | Health | MAGNA | \$376,935 | |
| 98 | DRC-19/HCG10/UR2/WaSH/INGO/13241 | WASH | Mercy Corps | \$2,000,000 | |
| 99 | DRC-19/HCG10/UR2/PROT-WaSH-HLT/INGO/13242 | Protection (10%) WASH (30%) Health (60%) | SCI | \$2,000,000 | |
| 100 | DRC-19/HCG10/UR4/PROT/INGO/14736 | Protection | SYLAM | \$191,393 | |
| 101 | DRC-19/HCG10/UR5/HLT/UN/14442 | Health | UNICEF | \$162,442 | |
| 102 | DRC-19/HCG10/UR5/HLT/UN/14441 | Health | WHO | \$649,295 | |

ANNEX C

DRC HF ADVISORY BOARD

| STAKEHOLDER | ORGANIZATION |
|--------------------|---|
| Chair | Humanitarian Coordinator |
| NGO | Caritas Congo |
| NGO | Solidarité International or Caritas International Belgique |
| NGO | INGO Forum |
| UN | United Nations Children's Fund (UNICEF) |
| UN | United Nations High Commissioner for Refugees (UNHCR) |
| UN | World Food Programme (WFP) or United Nations Population Fund (UNFPA) |
| Donor | United Kingdom Department for International Development (DFID) |
| Donor | The Government of Germany |
| Donor | The Government of Sweden |
| Observer | European Civil Protection and Humanitarian Aid Operations (ECHO) |
| Observer | Office of U.S. Foreign Disaster Assistance (OFDA) |
| DRC HF/OCHA | United Nations Office for the Coordination of Humanitarian Affairs (OCHA) |
| DRC HF/UNDP | United Nations Development Programme (UNDP) |

ANNEX D

ACCRONYMS & ABBREVIATIONS

| | |
|--|---|
| AB Advisory Board | CONCERN Concern Worldwide |
| ACF Action contre la Faim | COOPI Cooperazione Internazionale |
| AAP Accountability to Affected Populations | CPF Common Performance Framework |
| ACTED Agency for Technical Cooperation and Development | CRIO Comité Régional Inter-Organisations |
| ADIC Actions pour le Développement Intégral par la Conservation Communautaire | CRRDC/TANGANYIKA Croix-Rouge RDC du Tanganyika |
| ADRA Adventist Development and Relief Agency | CWG Cash Working Group |
| ADSSE Association pour le Développement Social et la Sauvegarde de l'Environnement | DFID UK Department for International Development |
| AIDES Actions et Interventions pour le Développement et l'Encadrement Social | DRC Conseil Danois pour les Réfugiés |
| AJEDEC Association des jeunes pour le développement communautaire | DRC Democratic Republic of Congo |
| AJID Association des Jeunes Islamiques pour le Développement | EVD Ebola Virus Disease |
| ALIMA Alliance for International Medical Action | ERC Emergency Relief Coordinator |
| ALDI Association Locale pour le Développement Intégral | FARDC Forces Armées de la République Démocratique du Congo |
| AMUKA AMUKA | FHIDAH Fédération Handicap International. Direction Aide Humanitaire |
| APES Action pour la Promotion de l'Environnement Social | GADDE Groupe Africain de Déminage, Développement et Environnement |
| APSME Action pour la Promotion de la Santé de la Mère et de l'Enfant | GBV Gender-based Violence |
| AVREO Association des Volontaires pour la Récupération des Enfants Orphelins, Abandonnés, Déplacés et Mal | GMS Grant Management System |
| AVSI Associazione Volontari per il Servizio Internazionale | HACT Harmonised Approach to Cash Transfers |
| AVUDS Action des Volontaires Unis pour le Développement et la Santé | HC Humanitarian Coordinator |
| BOA Board of Auditors | HCT Humanitarian Country Team |
| CA Capacity assessment | HEAL AFRICA Health Education Action and Leadership |
| CADEGO Caritas Développement Goma | HF Humanitarian Fund |
| CARBUBE Caritas Butembo-Beni | HFU Humanitarian Financing Unit |
| CARBUNIA Caritas Bunia | HIA Hope in Action |
| CARE Cooperative for Assistance and Relief | HRP Humanitarian Response Plan |
| CARUVIRA Caritas Développement Diocèse d'Uvira | HYFRO Hydraulique Sans Frontière |
| CAR KASONGO Caritas Kasongo | JHFU Joint Humanitarian Financing Unit |
| CAU Collectif Alpha Ujuvi | IASC Inter-Agency Standing Committee |
| CDKAN Caritas Développement Kananga | ICN Inter-cluster National |
| CBPF Country-Based Pooled Fund | IDP Internally Displaced Person |
| CCCM Camp Coordination and Camp Management | IM Information management |
| CENEAS Centre d'Etudes et d'Actions Sociales | INGO International Non-Governmental Organization |
| CEILU Centre d'Encadrement intégré de Lukibu en RD Congo | INTERSOS Intersos |
| CEPROSSAN Centre de Promotion Socio-Sanitaire | IOM International Organization for Migration |
| CERF Central Emergency Response Fund | IRC International Rescue Committee |
| C.D.M. Caritas Développement Mahagi | JUH The Johanniter Unfall Hilfe |
| CISP Comitato Internazionale per lo Sviluppo dei Popoli | MA Managing Agent |
| CLIO Comité Local Inter-Organisations | MAGNA Magna Enfant en Péril |
| CODEVAH Comité pour le Développement et Assistance Humanitaire | MDA Médecins d'Afrique |
| | MEDAIR Medair |
| | MERCY CORPS Mercy Corps |
| | MOU Memorandum of understanding |
| | MPTFO Multi-Partner Trust Fund Office |
| | NCA Norwegian Church Aid |
| | NCE No-cost Extension |

NFI Non-Food Items
NGO Non-Governmental Organization
NRC Norwegian Refugee Council
OAI Office of Audit and Investigation
OCHA Office for the Coordination of Humanitarian Affairs
OFDA Office of U.S. Foreign Disaster Assistance
OM Operational manual
OXFAM-GB Oxfam Grande Bretagne
PIN People in Need
PSEA Prevention of Sexual Exploitation and Abuse
PPI Partner Performance Index
PPSSP Programme de Promotion des Soins de santé primaires
PU-AMI Première Urgence - Aide Médicale Internationale
RA Reserve Allocation
RRPM Rapid Response to Population Movements
SGBV Sexual and Gender-based Violence
SCI Save the Children International
SI Solidarités International
SOFEPAI Solidarité Féminine pour la Paix et le Développement Intégral
SRC Strategic Review Committee
SO Strategic Objective
SOP Standard operating procedure
STI Sexually Transmitted Infections
SRP Strategic response Plan
SYLAM Synergie pour la Lutte Anti-Mines
TPO Transcultural Psychosocial Organization
UN United Nations
UNDP United Nations Development Programme
UNDSS United Nations Department of Safety and Security
UNFPA United Nations Population Fund
UNHAS United Nations Humanitarian Air Service
UNICEF Nations Children's Fund
UNMAS United Nations Mine Action Service
WASH Water, Sanitation and Hygiene
WC H War Child Hollan
WC UK War Child UK
WFP World Food Programme
WHO World Health Organization
WOA Women of Africa

ANNEX E

REFERENCE MAP



Map Sources: ESRI, UNCS.

The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations. Map created in Sep 2013.



DRC HF

Democratic Republic
of the Congo
Humanitarian Fund

unocha.org/democratic-republic-congo-drc
chfdrc.unocha.org
gms.unocha.org
fts.unocha.org

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