



**KINGDOM OF BELGIUM**  
Federal Public Service  
**Foreign Affairs,  
Foreign Trade and  
Development Cooperation**

**Directorate-general for Development  
Cooperation – DGD**

**Service D5.1 – Humanitarian Aid**

### **SINGLE FORM FOR THE FUNDING OF HUMANITARIAN ACTION**

(Legal basis: the law of 9/01/2014 modifying the law of 19/03/2013 on Development cooperation - Royal Decree of 19/04/2014, General expenditure budget, basic allocation 14 54 52 35.60.83).

#### **1. GENERAL INFORMATION**

**1.1. Name of the humanitarian organisation/date of approval by the Minister for Development Cooperation (if required):** Oxfam-Solidarité ASBL, 17/11/1997 (renewal: 12/12/2012 and 20/05/2016).

**1.2. Title of the action:** Improving the safety and self-reliance of conflict affected displaced populations and host communities in DRC and Uganda.

**1.3. Intervention area (country, region, locations):**

The proposed intervention will be carried in two countries of the Great Lakes Region:

- The Democratic Republic of Congo (DRC): Aru, Mahagi and Djugu territories (Ituri Province)
- Uganda (UGA): Kyaka II and Kyangwali Congolese refugee camps (Western Uganda)

**1.4. Action start date:** 17<sup>th</sup> May 2019.

**1.5. Duration of the action in months (cf. Art. 17, §2):** 30 months

**1.6. Expenditure eligibility start date:** Signature date granting Ministerial Decree.

**1.7. Proposal and reports (Concerning the specific timeframes, cf. RD of 19/04/2014):**

Initial proposal	date: 14-01-19
Revised proposal no. _____	date: dd-mm-yy
Date of the granting Ministerial Decree	date: 13-06-19
Unilateral Act date	date: 13-06-19

Letter of acceptance date  
Interim report  
Final report

date: 20-06-19  
date: 20-01-2021  
date: 16-05-2022

**1.8 [INT] List the exchanges of letters that took place following the signature of the unilateral act until the interim report stage**

The Oxfam Partner Agreement (OPA) was signed between OI/Uganda and DRC and Oxfam Belgium

**1.9 [FIN] List the exchanges of letters that took place following the submission of the interim report until the final report stage**

- 19<sup>th</sup> May 2021: DGD approved the six-month no cost extension to the project, as request by OXFAM on May 14<sup>th</sup>, the project was extended until 16<sup>th</sup> November 2021



Brussels, 14<sup>th</sup> May 2021

Michel van den Hove  
Director Program and Advocacy  
Oxfam-Solidarité

**Mr. Erik De Maeyer**

FPS Foreign Affairs  
DG Development Cooperation and  
Humanitarian Aid  
D5 – Humanitarian aid and Transition directorate

Dear Mr. De Maeyer,

**Subject: Request for a six-months no cost extension – program “Improving the safety and self-reliance of conflict affected displaced population and host communities in DRC and Uganda” (your reference: PG/2019/10).**

In accordance with the article 2.6 of our bilateral agreement, Oxfam would like to introduce a request for a six-months no cost extension of the implementation period of the above-mentioned program, moving the end date of the program from 16<sup>th</sup> May 2021 to 16<sup>th</sup> November 2021.

In Democratic Republic of Congo, while most activities have been completed and over 44.775 people have been reached by March 2021, Oxfam is experiencing delays in Water supply construction activities due to COVID-19 restrictions, access constraints linked to insecurity in the

area of implementation and customs regulation for humanitarian goods. The no-cost extension would allow Oxfam to finalize water supply infrastructure. In addition to that, recent developments in the country will very likely impact program implementation. A state of siege was declared in Ituri on May 6<sup>th</sup>, following various civil demonstrations calling on the government to assume its responsibilities and for MONUSCO to leave eastern Congo. The objective of the state of siege is to fight and reduce presence of armed groups in the region, responsible for many attacks against the population. This results in the replacement of civil servants by members of the Congolese army, and potential interventions in areas where Oxfam is implementing the program and restricted access. Additional details on reasons for delays and activities to be implemented during the NCE period are available in Annex 1.

In Uganda, various commitments have been made for implementing pending works within the remaining implementation period. Although, Oxfam experienced delays due to the COVID-19 related restrictions of movement and public gatherings. In addition to that, Uganda national elections had a tremendous impact on speed and pace of the implementation for the second half of 2020 as caution was needed to avoid mixing humanitarian interventions with political campaigns messaging. The NCE would allow Oxfam in Uganda to finish sanitation and humanitarian advocacy activities and will provide more time for monitoring and evaluation. Activities to be performed during that extra period are highlighted in the updated workplan.

You can find annexed to that request:

- Annex 1 : Reasons for delays and activities to be implemented during the NCE in DRC
- Updated workplan for DRC
- Updated workplan for UGA

We remain available if you need any clarification,

Yours sincerely,

Michel van den Hove



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Oxfam-Solidariteit maakt deel uit van Oxfam-in-België dat lid is van de internationale confederatie Oxfam.  
Oxfam-Solidarité fait partie d'Oxfam-en-Belgique qui est membre de la confédération internationale Oxfam.



ROYAUME DE BELGIQUE  
Service public fédéral  
**Affaires étrangères,  
Commerce extérieur et  
Coopération au Développement**

D5.1 – Aide Humanitaire

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votre communication du	vos références	nos références	date
08/04/2021		D5.1/LC/HUM.04.03.01.2019.10/2021/5623/1	19/05/2021

à mentionner dans toute correspondance

**Objet: Programme humanitaire** (A.B. 14 54 51 35.60.26 - PG/2019/10) - Oxfam Solidarité – « Improving the safety and self-reliance of conflict-affected displaced population and host communities in Democratic Republic of Congo and Uganda » - 3.332.791 EUR. **Demande d'avenant : extension sans coût additionnel**

Monsieur,

Suite à votre courrier du 14 mai 2021, j'ai l'honneur de vous informer que je marque accord à votre demande d'avenant relative à une extension (sans augmentation du budget initialement prévu) telle que décrite dans votre demande susmentionnée. Le programme "*Improving the safety and self-reliance of conflict-affected displaced population and host communities in Democratic Republic of Congo and Uganda*" est dès lors prolongé pour une période de 6 mois, jusqu'au 16 novembre 2021.

Il est à noter par ailleurs que ce type de demande est expressément prévu dans les lettres conventions types (Point 2.6), avec l'accord de la DGD.

A la lecture de l'argumentaire joint à votre demande d'avenant, il apparaît clairement que les retards que Oxfam connaît dans l'implémentation des activités de construction d'approvisionnement en eau sont dus à des facteurs externes tels que des restrictions liées au COVID-19, des contraintes d'accès liées à l'insécurité et la réglementation douanière pour les biens humanitaires. De plus, depuis le 06 mai 2021 un état de siège a été déclaré en Ituri suite aux différentes manifestations qui appelaient le gouvernement à prendre ses responsabilités et pour le départ de la MONUSCO de l'est du Congo. Par conséquent, afin de permettre la pleine

réalisation des activités et des objectifs et résultats fixés en début de programme, et d'anticiper les effets de l'état de siège sur le programme, une prolongation de 6 mois est entièrement justifiée. La prolongation permettra d'absorber les retard dans la mise en œuvre des activités et la poursuite des activités en cours tel que décrit dans la demande introduites.

Veuillez agréer, Monsieur, l'assurance de ma considération distinguée.

Erik De Maeyer

Directeur D5 Aide humanitaire et Transition

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## 2. NEEDS ASSESSMENT

### 2.1. *Assessment date(s); methodology and information sources used; organisation/person(s) responsible for the assessment*

#### **Democratic Republic of Congo (DRC)**

Oxfam is present in the province of Ituri undertaking humanitarian assistance to the communities the most in needs affected by conflict, war and the recent EVD (Ebola Virus Disease) epidemic. These interventions are carried out by qualified staff with tools and methodologies developed over the years.

The project will be carried out on the basis of the several field evaluations conducted by Oxfam and other organisations since the outbreak of inter-ethnic clashes in Ituri in December 2017. The assessments covered zones the most affected including the territories of Djugu, Aru, Irumu and Mahagi. In DRC and Uganda likewise, Oxfam assessments are done by technical advisors and experts either from the country team, the Regional Platform or the Global Humanitarian Team and supervised by Oxfam senior technical staff. Inputs from the field staff present on a daily basis in the proposed area of intervention, also informed the proposal.

#### Assessments conducted by Oxfam

- ✓ Evaluation rapide de la sécurité alimentaire et moyens d'existence en territoire de Djugu en Province de l'Ituri, Mission (draft) report EFSL 6-9 December 2018
- ✓ Évaluation des besoins Humanitaires en Ituri, EFSL, WASH et PROTECTION, Territoire de Aru, Djugu, Irumu et Mahagi, Juillet -Aout 2018
- ✓ Évaluation rapide des besoins en sécurité alimentaire et Protection Territoire de Djugu, Mai 2018
- ✓ Oxfam, Humanitarian Programme, Democratic Republic of Congo – March 2018

#### Assessments done by other organisations

- ✓ Rapport d'Evaluation Rapide des Besoins Humanitaires Maj. – Ituri\_Mahagi\_Mokambo – Zone de Santé Rurale d'Angumu Groupements : Apala, Ndaru Muswa, Jupunyango, Abia, Labu Ramogi et Awasi ERM MOKAMBU, 2-5 Decembre 2018 – RRPM (NRC, Solidarité, Save the Children)
- ✓ Monitoring des zones de retour, Province de l'Ituri, Territoire de Djugu, Aout 2018, UNHCR

- ✓ Rapport de Diagnostic Préliminaire, Localités Musasa- Kinyatsi et Masumo, Groupement Luongo, Chefferie des Baswagha, Territoire de Lubero, Zone de santé de Musienene, Axe Kimbulu- Masumo, Date du rapport : le 10-12 février 2018
- ✓ Rapport de l'Evaluation Rapide des besoins, Kirumba, Kayna, Bulotwa et Kanyabayonga, Groupement Itala et Kanyabayonga, Chefferies des Batangi et Bwito, Territoires de Lubero et Rutshuru, Date de l'évaluation : du 12 au 15 Janvier 2018
- ✓ Rapport D'évaluation Rapide Du 13 Octobre Au 17 Octobre 2017, Cité Visitée : Bunia, Gety, Boga, Tchabi, Mambasa, Komanda, Ndalya et Luna

#### Secondary literature review

- ✓ FEWS NET : République Démocratique du Congo – Perspectives sur la sécurité alimentaire – Octobre 2018 à Mai 2019<sup>1</sup>
- ✓ ECHO – Humanitarian Implementation Plan (HIP), Great Lakes Region, 2019
- ✓ DR Congo: 2017-2019 Humanitarian Response Plan – 2018 Update

### Uganda (UGA)

The following documents have been feeding the project development from Uganda side:

#### Assessments conducted by Oxfam

- ✓ Oxfam Gender in Emergencies – October 2018
- ✓ Oxfam hand WASHing innovation study – October 2018.
- ✓ Oxfam Gender and protection analysis report for Mukondo C, Kaborogota A and B, zones – Kyaka II settlement, May 2018.
- ✓ Oxfam assessment report January 2018
- ✓ Oxfam WASH reports 2018

#### Assessments done by other organisations

- ✓ KAP survey 2018- Danish Refugee committee.
- ✓ Inter-Agency Rapid Gender Analysis (RGA) and Gender-Based Violence (GBV) Assessment -DRC refugees – Kyaka II and Kyangwali Uganda (CARE – Holly Robinson, March 2018).
- ✓ Kyaka II Participatory needs Assessment, UNHCR, October 2018
- ✓ UNHCR Joint Multi-Sector Needs Assessment (JMSNA), August 2018

#### Secondary literature review

- ✓ Uganda Refugee Response Plan 2019 – 2020<sup>2</sup>
- ✓ Kyaka Water Supply Master Plan, UNHCR, May 2018
- ✓ Operation and Maintenance (O&M) Framework study for Sustainable WASH facilities in refugee settlement and Host Community

## **2.2. Account of the problem and analysis of the stakeholders**

### DRC

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[https://reliefweb.int/sites/reliefweb.int/files/resources/DRC%20Food%20Security%20Outlook\\_%20October%202018-FR.pdf](https://reliefweb.int/sites/reliefweb.int/files/resources/DRC%20Food%20Security%20Outlook_%20October%202018-FR.pdf)

2 <https://reliefweb.int/sites/reliefweb.int/files/resources/67314.pdf>

For over 20 years, the provinces of North Kivu and Ituri have been affected by an unprecedented security crisis. Attacks, repeated incursions as well as village occupations by the armed groups that plague some territories of the two provinces; inter-communal and ethnic conflicts, as well as the ongoing electoral politics, are among the factors currently driving a massive population displacement. As stated in the HRP, North Kivu and Ituri are counting roughly 2.1 million IDPs in 2018<sup>3</sup>. The province of Ituri has for several years intermittently been shaken by inter-ethnic conflicts, largely between the Hema and Lendu communities. The conflict between the two tribes has endangered the population of the province and has affected other neighbouring communities that suffer the collateral damage of this conflict. A key origin of the last conflict that sparked at the end of 2017 is over land issues. The Lendu people are farmers and own large tracts of land while the Hema are considered pastoralists in search of land for pasture. Currently, with the phenomenon of decapitalization occurring within the Hema, the community has settled somewhat and engage in agricultural practices on 'Lendu land' under terms of contract clearly determined in advance (rental, sale, pledge, etc.). In these land transactions, the chances of conflict arise quickly and always takes on ethnic dimensions whenever one or the other party does not respect the terms of the contract. This was the case in 2017/2018 where a very violent conflict erupted for the same reasons in a very complex humanitarian situation throughout the territories of Mahagi, Aru, Djugu and Irumu. However, the intensity varies across territories and even within the territories with areas more affected than others:

**Aru and Mahagi** – As per initial assessments, the major needs identified in these territories seem to be the supply of drinking water and the access to hygienic conditions which remain very problematic. In some localities, a very worrying humanitarian situation has evolved with large proportion of IDPs still in place. The fear of new attacks as well as the loss of all means of livelihood and production are the main reasons limiting their motivation to return to their homes. Certain localities are overcrowded which could lead to the outbreak of water-borne diseases.

**Djugu Territory** – In the health zones of Bulé and Drodro, a significant part of the population is back but in a context of total desolation. Houses are torched repeatedly and affected households resort to living in makeshift structures or in the open. The few houses that have resisted attacks are often overcrowded (more than 20 people in a shelter of 10m<sup>2</sup> to shelter from the rain); many water points have been destroyed forcing people to consume river water; livelihoods and sources of income have either been destroyed or looted, leading to the development of bad survival strategies (consumption of one meal a day, less popular food consumption, etc.) and an increase in the prevalence of malnutrition (the Mazé health center reports an average of up to 10 malnutrition cases per week to the Drodro's general reference hospital). To all this is added the fear of a return of the conflict and the loss of land for the next agricultural campaign (the attackers have not been disarmed and there are frequent attacks on the markets).

It is worth noting that Djugu territory is one of the main food providers of the province of Ituri. However, much of the population of Djugu have lost the harvest of the "B" agricultural season (from June to August 2018) or share their harvest with displaced populations and run the risk of missing the entire agricultural season "A" (which runs from September to February 2019) because of the confiscation of Lendu lands formerly exploited by the Hema or simply for fear of new attacks.

The short and medium-term food outlook is gloomy for both IDPs and host communities. According to the results of the 16<sup>th</sup> cycle of the IPC, in the province of Ituri, the new outbreak of violence in the territory of Djugu, since the beginning of March 2018 contributed to the sharp deterioration of the humanitarian situation and the displacement of nearly 425,000 Internally Displaced Persons to the neighbouring territories of Irumu, Aru, Mahagi and the city of Bunia. The IDPs are cut off from their livelihoods and will not be able to continue the long agricultural season A. This part of Ituri remains in the Crisis Phase (IPC Phase 3).

#### *Stakeholders analysis:*

**NOTE:** A detailed stakeholders analysis will be part of the Result 4 and will serve as basis for this Humanitarian Advocacy result and the whole programme activities. The below will therefore be

further updated and developed at an early stage of project implementation.

- Traditional authorities: Customary chiefs are included into the formal DRC administrative system. Chefferies are the administrative découpage coming under the territorial level. Traditional chiefs are named following customs, often following hereditary transmission of power. Customary chiefs have then to get the approval of central government to be formally recognized as chiefs. In Ituri those chiefs have a very important power and role especially considering the relatively weak presence and power of the State over this region.

In the latest conflict, customary chiefs have been considered as very important actors to bring peace and decrease tensions between communities. They were one of the main channels used by provincial government and MONUSCO to reach to communities and try appeasing tensions.

Acceptance by communities of Oxfam response requires developing good relations with local and traditional authorities but also to take into account the larger voice of the population and ensure to balance well and be transparent about the choice of areas of intervention. People seem to trust more traditional authorities than administrative ones (this might increase in this electoral period). When humanitarians started getting access to Djugu in April 2018, the situation was very tensed, and many distributions led to violence and didn't respect the do no harm principle. Oxfam's choice to go with a community-based identification of vulnerabilities and transparency about our approach enabled to build acceptance and ensure distributions went on without violence.

Oxfam also faced some accusations from Hema groups (while being warmly welcomed and accepted by Lendus who thought at the beginning, humanitarians only targeted Hemas) when the organisation started distributing aid in Lendu localities following strict vulnerability criterias. The local and traditional chiefs, but also transparent communications with the communities, have then a crucial role in facilitating understanding with communities and acceptance.

In Djugu, villages of Hema and Lendu and mixed villages are very close to each other's and customary chiefs from one ethnic group often rule over the two groups. We lack information to say if it is a factor of conflict or appeasement but one of the apparent root causes of the different conflicts between the communities over the years has been the inequality of access to formal power positions for Lendus. Amongst the IDPs (Internally Displaced People) who have fled the conflict are also some traditional authorities. In IDP sites those authorities don't rule but have a stronger voice and respect from their communities.

→ Oxfam will implement a clear conflict sensitive approach starting with developing a more in-depth understanding of power dynamics and drivers of conflict to avoid reinforcing those and increase tensions.

- Formal authorities: There are several levels of formal authorities from the neighbourhood and village level to the provincial level. In Djugu and Irumu, access to administrative and power positions has mainly favoured Hema rather than Lendu and is a driver of the conflicts over the years. Oxfam relations with these authorities have been good so far, including with provincial authorities.

The provincial authorities are following up and taking part in the response but are limited by the few means available. Concertation meetings happen on a weekly basis between provincial authorities and humanitarian agencies with a high level of collaboration and mutual respect. These meetings make possible to address issues such as the presence of FARDC in schools for instance. It was followed by concrete steps and FARDC retrieving from schools.

Provincial and national authorities were very strongly distrusted in the early stages of the conflict by Hema communities who saw the conflict as the result of political manipulation by a black hand with strong suspicions pointing toward Kinshasa (the main motive given by populations being to delay further elections). Lendu communities also soon came to strongly distrust authorities due to the arrest of Lendu people accused to be leaders of the attackers (which was contested by both communities for different reasons) and following retaliation of FARDC against Lendu communities due to the assailants.

The Direction Générale de Migration (DGM) is the main agency regulating the movements of populations between DRC and Uganda. So far Oxfam has not noticed any obstacles or incidents by DGM toward people fleeing to Uganda or returning to DRC.

There are some cross border projects and initiatives between Ugandan and Congolese provincial



authorities such as tripartite vaccinations campaigns.

National, provincial and future local elections could be a factor of increased tensions in the coming months, especially considering that Ituri is usually seen as a Martin Fayulu stronghold. There is also already some discontent around the results of provincial legislative elections in Bunia. None of the three provincial parliamentarians elected for Bunia town are originating from Bunia or the Irumu territory. This feeds discontent and suspicion around possible manipulation of results.

The different territories are also divided in health areas, themselves divided in health zones.

→ Oxfam will work closely with health zones to ensure adequate targeting of activities.

Before the conflict, the FARDC (Forces Armées de la RDC) and PNC (Police Nationale Congolaise) presence in the region was very low. Further, these actors were heavily criticized due to their inaction at the start of the conflict. In April 2018, the deployment of FARDC was a main factor leading to bringing an end to violence. However, the continued presence of Congolese army and police comes with the usual abuses such as illegal barriers and illegal taxation of populations as well as violence. Around August, after a relative period of calm, a new form of violence started with an unidentified group called “assaillants” attacking FARDC positions. The group is suspected to be of Lendu obedience and those attacks have been followed by retaliations by FARDC and PNC against Lendu communities from villages assailants fled through. This has of course drastically increased the climate of suspicion between Lendu communities and security forces and led to renewed displacements in both communities. A few weeks before the elections, an important increase of presence of FARDC and PNC has been noted in Bunia but also Djugu and Mahagi. In early January 2019, the head of the PNC clearly threatened anyone who would go to the street to denounce results. The situation has remained calm so far even if there is clear discontent and fear within populations.

- Non-State actors: In regions bordering Uganda where the project will be implemented, namely Eastern Irumu, Djugu and Mahagi, the main armed group is this new group called “assaillants”. There is nearly no information about this group except that it is considered as composed by Lendus and is targeting FARDC positions.

In Mahagi (in Berunda forest) another group has been reported since the early stage of the Djugu crisis. Rumors speak of a branch of former M23 passing the border between DRC and Uganda. They seem to have remained quite calm so far except for the recent exchange of fire with PNC in Nyoka.

- Religious authorities: The Catholic Church is seen by many Lendu youth as being under Hema influence leading many to join other cults including the Codeco sect which was linked to the last conflict and the suspected use of hallucinogenic drug by Lendu elements attacking Hema villages.

- Local, national and international NGOs: Humanitarian Coordination is based in Bunia and led by the Local Inter-organization Committee (CLIO). Bunia’s CLIO report key data and messages/request to the Goma CRIO which then send the compilation for Ituri and North Kivu to Kinshasa. It is the main platform to bring up key gaps of the response, coordinate and bring up asks about the response. Oxfam is an active part of the CLIO.

When the Djugu crisis started the largest part of humanitarians had left the province already and for most of them it took significant delays to deploy back to Ituri. The response was therefore largely insufficient at the start of the crisis and suffered from significant lack of access to Djugu. Amongst the prime responders were a few INGOs (mainly MSF and Solidarite) and local NGOs. Those local NGOs showed an ability to deploy very quickly (and were amongst the first to deploy in Djugu as well) but their responses were severely undermined by insufficient funding and sometimes insufficient technical knowledge or capacities on camp management notably and safe food or cash distribution.

Currently the number of actors has increased significantly but the response remains insufficient and covering only part of the acute needs. In the areas bordering Uganda there are still only a few actors responding including RRMP and some local actors such as Caritas.

## UGA

Uganda, with a history of welcoming refugees, opened its borders to new influx of refugees into Uganda as its neighbours' volatile regions including the war in South Sudan and conflict and ethnic tensions in the Democratic Republic of Congo. The UNHCR report of 2017, projected that by the end of December 2018, Uganda would be hosting more than 1 million refugees<sup>4</sup>.

Since December 2017, Uganda has received approximately 86,000 DRC refugees. The refugee influx is happening amidst an already congested refugee hosting environment and posing more challenges to Government and host communities. Access to basic social services and infrastructure for water, health and sanitation, exposure to protection risks including sexual and gender-based violence (GBV) remain key critical challenges especially in settlements receiving new cases. On the protection risks faced, one of the most predominant one is due to the fact that in the settlement there is lack of fuel for cooking, women thus tend to go to Kabamba barracks in search for firewood and they sometimes end up being beaten brutally and raped by the soldiers. This was evidenced during feedback collection meetings with leaders organised by Oxfam gender and protection team during GBV awareness sessions in the community.

The situation in DRC remains volatile due to continued armed and ethnic conflict in the East of the country particularly in North Kivu and Ituri provinces. Between 500-1000 refugees arrive each day in convoys to the Kyaka II settlement, a clear sign of continued instability in Eastern DRC. More refugees continue to arrive in Kyaka reporting armed attacks, human torture and killings on civilians in these areas and these factors are projected to continue driving in more refugees. Half of the population of hosting sub-counties in Kyegegwa district (Mpaara, Kyaka II and Kabweeza) are DRC refugees (55,913 – 28,184 M; 27,729 F out of 107,900 – total population)<sup>5</sup>. Kyegegwa is still a young district in the west carved from Kyenjojo district and it is still trying to stand on its feet, its current infrastructure is not up to the task, having been stretched by already old refugee backlog. With land diminishing by day due to the increasing population, any additional refugee numbers may result into conflict. The ongoing presidential elections have also caused more insurgency in DRC.

Convoy deliveries between Sept and 31 <sup>st</sup> October 2018		
Date	HH	Population
31 Sept 18	30	75
4-Oct-18	172	363
16-Oct-18	385	916
19-Oct-18	191	426
24-Oct-18	186	360
26-Oct-18	319	735
30-Oct-18	314	744
31-Oct-18	95	198
31-Oct-18	38	105
31-Oct-18	26	61

Source: UNHCR convoy data  
October 2018

Kyaka II which is the main receiving settlement for DRC refugees is getting full, the settlement is designed to host 40,000 people, but now it is hosting around 80,000 refugees. The initial planning figure for Kyaka was put at 60,000 by June 2018. With the increased influx exacerbated by protracted militia activities in their places of origin (DRC), this figure has been raised to 200,000 for contingency planning (Source: Camp Commandant Kyaka). The impact to the increase in projection figures has been to adjust the land size each refugee can occupy in the settlement; before, refugees owned up to 10,000 square meters of land for settlement and cultivation, but now this has been reduced to 900 square meters. Resizing has tremendously affected food security and increased dependency of refugees to food and cash aid.

The district has, in a bid to improve water access to the communities neighbouring the settlement planned to drill 20 boreholes, but the district has capacity to cover 10 boreholes in all the sub counties within the district not necessarily those neighbouring the subcounty. The constant and ever-increasing numbers of Congolese refugee influx is creating tremendous pressures on already inadequate WASH infrastructure within the settlement and this is expected to continue into 2020 (RRP 2019 – 2020). For the nine zones and 26 villages of Kyaka II, water access has relatively

4 Information from the Office of the Prime Minister (OPM) shared in an Interagency coordination meeting (November 18)

5 2019-2020 RRP Population Planning Figures, UNHCR, October 2018

remained low at 14l/p/d. The appropriate level of access should be 20l/p/d as per UNHCR standards<sup>6</sup>. Both older persons and Persons with Specific Needs (PSN) reported that there is a competition at the water points and they are always the last ones in the queue (UNHCR PA 2018). In addition to unsustainable safe water supply sources, the settlement is also characterized with very low ground water potential making refugees to depend on unreliable and largely contaminated point water sources (springs and shallow wells fitted with hand-pumps). From the water quality report of August 2018, 58% of samples taken at water points tested positive for Ecoli which is a proxy indicator for faecal contamination. At present, 33% of water supply is through water trucking while the rest is through shallow wells (45%), protected springs (5%) and boreholes (17%), these are mainly water sources easily contaminated by floods. The poor water quality coupled with poor sanitation and hygiene poses serious public health risks as exemplified in the recent AWD (Acute Watery Diarrhoea) outbreak between January – March 2018.

Oxfam and other agencies have tried to put in place some systems and facilities to improve the situation, between April-June 2018, under SIDA/RRM funding, Oxfam installed surface water treatment tanks that improved water production to 350m<sup>3</sup> per day from 70m<sup>3</sup>, over 2000 HH latrines were constructed with community participation by various agencies, the volunteer/refugee ratio improved to 1;500 refugees. With the ongoing inflow of new refugees, the situation has reversed, the existing Infrastructure can no longer be sustaining the increasing numbers; water access has dropped from 15l/p/day from May 2018 to almost 13l/p/day in November. Latrine coverage despite the efforts remains at 52% (Kyaka II WASH cluster report, 30<sup>th</sup> October 2018). The remaining 48% in sanitation puts the refugees at risk of outbreaks and with a history of cholera in the settlement in early 2018 and currently with a threat of Ebola from Eastern DRC, any continued influx exacerbates the risk. There is still need for improved sanitation in institutions such as schools and health facilities. Overall school enrolment has tremendously increased in the recent months resulting in a high toll on the existing WASH facilities. The current pupil to latrine stance ratio is at 1:87 pupil higher than the standard 1:45 adopted by UNHCR. Additionally, at least 10 blocks of latrines are needed at the existing 7 health facilities in the refugee settlement (AHA report 2018). Water supply in the schools is a major challenge with school children having less access to clean water for drinking and handwashing. There are education partners focused on education, some have tried to improve water access in schools through rainwater harvesting system, this remain inadequate due to budget constraints and relies on the rainy season. During dry spell, water stress in the camps affects school who now resort to water trucking measures that are already overstretched. This affects best hygiene practices. Danish Refugee Council in collaboration with Education partners are providing menstrual pads to school going children, the sustainability of these supplies is a key challenge given the increasing children enrolment in schools.

#### *Stakeholders analysis:*

**NOTE:** A detailed stakeholder's analysis will be part of the Result 4 and will serve as basis for this Humanitarian Advocacy result and the whole programme activities. The below will therefore be further updated and developed at an early stage of project implementation.

- Traditional authorities: Formal refugee leadership in Uganda mirror the host community's leadership structures at village, parish and sub-county level, represented by Local Councils (LCs) level 1, 2 and 3 respectively. In a refugee settlement setting, the equivalent Refugee Welfare Committees (RWCs) levels 1, 2 and 3 represent village (or cell), zone and whole settlement, respectively. The resolution of disputes and refugee grievances follows a hierarchy of administration. According to informants, RWCs 1 and 2 deal with petty theft, assaults and quarrels and minor domestic issues while RWC 3 are tasked with addressing marriage and divorce cases and solving disputes over debts above 50,000 UGX. Grave assaults and sexual violence are taken to police. Land issues, both between refugees and refugees and nationals, are sent to OPM zone commandants. It was reported that until recently, land issues between refugees were solved by the

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<sup>6</sup> Standards set by UNHCR in the area and commonly used by WASH sector cluster

Refugee Welfare Councils (RWC) structures, which also provided them with considerable power and status<sup>7</sup>.

The RWCs play a role of conflict resolution, they organize and mobilize refugees, act as link between humanitarian players, the Office of Prime Minister and UNHCR and host community, while the local leadership provides security, services to the refugees. Local government 5 is the highest planning level in the district. The programme will work directly with the RWCs and build their capacity to advocate, mobilise and provide feedback about the programme; the programme will also work closely with the district on strengthening coordination and involvement of refugees in the planning. The police provide security through routine patrols.

- Formal authorities: In Kyaka, these include service management boards and committees, including School Management Committees, Health Committee Management Committees, water management committees. They plan and provide services to the refugees, they also communicate to refugees during meetings, visits to services. Working closely with RWCs, they mobilize refugees and host communities. Oxfam programme will work with these structures in mobilizing targeted refugees and referral of special cases for management.

- Local, national and international NGOs: Kyaka II and Kyangwali see several international NGOs (Oxfam, World Vision, Danish Refugee Council, WTI, SCI, CARE, ACTED, Finish Church Aid, Finish refugee Council, ADRA, LWR) providing humanitarian support to refugees and host communities. These also work on standards, ensure accountability through coordination, provide skills and jobs to refugees. The INGOs play the role of advocating and resource mobilizing for response. The programme will work closely with the INGOs in the area of joint monitoring, assessments and standardization in terms of tools and resources. A great part of Oxfam's response will be implemented through local NGOs.

- International organisations: Include UN bodies, UNHCR, WFP, UNFPA, these coordinate with humanitarian actors in collaboration with OPM office in the settlement. Closely working with the government, they participate in the development of policies and guidelines that guide refugees' operations in the country. They had an important role in the formulation of the country CRRF (Comprehensive Refugee Response Framework) and ReHoPE (Refugee and host population empowerment strategic framework), the country localization agenda. Oxfam programme will adopt and engage with OPM, Local government and in UNHCR in working with local partners by implementing the localization agenda.

### **2.3. *Please summarise the results of the assessment (if necessary, append a comprehensive report) by establishing a link to the action***

#### **DRC**

It is clear from the assessments mentioned earlier that humanitarian needs are huge in Ituri province, Djugu territory. Displaced and returned households are much more vulnerable than indigenous households, mainly in the Djugu territory. In general, they are in precarious situations with regard to their access to livelihoods (food, income, etc.), WASH infrastructures and protection services.

A vast majority of individuals (85% among IDPs and 83% among returnees) are classified as having a poor Food Consumption Score (FCS). Food habits are limited to the consumption of maize and cassava.

With regard to access to water, this remains problematic in all territories, as it appears that a

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<sup>7</sup> Source: DRC conflict assessment report May, 2018

majority of the population does not have access to sufficient quantities of clean drinking water as per standards set by the WHO. This greatly favours waterborne diseases as well as malnutrition and once again it is women and children who suffer the most.

The areas of return where stability is observed are the localities of Katoto, Lita 2, Kpakuba, Kpabu, Tchumbu, Malo and Kparangaza. These areas can accommodate peacefully the activities of this project of resilience that fits with the actions of this project.

The current humanitarian situation of IDPs and host communities living in this area shows that the needs are felt in the different sectors while protection and advocacy are cross-cutting. Specific sectors such as WASH and Food Security require appropriate humanitarian response:

## **WASH**

This action for WASH will focus on the following directions:

- Develop water sources and / or water abstraction for good coverage and use of drinking water as well as sanitation structures, with a view to reducing waterborne diseases, which poses a serious public health problem in the evaluated health areas.
- Train community relays and local leaders to sensitize the community on the good practice of hygiene and environmental sanitation, schools' approach, villages cleaned and protection

## **Food Security**

Of the four pillars of food security (availability, access, utilisation and stability), rural people in DRC who are farmers should have no major problem with availability, accessibility and food stability. Climatic and agro-ecological conditions are very favourable to agricultural production. The food use component is however affected because of the lack of diversity in food consumption (habits of the population). In a context of conflict with population displacement, all four components of food security are affected at the level of displaced populations and some host families. People displaced by the inter-communal conflict in the territories have lost all their livelihoods because of the displacement. Crops and food stocks were looted, production fields were destroyed. These are the major obstacles that explain the food shortage and consequently the price increase of agricultural products on local markets. Regarding livestock, the cattle were abandoned during the displacement and looted by the attackers.

Therefore this action will mainly focus for food sector on:

- Cash for food distribution to IDPs living in the assessed health areas and to identify/monitor vulnerable host households in those same health areas.

## **Protection**

Faced with a wide variety of protection risks in the current crisis, women, men, boys and girls lack access to services to which to turn to protect them from violence and abuse and from the resulting consequences. They lack knowledge of existing protection services, especially those who have been displaced and are new to the area, or of the purpose or access conditions of such services. Certain protection services, such as the police or psychosocial support services, may also be absent or dysfunctional in certain areas.

In this situation, self-protection measures for communities become all the more important. However, both host and displaced communities have limited knowledge of their rights, of non-harmful self-protection measures and limited access to information on the situation locally and in their areas of origin. This leads them to expose themselves to increased risks when accessing water, sanitation and hygiene facilities or when pursuing their livelihoods. In other cases, the seriousness of the protection risks prevents them from accessing those facilities and livelihoods,

contributing to shortages in terms of access to food, water, hygiene and sanitation.

In the sector of protection, this action focuses on:

- Contribute to the reduction of protection risks for women, men, boys and girls affected by conflict in both IDP- refugees and returnees-host communities.
- Support women and men to be able to take lawful actions to improve their protection situation.

## UGA

Oxfam WASH assessment of January 2018 identified that water supply remains a key gap in Kyaka II settlement. Since its inception in 1984, the settlement had been neglected with water supply infrastructure not well developed. Currently, 30% of water supply is done by water trucking from a mini treatment works originally managed by DRC up to end of 2018 and now under Oxfam operational management starting 2019 (lead WASH partner). This is very costly due to treatment and it is unreliable as well. Access distance to water points is between 500 to 1,000 m with cases of more than 1 km also being reported. Waiting time varies with some refugees mentioning more than 6 hours at a water point. Most point water sources are also located in valleys making it difficult for women and children to carry water uphill in addition to exposing the water points to potential contamination through runoff. The settlement also has low ground water potential. UNHCR and DRC were both unsuccessful in trying to drill productive wells in Kakoni A, Bujubule and Itabuniga (UNHCR) and Sweswe (DRC).

Between July and October 2018, Oxfam piloted a handwashing innovation project in Kyaka using Promotion and Practice Handwashing Kit (PPHWK) which use resulted in an increase in handwashing knowledge and practice when compared to the control group. An added increase was noted for households that also received Mums Magic Hand training. From the innovation study, it was noted that pairing the provision of improved handwashing technologies with effective handwashing promotion strategies can result in an added increase in handwashing knowledge and practice. Exploring the impact and user acceptability of technologies like the Promotion and Practice Handwashing Kit (PPHWK) and Handwashing promotion strategies like Mum's magic Hands (MMH) is critical for improving handwashing practice and subsequently reducing morbidity and mortality among refugee populations. Learnings from model home approach for hygiene promotion will be scaled up with focus on drivers for sustained behaviour change beyond risk-knowledge being identified and implemented

The UNHCR led Interagency participatory assessment conducted in Kyaka II October 2018 indicate that access to water has remain low despite the efforts by the various water actors, access to water has stagnated at 14l/p/d an indication of continued water shortage to meet the needs of existing refugees, new and old at the same time by the host populations. PSNs, remained vulnerable in terms of access to WASH facilities, they are the last to fetch, the distance is so far and they are carrying containers at the limits of their forces.

At the beginning of the new DRC refugee influx in Uganda, Oxfam assessment report of April 2018 discovered food shortage as one of the main elements among Persons of Concern (PoC) to food access. The number of meals for both young and adults had reduced to two meals a day, the findings highlighted the fact that refugees were supplementing WFP rations with buying of some foods from the market, earned from the sale of labour within the host community and from projects running within the settlement. As the number of refugees increased and the projected figures of over 100,000 expected before end of 2018, OPM's office in Kyaka working closely with UNHCR, reduce the land size every refugee occupies; before December 2017, most refugees had 100x100mtres land size for settlement and agriculture, indeed refugees supplemented their incomes from the earnings they get from sale of agricultural crops. Downsizing meant that land is minimal hence subsistence production or going back to dependency on food Aid. Oxfam in April implemented livelihood activities that aimed to improve income and food access as well as access to alternative energy for cooking. Despite these efforts the livelihood needs of refugees have changed over time, recent assessments indicate priority for refugees are around income generating

activities in order to scale up business for refugees. . Confirming past assessments, in which PoCs always showed interest in livelihood such as support for income generating activities (IGAs) to scale up businesses (UNHCR October 2018). Both male and female respondents raised issue of limited access to IGAs caused by limited capital and price fluctuation. Older persons showed willingness to do a business but mentioned that they are not trained in business management and there is little access to markets to sell their products. Similarly, adult respondents of 40-59 years are keen on receiving trainings on business management including customer care, but they feel that there is limited access to financial and credit services to run businesses.

An Oxfam assessment conducted in January 2018 highlighted the plight of refugee safety and vulnerability in the camps. Referral pathways are not yet revised since the new influx which limits access to services by persons of concern. Most new arrivals interviewed said they did not know where to report their protection risks so that they can be addressed. Many of the pertinent informal structures exist but are not functional. Need to revive those existing risks targeting especially new arrivals experiencing theft of food and property. In April 2018, Oxfam conducted an additional gender and protection analysis. There are still SGBV cases being reported in Kyaka II especially rape and physical assault. The survivors tell how armed groups are using rape, as a weapon of war against those they perceive to be in needs. They speak of having no hope as they are traumatized thinking of what will happen next to them. They need both physical and emotional support to be able to cope with their experiences. Awareness campaigns on SGBV prevention and mitigation are key in ensuring that occurrence of the same does not happen in the country of asylum. With the increasing population, the size of land being allocated is getting smaller and OPM/UNHCR are currently resettling new refugees in areas where old refugees already live to create more space for the continued influx. This has brought more misery to old refugees, as the refugees have no alternative means of livelihoods.

Lack of lighting both at household level and in public places puts persons of concern especially women and girls at risk of sexual exploitation and abuse. This calls for installation of solar lights in public places especially at water points. There are strong Community based mobilization and support structures, the Refugee Welfare Councils. Their capacity to respond to community conflicts and GBV case tracing and referral is being built. At the moment, there are SGBV watch groups but their functionality has been limited due to a lack of follow up and not integrating new arrivals in the same structures. Most of the persons of concern do not know where to go when they are faced with protection risks which puts them in danger of their situation becoming worse. Therefore revival and creation of structures like gender and protection committees, women own I will increase accessibility to services by person of concern. Information, Education and Communication materials including the referral pathway have not yet been developed and disseminated with the community.

#### **2.4. *[INT] If changes have taken place in the needs assessment at the interim report stage, please provide information***

##### **UGA**

##### **Assessments conducted by Oxfam**

- ✓ Gender in emergency assessment- October 2019
- ✓ Gender and protection audit on WASH facilities– October 2019
- ✓ PSN WASH NFI availability assessment – October 2019
- ✓ Water supply walking distance assessment – March 2019
- ✓ Beneficiaries seed needs assessment – May 2019
- ✓ DGD Baseline Survey – November 2019
- ✓ KAP survey – December 2019
- ✓ Solar lights needs assessment – September 2019
- ✓ Barrier analysis – August 2019
- ✓ Infection Prevention and Control assessment in sixteen health centres in Kyegegwa district – May 2020

- ✓ Rapid Gender analysis on the Impact on Covid 19 towards Refugees – November 2020
- ✓ UNHCR KAP survey in Kyaka II settlement – December 2020
- ✓ Assessment of local structures and coordination mechanisms for safety and advocacy in Uganda - December 2020
- ✓ Humanitarian WASH Response strategy 2021-2024 – April 2021

### **Needs identified from the assessments conducted included.**

#### ✓ **Gender in emergency assessment**

**Gender needs (Strategic and practical gender needs)** – understanding the needs for men, women, girls and boys and providing support. E.g. management of menstrual hygiene for women and girls of reproductive age by constructing a changing room at school and providing them with sanitary materials including pads, soap, knickers etc.

The respondents from both communities indicated that their needs were diverse and all of them were more or less equally important. Food and health care (82.2% and 83.6% respectively) were highest among the priority needs, followed by gender protection (81.3%), family care (78.1%), Clothing (77.2%), shelter (75.8%), and water (73.5%). This means that all the basic needs are equally necessary for both the refugee community and the hosts' population. This showed that the levels of need were high and that all of the needs should be handled in an integrated manner. There were some needs that the respondents. Did not want to be drawn into such as management of menstrual hygiene for women and girls of reproductive age, by providing them with sanitary materials including pads, soap, knickers etc. .That is, Oxfam should improve its collaboration, funding and partnership with other agencies through an integrated gender program.

#### ✓ **Gender and protection audit on WASH facilities**

- Need to continue encouraging the spirit of voluntarism and community participation
- Fix curtain walls to protect privacy of users
- Need to fix doors properly
- Cut plastic sheeting gently in order for it not to be stolen but also not to compromise privacy of users
- Fix gender illustrations
- Fix the door remaining
- Advocate for lighting

#### ✓ **Solar lights need assessment**

After identifying and analyzing the unsafe spots, the potential risks and actual incidents in the community, respondents suggested lighting needs in their respective community. In all zones, it came out clearly that the risks especially girls and women face were around the water points and boreholes. All age and sex mentioned the needs for having lights on the roadside and around the markets and trading centres. It is also important to note that many respondents mentioned about having little safe access to services like health and schools due to absence of public lighting. Swampy areas and forests were also identified as areas in need of light. It was also evident that girls and women as well as PSN were at heightened risks than men.

#### ✓ **Beneficiaries seed needs assessment**

This assessment was conducted to identify the most appropriate agricultural inputs required among refugees and host community for increased household food security and income. The Major areas



of assessment were, categories of assorted seeds, tools, and their rankings, brief description of the rationale for the choice and timeframe for delivery and planting period. The vegetables/seedlings that ranked the best were cabbages, tomatoes, onions, passion fruit, mangoes and citrus. These were based on the following reasons; their short maturity period, disease, pest and drought resistant, readily available market after harvesting and the soil supports the production of these vegetables/seedlings.

#### ✓ **Rapid Gender analysis on the Impact on Covid 19 towards Refugees**

The assessment was conducted to assess the impact of COVID-19 on refugee women, men, girls and boys in Uganda. The major areas of assessment were to collect sex and age disaggregated data on the affected communities-including data on other vulnerable groups, to assess the impact of COVID-19 on refugee and host social economic wellbeing including impact of gender-based violence including SEA, examine the impact of COVID-19 on refugee communities on access to services across sectors including access to GBV services including SEA, health, livelihoods, WASH, Education, Peace and Security, and ICT, examine decision making and participation of women and other vulnerable groups in COVID-19 response, and generate sector specific targeted recommendations to inform the preparedness and response plans for refugee operations during and after COVID-19. The United Nations High Commission for Refugees (UNHCR) together with UN Women, OXFAM, International Rescue Committee, Care International, ALIGHT, the Danish Refugee Council, TPO, Over Comers Women Group and YUGNET took on this initiative in both in Kampala and across refugee settlements.

#### **2.5. [FIN] If changes have taken place in the needs assessment following the interim report, please provide information**

By November 2021, In Kyaka II had 1,259 from the first wave of Covid and 1,238 cases from the second wave, with 1,224 recoveries and 9 deaths. As a result, some budget lines on hygiene and sanitation were realigned to allow Covid 19 specific activities such procurement and distribution of Masks, Sanitizers, institutional, hand washing facilities, tippy taps to enhance infection prevention and control coupled with risk communication activities such as boda boda talk talk, radio talk shows as well as development and dissemination of IEC materials depicting key message so covid 19 prevention. With all the above, this action helped contribute to reducing community infections and increased awareness and adherence to Covid 19 prevention SOPs. Additionally, with the currently influx of new arrivals entering Uganda from DR Congo through Ntoroko and Bundibugyo, Kyaka II was earmarked for receiving new arrivals, according to OPM, 3,000 new arrivals were projected for settling in Kyaka II by Dec 2021. By November 2021, about 2,739 new arrivals had been received and settled in Kyaka II with more still coming in.

### **3. HUMANITARIAN ORGANISATION IN THE INTERVENTION AREA**

#### **3.1. Presence of the humanitarian organisation in the intervention area: brief overview of the strategy and current or recent activities in the country**

##### **DRC**

Oxfam is present in DRC since early sixties. At the moment Oxfam has a coordination office in Kinshasa and is working in seven provinces: Ituri, Nord-Kivu, Sud-Kivu, Maniema, Haut-Katanga, Haut-Lomami, Tanganyika, and Equateur. The early emergency team is implementing emergency responses in food security and WASH. Based in Goma, the team operates in the entire country under the supervision of the Humanitarian Programme Coordinator. Humanitarian and development teams are supported by support service teams in each province (logistic, administration, finance and human resources as well as advocacy and MEAL experts are based at both national and provincial levels. The Country Director, Programmes' Director and Humanitarian

Coordinator are working altogether to build synergies and continuity among the humanitarian and development in-country programme. The Oxfam programme in DRC is focused on WASH, Food Security, Livelihood and Protection.

In terms of food security and food distribution, the two main actors in the targeted areas are Food Agricultural Organisation (FAO) and Norwegian Refugees Council (NRC). In order to avoid duplication and to harmonise the approach, a close coordination and synergy is put in place, already functioning in surrounding areas.

At the end of 2018, Oxfam is ending an 8-month life-saving response project, funded under DG ECHO, to address humanitarian integrated food security and protection needs of vulnerable conflicts affected populations in Nord Kivu (Lubero and Beni territories) and in Ituri (particularly Irumu territory). The remaining needs in the Ituri province have been the basis to define this action.

## UGA

Oxfam has been responding to the South Sudanese Refugee crisis since January 2014 in West Nile (Adjumani, Arua and Yumbe Districts) and for the DRC refugees in Kyaka II, Kyegegwa Districts since March 2018. It has an established physical presence with offices in Arua and Kyegegwa (Kyaka) Districts. In these locations, Oxfam endeavours to implement integrated WASH; Emergency Food Security and Vulnerable Livelihoods (EFSVL); and Gender & Protection initiatives. Oxfam has had its presence in the Rwenzori region, during the early days of the ADF activities of 1997-2004, providing humanitarian assistance to the displaced persons, later supported rebuilding of lives through disaster risk reduction and livelihood assistance programmes in Bundibugyo and Kasese districts. In the last 8 months to date, Oxfam has been implementing humanitarian WASH, protection and livelihood activities in Kyaka II, with initial funding from SIDA RRM, Oxfam implemented the following activities:

1. Cash for Work for vulnerable groups. This targeted 200 beneficiaries mainly PSNs, through opening of access roads in the camp and digging pit latrines for the PSNs. This activity was more of an integration between WASH activities and EFSVL. Six Access roads were opened in the two zones of Mukondo C and Kaborogota.
2. Secondly, Oxfam provided energy cooking stoves to around 100 households, the stoves were meant to enable POCs specifically PSNs to reduce their energy losses and conserve energy for low cost cooking.
3. In addition to the energy saving stoves, briquettes were also provided to the same beneficiaries as source of fuel. One of the major issues facing displaced/refugees is the lack of fuel wood (Oxfam SIDA end of programme report 2018). Recent reports indicated refugees move to host communities and military Barracks in search for food, these acts have created conflicts sometimes between refugees and hosts.
4. Improved water production at the Sweswe water production site from 70m<sup>3</sup> to 350m<sup>3</sup>, this was meant to raise access to water by at least 15l/p/d.
5. Raised access to sanitation facilities; 1500 HH latrines were promoted and constructed, 150 communal latrines for new arrivals and 100 PSN latrines for vulnerable individuals.

The proposed intervention will build on our previous SIDA funded rapid response and Oxfam funded emergency work in Kyaka II. Oxfam will continue to coordinate closely with the Ministry of Water and Environment (MWE), UNHCR, UNICEF, Kyegegwa district local government and other national and international organizations to avoid duplication of interventions, and non-compliance with set national strategies and standards guiding operations in these locations including the Refugee Response Plans. The current action plans to engage the services of at least 2 new local partners as part of the localization agenda, lessons gathered from sister programmes in the north of Uganda; Oxfam and partners' resilience work such as the Enhancing Local and National Humanitarian Actors (ELNHA) initiative, will be the back bone and foundation for effective working with local partners. Through ELNHA Oxfam has been able to bring together local and national actors into the humanitarian space where they now have a voice to influence the humanitarian agenda in their localities. Actors have obtained capacity enhancement and resources to sustainably contribute to local preparedness and response initiatives.

Based on the achievements of 2018, and the WASH programmes, Oxfam has recently been appointed UNHCR Implementing Partner for WASH activities in Kyaka II, effective 2019, Oxfam will be the lead WASH agency, coordinating and supervising WASH operations in the camp. Oxfam also actively participates in numerous refugee response coordination meetings (eg protection working group, WASH working group, peaceful coexistence working group) in Kampala as well as in refugee hosting districts. This action will galvanize these initiatives.

Oxfam has one of its field bases in Kyaka II, with technical and the management staff who support field operations as well as coordination with national office and other stakeholders, Oxfam has establish operational structures including a teams of volunteers who are the frontline teams that support interventions.

### **3.2. Ongoing actions and requests for funding submitted to other donors, in the same intervention area – please state how overlaps and double funding would be avoided**

#### **DRC**

Ongoing and recently closed programmes:

- OFDA 2018 – to-date Eastern DRC emergency response including Ituri
- ECHO 2018 – Life-saving intervention in Ituri and Nord Kivu (ECHO 2019 to be submitted in January 2019)
- SIDA 2018 – Rapid Response for Ituri, DR Congo
- GFO II 2018 – Flexible funds for rapid response in Tanganyika, Ituri and Kasai

The Oxfam overall humanitarian programme in the DRC is currently funded by OFDA, ECHO, SIDA, DGD, GAC, UNICEF, Start Fund, WFP, Vitol Foundation, Nous Cim and Pool Fund. Apart from these institutional donors, Oxfam has also received funding from the Oxfam confederation. Oxfam's planned emergency response for the ongoing crises in DR Congo targets provision of life saving assistance to half a million individuals.

#### **UGA**

Ongoing actions and new proposals submitted for funding:

- Oxfam Bridge funding up to December 2018 for Kyaka II
- UNHCR integrated WASH and protection response up to the end of 2019
- The ECHO HIP for 2019-2020
- The EU RISE for 2019-2020

Oxfam will endeavour to ensure the activities funded by the various donors are not duplicated. This will be achieved through the selection of different areas of interventions, the allocation of different targets and indicators to be achieved.

Oxfam develops a global/master response plan for each of its humanitarian responses, that is being supported by various donors; it is reviewed regularly to meet the changing context. It is on the basis of these master plans that various targets are allocated to various donors to meet the overall Oxfam humanitarian responses objectives.

### **3.3. [FIN] List the other operations performed by the humanitarian organisation or its implementation partners during the same period in this intervention area and describe how the risks of double funding were avoided**

- ✓ EUTF project 2020-2023: Strengthening DRM capacity, risk mitigation and early warning systems
- ✓ UNHCR 2020 – 2021: WASH, Environment support to DRC Refugees

- ✓ Innovation – Water ATM- 2019 -2020
- ✓ Innovation Funding – 2019 – 2021 : Trailing the Effectiveness of Faecal sludge treatment & management Tech.
- ✓ Innovation Funding: 2021: Lamella Clarifier trial
- ✓ APPEAL fund- 2020 – 2021: Covid 19 Response
- ✓ SHO Funding – 2021: Covid 19 Response
- ✓ CAT Funding emergency response – 2021 – 2022
- ✓ ECHO project 2019 to Oct 2021

Oxfam ensured that activities funded by the various donors were not duplicated. This was achieved through the selection of different areas of interventions, the allocation of different targets and indicators to be achieved. Additional funding opportunities targeted piloting innovative ideas such as the Lamella, Water ATM and Faecal Sludge projects. Other funding opportunities included responding to the Covid 19 pandemic and environment specific responses that were not initially earmarked in this action.

#### 4. OPERATIONAL FRAMEWORK

##### 4.1. *Precise location of the action (please include a map making it possible to locate the project)*

- DRC: activities will be implemented in Ituri province, in the territories of Djugu, Mahagi and Aru.

Due to the current context in North Kivu and especially in the area of Rutshuru (see number 1 on the map below), a specific action could not be planned despite Oxfam's willingness to cover as much as possible the border with Uganda, the area not being accessible at the moment to humanitarian interventions. However, for this action a constant link will be done (as much as possible) to extend the network developed in Ituri further down, as large part of the refugees in Uganda side are coming from that area.

- Uganda: the project will take place in the refugees' settlements of Kyaka II in Kyegegwa district and Kyangwali in Hoima district in Western Uganda.

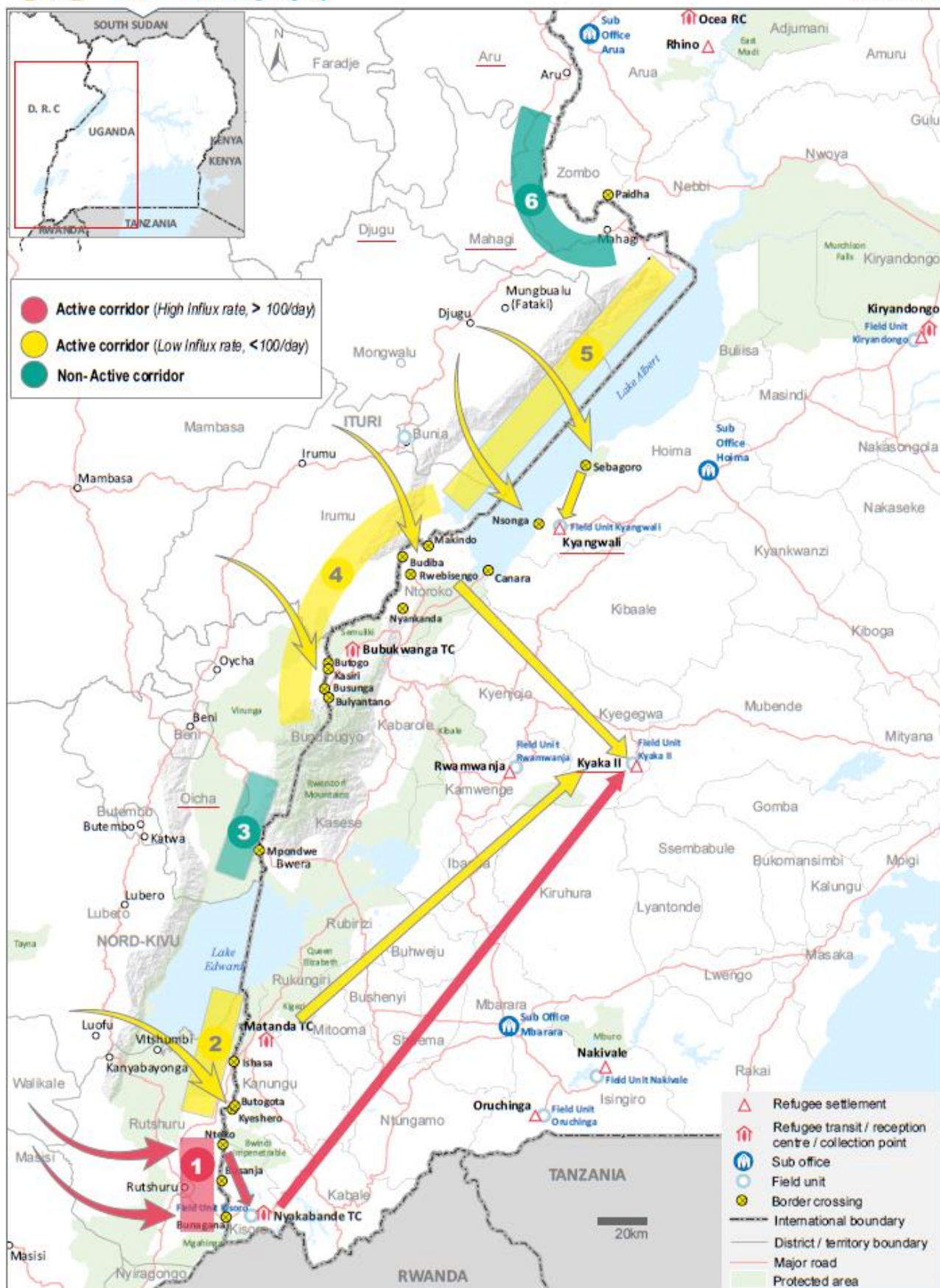




**UNHCR**  
The UN Refugee Agency

## DRC Refugee Influx to Uganda

October 2018



The boundaries and names shown on this map do not imply official endorsement or acceptance by the United Nations.

Data Sources: Daily arrivals data (October 2018) - Joint Border monitoring with UNHCR, OPM & NGO partners Feedback: IM Team UNHCR Uganda (ugakaimug@unhcr.org)

## 4.2. Beneficiaries

### 4.2.1 Total number of direct beneficiaries:

Direct beneficiaries per sector (in line with ECHO technical sectors)

The total number of beneficiaries for this action is 66,600 individuals, split as follows in the two countries of intervention:

- DRC: 50,000
  - 35,000 IDPs and returnees
  - 15,000 host communities' members
- UGA: 16,600
  - 11,200 refugees including 1,200 newcomers
  - 5,400 host communities' members.

NB.: For Uganda, beneficiaries have been extracted from UNHCR data, based on the areas given to Oxfam under the WASH cluster. To the total number of beneficiaries in the area, the expected target beneficiaries to be taken by UNHCR have been deducted and the estimation of new arrivals from DRC has been added.

### 4.2.2 Specificities of the direct beneficiaries (please specify, if possible, by referring to the groups as appropriate, e.g.: unaccompanied minors, people with disabilities, children, former combatants, etc.)

	<i>Number of beneficiaries</i>	<i>Males</i>	<i>Females</i>	<i>Boys</i>	<i>Girls</i>
<b>DRC</b>	50,000	10,500	12,000	12,500	15,000
<b>UGA</b>	16,600	2,656	3,486	5,810	4,648

Calculations have been made using ratio applied by UNHCR in the region:

- One household comprise 5 members in average
- DRC IDPs/Returnees and host communities disaggregation: Males 21%, Females 24%, boys 25% and girls 30%
- UGA Refugees and host communities disaggregation: Male – 16% - Female – 21% - Boys – 35% Girls – 28%

### 4.2.3 Mechanisms and criteria for the identification of the direct beneficiaries

#### DRC

In DRC needs have been identified under current projects such as the last eight months emergency response funded by ECHO 2018 project, which began on May 1, 2018 – December 2018. Beneficiaries evolving needs have been identified and monitored through periodic participatory evaluations of the different sectors (done by Oxfam and other partners – see assessments section). Self-reliance activities may be welcome in this environment as most of the displaced are returning to their original environment as mentioned above.

Selection of Protection Committee and Women's Forum members is done through participatory elections. A representative community meeting (with women and men from IDP and host communities and different ethnic/social groupings) is held, selection criteria are shared and members are nominated and approved.

The project will target areas with recent IDPs/Returnees. Most of evaluations and project assessments are showing these recent IDPs/Returnees have huge needs in food security, however

the difference with IDPs/Returnees from longer time and some of the hosting community members is not that significant. To be fair, beneficiaries' selection will be made on level of food insecurity rather than status. The main elements considered will be Food Score Consumption and vulnerability criteria established with the beneficiary population. Field door-to-door assessments will be carried out by Oxfam specialised team. Local committees and complain mechanisms will be put in place to facilitated the beneficiaries identification process.

## **UGA**

Oxfam has been working in 2 operational zones of Mukondo C and Kaborogota, these zones were given to Oxfam based on the huge needs in terms of WASH gaps. Mukondo C was the epicenter of Cholera outbreak in March/April 2018. On addition, these 2 zones were the main settlement areas for new refugees settling in Kyaka II. Both zones have increasing population figures, the land ratio for refugees has been reduced from nearly 10,000 square meter to almost 900 square meter, the zones were heavily affected as they received new relocations compared to other areas. The gender and protection analysis conducted by Oxfam indicated how the land size has been reduced and therefore affecting production that the refugees depend on to supplement their daily food ratios. Recent WASH master plan has clustered the camp into 3 clusters, 1, 2 and 3. Cluster 1 according to the road map will be covered by IOM in providing piped water system in that areas, Cluster 2 to be supported by Samaritan Purse and DRC, while cluster 3 was not committed to any partner, Oxfam intends to extend their services to this cluster as it partly next to the previous operational area, in total Oxfam will operate in Kaborogota, Sweswe, Buliti and Mukondo C.

For the new committees to be created, selection of committees' members will follow the same process than in DRC.

### **4.2.4 Describe the scope of and the arrangements for the involvement of the direct beneficiaries in the development of the action**

## **DRC**

Population of the targeted areas will contribute to the definition of the social vulnerability and will help to identify the direct beneficiaries. Protection focal points and committees will be chosen among the communities and will be working on a voluntary basis.

Three levels of community accountability will be put in place in order to involve local authorities and targeted population: (i) during the initial project launching community meeting in each selected villages; (ii) using complains' mechanism established for the entire project duration and (iii) in the project closing meeting.

Permanent communications will be established with Head of chieftaincies, sites chefs and administrative authorities and maintained during the entire project duration. This will allow involvement and ownership of the project outcomes at local level.

## **UGA**

The feedback and complaints mechanism include the Welfare Refugee Council (WRC) for additional guidance on the final activity design, implementation, joint assessment, and monitoring and evaluation. The first step in implementation will be a round of community meetings to present the planned activities and to get feedback directly from the intended beneficiaries and other key actors. In applying this approach, we are able to capture the voices from all the key groups that are not always considered in standard assessments. Volunteerism at the community level is an important element of this project (as Hygiene Promoters, Water User Committees (WUC), pump mechanics and as community mobilisers). The target populations will choose the volunteers based on criteria that they themselves establish. This process will create spaces where voices of the different age groups, backgrounds and gender can be heard. This valuable information derived from their feedbacks will be linked to groups targeted for livelihoods, protection, and WASH work.

#### 4.2.5 Other potential beneficiaries (indirect, catchment, etc.)

Other/indirect beneficiaries will include schools going children who will benefit from institutional WASH in schools facilities. Local partners who will be involved as part of the localization programmes. The district local government staffs who will directly participate and even benefit from capacity building activities under the project. The entire community who will benefit from the water pipeline, installations, livelihood and protection activities.

#### 4.2.6 Direct beneficiaries by sector (refer to “ECHO’s guidelines, Annex I”, pages 26-29: [http://ec.europa.eu/echo/about/actors/fpa\\_fr.htm](http://ec.europa.eu/echo/about/actors/fpa_fr.htm))

Direct beneficiaries per sector (in line with ECHO technical sectors)

	<b>Sectors</b>	<b>Number of beneficiaries</b>	<b>Males</b>	<b>Females</b>	<b>Boys</b>	<b>Girls</b>
<b>DRC</b>	WASH	50,000	10,500	12,000	12,500	15,000
	EFSVL	10,000	5,670	6,480	6,750	8,100
	Protection	50,000	10,500	12,000	12,500	15,000
	Advocacy	50,000	10,500	12,000	12,500	15,000
<b>UGA</b>	WASH	16,600	2,656	3,486	5,810	4,648
	EFSVL	7,000	1,120	1,470	2,450	1,960
	Protection	16,600	2,656	3,486	5,810	4,648
	Advocacy	16,600	2,656	3,486	5,810	4,648

#### [INT] In the event of a change, please provide information

	<b>Sectors</b>	<b>Number of beneficiaries</b>	<b>Males</b>	<b>Females</b>	<b>Boys</b>	<b>Girls</b>
<b>UGA</b>	WASH	69,247	22,402	25,788	10,483	10,574
	EFSVL	14,568	4,884	6,548	1,540	1,596
	Protection	19,812	4,174	5,154	5,821	4,663
	Advocacy	662	340	322	0	0

#### [FIN] In the event of a change, please provide information

	<b>Sectors</b>	<b>Number of beneficiaries</b>	<b>Males</b>	<b>Females</b>	<b>Boys</b>	<b>Girls</b>
<b>UGA</b>	WASH	71,810	17,249	25,852	11,490	17,219
	EFSVL	14,568	4,884	6,548	1,540	1,596
	Protection	19,812	4,174	5,154	5,821	4,663
	Advocacy	1,059	467	554	17	21

The rationale for surpassing the target was that, during budget revision some covid 19 response activities were generated and these were extended to host communities for instance the Infection Prevention and Control (IPC) assessment and mentorship initiatives that targeted all the 16 health centres of Kyegegwa district. These health centres were also supported with handwashing facilities



and liquid. Risk communication activities through media engagements such as radio talk shows , boda- boda talk- talk were also conducted.

**[FIN] Estimate by type of beneficiary**

Women:	60%,	Men:40%	(women + men total = 100 %)
Infants (aged < 5): ... %,	Children ... %, (aged < 18):	Elderly:	... %

### 4.3. Objectives, outcomes and activities

#### 4.3.1 Operational overview of the action: logical framework<sup>8</sup> (3 pages maximum)

Title of the action	Improving the safety and self-reliance of conflict affected displaced population and host communities in DRC and Uganda.			
Main objective	Improve the abilities of conflict affected population in Ituri (Eastern DRC) and Uganda (Kyaka II and Kyangwali – Western Uganda) to access essential WASH and food security and livelihoods services, combined with a strong advocacy support and an improved protection environment.			
	Intervention logic	Objectively verifiable indicators <sup>9</sup>	Verification sources	Risks and assumptions
Specific objective	Reduce vulnerabilities, promote human dignity and enhance self-reliance of 50.000 IDPs/refugees and host communities members in DRC as well as 16.600 refugees/host communities members in UGA, while strengthening capacities of local humanitarian leadership leading to self-management.	OVI-1 – Access to water, sanitation and basic hygiene knowledge has reach 80% of targeted displaced/Refugees and host communities by the end of the project. OVI-2 – At least 17.000 targeted beneficiaries (60% Women and 40% men) receive equal access to appropriate food and income-earning opportunities. OVI-3 – 60% of women and men report they feel better able to take action to improve their protection situation OVI-4 – Two networks are in place (one in each country) and are sharing information conducting awareness and	- Base line data - Initial (Participatory) detailed multi sectors assessments - PDM – Management reports -Feedback and complaint mechanisms - End line data (and/or Final evaluation) - Advocacy position papers -Coordination procedures	<b>DRC<sup>10</sup></b> <b><u>Assumptions</u></b> 1) Beneficiaries are not forced to new involuntary displacements 2) Relationships between displaced and host communities remain calm. 3) Food prices remain stable on local markets. 4) FARDC presence in the area warrant population free movements, access to field lands and markets. <b><u>Risks</u></b> 1) IDPs sudden raise created by armed groups' violence. 2) Security and political disturbances on main, resulting to lack of availability and food prices volatility. <b>UGA</b> <b><u>Assumptions</u></b> 1) Build on lessons particularly the ELHNA programme 2) The CRRF and other Government policies of ReHoPE are fully implemented and effective by various government and local structures.

<sup>8</sup> This table must provide a comprehensive general overview of the different elements of the action. It will contain only concise information on the results and the activities. Any changes made to the logical framework at the interim or final report stage will be communicated.

<sup>9</sup> Only Common Objectively Verifiable Indicators (OVI) have been recorder in the table here under. Detailed OVI per results is attached in Annex 01

<sup>10</sup> Assumptions and risks have been combined for specific objective, for more details refer to section 4 of this document and results assumptions and risks are addressed into activities details.

		advocacy in structured and similar ways.	- Gender Analysis reports - Security situation reports	3) Adequate sharing of information across countries on influx. 4) Useful approaches and lessons shared across the programme. <b><u>Risks</u></b> 1) Risk of tensions between host communities and refugees; between different groups of refugees from different ethnic groups and / or regions; 2) Chaos due to arrivals of massive numbers of refugees from DRC; 3) Outbreak of epidemics; 4) Risk of wrongful conduct 5) Finally, there is a risk of cholera outbreak
Outcomes	R1.1. WASH – Increase safe, equitable access to water for 66.600 beneficiaries R.1.2. SANITATION – 21.400 Beneficiaries have Improved safe access to appropriate and sustainable sanitation facilities R1.3. HYGIENE PROMOTION – Increased awareness of appropriate hygiene practices by women, men, girls, and boys among an estimated 46.200 DRC Refugees/new arrivals/IDPs and 20.400 Host Community members	R1.1-OVI – At least 70% of the total population of the targeted beneficiaries have improved access to safe water at a maximum 500m distance R.1.2-OVI – Number of people having access to dignified, safe, clean and functional excreta disposal facilities R1.3-OVI – 80% of beneficiaries are able to identify at least one major hygiene related health risk and cite 2 measures to prevent it.	- Water quality test results & monitoring reports. - Physical assessment report of WASH facilities - Monitoring reports – post distribution monitoring - Joint assessment WASH reports – Baseline/endline surveys - WASH cluster progress reports - Sanitary surveys – KAP and Barrier analysis. - (Weekly/Bi-weekly) Progress/field visits Reports - UNHCR Monthly Sector Working Group assessment reports – technical team monitoring and output records - Focus Group Discussions – Monthly water usage survey report – Household water consumption	
	R2: EFSVL – Improved access and utilisation of food for 10.000 people in DRC and equal Incomes Generating Activities for 7.000 beneficiaries in UGA	R2.1-OVI – 10.000 beneficiaries in DRC have an increased access to and better utilisation of food. R2.1 – OVI – 7000 beneficiaries in UGA have improved access to stable incomes generating opportunities.	- Baseline Survey - FGDs and Individual interviews - Vulnerability assessment - Post Distribution Monitoring - Endline Survey	

	R3: PROTECTION – 66.600 women and men in target communities are better able to identify, prevent, mitigate and respond to protection threats	R3.1-OVI – 50% of women and men in target areas who are able to identify at least two protection risks and give ideas on how to mitigate them R3.2-50% of women and men in target areas who are able to name three referral services and explain how to access them	<ul style="list-style-type: none"> <li>- Baseline and end line surveys (FGDs, KIIs, sampling)</li> <li>- Progress reports – Protection Sector Working Group reports</li> <li>- Advocacy actions log</li> <li>- Service mapping documents</li> <li>- IEC material</li> </ul>
	R4: HUMANITARIAN ADVOCACY – Strengthen humanitarian advocacy and coordination mechanisms	R4.1-OVI – At least 3 Refugees Committees and coordination structures have been established/or revitalised and are able to conduct humanitarian advocacy at local level and these efforts will be integrated in regional advocacy initiatives.	<ul style="list-style-type: none"> <li>- Baseline and end-lines surveys.</li> <li>- Interviews of Water/targeting and protection committees' representatives.</li> <li>- Interview with members of the coordination structures.</li> <li>- Interview with OCHA in Beni/Bunia and relevant cluster leads</li> </ul>
	<b>Democratic Republic of Congo</b>		<b>Uganda</b>
<b>R1-WASH</b>	<b>R1-1. WATER – Increased safe, equitable access to water for 50.000 (DRC) and 16.600 (UGA) beneficiaries</b>		
	<b>AR1-1.1</b> Pre-technical assessment and mapping of water points / sources to be developed and rehabilitated // <b>AR1-1.2.</b> Geophysical surveys and drilling/construction of new wells / boreholes equipped with hand-pumps // <b>AR1-1.3.</b> Rehabilitation/equipment of 20 existing water supply points // <b>AR1-1.4.</b> Installation of 2 solar pumping systems // <b>AR1-1.5</b> Protection/Rehabilitation of 8 spring sources // <b>AR1-1.6.</b> Rehabilitation of 1 gravity scheme // <b>AR1-1.7.</b> Construction of 1 new gravity fed system // <b>AR1-1.8.</b> Trainings – Operation/maintenance & water safety plans		<b>AR1-1.1</b> Support the construction of the 7kms water distribution system // <b>AR1-1.2.</b> Daily water quality monitoring // <b>AR1-1.3.</b> Strengthening coordination framework including local authorities // <b>AR1-1.4.</b> Building capacity of 30 WASH partners staff // <b>AR1-1.5:</b> Rehabilitation/Repair of 10 boreholes in Kyaka II and hosting villages // <b>AR1-1.6:</b> Procurement and installation of Rainwater harvesting tanks.
	<b>R1-2. SANITATION- 21.400 Beneficiaries have improved safe access to appropriate and sustainable sanitation facilities</b>		
	<b>AR1-2.1.</b> Construction of 200 communal / shared households latrines with hand washing units // <b>AR1-2.2</b> Distribution of 200 latrine construction kits to households // <b>AR1-2.3</b> Construction of 10 laundry slabs at new water points // <b>AR1-2.4</b> Solid Waste management		<b>AR1-2.1</b> Construction of 50 latrines for Persons with Special Needs (PSN) // <b>AR1-2.2.</b> Construction of 100 stances of communal and 100 bathing shelters // <b>AR1-2.3.</b> Decommissioning of existing communal Latrines (150 blocks) // <b>AR1-2.4.</b> Establishment and Production of dome shaped ferro-cement slabs // <b>AR1-2.5 –</b> Provision of sanitation kits safe

R2- EFSVL		water storage & handwashing facilities
	<b>R1-3 – Hygiene Promotion – Increased awareness of appropriate hygiene practices by women, men, girls, and boys</b>	
	<b>AR1-3.1</b> – Community engagement-through creation of integrated community structures // <b>AR1-3.2</b> – Project inception meetings // <b>AR1-3.3</b> – Design and production of IEC Materials // <b>AR1-3.4</b> – Training of RECOs (CHVs for Hygiene promotion // <b>AR1-3.5</b> – Child to child- monitors of hygiene in the targeted areas // <b>AR1-3.6</b> – Distribution of Hygiene kits to 200 households // <b>AR1-3.7</b> – Mass campaigns- (handwashing latrines, mosquito net) // <b>AR1-3.8</b> – Training of water committees and maintenance // <b>AR1-3.9</b> – Training of local authorities on WASH // <b>AR1-3.10</b> – Distribution of family latrine maintenance kits // <b>AR1-3.11</b> – Distribution of Environmental waste management kits	<b>AR1-3.1</b> – Hold 2 Inception meetings // <b>AR1-3.2</b> – Behavioural barriers analysis // <b>AR1-3.2</b> – Support 10 Field based community mobilisers and 40 Hygiene Promoters // <b>AR1-3.3</b> – Hygiene related trainings for 100 beneficiaries // <b>AR1-3.4</b> – Facilitate formation and trainings of Schools' Health Club // <b>AR1-3.5</b> – Hygiene awareness on safe water chain, appropriate latrine use, handwashing, environmental cleanliness // <b>AR1-3.6</b> – Hygiene promotion public awareness or mass campaign.
R3- PROTEC TION	<b>R2 – EFSVL – Improved access and utilisation of food for 10.000 people in DRC and equal Income Generating Activities for 7.000 beneficiaries in UGA</b>	
	<b>AR2.1</b> – Rapid market and needs assessment // <b>AR2.2</b> – Community awareness and beneficiary identification // <b>AR2.3</b> –Establishment and monitoring of a system of accountability // <b>AR2.4</b> – Cash distribution for food for 1800 households // <b>AR2.5</b> – Community awareness campaigns on dietary diversity // <b>AR2.6</b> – Post-distribution monitoring	<b>AR2.1</b> – Continued Support to backyard gardening (seeds/tools) // <b>AR2.2</b> – Skills training & development in apprenticeship skills // <b>AR2.3</b> – Support resilience to fuel wood through cash for planting tree // <b>AR2.4</b> – Distribution of energy saving stoves (including monitoring) // <b>AR2.5</b> – Cash for work on infrastructure projects (including monitoring) // <b>AR2.6</b> – Post distribution monitoring
R4- ADVOC ACY	<b>R3: PROTECTION – 66.600 women and men in target communities are better able to identify, prevent, mitigate and respond to protection threats</b>	
	<b>AR3.1</b> – Establish protection focal points, protection committee and Women Forums in Ituri // <b>AR3.2</b> Mapping access to referral services // <b>AR3.3</b> Training for local authorities, local leaders, service providers and local media on protection, their roles and responsibilities and confidentiality // <b>AR3.4</b> Strengthening Information dissemination mechanisms // <b>AR3.5</b> Conduct gender in emergency training for beneficiaries // <b>AR3.6</b> Conduct protection activities in communities (incl. awareness, follow-up activities monitoring) // <b>AR3.7</b> Provision of dignity Mama Kits // <b>AR3.8</b> Provision of personal solar lamps // <b>AR3.9</b> – Active risk reduction and	<b>AR3.1</b> Establishment and Strengthening of 10 Gender and Protection Committees and Women Own Forum // <b>AR3.2</b> Capacity Building of refugee settlement's leaders (200 leaders) // <b>AR3.3</b> - Conduct 150 community dialogues // <b>AR3.4</b> – Strengthening Information dissemination mechanisms in 3 zones // <b>AR3.5</b> – 2 Exchange learning Visits. Refugee and host community leaders // <b>AR3.6</b> – Conduct Household visits by Women own forum // <b>AR3.7</b> Male engagement in SGBV prevention // <b>AR3.8</b> Provision of dignity Mama Kits // <b>AR3.9</b> Provision of household solar lamps and public solar lamps // <b>AR3.10</b> – Support Recreation activities in 10 villages // <b>AR3.11</b> – Participate in 5 Capacity building of Oxfam staff and partners // <b>AR3.12</b> - Conduct

	referral activities // <b>AR3.10</b> Protection and social cohesion activities // <b>AR3.11</b> Community Awareness Campaign on SGBV	conflict prevention and conflict mitigation/resolution sessions // <b>AR3.13</b> – Strengthening of the 2 referral pathway and update it quarterly // <b>AR3.14</b> – Conduct 3 trainings on SASA methodology for partner / stakeholders // <b>AR3.15</b> – 2 Participatory assessments including the GiE, AGDM // <b>AR3.16</b> – Participate in 12 events related to Gender and Protection
	<b>A.R4 – HUMANITARIAN ADVOCACY – Strengthen humanitarian advocacy and coordination mechanisms</b>	
	<b>AR4.1</b> – Assessment of existing structures & coordination mechanisms in place (feeding all the sectors above) // <b>AR4.2</b> – Develop and strengthen refugees’ network and local actors (includes trainings for advocacy and coordination) // <b>AR4.3</b> – Strengthen National and regional advocacy // <b>AR4.4</b> – Regional Advocacy and learning meeting	
	<i>Prerequisites</i> <b>DRC</b> Humanitarian access is secured; Customary, administrative and military authorities are supportive of the project. <b>UGA</b> All refugee numbers are verified by OPM and UNHCR; Level of current funding to the refugee response is maintained and further increased; The CRRF framework is respected by all actors as a key guide to refugee and host community coordination mechanism	

### 4.3.2 More detailed information per outcome<sup>11</sup>

#### 4.3.2.1 Outcome 1: Increased access to safe water, sanitation and hygiene for IDPs, refugees and host communities in the targeted areas

**Outcome 1.1 (R1.1):** Increased safe, equitable access to water for 50.000 (DRC) and 16.600 (UGA) beneficiaries

**Outcome 1.2 (R1.2):** 21.400 beneficiaries have improved safe access to appropriate and sustainable sanitation facilities

**Outcome 1.3 (R1.3):** Increased awareness of appropriate hygiene practices by women, men, girls, and boys among an estimated 46.200 DRC refugees and IDPs and 20.400 host communities members

#### 4.3.2.1.1 At the proposal stage

- **Sector:** WASH
- **Related sub-sector:** R1.1 – Water  
R1.2 – Sanitation  
R1.3 – Hygiene promotion
- **Beneficiaries (status + number):**

	Sectors	Status	Number of beneficiaries	Males	Females	Boys	Girls	Comments
DRC	WATER	Total	50000	10500	12000	12500	15000	Male 21%, Female 24%, boy 25% - girl 30% - UNHCR data
		IDPs / Returnees	35000	7350	8400	8750	10500	70% total
		Hosts	15000	3150	3600	3750	4500	30% total
	SANITATION	Total	11000	2310	2640	2750	3300	200 communal latrines (10.000 people) 200 Households assisted (1000 people)
		IDPs / Returnees	7700	1617	1848	1925	2310	
		Hosts	3300	693	792	825	990	
	HP	Total	50000	10500	12000	12500	15000	
		IDPs / Returnees	35000	7350	8400	8750	10500	
		Hosts	15000	3150	3600	3750	4500	
UGA	WATER	Total	16600	2656	3486	5810	4648	UNHCR data – Male – 16% - Female – 21% - Boy – 35% Girl – 28%
		Refugees	11200	1792	2352	3920	3136	10000 refugees already in country and 1200 new

<sup>11</sup> For each result identified in the logical framework, more detailed information necessary for a proper understanding of the proposal/report will be gathered here. A specific sub-section per outcome at the proposal, interim report and final report stages has been provided for (please do not update the information of a previous stage in this section, please comment on the change in the appropriate sub-section for the outcome).

	SANITATION							comers.
		Hosts	5400	864	1134	1890	1512	
		Total	10400	1664	2184	3640	2912	
	HP	Refugees	8000	1280	1680	2800	2240	
		Hosts	2400	384	504	840	672	
		Total	16600	2656	3486	5810	4648	
		Refugees	11200	1792	2352	3920	3136	
		Hosts	5400	864	1134	1890	1512	

- **Indicators for this outcome<sup>12</sup>:**

R1.1-OVI – At least 70% of the total population of the targeted beneficiaries have improved access to safe water at a maximum 500m distance

R.1.2-OVI – Number of people having access to dignified, safe, clean and functional excreta disposal facilities

R1.3-OVI – 80% of beneficiaries are able to identify at least one major hygiene related health risk and cite 2 measures to prevent it.

**Outcome 1.1** (R1.1): Increased safe, equitable access to water for 50.000 (DRC) and 16.600 (UGA) beneficiaries

## **DRC**

### **Activity R1-1.1 Pre-technical assessment and mapping of water points / sources to be developed and rehabilitated.**

Before commencement of construction activities, Oxfam will undertake an identification and selection exercise of candidate beneficiary villages. The selection will be based on needs and will be conducted in close consultation with beneficiary community members/leaders. This will form part of a multi-sectoral assessment at project launch including EFSVL, protection and advocacy. The criteria of selection for rehabilitation sites will include existence of former community sources (springs for gravity fed systems) and/or viability of drilling based on geophysical survey results. For hand pumped boreholes, Oxfam will ensure selected sites are able to accommodate recommended hand pump yields (minimum 330l/m) as well as the community willingness to own the facilities. The communities will also be involved during selection of potential spring sources to finalize issues pertaining to land ownership and way leaves for pipe routes. Relevant technical data from springs including spring yields, water quality analysis, target population figures and the confirmation of perennial status of the sources. Other important evaluations will include topographic surveys to establish the most economic pipeline routes and strategic locations for tanks, Air release valves, washouts and land distribution points. Following these, context-specific and economical system designs will be completed. Oxfam will base its implementation approach on a demand driven approach. Memorandums of Understanding with committees will be prepared elaborating roles and responsibilities of Oxfam and communities to ensure sustainable maintenance of facilities.

### **Activity R1-1.2. Geophysical surveys and drilling/construction of new wells / boreholes equipped with handpumps**

Oxfam will utilize resistivity geophysical equipment to undertake groundwater surveys in selected localities. This method is preferred as is cost effective and generally accurate for small scale groundwater development work. Given that most hand pumps are considered appropriate for shallow water depths, the maximum probe depth will be 100m. Oxfam has a drilling rig in country with a capacity to drill up to 150m using Rotary DTH and/or Mud drilling method. Communities members (women and men) will be consulted for approval of identified site and finalize land

<sup>12</sup> For more detailed indicators per countries, please refer to Annex 01



agreements. The local authorities will be involved at every stage to ensure no future conflict exist on land.

A total of 20 boreholes is targeted to be constructed and will be equipped with hand-pumps. The construction of the boreholes will include casing, development and test pumping to ascertain yields and to enable recommendation of sustainable yields. Oxfam proposes 70% of tested yield as optimal yield of all new boreholes. The testing pumping results will be analysed to determine borehole and aquifer characteristics and completion shared with the water committees and local water departments REGIDESO and/or SNHR (Service National d'Hydraulique Rurale). Oxfam will utilize the drilling exercise as capacity building of SNHR staff as well bureau central de la zone de santé (BCZ) technicians on aspect of groundwater development including borehole monitoring and rehabilitation

### **Activity R1-1.3. Rehabilitation/equipping of 20 existing water supply points (wells, boreholes etc.)**

The project targets rehabilitation of existing water sources in the communities in additions to new ones proposed. All water points will be located <500m from dwellings and will be managed by committees selected from and elected by the beneficiary communities.

### **Activity R1-1.4. Installation of 2 solar pumping systems connected to a water supply network**

During the drilling exercise Oxfam will identify 2 boreholes with relatively high yields above 2l/s and where users range between 500 to 1000 households for the installation of solar pumped system and connected to a small water network. These will be set up ideally in towns, medium to small centres, and will provide water to public institutions including health centres and schools. Communities will be organized to form water user groups and with agreed tariff mechanisms for operation & maintenance (O&M) and sustainability as per water safety plans

### **Activity R1-1.5: Protection/Rehabilitation of 8 spring sources**

8 spring sources will be developed to provide additional safe water and improve coverage in areas that are currently over-stressed. Protection will include construction of head wall with draw off points, apron, and cut off drains. Sites will be selected and discussed with women and men in target communities with specific emphasis on identifying potential protection risks and ways in which they can be mitigated (e.g. clearing of bush along water point routes, ensuring easy access to avoid accidents in the rainy season, having two access routes to the water point to enable easy escape if necessary).

### **Activity R1-1.6. Rehabilitation of 1 gravity scheme**

Oxfam plans to rehabilitate 1 gravity system in Mabalako, replacing old transmission mains, developing additional mains, rehabilitating non-functioning standpipes and pipeline extension into new settled areas. The operation will be led by technicians who will also identify other problems with the existing water distribution networks based on detailed technical analysis, and define appropriate technical solutions during rehabilitation. Locations of tap-stands will be decided with women and men in target communities, specifically considering ways to mitigate potential risks.

### **Activity R1-1.7. Construction of 1 new gravity fed system**

The implementation of the new water supply system will be done by Oxfam upon detailed technical evaluations which will be conducted before the start of activities. The detailed evaluation will focus on water source quality, quantity and reliability. Additional information including pipeline profiles, storage requirements, and numbers of tap-stands needed will also be determined. The source would be constructed and completed with a water collection and distribution tank, gravity distribution pipelines, and distribution standpipes. Local BCZ technicians will be trained for operation and maintenance of the installed water system for eventual hand over.

### **Activity R1-1.8. Trainings -Operation and maintenance and water safety plans**

50 Water management committees (rehabilitated sources and boreholes equipped with hand-pumps and solar systems) will be established and trained to effectively manage water services sustainably. Oxfam will encourage the participation of women in this process to ensure fair gender

representation through ensuring representation in of at least 50% in committees. These will be the same bodies which supporting targeting for the action and for other activities. Oxfam will in collaboration with committees identify train and equip village technicians to cater for repairs and maintenance of the pumps. All water committees will be encouraged to collect monthly fees from households to be used for procurement of parts and pay technicians. The trained committees will be equipped with tool kits for operation and maintenance of the installed water systems, Oxfam will prepare water safety plans for every system installed to serve as a guide in O&M of the infrastructures

## **UGA**

### **Activity R1-1.1 Support the construction of the 7kms water distribution system to Kaborogota, Sweswe and Buliti zones in cluster 3 of Kyaka II settlement of water supply system.**

In order to address sustainable water access, a water supply master plan has been developed by UNHCR that has divided the settlement into 3 clusters (UNHCR strategies for phasing out water trucking August 2018). This is expected to meet the current water needs and potentially the needs of new expected influx once constructed but also reduce distance to water collection points whose distance from each other pose protection and gender-based risks to POCs (people of concern). Whereas 2 of the clusters have been committed for partner intervention, cluster 3 where Oxfam operates has no commitment due to the fact Oxfam has no funds. Oxfam plans to extend at least 7 Km of pipeline to meet the water targeted for its beneficiaries in the settlement.

By experience Oxfam in UGA has built 3km of water distribution system at 92 million UGX. But for this action, as it will be connected to IOM established tanks, Oxfam could save some costs and will deliver 7 km for 110 million UGX.

### **Activity R1-1.2. Daily water quality monitoring, mainly for Free Residual Chlorine and Faecal coliforms.**

The programme will monitor water quality in terms of bacteriological, physical and chemical composition both for chlorinated and non-chlorinated water sources. The following parameters will be monitored; residual chlorine levels, turbidity, chemical composition, colour, smell etc. Bi-weekly bacteriological analysis will be conducted to rule out e-coli the proxy indicator for faecal contamination of water.

Pumps attendants will manage the water system to be developed and do the monitoring. The exit strategy will be to transfer these attendants costs to UNHCR if needed or ideal case, a cost recovery process (where the water committees will charge amount to maintain the system) will permit to transfer the costs of these attendants.

### **Activity R1-1.3. Strengthening coordination framework (WASH and Technical working groups within WASH) and with local authorities**

Oxfam has been keen to strengthening WASH coordination in Kyaka II. Oxfam will continue to support joint planning, joint assessments and collective decision by partners.

### **Activity R1-1.4. Building capacity of 30 WASH partners staff on water treatment, quality monitoring**

Oxfam will be working local authority and partners in ensuring sustainable access to WASH services, studies on cost recovery will be conducted to identify best mechanisms for local communities can operate and maintain water services. In the initial stage, Oxfam in the interim will identify local capacity gaps and build the capacity.

### **Activity R1-1.5. Rehabilitation/Repair of 10 boreholes (hand-pumps) in Kyaka II and hosting villages**

The main challenge in Kyaka II is the low ground water potential, the result is reliance shallow wells fitted with hand-pumps that relies heavily on shallow aquifers for recharge and which are prone to contamination. Oxfam will ensure that routine maintenance of hand pumps is essential to maintain continued access to clean water.

**Activity R1-1.6: Procurement and installation of 4 rain water harvesting tanks**

Procurement and installation of 4 rain water harvesting tanks for institution in Kyaka and Host community will be done. This will comprise guttering system, 7.5m<sup>3</sup> stainless steel tank, draw of points with 2 outlets and drainage.

**Outcome 1.2 (R1.2):** 21.400 beneficiaries have improved safe access to appropriate and sustainable sanitation facilities

**DRC****Activity R1-2.1. Construction of 200 communal / shared households' latrines and with hand washing units**

Oxfam will construct sex segregated communal latrines when it is most appropriate. Then shared household latrines in target locations will also be built. The overall aim is to fight open defecation and be adaptable to the specific needs at micro level. The action will prioritize female-headed households, households hosting unaccompanied children, the elderly and chronically ill household members. The choice of location of latrines and the design will be determined jointly by the beneficiaries (women and girls taking into consideration specific security risks they face)) in collaboration with Oxfam's public health team, and each latrine will be installed with low cost hand washing units.

**Activity R1-2.2 Distribution of 200 latrine construction kits to households**

Oxfam will strive to pilot increased latrine coverage through support of households with sanitation kits to be distributed to households that wish to construct own latrines. In this case Oxfam will supply the kits and households will contribute the remaining resources to erect the superstructure and pit digging. The final kit contents will be determined after consultations with identified interested households (max 75usd total). If this approach is successful then it will become an option to cover more with less costs and promote use of local materials.

**Activity R1-2.3 Construction of 10 laundry slabs at new water points**

Laundry slabs will be constructed at strategic water points to ensure women and girls who are mostly responsible culturally for washing activities in the home have suitable areas to wash and clean laundry. This activity addresses women's role as caregivers in households and will also serve as a women friendly space.

**Activity R1-2.4 Solid Waste management (160 environmental cleaning kits: including wheelbarrow, shovels, rakes, rubbish bins)**

To ensure a clean and proper environment in communities, this response will include solid waste management activities organized through the hygiene committees and materials i.e. shovels, rakes, and hoes – will be distributed to facilitate solid waste removal and transport to central collection points. Simple household solid waste management practices will be promoted to reduce the need for multiple collections sites. Oxfam has in the past successfully utilized biodegradation as a form of waste management: use of organic pits has enabled beneficiaries to improve productivity from their home vegetable gardens.

To prevent breeding of disease causing vectors and to aid faster decomposition, Oxfam will promote adding a layer of soil to the pits after adding waste. Pits will be situated in areas that are not in the path of runoff water. In most of the intervention areas, plastic bags and bottles are not as present as in some more urban settings; where present, separating these from other waste will be an option. In public places (markets etc.) where waste generation is high, a central disposal site will be identified jointly with the community and health zone, following which a solid waste pit will be constructed.

## **UGA**

### **Activity R1-2.1 Construction of 50 latrines for Persons with Special Needs (PSN), across the targeted 3 zones**

Oxfam focus for people with special needs is WASH related, Oxfam targets disabled persons who cannot afford construction and are not able construct and need specially designed services.

### **Activity R1-2.2. Construction of 100 stances of communal and 100 bathing shelters**

Under this activity, Oxfam will build complete latrines with handwashing stations. New arrivals require availability of communal latrines. These accommodate 4-10 household as emergency measures. New refugees are being settled in one Zone of Bwiriza and as Ips Oxfam will lead the construction.

### **Activity R1-2.3. Decommissioning of existing communal Latrines (150 blocks).**

There exist latrines that were constructed by other WASH partners and now with no resources and the users have constructed family latrines that they can manage. Oxfam will manage the decommissioning of 150 existing blocks to support communities.

### **Activity R1-2.4. Establishment and production of dome shaped ferro-cement slabs**

Slabs will be moulded from local materials (sand, cement and weldmesh) to provide a sustainable and cost effective options for latrine construction. Groups from within refugee and host community will be trained on slab productions to also provide additional livelihood opportunity, in close coordination with the EFSVL activities under this action.

### **Activity R1-2.5 – Provision sanitation kits, safe water storage and handwashing facilities**

This activity will be in priority for new refugees and will serve 1500 Households. Oxfam will provide community households with latrine construction materials, storage for safe water and handwashing facilities. The sanitation kits will comprise:- 1 plastic/dome slabs or san plats, 6 treated logs, 4 eucalyptus pole, 2 kg nails, tarpaulin for roofing. A 14l bucket with taps for will be provided for households' drinking water storage together with 5l jerry cans for tippy tap and as handwashing facilities.

**Outcome 1.3 (R1.3):** Increased awareness of appropriate hygiene practices by women, men, girls, and boys among an estimated 46.200 DRC Refugee new arrivals/IDPs and 20.400 host communities' members

## **DRC**

### **Activity R1-3.1 – Community engagement-through creation of integrated community structures**

This activity will be implemented through a community user groups. To reduce beneficiary vulnerability risks related to health and the use of WASH facilities (water and sanitation, and rubbish central holes' facilities) Hygiene promotion will focus on mobilization of community for maintenance and monitoring of facilities as described bellow:

*Water Points:* Oxfam will ensure that the design of water collection points to facilitate proper waste water drainage. The public health promotion team will work with the community via the volunteers and hygiene committees, to ensure that there is no stagnant water, no rubbish, no open defecation, near water point, and in inhabited areas. This measure is especially important in controlling mosquito breeding, particularly in eastern DRC which is a malaria endemic zone and will also reduce the risk of water contamination.

*Latrines management:* Public health promotion activities are structured to promote the safe use and maintenance of latrines as the safest mode of excreta disposal, discourage open defecation and

ensure children faeces are properly disposed of in a latrine. For public latrines constructed in IDPS camps, Oxfam will work closely with the community volunteers to identify and organize households in groups of 4 to 5, rotating daily on a volunteer basis, to be responsible for cleaning latrines – morning, noon and evening. In case of house hold latrine, each cluster of households will oversee cleaning of their own latrine. To support the community in this activity, Oxfam will supply latrine cleaning tools and materials.

*Solid waste management:* To ensure a clean and proper camp or community environment, this response will include solid waste management. Activities will be organized through the hygiene committees and materials -shovels, rakes, and hoes- will be distributed to facilitate solid waste disposal transport to central collection points to allow communities to manage the solid waste in and around the IDP sites. The community health volunteers will be trained in sensitizing the camp population on how to take care of their environment and be less vulnerable to possible environmental hazards (vector control). Training will be provided by the Oxfam public health promotion team. Waste management campaign sessions which will include local leaders mobilizing the community to remove garbage will be held frequently.

### **Activity R1-3.2 – Set up project inception meetings with stake holders including MOU with BCZ for collaboration and supervision of implementation**

Before implementation of project activities meetings with local women and men leaders, community members will be convened with the sole purpose of explaining the proposed project, ways of working and to reiterate the various roles played by the actors including Oxfam, community and local authorities. Feedback of women will be solicited as a priority to make sure women voices are heard. All aspects of the program including beneficiary selection and rationale of the proposed activities will be explained to the community at this stage. Subsequent meeting will be held for evaluation, feedback, planning, and handover at the appropriate times.

### **Activity R1-3.3 – Design and production of IEC Materials**

To ensure effective community mobilization and awareness, Oxfam will develop various IEC materials including flipbooks, Images and board games. Community volunteers trained both on technical and Behaviour Change Communication (BCC) under the project aspect will use these IEC materials for community mobilization and awareness in project villages.

### **Activity R1-3.4 – Training of RECOs (CHVs) in the territories for Hygiene promotion**

As a strategy, Oxfam works with hygiene promotion (HP) volunteers from the beneficiary community to spread hygiene promotion messages. They form part of community management structures that are established as links between the community entry and exit strategy. These CH volunteers (men and women) are identified from the beneficiary community. Trainings for capacity building will be provided in favour of the members of these community structures identified to equip them in mobilizing other families to take possession of and properly use the Oxfam installed water and sanitation facilities – latrines, bathrooms, laundry blocks, water points and waste disposal points. The hygiene promotion trainings focus on community engagement and mobilization, hygiene key messaging and child-to-child approaches. These trainings will be conducted by BCZ in collaboration with Oxfam. Each CHV volunteer is responsible for 500 beneficiaries (37xfam37.. 100 households). They will be provided with incentives including jerrycan, soap, t-shirts, gumboots, etc. Oxfam will need hygiene promotion volunteers to supplement the existing CHVs/"Relais communautaires" (RECO) from BCZ to support the WASH committees in all areas of intervention where interventions are envisaged.

### **Activity R1-3.5 – Child to child- monitors of hygiene in the targeted areas**

Available data on displaced communities has shown that 60% of the displaced population are children. Oxfam will therefore carry out "Child-to-Child" activities to ensure engagement of children in hygiene promotion; as improving children's hygiene-related practices in school and at home is an effective means of changing behaviour at the household level. The child-to-child clubs will be organized and trained and activities will comprise sessions on: 1) handwashing, 2) sanitation

practices, 3) open defecation, 4) drawing, and 5) song and drama.

### **Activity R1-3.6 – Distribution of Hygiene kits to 200 households**

Household Hygiene Kits (NFI) will be distributed to vulnerable people. Oxfam and the community will identify selection criteria and post distribution monitoring will be conducted to ensure the satisfaction of the beneficiaries, quality of materiel and use of the material distributed. Oxfam, local authorities and community representatives will define the selection criteria's and ensure that the vulnerability selection approach is taken in account.

### **Activity R1-3.7 – Mass campaigns on the washing of hands and the correct use of latrines as well as the mosquito net**

Mass campaigns will focus on cleaning water collection points by the community, massive mobilisation of Jerry cleaning and storage of drinking water in clean containers.

Oxfam will conduct mass campaign activities related to global WASH celebration days. This will include the International Water Day celebration in March, global hand washing day in October and Toilet international events day in November.

Mass campaigns will focus on:

- Cleaning water collection points by the community
- mobilisation for Jerrycan cleaning
- Storage of drinking water in clean containers;

### **Activity R1-3.8 – Training of water committees and maintenance of the adductions to be developed**

Experience in other parts of Eastern DRC have shown that where a robust water supply system (quality of materials and designs) is constructed, beneficiary communities tend to trust longevity and contribute to sustain these systems for a long time. The motivation is usually adequate water that is available and seen to cover basic needs of the community. On the contrary, where new systems breakdown before or immediately following exit or not serving the basic needs, communities in such cases have withdrawn support and are unwilling to contribute tariffs. This therefore must be considered in every setting and before setting up of Water management committees in our programs. The two scenarios above emphasize demand and supply driven approaches to water supply in rural communities.

### **Activity R1-3.9 – Training of local authorities on their roles and responsibilities in WASH activities to be carried out**

Oxfam also engages and builds capacity of local leaders from various areas in terms of community and hygiene promotion who later support hygiene volunteers' work in hygiene promotion. Oxfam will identify approximately 100 local leaders (including man and women) in various areas targeted by this project to be trained and involved in hygiene promotions Activities. Oxfam and BCZ will conduct these training that will be focused on community engagement and mobilization, hygiene key messaging and child-to-child approaches

### **Activity R1-3.10 – Distribution of family latrine maintenance kits (200 households)**

During project implementation, a key hygiene promotion activity will be inspection of latrine and shower cleanliness, with community volunteers elected by Hygiene Committees, responsible for daily cleaning of the latrines. Regular spot checks will be conducted by the PHP team and a question on latrine cleanliness also posed during the weekly household surveys. Latrine cleaning kits will be distributed through the elected community structures in collaboration with local leaders and camp managers.

### **Activity R1-3.11 – Distribution of Environmental waste management kits (160 households)**

CHVs will be trained to sensitize camp populations on proper care of their environment, waste management (including waste reduction and reuse). Oxfam will provide environmental cleaning kits for vector control, clearing stagnant water and removing waste regularly).

## **UGA**

### **Activity R1-3.1 – Hold 2 Inception meetings**

These will be avenues of accountability where Oxfam will introduce the programme to key stakeholders on the design of the programme, its goal and objectives, the role of each stakeholder and the support required. These will be conducted at district level, community and refugee leaderships' levels.

### **Activity R1-3.2 – Behavioural barrier analysis**

This assessment will be done at the beginning of the action to analyse the potential barriers for hygiene promotion and overpass them. This is based on Oxfam worldwide experience and has proved to be efficient to adapt the hygiene promotion approach to the local context.

### **Activity R1-3.3 – Support 10 Field based community mobilisers and 40 Hygiene Promoters**

Field based community mobilisers and hygiene promoters will be Oxfam frontline workers, connecting the programme to the beneficiaries and enhancing their participation. They will be trained in cholera prevention, emergency WASH approaches, WASH in emergencies.

### **Activity R1-3.3 – Trainings 100 beneficiaries**

This activity will have to train 100 WASH committees, refugee welfare committees, Local Councillors, VHTs, gender & protection committees in cholera and Ebola preparedness.

### **Activity R1-3.5 – Facilitate formation and trainings of Schools' Health Club**

School WASH activities and child to child activity kits will be provided for 5 schools (approximately 100 Children and teachers). This will help to create the schools' health clubs and encourage hygiene discussions and practices.

### **Activity R1-3.6 – Hygiene awareness**

This will be achieved through various sessions that will be conducted at household level, community engagement sessions. Main awareness topics will be on safe water chain, appropriate latrine use, handwashing, environmental cleanliness.

### **Activity R1-3.7 – Hygiene promotion public awareness or mass campaign**

This activity will undertake the dissemination of 1000 IEC material that are developed by the programme or from the MOH and child to child sessions. 6 events per year using music, dance and drama will also pass key messages. This will be supported by radio spots, talk shows and media promotions.

R1.1-OVI – At least 70% of the total population of the targeted beneficiaries have improved access to safe water at a maximum 500m distance

R.1.2-OVI – Number of people having access to dignified, safe, clean and functional excreta disposal facilities

R1.3-OVI – 80% of beneficiaries are able to identify at least one major hygiene related health risk and cite 2 measures to prevent it.

## 4.3.2.1.2 Interim report

**Outcome 1.1 (R1.1): Increased safe, equitable access to water for 50.000 (DRC) and 16.600 (UGA) beneficiaries**

### UGANDA

- Updating<sup>13</sup> of the indicators

**R1.1-OVI – At least 70% of the total population of the targeted beneficiaries have improved access to safe water at a maximum 500m distance**

- At least 51.6% of the total population of the targeted beneficiaries have improved access to safe water at a maximum distance of 500m. (UNHCR KAP survey report -November 2020)

**R.1.2-OVI – Number of people having access to dignified, safe, clean and functional excreta disposal facilities**

- A total of 4415 people (Male-1106, Female- 1503, Boys-731 & Girls-1075) have access to dignified, safe, clean and functional excreta disposal facilities.

**R1.3-OVI – 80% of beneficiaries are able to identify at least one major hygiene related health risk and cite 2 measures to prevent it.**

- 95.5% of beneficiaries are able to identify at least one major hygiene related health risk (lack of hand washing) and cite 1 measure to prevent it.

- Updating<sup>4</sup> of the beneficiaries (status + number)

69,247 individuals reached with WASH services (Males: 22,402, Female: 25,788, Boys; 10,483 and girls 10,574) as per the table below. The numbers will increase on completion of the ongoing construction of water extension, completion of household latrines, implementation of more community and institutional hygiene promotion activities.

	Sectors	Status	Number of beneficiaries	Males	Females	Boys	Girls
UGA	WATER	Total	21,000	6,217	6382	4,145	4,256
		Refugees	19,000	5,625	5,775	3,750	3,850
		Hosts	2,000	592	406	395	406
	SANITATION	Total	4415	1106	1503	731	1075
		Refugees	4415	1106	1503	731	1075
		Hosts	-	-	-	-	-
	HP	Total	43,832	10,934	13,647	9,752	9,499
		Refugees	30,682	7654	9553	6826	6649
		Hosts	13,150	3280	4094	2926	2850

13 Updates and explanations should target both progress and changes made to the proposal.



Overall Total		69,247	22,402	25,788	10,483	10,574
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## - Updating<sup>4</sup> of the activities

### **Activity R1-1.1 Support the construction of the 7kms water distribution system to Kaborogota, Sweswe and Buliti zones in cluster 3 of Kyaka II settlement of water supply system.**

A total of 7km water pipeline extension was completed in Cluster III zones (Sweswe, Itambabiniga and Kaborogota). Using cash for work approach, a team of 72 persons (29 Females, 43 males ) from refugee PSN households were selected and grouped. Each group with 12 members, were supported with excavation tools and protective gears, Oxfam engineers and group leaders provided technical support to ensure quality work and measured for each member a distance to be excavated and each were paid based on the length in metres excavated. All pipeline extension works were fully completed. A total of 27 community tap stands with two faucets each were constructed (Kaborogota -12, Sweswe -3, Itambabiniga -12) to increase safe water access for 13,500 PoCs (6,661M, 6,839F) with reduced walking distances and queuing times.

Additionally, using DGD funds, Oxfam completed optimization works for Sweswe Water scheme with upgrading of the pipeline (from 80mm to 200mm diameter) between aerator and sedimentation Tanks (T70 steel tanks) at Sweswe Water treatment plant aimed at mitigating daily loss for approximately 100m<sup>3</sup>. This has boosted daily water production by additional 100,000 litres/day translating to an increase per capita water supply from 11.2 to 12.3L/p/d.

Pressure testing of the cascade aerator is ongoing in the defect's liability period. The aerator provides additional capacity for bulk surface water purification (physical removal of toxic substances such as iron II oxide, manganese, hydrogen sulphide, and carbon monoxide) through oxidation process. Upon completion and commissioning of the aerator, and installation of high lift raw water pump, water production at Sweswe WSS will result into additional 45m<sup>3</sup>/hour to the daily water access.

### **Activity R1-1.2. Daily water quality monitoring, mainly for Free Residual Chlorine and Faecal coliforms.**

Daily water quality monitoring through free residual chlorine (FRC) measurement was conducted using pool tester. A minimum of 20 samples were taken on a daily basis. Presence of faecal coliforms in water was tested using a rapid test kit (Hydrogen sulphide, H<sub>2</sub>S) and bacteriological test kit. 100% of pipe water had FRC within the recommended range of 0.2-1mg/l between source and at household level. Daily tests were conducted at Sweswe water treatment plant, community tap stands and at households of which 100% of the tests indicated the FRC were within the recommended range of 0.2-1mg/l

Of the recent 17 samples collected and tested for faecal coliforms (for non-chlorinated the point water sources – Springs and handpumps), 14 samples returned positive results and only 3 presented negative. This was partly attributed to sampled HH using dirty water collection and storages without lids. The result has informed development and enhanced sensitization on key safe water chain management messaging and engagements across the sampled villages to improvement on safe water chain management practices. With this new development, it is expected much improved water quality result in the next reporting period.

### **Activity R1-1.3. Strengthening coordination framework (WASH and Technical working groups within WASH) and with local authorities.**

Water supply technical, Sanitation and Hygiene working groups ( Peace Winds Japan (PWJ),

Uganda Red Cross Society, Samaritan Purse, International Rescue Committee (IRC), Danish Refugee Council (DRC), African Initiatives for Relief and Development (AIRD), Adventist Development and Relief Agency (ADRA), Office of the Prime Minister (OPM), UNHCR, Kyegegwa District Water Department) meet on a bi-weekly basis to discuss WASH related matters and review technical documents from consultants. Joint field visits were conducted to monitor progress for Constructed WASH interventions such as 7km pipeline extension for Cluster III zones, construction of community tap stands, and construction of Household latrines & waste banks. Regional workshop conducted on 17<sup>th</sup>.12.2019 attracted all WaSH and Health with partners from different settlements in the region to agree on hygiene and sanitation strategies. Other activities funded under ECHO and internal Oxfam funding included training of working group on dome-shaped slab production, and harmonizing hygiene approaches.

Oxfam supported Kyegegwa district health department to conduct an assessment on its capacity on infection prevention and control (IPC) of Ministry of Health (MoH) guidelines as well as appropriate use of Personal protection equipment (PPEs) across the 16 health facilities within the district. The assessment aimed at determining key gaps to inform district COVID 19 task force on resource mobilization and allocation. Among the key gaps identified were 1) lack of adequate sanitary facilities, 2) hand washing facilities, 3) inadequate PPEs, and 4) inadequate knowledge on appropriate use of PPEs and correct mixing of disinfectants such as Jik and chlorine as well as an understanding of MoH and WHO COVID 19 prevention guidelines.

From the IPC assessment findings / gaps identified, Oxfam through this project distributed a total of 85 hand washing facilities at communal latrines, congested water points, markets, health facilities, prisons, police and district headquarters to strengthen hand washing practice as a preventive measure for COVID 19 across the district. Oxfam supported the district health team to undertake a technical support supervision and mentorship exercise of 132 (F-73 and M-59) health workers across all the 16 health facilities Wekomire H/C III, Mpara H/C III, Karwenyi H/C II, Ruhangire H/C II, Kazinga H/C III, Migamba H/C II, Migongwe H/C II, Kakabara H/C III, Kyegegwa H/C IV, Kigambo H/C II, Hapuuyo H/C III, Bugogo H/C II, Kasule H/C III, Mukondo H/C II, Bujubuli H/C III and Kisagazi H/C II with the district. This targeted strengthening capacity of front line health workers on appropriate use of PPEs, and proper/appropriate mixing of disinfectants using MoH and WHO guidelines on IPC, . A total of 132 (M- 59,F-73) health workers benefited from the above sessions. The assessment findings also informed an IPC action plan that guided Kyegegwa district task force, different partner's and stake holder's support to the health facilities such as, Construction of a latrine block and repair rainwater harvesting tanks at Kyegegwa health centre IV by URCS. UNICEF also pledged to support with PPEs, distribution of PPEs by the district health department to health facilities that had inadequate supplies among others. (IPC Assessment Report May 2020.docx)

Oxfam participated in flood assessments in Kasese, Ntoroko and Bundibugyo districts as well as providing technical support to generate ideas on mitigating the impact of floods. In collaboration with other partners and the respective district disaster management committees of Kasese, Bundibugyo and Ntoroko, response plans were developed to mitigate the impact on floods and are currently being implemented. Oxfam also used the findings to develop a proposal which attracted internal funds for 4 months to respond to flood response in Kasese district.

Oxfam continued to participate in the regional sanitation working group coordination meetings, with the recent one held in Fort portal on 9<sup>th</sup> to 10<sup>th</sup> December 2020. Oxfam was able to present major innovation pilots as well as WASH implementation and was able learn lessons on innovative latrine designs and approach especially through sanitation marketing and working closely with financial lending institutions. This is something Oxfam is exploring ways of replicating in the settlements.

Oxfam continues to participate in all COVID 19 task force meetings at settlement, district as well as national levels to ensure strategies are developed, harmonised and implemented in accordance to the MoH and MoWE COVID 19 prevention guidelines within the settlement and neighbouring villages.

#### **Activity R1-1.4. Building capacity of 30 WASH partners staff on water treatment, quality monitoring.**

This activity was conducted with funding from other donors

#### **Activity R1-1.5. Rehabilitation/Repair of 15 boreholes (hand-pumps) in Kyaka II and hosting villages.**

A total of 15 hand pumps across the settlement and the host community (12 in the settlement and three (03) in the host community) were repaired using the borehole spare parts that were procured using DGD funds.

#### **Activity R1-1.6: Procurement and installation of 4 rainwater harvesting tanks.**

This activity was not implemented as planned. The budget for this activity was reallocated to support the construction of Cluster III water pipeline system. This was done due to insufficient funds to complete cluster III pipeline extensions.

#### **Activity R1-2.1 Construction of 50 latrines for Persons with Special Needs (PSN), across the targeted 3 zones:**

Cumulatively, 276 (Oxfam – 50 and JESE – 226 Units) PSN latrines have been completed with funding from this project, fitted with tippy taps for hand washing and handed over to PSNs for use in the zones of Sweswe with 70 latrines, Kaborogota with 99 latrines, Itambabiniga zone Central village with 30 latrines, Humura with 45 latrines, and Ruchinga with 32 latrines. The additional 226 PSN latrines construction was executed through cash for work approach by Oxfam and JESE with funding from this project. The CfW modality was used in construction of super structure and pit excavation as well as transportation of the dome shaped slabs.

#### **Activity R1-2.2. Construction of 100 stances of communal latrines and 100 bathing shelters:**

A total of 132 stances of communal latrines and 132 stances of bathing shelters (66 blocks of communal latrines and 66 blocks of bath shelters each 2 stances) have so far been completed in two zones: Byabakora – (92 stances) and Buliti – (40 stances). 5 hand washing facilities were also installed at Byabakora V village to enhance hand washing after latrine use. A total of 2,639 (M-422, F- 951, G – 663, B-603) individuals are currently benefiting from the above communal facilities. These communal latrines and bathing shelters were constructed based on needs of the PoCs for instance during reallocation of PoCs and at marketplaces.

#### **Activity R1-2.3. Decommissioning of existing communal Latrines (150 blocks):**

Oxfam decommissioned 215 filled up communal (temporary) latrines previously constructed using ECHO funds in refugee communities of Kakoni, Bwiriza, Byabakora, Mukondo, Itambabiniga and Sweswe, this was done to aid in vector control and mitigate spread of diseases. Due to low cost of decommissioning, this action exceeded the target of 150 blocks hence achieving 215 blocks against the target of 150 blocks.

#### **Activity R1-2.4. Establishment and production of dome shaped ferro-cement slabs:**

During the reporting period, Oxfam completed production and distribution of 400 dome shaped slabs in Bukere, Mukondo A, B, D, Bwiriza and Itambabiniga to support household latrine construction. With the above support, about 2,000 Persons of concern (PoCs) started construction of household latrines with VHT follow ups and supervision to enable timely completion of latrines. Cumulatively, 1,440 dome shaped slabs were casted and distributed to 1,440 Households. As a result, 1,194 household latrines are completed and in use, 918 through the household latrine construction support while 276 constructed through CfW implemented under Oxfam local partner JESE. The constructions have resulted to is increased access to dignified sanitary facilities for disposal of human faeces hence general improvement in household latrine coverage from 57% to 66% at settlement level.

#### **Activity R1-2.5 – Provision sanitation kits, safe water storage and handwashing facilities.**

During the reporting period, 2,640 poles and six (6) bags of 50kgs 4 to 5- inch nails were distributed to

660 Households targeting 3,330 refugees (1485M,1815F) in Mukondo and Kaborogota zones. As a result, 225 HH latrines were completed during the reporting period increasing the number of latrines to 918 HH latrines through community action. This has greatly reduced instances of open defecation and diarrheal diseases. Additionally, 1,479 tippy taps were distributed to 1,479 households benefiting 5,916 (3,254F, 2,662M) in Bukere, Bwiriza, Itambabiniga, Sweswe, and Buliti zones. This has enhanced hand washing practice at the household level for prevention of spread of both diarrheal diseases and COVID-19.

At institutional level, 56 institutional hand washing facilities were distributed: five (5) to MTI a medical partner in Kyaka II, two (2) to the briquettes production group of Kaborogota, two (2) to AIRD, two (2) to AWYAD, 9 to RWCs, 29 to markets/trading centres to ensure patients, medical staff, visitors, briquettes group members, vendors, buyers had places for hand washing. This has enhanced hand washing practice at public places to prevent the spread of both diarrheal and COVID 19.

Oxfam PHP team delivered 40 -14 litre capacity buckets for water storage to the health partner (Medical Teams international – MTI) for installation in the isolation centres. This has enabled vulnerable COVID 19 patients (Elderly) to have access to safe clean water.

During the reporting period, 2 wheelbarrows were distributed to 2 solid waste management groups of Bukere and Bujubuli for management of solid waste collection. This has enhanced environmental hygiene with the Bukere market and Bujubuli base camp.

#### **Activity R1-3.1 – Hold 2 Inception meetings:**

A total of 02 inception meetings were conducted at the district and community level respectively. The district meeting included the representatives from government, United Nations, other operational partners in Kyaka II settlement and refugee welfare council. At community level a number of meetings were conducted to introduce the project to the community, the interventions to be implemented and their role in this project.

#### **Activity R1-3.2 – Behavioural barrier analysis:**

Oxfam utilized ECHO funds to conduct the behaviour barrier analysis, funds for this particular activity were used to conduct a KAP survey in December 2019 and the remaining funds were used to support construction of an aerator.

#### **Activity R1-3.3 – Support 10 Field based community mobilisers and 40 Hygiene Promoters (CHP):**

Oxfam engaged and facilitated about 90 (62M, 28F) Village Health Teams (VHTs) in Mukondo, Bukere and Bwiriza in different hygiene and sanitation promotion activities such as radio talk shows, hygiene promotion campaigns, data collection and distribution of WASH NFIs while 7(2F, 5M) natural leaders and Kyegegwa health team were engaged and facilitated in follow ups in Kijunju, triggered CLTs village in Mpara sub county. The increased number was attributed cost savings due change in approach/implementation modality to use the VHTs as compared to hygiene promoters who are cheaper. The VHT structure is permanent thus linked to sustainability plan and have grossly been responsible in community mobilization and sensitization on household latrine construction and use as well as adoption of good hygiene practices.

#### **Activity R1-3.3 – Trainings 100 beneficiaries:**

Oxfam trained a total of 98 (59 M and 39F) hygiene promoters, field-based mobilizers for URCS, Samaritan purse and Oxfam in August 2019. The training was tailored to Cholera and Ebola preparedness and prevention, signs and symptom of cholera and case management (First aid at HH level.) The training was fully facilitated in collaboration with the assistant water officer in charge of sanitation in Kyegegwa district and Oxfam public health promotion team. Additionally, 33 water user committees (130 people; female 57, male 73) for the newly constructed tapstands, were trained on basic O&M, water source management, water quality monitoring, safe water chain, record keeping and financial accountability with funding from ECHO and UNHCR. As a result, there



is general improvement in the performance of committees as many are observed fenced, cleaned regularly and MoH SoPs are being enhanced at water sources through the trained committees.

### **Activity R1-3.5 – Facilitate formation and trainings of Schools' Health Club:**

A total of five (05) schools health clubs were formed within the settlement and host community. Each school health club comprised of 30 pupils (Girls – 15 and Boys 15). A total of 1500 (G-750, B-750) school health members have been formed and a total 350 sets of drawing and writing materials have been procured. However, this activity was affected by COVID 19 lock down as schools are closed. Discussions with the Education partner (Fin church Aid) and the district education officer on CHAST training was done. So far 10 (6M, 4F) CHAST teachers were trained as TOTs for CHAST methodology by the district health team and they will be responsible for training pupils. Upon mobilization of the pupils early next year, CHAST patrons will be facilitated to train pupils on the Child to child hygiene practices with support from Oxfam in terms of stationaries, refreshments using child to child training manuals. The acquired knowledge in schools is expected to be replicated at homes. However, follow ups on these 5 school health clubs and CHAST activities were greatly affected by COVID 19 lockdown.

### **Activity R1-3.6 – Hygiene awareness:**

During the reporting period, 46 sessions of Hygiene promotion campaigns were conducted reaching 3,443 (854G, 859F, 805B, 925M) persons by 42 village health teams (VHTs) in Kaborogota A, B, Mukondo A, B and D, villages. Key messages disseminated included: 1) Information on COVID-19 prevention, 2) proper solid waste management at households, and 3) environmental hygiene – slashing the bush and sweeping around water sources. As a result, the community has remained alert and are adhering to COVID-19 Infection, prevention and control measures. Cumulatively, a total 121 sessions of hygiene campaigns were conducted, reaching a total of 31,332 (M-7,593, F- 8,346, B- 8468, G-6925) persons were reached with the above messages

### **Activity R1-3.7 – Hygiene promotion public awareness or mass campaign:**

Oxfam PHP Team together with water source attendants, conducted 6 sessions of Hygiene promotion campaigns on jerrycan cleaning at 14 water points in Kaborogota A, B, Mukondo A, B, and D. During the campaigns, emphasis was on safe water chain management: how to keep water sources clean and use covered clean containers so as to maintain quality and safety of collected water. As a result, 4,015 water collection containers were cleaned by 3,073 water users (724G, 984F, 556B, 809M). To date 5,127 water collection containers have been cleaned by 3,895 (917G, 1254F, 699B, 1025M) water users. These efforts are aimed at enabling the community to reduce on chances of spread of WASH-related infections as a result of the use of dirty jerrycans.

Also, during the reporting period, 5 follow-ups were conducted in Kijunju East a CLTS triggered village with support from Kyegegwa district Health Teams, Kijunju East natural leaders and Oxfam PHP team. As a result of Oxfam's intervention, 15 household latrine, 10 squat hole covers, 20 door mats have been made/constructed to prevent disease causing vectors(flies) from entry and exit from the latrine, the mats provided privacy which increased latrine use while also reducing contamination of water by blocking the faecal – oral routes. The combined effect has reduction in cases of diarrheal diseases

Through boda boda talk talk, four (4) cyclists were engaged to disseminate key COVID 19 prevention, hygiene and sanitation promotion messages in the community. Speakers with pre-recorded COVID 19 prevention, hygiene and sanitation promotion messages were mounted on boda bodas riding through the communities and market centers. A total of 16,530 (4,024B, 3,740M, 4,121G, 4,645F) persons both Refugee and Host communities of Kaborogota, Bwiriza, Buliti, Mukondo, Byabakora, Itambabiniga, Bukere, sweswe, Kakoni, Runyege, Bujubuli, Kihumuro, Ndigito, Kyesembe, Rusese, Rurembo and Nkanja community benefitted from the messages and as result, they are alert on COVID-19 prevention measures. Cumulatively, 43,822 (M- 10934, F- 13647, B- 9752, G- 9499) beneficiaries have been reached and participated in hygiene promotion campaigns. More campaigns will be undertaken through radio talk shows, boda-boda talk-talk and production of IEC materials with the realigned budget.

As a means of strengthening risk communication, Oxfam reached out to PoCs in their respective zones in the settlement and neighboring host communities through radio talk shows and such, during the reporting period 15 radio talk shows were conducted on community radio in Kyegegwa. So far 37 radio talk shows have been held as a means of sensitization with messages on COVID-19 IPC measures, safe water chain, solid waste management with support from district Health Team, VHTs and Oxfam PHP team. About 14,836 (5,861M, 52210F, 1941G, 1813B) persons have been reached so far. The community appreciated the support and information being disseminated to keep the community alert and responsive about the spread of COVID-19.

## **DR CONGO**

### **- Updating of the indicators**

**R1.1-OVI - At least 70% of the total population of the targeted beneficiaries have improved access to safe water at a maximum 500m distance**

- 60% of the population have a water supply point 500 m away.

**R.1.2-OVI - Number of people having access to dignified, safe, clean and functional excreta disposal facilities**

- 13,534 people have access to dignified, safe, clean and functional excreta disposal facilities.

**R1.3-OVI – 80% of beneficiaries are able to identify at least one major hygiene related health risk and cite 2 measures to prevent it.**

- 59% of people can identify at least one major health risk related to hygiene and cite 2 measures to prevent it.

### **- Updating of the beneficiaries (status + number)**

The project is implemented in two Health Zones (Angumu and Rethy), respectively in the territories of Mahagi and Djugu with a high concentration of displaced persons in host families and sites. According to the latest census conducted by the IOM and its partner AIDES in Angumu, they estimate the displaced population in officially recognized sites at 7,942 households, or 39,813 people, not including those housed with host families. The latest feasibility assessment conducted by the OXFAM team (October 2019) estimated 44,678 displaced persons in Rethy.

Following the mapping of the intervention villages, it is provisionally estimated that 101,100 men, women, girls and boys will be reached by WaSH activities. This figure will be reviewed quarterly according to population dynamics, which is closely linked to the security context of the zone. It should be noted that the relative lull observed over the past two months in some areas could influence the return of some displaced persons.

### **Beneficiaries reached – Mai 2021**

La fragilité de la situation sécuritaire dans les territoires de Djugu et Mahagi à la suite de l'activisme du groupe armé CODECO et les opérations militaires en cours liées à la proclamation de l'état de siège en province de l'Ituri, ont ralenti l'élan humanitaire pour apporter une assistance aux populations vulnérables. Au moment du rapportage, 95% d'activités prévues du projet ont été réalisées et le projet a atteint 58195 personnes ayant accès à l'eau potable, 13534 hommes et femmes qui utilisent une latrine hygiénique et digne et 55285 filles, garçons et adultes touchés par un message de sensibilisation sur la prévention des maladies diarrhéiques, les gestes barrières contre le Covid-19 et même la lutte contre le paludisme. Voir le tableau ci-dessous.

Le nombre de personnes qui fuient leurs domiciles à la suite des attaques des civils ne cessent de croître en province de l'Ituri. Les dernières estimations faites par la Commission Mouvement de la

Population de l'Ituri (CMP, mars 2021), fait état de 1.624.509 personnes déplacées vivant dans plus de 70 camps et les villages d'accueil plus ou moins sécurisés.

Le même rapport signale que les Zones de santé d'Angumu et Rethy où Oxfam intervient, hébergent 167.691 (Angumu) et 61.270 (Rethy) IDPs sur des populations estimées respectivement à 194.587 pour la Z.S de Angumu et 239.073 âmes pour Rethy. Ce qui fait une pression démographique de l'ordre de 86% pour Angumu et 26% pour la Z.S de Rethy.

Comparativement aux chiffres énoncés ci-haut, Oxfam n'aura qu'à couvrir et améliorer les conditions de vie pour approximativement 15% de la population en besoin à travers ce projet.

Sector	Status	# bénéficiaire	Homme	Femme	Garçon	Fille
Water	<b>Total</b>	<b>58195</b>	<b>11383</b>	<b>14805</b>	<b>15387</b>	<b>16620</b>
	IDPS	25606	4865	6658	6914	7169
	Host	32589	6518	8147	8473	9451
Sanitation	<b>Total</b>	<b>13534</b>	<b>2571</b>	<b>3519</b>	<b>3655</b>	<b>3789</b>
	IDPS	6632	1260	1724	1791	1857
	Host	6902	1311	1795	1864	1932
Hygiene promotion	<b>Total</b>	<b>55285</b>	<b>10747</b>	<b>14130</b>	<b>14684</b>	<b>15724</b>
	IDPS	24325	4865	6081	6325	7054
	Host	30960	5882	8049	8359	8670

## - Updating of the activities

### Activity R1-1.1 Pre-technical assessment and mapping of water points / sources to be developed and rehabilitated.

The WASH feasibility assessment was carried out and allowed the distribution of the water works according to the targeted intervention areas and the available water resources. The initial distribution of water works is as follows:

Activités	Z.S Rethy	Z.S Angumu	Prévue
Forages à construire	4	2	6
Forages à réhabiliter	0	6	6
Adduction à réhabiliter	1	1	2
Adduction à construire	0	1	1
Sources d'eau à aménager	3	5	8
Forage avec panneau solaire	1	1	2
Latrines d'urgence	0	200	200
Latrines d'accompagnement	200	0	200
Bacs/dalles de lessive	10	10	20
Kit NFI WaSH	200	0	200
Kit de gestion des déchets	80	80	160

Activités essentielles	Projet prévision	Z.S Rethy		Z.S Angumu	
		Prévue	Atteint	Prévue	Atteint
Forages à construire	6	3	3	3	3
Forages à réhabiliter	6	0	0	6	0
Adduction à réhabiliter	1	1	1	1	1
Adduction à construire	1	0	0	1	1
Sources d'eau à aménager	8	3	3	9	9
Forage avec panneau solaire	2	1	0	1	0
Latrines d'urgence	200	0	0	200	206
Latrines d'accompagnement	200	200	200	0	0

Bacs/dalles de lessive	20	10	4	10	13
Kit NFI WaSH	200	200	204	0	0
Kit de gestion des déchets	160	80	32	80	32

#### Commentaire :

Les fonds destinés à la réhabilitation de 6 forages ont été versés dans l'aménagement et réhabilitation des sources simples. On a donc aménagé 4 sources simples dont 2 avec réservoirs. Afin, les fonds alloués à cette activité n'a pas permis d'acheter les kits tels que prévus. En effet, ces fonds ont été utilisés aussi pour la formation des membres des comités de salubrité. Mais aussi, certains items étaient chers par rapport à nos prévisions (ex. : Brouettes).

Mapping and pre-technical assessments were conducted for most of the water works in the two intervention health zones of Angumu and Rethy. In collaboration with the local authorities and health officials, socio-health and technical assessments were conducted in the form of interviews with key persons, FGDs and household surveys among women and girls to identify/locate areas in need of drinking water and also presenting high risks of the spread of waterborne diseases due to the presence of displaced persons. These are summarized in the table below:

Zone de santé	Nom ouvrage/site	Type ouvrage	Coordonnées GPS	Observations
Angumu	Kudugena	Source	N: 02° 04' 50.0" E: 031° 07' 06.6" Alt: 1440 m	Fonctionnelle
	Nyatokwa	Source	N: 01° 57' 47.1" E: 031° 00' 04.5" Alt: 761 m	Fonctionnelle
	Yabada	Source	N: 02° 04' 50.2" E: 031° 07' 06.1" Alt: 1442 m	Fonctionnelle
	Umbeka 2	Source	N: 01° 57' 47.1" E: 031° 05' 48.3" Alt: 1017m	Fonctionnelle
	Nyaratar	Source	N: 02° 03' 18.1" E: 031° 05' 48.5" Alt: 1011 m	Fonctionnelle
	Nyawano	Source	N: 02° 02' 30.1" E: 031° 03' 54.4" Alt: 942 m	Fonctionnelle
	Njeti	Source	N: 02° 00' 58.5" E: 031° 03' 07.7" Alt: 970 m	Fonctionnelle
	Ngobia	Source	N: 02° 00' 56.7" E: 031° 02' 42.7" Alt: 974 m	Fonctionnelle
	Agbo 2	Source	N: 01°57'47.1" E: 031°00' 04.5" Alt: 761m	Fonctionnelle
	Ndawe	Adduction	N: 01° 57' 47.2" E: 031° 00' 04.8" Alt: 761m	Fonctionnelle
	Ramogi	Adduction	N 02° 04' 19.47"E 031°07' 29.4"; Alt 1425m	Fonctionnelle
	Juparawang	Forage	N 02° 03' 43.4" E 31° 06' 45,7", Alt: 1170 m	Fonctionnelle
	Kwayakelo	Forage	N 02° 24' 00.2" E 30° 45' 11,5", Alt: 1675 m	Fonctionnelle
	Thegot	Forage	N 02° 24' 00.2" E 30° 45' 11,5", Alt: 1675 m	Fonctionnelle
	C.S Apala	Forage	N 01° 59' 57.7" E 31° 01' 03,0", Alt: 974 m	En cours
Rethy	Rethy	Adduction	N 02°00'22,90" E 30°52'27,20" ALT:2178 m	Fonctionnelle
	Budza	For+SE	N 02°05'15,90" E 30°49'24,60" ALT:2060 m	Fonctionnelle
	Djubate	For+SE	N 02°06'06,20" E 30°46'26,70" ALT:1946 m	Fonctionnelle
	Zali	For+SE	N 02°03'06,00" E 30°49'55,50" ALT: 2128 m	Fonctionnelle





Figure 1: Evaluation pre-technique et cartographie source Kudugena, Tilo



Figure 2: Idem en compagnie des SEA/Z.S Angumu et leaders locaux, source Kudugena

### Activity R1-1.2. Geophysical surveys and drilling/construction of new wells / boreholes equipped with handpumps

The contract for the hydro-geophysical studies for the realization of the 8 boreholes, 2 of which with photovoltaic systems, was signed between Safe Energy and Oxfam in order to maximize the chance of viable exploitation of the groundwater resources. The specialized personnel of this company is in place for a rapid deployment in the area of intervention.

Les études hydro géophysiques ont été réalisées par l'entreprise Safe Energy afin de permettre le lancement des activités de forages dans les deux zones de santé ciblées par l'intervention WaSH. Huit sites ont été ainsi prospectées notamment (4) dans la Z.S de Rethy et (4) autres dans la Z.S de Angumu. Ci-joint, le rapport validé des études hydro géophysiques ainsi que le tableau répertoriant les villages qui devront bénéficier de l'eau par le biais de forage.



Rapport d'études  
Hydro-géophysique

Z.S	Localité	# Population	Coordonnées GPS
Rethy	Agboro/Djeibu	478	N 02° 00' 13.2" E 030°49'52.6" alt: 2106m
	Mola/Mulefu	1678	N 03° 03' 39.0" E 030°48'44.7" alt: 2096m
	Djubate/Djalusene	2591	N 02° 06' 35.7" E 030°46'39.8" alt: 1944m
	Zali/Godya	889	N 01° 43' 41.5" E 030°19'56.0" alt: 1477m
Angumu	Apala C.S	2482	N 02° 00'03.7" E 031°01'00.8" alt: 973m
	Kwayakelo	2256	N 02° 03'03.1" E 031°03'16.2" alt: 998m
	Thegot	2955	N 02° 03'48.4" E 031°07'36.8" alt: 1153m
	Juparawang	1051	N 02° 03'04.3" E 031°04'38.9" alt: 1029m
Total		12124	

### Commentaire:

Deux entreprises ont déjà été sélectionnées pour mener les travaux de forage de deux zones. Cependant, le contexte d'insécurité sur l'axe routier Bunia-Mahagi et les opérations militaires en cours dans les localités environnant Rethy ne permettent pas l'accès aux zones d'intervention. Six forages avec pompes manuelles sont opérationnels dans 6 villages tel que repris dans le tableau

ci-dessous.

Pour d'autres spécifications/caractéristiques techniques de chaque forage sont détaillées dans le tableau ci-dessous :

Spécifications techniques	Aboro	Djubate	Zali	Kwayakelo	Tegoth	Juparawang
Débit moyen (l/s)	0.6litre/s	0,5l/s	0.12litre/s	0.41	2.88l/s	0.46l/s
Profondeur forage	27m	27 m	22 m	78m	60m	49m
Profondeur d'aspiration	20.50m	13.80m	15.30m	39.61m	29,61m	30.61m
Diamètre moyen	150 mm	150 mm	150 mm	8pouces	8pouces	6 pouces
Niveau statique	1.70m	5 m	6.20m	27.3m	6.55m	9.1m
Niveau dynamique	20.50m	18 m	15.50m	34.5m	16.4m	19m
Latitude	N =01.59.44.1"	N=02°06'35.7'	N = 02°02.58.8"	N=02°03'03.1"	N=02°03'48.4"	N=02°03'04.3"
Longitude	E= 030°49.05.9"	E 030°46'39.8'	E= 030 °. 50. 04.4"	E=031°03'16.1"	E=031°07'36.8"	E=031°04'38.9"
Altitude	2024m	1944m	2088m	998m	1153m	1029m
Description	Fonctionnel	Fonctionnel	Fonctionnel	Fonctionnel	Fonctionnel	Fonctionnel

### Activity R1-1.3. Rehabilitation/equipping of 20 existing water supply points (wells, boreholes etc.)

Materials such as pipes, plumbing fixtures and others for the maintenance of water works are gradually being received. This has made it possible to proceed with the handover of maintenance kits for the 9 operational water sources built in the Angumu health zone. The composition of the maintenance kits consists of (1) hoe, (1) pickaxe, (1) spade, (1) cutter, (1) 20l bucket, (1) 20l canister and (1) hard broom.

Concerning the drilling for the hand pump, 4 will be developed in the Angumu S.Z. and 3 in the Rethy S.Z. as shown in the table below:

Zone de santé	Nom ouvrage/site	Type ouvrage	Coordonnées GPS
Angumu	<i>Apala C.S</i>	Forage	N 02° 03' 43.4" E 31° 06' 45.7", Alt: 1170 m
	<i>Kwayakelo</i>	Forage	N 02° 24' 00.2" E 30° 45' 11.5", Alt: 1675 m
	<i>Thegot</i>	Forage	N 02° 24' 00.2" E 30° 45' 11.5", Alt: 1675 m
	<i>Juparawang</i>	Forage	N 01° 59' 57.7" E 31° 01' 03.0", Alt: 974 m
Rethy	<i>Budza</i>	Forage	N 02° 05' 15.90" E 30° 49' 24.60" ALT: 2060 m
	<i>Djubate</i>	Forage	N 02° 06' 06.20" E 30° 46' 26.70" ALT: 1946 m
	<i>Zali</i>	Forage	N 01° 43' 41.5" E 030° 19' 56.0" alt: 1477m

Tel que décrit dans les paragraphes précédents, 12 sources réhabilitées/construites ont reçu leurs kits de maintenance. De même, 3 systèmes d'eau gravitaires (Ramogi, Ndawe et Rethy) ont reçu leurs kits de maintenance constitués de la tuyauterie, les accessoires de plomberie et les outils de la gouvernance durable de l'eau. Concernant, les forages, les entrepreneurs se mobilisent pour fournir les matériels dédiés aux trousse de réparation et kits de maintenance. Ci-bas, le tableau détaillant les matériels dotés à chaque structure de gestion d'eau :

Pour les sources simples, les membres des comités d'eau ont reçu (4) houes, (4) bûches, (4) pioches et (4) brosses dures, (1) seau de 20l et (1) bidon de 20l. A part les kits concourant à la maintenance des ouvrages d'eau, les membres des comités de gestion d'eau ont reçu aussi des matériels de protection comme les bottes, les gants et les cache-nez.

Dans le cadre de renforcer la gouvernance durable des ouvrages d'eau, les comités de gestion d'eau ont reçu des matériels administratifs afin d'asseoir la stratégie de mobilisation des fonds (payer pour l'eau) tel que vous le verrez dans le tableau ci-dessous.

DESCRIPTION D'ITEMS	Quantité	Unit of measure
<i>ivres de caisse</i>	15	<i>Piece</i>
<i>Bon de sortie caisse avec souches carbonées</i>	20	<i>Piece</i>
<i>Bon d'entrée caisse avec souches carbonées</i>	25	<i>Piece</i>
<i>Cahier ministre</i>	10	<i>Piece</i>
<i>Calculatrice Casio 12 digits</i>	10	<i>Piece</i>
<i>Classeur en cartons GF</i>	13	<i>Piece</i>
<i>Desaggrafeuse</i>	15	<i>Piece</i>
<i>Encre Tampon</i>	18	<i>Piece</i>
<i>Latte de 30 cm</i>	10	<i>Piece</i>
<i>Stylo bleu Bic 1ere qualité</i>	4	<i>Piece</i>
<i>Ecritoire</i>	25	<i>Piece</i>
<i>Perforateur MF</i>	7	<i>Piece</i>
<i>Enveloppe Kaki A4</i>	6	<i>Piece</i>
<i>Tampon</i>	4	<i>Piece</i>
<i>Pile Panasonic Grand Format 12 paire</i>	20	<i>Boite</i>

#### **Activity R1-1.4. Installation of 2 solar pumping systems connected to a water supply network**

Awaiting the results of the hydro-geophysical studies in order to proceed to the realization of the work of two drillings which will be equipped with a solar system. Three drilling companies have already been identified, selected and contracts signed to this effect. The table below lists the identified sites with their geolocation points.

Zone de santé	Nom site	Type ouvrage	Coordonnées GPS	Observations
Angumu	Apala	Forage	N 01° 59' 57.7" E 31° 01' 03.0", Alt: 974 m	Attente finalization Système solaire
Rethy	Mola	Forage	N 02° 03' 06.00"; E 30° 49' 55.50"; ALT: 2128 m	Echec de forage

La situation sécuritaire dans le territoire de Djugu et les attaques que subissent certains villages situés sur l'axe routier reliant Bunia à Mahagi, rendent difficile le déploiement des deux entreprises (Terre Promise et Action Contre la Pauvreté) qui ont gagné le marché d'exécuter lesdits forage. Ce qui a obligé l'une des entreprises à suspendre les activités déjà lancées dans la Z.S de Rethy actuellement ciblé par les opérations militaires à la suite de l'état de siège décrété dans la province de l'Ituri.

#### **Activity R1-1.5: Protection/Rehabilitation of 8 spring sources**

Continuation of prospecting and mapping of simple sources to be developed in the 2 Health Zones targeted by the intervention. In addition to this activity, the technical team is sampling the flow and analyzing the water quality before development.

More details of this activity carried out in the Angumu S.Z. in the table below:

Nine simple sources are operational in the Angumu S.Z., four of which are equipped with 4 m3 tanks and serve 7,513 people, including displaced persons. More details in the table below:

Source	Débit (l/s)	Population	Coordonnées GPS
Kudugena	0.56	304	N: 02° 04' 50.0" E: 031° 07' 06.6" Alt: 1440 m

Nyatokwa	0.32	350	N: 01° 57' 47.1" E: 031° 00' 04.5" Alt: 761 m
Yabada	0.13	477	N: 02° 04' 50.2" E: 031° 07' 06.1" Alt: 1442 m
Umbaka 2	0.23	3000	N: 01° 57' 47.1" E: 031° 05' 48.3" Alt: 1017m
Nyarathar	0.15	467	N: 02° 03' 18.1" E: 031° 05' 48.5" Alt: 1011 m
Nyawano	0.1	805	N: 02° 02' 30.1" E: 031° 03' 54.4" Alt: 942 m
Unjeti	0.1	502	N: 02° 00' 58.5" E: 031° 03' 07.7" Alt: 970 m
Ngobia	0.54	1319	N: 02° 00' 56.7" E: 031° 02' 42.7" Alt: 974 m
Agbo 2	0.56	289	N: 01° 57' 47.2" E: 031° 00' 04.8" Alt: 761m
Total population		<b>7513</b>	

Three other sources are under construction in the Rethy SZ.



Figure 3: Source Umbaka, localite de Umbaka II, Angumu



Figure 4: Source avec reservoir de Yabada, localite de Jupamokama, Angumu

12 sources simples ont été construites/réhabilitées dans les deux zones de santé en raison de 9 dans la Z.S de Angumu et 3 dans celle de Rethy tel que repris dans le tableau suivant :

Zone de santé	Nom Source	# débit (l/s0)	Population	Coordonnées GPS
Angumu	Nyawano	0.10	805	N: 02° 02' 30.1" E: 031° 03' 54.4" Alt: 942 m
	Ngobia	0.54	1319	N: 02° 00' 56.7" E: 031° 02' 42.7" Alt: 974 m
	Unjeti	0.10	502	N: 02° 00' 58.5" E: 031° 03' 07.7" Alt: 970 m
	Nyaratar	0.15	467	N: 02° 03' 18.1" E: 031° 05' 48.5" Alt: 1011 m
	Kudugena	0.56	304	N: 02° 04' 50.0" E: 031° 07' 06.6" Alt: 1440 m
	Nyatokwa	0.32	350	N: 01° 57' 47.1" E: 031° 00' 04.5" Alt: 761 m
	Yabada	0.13	477	N: 02° 04' 50.2" E: 031° 07' 06.1" Alt: 1442 m
	Umbaka 2	0.23	3000	N: 01° 57' 47.1" E: 031° 05' 48.3" Alt: 1017m
	Agbo	0.56	289	N: 01° 57' 47.2" E: 031° 00' 04.8" Alt: 761m
Rethy	Baiba	0.41	341	
	Riecodda	0.36	446	
	Mbulu	0.28	498	
<b>Total</b>			<b>8798</b>	

The analysis after development of the 9 simple sources already functional has been carried out and the result is available under annex A.

**Tableau d'analyses organoleptiques, physico-chimiques et bactériologiques de l'eau prélevée aux points d'eau la Zone de Santé d'Angumu**

ZONE DE SANTE D'ANGUMU														
AIRES DE SANTE	VILLAGE S	POINTS D'EAU	DEB IT	P H 6. 8- 8. 2	TUR BI DITE <5N TU	COLIF OR MES FECA UX 0/100 ml	FER 0.2 10m g/l	NITRI TE 0- 4 mg/l	FLUORI DE 0- 15mg/l	NITRA TE 0- 1.5mg/ l	MAN GA NESE 0- 30mg /l	SULPHI DE 0- 0.5mg/l	ALUMINI UM 0-0.5 mg/l	OBSERVATION
UDON GO ABRA	NDROSI/ COLINE TILO	ADDUCTIO N GRAVITAI RE  EMERGEN CE1	0.75l /s	6. 9	<5N TU	51	1	0.05	0.5	1	17	0.05	0.05	Les 5 émergences serviront l'adduction gravitaire de MOKAMBO/RA MOGI.
		EMERGEN CE2	0.5l/ s	6. 8	3ntu	17	0.5	0.05	0.8	1.1	5	0.05	0.1	
		EMERGEN CE3	0.4l/ s	7	<5nt u	29	1	0.02	0.5	0.5	15	0.05	0.05	
		EMERGEN CE4	0.2l/ s	6. 8	<5nt u	4	0.5	0.02	0.5	1	2.5	0.05	0.05	
		EMERGEN CE5	0.6l/ s	6. 8	<5nt u	11	0.5	0.05	0.5	1	9	0.05	0	
ABBIA	JUPOKO	SOURCE AVUNJI	0.32l /s	7. 2	30N TU	133	1	0.05	1	1	5	0.05	0.05	
	JUPANG O	SOURCE NYAKASIA NO	0.3l/ s	6. 8	<5N TU	2	0.5	0.02	0.02	1	15	0.05	0.05	
	JUPAPIL OGO	SOURCE NGOBIA	0.35l /s	6. 9	<5N TU	42	1.5	0.02	1.1	0.9	10	0.05	0.05	
AWASI	JUPAKAS A	SOURCE	0.35l /s	7	<5N TU	9	1		1.	0.9	15	0.05	0.5	



	AITE 1	SOURCE A REHABILIT ER	0.4/ s	6. 9	NTU	3	1.5	0.02	0.9	1	2.5	0.05	0.05	
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N.B : L'analyse bactériologique, physico-chimique et organoleptique d'eau se poursuit dans la zone de santé de Rethy. En effet, les activités ont été suspendues à la suite de certains incidents de sécurité. Elles sont en cours de planification sur la zone si la situation sécuritaire se stabilise.



Résultat des  
analyses des sources:

### Activity R1-1.6. Rehabilitation of 1 gravity scheme

The feasibility study identified 2 water supply systems to be rehabilitated, namely a Ndawe water supply in the Angumu S.Z. and the Rethy water supply covering the villages of the 4 Health Areas: PKANDROMA at 76%, RETHY at 55%, KOKPA at 2% and UKETA at 25%. 2 new emergencies during the prospection have been identified with a flow rate of 2.5 liters/second and will be developed to increase the flow rate of the PKANDROMA water supply in order to respond to the water problems in this agglomeration.

Ndawe water supply in the Angumu Health Zone has been rehabilitated to improve access to drinking water and prevent the cholera epidemic of the 1549 people living in the fishing camps of Lake Albert who were affected by the recent floods. The rehabilitation work for this water supply consisted of (1) recapturing the emergencies of the springs, (2) replacing the piping already damaged by the landslides, (3) constructing 32 support columns for the pipes crossing the gully areas, (4) rehabilitating the 4 standpipes, (5) rehabilitating the 40 cubic meter storage tank, and (6) constructing the 2 collection and separation tanks. Oxfam plans to improve access to drinking water by constructing the 2 B.F.'s in a site of displaced persons due to flooding.

The process of delivering materials for the rehabilitation of the Rethy water supply is underway. The rehabilitation of the Rethy water supply will consist of (1) capturing 14/38 emerging sources, (2) capturing 6 emerging sources in order to increase the flow rate from 5 to 12 l/s, (3) rehabilitating 35/137 standpipes, (4) rehabilitating 20/66 relay tanks; replacing if possible 2 storage tanks with 1 metal tank of 45 cubic meters and finally, (5) sensitizing the community to the protection and reforestation of the catchment areas and watersheds.

Adduction	Débit (l/s)	Population	Coordonnées GPS
Ndawe	0.5	1549	N 01°57'34.5"; E 31°00'12.80"; ALT: 724m
Rethy	14	13004	N 02°00'22,90"; E 30°52'27,20"; ALT: 2178 m
Total		<b>14553</b>	

### Activity R1-1.7. Construction of 1 new gravity fed system

Here are the results of the Ramogi water supply source flow sampling and pre-development water quality analysis:

Sources	PH	Turbidi té	E. Coli	Fer	Nitrite	Fluori de	Nitrat e	Manganè se	Sulfid e	Alumini um
Normes	6<x>8	<5NT U	0/100 ml	0.2- 10mg /l	0- 4mg/l	0- 15gm/ l	0- 1.5m g/l	0-30mg/l	0- .05m g/l	0- 0.5mg/l
Akuru 1	6.8	≤5NTU	15	1	0.04	0.5	1	17	0.05	0.05
Akuru 2&3	6.8	≤5NTU	11	0.5	0.05	0.8	1.1	17	0.05	0.05
Kudru 1	6.8	≤5NTU	8	0.2	0.05	0.5	1	15	0.05	0.05
Kudru 2	6.8	≤5NTU	8	0.2	0.05	0.04	1	17	0.05	0.05
Nyathokwa	6.8	≤5NTU	2	0.5	RAS	0.5	1	15	0.05	0.05
Yabadaa	6.8	≤5NTU	22	1.5	0.9	1	1.1	10	1	0.05
Nyarachen	6.8	≤5NTU	5	1	0.02	0.5	0.5	15	0.05	0.05
Kitembo	7.2	≤5NTU	3	1	0.05	1	1	5	1	0.05

The cumulative flow rate is 2.26 l/s with respectively the emergence of Akuru1 (0.66l/s), Akuru 2&3 (0.11l/s), Kudru1 (0.31l/s), Kudru2 (0.23l/s), Nyathokwa (0.32l/s), Yabadaa (0.13l/s), Nyarachen (0.18l/s) and Kitembo (0.19l/s).

Work on the construction of the Ramogi water supply is continuing and has reached about 70%. Activities such as (1) the capture of the 10 springs, (2) the construction of a treatment tank and 2 collection tanks, (3) 16km pipe fusion, (4) construction of 2 platforms and (5) installation of the 2 storage tanks have been completed.

4 out of 11 fire hydrants are already built as well. The remaining activities are the finalization of the fusion of 9 km of the pipes (in the course of delivery), the connection of the emergencies to the collecting and treatment tanks in the course of drying, the finalization of the construction of 7 hydrants as well as the connection of the water to the 2 tanks of 115 m3 capacity.

The analysis of the water quality (bacteriological and physico-chemical) after capture of the emergencies has already been carried out. Below is the table presenting the situation on the characteristics of the water of the Ramogi conveyance.



Figure 5: Montage tanks de l'Adduction d'eau de Ramogi, femme du COGEP y participe.



Figure 6: Finalisation de montage des 2 tanks de stockage d'eau, adduction de Ramogi

Adduction	Débit (l/s)	Population
Ramogi	2.3	15788
Ramogi		20238

#### Activity R1-1.8. Trainings -Operation and maintenance and water safety plans

A l'issue de la réunion de lancement du projet dans les Z.S de Angumu et Rethy, des discussions communautaires ont eu lieu afin d'élire les membres des comités d'eau qui devront pérenniser la gestion et la maintenance des ouvrages de distribution d'eau.

Six water management committees (1 for Ramogi supply and 5 for simple sources) have been created and are operational. 4/6 water committees are trained on EHA theory and practice including knowledge of transmission routes and means of prevention of diarrheal and epidemic diseases (Ebola, COVID-19), the healthy water cycle, key moments for handwashing, sustainable governance of water and sanitation facilities and the roles of water management committee members on community engagement and other cross-cutting themes related to protection. Below are the numbers of people who have received water management training.

Village	Dates de formations	Homme	Femme	Total
Ramogi	Du 1 au 2 juin 2020	11	4	15
Aite (Nyaratar)	Du 29 au 30 Mai 2020	3	2	5
Njeti (Nyawano)		4	1	5
Ngobia		3	2	5
<b>Total</b>		<b>21</b>	<b>9</b>	<b>30</b>



30 members of the simple source water management committees, including 12 women, were trained on the practical and theoretical notions of hygiene promotion, water works maintenance activities and water resources governance. More details in the following table.

Nom de la source	Homme	Femme	Total
Umbaka 2	3	2	5
Yabada	3	2	5
Nyatokwa	4	1	5
Kudugena	2	3	5
Unjeti	3	2	5
Ndawe (Agbo)	3	2	5
Total	18	12	30

23 structures de gestion des ouvrages d'eau ont été créés dont 23 ont reçu une formation sur la gouvernance durable de l'eau potable en supplément sur les notions théoriques et pratiques sur la promotion de l'hygiène liées aux thèmes de F-diagramme, sain cycle de l'eau, moments clés de lavage des mains, engagement communautaire. Trouvez de plus amples informations dans le tableau ci-après :

Type ouvrage	Nom ouvrage	Total	Homme	Femme	Commentaires
Source simple	Nyawano	5	4	1	Formé
	Ngobia	5	3	2	Formé
	Unjeti	5	3	2	Formé
	Nyaratar	5	3	2	Formé
	Kudugena	5	2	3	Formé
	Nyatokwa	5	4	1	Formé
	Yabada	5	3	2	Formé
	Umbaka 2	5	3	2	Formé
	Agbo	5	3	2	Formé
	Baiba	5	3	2	Formé
	Riecodda	5	3	2	Formé
	Mbulu	5	4	1	Formé
Adduction	Ramogi	15	11	4	Formé
	Rethy	35	24	11	Formé
	Ndawe	15	12	3	Formé
Forage	Agboro	6	4	2	Formé
	Djubate	6	4	2	Formé
	Mola	11	8	4	Dissous
	Zali	6	4	2	Formé
	Kwayakelo	7	5	2	Formé
	Juparawang	7	5	2	Formé
	Thegot	7	5	2	Formé
	Apala C. S	11	9	2	Formé
Total		187	129	58	

8/8 comités de gestion d'eau des forages dont ont reçu une formation sur les notions et pratiques liées aux voies de contamination et moyens de prévention des maladies EHA, le sain cycle de l'eau, rôle et responsabilités des animateurs des comités d'eau et la gestion financière et technique des ouvrages d'eau. Cependant, le comité d'eau de Mola a été dissous suite à l'échec de forage

## Outcome 2: Improved access and utilisation of food for 10.000 people in DRC and equal Incomes Generating Activities for 7.000 beneficiaries in UGA

### UGANDA

- **Updating<sup>14</sup> of the indicators**

#### R2.1 – OVI – 7,000 beneficiaries in UGA have improved access to stable incomes generating opportunities.

14,568 beneficiaries (2,913 households) have been supported with interventions that improve access to their income generation opportunities. This indicator will be updated when the final evaluation has been conducted.

- **Updating<sup>4</sup> of the beneficiaries (status + number)**

	<i>Status</i>	<i>Number of beneficiaries</i>	<i>Males</i>	<i>Females</i>	<i>Boys</i>	<i>Girls</i>	<i>Comments</i>
UGA	Total	14,568	4,884	6,548	1,540	1,596	2,913 households
	Refugees	12,572	4,226	5,210	1,540	1,596	2514 households refugees
	Hosts	1,996	658	1,338	0	0	399 households in the Hosts

- **Updating<sup>4</sup> of the activities**

#### Activity R2.1 – Continued Support to backyard gardening (seeds/tools).

During the first round of distribution 1540 Refugee Households were trained on basic agronomic practices and supported with assorted vegetables seeds. Each HH received 25 grams of onions, eggplant, tomatoes & cabbage. All the 1540 households consumed the vegetables especially onions, eggplant & cabbages but tomatoes were affected by diseases. Second round of distribution was conducted in March 2020 during the first rain season. 1400 households, each received one hand hoe and watering can. This distribution was done together with assorted vegetable seeds (carrots, sukumawiki, onions and green paper) on 13<sup>th</sup> March 2020. During the distributions, more emphasis was put on encouraging smart climate agricultural practices like planting crops in ridges which helps in maintaining soil moisture, use of organic means of pest and disease controls. According to the post distribution monitoring reports, most of the vegetables were planted and consumed. Some surplus were sold by the household to earn income. About 400 households realized income ranging from 20,000 to 80,000UGX from sale of surplus carrots and onions. This helped with additional diet like meat, silver fish, and other household items like purchase of salt, sugar, charcoal for cooking. Hand hoes were used to clear land for planting of the assorted vegetables and some beneficiaries also used their hoes to cultivate in other gardens and were paid either in monetary value or given physical items.

#### Activity R2.2 – Skills training & development in apprenticeship skills (100 beneficiaries):

Of the 87 vocational skills applicants who were shortlisted, 63 youth (27F, 36M) underwent skills

14 Updates and explanations should target both progress and changes made to the proposal.

training while 24 youth were not taken on due to financial constraints. The 63 youth were trained from 11 centres managed by local artisans. They were trained on (05 carpentry, 11 salon and hair dressing, 14 motorcycle repair, 01 bricklaying and concrete practice, and 32 tailoring). Payment for all the local artisans was made and youth were supported with startup kits to establish their own businesses. The post intervention monitoring conducted found out that some of the youth had started businesses in the fields they were trained on, others still kept the startup kits in the household stating the lack of capital to rent space for setting up their businesses.

There was a mismatch on targets between the proposal narrative and the budget, the proposal stated 100 beneficiaries (50 for first year and 50 second year) and the actual budget stated 87 beneficiaries: *refer to the project budget*. There was a challenge of few vocational skills training centres within Kyaka II settlement with few courses available and yet very costly, as a result, use of local Artisans was recommended by the livelihoods sector working groups to address this challenge.

### **Activity R2: Support to Income Generating Activities (30 beneficiaries):**

Of the 142 candidates who applied for small business support, 30 (21 Refugees, 9 host community) individuals were selected, and each supported with 500,000Ugx. Disbursement of cash through mobile money transfer was conducted in the first week of July 2020 to the beneficiaries (16F, 14M), each received 500,000Ugx for establishment of businesses. Continuous monitoring of the businesses established by the beneficiaries was done, and findings showed, that the businesses established included tailoring, salon, buying and selling of agricultural produce like maize, piggery, poultry, shoe and cloth selling. All the businesses were registering profits and most of the money obtained from the businesses was used to increase stock and enable beneficiaries buy home basic items and food for their families. A post distribution monitoring conducted showed that this intervention has improved access to stable incomes generating opportunities for these beneficiaries and their households.

### **Activity R2.3 – Support resilience to fuel wood through cash for planting tree:**

Following successful establishment of the 1.5 hectares of woodlot with indigenous species of Grevillea, Maesopsis, Afzaria African and Terminalia in the host sub counties of Mpara (0.5Ha), Ruyonza (0.5Ha) and Kabweza Sub counties (0.5Ha), JESE continued to support maintenance and management of the activities. Using the cash for work approach, 45 persons representing PSN/Persons of Concern households, were identified<sup>15</sup> and contracted to slash and spot weed seedlings in a 1.5Ha woodlot, as a result 1.5 hectares of the established was maintained and spot weeded. Around 50 seedlings were added where there were gaps of the dried seedlings. The Sub county and the local leaders (LC1s and the Parish chiefs) participated and played a supervisory role. As a recommendation from the Sub County and local leaders to protect the woodlot from destruction by grazing animals, JESE supported the establishment of a barrier using shrubs and sticks mainly for the , Kabweza, Mpara, and Ruyonza sub counties woodlot.

For effective routine management and maintenance, 3 village level management committees/ structures were formed to take on routine monitoring and reporting of any management aspect of the woodlot to the sub county and district authorities for correction. This has enhanced the ownership of the woodlot among the local communities thus increasing chances of survival of the planted seedlings in the woodlot.

The draft woodlot management and sustainability plan was developed, it has defined the local /adjacent communities' roles and responsibilities as well future benefits that will accrue from their participation in the management and maintenance of the woodlot. The management and

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<sup>15</sup> This was done with the support of the sub county Community development officer and Area LC1s as well parish chiefs.

sustainability plan is further looked at to support the management of the other existing woodlots on both private and public land within the sub county, through transfer and application of knowledge, skills and practices. More so it will inform resource mobilisation, mainly budget allocation at sub county level and other interested parties with environment restoration lens/objective.

For enhanced environment restoration in the settlement, an on-farm agroforestry approach using selected fruit tree i.e. 4200 seedlings i.e. 1400 Mangoes, 1400 Jack fruits and 1400 Citrus, 1400 households were provided with fruit tree seedlings, each received 3 seedlings of the different varieties<sup>16</sup>.

#### **Activity R2.4 – Distribution of 200 energy saving stoves (including monitoring):**

The 200 energy saving stoves were procured and distributed to the identified and registered persons with special needs.

Training of trainers, 20 persons (11 females, 9 males) were trained on the construction of the Energy efficiency cook stoves (*Lorena*). All the ToTs were from the refugees' community as other partners targeted the host community for the same intervention. 20 assorted items /tools for construction of the energy saving stoves were procured and distributed to 20 ToTs in December 2019, and a total of 1800 households were reached with Lorena stoves training and construction against the target of 1400 households. More 06 youths were trained by Tots to become trainers and their work was closely monitored by EFSVL staff to ensure that the end products conform to the standards. A post distribution monitoring conducted, and findings showed that the households prefer using the Lorena stoves as opposed to the traditional Three-stones for cooking, this has greatly reduced per capita consumption of wood fuel and subsequently enhanced environmental conservation.

#### **Activity R2.5 – Cash for work on infrastructure projects (including monitoring):**

To improve environmental hygiene and cleanliness in schools and health centres, JESE under cash for work activities supported the excavation of rubbish pits in 13<sup>17</sup> learning centres (11 primary schools, 1 secondary school and 1 technical institution) and 11<sup>18</sup> Health centres were supported with rubbish pits, the rubbish pits were officially handed over to the schools and hospital management for use. Agreement was made with the institution management of the institutions to ensure the rubbish pits are fenced to prevent children, animal from accidents but also to avoid backfilling of the pits in the process of grazing/playing around the pits.

Under Pit latrine infrastructure support for Persons of Concerns, 226 PSN households (1,095 persons) have access to proper places for disposal of human excreta (*Kaborogota having a total of 57 latrines, Itambabiniga zone Central village with 30 latrines, Humura with 45 latrines, Ruchinga with 32 latrines, Sweswe with 62 latrines*). The 219 latrines are out of the targeted 1400 latrines in the project document. The variation was brought about by other competing demands which included cluster III water trench excavation, institutional rubbish pit excavation, and labour for casting 400 doom shaped slabs.

Under Cluster III water trench excavation, the project supported the trench excavation, pipe laying and backfilling of 13,511.5 meters of cluster III water extension lines in the zones of: *Sweswe Kitonzi 2591m, Itambabiniga Humura 1917.5m, Kaborogota 1120m, Sweswe dam 11 2156m, Kinoni 1700m, Kanyegaramire 1842m, Central 1495m and Nyaburungi 690m*. The water trench excavation was done under cash for work arrangements where PSNs were mobilized,

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<sup>16</sup> Jack fruit, Mango, and Oranges/Targrines

<sup>17</sup> Wisdom, Bujjubuli, Byabakora, Mukondo, Kabrogota, Sweswe, Itababiniga, Angels Care, Bukere, Bwiriza, Kyamagambo, Sweswe Vocational, and Bujjubuli SS.

<sup>18</sup> Bujjubuli H/C(3 pits), Mukondo, Bukere, Kaborogota, Sweswe, Itababiniga, Kakoni, Bwiriza, Byabakola

sensitized/trained with the support of OXFAM engineering team on the qualities and needs of the cluster III water excavation<sup>19</sup> and the trench excavation mapping. The willing to work PSN were further registered, contracted and equipped with assorted tools like spades, Hoes, strings, Pick axes, Pangs among others to enable PSNs work efficiently.

With the 13,511.5 Meters extension of cluster III water lines, 27 functional tap stands have been installed, which has greatly improved the target house hold access to water needs of 15 liters per person per day<sup>20</sup>. This has improved on house hold hygiene/cleanliness like hand/body washing, clothes and house hold utensil washing and most importantly access to clean and safe water for drinking.

This cash for work initiatives have provided opportunity for improvement of various WASH infrastructure through access to latrines and enabled the PSNs to meet their basic needs (food and nonfood) through earning cash from provision of labor. Through the after-post payment monitoring, the cash for work beneficiaries have been mentored and coached in the basics of Income generating activities identification, selection and management. This has harnessed their investment and suitability of the IGAs being promoted.

### Activity R2.6 – Post distribution monitoring:

Post distribution monitoring exercise was conducted for the assorted seeds, cash for work tools, beneficiaries supported to access energy efficient stoves (Lorena), income generating activities, skills training & development in apprenticeship skills while adhering to the COVID 19 restrictions. This was aimed at collecting feedback from the beneficiaries to help improve the subsequent distribution exercises but also to provide a wider spectrum of Oxfam's quality programming, implementations and learning experiences.

## DR CONGO

### - Updating of the indicators

#### R2.1 10.000 beneficiaries in DRC have an increased access to and better utilisation of food.

- 10,349 beneficiaries in the DRC have increased access to and better use of food.
- En attache, le rapport de Base Line du projet.



200221 Rapport  
Base Line Projet DGI

- Aussi, au vu de deux cycles de distribution du cash aux bénéficiaires EFSL du projet, les enquêtes de satisfaction des bénéficiaires ainsi que les gestions des plaintes des bénéficiaires ont été faites.
- En attendant le rapport de la Distribution Monitoring du 2<sup>e</sup> cycle et de gestion des plaintes lors de la distribution du cash, ci-joint le rapport de la Distribution Monitoring et suivi d'activités du premier cycle de distribution du cash.



RAPPORT DE DM  
Cash Cycle 1 ET SUIV

<sup>19</sup> 1 meter depth, 0.5Metres width, Flat bottom and Straightness of the trench to allow efficiency water flow

<sup>20</sup> Source; OXFAM water supply scheme of emergencies content.

- Updating<sup>4</sup> of the beneficiaries (status + number)

UGA

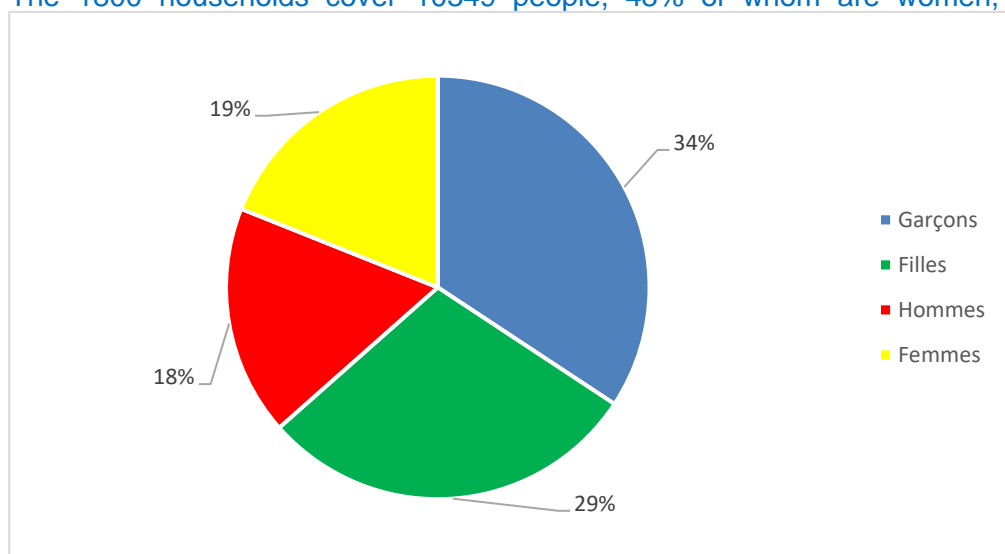
	Status	Number of beneficiaries	Males	Females	Boys	Girls	Comments
UGA	Total	5407	1254	1390	1265	1518	1,886 households
	Refugees	5378	1230	1365	1265	1518	1,857 households refugees
	Hosts	29	24	25	0	0	29 households in the Hosts

DRC

Localités	Nombre ménages bénéficiaires		Nombre personnes bénéficiaires	Nombre désagréé de personnes par sexe				Status ménages	
	Hommes	Femmes		Garçons	Filles	Hommes	Femmes	IDPs/ Retournés/ Rapatriés	Familles d'accueil et Autochtones
Djupugolo 2	90	160	1461	513	421	254	273	242	8
Ndawe	97	288	2274	777	682	394	421	60	325
Pamoth	203	460	3751	1290	1059	693	709	553	110
Senda	136	366	2863	968	859	478	558	398	104
S/Total	526	1274		3548	3021	1819	1961	1253	547
Total	1800		10349	10349				1800	

1800 households were identified in the villages of Senda, Pamoth, Djupugolo 2 and Ndawe, of which 1253 were displaced/returnee households and host families, i.e. 70%, and 547 were vulnerable host families and returnees, i.e. 30%.

The 1800 households cover 10349 people, 48% of whom are women, i.e. 4982 women.





## - **\_Updating<sup>21</sup> of the activities**

### **Activity R2.1 - Rapid market and needs assessment**

A market study was conducted in the two territories including Mahagi and Djugu in order to assess the potential of the actors working in the markets as well as the availability of food and non-food items on the markets. This study took into account 5 operational markets for the 2 territories. These are the markets of Kpandroma center, Bala, Ndrelé, Ramogi center and Mahagi center.

The objective was to evaluate the food and non-food availability, the accessibility of this market by the communities of our intervention zones, the potentialities of the actors to satisfy the demanders, the actors with the experience of humanitarian organizations, the micro-finance institutions present in the zone, ...

As far as markets are concerned, it is clear that there are operational markets throughout the area and there is availability of food and non-food items in sufficient quantities. In terms of origin, the households that frequent the markets travel varying distances, some of which range from 6 to 41 km for the inhabitants of Djupugolo 2; from 8 to 49 km for the inhabitants of the lakeshore (Ndawe, Senda and Pamote). Most households visit the markets on foot, and the main constraints on access to the various markets remain distance and mountain climbing. Report can be found under Annex B.

### **Feasibility Study**

The localities of Djupugolo2 , Senda, Ndawe, and Pamoth have been targeted for food security and WaSH assistance. These areas are home to a large number of households that are not assisted by humanitarian interventions, even though they have received displaced persons, returnees, and repatriates from Uganda. Report can be found under annex C.

### **Activity R2.2 – Community awareness and beneficiary identification in coordination with local committees based on jointly established criteria**

At the end of the kick-off workshops organized and the general assemblies held in the project's intervention zone, the members of the beneficiary targeting support committees were elected. These members are composed of men and women chosen on the basis of their know-how, their credibility in the community and their honesty. In the middle of the general assembly, the criteria for targeting beneficiaries are jointly discussed and approved by the members present from all social strata (displaced, returnees, residents, repatriates...). These committee members, once elected, accompany locally recruited interviewers trained by Oxfam staff in the targeting of beneficiary households. At the end of each activity, the community representatives and Oxfam staff present on the sites sign the minutes.

The targeting of beneficiaries is finalized in these days and the lists are ready.

### **Activity R2.3 –Establishment and monitoring of a system of accountability**

- Meetings were organized with community members throughout the intervention zone to explain the project, the intervention zone, the duration of the action, the types of interventions in food security, WASH, protection to be carried out, and so on;
- Community members representing the displaced, residents and returnees were elected during the general assemblies in order to support the project's activities.
- Members of protection committees of women's forums have been elected and will be trained in the coming days by Oxfam's protection team;

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<sup>21</sup> Updates and explanations should target both progress and changes made to the proposal.

- Community consultations have been carried out with the authorities, local leaders and the general population by the MEAL team in order to determine the appropriate mechanism for this project;
- In agreement with the community, after community consultations, suggestion boxes were set up to collect complaints and feedback from the community.
- Four complaint management committees were created and trained, with a total of 20 people, including 5 people (3 women and 2 men) per committee;
- Monitoring of the quality of program activities in the Mukambo health zone was done.
- The reports of community consultations and monitoring of the quality of program activities



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DES ACTIVITES DGD



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are attached under Annex D and Annex E. :

As part of humanitarian accountability, in addition to the establishment of complaint boxes in 4 villages (Ndawe, Senda, Djupogolo and Pamoth), the toll-free number set up by Oxfam has been popularized with the authorities, local leaders, the various committees formed and the beneficiary population in order to allow the community to relay complaints received to Oxfam without cost if and only if they have a telephone.

During the past period, a few complaints were received and dealt with. And feedback was simultaneously given mainly on the green line and other channels for receiving complaints before, during and even after the distributions. All complaints and suggestions are centralized in a single database for the entire project, but here are some of the complaints and suggestions that were collected during the distributions:

- In Pamoth: 8 beneficiaries lost their tokens, which were then recovered from other people and given back to the owners. In the same locality, 15 tokens were stolen and 9 complaints were reported to the office members who traced them and handed them over to the owners. The other 6 came late while the alleged thieves were already being served. These cases will be traced at the 3rd distribution and a participatory solution will be found to restore these beneficiaries to their rights.
- In Djupugolo II: 4 lost tokens and 1 stolen token were found thanks to the vigilance of the community and were returned to their owner through the complaints management office.
- In Ndawe, 7 lost tokens were found and returned to the owners.
- Finally in Senda, out of 6 tokens reported stolen, 3 were found and 3 others were not found because the declaration of loss was made at the end of the distribution and it was already late. These cases will be traced back to the 3rd distribution.

As a recommendation, in these cases of complaints, beneficiaries with complaints were served with a notice to appear at the beginning of the activities, especially in cases of theft of tokens, in order to track down the alleged thieves.

Attached is a summary of the complaints received and the solutions provided during 2 distributions:



Synthese de  
gestion de plainte l

Certaines plaintes liées au projet ont été reçues durant cette période de rapportage. En annexe 2, ce rapport de feed-back et plaintes (envoyé séparé).

#### **- Viewing and cross-checking beneficiary lists with the community:**

Lists showing the identity of the targeted heads of households who received the tokens were



posted in all EFSL intervention locations and in places accessible even for people with limited mobility. The location for posting the lists was proposed by the community itself. Meetings were organized where members of the targeting committees, members of the protection committee, and beneficiaries took part in order to validate the lists of targeted beneficiaries in each zone. In each locality, 4 different lists comprising all 1,800 EFSL beneficiaries were posted. This allowed targeted households that had already moved to another site to identify their names on the posted lists from wherever they were.

#### **- Delivery of tokens to beneficiaries at distribution sites in November 2019:**

In November 2019, out of the 1,800 targeted, 1,737 EFSL beneficiary households (97%) received a token (ID) with their full identity. The 63 remaining tokens or 3% including 23, 10, 14, 16 respectively for the villages Pamothe, Ndawe, Senda and Djupugolo 2 were redistributed to absent beneficiary households in the presence of local authorities, members of the targeting committees and Oxfam staff in the period from 14 to 24 February 2020. Minutes were jointly signed by all stakeholders including local authorities, protection committee, targeting committees and Oxfam staffs in the context of the closure of this activity of distribution of Tokens.

#### **- Sensitization of local authorities, community leaders and beneficiaries on the distribution of cash and risk analysis related to the distribution:**

Local authorities, community leaders and beneficiaries were sensitized on the process of cash distribution. Among the local authorities reached by the sensitization were: the Chief of Chiefdom of Mokambo and his secretary, the Chief Medical Officer of the Angumu health zone, the village chiefs of Ndawe, Senda, Pamothe and Djupugolo 2, representatives of the displaced persons of the 4 localities as well as the beneficiary households including also the non-beneficiaries.

Various themes were discussed during the sensitization sessions, namely

- The approach and the nature of the intervention of the DGD project, EFSL department (modality of receipt of cash, construction of emergency latrines, clearing of land, installation of various stands that will be used during the distribution...).
- The conscientious and rational use of this cash for the benefit of households;
- Community participation during the preparatory work on the secure sites identified for the cash distributions;
- How to use and keep clean the sanitary facilities made available to them for use at the sites.

At the end of these sensitization sessions, the beneficiary communities showed a lot of interest in our activities and were very active during the development of the sites and the construction of the latrine doors. It is during the next mission in the area that the few people (men and women) will be identified and briefed as Community Animators who will each time relay our messages within the community on food diversity.

***The table below summarizes the number of people reached at these awareness sessions.***

AUTORITES LOCALES		
Femmes	Hommes	Total
19	38	57
LES BENEFICIAIRES		
Femmes	Hommes	Total
1127	673	1800
LES NON BENEFICIAIRES		
Femmes	Hommes	Total
274	113	387
TOTAL DES PERSONNES ATTEINTES		
1420	824	2244

The table shows that women benefited much more from these awareness sessions compared to men. This figure is the result of the compilation of all our intervention villages.

During the month of May 2020, awareness sessions were organized with local leaders, local authorities and a small portion of the beneficiaries. This series of sensitization sessions took place in the preparatory phase of the distribution. It was done in the form of small meetings with the community respecting the norms of 20 people in a small space. It resulted in a simulation of the distribution with the presentation of the site plan and the functioning of the different offices and counters within the site.

**Tableau 4. Nombre de personnes atteintes par la sensibilisation.**

Localité	Leaders		Autorité	Bénéficiaires		Sous Total	Observation
	Femme	Homme		Femme	Homme		
Senda	2	4	2	6	6	20	*Les leaders sont composés de membres de comités locaux de ciblage, de comités de protection, de représentant des déplacés et autres personnes influentes comme les pasteurs. * Les autorités sont les Chefs de localités et les chefs de Camps.
Pamoth	2	6	1	7	3	19	
Ndawe	2	2	2	10	4	20	
Djupugolo 2	3	7	1	5	4	20	
<b>Total</b>	<b>9</b>	<b>19</b>	<b>6</b>	<b>28</b>	<b>17</b>	<b>79</b>	

Mass campaigns were organized at the various distribution sites. This series of sensitizations took place during the 2 cycles of actual distribution of the Cash at the Djupugolo 2 and Ngengere sites (for the benefit of the beneficiaries of Senda, Pamoth, Ndawe). The targets were composed of the beneficiaries, local leaders, local authorities and some dependents who accompanied the beneficiaries.

Two key messages were on the agenda, namely:

- The presentation of the DGD donors and the approach of the DGD - EFSL project on the use of cash;
- Barrier measures for the prevention of VIDOC 19.

A public system was set up and the messages were broadcast throughout the distribution by the EFSL mobilizer assisted by 2 representatives of the community who translated the key messages into the local language.

The total number of people reached by the awareness messages during the implementation of 2 distribution cycles is 4822 people including 1622 men and 3200 women.

### **Securing cash distribution sites,**

Two of the three initially planned sites for Cash distribution have been identified with the active participation of local communities. They are Djupugolo 2 and Pamoth. The Ndawe site has been eliminated due to the risk it presents in case of emergency staff evacuation. Indeed, to reach this locality, it is necessary to take a very winding road of about 2 km in very bad condition on the side of the mountain. In case of emergency for a possible evacuation, Ndawe is not safe.

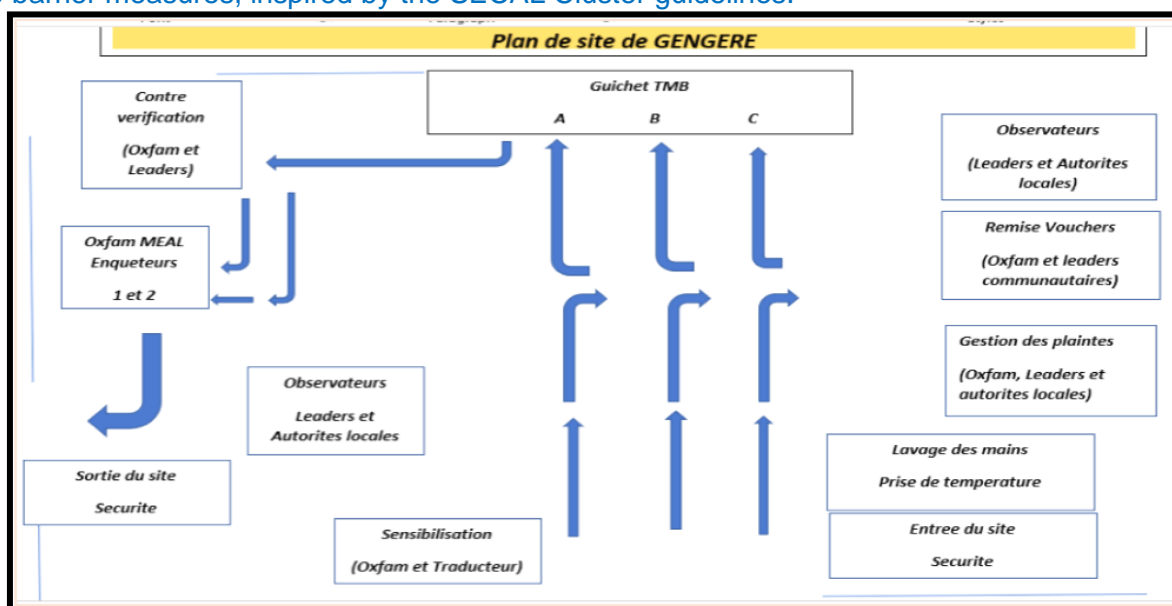
Emergency latrine doors were built in Djupugolo 2 by a local team of day laborers under the supervision of the Oxfam team of WASH engineers following the guidelines of the Oxfam team of WASH engineers and the latrine maintenance materials were handed over to the community in

the 4 intervention localities.

It should be noted that the sites that were already chosen for these 2 cycles of Cash distribution were abandoned and replaced by the courtyard of the EP Gengere located on the hill overlooking the plain of Kakoy where the localities of Senda, Ndawe and Pamoth are located and for Djupugolo 2 the courtyard of the Protestant church of Undila.

The two sites previously chosen in Ndawe and Pamoth were abandoned when the Kakoy plain was flooded by the waters of Lake Albert, making them inaccessible for distribution activities.

The table below shows the site plan, which has been developed in compliance with the COVID-19 barrier measures, inspired by the SECAL Cluster guidelines.



**Image 1. Plan de site de distribution de cash.**

#### **Activity R2.4 – Cash distribution for food for 1.800 households**

The 1st round of cash distribution was carried out by our traditional partner TMB (Trust Merchant Bank) together with Oxfam staff with the support of local community representatives, local targeting committees and complaint management committees. It took place from 15th to 17th May 2020. The second distribution took place from 21 to 23 May 2020.

The distribution concerned 4 localities namely Pamoth, Senda, Ndawe and Djupugolo 2. Two sites were chosen for these 2 cycles of cash distribution. It is the courtyard of EP Gengere located on the hill overlooking the plain of Kakoy which welcomed the beneficiaries coming from Senda, Ndawe and Pamoth and the courtyard of the Protestant church of Undila for Djupugolo 2.

Each targeted household received the equivalent in Congolese francs of US\$60 (at an exchange rate of 1,820 FC, the dollar), or 109,000 FC per distribution cycle. Due to the lack of the 200, 100 and 50FC denominations, beneficiaries had not received the 200Fc per cycle to complete the 109,200FC amount. This amount will be remitted during the third distribution cycle in addition to the \$60 expected for this cycle.

For the 1st Distribution organized for the 4 localities from 15 to 17 May 2020, 100% of the expected beneficiary households, i.e. 1,800, were all served in cash and received \$107,802.2 out of \$108,000 expected, equivalent to 196,200,000 FC actually received out of 196,560,000 FC. This makes a balance of \$197.8 equivalent to 360,000 Congolese francs that the bank will make available at the next distribution..

For the 2nd Distribution organized from 21 to 23 May 2020, 100% of the 1800 beneficiary households received from the TMB the equivalent in Congolese Franc of \$107,802.2 or

196,200,000 FC. The same balance of \$197.8 was observed, or 360,000 FC.

The table below gives us a general overview of the number of households that were served in cash by locality.

**Table 5. Volume of Cash Transferred by Location.**

N°	Localité	Nbre Ménages Attendus	Nbre Ménages Servis	Taux	Cash prévu par Ménage (\$)	Cash reçu par Ménage (\$)	Cash Par Localité prévu (\$)	Cash par Localité (\$) Recu	Cash Franc Congolais prévu par Localité	Cash Franc Congolais Recu par Localité	Solde (\$) par Localité	Solde FC par Localité
1	Djupugolo 2	250	250	100 %	60	59.9	15000	14972.53	27 300 000	27 250 000	27.5	50 000
2	Pamoth	663	663	100 %	60	59.9	39780	39707.14	72 399 600	72 267 000	72.9	132 600
3	Ndawe	385	385	100 %	60	59.9	23100	23057.69	42 042 000	41 965 000	42.3	77 000
4	Senda	502	502	100 %	60	59.9	30120	30064.84	54 818 400	54 718 000	55.2	100 400
<b>Total</b>		<b>1800</b>	<b>1800</b>	<b>100 %</b>			<b>108 000</b>	<b>107 802.2</b>	<b>196 560 000</b>	<b>196 200 000</b>	<b>197.8</b>	<b>360 000</b>

Note that for the 2 Distributions 100% of the beneficiaries received the equivalent in Congolese Franc of \$215,604.40 out of the \$216,000 planned, i.e. 392,400,000 FC out of the 393120000 planned. A balance of \$395.6 or 720,000 FC was not collected by the beneficiaries due to the lack of small denominations of bank bills, which will have to be recovered during the third distribution cycle, i.e. 40 FC per household.

At the end of each distribution day, a report was produced at the site and was signed jointly by the bank, Oxfam and local authorities.

#### **Activity R2.5 - Community awareness campaigns on dietary diversity**

During the month of May 2020, 8 community animators including 2 per locality were identified and trained on food diversity from May 28 to 30, 2020 in Ramogi.

Village	Homme	Femme	Observation
Djupugolo 2	1	1	
Senda	1	1	
Ndawe	1	1	
Pamoth	1	1	
<b>Total</b>	<b>8</b>		

Two themes were developed during the training sessions:

- Exclusive breastfeeding of children 0-6 months old
- Weaning and complementary feeding of children and infants.

After the training of community leaders, awareness sessions were conducted in the same villages according to the table below:

Village	Homme	Femme
Pamoth	62	124
Senda	110	156

Ndawe	31	57
Sous-total	203	337
<b>Total Général</b>	540	

### **Activity R2.6 - post-distribution monitoring**

Selon les données récoltées par les enquêtes menées, le score de consommation alimentaire ayant un niveau acceptable de la population assistée est passée de 18% (à Base Line) à 59% (PDM Cycle 2). Cela montre que le cash distribué a permis aux bénéficiaires d'améliorer leur façon de manger et a ainsi contribué à lutter contre l'insécurité alimentaire dans la zone d'intervention. Les ménages à 45% consomment en moyenne 3 repas par jour et 29% prennent 2 en moyenne et seuls 26% ont pris lors de 7 derniers jours 1 repas. Aucun ménage a les enfants consommant moins de 2 fois par jour.

**Outcome 3: 66,600 women and men in target communities are better able to identify, prevent, mitigate and respond to protection threats**

## **UGANDA**

### - **Updating<sup>22</sup> of the indicators**

**R3.1-OVI – 50% of women and men in target areas who are able to identify at least two protection risks and give ideas on how to mitigate them.**

- 13.2% refugees and 10.5% host community (average 11.9%) in target areas can identify at least two protection risks and give ideas on how to mitigate them. This is according to the survey conducted in November 2019.

**R3.2-50% of women and men in target areas who are able to name three referral services and explain how to access them.**

- 34% of the women and men in target areas are able to name three referral services and explain how to access them. This is according to the survey conducted in November 2019.

### - **Updating<sup>4</sup> of the beneficiaries (status + number)**

	Status	Number of beneficiaries	Males	Females	Boys	Girls	Comments
UGA	Total	19,812	4,174	5,154	5,821	4,663	
	Refugees	1,4189	3,252	3,867	3,923	3,147	10,000 refugees already in country and 1,200 newcomers.
	Hosts	5,623	939	1,270	1,898	1,516	

22 Updates and explanations should target both progress and changes made to the proposal.

## - Updating<sup>4</sup> of the activities

**Activity R3.1 Establishment and strengthening of 10 Gender and Protection Committees and Women Own Forum:** Eleven (11) Gender and Protection committees were established and reinvigorated in zones of Kaborogota, Sweswe, Kakoni, Bukere, Bwiriza, Mukondo C with a total number of 243 (198Female, 45Male) members They have been trained on their roles and responsibilities. These committees work hand in hand with other existing local structures including Refugee Welfare Council and Local Council. Existing structures groups were formed along the existing community structures. Also identified 07 women and 03 men Own I groups with the aim of disseminating information related to SGBV, women and girl rights and referrals. They have also been trained on peace building, human rights, refugee law and the referral pathway. Continuous follow up of these committees is ongoing in order to build their capacity and provide support.

### **Activity R3.2 – Capacity Building of refugee settlement’s leaders:**

03 capacity building trainings were conducted for refugee leaders. Participants were 208 (94 female and 114 male) out of 200 planned refugee leaders. They were trained on their roles, peace building and conflict resolution, SGBV prevention and mitigation. The trainings targeted community local leaders such as the Refugee Welfare Committees (RWCs), and some protection committee members from the nine refugee zones of Kyaka II settlement that is Mukondo C, Kaborogota, Sweswe, Bukere, Kakoni, Itambabiniga, Buliti, Byabakora and Bwiriza. As the refugees arrive, there are sometimes divided along ethnic lines, these manifest in daily life as they struggle for the limited resources in the settlement. In Kyaka II for example, the new refugee collides with the old refugees over resources. This coupled with host community thinking, refugees are favoured more than themselves, thus creating tension. The training aimed at equipping leaders with non-violent skills used in conflict prevention to settle disputes that could arise within the community especially GBV related cases.

### **Activity R3.3 – Conduct 150 community dialogues:**

88 (50 community dialogues + 38 school debates) were conducted in the 6 zones and 5,133 (2,880 female and 2,253 male) persons participated. The main objective of this activity was to build trust between different stakeholders and the community through dialogue to bridge the communication gap and increase understanding between communities at large. The dialogues were used as a platform to sensitize the community on human rights, good governance, rule of law, peaceful conflict resolution/prevention, SGBV, protection of women and children as well as leadership. The dialogues also acted as a mean to address the constraints beneficiaries were facing during the Corona pandemic. The intervention also looked at coming up with local solutions to the same challenges. The target number could not be achieved due to Covid 19 where by schools have been closed throughout and the numbers for community dialogues were limited as per the presidents guideline and ministry of health.

### **Activity R3.4 – Strengthening Information dissemination mechanisms in 4 zones:**

Seven (07) feedback and complaints mechanisms were established in the zones of Kaborogota, Sweswe, and Mukondo C. This was established to bridge the gap of information sharing, knowledge increase, awareness raising and sensitization among the community members about the effects of SGBV in homes, and how to report cases. Fourteen persons (7 Male, 7 Female) supporting these desks were identified by the community and were oriented on their roles and responsibilities. This was done to improve on the identification, reception, reporting, referral of complaints and feedback mechanisms. To date, 5,582 (female 3,349, male 2,233) persons of concern have been supported through the desks. The concerns raised by beneficiaries ranged from lack of documentation and misplacement, land not being enough, shelter, education, health, SGBV, child neglect, security issues, PSN issues, water and hygiene and sanitation and psychosocial support issue. Some examples of the concerns were as follows:



- Health issues were the highest with non-communicable diseases being rampant notably chronic diseases where beneficiaries complained about distances they have to cover and even being fed up of swallowing tablets hence losing hope. Beneficiaries from Sweswe Kitonzi and Kaborogota A raised this. They were linked to Alight for psychosocial support.
- In line with education, Corona pandemic is very evident with a lot of juvenile crime as youths are stealing a lot and drug and substance abuse is on the rise. The issue of learners missing out on the packages distributed was also raised in Sweswe. This was forwarded to the Education sector for follow up.
- Food and cash rations being low was one of the major complaints in all zones leading to violence emanating from cash and food rations received by beneficiaries where unbalanced expenditure that doesn't favor all household members was the major challenge.
- On a good note, some PSNs appreciated the support extended especially in construction of houses. However, they still complained of Inadequate NFIs on WASH support especially latrine construction materials. This was reported from Sweswe Kitonzi and Mukondo C. etc.

### **Activities R3.5 – 2 Exchange learning Visits with refugee and host community leaders:**

Three (3) learning exchange visits were conducted in Kyaka amongst refugee leaders (community structures) from different villages of our implementation and they shared experience and learnt from each other, on issues affecting them, ways of resolving complex cases, referral, collaboration, and coordination among others. The third one was for the local councils from the host communities of Nyaburungi and Kinoni. In attendance were 160 (75 females, 85males).

### **Activity R3.6 – Conduct household visits by Women own forum:**

Eleven (11) Women Own Forum have been conducting home visits and identifying risks especially around SGBV. They also raise awareness on SGBV and refer any risks identified to appropriate service providers. The team and local structures managed to visit 81 household in collaboration with the RWC leadership and also the complaint desks leadership.

The visits were conducted to locate the beneficiaries whose cases had been pending and this required to visit the households.

### **Activity R3.7 Male engagement in SGBV prevention:**

Thirty Eight (38) Male engagement sessions were conducted and aggregated 879 men from Mukondo C, Kaborogota and Sweswe participated. The main objective of this activity was to build knowledge and skills around mobilizing, identifying, and building a network of men to address gender-based violence and combat the spread of HIV. The Male engagement approach mobilizes men and boys to go through personal reflections to explore constructions of masculinity in their contexts and how it affects their well-being and relationships. They reflect upon unequal power relations, gender roles, and rigid social norms that impact on the behavior of women, girls, men and boys. Selected men and boys are taken through a series of training modules, mentorship, coaching, and dialogue sessions.

### **Activity R3.8 Provision of dignity 500 Mama Kits:**

AWYAD together with OXFAM delivered 500 mama kits to Medical Teams International to support the expectant mothers. The kit composed of cotton wool, a baby showel, surgical blade, bathing and washing soap, lesu (piece of cloth for a mother to tie around her body after delivery), knickers, mackintosh sheet, bulb sucker and heavy flow reusable sanitary pads. Some of the kits were delivered to Mukondo health center to support some of the expectant mothers from that health Centre.

These kits helped to provide a clean birthing environment for mothers and newborns who would otherwise be left to go through the birthing process in an unsanitary environment that creates risk of maternal infection at point of delivery. Provision of free clean birth kits to maternity homes Primary health facilities provides a safer birth environment and better health outcomes for mothers

and babies.

**Activity R3.9 Provision of 500 household solar lamps and 30 public solar lights:**

20 public solar lights were procured, and installed around water points, VIP latrines, reception center and other hot spot areas. These were installed to reduce the risk of GBV in the community especially at night. A joint needs assessment was conducted with other protection partners in which FGDs were conducted with various groups of men, women and children to identify hot spots. Due to the market price for a public solar light, the budget could only cater for 20 public solar lights.

920 hand held solar lamps were distributed to 920 (F-490, M-430) individual refugees and some beneficiaries from the host community of Kyegegwa sub county. The Household solar lamps were handed out to persons with special needs this included the elderly, persons with disabilities, chronically ill persons, orphans and child headed households were targeted so that they can have light in the night. This will also reduce on occurrence of SGBV at household level as light scares away perpetrators who might attack PoCs when they know they are in the dark. The lamps will also reduce on the cutting down of trees as a source of lighting by the household members hence improving on preserving the environment. The selection of PSNs from the host community was spearheaded by the sub county chief, LC1s and the parish chiefs who also participated in the distribution exercise which took place from Kabweza primary school while for the refugees the list of PSNs was obtained from UNHCR.

**Activity R3.10 – Support Recreational activities in 10 villages:**

Twelve (12) recreational activities were conducted in the zones of Sweswe, Mukondo, Bukere, Bwiriza and Kaborogota. Activities included sports and music gala with the themes ‘Promoting solidarity, social cohesion, prevention and mitigation of SGBV through music and sports reaching 4,783 (F-1,712, M-3,071). The main objective of this activity was to bring together youth from different ethnic backgrounds to participate in sports and MDD with the aim of building peace, trust, unity and creating a sense of security geared towards post conflict healing, Explore the socio-economic, cultural and political barriers that young people face in their quest of becoming an active agent of positive change, peace building and reconciliation and Provide a platform for discussion of young people on how each one of them could contribute to a peaceful world.

**Activity R3.11 – Participate in 5 Capacity building of Oxfam staff and partners:**

Oxfam staff and partners participated in 05 capacity building trainings. These were:

- Triple nexus learning event in Arua for HECA regional platform and its countries implemented a learning initiative focusing on deepening knowledge and practices in bridging humanitarian-development and peace nexus – aligning with Oxfam one Programme approach and to further explore and clarify on the similarities and differences between UN triple nexus and Oxfam one Programme approach.
- Another event participated in was Regional convening on women’s leadership in peace building in the great lakes region in which the main objective was to engage in key conversations and exchange around the means through which we could strengthen our collective capacity to promote women’s leadership in peace building and reconstruction, address sexual violence in conflict and post conflict situations and lasting peace in the great lakes of Africa,
- Oxfam and partner staff participated in Gender in Emergency training and Prevention of Sexual Exploitation & Abuse (PSEA organized by CARE for ECHO Funded Consortia members which took place from 27<sup>th</sup> -29<sup>th</sup> November 2019, south west staff were trained in gender mainstreaming and safeguarding.



- Jointly with finance and procurement, we trained Oxfam and partner staff in south west on gender and protection mainstreaming in WASH and livelihoods, finance and procurement procedures. ( This was Kyaka, Kyangwali, Rwamwanja and Nakivale teams).
- Trained Oxfam staff in safeguarding and code of conduct together with HR, safeguarding advisor and the confidential counselor from Kyaka, Kyangwali and Nakivale.

**Activity R3.12- Conduct conflict prevention and conflict mitigation/resolution sessions (10):**

Eleven (11) training sessions were conducted on prevention and conflict mitigation. Managing and resolving community disputes requires trust and effective communication between leaders of diverse communities and other relevant stakeholders. We identify and support a coalition of leaders and local authorities who are trustworthy, legitimate, and empowered to effectively resolve community-level disputes and drive change within their constituencies and regional structures in an inclusive and sustainable manner. 207 (87F, 120M) protection committee members, women own fora leader's, men own fora leaders, refugee welfare councils (RWC) and local councils (LCs) from host community participated. The training focused on educating leaders in both the refugee and host community to promote peaceful coexistence and equal sharing of resources among refugees and the nationals.

**Activity R3.13 – Strengthening of the 2 referral pathways:**

Four (04) billboards with referral pathway were printed and installed in Sweswe, Kaborogota and Mukondo C. Kyaka community referral pathway was revised by protection working group to enable community members understand where to access services. This was printed and translated into the common local language (Kiswahili). This was to enable community members understand where and when to get services.

**Activity R3.14 – Conduct 3 trainings on SASA methodology for partner / stakeholders:**

A total of three (03) SASA Methodology training for Oxfam and Protection Partner staffs in Kyaka II Refugee settlement were conducted. The main goal of the training was to build and strengthen the knowledge and skills of OXFAM staff and Protection partner staffs towards using SASA, ideas to mobilize, prevent and respond to VAWG/GBV. In attendance were 40 (25F, 15M) staffs from OXFAM, OPM, UNHCR, TPO, WCH, FCA, WV, SP, AHA, IRC, AWYAD, RED CROSS ADRA, DRC, ARC, SCI, FCA, HI and ACORD.

**Activity R3.15 – 2 Participatory assessments including the GiE, AGDM:**

01 Gender in Emergency assessment was conducted by a hired consultant with support from Oxfam and its partner AWYAD in Kyaka II refugee settlement and report was compiled. Different structures such as RWCs, SGBV groups, women own forum, community members, implementing and operating partner staffs, Oxfam staffs and LCs were interviewed. Methodologies used were observations, interviews, and discussion. Oxfam participated in AGDM conducted jointly with UNHCR and partners in Kyaka II in December 2019.

Additional assessment has been conducted. This was Gender Analysis on the impact of COVID 19 to refugees has been conducted. This was organized by UN women and conducted in all the settlements in Uganda, Oxfam supported the activity and a report is yet to be shared. The remaining balance will be used to support the AGD exercise planned for November 2020.

**Activity R3.16 – Participate in 12 events related to Gender and Protection:**

Oxfam and AWYAD participated in at least 12 events. These included International Aids Day, Day of African Child, World Refugee day, World Mental Health day, international youth day, Launch

and closure of 16 days of activism, International women's day. Others included International Humanitarian Day. Some were celebrated more than once. The remaining events will be celebrated in December 2020 that is 16 days of activism against SGBV and human rights day .

AWYAD participated in the world mental health day which is observed on 10 October every year with the theme: *Mental Health for All Greater Investment – Greater Access*. The overall objective of raising awareness of mental health issues around the world and mobilizing efforts in support of mental health. The Day provided an opportunity for all stakeholders working on mental health issues to talk about their work, and what more needs to be done to make mental health care a reality for people worldwide. Among the activities which were carried out included radio talk show, training of staffs on stress management, community awareness using boda-boda talk-talk. Partners who participated the event included AWYAD, ALIGHT, TPO and War-Child. Most events have been celebrated more than once. The existence of international days predates the efforts of the implementing partners and they embraced them as a powerful advocacy tool. Partners observe designated days, weeks, years, and decades, each with a theme, or topic. By creating special observances, the partners promote international awareness and action on these issues. Each international day offers many actors the opportunity to organize activities related to the theme of the day. Organizations and offices most importantly, governments, civil society, the public and private sectors, schools, universities and, more generally, citizens, make an international day a springboard for awareness-raising actions. The majority of observances have been established by resolutions of the United Nations General Assembly, although some have been designated by UN specialized agencies.

## DR CONGO

### - Updating<sup>23</sup> of the indicators

#### **R3.1-OVI - 50% of women and men in target areas who are able to identify at least two protection risks and give ideas on how to mitigate them**

67% of women and men in the target areas are able to identify at least two protection risks and provide ideas on how to mitigate them.

#### **R3.2-50% of women and men in target areas who are able to name three referral services and explain how to access them**

66% of women and men in the target areas are able to name three referral services and explain how to access them.

### - Updating<sup>4</sup> of the beneficiaries (status + number)

		# bénéficiaire	Homme	Femme	Garçon	Fille
RDC	Total	45493	9554	10918	11373	13648
	Retournes / Rapatriés	8188	1719	1965	2047	2456
	Familles d'accueil et Autochtones	37305	7835	8953	9326	11192

### - Updating<sup>4</sup> of the activities

23 Updates and explanations should target both progress and changes made to the proposal.

### Activity R3.1 – Establish protection focal points, protection committee and Women Forums in Ituri

#### Organization of elective assemblies of members of community protection structures

A total of 1,403 people, 611 men and 792 women, took part in the elective assemblies of members of the community protection and advocacy structures in the communities. The table below shows the number of participants in the assemblies by village.

Table: Participants in the elective assemblies in the project implementation villages.

SITE	Forums des femmes		
	Homme	Femme	Total
Abia	55	45	100
Cawa-Anju	60	70	130
Pamoth Senda	120	122	242
Ndawe	70	90	160
Jupugulo 2	50	70	120
Apala	40	80	120
Kpandroma	86	128	214
Zali	85	112	197
Budza	45	75	120
<b>SOUS TOTAL</b>	<b>611</b>	<b>792</b>	<b>1403</b>

After a brief presentation of Oxfam and the activities of the project, the participants in the assemblies chose the members of the protection structures on the basis of the following criteria:

- Read and write (in Kiswahili or French) to produce small circumstantial reports.
- Be displaced, returned or a permanent resident of the locality
- Demonstrate good character ;
- Agree to work voluntarily and voluntarily for his community;
- Ability to raise awareness;
- Have good relations with other community members and local authorities;
- Have not held political or military office.

#### Setting up protection structures

9 women's forums and 9 protection committees set up in the localities of the chiefdom of Mukambo in the territory of Mahagi and Djugu, the composition of which is shown in the following table:

SITE	Forums des femmes			Comité de protection		
	Homme	Femme	Total	Homme	Femme	Total
Abia	0	15	15	5	5	10
Cawa-Anju	0	15	15	5	5	10
Pamoth - Senda	0	15	15	5	5	10
Ndawe	0	15	15	5	5	10
Jupugolo 2	0	15	15	5	5	10
Apala	0	15	15	5	5	10
Kpandroma	0	15	15	8	8	16
Zali	0	15	15	5	5	10
Budza	0	15	15	5	5	10
<b>SOUS TOTAL</b>	<b>0</b>	<b>135</b>	<b>135</b>	<b>48</b>	<b>48</b>	<b>96</b>
<b>TOTAL GEN</b>	<b>135</b>			<b>96</b>		

**Comment:** 135 women were elected as members of the women's forums in the nine localities and 96 people including 48 men and 48 women were elected as members of the protection and advocacy committees during the elective assemblies held in each of the

localities.

### **Training of community leaders and relays on the gender approach within the framework of Wash activities in different intervention localities of the project.**

A training session for community leaders and relays was held from May 4 to 5, 2020 in Ramogi in the Mahagi territory in the Angumu health zone. Participants came from the villages of Djubate, Zali, Kpandroma, Budza, Ramogi, Cawa/Anju, Abia, Apala, Jupagulo, Senda/Pamoth, Ndawe in Mahagi and Djugu territories. A total of 146 people including 24 women and 122 men participated in the training sessions. They included administrative and customary authorities, local civil society, representatives of health structures, youth representatives, women's forums, community protection committees and community relays. This training focused on the integration of gender in the water - hygiene and sanitation activities carried out daily by the community relays and local leaders. The specific themes developed were gender analysis, basic notions on gender-based violence, mapping for referral of cases of gender-based violence to available care structures. At the end of the training, the participants understood that gender does not mean a woman. They made commitments to integrate gender in their daily activities by strengthening the participation of men and women.

<b>Cibles</b>	<b>Hommes</b>	<b>Femmes</b>	<b>Total</b>
Leaders	45	5	50
Relais Communautaires	77	19	96
<b>Total</b>	<b>122</b>	<b>24</b>	<b>146</b>

### **Training of protection structures (protection committee and women's forums)**

To enable them to properly fulfill their roles, the members of the protection structures of the Mukambo chiefdom in Mahagi territory were trained from April 12 to 21, 2020 by the protection team of partner FECONDE on the concepts of protection (protection analysis, risk analysis, vulnerability analysis, awareness techniques and the role and responsibilities of the members of the protection structures). In the table below the number of participants by locality :

<b>Village</b>	<b>Comité de protection</b>		<b>Forums des femmes</b>
	<b>Homme</b>	<b>Femme</b>	<b>Femme</b>
Cawa Anju	5	5	15
Abia	5	5	15
Apala	5	5	15
Ndawe	5	5	15
Senda	5	5	15
Djupagolo II	5	5	15
<b>TOTAL</b>	<b>30</b>	<b>30</b>	<b>90</b>

A total of 150 members of community protection structures took part in the training, including 120 women and 30 men. The roles and responsibilities of the members of these structures are defined here:

- Regular contact with available care services in the community,
- Ensure confidential referrals of abuse cases to available community services,
- Contribute to the updating of the mapping of care services within the community,
- Identification and reporting of barriers to access to services (access to WASH facilities and humanitarian assistance, access to care services available in the community)
- Establishment of mechanisms for the analysis and management of risks related to WASH and food safety activities;
- Advocacy with services to facilitate access;
- Ensuring the proper functioning of community complaint management and feedback mechanisms;
- Regular contact with OXFAM and partner teams;

- Vieller has the integration of gender and protection aspects in project activities.

Au mois de mars 2021, avons organisé des réunions d'évaluation des activités réalisées par les structures communautaires de protection dans les dix villages ciblées par le projet. Au total 230 personnes ont pris part à cette assises dont 200 femmes et 50 hommes. Il a été constaté que certains membres des comités de protection et forum des femmes n'étaient plus actifs et d'autres ont changé de lieu de résidence. Pour cela, ils ont été remplacés par de nouveaux membres (au total 12 membres de forum des femmes et 16 membres des comités de protection). Au mois d'avril 2021, avons organisé une formation de refresh à l'intention des membres de forums des femmes. 150 femmes membres des femmes ont pris part aux ateliers organisés dans les 10 communautés sur le genre, les Violences basées sur le genre, les notions de la protection et le référencement des cas de protection.

Un autre atelier de mise en niveau a été organisé à l'intention de 50 personnes dont 24 femmes et 26 hommes sur l'analyse des risques, les Violences basées sur le genre et les droits humains à l'intention de points focaux protection issus des structures WASH et sécurité alimentaire.



Participants à la formation sur l'élaboration du plan de protection communautaires à Ramogi

### **Activity R3.2 Mapping access to referral services**

An assessment of available health care services was conducted in six villages and surrounding areas targeted by the project. This led to the development of 6 service mappings in the villages of CAWA ANJU, Abia, Apala, Djupagolo 2, Ndawe and Senda-Pamoth. Among the services available, it should be noted here the presence of health structures (including the Angumu General Hospital and 5 health centers) which benefit from the support of the organization Médecins Sans Frontières for the health care of displaced persons (for essential drugs) and cases of sexual violence. There is also the presence of a police unit in CAWA ANJU (about 10 officers), which is insufficient to guarantee security in the chiefdom of Mokambo. A chiefdom and five customary groups to arbitrate land disputes and deal with noncriminal offenses are functional there.

The maps will be updated after three months to integrate the changes that have occurred in each zone.

Dissemination of protection case management service maps in the villages: 400 people, including 150 women and 250 men, took part in 10 meetings to disseminate the maps of abuse case management services in the ten villages where they were implemented (Apala, Pamoth, Senda,



Ndawe, Cawa-Anju, Jupugolo2 , Abia, Kpandroma, Djubate, Budja).

En Janvier 2021, une actualisation des mappings de services disponibles dans les villages a été faite. Et pour sa dissémination, avons produit 20 avec le schéma du système de référencement, sont fixés dans les lieux publics, 500 exemplaires de cartographie de services, 6000 dépliants sur les VBG ont été distribués, 150 calicots avec message de protection affichés dans les écoles, les lieux de culte, dans les marchés.

### **Activity R3.3 - Training for local authorities, local leaders, service providers and local media on protection, their roles and responsibilities and confidentiality**

134 people, including 29 women and 105 men leaders and local authorities (group leaders, heads of localities, heads of state services, heads of women's associations, media operators, heads of youth associations) were trained in three sites in Ramogi, Kpandroma and Apala in August 2020. The main themes developed are the notions of protection, protection tools, protection analysis, human rights and the role and responsibilities of the authorities in the protection of civilians, as well as the confidential treatment of protection cases in the communities.

Une seconde série de formation des leaders et autorités locales a été faite dans les villages de Rethy et Abia ou Ramogi en mars et avril 2021 sur les droits humains, rôle et responsabilité des autorités locales dans la protection. Au total 130 personnes dont 57 femmes et 73 hommes ont pris part à ces séances de renforcement des capacités à Rethy, Ramogi et Abia.

### **Activity R3.4 - Strengthening Information dissemination mechanisms**

Oxfam's protection team, implementing partner FECONDE and civil protection, in close collaboration with the protection focal points, have set up a mechanism to share information with the local population on protection issues in the villages.

1. Radio program: 48 radio programs on protection risks within communities, rights and the legal framework related to these risks and possible protection measures to be taken (how to prevent, how to protect react, how to react to a protection threat), were produced and broadcast on the partner radio station Tilo.
2. Meeting with community members: 10 planning sessions with structures, as well as work and exchange meetings were held for the design of plays and preparation of radio programs.

40 émissions radio diffuse sur la prévention des violences basées sur le genre, les droits de la femme et le circuit de référencement des cas (cartographie des services disponibles dans la chefferie de Mokambo et en zone de santé de Rethy) ont été produites et diffusées sur les deux Radios partenaires de Tilo et Radio Tam Tam de Kpandroma.

### **Activity R3.5 - Conduct gender in emergency training for beneficiaries**

After the establishment of community protection structures (protection focal points, women's forums, local protection committee, drinking water management committee, community relay and source committee), a capacity building session for these community structures was held in Kpandroma and Ramogi with a total of 88 participants including 43 women and 45 men. The role of these persons is to be able to identify, prevent and mitigate risks and threats to protection in a timely manner, to ensure that specific gender considerations are taken into account throughout the project cycle and to encourage women and girls to participate in project activities.

The themes developed during the workshops are :

- Essential principles of protection (do no harm, equity, participatory approach and empowerment of women, priority access to facilities, safety and human dignity)
- Prevention of Sexual Gender-Based Violence (SGBV)
- Abuse Referral System
- Children's rights and human rights

### Activity R3.6 - Conduct protection activities in communities

An awareness-raising campaign was conducted during the 16 days of activism against gender-based violence in the target communities around the theme chosen for the year in Ituri province, namely "Let's all make Ituri move, let's denounce gender-based violence and conflicts for sustainable peace". But also a focus on the problems identified in the community action plans: early marriage. The members of the community structures designed and presented 8 plays on these themes.

On the other hand, sensitization sessions on the topics of protection, namely conflict reduction, the rights and responsibilities of citizens, the roles and responsibilities of authorities and service providers, illegal taxes and barriers or practical self-protection measures are conducted jointly with partner FECONDE, civil protection and members of the community protection structures and local leaders.

A total of 35,386 people were reached, including 21,385 women and 14,001 men.

A range of sensitization materials have been produced and distributed in the villages, including 2,000 leaflets, 80 banners with messages, 200 T-shirts with sensitization messages, 400 training modules, and a series of training sessions.

18528 personnes dont 11224 femmes et 7 304 hommes ont pris part aux activités de sensibilisation de masse, organisées conjointement par les membres des forums des femmes et comité de protection dans les communautés. Les milieux ciblés sont les petit marché locaux, les écoles, les églises locales.



Séance de sensibilisation sur les VBG à Ramogi

Une formation a été faite à l'intention des agents des structures pourvoyeurs de services qui prennent en charge des cas protection. 50 personnes dont 22 femmes et 28 hommes prestant dans les structures de soins de santé, les organisations locales œuvrant dans le domaine de protection, les agents des services étatiques, les responsables d'école et religieux ont pris part à la formation sur le traitement confidentiel des informations liées aux cas de protection et le circuit de référencement des cas de protection.

### Activity R3.7 - Provision of dignity 500 Mama Kits

500 Mama kits were distributed to women, in collaboration with the Nurses in charge of the Health Centers covering the 10 villages where the project is being implemented. In the table below the distribution of kits distributed according to the villages

Numéro	Aire de santé	Nombre de kits distribué
1	Apala	60
2	Abia	57
3	Awasi	60



4	CAWA Anju	57
5	Gengere	66
6	Kpandroma	50
7	Budja	50
8	Djubate	50
9	Zali	50
Total		500

The composition of the kit: 1 suitcase bag, 1 pack of three loincloths, 1 plastic basin, 1 pair of slippers, 6 underwear, 1 bar of laundry soap, 1 box of baby powder and 6 pieces of diaper cover. In monetary value, one kit is worth 40 US dollars.

The beneficiaries of the kits were identified in the health centers in collaboration with the nurses in charge of the health centers during the prenatal consultation activities based on the following criteria: displaced women, displaced young mothers or women from the vulnerable host community who deliver at the health centers.

### **Activity R3.8 - Provision of 1.500 personal solar lamps**

1,500 solar lamps were given to returnees, IDPS and people with special needs (the elderly, the disabled, the chronically ill, survivors of sexual violence, unaccompanied minors and separated children and vulnerable women with infants) identified in IDP sites.

### **Activity R3.9 - Active risk reduction and referral activities**

Three protection risk analyses (before the implementation of project activities, during the targeting of cash beneficiaries and during cash distributions) were carried out in the Mokambo chiefdom. Mitigation measures were identified for specific risks affecting beneficiaries, staff and managers to ensure the protection of staff and beneficiaries. One of the major risks for beneficiaries was the looting of assistance and the contestation of beneficiary lists by youth in the host community, who often do so in the area to demand that they be identified as beneficiaries. We recommended that the teams and the chief of the chiefdom initiate meetings by population strata and explain the criteria for selecting beneficiaries; involve the local chiefs and community leaders in the targeting and jointly sign the minutes at the end of targeting. For the beneficiary, bring the distribution sites closer to their village to avoid being attacked by young people on the way home.

Training of members of WASH, food security and protection structures on Safeprogramming: as of September 28, 2020, 40 people (11 women and 29 men), involved in the implementation of activities (i.e. 3 agents of FECONDE and civil protection partners, members of the advocacy network, 3 Oxfam agents, members of protection committees, members of drinking water management committees, contractors, local leaders and leaders of the Mokambo chiefdom society).

The participants identified the risks of sexual abuse by the managers of the standpipes and that the project has created a number of expectations that Oxfam cannot meet, such as the construction of schools and springs for villages not targeted by the project. In terms of a mitigation mechanism, participants suggested the establishment and training of all on the code of conduct and gender-based violence, strict regulation of drawing hours and sensitization on Oxfam's areas of intervention. Oxfam will also need to advocate with the donor DGD to obtain funds to expand the project to other villages with WASH, food security and protection needs in the neighboring Wagongo chiefdom.

To understand the general protection context in the intervention villages, a protection case trend chart is completed monthly. As a result, 48 cases of sexual violence have been identified and referred to care services, 38 of which were referred within 72 hours. 230 cases of theft, 88 cases of killing and 7 illegal barriers documented and shared during joint meetings between protection actors and local advocacy networks.

D'autre part, l'équipe protection a accompagné les agents de SEF ENERGY dans le choix des sites lors de l'étude géophysique en vue d'identifier les points où seront érigés les forages dans

les villages de Mola, Djubate, Zali, Budza et Aboro. L'équipe protection a procédé à l'analyse des risques dans chaque village et contacter les propriétaires des terres pour l'obtention d'autorisation pour cette fin.



### Rapport analyse protection SECAL DC

#### **Activity R3.10 - Protection and social cohesion activities (including meetings, awareness campaign)**

A threat analysis was done during the training and development of community protection plans. From this analysis, it appears that two types of threats are recurrent in the Rety and Angumu health zones. These are physical violence (killing of civilians, assault and battery, kidnapping of civilians, sexual violence, early marriage) and deliberate deprivation (looting of property, burning of houses, collection of illegal taxes).

These abuses were exacerbated by the identity-based conflict, whose assailants who attacked villages were identified as being from the Lendu tribe, creating a climate of tension between the Lendu and other tribes, particularly the Alurs.

In addition, there is a climate of mistrust in the villages between the local authorities and other segments of the population.

To contribute to social cohesion, three activities are developed in the villages:

1. Sensitization and training on peaceful cohabitation between tribes: 375 local leaders and chiefs including 135 women and 245 men were involved in sensitization on peaceful cohabitation between tribes in Mahagi and Djugu.
2. Organization of activities to bring local authorities and the civilian population closer together: 650 people, including 60 women, took part in the rehabilitation of the Tilo road section in the Pajen groupement. The activity brought together the heads of the group and of the 6 localities and young people, which ended with a sensitization on the protection and role of the authorities and ;
3. The handing over of a road maintenance kit consisting of 2 carts, 20 picks, 20 crowbars, 10 spades and 2 jets of kelp for the sports activities of the young people.
4. **Organisation d'un atelier sur la cohabitation pacifique** : les leaders de la communauté Lendu de Kpandroma et leaders de la communauté Alur de Mokambo ont participé à un atelier de renforcement des capacités sur la protection et cohésion sociale. Cet atelier a été Co-facilité avec le Médecin chef de Zone d'Angumu. L'activité a eu lieu à Ramogi du 22 au 23 Janvier 2021. En plus les autorités locales de la chefferie de Mokambo, de la chefferie de Wagongo et de la chefferie Angh'al et le groupement de Jupio ont initié un dialogue dans l'objectif d'engager un dialogue sur la question de gestion des infrastructures d'eau ainsi que la cohabitation entre population hôte et les déplacés. 50 personnes ont pris part à cette activité dont 20 femmes et 30 homes. Ils s'agissent :
  - Les autorités politico-administrative
  - Les membres des comités de protection
  - Les membres de forums des femmes
  - Les responsables des structures ou comités des déplacés
  - Les leaders locaux
  - Les leaders religieux,
  - Les agents de force de l'ordre

## Outcome 4: Strengthen humanitarian advocacy and coordination mechanisms

### UGANDA

#### - Updating<sup>24</sup> of the indicators

R4.1-OVI – At least 3 Refugees Committees and coordination structures have been established/or revitalised and are able to conduct humanitarian advocacy at local level and these efforts will be integrated in regional advocacy initiatives.

- At least seven (7) Refugee committees and local council committees were trained and are able to conduct humanitarian advocacy at local level.

#### - Updating<sup>4</sup> of the beneficiaries (status + number)

Status	Number of beneficiaries	Males	Females	Boys	Girls	Comments
Total	662	340	322	0	0	Reached during trainings and meeting
Refugees	560	309	251	0	0	
Hosts	102	31	71	0	0	

#### - Updating<sup>4</sup> of the activities

##### **Activity R4.1 – Assessment of existing structures & coordination mechanisms in place**

The assessment was conducted in Kyaka and Kyangwali settlement, the consultant shared the report. A position paper on local and national level advocacy working closely with refugees and hosts was developed by the consultant, a draft copy of findings was shared. So far the consultant is addressing comments shared by relevant stakeholders and a final paper shared. Once the final copy of the position paper, this will be shared by partners and other key relevant stake holders for advocacy purposes on addressing key gaps as well as recommendations identified.

##### **Activity R4.2 – Develop and strengthen refugees' network and local actors.**

Conducted 01 refugee local actors' training/workshop on coordination mechanism. 42 (20 females, 22 male) participated from Kyegegwa and Kikuube district including government staff (Office of the prime ministers staff, probation officers, sub county CDOs, Chief administrative officers), political leaders (local council 3), partner staff (ALIGHT, IRC, Save the children, Oxfam, AWYAD, JESE), Refugee leaders (Refugee welfare council,) and refugee led organizations. The goal was to strengthen coordination mechanisms among different stakeholders working with refugees. A report was compiled and shared with various stakeholders.

Conducted 3 days TOT workshop for refugee leaders on advocacy and communication at Katente Hotel. The leaders targeted were Refugee welfare council I, local council I, Child Protection Committee members, Community Activists, women on forum, Defence RWC I level, PSN leaders, refugee led organizations and VHTs. 30(17male, 13female) participated. The objective was to strengthen advocacy and communication at community level.

24 Updates and explanations should target both progress and changes made to the proposal.

Participated in Advocacy meeting organized by JESE that targeted district officials, OPM, subcounty officials, Oxfam, Jese staff and DR DIP. In attendance were 10 (6female, 4male). The meeting was to deliberate about advocacy around energy and environment conservation. Some of the key issues discussed were 30% for host community allocation of the dumping site near Bwiriza swamp which had been handed over to Oxfam from IOM through UNHCR. Oxfam, having known the environmental implication of the site (especially with possibility of ground water contamination and wetland degradation), had previously started campaigning/advocating for the dumpsite to be relocated through the WASH Coordination Forum. With support from OPM and UNHCR, a new dumping site has been identified in Bwiriza away from swamp. The choice of the site follows extensive community engagement and environmental considerations and wider plans to further improve settlement wide solid waste management. .

01 Linkage meeting of refugee committees from Kyaka and Kyangwali was conducted in Hoima district. This included OPM of Kyaka and Kyangwali and refugee leaders from various structures. The aim was to share the best practices and learn from each other. Advocacy work plans were drawn, and they are implementing them. In total 22 (M-10 and F- 12) participants attended and drew advocacy plans which they had started implementing but because of COVID, the activity is halted. Among the key action points developed included: Extension of safe water underserved villages, Need for support of PSN latrines in Kyangwali settlement while in Kyaka II, need for shelter for PSNs, translating laws related to refugees in French and Kiswahili, extending safe water to underserved villages, and need for PSN latrine support. As a result, some progress has been registered especially on extension of piped water to Kakoni zone by Oxfam, construction of 276 PSN latrines by JESE & Oxfam and construction of 10 PSN shelters by the protection partner.

#### **Activity R4.3 – Strengthen National and regional advocacy.**

AWYAD conducted one district dialogue which involved both the technical and political wings from the district, sub county, implementing partners and refugee leadership structures. The objective of the dialogue was to; provide a platform through which the refugees, host communities and local leaders can address sources of conflict and come up with peaceful conflict mitigation mechanisms all geared towards increased resource sharing and peaceful co-existence. It also aimed at opening a discussion between the current relation between refugees and the host community within and beyond the settlement. 56 people participated (Female-12, Male-44).

Also in collaboration with the Office of the Prime Minister and Oxfam, AWYAD organized a national dialogue meeting on enhancing the refugees and host communities Rights during and after the Covid 19 pandemic. This could only happen with support from the Belgium Government. The main objective of this dialogue was to celebrate the rights of refugees in Uganda and reflect on how to further protect and promote refugee rights during and after the pandemic. The dialogue also shared insights on the current refugee Rights status and the effects of COVID 19; specifically focusing on the Right to Education and The Right to Food. Ultimately, the dialogue also wished to galvanise support from donors, and other stakeholders to increase their support to refugee work in Uganda. The meeting was graced by over 50 humanitarian actors drawn from the Office of the Prime minister, Members of Parliament, District LCV Chairpersons, CSOs, Refugee representatives and media. (Female-17, 33 Male).

Refuge leaders of Mukondo C, Kaborogota and Sweswe trained community members on advocacy and communication. 354(208M, 146F) participated. They have been advocating for support to PSNs from various organizations especially on shelter and 10 of the PSNs have benefited through their efforts. They also advocated for parents to send their children to school and for scholastic materials from the education partners.

## 4.3.2.1.1 Final report

**Outcome 1.1 (R1.1): Increased safe, equitable access to water for 50.000 (DRC) and 16.600 (UGA) beneficiaries**

### UGANDA

#### - Indicators for the outcomes obtained

**R1.1-OVI** – At least 70% of the total population of the targeted beneficiaries have improved access to safe water at a maximum 500m distance

**R1.2-OVI** – Number of people having access to dignified, safe, clean and functional excreta disposal facilities

- A total of 7200 people (Male-1106, Female- 1503, Boys-731 & Girls-1075) have access to dignified, safe, clean and functional excreta disposal facilities.

**R1.3-OVI** – 80% of beneficiaries are able to identify at least one major hygiene related health risk and cite 2 measures to prevent it.

#### - Beneficiaries (status + number)

The project reached out to a total of 71,810 (M-17,249, F-25,852, B- 11,490, G- 17,219) individuals with WASH services as per the table below.

	Sectors	Status	Number of beneficiaries	Males	Females	Boys	Girls
UGA	WATER	Total	21,000	6,217	6382	4,145	4,256
		Refugees	19,000	5,625	5,775	3,750	3,850
		Hosts	2,000	592	406	395	406
	SANITATION	Total	7,200	1,748	2,592	1,152	1,708
		Refugees	7,200	1,748	2,592	1,152	1,708
		Hosts	-	-	-	-	-
	HP	Total	71,810	17,249	25,852	11,490	17,219
		Refugees	50,267	12,084	18,096	8,043	12,044
		Hosts	21,543	5,165	7,756	3,447	5,175
Overall Total			71,810	17,249	25,852	11,490	17,219

- **Activities carried out:**

**Activity R1-1.1 Support the construction of the 7kms water distribution system to Kaborogota, Sweswe and Buliti zones in cluster 3 of Kyaka II settlement of water supply system.**

A total of 7km pipeline extension was fully completed in Cluster III zones;- Sweswe, Kaborogota and Itambabiniga using Cash for Work approach executed by PSN households in the said zones, 27 community tap stands were also constructed (Kaborogota -12, Sweswe -3, Itambabiniga -12) to enhance safe water access for 13,500 Persons (6,661M, 6,839F) for domestic use with reduced walking distances and queuing times, and this has resulted into safe and appropriate hygiene practices including hand washing, cleaning of WASH Non-food items that has reduced morbidity rates among the persons of concern.

Additional interventions that boosted safe water access for Persons of concern included; successful completion of the construction of a cascade aerator at Sweswe water treatment plant that enhanced the water production volumes through physical treatment by removal of toxic substances such as iron II oxide, manganese, hydrogen sulphide, and carbon monoxide) through oxidation process, and upgrading of the pipework between the aerators and the sedimentation tanks at Sweswe water treatment plant from DN80mm to DN200mm that eliminated water loss through overflows that has been occurring at the aerator. These two interventions led to a boost in the safe water access for POCs from 11.2 to 12.3 L/P/D in cluster III zones.

**Activity R1-1.2. Daily water quality monitoring, mainly for Free Residual Chlorine and Faecal coliforms.**

Daily water quality monitoring of free residual chlorine (FRC), turbidity and pH was conducted at water chlorinated community water points connected to Sweswe water scheme, and household level in the DGD areas of operation with a minimum of 20 samples collected and tested daily which indicated 100% FRC presence in the recommended range of 0.2mg/l to 0.5mg/l. Water quality testing was also done on non-chlorinated water points particularly hand pumps and natural springs using rapid test kit (Hydrogen sulphide, H<sub>2</sub>S) and bacteriological test kit to ascertain the level of contamination in terms of faecal coliforms, and findings indicated that 82% did not conform to the required WHO water quality standards with presence of faecal coliforms in water due to the fact that most hand pumps in Kyaka are shallows wells that recharge their boreholes from surface water sources that susceptible to contamination. Households accessing water from unsafe water points were supported with aqua tabs and ceramic water filters to support household water treatment and more community sensitization campaigns were conducted to strengthen safe water chain management practices among households through community structures including VHTs, water user committees, and welfare leaders.

**Activity R1-1.3. Strengthening coordination framework (WASH and Technical working groups within WASH) and with local authorities.**

Water supply technical, Sanitation and Hygiene working groups comprising of key partners including (OXFAM, Peace Winds Japan (PWJ), Uganda Red Cross Society, Samaritan Purse, International Rescue Committee (IRC), Danish Refugee Council (DRC), African Initiatives for Relief and Development (AIRD), Adventist Development and Relief Agency (ADRA), Office of the Prime Minister (OPM), UNHCR, Kyegegwa District Water Department), and community structures met on a bi-weekly basis to discuss key WASH related matters affecting POCs, monitor WASH interventions jointly, and draw joint decisions for sustainability. . Joint field visits were conducted to monitor progress for OXFAM's Constructed WASH interventions including 7km pipeline



extension for Cluster III zones, construction of community tap stands, cascade aerator, Household latrines, waste banks and other WASH interventions implemented by other partners. Regional workshop conducted on 17<sup>th</sup>.12.2019 attracted all WASH and Health with partners from different settlements in the region to agree on hygiene and sanitation strategies. Other activities funded under ECHO and internal Oxfam funding included training of working group on dome-shaped slab production, and harmonizing hygiene approaches.

Oxfam supported Kyegegwa district health department to conduct an assessment on its capacity on infection prevention and control (IPC) of Ministry of Health (MoH) guidelines as well as appropriate use of Personal protection equipment (PPEs) across the 16 health facilities within the district. The assessment aimed at determining key gaps to inform district COVID 19 task force on resource mobilization and allocation. Among the key gaps identified were 1) lack of adequate sanitary facilities, 2) hand washing facilities, 3) inadequate PPEs, and 4) inadequate knowledge on appropriate use of PPEs and correct mixing of disinfectants such as Jik and chlorine as well as an understanding of MoH and WHO COVID 19 prevention guidelines.

From the IPC assessment findings / gaps identified, Oxfam through this project distributed a total of 85 hand washing facilities at communal latrines, congested water points, markets, health facilities, prisons, police and district headquarters to strengthen hand washing practice as a preventive measure for COVID 19 across the district. Oxfam supported the district health team to undertake a technical support supervision and mentorship exercise of 132 (F-73 and M-59) health workers across all the 16 health facilities Wekomire H/C III, Mpara H/C III, Karwenyi H/C II, Ruhangire H/C II, Kazinga H/C III, Migamba H/C II, Migongwe H/C II, Kakabara H/C III, Kyegegwa H/C IV, Kigambo H/C II, Hapuuyo H/C III, Bugogo H/C II, Kasule H/C III, Mukondo H/C II, Bujubuli H/C III and Kisagazi H/C II with the district. This targeted strengthening capacity of front line health workers on appropriate use of PPEs, and proper/appropriate mixing of disinfectants using MoH and WHO guidelines on IPC. A total of 132 (M- 59,F-73) health workers benefited from the above sessions. The assessment findings also informed an IPC action plan that guided Kyegegwa district task force, different partner's and stake holder's support to the health facilities such as, Construction of a latrine block and repair of rainwater harvesting tanks at Kyegegwa health centre IV by URCS. UNICEF also pledged to support with PPEs, distribution of PPEs by the district health department to health facilities that had inadequate supplies among others. (IPC Assessment Report May 2020.docx)

Oxfam participated in flood assessments in Kasese, Ntoroko and Bundibugyo districts as well as providing technical support to generate ideas on mitigating the impact of floods. In collaboration with other partners and the respective district disaster management committees of Kasese, Bundibugyo and Ntoroko, response plans were developed to mitigate the impact on floods and are currently being implemented. Oxfam also used the findings to develop a proposal which attracted internal funds for 4 months to respond to flood response in Kasese district.

Oxfam participated in the regional sanitation working group coordination meetings, in Fort portal held from 9<sup>th</sup> to 10<sup>th</sup> December 2020. Oxfam was able to present major innovation pilots as well as WASH implementation and was able to learn lessons on innovative latrine designs and approach especially through sanitation marketing and working closely with financial lending institutions. This is something Oxfam is looking forward to pilot in the settlement.

Oxfam continues to participate in all COVID 19 task force meetings at settlement, district as well as national levels to ensure strategies are developed, harmonised and implemented in accordance to the MoH and MoWE COVID 19 prevention guidelines within the settlement and neighbouring villages.

UNHCR and OPM in close collaboration with WASH and health partners in the South-west organised and held a coordination meeting in Mbarara on 19<sup>th</sup> and 20<sup>th</sup> May with a focus on the utilization of the VHT approach in the settlements. Partners presented the methodologies of engagement, challenges, lessons learnt and approach strengthening. The approach continues to be implemented with minimal challenges in reporting and is more leaned to health partner (MTI) compared to other partners however, with the established coordination mechanisms, this



continues to be a topic of discussion until VHTs are able to operate as stated in the VHT strategy. From June to date, WASH and public health partners merged and continued to hold monthly meetings which enhanced collaboration and facilitated information sharing. DGD project supported the procurement of a projector, white board and refreshments which have been used to support projection while holding meetings. This process provided for accountability and reduced on chances of duplication of activities and services to PoCs in Kyaka II settlement.

**Activity R1-1.4. Building capacity of 30 WASH partners staff on water treatment, quality monitoring.**

This activity was conducted with funding from other donors. However Oxfam in collaboration with Ministry of health conducted a Community Led Total Sanitation (CLTS) approach training, the training was attended by 19(M-9, F-10) participants from UNHCR, Medical Teams International, Office of the Prime Minister (OPM), Uganda Red Cross Society, Peace Winds Japan (PWJ), OXFAM, Danish Refugee Council, and Kyegegwa District Health department. As part of training practical session, Kijunju village in Mpara sub county – host community was triggered by the participants and 5 follow-ups were conducted with support from Kyegegwa district Health teams, Kijunju East natural leaders and Oxfam PHP team. As a result of Oxfam's intervention, 15 household latrine, 10 squat hole covers, 20 door mats were constructed to prevent disease causing vectors(flies) from entry and exit from the latrine, the mats provided privacy which increased latrine use while also reducing contamination of water by blocking the faecal – oral routes. The combined effect has led to reduction in cases of diarrheal diseases within Kijunju village and this was attributed to knowledge and skills the team acquired during the training.

**Activity R1-1.5. Rehabilitation/Repair of 15 boreholes (hand-pumps) in Kyaka II and hosting villages.**

A total of 15 hand pumps across the settlement and the host community (12 in the settlement and 03 in the host community) were repaired using the borehole spare parts that were procured using DGD funds and supported a total of 7,500 (3,701M, 3,799F) persons of concern with safe water access. This made a cumulative total of 21,000 (10,362M, 10,638F) persons accessing safe water access from all water supply interventions funded by DGD.

**Activity R1-1.6: Procurement and installation of 4 rainwater harvesting tanks.**

This activity was not implemented as planned. The budget for this activity was reallocated to support the construction of Cluster III water pipeline system. This was done due to insufficient funds to complete cluster III pipeline extensions.

**Activity R1-2.1 Construction of 50 latrines for Persons with Special Needs (PSN), across the targeted 3 zones:**

Cumulatively, 276 (Oxfam – 50 and JESE – 226 Units) PSN latrines have been completed with funding from this project, fitted with tippy taps for hand washing and handed over to PSNs for use in the zones of Sweswe with 70 latrines, Kaborogota with 99 latrines, Itambabiniga zone Central village with 30 latrines, Humura with 45 latrines, and Ruchinga with 32 latrines. The additional 226 PSN latrines construction was executed through cash for work approach by Oxfam and JESE with funding from this project. The Cash for work (CfW) modality was used in construction of super structure and pit excavation as well as transportation of the dome shaped slabs. This has contributed to 71% latrine coverage, which resulted to reduction of open defecation practices and hence reduced cases of diarrheal diseases in targeted villages within Kyaka II refugee settlement.

**Activity R1-2.2. Construction of 100 stances of communal latrines and 100 bathing shelters:**

A total of 132 stances of communal latrines and 132 stances of bathing shelters (66 blocks of communal latrines and 66 blocks of bath shelters each 2 stances) were completed in two zones: Byabakora – (92 stances) and Buliti – (40 stances). 5 hand washing facilities were also installed at Byabakora V village to enhance hand washing after latrine use. A total of 2,639 (M-422, F- 951, G – 663, B-603) individuals benefited from the above communal facilities. These communal latrines and bathing shelters were constructed based on needs of the PoCs for instance during reallocation of PoCs and at marketplaces. As a result this increased access to dignified sanitary facilities with ratio being 1:53 against 1:50. This contributed to reduction of open defecation practices and hence reduction of diarrheal diseases in targeted villages within Kyaka II refugee settlement.

### **Activity R1-2.3. Decommissioning of existing communal Latrines (150 blocks):**

Oxfam decommissioned 215 filled up communal (temporary) latrines constructed using ECHO funds and others constructed by other partners in refugee communities of Kakoni, Bwiriza, Byabakora, Mukondo, Itambabiniga and Sweswe. This aided in vector control and mitigated spread of diseases. Due to low cost of decommissioning attributed to availability of a buffer stock of treatment chemicals and use of cash for work approach, thus leading to exceeding the target of 150 blocks.

### **Activity R1-2.4. Establishment and production of dome shaped ferro-cement slabs:**

Oxfam established a dome shaped production site in Sweswe zone where refugee and host community members were trained on dome shaped slab production. The trained community groups were able to produce 1,440 dome shaped slabs which were distributed to 1,440 households across the zones of Bukere, Mukondo A, B, D, Bwiriza and Itambabiniga to support household latrine construction. With the above support, approximately, 7,200 individuals completed construction and are currently using 1,440 household latrines. Out of 1440 slabs produced, 226 slabs supported 226 PSN latrines constructed by JESE through cash for work (CfW) and 1,214 slabs supported construction of 1,214 HH latrines through provision of material support. As a result, the household latrine construction campaigns have led to increased access to dignified sanitary facilities for disposal of human faeces hence general improvement in household latrine coverage from 57% to 71% at settlement level. With support from village health teams (VHTs) through follow ups and supervision, all the 1,440 households have installed tippy taps for hand washing putting the hand washing coverage at 53%<sup>i</sup>.

### **Activity R1-2.5 – Provision sanitation kits, safe water storage and handwashing facilities.**

Oxfam procured and distributed 5,760 poles, 1,440 door shutters, 1,440 tarpaulins, 720 kg (15 bags) of assorted nails were distributed to 1,440 Households. A total of 7,200(M- 1,748, F-2,592, B-1,152, G-1,708) beneficiaries have access to 1,440 dignified sanitary facilities in Kyaka II settlement against the target of 1,500. The overall target couldn't be reached due to additional materials such as door shutters which were never considered initially but recommended by the technical working group. As a result, this has greatly reduced instances of open defecation and diarrheal diseases occurrences. Additionally, 3,900 tippy taps were distributed to 3,900 households benefiting a total of 19,500(M-4,680, F-7,220, B-3,120, G-4,480) in Bukere, Bwiriza, Itambabiniga, Sweswe, and Buliti zones. This has enhanced hand washing practice at the household level for prevention of spread of both diarrheal diseases and COVID-19.

At institutional level, 200 institutional hand washing facilities were distributed: Out of which 85 hand washing facilities at communal latrines, congested water points, markets, health facilities, prisons, police and district headquarters to strengthen hand washing practice as a preventive measure for COVID 19 across the district (14) to MTI a medical partner in Kyaka II, (03) to the briquette production group of Kaborogota, (03) to AIRD, (03) to AWYAD, (03) to AIRD, (15) to host health centres, (10) to KDLG headquarters, (09) to Refugee welfare council (RWC) twos, (26) to Refugee welfare council (RWC) ones, 29 to markets/trading centres to ensure patients, medical staff, visitors, briquettes group

members, vendors, buyers had places for hand washing. This has enhanced hand washing practice at public places to prevent the spread of both diarrheal and COVID 19.

A total of 1,500 drinking water buckets were procured. 1,460 drinking water buckets were distributed to 1,460 households and 40 buckets were delivered to Medical Teams International (MTI) a health partner in Kyaka II settlement for installation in the isolation centres, this enabled vulnerable (Elderly) Covid 19 patient access to safe clean water. In general, the drinking water buckets have greatly improved safe water chain management and this has increased access to safe water among community members hence reducing diseases resulting from consuming unsafe water.

Two (02) wheelbarrows were distributed to two (02) solid waste management groups of Bukere and Bujubuli for management of solid waste collection. This has enhanced environmental hygiene with the Bukere market and Bujubuli base camp.

#### **Activity R1-3.1 – Hold 2 Inception meetings:**

A total of 2 inception meetings were conducted at the district and community level respectively. The district meeting included the representatives from government, United Nations, other operational partners in Kyaka II settlement and refugee welfare council. At community level a number of meetings were conducted to introduce the project to the community, the interventions to be implemented and their role in this project.

#### **Activity R1-3.2 – Behavioural barrier analysis:**

Oxfam utilized ECHO funds to conduct the behaviour barrier analysis, funds for this particular activity were used to conduct a KAP survey in December 2019 and the remaining funds were used to support construction of an aerator.

#### **Activity R1-3.3 – Support 10 Field based community mobilisers and 40 Hygiene Promoters (CHP):**

Oxfam facilitated payments of 255 village health team (VHTs) for two months (November and December 2020), provided them with 255 tool kits (Back bags, personal protective equipment (PPEs), assorted stationaries). VHTs continued to support implementation of activities such as radio talk shows, hygiene promotion campaigns, data collection and distribution of WASH NFIs among others. The VHT structure is permanent thus linked to sustainability plan and have grossly been responsible for community mobilization and sensitization on household latrine construction and use as well as adoption of good hygiene practices. With adjustment in the community engagement and mobilization approach from hygiene promoters to VHTs, there was a saving realized and was realigned to address gaps in relation to Covid-19. Activities such as radio talk shows, boda-boda talk-talk media drives, additional latrines, tippy taps, PPEs as well as engagement of 7(2F, 5M) natural, local leaders and Kyegegwa health team were engaged and facilitated in follow ups in Kijunju, which triggered CLTs village in Mpara sub county.

#### **Activity R1-3.3 – Trainings 100 beneficiaries:**

Oxfam trained a total of 98 (59 M and 39F) hygiene promoters, field-based mobilizers for URCS, Samaritan purse and Oxfam in August 2019. The training was tailored to Cholera and Ebola preparedness and prevention, signs and symptom of cholera and case management (First aid at HH level.) The training was fully facilitated in collaboration with the assistant water officer in charge of sanitation in Kyegegwa district and Oxfam public health promotion team. As a result, there is general improvement in the performance of the community structures and this enhanced effective community engagement, surveillance and reporting. Through the trained structure there is improved adherence to Ministry of Health (MoH) SoPs such as hand washing as well as keeping social distance, which has greatly reduced Covid 19 infection within the settlement.

#### **Activity R1-3.5 – Facilitate formation and trainings of Schools' Health Club:**

A total of 5 school health clubs were formed and trained within the settlement and host community. Each school health club comprised of 30 pupils (Girls – 15 and Boys 15). Oxfam through the Education partner (Fin church Aid), the District Education and Health department trained 10 (6M, 4F) CHAST teachers as TOTs on CHAST methodology. The trained teachers were supported with refreshments and assorted stationaries to train a total of 150 (G-75, B-75) school health members. They were equipped with 350 sets of drawing and writing materials. However, the roll out of the knowledge and skills to other children was greatly affected by COVID 19 lock down as schools were closed. The acquired knowledge among the school health clubs was replicated at community level within their homes as it was observed that some children participated in installation and use of hand washing facilities for hand washing, refilling tippy taps with water. At institutional level most trained schools were observed clean as school health clubs organized school sanitation campaigns regularly.

### **Activity R1-3.6 – Hygiene awareness:**

Oxfam public health promotion team through community WASH structures such as VHTs, Water Users Committees, solid waste management groups conducted 204 sessions of Hygiene promotion campaigns: Hand washing, cleaning up, safe water chain management, home visits through VHTs and these reached out to 56,791(M-13,048, F-14,363, B-15,387, G-13,993) persons in Kaborogota A, B, Mukondo A, B and D, villages. Key messages disseminated included: 1) Information on COVID-19 prevention, 2) proper solid waste management at households, and 3) environmental hygiene – slashing the bush and sweeping around water sources as well as household latrine construction and use campaigns. As a result, the community has improved on safe water handling, constructed and using household latrines, installed and using tippy taps, this has therefore reduced diarrheal disease occurrences among the community members.

### **Activity R1-3.7 – Hygiene promotion public awareness or mass campaign:**

Oxfam PHP Team in collaboration with Kyegegwa district health department and Medical Teams International (MTI) reached out to PoCs through radio talk shows, 37 radio talk shows were conducted on community radio in Kyegegwa. Additionally, 10 Boda-boda community drives through cyclists engaged to disseminate key COVID 19 prevention and hygiene and sanitation promotion messages in the community were conducted. Speakers with pre-recorded COVID 19 prevention, hygiene and sanitation promotion messages were mounted on boda bodas riding through the communities and market centers. All the above aimed at raising awareness among refugees and host communities with messages on COVID-19 Infection, Prevention and Control measures, safe water chain management, solid waste management. From calls received during the talk shows, the community appreciated the support and information being disseminated to keep the community alert and responsive about the spread of COVID-19. Through water source attendants, 60 jerrycan cleaning sessions were conducted at water points. During the campaigns, 14,883 containers were cleaned in Kaborogota A, B, Mukondo A, B, D, Humura, Central and Ruchinga. Overall, the above campaigns and risk communication measures reached to 71,810(M-17,249, F-25,852, B-11,490 G-17,219) in both Refugee and neighboring host communities of Kaborogota, Bwiriza, Buliti, Mukondo, Byabakora, Itambabinia, Bukere, Sweswe, Kakoni, Humura central, Ruchinga, Runyege, Bujuburi, Kihumuro, Ndigito, Kyesembe, Rusese, Rurembo and Nkanja community benefitted from the messages. As a result, there is a great improvement in adherence to covid 19 prevention SOPs set by Ministry of Health, as well as improved safe practice of hygiene and sanitation within Kyaka II.

In additionally, 5 follow-ups were conducted in Kijunju East a CLTS triggered village with support from Kyegegwa district Health Teams, Kijunju East natural leaders and Oxfam PHP team. As a result of Oxfam's intervention, 15 household latrine, 10 squat hole covers, 20 door mats have been made/constructed to prevent disease causing vectors(flies) from entry and exit from the latrine, the mats provided privacy which increased latrine use while also reducing contamination of water by blocking the faecal – oral routes. The combined effect has led to reduction in occurrences of diarrheal diseases

**DR CONGO****- Indicators for the outcomes obtained:****R1.1-OVI - At least 70% of the total population of the targeted beneficiaries have improved access to safe water at a maximum 500m distance**

A la fin du projet, 92 % de la population a accès aux points d'approvisionnement en eau à une distance de 500 m de leur ménage. En effet, 12/12 sources d'eau simples ont été aménagées, et sur 8 forages prévus, 7 forages ont été construits, parmi lesquels 6 sont opérationnels et équipés de pompes manuelles. De plus, 2 adductions (une à Rethy et l'autre à Ndawe) ont été réhabilitées. A Ramogi, la construction d'une adduction est finalisée et utilisée par la communauté bénéficiaire. Il reste à achever 2 forages avec système photovoltaïque.

Activités prévues	Cible	Réalisées	Restant	Taux de réalisation (%)	Commentaire
Évaluation pré-technique et cartographie des points d'eau / sources à développer et réhabiliter	2	2	0	100%	
Levé topographique pour l'adduction de Ramogi	1	1	0	100%	
Etude hydrogéophysiques des forages	8	8	0	100%	
Construction de forages dont 2 avec système photovoltaïque et 6 avec pompe manuelle.	8	7	1	88%	Le restant est en cours de finition
Réhabilitation de 6 forages	4	0	4	0%	Allocation versée sur construction source.
Aménagement de sources d'eau	8	12	0	100%	
Réhabilitation de 2 adductions à Rethy et à Ndawe	2	2	0	100%	
Construction d'une adduction à Ramogi	1	1	0	100%	

**Commentaire :**

- La pose et l'installation du système solaire sont des activités qui restent à faire pour la construction de 2 forages avec système photovoltaïque ;
- Par manque d'opportunité d'intervention, la réhabilitation de 6 forages a été transformée en 4 sources d'eau aménagées

**R.1.2-OVI - Number of people having access to dignified, safe, clean and functional excreta disposal facilities**



En fin projet, 13534 personnes (sur une prévision de 11.000) ont accès à des installations d'évacuation des excréta dignes, sûres, propres et fonctionnelles. En effet, le programme est parvenu à construire 204 latrines d'urgence avec dispositif de lavage des mains, soit 102%, toutes dans la zone de santé d'Angumu, ceci grâce à la bonne gestion des ressources financières mises à sa disposition. Quant aux latrines familiales construites dans la zone de santé de Rethy, 201 sur 200 latrines, soit 100.5%, ont été construites grâce à l'appui et à la sensibilisation des équipes d'Oxfam. Enfin, les bénéficiaires ont bénéficié de 18 dalles de lessive aux nouveaux points d'eau et de 201 kits d'entretien de latrines.

Activités prévues	Cible	Réalisées	Restant	Taux de réalisation (%)	Commentaire
Construction de 200 latrines publiques avec dispositifs de lavage des mains	200	204	-4	102%	
Distribution des 200 kits pour la construction de 200 latrines dans les ménages vulnérables de Rethy	200	201	-1	101%	
Construction de 18 dalles de lessive à de nouveaux points d'eau	18	18	0	100%	

### R1.3-OVI – 80% of beneficiaries are able to identify at least one major hygiene related health risk and cite 2 measures to prevent it.

A la fin du projet, 86% de bénéficiaires peuvent identifier au moins un risque majeur pour la santé lié à l'hygiène et citer 2 mesures pour le prévenir. Ceci a été possible grâce aux différentes formations faites : 23 COGEPE, 200 RECO et leaders communautaires sur la WaSH, 200 membres CTC dans la zone cible, et 20 campagnes de sensibilisation de masse.

Activités prévues	Cible	Réalisées	Restant	Taux de réalisation (%)	Commentaire
Réunion de lancement du projet et réunions communautaires de planification, mise en oeuvre et suivi des activités	2	2	0	100%	
Engagement communautaire pour la création des structures communautaires intégrées (COGEPE)	20	20	0	100%	
Conception et production de matériel d'IEC	1000	1000	0	100%	.
Formation des RECO et leaders communautaires sur la WaSH	200	200	0	100%	
Organisation des activités CTC dans la zone cible	200	200	0	100%	
Distribution des 200 kits NFI WaSH à 200 ménages	200	206	+6	103%	Il y a eu 6 ménages supplémentaires

Organisation des campagnes de sensibilisation de masse	20	20	0	100%	
Formation des COGEP sur la gouvernance de l'eau et maintenance technique	20	20	0	100%	
Distribution des kits d'entretien des latrines familiales et communautaires	200	206	+6	103%	Il y a eu 6 kits supplémentaires
Distribution des kits de gestion environnemental des déchets (Formation des comités de Salubrité)	64	64		100%	

- **Beneficiaries (status + number):**

Sector	Status	# bénéficiaire	Homme	Femme	Garçon	Fille
Water	<b>Total</b>	<b>58195</b>	<b>11383</b>	<b>14805</b>	<b>15387</b>	<b>16620</b>
	IDPS	25606	4865	6658	6914	7169
	Host	32589	6518	8147	8473	9451
Sanitation	<b>Total</b>	<b>13534</b>	<b>2571</b>	<b>3519</b>	<b>3655</b>	<b>3789</b>
	IDPS	6632	1260	1724	1791	1857
	Host	6902	1311	1795	1864	1932
Hygiene promotion	<b>Total</b>	<b>55285</b>	<b>10747</b>	<b>14130</b>	<b>14684</b>	<b>15724</b>
	IDPS	24325	4865	6081	6325	7054
	Host	30960	5882	8049	8359	8670

- **Activities carried out:**

**Activity R1-1.1 pre-technical assessment and mapping of water points / sources to be developed and rehabilitated.**

Les points d'eau réhabilités et construits dans les zones de santé de Rethy et Angumu en territoire de Mahagi pendant la période de la mise en œuvre du projet se trouvent dans le tableau ci-après :

Activités essentielles	Projet prévision	Z.S Rethy		Z.S Angumu	
		Prévue	Atteint	Prévue	Atteint
Forages à construire	6	3	0	3	3
Forages à réhabiliter	6	0	0	6	0
Adduction à réhabiliter	1	1	1	1	1
Adduction à construire	1	0	0	1	1
Sources d'eau à aménager	8	3	3	9	9
Forage avec panneau solaire	2	1	0	1	0

Nous présentons la description des points d'eau mis en place dans les 2 zones de santé ci-dessous :

Zone de santé	Nom ouvrage/site	Type ouvrage	Coordonnées GPS	Observations
Angumu	Kudugena	Source	N: 02° 04' 50.0" E: 031° 07' 06.6" Alt: 1440 m	Fonctionnelle
	Nyatokwa	Source	N: 01° 57' 47.1" E: 031° 00' 04.5" Alt: 761	Fonctionnelle



			m	
	Yabada	Source	N: 02° 04' 50.2" E: 031° 07' 06.1" Alt: 1442 m	Fonctionnelle
	Umbeka 2	Source	N: 01° 57' 47.1" E: 031° 05' 48.3" Alt: 1017m	Fonctionnelle
	Nyaratar	Source	N: 02° 03' 18.1" E: 031° 05' 48.5" Alt: 1011 m	Fonctionnelle
	Nyawano	Source	N: 02° 02' 30.1" E: 031° 03' 54.4" Alt: 942 m	Fonctionnelle
	Njeti	Source	N: 02° 00' 58.5" E: 031° 03' 07.7" Alt: 970 m	Fonctionnelle
	Ngobia	Source	N: 02° 00' 56.7" E: 031° 02' 42.7" Alt: 974 m	Fonctionnelle
	Agbo 2	Source	N: 01°57'47.1" E: 031°00' 04'.5" Alt: 761m	Fonctionnelle
	Ndawe	Adduction	N: 01° 57' 47.2" E: 031° 00' 04.8" Alt: 761m	Fonctionnelle
	Ramogi	Adduction	N 02° 04' 19.47"E 031°07' 29.4"; Alt 1425m	Fonctionnelle
	Kwayakelo	Forage	N 02° 03' 43.4" E 31° 06' 45,7", Alt: 1170 m	Fonctionnelle
	Juparawang	Forage	N 02° 24' 00.2" E 30° 45' 11,5", Alt: 1675 m	Fonctionnelle
	Tegoth	Forage	N 02° 24' 00.2" E 30° 45' 11,5", Alt: 1675 m	Fonctionnelle
	C.S Apala	Forage	N 01° 59' 57.7" E 31° 01' 03,0", Alt: 974 m	Fonctionnelle
Rethy	Rethy	Adduction	N 02°00'22,90" E 30°52'27,20" ALT:2178 m	Fonctionnelle
	Budza	For+SE	N 02°05'15,90" E 30°49'24,60" ALT:2060 m	Fonctionnelle
	Djubate	For+SE	N 02°06'06,20" E 30°46'26,70" ALT:1946 m	Fonctionnelle
	Zali	For+SE	N 02°03'06,00" E 30°49'55,50" ALT: 2128 m	Fonctionnelle

### **Activity R1-1.2. Geophysical surveys and drilling/construction of new wells / boreholes equipped with handpumps**

Les études hydro-géophysiques ont été réalisées sur 8 sites, dont 7 qui ont donné de l'eau. Le rapport a été partagé en période intermédiaire.

### **Activity R1-1.3. Rehabilitation/equipping of 20 existing water supply points (wells, boreholes etc.)**

Les fonds qui étaient destinés à la réhabilitation de 6 forages ont été utilisés dans l'aménagement et la réhabilitation de 4 sources simples dont 2 avec réservoirs. 12 sources ont été aménagées (au lieu de 8) et sont toutes opérationnelles.

### **Activity R1-1.4. Installation of 2 solar pumping systems connected to a water supply network**

Les 2 sites prévus pour la construction de 2 forages équipés de panneaux solaires sont déjà forés dans les zones de santé d'Angumu. Après l'analyse de débit des points d'eau et avec l'accord de la communauté, il a été décidé d'installer le système solaire sur les forages à Apala et à Tegot.

Zone de santé	Nom site	Type ouvrage	Coordonnées GPS	Observations
Angumu	Apala	Forage	N 01° 59' 57.7" E 31° 01' 03.0", Alt: 974 m	
	Thegot	Forage	N 02° 03' 48.4" E 031° 07' 36.8" alt: 1153m	

Compte tenu de la prévalence de l'insécurité dans la zone de Djugu, la mise en place des ouvrages ainsi que le déploiement des matériaux sur terrain a connu un grand retard.

De ce fait, les travaux supplémentaires pour l'installation du système de distribution sont toujours en cours dans les 2 sites cibles. Nous sommes en attente du déploiement de l'entreprise ORFAP qui va installer le système solaire sur les ouvrages.

### Activity R1-1.5: Protection/Rehabilitation of 8 spring sources

Tel que décrit en période intermédiaire, 12 sources ont été réhabilitées/construites dans les 2 zones de santé de Angumu et de Rethy. Les membres de gestion de ces points d'eaux qui ont été formés ont reçu leurs kits de maintenance constitués de la tuyauterie, des accessoires de plomberie et des outils de la gouvernance durable de l'eau. Pour les sources simples, les membres des comités d'eau ont reçu 4 houes, 4 bêches, 4 pioches et 4 brosses dures, 1 seau de 20l et 1 bidon de 20l.

9 sources ont été construites dans la zone de santé de Angumu et 3 dans celle de Rethy, tel que repris dans le tableau suivant :

Zone de santé	Nom Source	# débit (l/s0	Population	Coordonnées GPS
Angumu	Nyawano	0.10	805	N: 02° 02' 30.1" E: 031° 03' 54.4" Alt: 942 m
	Ngobia	0.54	1319	N: 02° 00' 56.7" E: 031° 02' 42.7" Alt: 974 m
	Unjeti	0.10	502	N: 02° 00' 58.5" E: 031° 03' 07.7" Alt: 970 m
	Nyaratar	0.15	467	N: 02° 03' 18.1" E: 031° 05' 48.5" Alt: 1011 m
	Kudugena	0.56	304	N: 02° 04' 50.0" E: 031° 07' 06.6" Alt: 1440 m
	Nyatokwa	0.32	350	N: 01° 57' 47.1" E: 031° 00' 04.5" Alt: 761 m
	Yabada	0.13	477	N: 02° 04' 50.2" E: 031° 07' 06.1" Alt: 1442 m
	Umbaka 2	0.23	3000	N: 01° 57' 47.1" E: 031° 05' 48.3" Alt: 1017m
	Agbo	0.56	289	N: 01° 57' 47.2" E: 031° 00' 04.8" Alt: 761m
Rethy	Baiba	0.41	341	
	Riecodda	0.36	446	
	Mbulu	0.28	498	
<b>Total</b>			<b>8798</b>	

### Activity R1-1.6. Rehabilitation of 1 gravity scheme

Les travaux de réhabilitation d'adduction d'eau de Rethy et la mini-adduction de Ndawe dans les 2 zones de santé sont clôturés et les 2 ouvrages sont fonctionnels à ce jour. Le tableau qui suit montre en détail les changements intervenus sur ces ouvrages :

Adduction de Rethy		Mini-adduction de Ndawe	
Activités réalisées	# nbre	Activités réalisées	# nbre
Captage des émergences	6	Recaptage des émergences	2

Recaptage des sources existant	6	Construction bac d'accumulation	1
Réhabilitation des réservoirs	20	Construction bac de séparation	1
Démolition et reconstruction de 3 réservoirs de 7m3	3	Réhabilitation du réservoir de 30 Mètre cube	1
Construction bac de sédimentation de 20m3	1	Construction des B. F	3
Réhabilitation des B. F	35	Réhabilitation des B. F	1
Construction et raccordement de 5 BF.	5	Construction des colonnes et pose des gaines	16
Raccordement à 500m de bornes fontaines	5		
Réhabilitation des chambre collecteurs	4		

### Activity R1-1.7. Construction of 1 new gravity fed system

Le système d'adduction d'eau gravitaire est déjà opérationnel à Ramogi avec les principales réalisations.

Etapes principales	# réalisé	# prévu	Unité
Débit estimatif avant et après aménagement		2.3	l/s
Captages des émergences de sources	10	10	Source
Construction des bacs collecteurs/décanteurs	4	4	Ouvrage
Creusage des tranchées pour la pose des tuyaux	26	26	Km
Fusion de la tuyauterie	26	26	Km
Construction des colonnes pour gaine des tuyaux	38	40	Colonne
Construction plateforme et montage des tanks	2	2	Tank
Capacité de stockage	115	110	M <sup>3</sup>
Construction des bornes fontaines	13	11	B. F

Les données actualisées sur la population bénéficiaire présentent un chiffre de 20238 personnes bénéficiaires dont 5262 femmes et 6071 filles, ce qui fait une proportion totale de 56% des femmes et filles ayant accès à une source d'eau améliorée.

### Activity R1-1.8. Trainings -Operation and maintenance and water safety plans

La création et la formation de 4 comités de gestion de forages ont été faites dans la zone de santé d'Angumu. Cette formation se base essentiellement sur les notions théoriques et pratiques de la gestion administrative, financière et technique des ouvrages d'eau.

Type ouvrage	Nom ouvrage	Total	Homme	Femme	Commentaires
Forage	Agboro	6	4	2	Formé
	Djubate	6	4	2	Formé
	Mola	11	8	4	Dissout
	Zali	6	4	2	Formé
	Kwayakelo	7	5	2	Formé
	Juparawang	7	5	2	Formé
	Thegot	7	5	2	Formé
	Apala C. S	11	9	2	Formé

**Outcome 1.2 (R1.2): 21.400 beneficiaries have improved safe access to appropriate and sustainable sanitation facilities**

**- Activities Carried out:**

**Activity R1-2.1. Construction of 200 communal / shared households' latrines and with hand washing units**

En zone de santé d'Angumu, un total 206 portes de latrines d'urgence ont été construites : 100 portes dans les communautés d'accueil, 76 portes dans 7 écoles et 30 portes dans le site des déplacés de Gengere. Chaque porte de latrines a été équipée d'un dispositif de lavage des mains. Ci-dessous le tableau détaillant la répartition des personnes atteintes par catégorie des bénéficiaires et par genre.

Secteur	Catégorie	# pers atteint	H	F	G	F
Sanitation	Total	13534	2571	3519	3655	3789
	IDPS	6632	1260	1724	1791	1857
	Host	6902	1311	1795	1864	1932

**Activity R1-2.2 Distribution of 200 latrine construction kits to households**

Les matériaux de construction ont été distribués à 200 ménages vulnérables ciblés dans 7 villages de la zone de santé de Rethy (le détail des matériaux se trouve dans le rapport intermédiaire). Ceci a permis de suivre ces ménages dans la construction des 200 portes de latrines en faveur des communautés d'accueil et déplacées.

**Activity R1-2.3 Construction of 10 laundry slabs at new water points**

18 bacs de lessive sur 18 ont été construits et sont opérationnels dans les villages ayant bénéficié des sources simples. Ils sont ainsi répartis : 5 dans la zone de santé de Rethy et 13 dans celle de Angumu. Les critères de sélection des lieux destinés à la construction des bacs de lessive étaient : la présence de la source d'eau constituant aussi un endroit pour la lessive des habits, les structures sanitaires trop fréquentées, et les structures nécessitant un dispositif pour faciliter les garde-malades à faire la lessive.

Le tableau ci-dessus montre les villages ayant bénéficiés des bacs à lessive aux points d'eau :

No	Village	Bacs de lessive		Observations
		Prévu	Fini	
1	AITE	1	1	
2	JUPULIZA	1	1	
3	JETI	1	1	
4	NGOBIA	1	1	
5	KUDUGENA	1	1	
6	Ndawe	1	1	
7	Pajen	1	1	
8	Yabada	1	1	
9	Budza	1	1	
10	Zali	1	1	
11	Djubate	1	1	
12	Nyatokwa	1	1	
13	C.S Cawa	1	1	
14	Apala	1	1	
15	AWASI	1	1	
16	Nyaratar	1	1	
17	Kpandroma	2	2	

**Activity R1-2.4 Solid Waste management (160 environmental cleaning kits: including wheelbarrow, shovels, rakes, rubbish bins)**

22 comités de salubrité constitués de 88 personnes (dont 40 femmes) ont reçu des formations sur la gestion des déchets solides notamment (1) les techniques de collecte et triage, (2) les modalités pratiques de transport, (3) les méthodes de traitement ou de valorisation des déchets. Chaque comité a reçu à cet effet un kit de collecte des déchets tels que repris dans les paragraphes précédents. Le tableau qui suit répertorie par zone de santé les kits reçus :

Zone de santé	Prévue	Atteint
Angumu	80	32
Rethy	80	32
Total	160	64

**Commentaires :**

Les fonds alloués à cette activité n'ont pas permis d'acheter les kits tels que prévus car certains articles étaient plus chers par rapport à nos prévisions (ex. : Brouettes). Ces fonds ont cependant été utilisés pour la formation des membres des comités de salubrité.

**Outcome 1.3 (R1.3): Increased awareness of appropriate hygiene practices by women, men, girls, and boys among an estimated 46.200 DRC Refugee new arrivals/IDPs and 20.400 host communities' members**

**- Activities carried out:**

**Activity R1-3.1 - Community engagement-through creation of integrated community structures**

En plus des activités intégrées dans les activités Wash rapportées ci-dessus, trois actions de plaidoyer ont été menées par l'équipe de protection pour permettre une bonne mise en oeuvre des activités WASH :

- Premièrement, une mission de négociation pilotée par le médecin chef de zone d'Angumu pour convaincre le chef de chefferie de Wagongo et les leaders de sa communauté de permettre à Oxfam d'amorcer les travaux de captage des sources qui géographiquement sont localisées dans son entité. Les leaders de la chefferie de Mokambo (bénéficiaire de l'eau et ceux de la chefferie de Wagongo (propriétaires des sources d'eau) ont entamé un dialogue qui a abouti à un accord de cession de l'eau par la première partie, moyennant le paiement d'un droit coutumier.
- Ensuite, pour faciliter l'accès aux sources de captage, un plaidoyer a été réalisé par l'équipe protection auprès du chef de groupement de Pajen et de sa communauté pour la réhabilitation du tronçon routier de plus de 5 km entre Pajen et Tilo. Oxfam, à travers son partenaire FECONDE, a mis à la disposition des jeunes qui ont accepté de travailler bénévolement des outils et deux jeux de vareuse.
- Enfin, un troisième plaidoyer a été fait auprès des propriétaires des champs et terres pour permettre le creusage de la tranchée. Ils ont accepté le passage de la tuyauterie dans les champs et les autres ont offert de l'espace pour la construction des bornes fontaines pour la communauté.

### **Activity R1-3.2 - Set up project inception meetings with stake holders including MOU with BCZ for collaboration and supervision of implementation**

Cinq réunions communautaires ont été organisées pour la revue des plans d'action communautaires, le plan d'accélération des activités de construction des latrines d'accompagnement, et la sensibilisation sur le recouvrement des coûts de l'eau. Pour ce faire, 187 personnes (dont 77 femmes) y ont pris part. Voir plus de détail dans le tableau ci-après :

Zone de santé	Homme	Femme	Total
Angumu	78	57	135
Rethy	27	20	47
Total	105	77	182

2 MoU ont été signés entre les Zones de santé de Rethy et Angumu afin de faciliter notre collaboration et ainsi faciliter la mise en œuvre des activités sur terrain. Ces MoU prenaient en compte la répartition des responsabilités entre Oxfam et les deux zones de santé d'intervention, les modalités pratiques de collaboration et supervision, ainsi que l'exécution des activités et la stratégie de sortie afin de permettre aux communautés bénéficiaires de s'approprier et gérer durablement les ouvrages WaSH mis en place.

### **Activity R1-3.3 – Design and production of IEC Materials**

En plus des matériaux IEC produits et installés dans les différentes zones d'intervention, 12 panneaux de sensibilisation portant un message sur le Covid-19, les bonnes pratiques d'hygiène, la maintenance des ouvrages d'eau et la réalisation des activités ont été fixés en zone de santé d'Angumu et Rethy sur les différents villages de mise en œuvre :

N0	Village	Item	Quantité	Unité
1	Gengere	Panneau	1	Pce
2	Ramogi	Panneau	4	Pce
3	Awasi	Panneau	1	Pce
4	Apala	Panneau	1	Pce
	Pajen	Panneau	1	
	Zali	Panneau	1	
	Mola	Panneau	1	

	Aruda	Panneau	1	
	Aboro	Panneau	1	
Total			12	Pce

### Activity R1-3.4 – Training of RECOs (CHVs) in the territories for Hygiene promotion

Des séances de remise à niveau des membres des RECOs sur les mesures de prévention Covid-19 ont été faites au cours de la période de mise en œuvre du projet dans les zones de santé de Angumu et Rethy. 160 RECOs (dont 34 femmes) ont participé à cette formation tel que détaillé dans le tableau suivant :

Zone de santé	Homme	Femme	Total
Angumu	91	15	106
Rethy	35	19	54
<b>Total</b>	<b>126</b>	<b>34</b>	<b>160</b>

### Activity R1-3.5 - Child to child- monitors of hygiene in the targeted areas

Deux formations des moniteurs CTC ont été réalisées dans les villages cibles. Au total, 190 enfants CTC ont été formés sur les notions théoriques et pratiques de promotion EHA, tel que détaillé dans le tableau suivant :

Zone de santé	Fille	Garçon	Total
Angumu	40	40	80
Rethy	44	66	110
<b>Total</b>	<b>84</b>	<b>106</b>	<b>190</b>

### Activity R1-3.6 - Distribution of Hygiene kits to 200 households

206 kits d'entretien des latrines ont été distribués aux ménages bénéficiaires dans chaque zone. Chaque kit était constitué de 1 bidon plastique de 20l, 1 seau plastique de 20l, 1 bassin plastique de 15l, 4 barres de savon, 1 jug et 2 gobelets en plastique.

Ceci a permis d'améliorer la propreté des installations sanitaires afin de limiter la prolifération des vecteurs des maladies hydriques et liés à l'insalubrité. Le tableau ci-dessous trace la répartition par genre des bénéficiaires atteints :

Secteur	Catégorie	# pers atteint	H	F	G	F
Sanitation	Total	13534	2571	3519	3655	3789
	IDPS	6632	1260	1724	1791	1857
	Host	6902	1311	1795	1864	1932

### Activity R1-3.7 - Mass campaigns on the washing of hands and the correct use of latrines as well as the mosquito net

La campagne de nettoyage de jerrican a été organisée simultanément à Kpandroma et Ramogi. Cette activité a été combinée avec le dénombrement de la fréquentation de ménages au point d'eau. La campagne avait pour objectif de sensibiliser la communauté au respect de la chaîne de l'eau qui consiste à puiser de l'eau dans un récipient propre et bien couvert. Cette activité a permis de connaître le nombre de ménage par point d'eau. Le nombre de récipients lavés par site se trouve ci-dessous :

Village	Catégorie point d'eau		Récipient nettoyé				
	Source	B. F	20l	10l	5l	3l	Total



Kpandroma	0	35	17682	3432	1987	1718	24819
Angumu	10	10	4972	1540	851	528	7891
Total	10	45	22654	4972	2838	2246	32710

Concernant le dénombrement, 10071 ménages ont été recensés et 524 mètres cube d'eau puisés dans des récipients propres. Plus de détails dans le tableau ci-après :

Village	# ménage		Total ménage	Quantité d'eau puisée
	Déplacé	Hôte		
Kpandroma	1682	4125	5807	403049
Angumu	1276	2988	4264	120679
Total	2958	7113	10071	523728

Au courant de la même période, les Reco et les enfants CTC ont sensibilisé 6882 personnes sur les thèmes comme : (1) le cycle sain de l'eau, (2) les 5 moments clés de lavage des mains, (3) l'utilisation correcte des latrines, et (4) la gestion rationnelle des déchets. 26 séances de sensibilisation sous forme de réunions et de visites à domicile après l'école et autres activités ont permis d'atteindre ce nombre dont les détails sont résumés dans le tableau suivant :

Zone de sante	Homme	Femme	Garçon	Fille	Total
Angumu	725	1265	1203	1050	<b>4243</b>
Rethy	378	603	826	832	<b>2639</b>
<b>Total</b>	<b>1103</b>	<b>1868</b>	<b>2029</b>	<b>1882</b>	<b>6882</b>

### **Activity R1-3.8 – Training of water committees and maintenance of the adductions to be developed**

65 membres des comités de gestion d'eau des adductions d'eau de Angumu, Ndawe et Rethy (parmi lesquels 18 femmes) ont renforcé leurs capacités sur la gestion administrative et financière ainsi que sur le plan opérationnel de maintenance des ouvrages d'eau. Plus de détail sur leur répartition par ouvrage d'eau dans le tableau qui suit :

# ouvrage d'eau	Total	Homme	Femme
Ramogi	20	15	5
Ndawe	15	12	3
Rethy	20	14	6
Total	65	41	14

Les thématiques de la formation ont été axés essentiellement sur (1) les stratégies de mobilisation de fonds, (2) l'élaboration des plans de dépenses et de trésorerie, (3) la gestion administrative d'un comité d'eau, (4) les rôles et responsabilités des membres, (5) la gestion de conflit au sein du comité d'eau, (6) le plan de gestion et de maintenance d'un réseau d'adduction d'eau et (7) les calculs de l'amortissement et renouvellement d'un ouvrage d'eau.

Type ouvrage	Nom ouvrage	Total	Homme	Femme	Commentaires
Forage	Agboro	6	4	2	Formé
	Djubate	6	4	2	Formé
	Mola	11	8	4	Dissout
	Zali	6	4	2	Formé
	Kwayakelo	7	5	2	Formé
	Juparawang	7	5	2	Formé
	Thegot	7	5	2	Formé
	Apala C. S	11	9	2	Formé

### **Activity R1-3.9 – Training of local authorities on their roles and responsibilities in WASH activities to be carried out**

En marge de la formation sur les notions et pratiques de promotion de la santé publique et les méthodes de sensibilisation, les autorités locales des deux zones de santé ont bénéficié de la formation sur les notions de prévention sur la pandémie au corona virus. Les sessions de formation ont tourné autour de (1) symptômes de Covid19, (2) mesures de prévention et (3) stratégie de sensibilisation et engagement communautaire. Plus de détail dans le tableau suivant :

Zone de santé	Homme	Femme	Total
Angumu	50	7	<b>57</b>
Rethy	44	6	<b>50</b>
<b>Total</b>	<b>94</b>	<b>13</b>	<b>107</b>

### **Activity R1-3.10 – Distribution of family latrine maintenance kits (200 households)**

200 kits d'entretien de latrines ont été distribués aux 200 ménages qui ont bénéficié de l'accompagnement d'Oxfam dans la construction des 200 latrines de résilience.

Dans le cadre de la prévention des maladies EHA par la promotion de lavage des mains, des kits supplémentaires, dont 62 seaux de 20 litres avec robinets, ont été distribués dans 4 écoles primaires de Ramogi. Ci-dessous, le tableau détaillant les données de l'activités :

N0	LIEU	Libelle	Quantité	Unité
1	Gengere 3	Seau de 20l	30	Pièces
2	EP Avogira	Seau de 20l	121	Pièces
3	EP Utyep	Seau de 20l	12	Pièces
4	EP Ybathe	Seau de 20l	08	Pièces
Total			<b>62</b>	Pieces

### **Activity R1-3.11 - Distribution of Environmental waste management kits (160 households)**

Les membres des communautés ont reçu 64 kits de gestion de l'environnement dans chaque zone de santé, notamment à Angumu (32) et a Rethy (32). La composition de ceux-ci a été détaillée dans le rapport intermédiaire.

**Outcome 2 (R.2) : Improved access and utilisation of food for 10.000 people in DRC and equal Incomes Generating Activities for 7.000 beneficiaries in UGA**

**UGANDA**

**- Beneficiaries (status + number):**

	Status	Number of beneficiaries	Males	Females	Boys	Girls	Comments
DRC	Total	10,000	5670	6480	6,750	8,100	
	IDPs / Returnees	7,000	3969	4536	4,725	5,670	70%
	Hosts	3,000	1,701	1,944	2,025	2,430	30%
UGA	Total	7,000	1,120	1,470	2,450	1,960	1,400 households
	Refugees	4,000	640	840	1,400	1,120	800 households' refugees
	Hosts	3,000	480	630	1,050	840	600 households hosts

**- Indicators for this outcome:**

R2.1-OVI – 10,000 beneficiaries in DRC have an increased access to and better utilisation of food.

R2.1 – OVI – 7,000 beneficiaries in UGA have improved access to stable incomes generating opportunities.

**- Indicators for the outcomes obtained**

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**R2.1 – OVI – 7,000 beneficiaries in UGA have improved access to stable incomes generating opportunities.**

14,568 beneficiaries (2,913 households) have been supported with interventions that improve access to their income generation opportunities. The initial planned number of beneficiaries was exceeded under support to households through training in efficient energy saving stoves, additional 400 households were supported due to high demand from the community. The balance which had been realized from the initial target of 1400 households was used to pay trainer of trainees (TOTs) incentives for additional 02 months to be able to meet the community demands. Cash for work activities which involved construction of PSN latrines, excavation of trenches, dust pits and establishment of woodlots targeted individuals from different households thereby opening up opportunities for more beneficiaries. Different individuals were engaged in these works to ensure income is extended to more households.

**- Beneficiaries (status + number)**

	Status	Number of beneficiaries	Males	Females	Boys	Girls	Comments
UGA	Total	14,568	4,884	6,548	1,540	1,596	2,913 households
	Refugees	12,572	4,226	5,210	1,540	1,596	2514 households refugees

	Hosts	1,996	658	1,338	0	0	399 households in the Hosts
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- **Activities carried out:**

**Activity R2.1 – Support to backyard gardening (seeds/tools).**

During the first round of distribution 1540 Refugee Households were trained on basic agronomic practices and supported with assorted vegetables seeds. Each household received 25 grams of onions, eggplant, tomatoes & cabbage. All the 1540 households consumed the vegetables especially onions, eggplant & cabbages but tomatoes were affected by diseases. Second round of distribution was conducted in March 2020 during the first rain season to 1400 households, each received one hand hoe and watering can. This distribution was done together with assorted vegetable seeds (carrots, sukumawiki, onions and green paper) on 13<sup>th</sup> March 2020. During the distributions, more emphasis was put on encouraging smart climate agricultural practices like planting crops in ridges which helps in maintaining soil moisture, use of organic means of pest and disease controls. According to the post distribution monitoring reports, most of the vegetables were planted and consumed. Some surplus were sold by the household to earn income. About 400 households realized income ranging from 20,000 to 80,000UGX from sale of surplus carrots and onions. This helped with additional diet like meat, silver fish, and other household items like purchase of salt, sugar, charcoal for cooking. Hand hoes were used to clear land for planting of the assorted vegetables and some beneficiaries also used their hoes to cultivate in other gardens and were paid either in monetary value or given physical items.

**Activity R2.2 – Skills training & development in apprenticeship skills (100 beneficiaries):**

Of the 87 vocational skills applicants who were shortlisted, 63 youth (27F, 36M) underwent skills training while 24 youth were not taken on due to financial constraints. The 63 youth were trained from 11 centers managed by local artisans. They were trained on (05 carpentry, 11 salon and hair dressing, 14 motorcycle repair, 01 bricklaying and concrete practice, and 32 tailoring). Payment for all the local artisans was made and youth were supported with startup kits to establish their own businesses. The local artisans who trained the youth also registered increase in machines and items at their workshops and high demand of their services by other partners and individual youth, this is attributed to payments by Oxfam for training youth. The post intervention monitoring conducted found out that some of the youth had started businesses in the fields they were trained on, others still kept the startup kits in the household stating the lack of capital to rent space for setting up their businesses.

There was a mismatch on targets between the proposal narrative and the budget, the proposal stated 100 beneficiaries (50 for first year and 50 second year) and the actual budget stated 87 beneficiaries: *refer to the project budget*. There was a challenge of few vocational skills training centres within Kyaka II settlement with few courses available and yet very costly, as a result, use of local Artisans was recommended by the livelihoods sector working groups to address this challenge.

**Activity R2: Support to Income Generating Activities – IGA (30 beneficiaries):**

Of the 142 candidates who applied for small business support, 30 (21 Refugees, 9 host community) individuals were selected, and each supported with 500,000Ugx. Disbursement of cash through mobile money transfer was conducted in the first week of July 2020 to the beneficiaries (16F, 14M), each received 500,000Ugx for establishment of businesses. Continuous monitoring of the businesses established by the beneficiaries was done, and findings showed, that the businesses established included tailoring, salon, buying and selling of agricultural produce like maize, piggery, poultry, shoe and cloth selling. Majority of the businesses registered profits and most of the money obtained from the businesses was used to increase stock and

enable beneficiaries buy home basic items and food for their families thus leading to improved standards of living. A post distribution monitoring conducted showed that this intervention has improved access to stable incomes generating opportunities for these beneficiaries and their households.

### **Activity R2.3 – Support resilience to fuel wood through cash for planting tree:**

Following successful establishment of the 1.5 hectares of woodlot with indigenous species of *Grevillea*, *Maesopsis*, *Azadirachta* African and *Terminalia* in the host sub counties of Mpara (0.5Ha), Ruyonza (0.5Ha) and Kabweza(0.5Ha), JESE continued to support maintenance and management of the activities. Using the cash for work approach, 45 persons representing PSN/Persons of Concern households, were identified<sup>25</sup> and contracted to slash and spot weed seedlings in a 1.5Ha woodlot, as a result 1.5 hectares of the established was maintained and spot weeded. Around 50 seedlings were added where there were gaps of the dried seedlings. The Sub County and the local leaders (LC1s and the Parish chiefs) participated and played a supervisory role. As a recommendation from the Sub County and local leaders to protect the woodlot from destruction by grazing animals, JESE supported the establishment of a barrier using shrubs and sticks mainly for the, Kabweza, Mpara, and Ruyonza sub counties' woodlot's.

For effective routine management and maintenance, 3 village level management committees/structures were formed to take on routine monitoring and reporting of any management aspect of the woodlot to the sub county and district authorities for correction. This has enhanced the ownership of the woodlot among the local communities thus increasing chances of survival of the planted seedlings in the woodlot.

The draft woodlot management and sustainability plan was developed, it has defined the local /adjacent communities' roles and responsibilities as well as future benefits that will accrue from their participation in the management and maintenance of the woodlot. The management and sustainability plan is further looked at to support the management of the other existing woodlots on both private and public land within the sub county, through transfer and application of knowledge, skills and practices. More so it will inform resource mobilisation, mainly budget allocation at sub county level and other interested parties with environment restoration lens/objective. For enhanced environment restoration in the settlement, an on-farm agroforestry approach using selected fruit tree i.e. 4200 seedlings i.e. 1400 Mangoes, 1400 Jack fruits and 1400 Citrus, 1400 households were provided with fruit tree seedlings, each received 3 seedlings of the different varieties<sup>26</sup>.

### **Activity R2.4 – Distribution of 200 energy saving stoves (including monitoring):**

200 energy saving stoves were procured and distributed to the identified and registered persons with special needs.

Training of trainers (TOTs), 20 persons (11 females, 9 males) were trained on the construction of the Energy efficiency cook stoves (*Lorena*). All the ToTs were from the refugees' community as other partners targeted the host community for the same intervention. 20 assorted items /tools for construction of the energy saving stoves were procured and distributed to 20 ToTs in December 2019.1800 households were reached with Lorena stoves training and construction against the target of 1400 households. More 06 youths were trained by Tots to become trainers and their work was closely monitored by EFSVL staff to ensure that the end products conform to the standards. Findings from the monitoring showed that the households prefer using the Lorena

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<sup>25</sup> This was done with the support of the sub county Community development officer and Area LC1s as well as parish chiefs.

<sup>26</sup> Jack fruit, Mango, and Oranges/Tangerines

stoves as opposed to the traditional three-stones for cooking, this has greatly reduced per capita consumption of wood fuel and subsequently enhanced environmental conservation.

### **Activity R2.5 – Cash for work on infrastructure projects (including monitoring):**

To improve environmental hygiene and cleanliness in schools and health centres, JESE under cash for work activities supported the excavation of rubbish pits in 13<sup>27</sup> learning centres (11 primary schools, 1 secondary school and 1 technical institute) and 11<sup>28</sup> Health centres were supported with rubbish pits, the rubbish pits were officially handed over to the schools and hospital management for use. Agreement was made with the institution management of the institutions to ensure the rubbish pits are fenced to prevent children, animal from accidents but also to avoid backfilling of the pits in the process of grazing/playing around the pits. During routine monitoring by Oxfam and JESE, it was found out that schools practiced proper waste disposal leading to improved hygiene and sanitation

Under Pit latrine infrastructure support for Persons of Concerns, 219 PSN households (1,095 persons) have access to proper places for disposal of human excreta (*Kaborogota having a total of 57 latrines, Itambabiniga zone Central village with 30 latrines, Humura with 45 latrines, Ruchinga with 32 latrines, Sweswe with 62 latrines*). The 219 latrines are out of the targeted 1400 latrines in the project document. The variation was brought about by other competing demands which included cluster III water trench excavation, institutional rubbish pits excavation, and labor for casting 400 doom shaped slabs.

Under Cluster III water trench excavation, the project supported the trench excavation, pipe laying and backfilling of 13,511.5 meters of cluster III water extension lines in the zones of: *Sweswe Kitonzi 2591m, Itambabiniga Humura 1917.5m, Kaborogota 1120m, Sweswe dam 11 2156m, Kinoni 1700m, Kanyegaramire 1842m, Central 1495m and Nyaburungi 690m*. The water trench excavation was done under cash for work arrangements where PSNs were mobilized, sensitized/trained with the support of OXFAM engineering team on the qualities and needs of the cluster III water excavation<sup>29</sup> and the trench excavation mapping. PSNs were further registered according to willingness to work, contracted and equipped with assorted tools like spades, hoes, strings, pickaxes, pangs among others to enable PSNs work efficiently. With the 13,511.5 Meters extension of cluster III water lines, 27 functional tap stands have been installed, which has greatly improved the target household access to water needs of 15 liters per person per day<sup>30</sup>. Households' hygiene/cleanliness like hand/body washing, clothes and household utensil washing has also greatly improved and most importantly access to clean and safe water for drinking.

The cash for work initiative provided opportunity for improvement of various WASH infrastructure through access to latrines and enabled the PSNs meet their basic needs (food and nonfood) through earning cash from provision of labor. Through the after-post payment monitoring, the cash for work beneficiaries have been mentored and coached in the basics of Income generating activities identification, selection and management. This has harnessed their investment and suitability of the IGAs being promoted.

- **Activity R2.6 – Post distribution monitoring:**

Post distribution monitoring exercise was conducted for the assorted seeds, cash for work tools, beneficiaries supported to access both the Lorena and portable energy saving stoves, income generating activities, skills training & development in apprenticeship skills while adhering to the COVID 19 restrictions. This was aimed at collecting feedback from the beneficiaries to help

<sup>27</sup> Wisdom, Bujubuli, Byabakora, Mukondo, Kabrogota, Sweswe, Itababiniga, Angels Care, Bukere, Bwiriza, Kyamagambo, Sweswe Vocational, and Bujubuli SS.

<sup>28</sup> Bujubuli H/C(3 pits), Mukondo, Bukere, Kaborogota, Sweswe, Itababiniga, Kakoni, Bwiriza, Byabakola

<sup>29</sup> 1 meter depth, 0.5Metres width, Flat bottom and Straightness of the trench to allow efficiency water flow

<sup>30</sup> Source; OXFAM water supply scheme of emergencies content.



improve the subsequent distribution exercises but also to provide a wider spectrum of Oxfam's quality programming, implementations and learning experiences.

**Outcome 2 (R.3) : Improved access and utilisation of food for 10.000 people in DRC and equal Incomes Generating Activities for 7.000 beneficiaries in UGA**

**DR CONGO**

**- Indicators for the outcomes obtained**

**R2.1-OVI** – 10,000 beneficiaries in DRC have an increased access to and better utilisation of food.

Pour les 3 cycles de distribution du cash, 10,349 personnes (soit 1800 ménages) ont été servis en cash pour nourriture et revenus appropriés, et ont accès à la nourriture et assurent une meilleure utilisation de la nourriture au sein du ménage. Le résultat des enquêtes finales faites montre que près de ¾ (soit 74%) des ménages assistés ont un score de consommation alimentaire acceptable, alors qu'il était de 73 % lors de l'évaluation à mi-parcours. De plus, seulement 18 % de la population possédait un SCA acceptable pendant l'évaluation initiale, ce qui prouve que l'assistance en cash a répondu aux besoins alimentaires de la communauté.

Il convient de noter que, au vu de la capacité insuffisante de l'assistance en cash, seuls 4 villages (Senda, Ndawe, Pamothe et Djupugolo II) dans la chefferie de Mokambo ont été assistés en cash et ce ne sont que ces villages qui présentent un score alimentaire acceptable.

**- Beneficiaries (status + number)**

Au total 1800 ménages bénéficiaires représentant 10,349 personnes ont été identifiés dans les villages de Senda, Pamothe, Ndawe et Juugolo2 en zone de santé de Angumu, territoire de Mahagi. Le tableau suivant présente en détails le statut des bénéficiaires :

Localités	Nombre ménages bénéficiaires		Nombre personnes bénéficiaires	Nombre désagréé de personnes par sexe				Status ménages	
	Homm es	Femmes		Garçons	Filles	Hommes	Femmes	IDPs/ Retournés/ Rapatriés	Familles d'accueil et Autochtones
Djupugolo 2	90	160	1461	513	421	254	273	242	8
Ndawe	97	288	2274	777	682	394	421	60	325
Pamothe	203	460	3751	1290	1059	693	709	553	110
Senda	136	366	2863	968	859	478	558	398	104
S/Total	526	1274		3548	3021	1819	1961	1253	547
Total	1800		10349	10349				1800	

**- Activities carried out**

Activités prévues	Cible	Réalisées	Restant	Taux de réalisation (%)	Commentaire
Évaluation rapide du marché et des besoins	2	2	0	100%	
Sensibilisation de la communauté et identification des bénéficiaires en coordination avec les comités locaux sur la base de critères définis conjointement	4	4	0	100%	
Mise en place et suivi d'un système de responsabilisation	2	2	0	100%	
Distribution de nourriture pour 1800 ménages	1800	1800	0	100%	
Campagnes de sensibilisation de la communauté sur la diversité alimentaire	4	4	0	100%	

### Activity R2.1 - Rapid market and needs assessment

L'étude de marché a été faite dans les deux territoires de Mahagi et de Djugu afin d'évaluer la capacité des marchés ainsi que le potentiel des acteurs. La disponibilité des produits alimentaires et non-alimentaires sur les marchés locaux ainsi que les capacités financières de celles-ci ont aussi été évaluées. 5 marchés opérationnels pour les 2 territoires ont été évalués : Kpandroma centre, Bala, Ndrele, Ramogi centre et Mahagi centre.

#### Étude de faisabilité

Les localités de Djupugolo2, Senda, Ndawe et Pamoth ont été ciblées comme villages pouvant bénéficier de l'assistance en sécurité alimentaire. Ce sont des localités avec un grand nombre de ménages qui ont accueilli des personnes déplacées, des rapatriés et des rapatriés d'Ouganda n'ayant pas reçu d'aide.

### Activity R2.2 – Community awareness and beneficiary identification in coordination with local committees based on jointly established criteria

Des ateliers de lancement et des assemblées générales ont été organisées dans chaque village ciblé par le projet. Les membres des comités de facilitation au ciblage des bénéficiaires ont été élus au niveau communautaire pendant l'assemblée générale, et représentaient 15 membres par localité. La répartition est la suivante :

- Ndawe: 9 Hommes, 6 Femmes
- Senda: 11 Hommes, 4 Femmes
- Pamoth: 8 Hommes, 7 Femmes
- Djupugolo: 7 Hommes, 8 Femmes

Ces comités sont constitués des déplacés, familles d'accueil, retournés et autorités locales. Ils sont choisis sur base de leur connaissance du milieu, leur comportement, leur sagesse et acceptation locale, leur honnêteté, et leur capacité à travailler bénévolement pour la communauté.

Les critères de ciblage des bénéficiaires sont approuvés par les membres présents de toutes les couches sociales (déplacés, retournés, résidents, rapatriés...). Ces membres du comité de facilitation accompagnent l'équipe Oxfam. A la fin de chaque activité, les représentants de la communauté et le personnel d'Oxfam présents sur les sites signent le procès-verbal.

Des cartes ID Oxfam sont distribuées à chaque ménage en signant une liste de réception de ce document.

### Activity R2.3 –Establishment and monitoring of a system of accountability

Oxfam a organisé des sessions avec les membres de la communauté des villages de Senda, Pamoth, Ndawe et Djupugolo<sup>2</sup> pour présenter le projet, les critères de sélection de la zone d'intervention, la durée de l'action, la modalité d'interventions en sécurité alimentaire, WASH, protection à réaliser, etc. Les membres de la communauté sont les représentants des déplacés, des résidents et des retournés, et sont choisis pendant les assemblées générales afin de soutenir les activités du projet.

Des consultations communautaires sont menées au sein de la communauté afin de déterminer les mécanismes de partage et de retour de l'information : des boîtes à idées ont été mises en place pour recueillir les plaintes et les retours de la communauté. Ainsi, quatre comités de gestion des plaintes ont été créés et formés, avec un total de 20 personnes. Chaque comité est constitué de 5 personnes, dont 3 femmes et 2 hommes.

Des séances de sensibilisation ont été faites auprès des autorités locales, des leaders communautaires et des bénéficiaires avant, pendant et après la distribution de cash et analyse des risques liés à la distribution :

#### **Activity R2.4 – Cash distribution for food for 1.800 households**

2 cycles de distribution d'argent ont été effectués par la TMB (Trust Merchant Bank) en collaboration avec le personnel d'Oxfam et des représentants des communautés locales, des comités locaux de ciblage et des comités de gestion des plaintes dans les 4 localités de Pamoth, Senda, Ndawe et Djupugolo 2. Elle a eu lieu du 15 au 17 mai 2020. La deuxième distribution a eu lieu du 21 au 23 mai 2020.

Chaque ménage ciblé a reçu l'équivalent en francs congolais de 60 dollars américains par cycle de distribution. Le tableau suivant montre le nombre des représentants :

Localités	Nombre des représentants des ménages bénéficiaires par sexe	
	Hommes	Femmes
Djupugolo 2	90	160
Ndawe	97	288
Pamoth	203	460
Senda	136	366
S/Total	526	1274
Total	1800	

#### **Activity R2.5 - Community awareness campaigns on dietary diversity**

Au total 8 animateurs communautaires dont 2 par localité ont été identifiés et formés sur la diversité alimentaire et l'utilisation afin d'assurer la sensibilisation au sein de chaque communauté.

Deux thèmes ont été développés lors des sessions de formation :

- Allaitement exclusif des enfants de 0 à 6 mois
- Sevrage et alimentation complémentaire des enfants et des nourrissons.

#### **Activity R2.6 - Post-distribution monitoring**

Les différents focus group, les entretiens organisés et constats observés lors du Post-distribution monitoring, montrent que la majorité des ménages prennent au moins 2 repas par jour. L'activité

a été menée d'une manière sécurisée, bien que les sites de distribution ne soient pas toujours proches de la communauté. Ceci étant dû au manque d'espace pour accueillir beaucoup de gens tout en respectant les mesures de distanciation visant à limiter les risques de contagion de la pandémie coronavirus.

Avec cette première distribution, une grande partie de la population a pu se procurer des aliments diversifiés, ce qui a contribué à la diminution de l'insécurité alimentaire. Cette activité a permis à ce que les ménages assistés puissent diminuer les stratégies négatives pour leur survie, en améliorant le nombre de repas pris par jour. Les 2 distributions ont aussi aidé les ménages qui ont été victimes des inondations à se procurer un lopin de terre et à y construire des abris.

92% des bénéficiaires trouvent que le montant reçu a été conforme à celui attendu. Les 8% d'insatisfaction s'expliquent par le fait qu'on a enregistré un montant manquant de 395.6 dollars américains aux 2 cycles de distribution du cash. Ce montant n'a pas pu être remis aux bénéficiaires par manque de petites coupures de francs congolais par la banque. Autrement dit, il manquait 400 FC (Franc Congolais) soit 0.22 dollars américains à chaque bénéficiaire pour les 2 cycles de distribution. Toutefois, pour des raisons de redevabilité, cette somme a été ajoutée à la somme de 60 dollars américains remise au 3<sup>e</sup> cycle de distribution. Lors du troisième cycle, chaque ménage a reçu 60 dollars américains plus les 400 FC restant des 2 premiers cycles de distribution.

Cette assistance a renforcé les capacités locales à 47%. Une des causes identifiées par les bénéficiaires pour ce pourcentage est liée à l'inflation et la dépréciation du Franc congolais après les distributions du cash. En effet, ceci est dû au fait que le cash était distribué en franc congolais alors que dans la zone c'est le Shillings Ougandais qui est la principale monnaie utilisée. Les bénéficiaires ont donc été obligés de chercher les Shillings auprès des échangeurs de monnaie, qui ont haussé les prix. La crise sanitaire jouait un rôle sur la distribution, notamment sur le circuit d'approvisionnement des marchés locaux et la fermeture des frontières en Ouganda. De manière générale, la distribution a été réalisée en sécurité, en respectant le principe humanitaire de ne pas nuire et le respect des principes édictés par le gouvernement congolais des gestes barrières contre la COVID-19. La distribution a également été sensible au genre. En effet, l'égalité des droits, des responsabilités et des opportunités entre les genres en prenant en considération les différents intérêts, besoins et priorités et en reconnaissant la diversité des différents groupes de femmes et d'hommes a été prise en compte pendant la distribution. Des femmes et des hommes étaient parmi les enquêteurs, les journaliers au site de distribution, les membres du bureau du comité de gestion des plaintes installé dans le site de distribution ainsi que le personnel chargé de la sensibilisation sur les bonnes pratiques alimentaires.

De même, les bénéficiaires ont été sensibilisés sur différentes thématiques de lutte contre la malnutrition ainsi que la lutte contre la COVID – 19. Enfin, les mécanismes de gestion de plaintes par la population bénéficiaire étaient peu connus avant le Monitoring Post-Distribution.

Les enquêtes post-distribution ont montré que l'assistance, pour les 2 cycles de distribution, était constituée du cash d'une valeur de 120\$ par ménage soit 60\$/ménage/cycle.

**Outcome 3 (R.3) : 66,600 women and men in target communities are better able to identify, prevent, mitigate and respond to protection threats**

## UGANDA

### - Indicators for this outcome:

R3.1-OVI – 50% of women and men in target areas who are able to identify at least two protection risks and give ideas on how to mitigate them

R3.2-50% of women and men in target areas who are able to name three referral services and explain how to access them

- **Indicators for the outcomes obtained:**

**R3.1-OVI** – 50% of women and men in target areas who are able to identify at least two protection risks and give ideas on how to mitigate them.

**R3.2-OVI**- 50% of women and men in target areas who are able to name three referral services and explain how to access them.

- **Beneficiaries (status + number):**

	Status	Number of beneficiaries	Males	Females	Boys	Girls	Comments
UGA	Total	19,812	4,174	5,154	5,821	4,663	
	Refugees	1,4189	3,252	3,867	3,923	3,147	These included new arrivals and old caseload
	Hosts	5,623	939	1,270	1,898	1,516	

- **Activities carried out:**

**Activity R3.1 Establishment and strengthening of 10 Gender and Protection Committees and Women Own Forum:**

Eleven (11) Gender and Protection committees were established and reinvigorated in zones of Kaborogota, Sweswe, Kakoni, Bukere, Bwiriza, Mukondo C with a total number of 243 (198Female, 45Male) members. They were trained on their roles and responsibilities. These committees work hand in hand with other existing local structures including Refugee Welfare Council (RWC) and Local Council (LC). Existing structures groups were formed along the existing community structures. Also identified 07 women and 03 men Own I groups with the aim of disseminating information related to SGBV, women and girl rights and referrals. They have also been trained on peace building, human rights, refugee law and the referral pathway. This enabled the established forums to conduct meetings addressing the different sources of tensions and conflict in the community and generate action points to address these issues. The groups have played key role in supporting the community in this time of COVID 19 because staff have been having limited interaction with them following the president's guidelines

**Activity R3.2 – Capacity Building of refugee settlement's leaders:**

03 capacity building trainings were conducted for refugee leaders. Participants were 208 (94 female and 114 male) out of 200 planned refugee leaders. They were trained on their roles, peace building and conflict resolution, SGBV prevention and mitigation. The trainings targeted community local leaders such as the Refugee Welfare Committees (RWCs), and some protection committee members from the nine refugee zones of Kyaka II settlement that is Mukondo C, Kaborogota, Sweswe, Bukere, Kakoni, Itambabiniga, Buliti, Byabakora and Bwiriza. As the refugees arrive, there are sometimes divided along ethnic lines, these manifest in daily life as they struggle for the limited resources in the settlement. In Kyaka II for example, the new refugee collides with the old refugees over resources. This coupled with host community thinking, refugees are favoured more than themselves, thus creating tension. The refugee leaders were equipped with non-violent skills in conflict prevention and are able to address conflicts between the old and new refugees that has been fueled by limited resources especially water. The local

leaders were able to mediate between the two sides and come to an agreement to share the resources and for the new refugees to also pay their contribution for water. This has greatly improved the relationship between the leaders from the settlement and host communities around.

**Activity R3.3 – Conduct 150 community dialogues:**

AWYAD mobilized the community and conducted 88 (50 community dialogues + 38 school debates) dialogues in the 6 zones and 5,133 (2,880 female and 2,253 male) persons participated. The activity built trust between different stakeholders and the host and refugee community through dialogue which bridged the communication gap and increased understanding between the two groups. Community members were sensitized on human rights, good governance, rule of law, peaceful conflict resolution/prevention, SGBV, protection of women and children as well as leadership, challenges were discussed and local solutions generated in order to address conflicts in the community. The re-hope strategy was discussed during dialogues to address tensions between refugee and host communities over perceived favoritism of refugees in resource allocation. Proposed solutions like increasing the percentage allocation to host communities that are in dire need were discussed. However due to the Covid pandemic we were not able to reach targeted 150 sessions.

- **Activity R3.4 – Strengthening Information dissemination mechanisms in 4 zones:**

Seven (07) feedback and complaints mechanisms were established in the zones of Kaborogota, Sweswe, and Mukondo C. This was established to bridge the gap of information sharing, knowledge increase, awareness raising and sensitization among the community members about the effects of SGBV in homes, and how to report cases. Fourteen persons (7 Male, 7 Female) supporting these desks were identified by the community and were oriented on their roles and responsibilities. This was done to improve on the identification, reception, reporting, referral of complaints and feedback mechanisms. To date, 5,582 (female 3,349, male 2,233) persons of concern have been supported through the desks. The concerns raised by beneficiaries ranged from lack of documentation and misplacement, land not being enough, shelter, education, health, SGBV, child neglect, security issues, PSN issues, water and hygiene and sanitation and psychosocial support issue. Some examples of the concerns were as follows:

- Health issues were the highest with non-communicable diseases being rampant notably chronic diseases where beneficiaries complained about distances they have to cover and even being fed up of swallowing tablets hence losing hope. Beneficiaries from Sweswe Kitorzi and Kaborogota A raised this. They were linked to Alight for psychosocial support.
- In line with education, Corona pandemic is very evident with a lot of juvenile crime as youths are stealing a lot and drug and substance abuse is on the rise. The issue of learners missing out on the packages distributed was also raised in Sweswe. This was forwarded to the Education sector for follow up
- Food and cash rations being low was one of the major complaints in all zones leading to violence emanating from cash and food rations received by beneficiaries where unbalanced expenditure that doesn't favor all household members was the major challenge.
- On a good note, some PSNs appreciated the support extended especially in construction of houses. However, they still complained of Inadequate non food items (NFIs) on WASH support especially latrine construction materials. This was reported from Sweswe Kitorzi and Mukondo C. etc.

With the presence of desks in the community, the referral system has been strengthened and beneficiaries who stay in far places were able to access services at village level.

**Activities R3.5 – 2 Exchange learning Visits with refugee and host community leaders:**



Three (3) learning exchange visits were conducted in Kyaka amongst refugee leaders (community structures) from different villages of our implementation and they shared experience and learnt from each other, on issues affecting them, ways of resolving complex cases, referral, collaboration, and coordination among others. The third one was for the local councils from the host communities of Nyaburungi and Kinoni. In attendance were 160 (75 females, 85 males). The leaders have learnt new practices of handling cases from each other and coordination among them is evidenced. According to the GBVIMS, the number of men reporting cases has increased because they learnt from each other to hold village meetings and sensitize community members on case identification and reporting.

**Activity R3.6 – Conduct household visits by Women own forum:**

Eleven (11) Women Own Forum groups conducted home visits to identify risks especially around SGBV, raise awareness on SGBV and refer any risks identified to appropriate service providers. The team and local structures in collaboration with the RWC leadership visited 81 households to carry out follow up visits to beneficiaries whose cases were still pending. AWYAD used this information to follow up with partners to have these pending issues resolved to completion. This has led to improved service delivery at grass root level.

**Activity R3.7 Male engagement in SGBV prevention:**

Thirty Eight (38) Male engagement sessions were conducted with 879 men from Mukondo C, Kaborogota and Sweswe. The activity built knowledge and skills around mobilizing, identifying, and building a network of men to address gender-based violence and combat the spread of HIV. The men were taken through personal reflections to explore constructions of masculinity in their contexts and how it affected their well-being and relationships in addressing unequal power relations, gender roles, and rigid social norms that impact on the behavior of women, girls, men and boys. 40 champion men were identified and taken through a series of training modules, mentorship, coaching, and dialogue sessions so that they can be advocates for change on SGBV in their communities. These have been able to address socio-cultural issues that drive SGBV such as male masculinity and promote gender equality especially in the areas of budgeting and spending that has been one of the key drivers of SGBV in homes.

**Activity R3.8 Provision of dignity 500 Mama Kits:**

AWYAD together with OXFAM delivered 500 mama kits to Medical Teams International to provide a clean birthing environment for expectant mothers and newborns who would otherwise be left to go through the birthing process in an unsanitary environment that creates risk of maternal infection at point of delivery. The kit composed of cotton wool, a baby showel, surgical blade, bathing and washing soap, lesu (piece of cloth for a mother to tie around her body after delivery), knickers, mackintosh sheet, bulb sucker and heavy flow reusable sanitary pads. The kits were delivered to Mukondo health center to support the expectant mothers who delivered from that health Centre, this helped provide a safe birth environment and better health outcomes for mothers and babies. This also led to increased numbers of mothers delivering from the health centers anticipating to receive a mama kit hence reduced maternal mortality rate.

**Activity R3.9 Provision of 500 household solar lamps and 30 public solar lights:**

20 public solar lights were installed around water points, VIP latrines, reception center and other hot spot areas. These were installed to reduce the risk of GBV in the community especially at night. A joint needs assessment was conducted with other protection partners in which FGDs were conducted with various groups of men, women and children to identify hot spots. Due to the market price for a public solar light, the budget could only cater for 20 public solar lights. The presence of public solar lights at water sources and institutional latrines and dark spots has led to increased safety in the community hence reduced GBV cases. All the 20 solar lights are still functioning because of the barriers for protection of the battery, and solar panel.

AWYAD distributed 920 solar lamps out of the planned 500 in the host community of Kyegegwa sub county and in the settlement where 920 (F-490, M-430) beneficiaries were reached. The Household solar lamps were handed out to PSNs which included the elderly, persons with disabilities, chronically ill persons as well the orphans and children staying in the house alone were also targeted so that they can have light in the night. This reduced on occurrence of SGBV at household level as the light helps scare away perpetrators who might attack PoCs when they know they are in the dark. The increase in number of solar lamps was due to availability of sufficient budget on this activity line.

**Activity R3.10 – Support Recreational activities in 10 villages:**

Twelve (12) recreational activities were conducted in the zones of Sweswe, Mukondo, Bukere, Bwiriza and Kaborogota. Activities included sports and music gala with the themes ‘Promoting solidarity, social cohesion, prevention and mitigation of SGBV through music and sports reaching 4,783 (F-1,712, M-3,071). The activity brought together youth from different ethnic backgrounds (refugee and host) to participate in sports and MDD with the aim of building peace, trust, unity and creating a sense of security geared towards post conflict healing, Explore the socio-economic, cultural and political barriers that young people face in their quest of becoming an active agent of positive change, peace building and reconciliation and Provide a platform for discussion of young people on how each one of them could contribute to a peaceful world. The youth were able to interact and establish MDD and sports groups consisting of both refugees and host community members, the MDD group composed and produced songs promoting peace and reconciliation which were able to reach big groups of people at a time, reduce conflict and promote peaceful co-existence.

**Activity R3.11 – Participate in 5 Capacity building of Oxfam staff and partners:**

Oxfam staff and partners participated in 05 capacity building trainings. These were:

- Triple nexus learning event in Arua for HECA regional platform and its countries implemented a learning initiative focusing on deepening knowledge and practices in bridging humanitarian-development and peace nexus – aligning with Oxfam one Programme approach and to further explore and clarify on the similarities and differences between UN triple nexus and Oxfam one Programme approach.
- Another event participated in was Regional convening on women’s leadership in peace building in the great lakes region in which the main objective was to engage in key conversations and exchange around the means through which we could strengthen our collective capacity to promote women’s leadership in peace building and reconstruction, address sexual violence in conflict and post conflict situations and lasting peace in the great lakes of Africa,
- Oxfam and partner staff participated in Gender in Emergency training and Prevention of Sexual Exploitation & Abuse (PSEA) organized by CARE for ECHO Funded Consortia members which took place from 27<sup>th</sup> -29<sup>th</sup> November 2019, south west staff were trained in gender mainstreaming and safeguarding.
- Jointly with finance and procurement, we trained Oxfam and partner staff in south west on gender and protection mainstreaming in WASH and livelihoods, finance and procurement procedures. ( This was Kyaka, Kyangwali, Rwamwanja and Nakivale teams).
- Trained Oxfam staff in safeguarding and code of conduct together with HR, safeguarding advisor and the confidential counselor from Kyaka, Kyangwali and Nakivale. Due to exposure in various trainings, the knowledge and skills of staff and partners have improved on gender and protection integration.

**Activity R3.12- Conduct conflict prevention and conflict mitigation/resolution sessions (10):**

Eleven (11) training sessions targeting 207 (87F, 120M) protection committee members, women

own I leader's, men own I leaders, refugee welfare councils (RWC) and local councils (LCs) from host community were conducted. The sessions were conducted on prevention and conflict mitigation, Managing and resolving community and effective communication between leaders of diverse communities and other relevant stakeholders. These leaders were empowered to effectively resolve community-level disputes and drive change within their constituencies and regional structures in an inclusive and sustainable manner. This was able to promote peaceful coexistence and equal sharing of resources among refugees and the nationals.

**Activity R3.13 – Strengthening of the 2 referral pathways:**

Four (04) billboards with referral pathway were printed and installed in Sweswe, Kaborogota and Mukondo C zones. Kyaka community referral pathway was revised by protection working group to enable community members understand where to access services. This was printed and translated into the common local language (Kiswahili). This was to enable community members understand where and when to get services. During our SGBV sector working group meetings, we were informed that a good number of community members are now able to identify protection risks and they know the right places to report and refer. This has been witnessed from the cases received in suggestion boxes and self-referrals

- **Activity R3.14 – Conduct 3 trainings on SASA methodology for partner / stakeholders:**

A total of three (03) SASA Methodology training for Oxfam and Protection Partner staffs in Kyaka II Refugee settlement were conducted. The main goal of the training was to build and strengthen the knowledge and skills of OXFAM staff and Protection partner staffs towards using SASA, ideas to mobilize, prevent and respond to VAWG/GBV. In attendance were 40 (25F, 15M) staffs from OXFAM, OPM, UNHCR, TPO, WCH, FCA, WV, SP, AHA, IRC, AWYAD, RED CROSS ADRA, DRC, ARC, SCI, FCA, HI and ACORD. Although some staff who were trained have moved on, almost all protection partners in Kyaka are implementing using SASA methodology approach to raise awareness on GBV in relation to HIV.

- **Activity R3.15 – 2 Participatory assessments including the GiE, AGDM:**

01 Gender in Emergency assessment was conducted by a hired consultant with support from Oxfam and its partner AWYAD in Kyaka II refugee settlement and report was compiled. Different structures such as RWCs, SGBV groups, women own forum, community members, implementing and operating partner staffs, Oxfam staffs and LCs were interviewed. Methodologies used were observations, interviews, and discussion. Oxfam participated in AGDM conducted jointly with UNHCR and partners in Kyaka II in December 2019.

Additional assessment on Gender impact of COVID-19 on refugees in Uganda was conducted, the need was identified to carry out a rapid gender assessment (RGA) to assess the impact of the pandemic on women, men, girls, and boys of diverse backgrounds, such as persons with disabilities, older persons and those with serious medical conditions. The United Nations High Commission for Refugees (UNHCR) together with UN Women, International Rescue Committee, Care International, ALIGHT, the Danish Refugee Council, OXFAM, TPO, Over Comers Women Group and YUGNET took on this initiative in both in Kampala and across refugee settlements. This assessment report was shared and helped partners to understand the gaps and recommendations and some of them have been addressed. Some of the key issues found included:

- ✓ The impact on incomes, the findings show that women have been less able to continue saving through VSLA when compared to men (43.7% of women compared to 53.5% of men).
- ✓ Reporting additional unpaid work for girls, women 18-24, and female child HoH. While male respondents more often reported spending time on farming (30.0%) and leisure

(19.1%), female respondents reported cooking (43.4%), doing housework (38.3%), collecting fuel (23.5%), and collecting water (22.5%), which exposes them to greater risks of SGBV.

- ✓ Key informants further highlighted that men and boy engaged in theft (8%), while women and girls engaged in survival sex work (10%).
- ✓ Early/forced marriage (18%) was also frequently raised relating to girls
- ✓ The two most common access issues to information were a lack of equipment (37.7%) and an inability to read (32.2%). Given the challenges female respondents have in accessing a mobile phone, it is not surprising that a lack of equipment was their greatest cited barrier.
- ✓ The impacts on women and girls were therefore clear: increased incidents of SGBV (23%) and domestic violence (17%), a greater burden of the unpaid care work (7%), and a simultaneous inability to meet the basic needs of the household – including food (15%), menstrual hygiene products (9%), and family planning essentials (5%). They were also seen to be at risk of having their resources confiscated by their partners (5%).
- ✓ Negative coping mechanisms such as alcoholism
- ✓ Priority needs were ranked as food (76.67%), healthcare (60.0%), livelihoods (51.3%), education (39.2%), NFIs (34.5%), cash assistance (25.8%), water (18.4%), PSN support (17.7%), shelter (16.0%), physical protection (8.7%), sanitation/hygiene (7.5%), and resettlement (7.1%).

Due to Covid 19, UNHCR did not conduct AGD in 2020.

#### **Activity R3.16 – Participate in 12 events related to Gender and Protection:**

Oxfam and AWYAD participated in at least 12 events. These included: the launch of 2021 16 days of Activism against GBV, International AIDS Day, Day of African Child, World Refugee day, world breastfeed day, World Mental Health day, international youth day, Launch and closure of 16 days of activism, International youth day, International women's day. Others included International Humanitarian Day. Some were celebrated more than once. AWYAD participated in the world mental health day which is observed on 10 October every year with the theme: *Mental Health for All Greater Investment – Greater Access*. The overall objective of raising awareness of mental health issues around the world and mobilizing efforts in support of mental health. The Day provided an opportunity for all stakeholders working on mental health issues to talk about their work and what more needs to be done to make mental health care a reality for people worldwide. Among the activities which were carried out included radio talk show, training of staffs on stress management, community awareness using boda-boda talk-talk. Partners who participated the event included AWYAD, ALIGHT, TPO and War-Child. Most events were celebrated more than once. The existence of international days predates the efforts of the implementing partners and they embraced them as a powerful advocacy tool through observing designated days, weeks, years, and decades, each with a theme, or topic. Partners promoted international awareness and action on these issues.

### **DR CONGO**

#### **- Indicators for the outcomes obtained:**

R3.1-OVI - 50% of women and men in target areas who are able to identify at least two protection

risks and give ideas on how to mitigate them

A la fin du projet, 87% de femmes et hommes dans les zones cibles sont en mesure d'identifier au moins deux risques de protection et de donner des idées sur la manière de les atténuer. Dix cartographies de l'accès aux services de référence ont été faites. Le dépassement de 50% à 87% de l'indicateur est expliqué par l'approche de sensibilisation porte à porte intensifiée et des entretiens dans les ménages qui ont permis aux membres de ménage de bien comprendre et assimiler certaines thématiques.

R3.2-50% of women and men in target areas who are able to name three referral services and explain how to access them

En fin projet, 83% des femmes et des hommes dans les zones cibles sont en mesure de nommer trois services de référence et d'expliquer comment y accéder. Un nombre important de dépliants (plus de 6000) sur la cartographie des services de prise en charge a été produit avec un schéma de référencement. Sa vulgarisation à grande échelle s'est faite pendant le mois mars 2021 où 4 campagnes de sensibilisation ont été réalisées dans les sites des personnes déplacées et villages hôtes avec l'implication des organisations locales membres du réseau de plaidoyer.

- **Beneficiaries (status + number):**

Au total 64859 personnes ont été atteintes par les activités Protection au cours de la mise en œuvre du projet.

Statuts des bénéficiaires atteints	Total	Hommes	Femmes	Garçons	Filles
IDPs / Returnees	19964	2910	4944	4597	7513
Hôtes	44895	13900	19856	5764	5375
<b>Total</b>	<b>64859</b>	<b>16810</b>	<b>24800</b>	<b>10361</b>	<b>12888</b>

- **Activities carried out:**

**Activity R3.1 – Establish protection focal points, protection committee and Women Forums in Ituri**

Le choix des membres communautaires a été fait au sein des assemblées électives organisées dans chaque village ciblé par le projet. Le tableau suivant présente le détail des forums des femmes et des comités de protection :

SITE	Forums des femmes			Comité de protection		
	Homme	Femme	Total	Homme	Femme	Total
Abia	0	15	15	5	5	10
Cawa-Anju	0	15	15	5	5	10
Pamoth - Senda	0	15	15	5	5	10
Ndawe	0	15	15	5	5	10
Djupugolo 2	0	15	15	5	5	10
Apala	0	15	15	5	5	10
Kpandroma	0	15	15	8	8	16
Zali	0	15	15	5	5	10
Budza	0	15	15	5	5	10
<b>SOUS TOTAL</b>	<b>0</b>	<b>135</b>	<b>135</b>	<b>48</b>	<b>48</b>	<b>96</b>
<b>TOTAL GEN</b>		<b>135</b>			<b>96</b>	



146 leaders communautaires (dont 24 femmes) comprenant des autorités administratives et coutumières, des membres de la société civile locale, des représentants des structures de santé, des représentants des jeunes, des forums de femmes, des comités communautaires de protection et des relais communautaires ont été formés. La formation a porté sur l'intégration du genre dans les activités du projet. Les thèmes spécifiques développés étaient l'analyse genre, les notions de base sur les violences basées sur le genre et la cartographie pour l'orientation des cas de violences basées sur le genre vers les structures de prise en charge disponibles. Les structures de protection (comité de protection et Forum des femmes) jouent les rôles suivants dans les communautés :

- Mettre en place des mécanismes d'analyse et de gestion éventuelle des risques liés aux activités WaSH et sécurité alimentaire ;
- Identifier les menaces de protection et la vulnérabilité des populations et proposer un plan de protection communautaire ;
- Cartographier les services de prise en charge des cas de protection et informer les membres de la communauté des mécanismes pour l'accès à ces services ;
- Orienter les survivants d'abus vers les services de prise en charge ;
- Identifier les obstacles à l'accès aux services et mener un plaidoyer au niveau local pour assurer l'accès par les personnes vulnérables ;
- Sensibiliser les autres membres de la communauté sur les thématiques de protection ;
- Assurer la liaison entre les membres de la communauté, les services de prise en charge, les autorités locales et Oxfam.

### **Activity R3.2 - Mapping access to referral services**

L'évaluation des services de base a été faite dans six villages et les zones environnantes ciblées par le projet. 6 cartographies de services ont été produits dans les villages de CAWA ANJU, Abia, Apala, Djupagolo 2, Ndawe et Senda-Pamoth. Les services disponibles identifiés étaient : les structures de santé (dont l'Hôpital Général d'Angumu et 5 centres de santé) et l'unité de police. Quatre autres cartographies de service de prise en charge ont été faite dans les communautés de Djugu, il s'agit de Djubate, Kpandroma, Zali et Budza. Une actualisation de tous les mapping a été faite en mi-parcours du projet. Il est à noter que les structures sanitaires en zone de santé d'Angumu sont appuyées par l'organisation Médecin sans Frontières pour la prise en charge médicale et psychosociale des cas de violences sexuelles. Trois points d'écoute sont appuyés par la Solidarité de femmes Paysannes pour le Développement Intégral (SOFEPADI) et assurent l'accompagnement juridique des survivants.

### **Activity R3.3 - Training for local authorities, local leaders, service providers and local media on protection, their roles and responsibilities and confidentiality**

Les leaders et autorités locales (chefs de groupements, chefs de localités, chefs de services de l'état, responsables d'associations féminines, opérateurs médias, responsables d'associations de jeunes) ont été formés sur la protection les rôles et responsabilités pendant toute la période de mise en œuvre du projet. Les principaux thèmes développés sont les notions de protection, les outils de protection, l'analyse de la protection, les droits de l'homme et le rôle et les responsabilités des autorités dans la protection des civils, ainsi que le traitement confidentiel des dossiers de protection dans les communautés.

Au total 264 personnes ont pris part aux ateliers de formation, soit 86 femmes et 178 hommes. De manière générale, 35% des participants avaient une connaissance vague de la protection des personnes et la totalité des membres n'avaient jamais participé à une formation sur la protection. A l'issue des tests à la fin des ateliers, 60% des participants ont amélioré leurs connaissances sur la protection.

### **Activity R3.4 - Strengthening Information dissemination mechanisms**



Un mécanisme de partage d'informations avec la population locale sur les questions de protection a été mis en place dans les différents villages en collaboration avec Oxfam et le partenaire de mise en œuvre FECONDE et la protection civile, à travers les points focaux protection.

Six milles dépliants, 20 panneaux de sensibilisation sur la cartographie des services et sur le référencement des cas ont placés dans des lieux publics, 120 banderoles ont été placées, sur les thèmes de protection (sur les violences sexuelles, la cohabitation pacifique, les droits humains , ...), et des plans de protection communautaires ont été produits pour informer les communautés.

### **Activity R3.5 - Conduct gender in emergency training for beneficiaries**

Après la mise en place des structures communautaires de protection, une session de renforcement des capacités de ces structures communautaires (points focaux protection, forums des femmes, comité local de protection, comité de gestion de l'eau potable, relais communautaire et comité source), a été organisée à Kpandroma et Ramogi avec un total de 88 participants (dont 43 femmes et 45 hommes). Le rôle de ces personnes est d'être en mesure d'identifier, de prévenir et d'atténuer les risques et les menaces à la protection en temps opportun, de veiller à ce que les considérations spécifiques au genre soient prises en compte tout au long du cycle du projet et d'encourager les femmes et les filles à participer aux activités du projet.

### **Activity R3.6 - Conduct protection activities in communities**

Des campagnes de sensibilisation ont été organisées durant les 16 jours d'activisme contre les violences basées sur le genre dans les communautés cibles autour du thème retenu cette année Ituri, à savoir « Faisons tous bouger l'Ituri, dénonçons les violences et les conflits basés sur le genre pour paix durable ». Un focus a été mis sur les problèmes identifiés dans les plans d'actions communautaires tels que le mariage précoce. Des pièces de théâtres ont été joués par les membres des structures communautaires ainsi que des séances de sensibilisation sur les thèmes de la protection, notamment la réduction des conflits, les droits et responsabilités des citoyens, les rôles et responsabilités des autorités et des prestataires de services, les taxes illégales et les barrières ou les mesures pratiques d'autoprotection.

### **Activity R3.7 - Provision of dignity 500 Mama Kits**

Les 500 bénéficiaires des kits MAMA ont été identifiés dans les centres de santé dans les 10 villages cibles (cfr tableau ci bas) avec l'appui des responsables des centres de santé pendant les activités de consultation prénatale sur la base des critères suivants : femmes déplacées, jeunes mères déplacées ou femmes de la communauté d'accueil vulnérable qui accouchent aux centres de santé. Un kit équivalent à 40USD a été constitué en faveur de chaque femme bénéficiaire. Le tableau ci-dessous reprend la répartition des kits :

Numéro	Aire de santé	Nombre de kits distribué
1	Apala	60
2	Abia	57
3	Awasi	60
4	CAWA Anju	57
5	Gengere	66
6	Kpandroma	50
7	Budja	50
8	Djubate	50
9	Zali	50
Total		500

### Activity R3.8 - Provision of 1.500 personal solar lamps

1 500 lampes solaires ont été distribuées aux ménages rapatriés, aux déplacés internes et aux personnes ayant des besoins spécifiques, notamment les personnes âgées, handicapées, malades chroniques, survivants de violences sexuelles, mineurs non accompagnés et enfants séparés et femmes vulnérables avec des nourrissons. Voici dans le tableau ci-après l'effectif des bénéficiaires des deux zones de santé d'Agumu et Rethy

BENEFICIAIRES DES LAMPES SOLAIRES ZONE DE SANTE ANGUMU ET RETHY			
Categories de personnes	Femme	Homme	Total général
Femme Allaitante	229	0	229
Femme Enceinte	140	0	140
Malade chronique	88	102	190
Personne de 3ème âge	213	138	351
Personne handicapée	92	89	181
Survivante de VBG	6	1	7
Veuve/f	346	56	402
Total général	1114	386	1500

### Activity R3.9 - Active risk reduction and referral activities

Les séances d'analyse des risques de protection ont été faites avant, pendant et après la mise en œuvre des activités Wash et EFSVL dans la zone ciblée. Des mesures de mitigation ont été développées afin de réduire les risques qui peuvent affecter les bénéficiaires, le personnel et les responsables.

Des réunions de consultation communautaires et des sessions de sensibilisation ont été organisées. Elles avaient pour but d'assurer une communication et une compréhension des critères de ciblage des bénéficiaires et du choix des sites d'implémentation des ouvrages WASH, ainsi que l'implication des communautés dans toutes les étapes de mise en œuvre du projet.

### Activity R3.10 - Protection and social cohesion activities (including meetings, awareness campaign)

Afin d'assurer la cohésion sociale, à travers la participation des membres de la communauté (les autorités politico-administratives, les membres des comités de protection, les membres du forum des femmes, les responsables des structures ou comités des déplacés, les dirigeants locaux, les chefs religieux, les agents de force de l'ordre, la population locale...), nous avons organisé des activités de :

- Sensibilisation et formation sur la cohabitation pacifique entre les communautés,
- Organisation d'activités de rapprochement entre les autorités locales et la population civile (notamment des travaux communautaires et la remise de kits d'entretien des routes).
- Organisation de réunions communautaires, d'ateliers impliquant les membres des tribus de Mahagi et de Djugu afin d'assurer une bonne gestion des infrastructures et un partage des ressources.

Le tableau ci-dessous reprend la synthèse des activités de protection réalisées :

Activités	Prévu	Atteint	Pourcentage
Mise en place des points focaux de protection, d'un comité de protection et de forums de femmes en Ituri	20	20	0
Cartographie de l'accès aux services de référence	10	10	0
Formation des autorités locales, des dirigeants locaux, des prestataires de services et des médias locaux sur la protection, leurs rôles et responsabilités et la confidentialité	80	80	0
Renforcement des mécanismes de diffusion de l'information	20	20	0
Organiser une formation à la problématique homme-femmes dans les situations d'urgence à l'intention des bénéficiaires	20	20	0
Activités de protection dans les communautés	15	15	0
Distribution de 500 kits maman pour assurer la dignité des nourrissons	500	500	0
Fournir des lampes solaires individuelles	1500	1500	0
Réduction active des risques et activités de référence	80	80	0
Activités de protection et de cohésion sociale (y compris réunions, campagne de sensibilisation)	5	5	0

#### **Outcome 4 (R.4): Strengthen humanitarian advocacy and coordination mechanisms**

##### **UGANDA**

##### **- Indicators for the outcomes obtained:**

R4.1-OVI – At least 3 Refugees Committees and coordination structures have been established/or revitalised and are able to conduct humanitarian advocacy at local level and these efforts will be integrated in regional advocacy initiatives.

- At least seven (7) Refugee committees and local council committees were trained and are able to conduct humanitarian advocacy at local level.

##### **- Beneficiaries (status + number):**

Status	Number of beneficiaries	Males	Females	Boys	Girls	Comments
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<b>Total</b>	<b>1059</b>	<b>467</b>	<b>554</b>	<b>17</b>	<b>21</b>	Reached during trainings and meetings, home visits
<b>Refugees</b>	<b>851</b>	<b>400</b>	<b>423</b>	<b>13</b>	<b>15</b>	
<b>Hosts</b>	<b>208</b>	<b>67</b>	<b>131</b>	<b>4</b>	<b>6</b>	

- **Activities carried out:**

**Activity R4.1 – Assessment of existing structures & coordination mechanisms in place**

The assessment was conducted in Kyaka and Kyangwali settlement, the consultant shared the report. A position paper on local and national level advocacy working closely with refugees and hosts was developed by the consultant, a draft copy of findings was shared. The will help partners and other key relevant stake holders for advocacy purposes on addressing key gaps as well as recommendations identified.

**Activity R4.2 – Develop and strengthen refugees’ network and local actors.**

Conducted 01 refugee local actors’ training/workshop on coordination mechanism. 42 (20 females, 22 male) participated from Kyegegwa and Kikuube district including government staff ( Office of the prime ministers staff, probation officers, subcounty CDOs, Chief administrative officers), political leaders (local council 3), partner staff (ALIGHT, IRC, Save the children, Oxfam, AWYAD, JESE), Refugee leaders (Refugee welfare council,) and refugee led organizations. This led to improved Coordination mechanisms among different stakeholders working with refugees including government officials and district officials which has been evident where partners organizations and district are working in harmony to support refugees. A report was compiled and shared.

Conducted 3 days TOT workshop for refugee leaders on advocacy and communication at Katente Hotel. The leaders targeted were Refugee welfare council I, local council I, Child Protection Committee members, Community Activists, women on forum, Defence RWC I level, PSN leaders, refugee led organizations and VHTs. 30(17male, 13female) participated. The objective was to strengthen advocacy and communication at community level.

Networking and coordination among refugee leaders and local actors has been improved through advocacy coordination foras.

Participated in Advocacy meeting organized by JESE that targeted district officials, OPM, subcounty officials, Oxfam, Jese staff and DR DIP. In attendance were 10 (6female, 4male). The meeting was to deliberate about advocacy around energy and environment conservation. Some of the key issues discussed were 30% for host community allocation of the dumping site near Bwiriza swamp which had been handed over to Oxfam from IOM through UNHCR. Oxfam, having known the environmental implication of the site (especially with possibility of ground water contamination and wetland degradation), had previously started campaigning/advocating for the dumpsite to be relocated through the WASH Coordination Forum. With support from OPM and UNHCR, a new dumping site has been identified in Bwiriza away from swamp. The choice of the site follows extensive community engagement and environmental considerations and wider plans to further improve settlement wide solid waste management.

01 Linkage meeting of refugee committees from Kyaka and Kyangwali was conducted in Hoima district. This included OPM of Kyaka and Kyangwali and refugee leaders from various structures. The aim was to share the best practices and learn from each other. Advocacy work plans were drawn, and they are implementing them. In total 22 (M-10 and F- 12) participants attended and drew advocacy plans which they had started implementing but because of COVID, the activity is

halted. Among the key action points developed included: Advocacy on extension of safe water in underserved villages, need for support of PSN latrines in Kyangwali settlement while in Kyaka II, need for shelter for PSNs, translating laws related to refugees in French and Kiswahili, extending safe water to underserved villages, and need for PSN latrine support. As a result, some progress has been registered especially on extension of piped water to Kakoni zone by Oxfam, construction of 276 PSN latrines by JESE & Oxfam and construction of 10 PSN shelters by the protection partner. Leaders have networked and they share experiences on conflict mitigation and resolution. PSNs have been supported with shelter through advocacy by leaders and child protection strengthened.

### **Activity R4.3 – Strengthen National and regional advocacy.**

AWYAD conducted one district dialogue which involved both the technical and political wings from the district, Sub County, implementing partners and refugee leadership structures. The objective of the dialogue was to; provide a platform through which the refugees, host communities and local leaders can address sources of conflict and come up with peaceful conflict mitigation mechanisms all geared towards increased resource sharing and peaceful co-existence. It also aimed at opening a discussion between the current relation between refugees and the host community within and beyond the settlement. 56 people participated (Female-12, Male-44).

Also, in collaboration with the Office of the Prime Minister and Oxfam, AWYAD organized a national dialogue meeting on enhancing the refugees and host communities Rights during and after the Covid 19 pandemic. This could only happen with support from the Belgium Government. The main objective of this dialogue was to celebrate the rights of refugees in Uganda and reflect on how to further protect and promote refugee rights during and after the pandemic. The dialogue also shared insights on the current refugee Rights status and the effects of COVID 19; specifically focusing on the Right to Education and The Right to Food. Ultimately, the dialogue also wished to galvanise support from donors, and other stakeholders to increase their support to refugee work in Uganda. The meeting was graced by over 50 humanitarian actors drawn from the Office of the Prime minister, Members of Parliament, District LCV Chairpersons, CSOs, Refugee representatives and media. (Female-17, 33 Male).

In Kyaka II, Refuge leaders of Mukondo C, Kaborogota and Sweswe, host communities of Nyaburungi, Kinoni and Kyangwali leaders trained community members on advocacy and communication through community meetings and home visits. 1059(467M, 554F, 17boys, 21 girls) beneficiaries were reached. They have been advocating for support to PSNs from various organizations especially on shelter and 15 of the PSNs have been considered for shelter construction through their efforts. They also advocated for parents to send their children to school and for scholastic materials from the education partners in which they received materials for learning from home, on latrine construction with shelters for persons with specific needs and extension of water supply.

They have been working with VHTs to advocate for household latrine construction which has increased on the level of hygiene and sanitation in the community

### **Activity R4.4 – Regional Advocacy and learning meeting:**

The regional meeting was meant to be held at the end of the project in Uganda with the DRC team to enhance cross-country learning. However, following the COVID-19 lockdown and government ban on travels and gatherings for a major part of 2021, the meeting could not be organized. Funding initially allocated to this activity was realigned to support dissemination of outcomes of an in-depth study of local refugee structures, protection risks analysis and communication channels in the refugees' settlements, as well as enhancing linkages between

Kyaka II and Kyangwali Refugee Protection Committees.

## **DR CONGO**

### **- Indicators for the outcomes obtained:**

R4.1-OVI - At least 3 Refugees Committees and coordination structures have been established/or revitalised and are able to conduct humanitarian advocacy at local level and these efforts will be integrated in regional advocacy initiatives.

A la fin du projet, 3 comités de réfugiés et structures de coordination ont été mis en place et sont en mesure de mener un plaidoyer humanitaire au niveau local.

### **- Beneficiaries (status + number)**

Number of beneficiaries	Total	Hommes	Femmes	Garçons	Filles
IDPs / Returnees	19964	2910	4944	4597	7513
Hôtes	44895	13900	19856	5764	5375
<b>Total</b>	<b>64859</b>	<b>16810</b>	<b>24800</b>	<b>10361</b>	<b>12888</b>

### **- Activities carried out:**

#### **Activity R4.1 – Assessment of existing structures & coordination mechanisms in place**

L'analyse des structures locales de Mahagi et Djugu (à travers un questionnaire établi par Oxfam) a permis d'identifier les mécanismes de coordination en place pour renforcer la participation d'Oxfam et de comprendre les dynamiques de pouvoir, d'influence, de structures et d'acteurs présents dans la province de l'Ituri. Ceci afin de faciliter la mise en place d'un réseau de plaidoyer inclusif des PDI et des acteurs de la société civile locale dans la ville de Bunia. Plus de 50 structures de la société civile et d'acteurs locaux ont été identifiées et évaluées.

De cette analyse, il est ressorti que les structures au niveau locales existaient, mais agissaient de façon non coordonnée sur terrain, sans respecter les principes humanitaires et sans personnalité juridique pour nombre d'entre elles. Nous avons ainsi initié une formation sur les principes humanitaires en collaboration avec OCHA dans les deux zones. Nous avons aussi créé une synergie entre ces acteurs et un cadre de concertation à travers le réseau de plaidoyer.

#### **Activity R4.2 – Develop and strengthen refugees' network and local actors**

Deux réseaux de plaidoyer incluant les déplacés et les acteurs locaux ont été mis en place dans la province de l'Ituri. Un dans la ville de Bunia (40 membres, dont 33 ONG nationales, des représentants des organisations de la société civile, des représentants des sites de déplacés, et la coordination provinciale de la société civile) et l'autre dans le village de Ramogi (composé de représentants d'associations locales, de représentants des sites de déplacés, de la coordination de la société civile locale et de dirigeants locaux)

Des séances de formation des membres de réseau de plaidoyer a été organisé sur le plaidoyer, la communication et la coordination.

Les deux réseaux de plaidoyer ont été dotés chacun d'un statut et d'un règlement d'ordre intérieur élaboré avec les membres et sont en cours de légalisation par les services étatiques compétents de la province de l'Ituri. Ainsi, des Kits de sensibilisation et de l'appui en fournitures ont été



distribués.

Les réseaux de plaidoyer ont été actifs dans la documentation des incidents de protection afin de les remonter à la coordination provinciale de la protection civile. Un plaidoyer a été fait au niveau de l'administrateur du territoire de Mahagi pour la suppression des points de contrôle illicites érigés par les forces armées de la R D Congo, où la population était préoccupée par le prélèvement des taxes illégales sur l'axe Mahagi-Ramogi et Mahagi-Kpandroma. L'autorité s'est engagée et a supprimé 7 barrières illégalement établies par les militaires sur ces deux axes routiers.

#### **Activity R4.3 – Strengthen National and regional advocacy**

Les membres des réseaux de plaidoyer ont été chargés d'identifier, en collaboration avec les autres acteurs de la protection, les problèmes et mener des actions de plaidoyer au niveau local. Une table ronde réunissant les membres des réseaux avec les autorités territoriales a été organisée à Mahagi. Un acte d'engagement a été signé par l'autorité et une note de plaidoyer reprenant les 7 principaux problèmes de deux territoires a été élaboré et adressée aux institutions de la province de l'Ituri, dont l'assemblée provinciale et le gouverneur de la province.

La présentation de ladite note n'a pas été faite à cause du changement brusque des autorités remplacées par les militaires et de la suspension des activités de l'assemblée provinciale du à l'état de siège, décrété par le gouvernement national.

Pour achever le processus, l'activité a été reprogrammé dans le nouveau projet, et ladite note sera présentée aux nouvelles autorités après une nouvelle analyse des parties prenantes.



Photo des participants : Travaux de groupe pour la validation de la note de plaidoyer / table ronde de Mahagi

#### **Activity R4.4 – Regional Advocacy and learning meeting**

L'activité n'a pas eu lieu à cause de la limitation des mouvements dû à la pandémie de COVID 19.

### 4.3 **Work plan (e.g. annexed Gantt diagram)**

Refer to Annex 02.

#### 4.4.1 [INT] **Revised work plan in the event of changes following the proposal**

DRC : updated workplan



DGD project  
-Workplans\_actualis

#### 4.4.2 [FIN] **Revised work plan in the event of changes following the proposal**

Updated workpan after NCE:



PG201910 -  
Workplan UGA upd:



PG201910 -  
Workplan DRC upd:

## 4.5 **Monitoring, assessment, auditing and other analyses**

### 4.5.1 **Monitoring of the activities (explain how, by whom)**

A strong focus has been given to MEAL activities and sharing learning. This sharing of information will be done between the two Oxfam implementing teams in DRC and UGA. Team members will come together 4 times during the project life to align approaches, share perspectives, tools and good practices.

Like in many Oxfam programme, MEAL process will follow the Oxfam Core Humanitarian Standards and the International Monitoring, Evaluation, Accountability and Learning (MEAL) minimum standards for emergency response, this also keeps in mind that all our actions are linked to long-term sustainability and development. The programme will adopt both MEAL and results-based monitoring approaches. The results chain had been integrated into the log frame and monitoring will be based on how results are being achieved to ascertain changes in community resilience.

All implementing interventions that take into consideration local contexts minimize risks and maximize positive impacts. In addition to ensuring understanding of local contexts, clearly communicating to the communities and key stakeholders the purpose of Oxfam's programme is given utmost importance. Besides, effective coordination with other stakeholders ensures that other institutions and organizations are influenced to be sensitive to areas of potential conflict such as disempowerment of people, lack of accountability in the use of resources, lack of transparency in communication and worsening divisions among diverse and potentially conflicting groups. All aspects of programming take a safe programming approach.

In line with Oxfam's approach to MEAL, evaluation will be a participatory process involving beneficiaries in design. Monitoring activities will follow a gender-based approach feeding an analysis of the reference situation and how groups are affected by shocks and are benefiting from the response:

- Vulnerable household targeting composition in terms of sex and age groups;
- Normal and negative coping strategies: why displaced, from where, are women leading the households as a result, are these women exposed to higher risks of resource shortage, etc., are negative coping strategies being used?
- Post-distribution monitoring how was assistance delivered, beneficiary satisfaction, protection issues, population movements, analysis of push and pull factors linked to assistance
- Overall waterborne disease: are beneficiaries able to stay free of waterborne diseases (diarrhoeas, malaria) and what are the biggest shortcomings?
- In addition to the daily follow-up of activities by the field team, the monitoring will include systematic monthly data collection that used for situational reports. Data will be collected using household questionnaires, gender segregated focus group discussions and water quality data collected at water point level. The household follow-up questionnaire will be designed to collect a cross section of information based on activities proposed in the project log frame. Focus group discussions will also be conducted to collect supplementary information not gathered during the household visit.

As part of the learning process and cross checking on best practices, the programme will borrow on the learning from CaLP and utilize CaLP tools and methodologies to enhance information gathering and analysis for learning cash programmes and transactions. This information will be analysed and used for programme effectiveness and measuring impact. Common tools of beneficiary assessment will be utilized, joint verification with UNHCR and OPM's office (for UGA) and consultation with other partners will blend the process.

Programme Quality Coordinator will support the Humanitarian Programme Manager, Humanitarian Country Team and the response team to implement a Monitoring and Evaluation framework that ensures that the indicators and tools are sensitive to the issues identified in assessments and surveys as well as routine monitoring of activities, and especially take gender concerns on board. The project will use the participatory monitoring and evaluation approaches to track the activities implementation, output, outcomes and impacts. The monitoring and evaluation mechanism will establish whether the project implementation is efficient and effective. During the implementation period, data will be collected by the project teams in the field in liaison with volunteers.

Post distribution monitoring of CASH and other support donations to beneficiary communities will be conducted. The business support grant (IGA) recipients will continuously be given supportive supervision for tracking changes. Periodic feedback from communities including pre- & post-training reports as well as from violence survivors will form the basis of monitoring gender & protection interventions. Feedback Forms. GBV IMS (Gender based violence Information Management System) will periodically be monitored to ascertain efficacy of the interventions. GBV promoters will regularly file their reports as well.

## **DRC**

Since 2013, Oxfam in the DRC has implemented a country plan for MEAL (Monitoring, Evaluation, Accountability and Learning). Under the direction of the national coordinator for MEAL based in Goma, technical assistance is provided by the MEAL Officers of the Humanitarian Programme across the country. At the provincial level, providing project monitoring results to beneficiaries, partners and government is part of Oxfam's MEAL commitments. The M & E cycle includes Baseline, Post-Distribution Tracking (PDM) and Endline and mainstreams the use of ICTs. During the period of intervention, there will be weekly price monitoring and interviews with suppliers to keep abreast of the effects on the markets, particularly of cash interventions. The MEAL coordinator will work with regional advisers to make recommendations on indicators for the

integration of protection and gender mainstreaming.

## UGA

Oxfam will encourage routine collection of data on the ongoing projects and analyze to establish trends in the provision of service, establish a complaint and feedback process that will inform management on beneficiaries' appreciation of Oxfam response as well as an accountability mechanism. Oxfam will establish feedback desks and through community engagement and visits obtain the much-needed information. Weekly and monthly progress reports will be produced and shared with UNHCR and for OXFAM internal use. Reports will also be shared with other agencies and the Office of the Prime Minister in sectorial coordination meetings but much more fundamentally, reports will be communicated to the refugees as a critical feedback strategy. The results of the KAP survey will be useful to measure changes and inform gaps for prioritization in future. Quarterly internal reviews will be undertaken and the performance progress narrative and project financial reports (PFR) shall be shared with the donor according to agreed schedules, with details of challenges and the needs for realignment to meet the WASH gaps needs.

### 4.5.2 Tick the boxes corresponding to the analyses that may be undertaken:

- ☐ External assessment during the action
- ☒ External assessment after the action
- ☐ External auditing during the action
- ☒ External auditing after the action
- ☒ Internal assessment or internal auditing relating to the action

### 4.5.3 Other analyses: ☐ Please provide information:

For both countries a multi-sectors detailed assessment will feed each sector of intervention. This will be particularly essential for the result 3 (Protection) and 4 (Humanitarian Advocacy) of the project.

These assessments will give a particular attention to GBV, their roots and solutions to address them. This will also comprise a detailed stakeholder analysis to give a solid fundament for the humanitarian advocacy.

## 5 CROSS-CUTTING ISSUES

### 5.4 Please describe the expected level of sustainability and/or of connectedness

Oxfam's approach to LRRD is part of the overall Oxfam's 'One-Programme Approach' (Humanitarian – Development – Advocacy) strategy. Specifically, in terms of Exit Strategy, Oxfam will conduct an evaluation at the end of the intervention for provide information for future programming of transition and development projects implemented by Oxfam or other actors.

From a Protection point of view, the issues prioritised for action during will prioritise deeper institutional and cultural protection issues will be identified for action – for example women's inheritance rights, early marriage and/or protection during displacements. Oxfam is coordinating this action with the current projects to strengthen the links between humanitarian phase and longer term development issues. The multi sector type of intervention is also reinforcing this connectedness. Advocacy at multiple layers is a core part of Oxfam's Protection work and strongly integrate into this project as part of results 3 and 4.

## **5.5 Continuity strategy (links between emergency aid, rehabilitation and development)**

### **DRC**

The aim of the project is to respond to basic needs of conflict affected population from DRC side. Although responding to acute humanitarian needs, the project will aim to build self-reliance of beneficiaries. The aims of Oxfam resilient programme approach is to increase population: 1) absorption capacities; 2) adaptation capacities; 3) transformation capacities. Under this project, the focus will be made on supporting the population of absorb the conflict shocks and to adapt to an economical instable environment with limited economic opportunities. Concretely, considering security context and relation between different involved parties, «safe programming » activities have been integrated into food security sector. Protection sector will reinforce the local communities' safe guarding capacities to apply after the project to respond to security events or prevent potential threats. In addition to food distribution, cash support will allow beneficiaries to reach a certain independence regarding humanitarian aid.

### **UGA**

Central in all of our interventions is the aim to build the organization capacity of local organisations and government agencies needed to respond to future events. In this regard, the proposed action is designed with the participation of local actors (2 of them as implementing partners) and local government and community stakeholders with the objective of strengthening local capacities for WASH systems operation and maintenance, sanitation and hygiene leadership, EFSVL gender and protection risk identification and mitigation as well as working together to avert future disasters and conflict situations. Through this action, the Oxfam will develop the capacity of local actors by providing training, technical assistance and joint monitoring of implementation. The action will promote and strengthen community protection and WASH management structures that involve women and other vulnerable members of the community. The action will bolster community efforts aimed at reducing risk of water borne diseases, violence and promoting peace as interventions engage both refugees and host communities. Conflict between refugees and host communities over resources and services like water and land which cause fights, injuries and often lead to death will be reduced through institution of community dialogues and social cohesion mechanisms through protection structures and establishing of the mechanisms for peace and conflict resolution. The EFSVL approach will also strongly contribute to reduce the pressure on the both side of communities. Also support for host as well as refugees enables harmony. As a result of these activities, refugees and host communities will be better prepared to face possible future shocks.

## **5.6 Integration (e.g. reduction of disaster risks, children, human rights, gender equality, environmental impact, others to be specified)**

### **DRC**

Gender aspect is taken into consideration from the very beginning of any intervention, starting with initial evaluation by using specific gender tools. As example this allowed to identify specific women vulnerability regarding micronutrient deficiency and adapt the intervention to this specific need. In protection, there is a lack of women participation in public and they have a low decision power. Oxfam's Protection programme specifically works to empower women and to ensure that women's issues are taken into account in all actions. Community Protection Committees (CPCs – six women and six men) are trained to identify risks in their communities and actions which they can take to mitigate the risks identified. A Women's Forum (15 women) is also put in place and trained. They identify issues specific to women, and prioritise them. The priority issues are systematically included in action planning by the CPCs, and Women's Forum members are supported to raise issues with authorities. These approaches have shown significant impact in previous project phases. Registering women as households' heads (rather than their husband) will ensure they will be the direct recipient of the food/cash support.

Oxfam DRC, regional and global gender teams will support the project to ensure gender perspective is taken into account into decision making and ensure each one is respected. During

distributions, pregnant women, infants, elders and People with Special Needs will be the first to be served.

Gender and fight against discriminations are Oxfam's themes of preference. On the organisational level, Oxfam is encouraging positive discrimination in recruitment and women are preferred. Each Oxfam employees is signing the Code of Conduct. The Code is ensuring beneficiaries' protection against any sexual abuse from personal. It is absolutely prohibited to claim any services to beneficiaries of projects.

## UGA

Protection of and accountability to all refugees are to be strengthened through meaningful engagement with communities, with attention to at-risk groups. Mainstreaming and Strengthening of protection systems are aimed at enabling refugee women and girls to increase their awareness and ensure their full enjoyment of rights, reduction of SGBV risks and reinforced multi-sectoral response including through mainstreaming of SGBV across sectors. Peaceful co-existence among communities strengthened through enhancing of the community structures and the youths. This will be done through trainings and recreation activities support by establishing music dance and drama groups that will disseminate peaceful co-existence messages using drama. Recreation activities like play grounds will be opened which will bring together youths to play together and competitions between different villages will be organized to promote harmony between refugees and host community.

### **5.7 [INT] *In the event of changes or issues to be dealt with, please provide information***

An Oxfam initiative to enhance learning around the Triple Nexus and One program Approach was started at national level and a number of staff were involved. This initiative has helped generate discussion and document lessons on the way our humanitarian actors engage communities to build on their resilience and ensure long term impact. Follow-up events are expected in the next quarter.

### **5.8 [FIN] *In the event of changes or issues to be dealt with, please provide information***

As a result of the capacity building at national and field level Oxfam has developed projects with integration of the triple nexus approach. The one program approach is being embedded into Oxfam implementation. This is being done through mainstreaming of gender, peace building and enhancing environmental protection. Additionally there has been linkages between humanitarian interventions with the long term interventions within Oxfam's programming. This has been well demonstrated in the EUTF project. European Union Trust Fund project aimed at strengthening resilience through enhanced local disaster risk management capacities for local preparedness and resilience of refugees and host communities to improve natural resources management, disaster risk mitigation and early warning system.

## **6 SECURITY AND EMERGENCY MEASURES**

### **6.4 *Emergency measures (plan B/ mitigation measures to be taken if the risks and assumptions set out in the logical framework materialise)***

As part of Oxfam safe programming approach, each activity under this intervention, be it Food Security, WASH or Protection, will be analysed for potential risk of the intervention on beneficiaries, Oxfam staff and the community as a whole. Mitigation measures will be identified and each team will be responsible for monitoring the implementation of the measures identified for their respective sectors. The cross border nature of the programming will support our ability to link conflict analysis to the refugees/IDPs situation.

## DRC

### **Assumptions**



- 1) Beneficiaries are not forced to new involuntary displacements
- 2) Relationships between displaced and host communities remain calm.
- 3) Food prices remain stable on local markets.
- 4) FARDC presence in the area warrant population free movements, access to field lands and markets.

### **Risks**

- 1) IDPs sudden raise created by armed groups' violence.
- 2) Security and political disturbances on main markets in Butembo, Beni and Bunia, resulting to lack of availability and food prices volatility.

### **Contingency measures**

To ensure project acceptance and ownership, the beneficiaries targeting and local committees' creation strategies have to be transparent and well communicated through. In case of difficulties and reluctance, Oxfam will implies local authorities in the adaptation and changes to reach acceptance in order to continue activities.

#### **In case of insecurity:**

1. Discussion with DGD to relocate activities by refining intervention strategy if necessary to reach the needs of targeted beneficiaries.
2. Activities delayed based on agreement with DGD.

#### **In case of new displacements and returns**

1. Delay activities in case of temporary displacements.
2. Activities re-localisation where displaced population is ending if context and logistic allow.

#### **In case of tension between displaced and host communities**

1. Beneficiaries targeting will follow strict criteria based on vulnerabilities, established with local mixed committees. Therefore displaced and host communities members could benefit from the project based on their situation which will allow better cohabitation between the two groups.
2. Food vouchers distributions will also decrease thief risks in lands field of local communities and reduce intercommunity's tensions' risks.
3. Protection activities will encourage and generate spaces for discussions and contribute to reduce the negative survival strategies.

#### **In case of local markets price variations**

1. Revise strategy.
2. Reduce number of beneficiaries.
3. Revise the equivalent amount of assistance.

## **UGA**

### **Assumptions**

- 1 Oxfam will build on the lessons from other programme in the north Uganda particularly the ELHNA programme under the south Sudanese programme.
- 2 The CRRF, and other Government policies of ReHoPE are fully implemented and effected by various government and local structures.
- 3 There will be adequate sharing of information across both countries of Uganda and the DRC on the current and future trends in the displacement of people.
- 4 Useful approaches and lessons will be shared across the programmes.

### **Risks**

1. Risk of tensions between host communities and refugees that could even lead to localized conflict and temporarily interrupt activities;
2. Risks of tensions between different groups of refugees from different ethnic groups and / or regions that could even lead to localized conflict and temporarily interrupt activities;
3. Chaos due to arrivals of massive numbers of refugees from DRC if political situation continues to worsen;

4. Outbreak of epidemics that might affect project beneficiaries as well as volunteers' capacity to engage with action and could pose health risks to staff;
5. Risk of wrongful conduct (e.g. fraud, Sexual Abuse and Exploitation of beneficiaries by Oxfam and partner staff)
6. Finally, there is a risk of cholera outbreak in the settlements during rainy season or that can be caused by any new influx of refugees from areas where hygiene practices are poor

### **Contingency measures**

- Engagement with both hosts and refugees in all activities and ensuring they are briefed on the selection criteria and on how feedback on the interventions can be given and received. Oxfam and partners will ensure consistent messaging to harmonise expectations. Volunteers and local leaders will be engaged to pass on messages to the people.
- Oxfam ensures that each staff is oriented on and signs the code of conduct and safeguarding requirements and this is meant to enhance compliance with safety and protection requirements.
- As part of the WASH work, capacity of the community structures to deal with disease outbreaks related to Ebola and Cholera will be enhanced. Prevention messages will be integrated in health promotion around water, sanitation and hygiene.

## **6.5 Security-related aspects**

### **6.5.1 Situation in the field. Please provide a brief description**

#### **DRC**

Security is a permanent challenge for humanitarian actors to operate in DRC. The most in need areas are spread by militia and armed groups from different ethnical groups, background and without evident political projects. Most of the armed groups controlling a considerable proportion of the territory are playing a substitute role giving a false protective impression to the local population who is therefore supporting them. Among militia groups, alliances are formed and broken feeding alternations of hostilities and collaborations based on changed interests. However access to targeted areas under this project remain possible. Evaluated areas are hosting zones where security situations are "relatively calm". In Irumu territory on Komanda-Luna axe, only one security event has been registered during the evaluation time. It consisted of an armed group attack against FARDC which ended up by one death from military side during the night of December 3<sup>rd</sup> in Ngombenyama. In general the traffic on the main transit axe remain permanent. The population relative sense of security is reinforced by the military presence of FARDC and PNC (Police Nationale Congolaise) supported by MONUSCO.

In reverse, remaining presence of armed people in surrounding areas, is limiting people movements as well as access to field lands. Between Ndalya and Luna the population could not go beyond 5km distance of the main road because of security. Allied Democratic Forces (ADF) presence is presumed. Irumu South territory is also marked by FRPI militia activism and FARDC military action supported by MONUSCO.

In general, Oxfam has developed a security management system to minimise risks. SMP (Security Management Plan) is setting security rules and procedures for staff and project. It is reviewed and updated by all the SFP (Security Focal Point) from each Province under the NSA (National Security Advisor) supervision. This document sets security provincial teams responsible to constantly analyse the situation and produce weekly updates. Each week's main circulation axes security conditions are monitored to allow activities and movements of staff in the areas. Oxfam security system is also based on a wide information exchanges network with as example permanent contact with INSO (Security management NGO), UNDSS, la DRC "Police d'Intervention Rapide" and public information unit of UNOCHA. This network allows to have the most up to date information to monitor closely the context and adapt the intervention strategy.

#### **UGA**

There is a risk that tensions between refugees or between refugees and host communities over perceived inequalities compromises operational security, and achievement of project results – Low Likelihood – High Effect – Strategy: Clear communication around selection of project beneficiaries and partners, targeting of Refugees and vulnerable host communities, coupled with accessible Feedback Response and Resolution Mechanism (FRRM) and procedures mitigates risk of perceived unfairness and potential social tension. Security in the operational areas remains stable but cautious and the government security organs have established systems to minimize the risk of small arms being smuggled into the settlements. A police contingent has been provided but the numbers of deployed agents is low compared to the population to cover and there are limited provision of transportation means. Community watch groups have been trained to work as volunteers for security monitoring and reporting. Safety concerns related to EBOLA and Viral Hemorrhagic Fevers emanating from DRC and potentially among refugees is a major worry for both Kyaka and Arua settlements. Measures to address security concerns include:

Oxfam has a very detailed Safety and Security Management Plan (SSMP). The plan is reviewed annually and each time the situation significantly changes the plan is updated. It has very specific Standard Operational sub Plans (SOPs) for various scenarios. Security and risk management support will be provided to the response and partner teams, which include gathering of information, assessing of risks and supporting management decisions as per the guidelines. Additionally, security staff will be employed at offices (and stores) for security of project staff, equipment and materials procured during the project period will be provided. Oxfam and partners operational security concerns including possible thefts and accidents will be mitigated through joint assessments, harmonization of standard operating procedures, awareness raising and security training for response teams. Appropriate communication tools and equipment as well as maintained vehicles will be kept ensuring the teams are safe. Lastly, a flexible implementation plan, the ability to engage with OPM and UNHCR to influence settlement allocation along tribal lines to avoid tribal conflicts and the projected 30% allocation of resources for host communities will be among the contingency measures against security concerns.

**6.5.2 Has a specific security protocol been drawn up for this action?**

yes ☐ no ☒ Standard procedures

If yes, provide information:

**6.5.3 Have the staff in the field and the expatriates received information and training concerning these procedures?**

yes ☐ no ☐

N/A

**6.6 [INT] In the event of changes or issues to be dealt with, please provide information**

Refugee new arrivals have been stopped and continued restricted movements across the border is being enforced by government. Advocacy across the border on safety of those on transit is an issue to pursue.

EBOLA Outbreak in DRC increased risk among the people in districts along the border. There was fear among refugee population as cases were identified in DRC and at the porous borders which are not easy to control in terms of population movement. About 3 cases were confirmed but the Government and partners including Oxfam have controlled the any new infections and awareness is high among the population. This continues to threaten response actors and staff.

An EBOLA response plan was developed by Oxfam. Actions to prevent EVD cases are now being implemented in the settlement and at border points.

**6.7 [FIN] In the event of changes or issues to be dealt with, please provide information**

Currently Kyaka II is a receiving settlement for new arrivals and this has led to an emergency humanitarian response to address the current refugee critical needs. In addition COVID 19 still exists in Uganda. With the new arrivals coming in amidst this Covid 19 situation calls for more Covid 19 response interventions.

## **7 COORDINATION IN THE FIELD**

**7.4 Coordination sur le terrain (veuillez indiquer la participation de l'Organisation humanitaire aux mécanismes de coordination avec d'autres parties prenantes, tels que les « clusters », les ONG, les agences des Nations unies, autres (à spécifier), ainsi que les liens avec la procédure d'appel consolidée, si nécessaire)**

### **DRC**

Oxfam is actively involved into clusters' coordination (Food Security, Protection, WASH and NFIs) and is participating to coordination meetings in Provinces and Cash working group. By participating into clusters and coordination meetings, Oxfam is kept informed on the alerts and interventions led by RRMP and other actors. Oxfam is also using these meetings as an opportunity to launch alerts and carried out advocacy in the area they are covering.

Oxfam is also a member of CPIA and in contact with other food security actors in the area such as FAO and NRC.

### **UGA**

Field Management teams in Kyaka and Arua maintaining close engagement with OPM and UNHCR led coordination mechanisms. Key technical staff being available to provide inputs and links to other initiatives. Oxfam and EWB-USA in Kyaka as well as in Arua coordinates with other WASH and protection agencies particularly DRC, IOM, ACF, URCS, AHA, LWF, UNICEF, IRC, Save the Children, CARE and Medical Teams International. With Oxfam being the IP for WASH in Imvepi and Kyaka II in 2019, it implies that more coordination roles for the sector will be assigned. At settlement level – Oxfam and partners will ensure sharing of information on vulnerability and risks. The action will enhance participation in joint inter-agency assessments and verification missions.

**7.5 National and local authorities (relationships established, authorisations, coordination)**

### **DRC**

Oxfam keep good relationship with national and local governmental authorities as well as local local customary authorities. Local and provincial authorities are consulted to evaluate needs and data are shared with competent Ministries through cluster system. At national level, Oxfam is presenting a yearly report to Ministry of Plan and has maintain its ONG status in DRC since the early sixties.

### **UGA**

Under the localization agenda, Oxfam plans to work with the local government in strengthening

coordination and leadership regarding refugee affairs, Oxfam plans to work with the social services department and the district disaster management committees to ensure plans at the district meet the needs of refugees and hosts affected by the continued influx and displacements.

As guided by the CRRF and ReH OPE guidelines of the Uganda Government, districts are called to lead on the coordination and involvement in refugees' affairs. However, as a new phenomenon and as OPM's office has been playing a central role in the management of refugees, additional capacity and district level structuring of how this process is to unfold will be important. Oxfam's vision is to have the district play their roles in order to see the full participation of the locals in identifying the needs and how these needs are reflected in the national agenda. Oxfam expects the district of Kegegwa to play the following roles: -

Work closely with Oxfam and other partners in Profiling of all actors operating within Kyegegwa and their areas of competency, the ultimate result would be a 4Ws that provides understanding of who is playing what role within the communities.

Work with other partners to identify refugees' needs through community level engagement, producing local level action plans that would be integrated in district disaster and development plans and then rolled into national level plans.

Organize routine coordination meetings with all partners involved in the refugee response as part of accountability and ensuring best resource allocation practices.

Providing leadership and linkage with various donors, country level influencing and engagements.

#### **7.6 Potential coordination with the Belgian diplomatic representation**

Oxfam will regularly brief and organize meetings to inform the Belgian Diplomatic Representation present in the country about the progress of the current project, as well as the context of intervention. Oxfam will also organize field visits by teams from the Belgian Diplomatic Representation as required to show them the facilities and operations. If coordination mechanisms are organized by the Belgian Cooperation, Oxfam will actively participate. Oxfam will also inform other Belgian Cooperation's offices as well as Representations in the region if a changing context in DRC might have an impact on neighbouring countries.

#### **7.7 [INT] In the event of changes or coordination issues to be dealt with, please provide information**

Oxfam has continued to engage with the UNHCR and OPM and with the National Inter-agency and sector coordination forums for WASH, Livelihoods, GBV and protection. We are also an active member of the Refugee INGO forum that champions joint advocacy for INGOs on refugee response and management aspects.

Through the project steering committee and directly, we are beginning to establish linkages with the DRC Project team to share approaches and relevant information. For example we have been sharing baseline tools and assessment reports.

Our field team in West Nile region, north of Uganda supported a Belgium Government Mission to the refugee response there along with UNHCR and other actors. Oxfam had previously received funding for response in this area including the livelihood support through ENABEL. We are continuing to explore opportunities for further engagement with the Belgian Diplomatic Representation in Uganda.

#### **7.8 [FIN] In the event of changes or coordination issues to be dealt with, please provide information**

N/A

## 8 IMPLEMENTATION PARTNERS

### ***8.4 Name and address of the implementation partner(s)***

#### **DRC**

Under this action, Oxfam in DRC plans to work through partners mainly for Protection activities (result 3). Oxfam DRC has a list of protection partners, they wish to assess prior to starting the action. This will be done in the month prior to the implementation time to allow smooth start of the activities after signing Memorandum of Understanding (MoU).

#### **UGA**

Oxfam in Kyaka has been implementing directly without local partner due to the short nature of projects and the emergency nature that required quick delivery of services. The Recent RRM SIDA programme lasted only 3 and half months and the current APPEAL fund will last for only four months. The process of partnership requires quite some time to ensure partners are recruited and provided with capacity to implement activities on their own without strict monitoring. Oxfam under this project will recruit one Protection partner as a starting point for engaging local actors in the area. The process will involve assessment of existing local partners, recruitment of potential partner, capacity building, MOU and supporting the implementation. One of the long-time partners for Oxfam in the north for example UYRD does operate in Kyaka II running SGBV prevention sessions and referral. With the localization agenda and district taking coordination lead. Kyegegwa district local government encourages international partners to consider locally available organization in the districts to be supported as part of the 30% contribution to the local initiatives

Under this action, Oxfam UGA will assess their partners to identify who is the best placed to support their protection and EFSVL (mainly cash support) activities.

### ***8.5 Status of the implementation partners (e.g.: NGOs, local authorities, etc.) and the role played by them***

Partners will be registered organisations with clear status related to national legislation.

### ***8.6 Type of relationship with the implementation partner(s) and the reports expected from the implementation partner***

Oxfam will subcontract some activities to local partners for implementation, through mutual partnership, partners will work closely with Oxfam to plan, implement and report the programme progress. Partners will provide weekly updates, quarterly and annual financial and narrative reports.



During pre-scheduled planning, partners will participate in Oxfam capacity building activities, resource mobilization, joint monitoring and evaluations.

**8.7 [INT] In the event of changes, please provide information**

As planned, Oxfam established partnership with a local Gender and Protection partner, African Women and Youth Action for Development (AWYAD). The partner also works with Oxfam in the North in response to South Sudanese refugees on similar initiatives.

Under food security and livelihood sector, Oxfam established partnership with a local partner, Joint Effort to Save the environment( JESE) to implement livelihood interventions.

**8.8 [FIN] In the event of changes, please provide information**

N/A

## **9 ACTIVITÉS DE COMMUNICATION, DE VISIBILITÉ ET D'INFORMATION**

**9.4 Planned communication activities**

Oxfam aims to ensure that project beneficiaries and the wider community, both in country and internationally, appreciate the Kingdom of Belgium's involvement in, and motivation for, the humanitarian work of the project. The target audience will include: Local Authorities, community leaders, community members, beneficiaries and local staff in the project areas. Oxfam staff, individual donors and supporters internationally through Oxfam's website: [www.oxfam.org](http://www.oxfam.org)

**Outreach on durable equipment, the main supplies and on the project location**

Visibility will be ensured by various means including:

During community and review meetings, project staff will inform the beneficiaries of the sources of funding. Information boards, which will be erected at each site, will identify that the project is a 'Gift of the Belgian Government'. Vehicles, assets, buildings, and meeting sites will be clearly marked, in both French and local languages, with the 'Gift of the Belgian Government' stickers/signs. Any seed distributed to beneficiaries will be done from sacks printed with 'Gift of the Belgian Government'.

**9.5 Publication activities planned**

At least 1 position paper will be developed using national advocacy points to feed regional level advocacy.

**9.6 [INT] In the event of changes, please provide information**

No changes in plan

**9.7 [FIN] Report on relevant activities**

N/A

**10 HUMAN RESOURCES****10.4 Please state the overall figures by function and by status****DRC**

Function	%	Status <sup>31</sup>	Number of people	Number of months/days in the project	Comments
Partner Staffing	100%	Partner Local Staff	4	20 months	Based in Ituri
PH Team Leader/ PM- WASH D1	20%	Local Staff	1	20 months	Based In Ituri
EFSL Team leader/ PM – D1	20%	Local Staff	1	20 months	Based In Ituri
Protection- Advocacy Gender Team leader/ PM – D1	30%	Local Staff	1	20 months	Based in Ituri
PHE Officer – D2	50%	Local Staff	1	20 months	Based In Ituri
PHE Assistants – E1	100%	Local Staff	1	20 months	Based In Ituri
PHP Officer – D2	40%	Local Staff	1	20 months	Based In Ituri
PHP Assistants – E1	100%	Local Staff	1	20 months	Based In Ituri
Protection Officer – D2	40%	Local Staff	1	20 months	Based In Ituri
Protection Assistants – E1	100%	Local Staff	1	20 months	Based In Ituri
EFSL Officer – D2	40%	Local Staff	1	20 months	Based In Ituri
EFSL Assistants – E1	100%	Local Staff	1	20 months	Based In Ituri
MEAL Officer – D1	20%	Local Staff	1	20 months	Based In Ituri
MEAL Assistant- E1	50%	Local Staff	1	20 months	Based In Ituri
Finance Officer – D2	15%	Local Staff	1	20 months	Based In Ituri
Finance Assistant – E1	40%	Local Staff	1	20 months	Based In Ituri
HR / Admin Manager C1	5%	Local Staff	1	20 months	Kinshasa
HR / Admin Officer – D2	30%	Local Staff	1	20 months	Based In Ituri
Roving Logistics Officer – C1	15%	Local Staff	1	20 months	Goma

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31 Expatriates, local staff, staff of the implementation partner, etc.

Logistics Officer – D2	20%	Local Staff	1	20 months	Based In Ituri
Logistics Assistant – E1	20%	Local Staff	1	20 months	Based In Ituri
Mechanist&Fleet log Assistant – E2	20%	Local Staff	1	20 months	Based In Ituri
Driver – F1	25%	Local Staff	4	20 months	Based In Ituri
Cleaner/Cook Field bases – F2	20%	Local Staff	3	20 months	Based In Ituri
IT Officer- D2	15%	Local Staff	1	20 months	Goma
National Safety and Security Coordinator D1	5%	Local Staff	1	20 months	Goma
Regional Influencing and Campaigns Advisor	100%	Local Staff-OI	1	40 days	Nairobi
Humanitarian Coordinator – OI	100%	OI – Expatriate	1	25 days	Nairobi
Protection Advisor -OI	100%	OI– Expatriate	1	40 days	Nairobi
Humanitarian Programme Coordinator – B2	10%	Expatriate	1	20 months	Goma
Protection Manager – C2	10%	Expatriate	1	20 months	Goma
Advocacy Manager C2	5%	Expatriate	1	20 months	Goma
WASH Coordinator – C1	10%	Expatriate	1	20 months	Goma
EFSL Coordinator – C2	10%	Expatriate	1	20 months	Goma
Emergency Response Coordinator (Roving)	5%	Expatriate	1	20 months	Goma
Field Manager – C1	10%	Expatriate	1	20 months	Based In Ituri
Finance Manager – C2	10%	Expatriate	1	20 months	Goma
Funding Advisor _ C2	5%	Expatriate	1	20 months	Kinshasa
Logistics Manager – C2	10%	Expatriate	1	20 months	Goma

### UGA

Function	%	Status <sup>32</sup>	Number of people	Number of months/days in the project	Comments
Regional Influencing & Campaigns Advisor cost	100%	OI- Local Staff	1	25 days	Nairobi
Response Manager/Field Office Team Leader	25%	Local Staff	1	15 months	Kyaka II
PHE Team Leader	30%	Local Staff	1	15 months	Kyaka II
PHP Team Leader	30%	Local Staff	1	15 months	Kyaka II

32 Expatriates, local staff, staff of the implementation partner, etc.

PHEO	30%	Local Staff	1	15 months	Kyaka II
PHPO	30%	Local Staff	1	15 months	Kyaka II
EFSVL Coordinator	50%	Local Staff	1	15 months	Kyaka II
Finance Officer	30%	Local Staff	1	15 months	Kyaka II
Logistic&Admin Officer	30%	Local Staff	1	15 months	Kyaka II
Gender and Protection Coordinator-Kyaka	10%	Local Staff	1	15 months	Kyaka II
Protection Officer	30%	Local Staff	1	15 months	Kyaka II
MEAL Officer	30%	Local Staff	1	15 months	Kyaka II
Driver	75%	Local Staff	1	15 months	Kyaka II
Grants and Contracts Coordinator	10%	Local Staff	1	15 months	Kampala
Emergency Human Resources Officer	20%	Local Staff	1	15 months	Kampala
Emergency Coordinator	20%	Local Staff	1	15 months	Kampala
Humanitarian Program Manager	15%	Local Staff	1	15 months	Kampala
Logistics Coordinator	10%	Local Staff	1	15 months	Kampala/Kyaka II
WASH Coordinator/Advisor	20%	Local Staff	1	15 months	Kampala/Kyaka II
Head Office finance and operations manager	5%	Local Staff	1	15 months	Kampala
Media & Communication Coordinator	5%	Local Staff	1	15 months	Kampala
Programme quality and learning coordinator	20%	Local Staff	1	15 months	Kampala/Kyaka II
Programme Partnership coordinator	15%	Local Staff	1	15 months	Kampala/Kyaka II
Programme administrator	5%	Local Staff	1	15 months	Kampala
Women rights advisor	15%	Local Staff	1	15 months	Kampala
Other support staff – National Accountant	5%	Local Staff	1	15 months	Kampala/Kyaka II
Partner Gender and Protection Officer	100%	Partner – Local Staff	1	18 months	Kyaka II
Community Based Volunteers	100%	Partner – Local Staff	18	10 months	Kyaka II
Partner Executive Director (for protection and EFSVL)	10%	Partner – Local Staff	2	18 months	Not yet Selected
Partner MEL officer (Protection and EFSVL)	50%	Partner – Local Staff	2	18 months	Not yet selected
Partner Finance Officer (Protection and EFSVL)	50%	Partner – Local Staff	2	18 months	No partner selected yet

Partner Admin/log officer	100%	Partner local staff	2	18 months	No partner selected yet
EFVL Officer	100%	Partner – Local Staff	1	18 months	Kyaka II
EFSVL Assistant	100%	Partner – Local Staff	1	18 months	Kyaka II
Humanitarian Coordinator – OI	100%	OI – Expatriate	1	14 days	OI
Advisor – Protection -OI	100%	OI – Expatriate	1	25 days	OI
Technical support (regional or global)	5%	Expatriate	1	15 months	Region
PHE HSP International	10%	Expatriate	1	20 months	Kyaka II/Kampala
EFSVL Advisor	5%	Expatriate	1	15 months	Kampala/region
Funding Programme Manager	5%	Expatriate	1	15 months	Kampala

#### **10.5 [INT] In the event of changes, please provide information**

The Emergency Coordinator left the organisation. EFSVL partner staff have been engaged in EFSVL implementations since March 2020.

#### **10.6 [FIN] In the event of changes, please provide information**

N/A

### **11 ADMINISTRATIVE INFORMATION**

#### **11.1 Name and title of the legal representative signing the agreement**

Floor Overbeeke  
 Directrice du département Programme et Plaidoyer  
 60 Rue des Quatre-Vents, 1080 Bruxelles, Belgique  
 T : +32 (0)2 501 67 31  
 fov@oxfamsol.be

#### **11.2 Name, telephone number, e-mail address and titles of the person(s) responsible for the management of the dossier**

Elisa Scheuer  
 Institutional Partnership Manager – DGD Humanitaire  
 60 Rue des Quatre-Vents, 1080 Bruxelles, Belgique  
 T : +32 (0)2 501 67 41  
[elisa.scheuer@oxfam.org](mailto:elisa.scheuer@oxfam.org)

**11.3 Name, telephone and fax number and e-mail address of the representative in the intervention area**

<b>DRC</b> Chals Wontewe Directeur Pays Interim Oxfam Kinshasa, RDC Mob: +243 (0)816 912 700   Sat : +8821652400678   Skype: chals.wontewe1   www.oxfam.org	<b>Uganda</b> Francis Shanty Odokorach Country Director Oxfam Uganda, P.O. box 6228   Plot No. 3459, Tank Hill Rd. Muyenga, Kampala, Uganda Tel. +256 (0) 414-390500   Cell: +256-709 020838/+256 781 221295 Email : Francis.Odokorach@oxfam.org
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**11.4 Bank account**

Name of the bank: CBC Banque SA  
Address of the bank agency: Boulevard du Souverain 36 B10, 1170 Bruxelles  
Account holder: OXFAM-SOLIDARITE ASBL  
Complete account number (including bank code(s)):  
IBAN code: BE40 7320 4947 1263  
SWIFT code: CREGBEBB

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## 12. FINANCIAL OVERVIEW

REF. UGAUA004					
Budget Line	Title	Approved Budget	Expenditure	Remaining Budget	Expenditure Ratio
<b>S1</b>	<b>Goods and services delivered to beneficiaries</b>	€ 591,928	€ 572,634	€ 19,294	<b>97%</b>
S10	GENDER AND PROTECTION activities	€ 162,500	€ 150,601	€ 11,899	93%
S11	EFSVL activities	€ 51,000	€ 51,540	€ - 540	101%
S12	Water and sanitation related goods and services	€ 219,500	€ 237,672	€ - 18,172	108%
S13	Advocacy	€ 55,595	€ 27,372	€ 28,223	49%
S16	Cash for Work / Cash distribution program (vouchers) related goods and services	€ 71,429	€ 84,203	€ - 12,775	118%
S17	Planification, follow-up and evaluation workshops related goods and services	€ 31,905	€ 21,247	€ 10,658	67%
<b>S2</b>	<b>Equipment</b>	€ 21,071	€ 20,738	€ 333	<b>98%</b>
S20	Durable equipment (>500EUR)	€ 14,167	€ 16,361	€ - 2,194	115%
S21	Other	€ 6,905	€ 4,377	€ 2,528	63%
<b>S3</b>	<b>Human Resources</b>	€ 257,819	€ 278,532	€ - 20,713	<b>108%</b>
S30	Local Staff	€ 225,600	€ 242,292	€ - 16,692	107%
S31	Expatriates staff	€ 32,219	€ 36,240	€ - 4,021	112%
<b>S4</b>	<b>Running costs</b>	€ 226,164	€ 215,355	€ 10,809	<b>95%</b>
S40	Running costs of vehicles	€ 121,147	€ 104,159	€ 16,989	86%
S41	Travel costs	€ 51,554	€ 36,632	€ 14,923	71%
S42	Communication, visibility, information	€ 11,963	€ 17,474	€ - 5,511	146%

S43	Buildings: rents and utilities	€ 35,995	€ 45,822	€ - 9,826	127%
S44	Supplies and materials	€ 4,476	€ 2,534	€ 1,942	57%
S45	External services	€ 1,029	€ 8,735	€ - 7,707	849%
<b>S7</b>	<b>Other costs</b>	€ 36,188	€ 1,159	€ 35,029	<b>3%</b>
S70	Bank and transfer costs	€ 3,307	€ 708	€ 2,599	14%
S71	Evaluation/Audits	€ 25,381	€ 451	€ 24,930	0%
S72	HQ Mission cost	€ 7,500	€ -	€ 7,500	0%
S73	Others	€ -	€ -	€ -	0%
	<b>TOTAL DIRECT COSTS</b>	€ 1,133,172	€ 1,088,419	€ 44,753	<b>96%</b>
<b>OX</b>	<b>Administrative costs</b>	€ 62,324	€ 59,863	€ 2,461	<b>96%</b>
	<b>TOTAL COSTS</b>	€ 1,195,496	€ 1,148,282	€ 47,214	<b>96%</b>

REF.	RDCUA139				
Budget Code	Titles	Budget RDC	Expenditure	Remaining Budget	Expenditure Ratio
<b>S1</b>	<b>Goods and services delivered to beneficiaries</b>	<b>€ 1.149.362</b>	<b>€ 1.128.016</b>	<b>€ 21.346</b>	<b>98%</b>
S10	GENDER AND PROTECTION activities	€ 157.893	€ 155.530	€ 2.363	99%
S11	Food security related goods and services	€ 16.532	€ 15.734	€ 798	95%
S12	Water and sanitation related goods and services	€ 564.455	€ 581.329	-€ 16.875	103%
S13	Advocacy	€ 40.000	€ 35.516	€ 4.484	89%
S14	Shelter and Non Food Items related goods and services	-	€ 0	€ 0	0%
S15	Disaster Risk Reduction related goods and services	-	€ 0	€ 0	0%
S16	Cash for Work / Cash distribution program (vouchers) related goods and services	€ 329.073	€ 313.941	€ 15.132	95%
S17	Planification, follow up and evaluation workshops related goods and services	€ 41.409	€ 25.966	€ 15.443	63%
<b>S2</b>	<b>Equipment</b>	<b>€ 44.390</b>	<b>€ 39.534</b>	<b>€ 4.856</b>	<b>89%</b>
S20	Durable equipment (>500EUR)	€ 32.571	€ 27.995	€ 4.576	86%
S21	Other	€ 11.818	€ 11.539	€ 280	98%
<b>S3</b>	<b>Human Resources</b>	<b>€ 413.093</b>	<b>€ 419.741</b>	<b>-€ 6.648</b>	<b>102%</b>
S30	Local Staff	€ 314.674	€ 382.051	-€ 67.377	121%
S31	Expatriates staff	€ 98.419	€ 37.690	€ 60.729	38%
<b>S4</b>	<b>Running costs</b>	<b>€ 348.450</b>	<b>€ 355.804</b>	<b>-€ 7.353</b>	<b>102%</b>
S40	Running costs of vehicles	€ 51.318	€ 70.232	-€ 18.914	137%
S41	Travel costs	€ 83.864	€ 85.097	-€ 1.233	101%
S42	Communication, visibility, information	€ 35.450	€ 43.526	-€ 8.076	123%
S43	Buildings: rents and utilities	€ 101.000	€ 93.071	€ 7.929	92%
S44	Supplies and materials	€ 52.273	€ 54.095	-€ 1.822	103%

S45	External services	€ 24.545	€ 9.782	€ 14.764	40%
<b>S7</b>	<b>Other costs</b>	<b>€ 12.727</b>	<b>€ 23.304</b>	<b>-€ 10.577</b>	<b>183%</b>
S70	Bank and transfer costs	€ 9.000	€ 18.542	-€ 9.542	206%
S71	Evaluation/Audits	€ 0	€ 0	€ 0	0%
S72	HQ Mission cost	€ 0	€ 0	€ 0	0%
S73	Others	€ 3.727	€ 4.762	-€ 1.035	128%
	<b>TOTAL DIRECT COSTS</b>	<b>€ 1.968.022</b>	<b>€ 1.966.399</b>	<b>€ 1.623</b>	<b>100%</b>
<b>OX</b>	<b>Administrative costs</b>	<b>€ 108.241</b>	<b>€ 108.152</b>	<b>€ 89</b>	<b>100%</b>
	<b>TOTAL COSTS</b>	<b>€ 2.076.263</b>	<b>€ 2.074.551</b>	<b>€ 1.712</b>	<b>100%</b>

## Annexes

### Annex 1: Reports

- ✓ Gender in emergency assessment- October 2019:
- ✓ Gender and protection audit on WASH facilities– October 2019;
- ✓ Beneficiaries seed needs assessment – May 2019:
- ✓ Solar lights needs assessment – September 2019:
- ✓ Rapid Gender Analysis – Covid 19 Report
- ✓ PDM report for Assorted Seeds – EFSVL:
- ✓ PDM Report for Business Grants- Kyaka II settlement:
- ✓ PDM Report for Fuel Efficient Stoves- Kyaka II settlement:
- ✓ PDM Report for WASH NFIs- Kyaka II settlement- April 2021

Oxfam Box Link: <https://oxfam.box.com/s/x4dp061r72cu1gl9ub89xyb4vbdz1yt4>

### Annex 2: Most Significant Change Stories

- ✓ Rebuilding Life After Tragedy – December 2020: <https://uganda.oxfam.org/rebuilding-life-after-tragedy-0>
- ✓ Financial Aid Boosts Refugee Livelihoods – December 2020: <https://uganda.oxfam.org/latest/stories/financial-aid-boosts-refugee-livelihoods>
- ✓ RUHABU FOLLOWS HER DREAMS THROUGH TAILORING – December 2020: <https://uganda.oxfam.org/latest/stories/ruhabu-follows-her-dreams-through-tailoring>

### Annex 3: Blogs

- ✓ PROTECTING THE ENVIRONMENT THROUGH ENERGY SAVING STOVES – May 2020: <https://uganda.oxfam.org/latest/blogs/protecting-environment-through-energy-saving-stoves>

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<sup>i</sup> Monthly WASH GAP matrix