

Democratic Republic of Congo



Mid-Year Review

Humanitarian Action Plan 2007



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TABLE OF CONTENTS

| | |
|--|-----------|
| 1. EXECUTIVE SUMMARY | 1 |
| Table I: Summary of Requirements and Funding – By Cluster..... | 3 |
| Table II: Summary of Requirements and Funding – By Recipient Organisation..... | 4 |
| 2. CHANGES IN THE CONTEXT AND HUMANITARIAN CONSEQUENCES | 5 |
| 2.1. EVOLUTION OF THE CONTEXT | 5 |
| 2.2. SCENARIOS | 5 |
| 2.3. AGGRAVATING FACTORS AND CONSEQUENCES..... | 6 |
| 2.3.1. <i>Acute crises</i> | 6 |
| 2.3.2. <i>Chronic crises</i> | 7 |
| 2.4. EVOLUTION OF HUMANITARIAN NEEDS..... | 8 |
| 2.5. SUMMARY OF PRIORITY NEEDS | 9 |
| 3. REVIEW OF THE COMMON HUMANITARIAN ACTION PLAN (CHAP) | 10 |
| 3.1. SUMMARY | 10 |
| 3.2. STRATEGIC PRIORITIES..... | 10 |
| 3.3. SECTORAL RESPONSE PLANS | 11 |
| 3.3.1. <i>Health</i> | 11 |
| 3.3.2. <i>Nutrition</i> | 12 |
| 3.3.3. <i>Food Security</i> | 13 |
| 3.3.4. <i>Non-Food Items/Shelter</i> | 14 |
| 3.3.5. <i>Water and Sanitation (Watsan)</i> | 15 |
| 3.3.6. <i>Protection</i> | 15 |
| 3.3.7. <i>Logistics</i> | 17 |
| 3.3.8. <i>Reintegration and Community Recovery (Early Recovery)</i> | 17 |
| 3.3.9. <i>Education</i> | 18 |
| 3.3.10. <i>Emergency Telecommunications</i> | 19 |
| 3.3.11. <i>Coordination</i> | 19 |
| 4. FUNDING AND PROJECTS | 21 |
| 5. CONCLUSION..... | 21 |
| LIST OF FUNDED PROJECTS AND UNFUNDED REQUIREMENTS PER CLUSTER | 24 |
| ANNEX I. ADDITIONAL FUNDING TABLES..... | 45 |
| ANNEX II. ACRONYMS AND ABBREVIATIONS | 49 |
| ANNEX III. MAPS..... | 51 |

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Democratic Republic of Congo



1. EXECUTIVE SUMMARY

Despite successful elections and the surrender of several armed groups, an alarming number of people in the Democratic Republic of the Congo (DRC) still require life-saving assistance and support to become self-sufficient. Armed conflict is far from over in parts of the country and the current ominous crisis in the provinces of North and South Kivu gives cause for serious concern, such that humanitarian actors have twice revised emergency contingency plans since the beginning of 2007 to meet the needs of increasing numbers of displaced civilians. While difficult access and insecurity remain the two main challenges for humanitarian actors, lack of Government capacity and motivation and limited availability of baseline data seriously impede provision of adequate assistance. While armed violence is narrowing largely to events in the Kivu Provinces, the type of assistance needed is essentially unchanged but greater demands are being placed on rapid emergency response.

The year has seen large-scale returns, but also new displacements. Since the beginning of 2007, more than 150,000 people have been displaced in North Kivu alone, the highest rate of displacement in over three years. Conversely, in the province of Katanga and the district of Ituri (Oriental Province) the surrender and disarmament of several militia groups has improved security considerably and allowed the return of an estimated 611,000 internally displaced persons since mid-2006. The first six months of 2007 also witnessed the voluntary return of some 21,000 Congolese refugees, mainly from Tanzania, the Republic of Congo, and Zambia to the provinces of South Kivu, Katanga and Equateur. A new repatriation axis was opened from Zambia to the DRC in April 2007: this constitutes the first time in years that refugee return is being facilitated to Katanga. Returnees face abject poverty and the absence of public services; thus reintegration remains a great challenge. At the same time, some 9,100 Angolan, Rwandan and Sudanese refugees in DRC were repatriated between January and May 2007.

Attention has recently been drawn to protracted acute humanitarian needs in the western provinces, and the needs of victims of natural disasters. Although spared from armed conflict, several evaluation missions have revealed critical rates of malnutrition and extreme vulnerabilities in the Kasaï, Oriental, Bandundu and Equateur Provinces. Moreover, towards the end of 2006 and the beginning of 2007, the DRC experienced its worst floods in ten years, which affected approximately 200,000 people and destroyed crops on a massive scale in Equateur, Katanga, and Oriental Provinces. To some in the humanitarian community, this served as a warning of the potential effects of climate change and the need to increase capacity to respond to victims of natural disasters. As a further indication of the scope of emergency needs, the inter-agency Rapid Response Mechanism¹ assisted roughly 488,000 people in the first four months of the year throughout the country with various forms of assistance, and another 500,000 victims of cholera were assisted by water and sanitation activities during the first half of 2007, primarily in the Kivus.

Cluster coordination groups report both encouraging achievements and important challenges. In 2005-2006, mortality rates related to epidemics were generally reduced due to a more adequate and timely response, and vaccination coverage was increased. The water and sanitation cluster reported that, on average, access to potable water in the eastern provinces has increased by 6% since the beginning of the year. In several areas, such as Ituri and South Kivu, the concerted effort of a number of non-governmental organisations has seen global and severe malnutrition rates significantly reduced. Nonetheless, recent surveys in North Kivu and western provinces have revealed alarming rates of malnutrition which need immediate attention. Protection cluster members also established the first comprehensive protection monitoring project in North Kivu. Priorities are still focused on emergency response particularly in North and South Kivu, the protection of civilians, return and reintegration, and increasing humanitarian access to vulnerable populations. Two new priorities have been added for the remainder of 2007: more attention needs to be given to acute protracted humanitarian crises across all provinces, and determined efforts need to be made to produce improved humanitarian analysis and baseline data for all clusters.

As of 10 July, the DRC 2007 Humanitarian Action Plan had received **\$254,905,538²** from governmental and private donors (much channelled through the Pooled Fund) and the CERF under-funded window. This amount represents **37.1%** of the total 2007 HAP funding requirements.

¹ The Rapid Response Mechanism is jointly managed by UNICEF and OCHA with a network of NGO implementing partners.

² All dollar figures in this document are United States dollars. Funding for this appeal should be reported to the Financial Tracking Service (FTS, fts@reliefweb.int), which will display its requirements and funding on the CAP 2007 page.

Some basic facts about the Democratic Republic of the Congo

| | |
|--|---|
| ➤ Population | 61,200,000 (UNFPA SWP 2007) |
| ➤ Under 5 mortality | 205 p/1,000 (UNICEF 2005) |
| ➤ Life expectancy | 44 years (UNDP HDR 2006) |
| ➤ Prevalence of undernourishment in total population | 74% (FAO Statistical Division 2004 estimate) |
| ➤ Gross national income per capita | \$120 (World Bank Key Development Data & Statistics 2005) |
| ➤ Percentage of population living on less than \$1 per day | N/A |
| ➤ Proportion of population without sustainable access to an improved drinking water source | 54% (UNDP HDR 2006) |
| ➤ IDPs (number and percent of population) | 1,121,979 (1.8%) (MYR 2007) |
| ➤ Refugees | |
| ➤ In-country | 200 373 (MYR 2007) |
| ➤ Abroad | 322,562 (MYR 2007) |
| ➤ ECHO Vulnerability and Crisis Index score (V/C) | 3/3 (most severe rank) |
| ➤ 2006 UNDP Human Development Index score | 0.391: 167 th of 177 – low |

- Also:**
- 250,000 people were forced to flee their homes in the last 6 months
 - 4.5% of the Congolese population is HIV-positive
 - There are an estimated 111,000,000 cases of malaria a year: 43% of these will affect children under seven
 - The acute malnutrition global rate of children under 5 is 16%, chronic malnutrition is 38%
 - The maternal mortality rate of 1,289/100,000 live births is one of the highest in the world with 36,000 maternal deaths per year
 - Sexual and gender-based violence levels are horrendous: in Ituri Province alone, 2,311 cases were registered in January-April 2007 (25 cases/day). 43% of SGBV victims are minors.
 - Almost 200,000 persons were affected by floods in the past 7 months; 28,000 people were displaced as a result.
 - Some 611,000 IDPs returned home in the period July 2006 - May 2007. In the first half of 2007, 21,000 Congolese refugees returned to the country, while 9,100 refugees in DRC returned to Angola, Rwanda and Sudan.
 - More than 20,000 cases of cholera are reported annually, 80,000 of measles and 3,500 of meningitis.
 - Net primary school enrolment for children between 6 and 11 years of age is of 51%; First grade enrolment rate is estimated at 17%.

Table I: Summary of Requirements and Funding – By Cluster

| |
|---|
| <p>Table I: Democratic Republic of Congo Humanitarian Action Plan 2007 List of Appeal Projects (grouped by cluster), with funding status of each as of 10 July 2007 http://www.reliefweb.int/fts</p> |
|---|

Compiled by OCHA on the basis of information provided by donors and appealing organisations

| CLUSTER | Original Requirements | Revised Requirements | Funding | % Covered | Unmet Requirements | Uncommitted Pledges |
|------------------------------|-----------------------|----------------------|--------------------|------------|--------------------|---------------------|
| Value in US\$ | A | B | C | C/B | B-C | D |
| CLUSTER NOT YET SPECIFIED | - | - | 50,455,987 | - | (50,455,987) | 9,210,526 |
| COORDINATION | 14,724,225 | 14,724,225 | 19,071,276 | 130% | (4,347,051) | - |
| ECONOMIC RECOVERY | - | - | 3,225,762 | - | (3,225,762) | - |
| EDUCATION | 26,851,844 | 26,851,844 | 2,522,088 | 9% | 24,329,756 | - |
| EMERGENCY SHELTER | 43,017,000 | 43,017,000 | 6,248,120 | 15% | 36,768,880 | - |
| EMERGENCY TELECOMMUNICATIONS | 674,965 | 674,965 | - | 0% | 674,965 | - |
| FOOD SECURITY | 196,215,562 | 196,215,562 | 74,161,871 | 38% | 122,053,691 | - |
| HEALTH | 98,763,353 | 98,763,353 | 22,924,181 | 23% | 75,839,172 | - |
| LOGISTICS | 85,427,755 | 85,427,755 | 15,750,143 | 18% | 69,677,612 | - |
| MULTI-SECTOR | - | - | 2,902,107 | - | (2,902,107) | - |
| NUTRITION | 24,940,418 | 24,940,418 | 3,880,794 | 16% | 21,059,624 | - |
| PROTECTION | 66,737,985 | 66,737,985 | 37,636,389 | 56% | 29,101,596 | - |
| RECOVERY & REINTEGRATION | 29,307,000 | 29,307,000 | 1,669,136 | 6% | 27,637,864 | - |
| SHELTER | - | - | 1,105,874 | - | (1,105,874) | - |
| WATER & SANITATION | 99,931,000 | 99,931,000 | 13,351,810 | 13% | 86,579,190 | - |
| Grand Total | 686,591,107 | 686,591,107 | 254,905,538 | 37% | 431,685,569 | 9,210,526 |

NOTE: "Funding" means Contributions + Commitments + Carry-over

- Pledge:** a non-binding announcement of an intended contribution or allocation by the donor. ("Uncommitted pledge" on these tables indicates the balance of original pledges not yet committed).
- Commitment:** creation of a legal, contractual obligation between the donor and recipient entity, specifying the amount to be contributed.
- Contribution:** the actual payment of funds or transfer of in-kind goods from the donor to the recipient entity.

The list of projects and the figures for their funding requirements in this document are a snapshot as of 10 July 2007. For continuously updated information on projects, funding requirements, and contributions to date, visit the Financial Tracking Service (www.reliefweb.int/fts).

Table II: Summary of Requirements and Funding – By Recipient Organisation

Table II: Democratic Republic of Congo Humanitarian Action Plan 2007

Commitments/Contributions and Pledges per Appealing Organisation

as of 10 July 2007

<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by Donors and Appealing Organisations

| APPEALING ORGANISATION | Original Requirements | Revised Requirements | Funding | % Covered | Uncommitted Pledges |
|--------------------------------------|-----------------------|----------------------|--------------------|------------|---------------------|
| Values in US\$ | A | B | C | C/B | D |
| ACF/USA | | | 2,716,538 | | |
| ACTED | | | 3,962,125 | | |
| ADRA Denmark | | | 621,416 | | |
| AMI-France | | | 3,497,268 | | |
| ASF | | | 413,098 | | |
| ASI | | | 4,208,988 | | |
| ATGL | | | 200,448 | | |
| CARITAS | | | 1,520,356 | | |
| COOPI | | | 4,514,679 | | |
| DAC Aviation International | | | 10,245,902 | | |
| Danchurchaid | | | 451,775 | | |
| Diakonie Emergency Aid | | | 245,033 | | |
| Equilibre | | | 359,891 | | |
| FAO | | | 15,983,832 | | |
| FHI | | | 395,000 | | |
| IFESH | | | 340,000 | | |
| IMC | | | 698,377 | | |
| IRC | | | 397,755 | | |
| JOIN | | | 419,058 | | |
| MAG | | | 963,215 | | |
| Malteser | | | 1,163,706 | | |
| MEMISA | | | 993,377 | | |
| NRC | | | 1,455,874 | | |
| OCHA | | | 8,317,914 | | |
| OXFAM | | | 1,775,417 | | |
| OXFAM UK | | | 2,382,862 | | |
| Pooled funding (unallocated balance) | | | 44,969,655 | | 9,210,526 |
| RRMO | | | - | | |
| Solidarités | | | 2,322,256 | | |
| Stichting Vluchteling | | | 1,440,918 | | |
| UNFPA | | | 3,159,765 | | |
| UNHCR | | | 32,017,727 | | |
| UNICEF | | | 31,235,804 | | |
| UNOPS | | | 2,299,750 | | |
| WFP | | | 62,966,148 | | |
| WHO | | | 5,825,802 | | |
| WVI | | | 423,729 | | |
| GRAND TOTAL | 686,591,107 | 686,591,107 | 254,905,538 | 37% | 9,210,526 |

NOTE: "Funding" means Contributions + Commitments + Carry-over

Pledge: a non-binding announcement of an intended contribution or allocation by the donor. ("Uncommitted pledge" on these tables indicates the balance of original pledges not yet committed).
Commitment: creation of a legal, contractual obligation between the donor and recipient entity, specifying the amount to be contributed.
Contribution: the actual payment of funds or transfer of in-kind goods from the donor to the recipient entity.

The list of projects and the figures for their funding requirements in this document are a snapshot as of 10 July 2007. For continuously updated information on projects, funding requirements, and contributions to date, visit the Financial Tracking Service (www.reliefweb.int/fts).

2. CHANGES IN THE CONTEXT AND HUMANITARIAN CONSEQUENCES

2.1. EVOLUTION OF THE CONTEXT

Humanitarian needs and challenges remain considerable across the country. Following the successful completion of Presidential, national and provincial parliamentary elections and the establishment of a new Government between late 2006 and February 2007, the first six months of 2007 have been characterised by certain improvements in the security situation in some provinces, while North and South Kivu continue to suffer from recurring crises and mounting military, political and ethnic tensions.

Successful elections were an important first step towards re-establishing state institutions after decades of armed conflict and political instability. However, the newly installed Congolese Government faces important challenges, both in terms of consolidating its political legitimacy and in terms of assuring military control over its territory. Political tension, usually concerning the extent of central power over regional, is recurrent between central Government bodies and the provinces, as are disputes within the provinces themselves. Both phenomena are increasingly at odds with the high post-election expectations of the general population. Examples include the delayed application of decentralisation policy and disagreements on redistribution of provincial tax revenues. No-confidence motions in provincial administrations have been passed or are pending, notably in Kasaï Occidental where the Governor was forced to resign.

The continued presence of some 20 foreign and other residual armed groups constitutes the biggest cause of insecurity and instability, and is a serious impediment to securing state authority across the country and the biggest threat to the Congolese civil population. Armed groups and the often-appalling conduct of Governmental security forces are the main factors behind criminality, human rights violations, protection concerns and humanitarian problems. During the early months of 2007, Government attempts to forcefully impose its authority on various groups in the west only seem to have exacerbated the general lack of confidence in the newly-elected Government of the Democratic Republic of the Congo (GoDRC).

Despite this sombre picture, a number of positive developments are taking place in the DRC. The surrender and demobilisation of key Mayi-Mayi groups in Katanga Province has led to a more stable security environment, whilst in Ituri large numbers of ex-militia, responsible for countless atrocities and forced displacements, have been demobilised. Conversely, as of June 2007 the two Kivus are embroiled in a deepening crisis. North Kivu is experiencing the results of a failed form of army integration that has produced "mixed" brigades. "Mixed" brigades were initially proposed as a solution to encourage certain dissident groups to adhere to integration into the national army and as an alternative to the predefined integration process, referred to as "*brassage*."

"*Mixage*", as opposed to "*brassage*", is a much less comprehensive integration process. These new mixed brigades are essentially controlled by General Nkunda, a dissident former member of the Armed Forces of the Democratic Republic of Congo (FARDC³), under whose leadership they have engaged in combat against the Hutu-dominated Democratic Liberation Forces of Rwanda (FDLR⁴) causing hundreds of thousands to flee their homes. In South Kivu insecurity and panic among the civil population has been triggered by the effects of FARDC operations against the FDLR and Rastas (an armed group thought to be related to the FDLR), and brutal Rastas/FDLR reprisals directed at civilians. Furthermore, recent indications have intensified fears of a possible violent conclusion to the current standoff between Banyamulenge groups and the 12th Integrated Brigade of the FARDC in the highlands of Uvira and Fizi. Banyamulenge groups have consistently refused to enter the *brassage* process and leave the area they control.

2.2 SCENARIOS

The 2007 Humanitarian Action Plan (HAP) projected that "following the nomination of a new Government through democratic elections at the end of 2006, the country will continue to make significant progress on the road to stability and the restoration of state authority. In certain provinces of the DRC, this will provoke a major return of Congolese refugees and internally displaced persons

³ *Forces Armées de la République Démocratique du Congo*

⁴ *Forces Démocratiques de Libération du Rwanda*

(IDPs). These advances will nonetheless be marred by a number of localised crises, of varying intensity and duration, which could affect the capital as well as the provinces.”

After six months and key military and political developments a more precise, but worrying, scenario has presented itself for the second half of the year. Specifically, the mounting tension between Government forces and those controlled by General Nkunda in North Kivu, and the Government's inability to consolidate its authority, especially in areas still controlled by armed groups, gives rise to three additional potential developments, each with important humanitarian consequences:

- Armed groups in the east could increasingly pose a challenge to security by inhibiting the Government from gaining control of certain areas. Critical Security Sector Reform (SSR) issues, including the reintegration of ex-combatants and the payment of salaries to FARDC soldiers, could also have serious consequences for Congolese communities and humanitarian organisations if not properly addressed within a short period of time;
- Divisions within local institutions, and differences between local and national state bodies, could further paralyse the Government's capacity to exert control;
- Unmet expectations of the general population and difficulties in consolidating the Government's influence may lead the state to become more authoritarian and inclined to use force.

2.3. AGGRAVATING FACTORS AND CONSEQUENCES

The factors aggravating the humanitarian situation and threatening the lives of civilians in DRC have not changed much since 2006. **Acute crises** derive from localised armed conflict, sudden-onset natural disasters and climatic changes, while **chronic crises** relate to the widespread lack of and extremely limited access to basic infrastructure and social services for the majority of the Congolese population. Over the years much attention has been given to the effects of acute crises, particularly in the eastern provinces, while scant attention has been paid to the impact of chronic crises especially in the western and central provinces. Recent nutritional surveys conducted in the western provinces reveal malnutrition rates far above the emergency threshold of 10%, the causes of which are not related to conflict or catastrophes but simply a combination of factors related to poor access to food and health services.

2.3.1. Acute crises

Localised armed conflict

In the first half of the year, armed conflict has mainly affected the province of North Kivu. Over 150,000 people have been displaced in the province in the last six months, constituting the highest rate of displacement in over three years. These figures bring the total number of displaced in the province to over 700,000 people, representing more than half of the total number of IDPs in the country. It is highly probable that these people will remain displaced, and updated inter-agency contingency plans anticipate an additional 330,000 displaced people in the remainder of the year if current tensions and instability persist. New needs may arise if tensions intensify and the conflict spreads across the province and to neighbouring provinces, particularly into South Kivu. (See Map 1 in annex.)

The fragile humanitarian situation in South Kivu is primarily linked to FARDC military operations against the Rastafarian/FDLR and the violent retaliation currently being carried out by the Rastafarian/FDLR against the population, causing thousands of people to leave their homes. Since the beginning of the year, 39,855 new IDPs have been registered in the province, yet most of them are inaccessible to humanitarian actors. Should current trends continue, it is possible that there will be another 220,000 IDPs in the province. If dissident ex-FARDC General Nkunda attempts to extend his influence to South Kivu or if the current standoff in the highland region ends violently, the humanitarian situation in the two provinces is likely to deteriorate dramatically.

While the evolution in the Kivus is the biggest immediate concern, worries persist over sporadic and isolated armed conflict in Oriental Province, the district of Ituri, Bas Congo and Kinshasa.

Communicable and epidemic-prone diseases

According to the Ministry of Health (MoH) national epidemiological surveillance system, six million people were affected by malaria in the last year, and it remains the number one cause of mortality in the country. However, considering that the average rate of health care service use stands only at 18%

countrywide, a more accurate estimate advanced by members of the health cluster is approximately 111,000,000 cases of malaria every year, of which 48 million would be suffered by children under seven years, 30 million by children between the ages of 7-13, and the remaining 33 million by people over the age of 13. Measles is the disease with next-highest mortality levels, and as with malaria it affects the entire country; 80,503 cases were registered in one year (2006) of which 1,191 died.

Cholera outbreaks are another major concern: 21,336 cases were registered in 2006 with 423 deaths. The most affected provinces are South and North Kivu, Katanga, and Oriental. Although areas affected by cholera are vast, mortality rates can be kept relatively low provided that medical healthcare provided to detected cases is acceptable. On the other hand, considerably fewer cases of meningitis have been registered in the east, but the disease has been more lethal. Of 3,354 cases registered in the eastern provinces in one year, 386 died (11%). Most of the deaths reported were in Oriental Province. (See Map 2 in annex.)

Efforts are being made to increase prevention activities and boost vaccination coverage to a minimum of 80% of the population. However, what makes the difference, as exemplified in all cases mentioned above, is the provision of appropriate medical care and whether access to care is facilitated for the most vulnerable. Unfortunately, in areas where there is no support from international partners to health centres, capacity is very low or non-existent.

Natural disasters and climatic changes

Between October 2006 and February 2007 the Congo River basin saw its worst floods since 1997-1998, affecting several provinces from Equateur, Oriental Province to Maniema. In Katanga, similar flooding occurred along the Lualaba River, leading to the displacement of 28,000 people. The floods destroyed 22,291 hectares of agricultural land, affecting 198,645 people who lost their houses and basic household materials, as well as causing widespread destruction and damage to roads, shelter, and infrastructure. Even though natural disasters were not specifically considered in the 2007 HAP, the vast area affected and the considerable number of families hit by the floods has awakened humanitarians to the potential damage natural disasters can have in the DRC. A deeper understanding of the risks involved, more awareness and monitoring, and strengthened preparedness and response capacity is required to address the needs of affected families. (See Map 3 in annex.)

Most Congolese are already vulnerable, and abrupt climatic change or events that spoil crops and agricultural production could seriously aggravate the humanitarian situation. It has also been noted that diseases affecting basic dietary products, such as manioc, bananas, and livestock are also contributing to the recurring trends of lower production, higher prices and thus reduced accessibility to food. Longer-term implications include food insecurity and malnutrition. As mentioned before, in the provinces not affected by conflict it is becoming increasingly clear that malnutrition is a serious concern.

2.3.2 Chronic crises

Failure of state services

Provinces unaffected by the humanitarian crisis in DRC nevertheless typically suffer a crisis situation as shown through the following indicators: only 18% of the population uses curative services (compared to the 50% minimum standard), 8.8% of women use maternity services (compared to the 50% minimum standard), 1,800 out of 100,000 women die giving birth, and only 40% of children are vaccinated, of whom only 27% are protected against measles⁵. These low rates of health service use demonstrate the lack of confidence people have in services that are known to be barely functional, and their inability to pay for unsubsidised health services. Furthermore, only 20% of the population in these provinces has access to water; even fewer, 4%, have access to latrines. Needs are great and extend over a vast territory. While the situation in the whole country can be characterised with similar indicators and these do not constitute an acute emergency *per se*, they do provide a fertile ground for epidemics, high mortality rates and malnutrition. Restoring minimum standards to reduce the extreme vulnerability of the population requires massive and long-term action. To ensure sustainability and progress, a sincere commitment on the part of national authorities is essential.

⁵ The sources of the indicators used were obtained from the HAP indicators monitoring exercise that clusters conducted for the elaboration of the Mid-Year Review. Seeing that not all indicators for all provinces were available for all sectors, certain representative indicators were selected to provide a general vision of the situation in the western provinces.

2.4. EVOLUTION OF HUMANITARIAN NEEDS

Humanitarian actions continue to revolve around the two priority axes of the HAP:

- Needs related to saving the lives of populations affected by conflict, disasters or epidemics;
- Needs related to creating adequate conditions for the return and reintegration of thousands of IDPs and refugees going back to their places of origin.

Emergency crisis response

Due to the current conflict in North and South Kivu the demand for assistance to ensure basic health, nutritional care, food, household utensils, shelter and water is likely increase. Between these two provinces, 500,000 people are expected to need emergency assistance due to displacements. This does not take into consideration the thousands of others that may be affected by epidemics. The Rapid Response Mechanism (RRM), managed by the Office for the Coordination of Humanitarian Affairs (OCHA) and the United Nations Children's Fund (UNICEF) and implemented by the non-governmental organisations (NGOs) *Solidarités*, International Rescue Committee (IRC), and Catholic Relief Services (CRS), is responding to these emergency needs. Roughly 97,000 displaced families (some 488,000 people) were assisted by the RRM between January and April 2007 across the country. An additional 639,189 victims of acute crisis and cholera were assisted in the first half of 2007 by the RRM and the water/sanitation cluster. Despite the progress achieved in the last 12 months, there is an increasing demand for the health cluster to upgrade its work, capacity to deliver and to rapidly respond to all emergency situations. The necessary steps towards upgrading the health cluster have been initiated.

Emergency response will in all likelihood be required during the upcoming rainy season, which could cause more floods and destruction. Epidemics may continue to ravage the various provinces, and based upon recent surveys, particular attention needs to be paid to the nutritional situation across the west of the country.

Assistance to returns

Whilst insecurity in some provinces is provoking new displacements, the gradual stabilisation of other areas continues to encourage the return of thousands of displaced populations. The country is witness to IDPs returning to their places of origin, both facilitated and spontaneous repatriation and return of refugees, and people who returning because they have been expelled from other countries.

Katanga registered the highest number of returning displaced people with 411,103 returns registered between mid-2006 and the first half of 2007. Katanga is followed by Ituri where approximately 200,000 people have returned between the end of 2006 and mid-2007. The numbers registered so far in Ituri were higher than those previously anticipated and if positive trends continue more returns can be expected. In addition, 21,000 Congolese refugees have been repatriated to various provinces (Equateur, the Kivus and Katanga) since early 2007. The repatriation of Angolan and Sudanese refugees was successfully concluded during the first half of 2007, while repatriation to Rwanda from the Kivu provinces is continuing at the same pace as last year. In total, some 9,100 refugees were repatriated, included 5,300 Angolan refugees, 2,800 Rwandan refugees and 940 Sudanese refugees.

Although the number of repatriated Congolese refugees in the first half of the year was less than expected, the United Nations High Commissioner for Refugees (UNHCR) does anticipate that the rate of return will increase starting mid-June when the operation to repatriate refugees from Zambia to Katanga will begin. The repatriation pace increased by over 60% during the second quarter of 2007. All returnees received non-food item (NFI) packages and shelter assistance, and some received limited community-based reintegration support in the sectors of health, education and income generation. Planning foresees that some 40,000 refugees may return during the next six months. Reintegration assistance in the main return areas of Katanga, South Kivu and Equateur Provinces will pose great challenges (see Map 4).

The Programme of Expanded Assistance to Returns (PEAR) project launched by UNICEF has been instrumental in assessing and responding to the needs of returning IDPs. Considering the deplorable state of basic services throughout the country, the major challenge is to ensure that people are not caught up in a spiral of recurring humanitarian crises. This necessitates helping to create the conditions necessary for these people to start becoming self-sufficient and to create sustainable livelihoods. In response, the return and reintegration cluster aims to deepen the humanitarian community's understanding of priorities and to advocate for stronger actions. Moreover, spontaneous returnees and expelled refugees (so far 10,000 have been registered, in the first half of 2007: 5,079 in Luiza and 5,000 others in Moba) are a category of returnees not previously taken into consideration in

the HAP. Although they may not all need assistance their presence may be a strain on host populations who need to stretch their already limited resources and coping mechanisms to accommodate the new comers.

2.5 SUMMARY OF PRIORITY NEEDS

The priorities for the coming six months have not changed as defined by the HAP and can still be defined accordingly:

Emergency response: reinforce assistance to displaced persons in conflict areas (Kivus, Ituri, etc.) and to victims of natural disasters and epidemics across the country, as well as to malnourished children.

Protection of civilians and vulnerable groups: reinforce protection monitoring and prevention for the safety of displaced populations, victims of gender-based violence, separated children, children associated with armed forces, and other vulnerable populations.

Return and reintegration: strengthen assistance to large returning populations by creating appropriate conditions of return and providing them with the means for sustainable livelihoods.

Increase access to vulnerable populations: reinforce the humanitarian community's capacity to overcome the enormous challenges related to logistics and access resulting from the sheer size of the country and the deplorable state of roads and transport services.

3. REVIEW OF THE COMMON HUMANITARIAN ACTION PLAN (CHAP)

3.1. SUMMARY

Although the scenario originally envisioned for 2007 is not playing out as positively as expected, the humanitarian strategy does not require any major readjustments. Strategic objectives and the corresponding proposed activities remain largely the same. Nevertheless, activities need to be re-focused on emergency activities – in the Kivus due to armed conflict and in other provinces due to other acute crises such as malnutrition, epidemics and/or natural disasters. Some clusters will have to make changes in terms of geographical focus, or adjustments to planning figures for actions, but the readjustments required are still within the strategy and do not necessitate a change in the strategy itself.

3.2 STRATEGIC PRIORITIES

Strategic priorities have not changed and remain centred on the two defined by the HAP, namely:

- Emergency crisis response;
- Support for a return to self-sufficiency.

Emergency crisis response

As the example of North Kivu indicates, 82% of the identified vulnerable populations received assistance in the form of NFI, emergency education assistance and water-sanitation (Watsan) kits, and 75% received food rations. Responding to flood victims was more difficult given the large areas affected over several provinces and the difficulties in gaining access. Despite these difficulties, of the 40,000 families affected, 12,000 were assisted by UNICEF in the western provinces and 18,320 were given assistance in Katanga, mostly by the Rapid Response Mechanism implemented by CRS in that province. This corresponds to assistance for 75% of the identified population.

In terms of health, numerous alerts or confirmed outbreaks of epidemics were investigated and managed by the MoH, supported by all partners through the provincial health clusters. Non-cluster members like *Médecins Sans Frontières* (MSF) also responded to some epidemics. While many crises were effectively managed by the health cluster during the reporting period, without comprehensive emergency response the risks are that items provided such as NFI or food are too often sold by beneficiaries in order to purchase access to health services or other basic needs.

According to the revised contingency plans for the Kivus, emergency response capacities will need to be stepped up to cope with the 330,000 and 200,000 new IDPs expected in North and South Kivu respectively in the coming months. Moreover, in order to maximise the impact of assistance, clusters should be encouraged to coordinate the provision of comprehensive emergency response packages that include NFI, Watsan, food and health care to vulnerable beneficiaries, while at the same time ensuring that an adequate protection response is implemented in order to prevent or mitigate conflicts and displacements.

In terms of chronic crises, actors continue to develop activities in support of health centres and hospitals, in order to increase the accessibility of the population to primary health care, reduce mortality rates, and encourage appropriate treatment for the main causes of child mortality. The health cluster has developed a series of projects funded by the Pooled Fund (PF) and Central Emergency Response Fund (CERF), and which are currently in progress to support and strengthen the country's parlous health system. However, health indicators across the country are generally low and with the resources available it is impossible to provide support to all health zones. As such, coordination with development actors needs to be strengthened in the coming period. Nutritional activities are also being worked on in order to respond to the devastating survey results from the western provinces. A series of follow-up evaluation missions are planned to properly identify vulnerabilities and target populations.

Support for a return to self-sufficiency

From January-June 2007, 21,000 Congolese refugees have returned home. Over 200,000 IDPs have also returned to their villages of origin. UNHCR expects the rate of return of refugees to increase as new return operations from Zambia to Katanga gain pace. Moreover, with the new stabilisation of areas in Ituri, many more IDPs are expected to return to there. Immediate assistance to return is relatively well covered; the challenge remains in creating adequate conditions of return in terms of access to basic services and means of creating livelihoods. To this end, the increased involvement of

development actors will be crucial, and the return and reintegration cluster is currently working on the creation of a series of tools that would allow for an analysis of areas to be prioritised in terms of early recovery activities, relying in particular on the information from the UNICEF/PEAR initiative.

As with the case of emergency assistance, the strategy for return to self-sufficiency remains the same in terms of objectives and required activities. Focus needs to be brought to areas where returns are currently taking place and increased analysis and planning needs to be done for areas where the security situation does not currently allow for returns but may in the near future.

3.3 SECTORAL RESPONSE PLANS

The following section attempts to give an overview of the achievements registered to date in 2007 by sector, and highlight the challenges and new priorities for the remainder of the year. Most sectoral plans remain unchanged, but new aspects that need to be taken into consideration are specified below.

All data utilised for this report was collected by clusters through a new HAP monitoring methodology piloted in 2007. Each cluster had previously worked on determining the most important indicators that would demonstrate the impact of their actions. Clusters were then responsible for collecting all data that would reflect on these indicators from cluster members. However, due to a general lack of baseline data, and in some cases adequate sectoral surveys, the impact of humanitarian activities in the field was not easily measured.

3.3.1. Health⁶

Civilian populations in conflict areas still largely depend on humanitarian assistance to cover basic health needs. The rate of utilisation of medical services in the Kivus is an example of the real impact of humanitarian activities in these provinces. As an example, in Fizi (South Kivu) three medical NGOs provide assistance to 80% of the entire population. The utilisation rate of curative services is 57%, meaning that 57% of the population consulted a doctor at least once during the year. In previous years the rate was only at 37%. In a neighbouring territory, where only one NGO is present covering 50% of health centres, the rate of attendance is estimated at 28.4%. The highest consultation rate reported is 74% in Ituri, another region with a strong humanitarian presence and support. Nevertheless, some health zones in Ituri have not received immunisation services to complete the national vaccination schedule in the past four years, mostly due to lack of access resulting from poor security conditions.

Outbreaks of cholera, measles, meningitis and plague have continued to emerge in the country over the past six months but health cluster members managed to reduce mortality rates due to quicker confirmations of outbreaks, faster response in terms of appropriate support in medical kits, and raising awareness levels in the population. These efforts will continue even though in many cases lack of adequate transportation and communication with remote areas makes access difficult. The repeated outbreaks of communicable diseases indicate the need for a major effort in support to the MoH and NGOs providing health services.

Getting a better overall picture of health needs in the whole country is a major challenge that needs to be addressed. The sheer size of the country makes it difficult to adequately assess how many health zones are covered by humanitarian actors. Targeting and response could be greatly improved if essential data, such as global and child mortality rates, were readily available. Fortunately, a new IRC survey to update figures from the 2004 census has recently started, but until then baseline data is simply not available. The health cluster is also considering the implementation of a mortality assessment in heretofore unsurveyed areas so as to obtain an overall figure for the whole country.

⁶ Main members of the health cluster include CARITAS, Malteser, OXFAM, *Medische Missie Samenwerking* (MEMISA), Medair, *Cooperazione Internazionale* (COOPI), UNICEF, *Solidarités*, World Health Organization (WHO), United Nations Population Fund (UNFPA), Save the Children (SC), *Aide Médicale Internationale* (AMI), *Médecins du Monde* (MdM), Medical Emergency Relief International (MERLIN), CRS, IRC, International Medical Corps (IMC).

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| HEALTH/HAP strategic objectives <ul style="list-style-type: none"> • Reduce the mortality and morbidity of mothers and children under five years of age; • Improve medical and psychosocial care for victims of all kinds of violence; • Improve access to primary health care for vulnerable people, including Human Immunodeficiency Virus (HIV)/ Acquired Immunodeficiency Syndrome (AIDS) treatment. | |
| Achievements <ul style="list-style-type: none"> • Reduced mortality rates due to malaria. • In Uvira (South Kivu): from 1.5% in 2006 to 0.1% in 2007 (January-May); • In Walikale (North Kivu): from 28.3% (2006) to 14.1% in 2007. • Increased vaccination coverage across the country. • Uvira (South Kivu): Measles vaccination coverage boosted from 66.3% in 2006 to 100% in 2007; • In Walikale (North Kivu): Measles vaccination coverage boosted from 51.5% in 2006 to more than 85% in 2007. • Reinforced capacity of medical staff in the country with training on new protocols, management of vaccination campaigns, etc.: • In Katanga: Training of 200 out of 350 community-based health workers (57%) in disease epidemiological surveillance, Expanded Programme of Immunisation (EPI) and outbreak response; • In Lubumbashi: Training of 19 out of 20 (95%) health workers in rapid response for disaster and crisis management; • In Maniema: 324 health workers out of 384 (84.8%) trained in epidemiological surveillance in 18 health zones; • In South Kivu: in 31 health zones out of 34 (91%) health workers were trained in the new malaria protocol. | Challenges <ul style="list-style-type: none"> • There are regions where there is no assessment of the situation, either because access is extremely difficult or because there are no actors present, including MoH; • Lack of baseline and other essential data is a major challenge to ensure an adequate assessment of needs in the whole country. Identifying gaps and setting priorities is thus very difficult. • Coordination with developmental actors and donors should be strengthened to avoid duplication and waste of resources. |
| Emerging and additional priorities <ul style="list-style-type: none"> • More attention needed in the western provinces to pockets of extreme vulnerability in areas outside the traditional conflict areas to ensure coverage by public health programmes especially diseases surveillance; • The outstanding need to carry out surveys and systematically collect baseline data should be considered seriously in order to have better analysis of the actual situation; • Need to integrate vertical assistance programmes into essential primary health care packages; • Contingency planning and operations for immediate response to urgent health needs of conflict and disaster affected populations. | |

3.3.2 Nutrition⁷

In the eastern provinces a correlation between humanitarian presence, nutritional programmes and a decrease of malnutrition rates has been observed in areas where there is a certain degree of security. Examples include Ituri, where the action of just one international NGO in the district resulted in the reduction of global malnutrition rates by half in one year, and South Kivu where partners have maintained a low global malnutrition rate of 5% in 15 health zones. However, recent surveys in the western provinces reveal alarming rates of malnutrition that require immediate action. For example, figures from surveys from Kasai Oriental (late 2006) showed an acute malnutrition rate of 26% in one provincial health zone. Unfortunately, most of these provinces were not specifically taken into consideration by the HAP and the presence of active partners is limited.

Initial steps to curb the dire effects of malnutrition in the western provinces have been taken. However, as in the case of Bandundu, the emergency response comes in the form of therapeutic feeding centres (TFCs) without being coupled with complementary measures such as the establishment of supplementary feeding centres (SFCs) and food security activities in acute

⁷ Main members of the nutrition cluster include National Nutritional Programme (Pronanut), UNICEF, Food and Agriculture Organization (FAO), World Food Programme (WFP), *Action Contre la Faim* (ACF), *Agence d'Aide à la Coopération Technique Et au Développement* (ACTED), COOPI, Goal and MSF.

malnutrition action areas. The establishment of SFCs is essential in order to detect and respond to malnutrition at an earlier stage, as TFCs only attend to more extreme cases that require medical attention. Regular looting of TFC/SFCs by armed forces has been reported as one of the main impediments to the continuation of such activities. Advocacy is needed to remind authorities that it constitutes an international humanitarian crime to loot basic public services.

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| NUTRITION/HAP strategic objectives <ul style="list-style-type: none"> • Provide a last-resort response where there are no humanitarian actors; • Provide curative, nutritional, and medical care for children suffering from acute malnutrition in nutritional centres, in accordance with the national protocol; • Strengthen partners' institutional capacity; • Strengthen the capacity of communities to prevent acute malnutrition. The area prioritised by the cluster for the HAP was the so-called "humanitarian triangle" comprised of Ituri, the Kivus and Katanga. | |
| Achievements <ul style="list-style-type: none"> • In Ituri: the global rate of malnutrition has been brought down from 18.1% last year to 9.5%. Severe acute malnutrition was also reduced from 8.5% to 2.9%. 4,491 children received nutritional care, and the recovery rate rose from 79.6% to 82.8%. • 24 TFCs have been established in South Kivu; • In Bandundu, three surveys carried out during the last nine months revealed alarming situations of southern Bandundu; • Three TFCs have opened in southern Bandundu (District of Kwilu) and 435 malnourished children have been attended to. | Challenges <ul style="list-style-type: none"> • Security problems in both North and South Kivu; • Number of humanitarian actors working in the sector is low. It is often the case that nutritional activities in one province are mainly carried out by only one NGO. • Governmental staff is lacking and motivation is insufficient; • Abrupt climatic changes and disrupted agricultural cycles which have a negative impact on nutritional programmes and the nutritional status of the population. |
| Emerging and additional priorities <ul style="list-style-type: none"> • Due to the fluctuating situation caused by changes in intensity and location of armed conflicts, new priority areas are emerging in Ituri, Katanga, and North Kivu, and possibly in South Kivu; • The situation in the western provinces should be monitored more closely, as the preliminary cases of Bandundu and Maniema have proved that acute malnutrition rates are high even in places where there is no conflict; • More surveys and inter-agency missions should be organised during the remainder of the year to improve the humanitarian community's understanding of the situation, especially in the west. | |

3.3.3 Food Security

It is encouraging to note how well the food security cluster members⁸ have been able to quickly adapt to new demands, such as the crises in North and South Kivu, and to ensure adequate targeting of vulnerable populations. In North Kivu, where the crisis has doubled demands on the food security cluster, it was nevertheless able to respond to the large increase in demands. In Rutshuru territory, the major conflict zone in North Kivu, food and tool distributions are at 233% more than what was foreseen in the HAP. Thus, by mid-2007 the entire objectives of the HAP (for 60,000 households) for the whole year have been met.

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| FOOD SECURITY/HAP strategic objectives <ul style="list-style-type: none"> • Respond to emergency food needs; • Support emergency food production for households of malnourished children, displaced, returnees or repatriated, and other vulnerable groups (HIV/AIDS, victims of sexual violence (VVS*), etc.); • Re-establish autonomy of food production for host families, newly accessible households, and those weakened by the crises; • Ensure food security for returnees and repatriated people. | |
| Achievements <ul style="list-style-type: none"> • In South Kivu: 78% of cluster objectives attained with 64,247 out of 82,160 targeted families having been assisted with seeds and agricultural materials; • In North Kivu: even more impressive results were obtained with 129% of the original objectives being met: i.e. 77,181 families assisted out of the | Challenges <ul style="list-style-type: none"> • Inaccessibility and logistic constraints in most provinces. The cost of transporting goods is enormously high. • Climatic conditions create a very volatile situation in terms of the food security risks the population faces following each agricultural season. |

⁸ Main members of the food security cluster include WFP, FAO, German Agro Action (GAA), ACTED, ACF, *Solidarités*, OXFAM, Malteser and CARITAS.

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| <p>59,440 targeted;</p> <ul style="list-style-type: none"> In Bas Congo and Bandundu: achievement rates are at 51% and 48% respectively, which corresponds to the expected mid-year achievement rates. 5,150 families have been assisted in Bas Congo, and 6,500 in Bandundu. | |
| <p>Emerging and additional priorities</p> <ul style="list-style-type: none"> A task force was established to examine the living conditions of victims of natural disasters and to take them into consideration for future planning. The initiative deserves follow up and support. Regarding assistance to return and reintegration, seeds assistance and tools distribution could be closely coordinated with the UNICEF PEAR programme. | |

**Victimes des Violences Sexuelles*

3.3.4 Non-Food Items/Shelter

One of the issues raised by the members of the NFI/shelter cluster⁹ is the importance of ensuring a comprehensive emergency response. Otherwise, as illustrated in the case of North Kivu where IDP beneficiaries sold their NFI kits for food or medical assistance, actions will not have the desired impact.¹⁰ This highlights the importance of reinforcing inter-cluster coordination to ensure that complementarity is achieved. The overall utilisation rate of NFI kits one month after distributions in the various provinces varies between 80-89% according to the NFI cluster statistics.

Another issue raised was how to improve emergency assistance. One possible alternative that is being considered is substituting actual kits with a voucher programme for other NFI and/or shelter relief. This approach will be piloted with PEAR partners in the near future.

| NFI/SHELTER/HAP strategic objectives | |
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| <ul style="list-style-type: none"> Provide last-resort response in NFIs and emergency shelter; Ensure that accessible persons affected by crises and in highly vulnerable situations receive essential NFIs and emergency shelter; Strengthen the institutional capacity of partners on the ground to respond to emergency shelter and NFI needs; Ensure that vulnerable returnees (former refugees or displaced persons) who returned within the previous three months, or newly accessible returnees living in a vulnerable situation, receive a basic essential supplies kit and assistance in emergency shelter. | |
| Achievements | Challenges |
| <ul style="list-style-type: none"> Overall 45% of expectations have been met. Of the 226,000 families expected to receive emergency assistance in NFIs, 101,917 families were assisted across the country. In Katanga: a total of 28,357 families have been assisted with NFIs since the beginning of the year, including 18,320 families affected by floods. In Ituri: a total of 32,649 families were assisted, of which 17,481 were new IDP families and 15,168 returning IDPs and refugees; In North Kivu: a total of 54,000 families were assisted with NFIs since beginning of the year. 90% of them were newly displaced due to conflict, and 8,111 other families were returnees. RRM has supported 82% of the crisis affected population and PEAR 100% of IDP returnee families. In the western provinces: cluster members provided assistance to 12,116 disaster-affected households in the provinces of Equateur, Oriental, Maniema and Kasai Oriental. The initial target was 22,000 disaster-affected households. Thus, cluster members have met 55% of their target. | <ul style="list-style-type: none"> Lack of holistic humanitarian response that leads to reduced impact of NFI assistance throughout the country; NFI kits of the different partners in the cluster are not always standardised, which sometimes causes unequal distribution; Lack of access due to insecurity and physical access; Few actors working in the sector. |

⁹ Main members of the NFI/shelter cluster include UNICEF, UNHCR, GAA, *Solidarités*, CARITAS, *Première Urgence* (PU), *Cooperazione e Sviluppo* (CESVI), CRS, World Vision International (WVI), Atlas Logistic, IRC, Norwegian Refugee Council (NRC), Adventist Development and Relief Agency (ADRA).

¹⁰ Although contents can differ, a standard NFI kit includes variations upon the following: a kitchen set, blankets, clothing, jerry can, soap, sleeping mat, mosquito net, and plastic sheeting.

Emerging and additional priorities

- Ensure response to continued high demands, particularly in North Kivu;
- Encourage clusters to engage in a holistic approach to emergency response;
- Need to ensure that contents of NFI kits are consistent across the sector;
- Increase focus on returnees;
- Continued and expanded exchanges on monitoring and evaluation are needed;
- Increased support/guidance of shelter aspects will need to be provided by the cluster lead in the future.

3.3.5 Water and Sanitation (Watsan)¹¹

There is a high rate of recurring waterborne diseases, particularly in the eastern provinces. On average, 20,000 cases of cholera alone are identified per year. In order to curb these outbreaks the water and sanitation cluster set-up 30 chlorination points in the city of Goma. It is believed that 80,000 people benefit from this treated water in the city, 5,000 of whom are IDPs from Sake. However, preventive solutions require increased access for the entire population, and currently, only 29% of the rural population in the DRC have access to potable water. Unfortunately, humanitarian actors often find it difficult to receive funding for rehabilitation of water infrastructures.

WATSAN/HAP strategic objectives

- Ensure access to drinking water and clean environment for victims of crises;
- Reduce the risk of contamination from water-borne diseases for returning populations, hosts and other vulnerable people by providing them with a basic water and hygiene package.

| Achievements | Challenges |
|---|--|
| <ul style="list-style-type: none"> • In North Kivu: emergency programmes assisted 83,741 IDPs with minimum water and sanitation packages; • In Ituri: 27,956 IDPs benefited from minimum water and sanitation packages and 3,660 victims of cholera received assistance; • In South Kivu: access to potable water was augmented by 4%, benefiting some 200,000 people; • In North Kivu: 300 villages were assisted, thus increasing access to potable water by 7%, benefiting some 380,000 people; • In Ituri: 77 villages were assisted, thus increasing access to potable water by 6%, benefiting some 150,000 people; • In Katanga: 171,191 IDPs benefited from minimum water and sanitation packages against cholera. | <ul style="list-style-type: none"> • Durable solutions are badly needed in the sector. However, these solutions have difficulty being prioritised given the PF preference for projects responding to immediate needs (emergency rather than long term programmes). • In certain places (i.e. Katanga) no appropriate partners were found to carry out Watsan activities; |
| <p>Emerging and additional priorities</p> <ul style="list-style-type: none"> • No changes to the strategy, only territorial prioritisation; | |

3.3.6 Protection¹²

Considering that most protection activities involve advocacy and sensitisation efforts intended to reduce the level of abuse against civilians, measurable impact indicators are hard to define. There is, unfortunately, little evidence to suggest that violence or abuses against civilians has decreased. Any durable solution can only be realised through a combination of determination and measures taken by national authorities to address the current climate of impunity by ensuring that criminals are judged.

Immediate measures should include better monitoring of protection abuses. The DRC is known to be one of the countries with the worst incidence of sexual and gender-based violence (SGBV), yet data collection of the number of victims across the country is still partial despite UNFPA's efforts to better organise the information sharing process. This is important in order to improve understanding of the phenomenon and provide adequate assistance, which often requires a combination of medical,

¹¹ Main members of the water and sanitation cluster include ACF, ACTED, CARITAS, COOPI, Cordaid, Goal, IMC, IRC, MdM, MERLIN, OXFAM/GB, OXFAM/Quebec, the Water Authority of DRC (*Régie de distribution d'eau de la République Démocratique du Congo* [REGIDESO]), *Solidarités* and UNICEF.

¹² Main members of the protection cluster include MONUC (United Nations Mission in the Democratic Republic of Congo / *Mission des Nations Unies en République Démocratique du Congo*), UNHCR, UNICEF, Office of the High Commissioner for Human Rights (OHCHR), UNFPA, NRC, Search For Common Ground (SFCG), SC, IRC, Global Rights, Life and Peace Institute.

psychosocial, juridical, and reintegration assistance. The subject is very delicate and complicated. Cluster performance needs to be improved in terms of taking an approach that allows for victims in need to be more proactively assisted. To do so, a better analysis of the problem is needed.

| PROTECTION/HAP strategic objectives | |
|---|--|
| <ul style="list-style-type: none"> • Reduce the level of violence and cases of human rights violations; • Find sustainable solutions for target populations (return, local integration, rehabilitation); • Promote the local and national protection of civilians. | |
| Achievements | Challenges |
| <ul style="list-style-type: none"> • 50% of the 85 MONUC military Mobile Operation Bases (MOBs) established mainly in South and North Kivu were given awareness training on humanitarian protection concerns; • Advocacy actions resulted in the approval of a report on the “mixage” process and the protection of civilians by the North Kivu provincial assembly; • 55,800 people have participated in conflict resolution and activities promoting peaceful return and co-habitation; • A new and comprehensive protection monitoring project in North Kivu has managed to provide a better understanding of the specific protection risks across the province; • 2,750 FARDC soldiers/police have been trained on human rights and civil-military relations; • 1,300 representatives of human rights NGOs were trained in basic investigation techniques and data collection for legal prosecution; • Six judicial clinics were established in four eastern provinces; • The monitoring and reporting mechanism for grave violations of child rights was strengthened, and two reports were submitted to the Security Council within the framework of Resolution 1612; • 1,397 victims of SGBV received medical support, 1,049 psychosocial counselling, 204 legal assistance and 175 survivors were reintegrated in the community; • In January-April, 928 children were released from armed groups and reunited with their families, largely due to efforts by protection partners; • 1,444 children have benefited from support in the process of community reintegration; • 166,198 square meters of land have been cleared of mines and unexploded ordnance (UXOs); 39 mines cleared and 19,747 UXOs were destroyed. Mine awareness training was given to 17,669 persons in 877 sessions. Another 72 dangerous areas have been added to the United Nations Mine Action Centre (UNMAC) database. | <ul style="list-style-type: none"> • Weaknesses of Governmental institutions and the failure of national programmes such as the National Disarmament, Demobilisation and Reintegration (DDR) Programme (unable to treat ex-combatants and ensure proper reintegration measures to absorb potential sources of risk towards civilian population, which are FARDC and ex combatants); • Insufficient ownership by national authorities, both at local and national levels, on their role and responsibility to protect the civilian population; • The increase of local armed conflict, and of violent acts against life and physical integrity, and arbitrary arrests and forced disappearances for political reasons; • The inadequate functioning of the judicial system: lack of proper training, of fair treatment of judicial cases, and the absence of sanctions; the impossibility of carrying out war crimes investigations; • Lack of improvement of institutional structures and judicial measures. The lack of sufficient jurisdictions, magistrates, judges, and judicial auxiliaries; • Lack of proper access in all areas at risk and at time of acute crisis; • Need to adjust current tools to the protection challenges in order to have better visibility of the impact of protection activities; • Continued association of some 3,000 to 5,000 children with armed groups and forces, largely amongst “dissident” groups who are hostile to the DDR process; • Recruitment of children by some groups continued, and it is feared that children are being used on the front line against the FDLR. |
| Emerging and additional priorities | |
| <ul style="list-style-type: none"> • Protection needs must be mainstreamed into other clusters/activities; • Given the context of mass displacement particularly in North Kivu, an important emerging need is to identify, document and reunify separated children and take steps to prevent further separation; • Due to renewed armed conflict, protection activities in North and South Kivu need to be stepped-up; • Focus on strengthening protection of civilians while at the same time exploring and advocating for durable solutions particularly for IDPs and refugees; • Focus on training of national institutions on their role and duty to protect the civilian population; • Adjust protection indicators to reflect either a concern with the civilian population in its entirety, or particular vulnerable groups and on assistance to these specific populations. | |

3.3.7 Logistics

The defined objectives of the logistics cluster members¹³ were the following: rehabilitate 1,247km of roads in the Kivus and Katanga Provinces to facilitate the return and reintegration of refugees; the leasing of locomotives and the rehabilitation of 50 wagons; an interagency transport service in Katanga and in the district of Tanganyika; barge rehabilitation on the middle Congo River; construction of a dock in Bukavu port; reopening river traffic between Ubundu and Kindu; and implement the common multi-modal logistics platform 'Railway, River, Lake, Air Operations Task Force' (FFLOAT¹⁴).

These works will have a major positive impact on household food security levels and local economies by allowing a greater mobility of goods and people. This will give people more opportunity to buy agricultural products at lower prices giving the most marginalised populations more access to basic goods. The logistics cluster designed this plan to meet the considerable challenges facing the humanitarian logistics sector. This explains the important funding needs, which are necessary if there is to be an increase in humanitarian assistance and a bolstering of the productive sector. Even if the work is done through a coordinated approach between the United Nations and NGOs, there is still a great deal to do. It is this remaining work that will engage the logistics cluster during the second semester of 2007, as well as its ongoing vigorous efforts in road repair and humanitarian air transport.

| LOGISTICS/HAP strategic priorities | |
|---|---|
| <ul style="list-style-type: none"> • Ensure the transport of emergency assistance to vulnerable populations; • Ensure physical access (renovation of infrastructures and transport) and transport to return areas and other humanitarian action areas | |
| Achievements | Challenges |
| <ul style="list-style-type: none"> • Implementation of an inter agency transport service provided by 25 trucks purchased by WFP through the CERF. This service has delivered 1,400 Metric Tonnes (MT) within three months, and its capacity should increase during the dry season reducing transportation costs by 30% and increasing access to beneficiaries from 20% to 85% within five months; • Reactivation of the railway network targeting a return area such as Tanganyika district and Maniema; • Implementation of FFLOAT, allowing the humanitarian community to bring NFIs to Lubumbashi, Bukama, Kindu, Kabalo, Kinshasa, Mbandaka, Bolobo, Kisangani, Gemena, Goma, Bukavu by barge, by plane, by rail and by truck. | <ul style="list-style-type: none"> • Over reliance on expensive air transport caused by the lack of ground and river infrastructure; • Insufficient availability of commercial road transporters; • Lack of information about available transporters; • Insufficient capacity or the necessity to rehabilitate specific river transport axes; • Shortage of locomotives and wagons from the Congolese National Railroad Company (S.N.C.C.*) due to high demand for wagons from the mining companies; • Security problems in both North and South Kivu |
| Emerging and additional priorities | |
| <ul style="list-style-type: none"> • Priorities of logistics cluster remain the same: respond to the humanitarian crisis in North Kivu and South Kivu; and to assist an estimated 25,000 refugees and IDPs to return | |

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3.3.8 Reintegration and Community Recovery (Early Recovery)

The return and reintegration cluster members¹⁵ were finally able to establish cluster working groups in the main provinces. Each of these has developed a plan of action per province and has started to identify priority areas of return. Two provinces have already established their return matrices and defined, with partners, the main priority areas and priority needs. Return and reintegration clusters are working very closely with the UNICEF PEAR programme, but it is clear that many challenges remain for the coming year. The cluster has the specific role of analysing and defining priority zones in relation to needs but also in relation to humanitarian coverage. Information needs to be collected from a wide array of partners, which, unfortunately, is not always forthcoming. For the assistance responsibilities of the cluster, the joint-programming experience between UNHCR/United Nations Development Programme (UNDP) is proving successful and is likely to be replicated in other provinces.

¹³ Main members of the logistics cluster include WFP, FAO, UNHCR, United Nations Mine Action Coordination Centre (UNMACC), Aiserv, ACTED, GAA, Handicap International (HI)/Atlas, DanChurchAid (DCA), *Deutsche Gesellschaft für Technische Zusammenarbeit* (GTZ), OXFAM, PU, IRC, *Solidarités*.

¹⁴ *Ferroviaire, Fluvial, Lacustre, Opérations Aériennes Task Force*.

¹⁵ Main members of the early recovery cluster include UNICEF, UNHCR, UNDP, FAO, WFP, OMS, ACTED, HI/Atlas, GTZ.

The increased involvement and appropriation of future steps by the Government is essential. Coordination needs to be ensured with activities taking place within the Poverty Reduction Strategy Support Programme (PRSSP) framework.

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| EARLY RECOVERY/HAP strategic objectives <ul style="list-style-type: none"> • Create conditions favourable to ensuring that the required assistance in the context of early recovery is brought to the attention of the Government, humanitarian clusters and those involved in development. This prior objective requires actions on advocacy and collecting and analysing data; • Respond to needs relating to the context of early recovery and not covered by other humanitarian organisations (clusters, development programmes, etc.). | |
| Achievements <ul style="list-style-type: none"> • Six return and reintegration clusters have been established in the various eastern provinces, namely: Bunia, Goma, Bukavu, Lubumbashi, Kindu and Kisangani; • A village assessment and mapping exercise was carried out (by UNHCR/ACTED) in Equateur in the beginning of 2007; • A National Strategy for return and reintegration is being prepared with the Government. A draft is already being discussed with authorities and a workshop is planned for June to further discuss the strategy with the GoDRC and other partners. • 14,000 returnees will benefit from income generating activities during 2007; • Two joint projects between UNDP and UNHCR are currently taking place in South Kivu and Equateur; • UNICEF PEAR has carried out in-depth multi-sector evaluations in about 40 localities where major returns were registering. The follow-up has, for the moment, mainly been in education and NFIs. | Challenges <ul style="list-style-type: none"> • Collecting and centralising information on all reintegration activities in the country is proving difficult, in large part due to an insufficient number of staff specifically dedicated to following and sustaining the work of the cluster. A project was submitted to the PF to support the cluster. • The cluster is experiencing difficulties in securing funding for early recovery projects; • Insecurity in certain areas remains a main problem; • Early recovery responses across key sectors on behalf of returnees need to be strengthened and coordinated. |
| Emerging and additional priorities <ul style="list-style-type: none"> • The priorities of the cluster have not changed but focus is turning to North Kivu Province where increased planning will need to be done in order to ensure that people are able to return in a sustainable manner once the security situation has stabilised. | |

3.3.9 Education

Despite the difficulty in securing funding for emergency education, in part because it does not fall under the “saving lives” category, partners in the education cluster¹⁶ managed to provide emergency schooling for thousands of displaced and returning children. Furthermore, the combined thrust of the PEAR/RRM efforts resulted in improved coordination of partners and the establishment of a basis for data collection in education in emergencies.

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| EDUCATION/HAP strategic objectives <ul style="list-style-type: none"> • Ensure access to basic education for all children affected by crises; • Ensure access to basic education for returning displaced and refugee children and other vulnerable children. | |
| Achievements <ul style="list-style-type: none"> • RRM emergency education programme for IDPs permitted access to education to 51,000 children displaced in the eastern provinces; • A total of 13 schools were rehabilitated, creating learning spaces for displaced and returnee children; • Specifically, three schools were rehabilitated in each of Bafwasende and Opala, and two in Kisangani. In the south, four schools were rehabilitated in Kalemie and one in each of Nyuzu and Moba. | Challenges <ul style="list-style-type: none"> • Physical access and insecurity; • Despite the enormous needs of rehabilitating infrastructure and creating the necessary conditions for children to have adequate access to education, the sector is greatly under-funded given that it is not considered a “saving lives” priority; • Late arrival of funds constrained early commencement of project implementation in many cases. |

¹⁶ Main members of the education cluster include UNICEF, WFP, UNHCR, OXFAM, CRS, IRC, CARITAS, Jesuit Refugee Service (JRS), NRC, CARE, *Associazione Volontari per il Servizio Internazionale* (AVSI), SC, WVI.

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| <ul style="list-style-type: none"> PEAR ensured that 26,350 returnee children could continue their studies, particularly in Ituri where 12,221 returnees were assisted; Education kits were distributed to displaced and returnee children in Bukama, Pueto and Kabalo; Nine accelerated learning centres were also rehabilitated in Katanga. | |
| Emerging and additional priorities <ul style="list-style-type: none"> Priorities for the remainder of the year remain the same, with the exception of incorporating assistance to schools destroyed by the floods in various provinces into the cluster's plans. Given the on-going crisis in the east, the education cluster's focus and priority will remain there. | |

3.3.10 Emergency Telecommunications

Humanitarian organisations in DRC are required to be mobile in their response to emerging humanitarian needs and, as such, need to deploy to new locations where a crisis might be taking place to carry out evaluations, set up programmes, and ensure a coordinated response. In these situations, the emergency telecommunications cluster¹⁷ is essential in offering the humanitarian community deployed in a new location the necessary communication means to ensure the viability of their emergency programme. As an example, in response to a crisis in North Katanga emergency telecom partners were involved in setting up an OCHA antenna in Mitwaba. The following reflects the achievements and challenges cluster members faced during this operation.

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| EMERGENCY TELECOMMUNICATIONS/HAP strategic objectives <ul style="list-style-type: none"> Ensure that emergency telecommunications capabilities are developed in order to comply with Minimum Operating Security Standards (MOSS); Inter-agency emergency telecommunications are harmonised, so that resources are used economically and to facilitate coordination of humanitarian operations. | |
| Achievements <ul style="list-style-type: none"> The Datacom project established in Mitwaba benefited 20 users from United Nations agencies and NGOs operational in the area, and was the most effective means of communication between the village and the rest of the country; Technical staff and follow up was shared amongst different members of the cluster (UNICEF, TSF and NRC), which was important in ensuring its goals; An evaluation and lessons learned exercise of the experience was prepared and shared with cluster members to ensure future deployments and avoid certain problems; The results of the exercise were also shared at the regional level and exchanges are taking place to guarantee maximum efficiency in future actions. | Challenges <ul style="list-style-type: none"> The project experienced a delay of five months due to a delay in the transfer of funds. Delays in supply and logistics posed additional constraints. The end of the Datacom action was expected to be in March 2007 and the equipment was transferred to FAO. However, funding for the project was not forthcoming. It is only in June that a cost-sharing agreement was been reached by FAO-HCR to relieve UNICEF of the costs. |
| Emerging and additional priorities <ul style="list-style-type: none"> In collaboration with other humanitarian partners, an evaluation of future risks and early warning to identify potential areas that may need the cluster's support will be necessary to ensure adequate preparedness; | |

3.3.11 Coordination

The main elements of the Humanitarian Reform introduced in 2006 are still being piloted in the DRC. However, the impressive performance of some clusters in the DRC constitutes an important precedent as to how they should and can actually function. While progress has been made in certain clusters, more efforts should be made to bring them all to the same level. In the hope of increasing exchange of experiences and know-how, inter-cluster exchanges have been stepped up. Moreover, a monitoring methodology, based on monitoring crucial indicators rather than projects or activities, has been developed. Better results should be obtained by the end of the year.

The main challenge remaining is how to improve coordination so as to allow the clusters to bridge the enormous geographical distances in the DRC. The enormity of the country remains an overriding

¹⁷ Main members of the emergency telecommunications cluster are UNICEF, WFP, NRC and *Télécoms Sans Frontières* (TSF).

factor in all programmes and approaches. Communication and exchanges between the various levels of a nation-wide cluster need to be improved. While prioritisation of needs in conflict-affected areas and limited funding resources has kept humanitarian attention focused on eastern DRC, this report has highlighted the extent to which emergency needs are coming to light in parts of some western provinces. Following the establishment of certain clusters in these areas, and the strengthening of communication and support to partners in the field, the humanitarian community has begun to acquire a better vision of emergency needs outside the east. These efforts will need to continue throughout 2007 and into 2008.

Considering that major actors and activities may enter into play, with force, in the coming months/year, the need to improve coordination and discussions with development actors is becoming more and more apparent.

| COORDINATION/HAP strategic objectives | |
|--|---|
| <ul style="list-style-type: none"> • Consolidate humanitarian reforms in order to ensure appropriate humanitarian response; • Ensure leading role in terms of advocacy of humanitarian principles. | |
| Achievements | Challenges |
| <ul style="list-style-type: none"> • 80% of the clusters are functional in the Provinces. As an average, eight out of nine clusters (excluding telecommunications) are functional in nine areas within four provinces in the east of the country. • Three new antennas have been opened during the first six months in crisis zones not covered by an OCHA office and in three different provinces; • All eastern provinces have an up-dated contingency plan prepared with humanitarian actors in the provinces; • 90% of the NGOs present in the country participate in cluster meetings or other coordination mechanisms (NB: these include main operational NGOs, not the thousands of smaller associations operating in the country); • 26% (\$12,937,771) out of the targeted 50% (\$49,896,301) of PF grants were allocated to NGOs; • 430,545 hits to the DRC humanitarian website have been registered in the last six months, 4% more hits than last year. | <ul style="list-style-type: none"> • Difficulties obtaining information on the humanitarian situation on time in areas where OCHA is not present; • Problems to ensure coordination in these areas; • Challenges in having standard documents adopted by all partners in the various provinces; • Limited access due to security and logistics constraints. |
| Emerging and additional priorities | |
| <ul style="list-style-type: none"> • Improve dialogue with authorities and state services; • Reinforcement of capacities of national actors; • Further develop and consolidate the process of 'transition' from humanitarian assistance to development. | |

4. FUNDING AND PROJECTS

The HAP has not included project sheets for the year 2007. Instead, objectives and activities were defined, with a budget required to obtain these objectives. As the humanitarian strategy has not changed and objectives remain the same, the HAP budget is not being revised. The original total requirement for the HAP 2007 was \$686,591,107. The provinces requesting most funds were South Kivu (\$146 million) and Katanga (\$119 million). The sectors that requested the most funds were food security (\$196 million) followed by health and water-sanitation (about \$100 million each), logistics (\$85 million) and protection (\$67 million).

As of 10 July, the DRC 2007 Humanitarian Action Plan had received **\$254,905,538** from governmental and private donors (much channelled through the Pooled Fund) and the CERF under-funded window. This amount represents 37.10% of the total 2007 HAP funding requirements. At the time of reporting, estimated allocations by priority sectors included in the 2007 HAP were as follows:

On 10 July, total contributions to the DRC PF amounted to \$94,865,956, of which \$49,896,301 had been allocated to priority sector projects at national and regional/provincial levels, including \$6,837,665 to the UNICEF/OCHA Rapid Response Mechanism. Of the total DRC PF allocations \$12,037,432 (24%) went to NGOs and \$36,958,530 (74%) went to United Nations agencies. The PF Board has also accepted project proposals from national NGOs to a total of \$900,339 (2%).

The process of allocating funds via the PF has seen some significant improvements in early 2007. Detailed guidelines from the Humanitarian Coordinator (HC) to United Nations agencies, NGOs, national and provincial clusters and the in-country Inter-Agency Standing Committee (IASC) are now prepared, providing guidance on criteria and procedures. The overall allocation strategy is based on an analysis of the key priorities by province/region included in the 2007 HAP. The allocation strategy also reflected a comprehensive evaluation at the beginning of 2007 of how United Nations agencies and NGOs had used funding received in 2006. The 2006 performance of organisations was a key factor in determining whether and when organisations should benefit from additional pooled funding in 2007.

Participation in IASC meetings on PF allocations was broadened so as to reduce the risk of a United Nations-dominated decision-making process. A common electronic project sheet was introduced in early 2007 and is used for submission of project proposals to the HC and the Board. The project sheet includes the list of HAP strategic objectives to which priority projects must be linked in addition to detailed information on project activities, project coverage (by region and number/type of beneficiaries), and project budget. The summary of project sheet information is also shared with other donors to ensure that there are no overlaps in funding for the same project activities by sector and region/province.

In February, the Emergency Relief Coordinator (ERC) approved a total of \$36.6 million for DRC from the CERF under-funded Window. The HC applied the same priorities and project selection process, which had been adopted for PF projects in order to achieve maximum harmonisation of strategies for use of these two common funding mechanisms. The harmonised approach for the use of the CERF and PF contributions has been aimed at correcting wide funding disparities by sector, which had been long-standing in DRC. Priority was given to core humanitarian programmes with a national scope included in the 2007 HAP. The CERF allocation went primarily to emergency health programmes (21%), food security (19%), and protection (19%). Allocations to education and reintegration / community recovery activities amounted to 3% of the total 2007 CERF grant.

5. CONCLUSION

The priorities for humanitarian response in the coming six months remain centred on the following concerns: emergency response, protection of civilians, return and reintegration, and the need to increase access to vulnerable populations. The three-year Country Assistance Framework (CAF) addresses many of the chronic structural concerns across the country. The CAF has been prepared jointly by United Nations agencies in consultation with the Government, the World Bank, and donors. It is aimed at accelerating the implementation of key strategies focusing on PRSP priorities for social sectors, primarily health, education, HIV/AIDS and recovery of rural economies, and will serve as a basis to develop the transition from relief to development and the linkages with the 2008 HAP. Within the CAF, key activities to be implemented in the next 18 months had been approved by the

Government at the time of reporting. Response to acute crises related to conflict, natural disasters and epidemics, and short-term programmes aimed at supporting community reintegration will remain the thrust of the DRC Humanitarian Action Plan in 2008.

Response strategies and activities for the coming six months - needed to increase access, protect civilians, assist returns, and provide emergency assistance - will follow the same priorities defined in the 2007 HAP. Still, particular focus needs to be given to certain crucial issues outlined below.

Emergency response

With regards to acute emergencies, multi-sectoral emergency response capacity for both the Kivus needs to be reinforced, particularly the health sector. The complementarity of assistance mechanisms should be strengthened (NFI, Watsan, food, security/nutrition and health) in order to have a more holistic approach to responding to needs and prevent beneficiaries from having to sell their goods to access basic services. As for chronic emergencies, the humanitarian community needs to have a better overview of areas with high emergency indicators (mortality rates, acute malnutrition rates, etc) in order to ensure an appropriate response. In this regard, more attention to western provinces may be necessary. The task force on natural disasters should be encouraged to study areas vulnerable to future crises and to enhance preparedness.

Protection of civilians and vulnerable groups

Protection needs to be mainstreamed in all activities of other sector/clusters in order to reinforce protection monitoring and prevention activities for the safety of displaced populations, victims of gender-based violence, separated children, children associated with armed groups and forces, and other vulnerable populations.

Return and reintegration

Assistance to the large returning populations mainly in Ituri and Katanga, but also in South Kivu and Equateur, needs to be strengthened. As with the case of emergency assistance, a complementary and holistic approach should be encouraged. Developing the shelter component of assistance needs to be envisioned. The largest gap still exists with socio-economic activities to provide returnees with sustainable livelihoods.

Access to vulnerable populations

As seen in the difficulties expressed in most of the clusters, access to people in need remains a major challenge. The humanitarian community's capacity to overcome the enormous challenges related to logistics and access inherent to working in a vast country with deteriorated roads and transport services needs to be strengthened.

Apart from these main priorities, humanitarian action for the remainder of the year should include the following considerations:

Increase humanitarian analysis in the country

Related to the strategic priorities, and perhaps not sufficiently considered in the HAP, is the need to increase the amount of humanitarian analysis and baseline surveys across the country in order to improve our understanding of the humanitarian situation in the DRC as a whole, as well as be able to better understand the impact of humanitarian activities. Unfortunately, very few surveys are carried out systematically to renew data which means basic indicators are scarce and that impact is hard to measure. IRC is currently renewing its 2004 mortality survey in the country, but clusters should engage in more systematic data-collection exercises, as well as analyses on current practices. Examples include examining methods of assistance other than the distribution of kits and seeds (such as a voucher programme), and conducting surveys examining the willingness of populations to return. Consequently, proper planning of inter-agency missions until the end of the year should be made.

Improve humanitarian information management

The humanitarian community is increasingly viewing information management as a critical element of emergency response and coordination. Within the context of the further development and refinement of the cluster approach, the remaining months of 2007 and first half of 2008 should see the elaboration of a framework for information management that supports both intra-cluster and cross-cluster coordination, planning, and decision-making.

From broadly defining institutional roles and responsibilities to the detailed identification of data and technical standards, the success of these collective and collaborative efforts will ensure predictability,

quality and timeliness of information in humanitarian response. United Nations agencies and NGO partners should be actively engaged in the identification of information needs and the development of capacities, systems and tools to successfully collect, analyse and channel data to meet those needs. Ultimately, these capacities, systems and tools will prove critical in ensuring that clusters can carry out effective needs assessments, gap analysis, monitoring, and reporting activities.

Development of humanitarian standards and policies

Clusters have a unique role to play in setting standards and ensuring consistency across the sectors of humanitarian action in DRC. For example, the health cluster must work with the Government to ensure a countrywide policy of free health care for displaced populations. The NFI/shelter cluster will seek the standardisation of NFI kits and shelter packages provided to the different groups of beneficiaries. The logistics cluster will also work on establishing standards for road rehabilitation and the provision of ground and air logistics services.

Enhance monitoring and evaluation

A new methodology for monitoring the impact of humanitarian action has been introduced this year. The methodology consists of a monitoring of indicators predefined by the clusters, rather than a monitoring of activities or projects. Clusters in the field have been asked to collect data on the progress of the chosen indicators in areas with humanitarian activities. The initial results of this monitoring were provided for revision prior to drafting this report. While certain clusters are capable of defining the impact of their activities in the field and relate the progress made, other clusters have faced difficulties measuring this impact mainly due to the lack of baseline data, problems related to distances, communication and, at times, due to the very nature of the objective, which can be hard to measure.

Strengthen relations with partners

In particular, dialogue with provincial and local authorities and state services needs to be improved, as well as contacts with national actors that will become a key element in the transition from humanitarian action to development.

Transition from humanitarian action to development

In various areas, humanitarian actors are phasing out their activities following promises that development actors would be taking over to provide basic services in these areas (particularly health). Yet, the “bridge” between the two remains largely non-existent, and at times the situation in these areas deteriorates considerably due to this gap. With the introduction of the CAF, a closer dialogue and exchange along with better coordination between humanitarian actors and development actors should be encouraged.

Humanitarian response mechanisms may have to become more decentralised, more flexible and faster. The grey area and gaps left over by development activities will need to be defined as clearly as possible. The challenge for the 2008 Humanitarian Action Plan will be to better direct humanitarian action where it is most needed, to discern what areas and sectors are falling through the cracks, and to ensure that sufficient preparedness and response capacities are maintained to face the many challenges that lie ahead.

LIST OF FUNDED PROJECTS AND UNFUNDED REQUIREMENTS PER CLUSTER

Table III: Democratic Republic of Congo Humanitarian Action Plan 2007

List of Appeal Projects (grouped by cluster), with funding status of each
as of 10 July 2007
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by donors and appealing organisations

Page 1 of 21

| CLUSTER Project Code | Channel Activity | Original Requirements | Revised Requirements | Funding | % Covered | Unmet Requirements | Uncommitted Pledges |
|---|--|--------------------------|-------------------------|-------------------|--------------|-----------------------|------------------------|
| Value in US\$ | | A | B | C | C/B | B-C | D |
| CLUSTER NOT YET SPECIFIED | | | | | | | |
| DRC-07/OCHA | <u>OCHA</u> To be allocated to specific project | - | - | 1,199,996 | - | (1,199,996) | - |
| DRC-07/pooled | <u>Pooled funding</u> Awaiting allocation to specific agencies / sectors / projects. (The figure shown for 'funding' is the unallocated balance in the fund) | - | - | 44,969,655 | - | (44,969,655) | 9,210,526 |
| DRC-07/UNICEF | <u>UNICEF</u> Awaiting allocation to specific project/sector | - | - | 3,345,476 | - | (3,345,476) | - |
| DRC-07/WHO | <u>WHO</u> Awaiting allocation to specific project/sector | - | - | 940,860 | - | (940,860) | - |
| Subtotal for CLUSTER NOT YET SPECIFIED | | - | - | 50,455,987 | 0 % | (50,455,987) | 9,210,526 |
| COORDINATION | | | | | | | |
| DRC-07/ITU/COO/OCHA | <u>OCHA</u> Assurer un rôle de Chef de file en matière de plaidoyer et de principes humanitaires | - | - | 500,000 | - | (500,000) | - |
| DRC-07/ITU/COO/WFP | <u>WFP</u> Assurer l'accès physique (réhabilitation d'infrastructures de transport) et le transport vers les zones de retour et autres zones d'intervention humanitaire | - | - | 148,067 | - | (148,067) | - |
| DRC-07/KAS-OC/COO/UNOPS | <u>UNOPS</u> Consolider la Réforme humanitaire en vue d'assurer une réponse humanitaire appropriée (Kasai Occidental) | - | - | - | - | - | - |
| DRC-07/KAT/COO/ASI | <u>ASI</u> Assurer l'accès physique (réhabilitation d'infrastructures de transport) et le transport vers les zones de retour et autres zones d'intervention humanitaire | - | - | 344,672 | - | (344,672) | - |
| DRC-07/KAT/COO/DCA | <u>Danchurchaid</u> Consolider la Réforme humanitaire en vue d'assurer une réponse humanitaire appropriée (Katanga) | - | - | 356,059 | - | (356,059) | - |
| DRC-07/KAT/COO/EQUI | <u>Equilibre</u> Consolider la Réforme humanitaire en vue d'assurer une réponse humanitaire appropriée (Katanga) | - | - | 359,891 | - | (359,891) | - |
| DRC-07/KAT/COO/IFESH | <u>IFESH</u> Assurer l'accès physique (réhabilitation d'infrastructures de transport) et le transport vers les zones de retour et autres zones d'intervention humanitaire | - | - | 340,000 | - | (340,000) | - |
| DRC-07/KAT/COO/OCHA | <u>OCHA</u> Assurer un rôle de Chef de file en matière de plaidoyer et de principes humanitaires | - | - | 250,000 | - | (250,000) | - |
| DRC-07/KAT/COO/SOLIDA | <u>Solidarités</u> Assurer l'accès physique (réhabilitation d'infrastructures de transport) et le transport vers les zones de retour et autres zones d'intervention humanitaire | - | - | 132,000 | - | (132,000) | - |

The list of projects and the figures for their funding requirements in this document are a snapshot as of 10 July 2007. For continuously updated information on projects, funding requirements, and contributions to date, visit the Financial Tracking Service (www.reliefweb.int/fts).

DEMOCRATIC REPUBLIC OF THE CONGO

Table III: Democratic Republic of Congo Humanitarian Action Plan 2007

List of Appeal Projects (grouped by cluster), with funding status of each
as of 10 July 2007
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by donors and appealing organisations

Page 2 of 21

| CLUSTER Project Code | Channel Activity | Original Requirements | Revised Requirements | Funding | % Covered | Unmet Requirements | Uncommitted Pledges |
|----------------------------------|--|--------------------------|-------------------------|-------------------|--------------|-----------------------|------------------------|
| Value in US\$ | | A | B | C | C/B | B-C | D |
| COORDINATION (Continued) | | | | | | | |
| DRC-07/KAT/COO/WFP | <u>WFP</u> Assurer l'accès physique (réhabilitation d'infrastructures de transport) et le transport vers les zones de retour et autres zones d'intervention humanitaire | - | - | 121,145 | - | (121,145) | - |
| DRC-07/KIN/COO/OCHA | <u>OCHA</u> Assurer un rôle de Chef de file en matière de plaidoyer et de principes humanitaires | - | - | 2,500,000 | - | (2,500,000) | - |
| DRC-07/NKV/COO/OCHA | <u>OCHA</u> Assurer un rôle de Chef de file en matière de plaidoyer et de principes humanitaires | - | - | 1,300,000 | - | (1,300,000) | - |
| DRC-07/NKV/COO/WFP | <u>WFP</u> Assurer l'accès physique (réhabilitation d'infrastructures de transport) et le transport vers les zones de retour et autres zones d'intervention humanitaire | - | - | 188,448 | - | (188,448) | - |
| DRC-07/PNA/COO/1/01 | <u>Unspecified</u> Consolider la Réforme humanitaire en vue d'assurer une réponse humanitaire appropriée (National) | 14,724,225 | 14,724,225 | - | - | 14,724,225 | - |
| DRC-07/PNA/COO/ASI | <u>ASI</u> Logistics of relief commodities | - | - | 3,634,535 | - | (3,634,535) | - |
| DRC-07/PNA/COO/OCHA | <u>OCHA</u> Consolider la Réforme humanitaire en vue d'assurer une réponse humanitaire appropriée (National) | - | - | 2,117,918 | - | (2,117,918) | - |
| DRC-07/PNA/COO/RRM/O | <u>RRM/O</u> Consolider la Réforme humanitaire en vue d'assurer une réponse humanitaire appropriée (National) | - | - | - | - | - | - |
| DRC-07/PNA/COO/UNICEF | <u>UNICEF</u> Consolider la Réforme humanitaire en vue d'assurer une réponse humanitaire appropriée (National) | - | - | 4,719,747 | - | (4,719,747) | - |
| DRC-07/SKV/COO/ACTED | <u>ACTED</u> Assurer l'accès physique (réhabilitation d'infrastructures de transport) et le transport vers les zones de retour et autres zones d'intervention humanitaire | - | - | 673,643 | - | (673,643) | - |
| DRC-07/SKV/COO/ASI | <u>ASI</u> Assurer l'accès physique (réhabilitation d'infrastructures de transport) et le transport vers les zones de retour et autres zones d'intervention humanitaire | - | - | 229,781 | - | (229,781) | - |
| DRC-07/SKV/COO/MALT | <u>Malteser</u> Consolider la Réforme humanitaire en vue d'assurer une réponse humanitaire appropriée (Sud Kivu) | - | - | 490,000 | - | (490,000) | - |
| DRC-07/SKV/COO/OCHA | <u>OCHA</u> Assurer un rôle de Chef de file en matière de plaidoyer et de principes humanitaires | - | - | 450,000 | - | (450,000) | - |
| DRC-07/SKV/COO/WFP | <u>WFP</u> Assurer l'accès physique (réhabilitation d'infrastructures de transport) et le transport vers les zones de retour et autres zones d'intervention humanitaire | - | - | 215,370 | - | (215,370) | - |
| Subtotal for COORDINATION | | 14,724,225 | 14,724,225 | 19,071,276 | 130 % | (4,347,051) | - |

The list of projects and the figures for their funding requirements in this document are a snapshot as of 10 July 2007. For continuously updated information on projects, funding requirements, and contributions to date, visit the Financial Tracking Service (www.reliefweb.int/fts).

DEMOCRATIC REPUBLIC OF THE CONGO

Table III: Democratic Republic of Congo Humanitarian Action Plan 2007

List of Appeal Projects (grouped by cluster), with funding status of each
as of 10 July 2007
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by donors and appealing organisations

Page 3 of 21

| CLUSTER Project Code | Channel Activity | Original Requirements | Revised Requirements | Funding | % Covered | Unmet Requirements | Uncommitted Pledges |
|---------------------------------------|--|--------------------------|-------------------------|------------------|--------------|-----------------------|------------------------|
| Value in US\$ | | A | B | C | C/B | B-C | D |
| ECONOMIC RECOVERY | | | | | | | |
| DRC-07/PNA/REC/ ACTED | <u>ACTED</u> Stabilisation de la situation post- conflit l'est de la RDC | - | - | 3,225,762 | - | (3,225,762) | - |
| Subtotal for ECONOMIC RECOVERY | | - | - | 3,225,762 | 0 % | (3,225,762) | - |
| EDUCATION | | | | | | | |
| DRC-07/BAC/EDU/2/04M | <u>Unspecified</u> Assurer l'accès de tous les enfants affectés par les crises à l'éducation de base (Bas Congo) | 208,080 | 208,080 | - | - | 208,080 | - |
| DRC-07/BAN/EDU/2/04L | <u>Unspecified</u> Assurer l'accès de tous les enfants affectés par les crises à l'éducation de base (Bandudu) | 231,200 | 231,200 | - | - | 231,200 | - |
| DRC-07/EQU/EDU/2/04I | <u>Unspecified</u> Assurer l'accès de tous les enfants affectés par les crises à l'éducation de base (Equateur) | 476,000 | 476,000 | - | - | 476,000 | - |
| DRC-07/EQU/EDU/ UNICEF | <u>UNICEF</u> Assurer l'accès de tous les enfants affectés par les crises à l'éducation de base | - | - | 58,250 | - | (58,250) | - |
| DRC-07/ITU/EDU/1/02A | <u>Unspecified</u> Assurer l'accès de tous les enfants affectés par les crises à l'éducation de base (Ituri) | 1,020,000 | 1,020,000 | - | - | 1,020,000 | - |
| DRC-07/ITU/EDU/2/04A | <u>Unspecified</u> Assurer l'accès de tous les enfants affectés par les crises à l'éducation de base (Ituri) | 3,468,000 | 3,468,000 | - | - | 3,468,000 | - |
| DRC-07/ITU/EDU/ UNICEF | <u>UNICEF</u> Assurer l'accès de tous les enfants affectés par les crises à l'éducation de base | - | - | 233,000 | - | (233,000) | - |
| DRC-07/KAS-OC/EDU/ UNICEF | <u>UNICEF</u> Assurer l'accès de tous les enfants affectés par les crises à l'éducation de base | - | - | 58,250 | - | (58,250) | - |
| DRC-07/KAS-OR/EDU/ UNICEF | <u>UNICEF</u> Assurer l'accès de tous les enfants affectés par les crises à l'éducation de base | - | - | 58,250 | - | (58,250) | - |
| DRC-07/KAT/EDU/1/02D | <u>Unspecified</u> Assurer l'accès de tous les enfants affectés par les crises à l'éducation de base (Katanga) | 800,000 | 800,000 | - | - | 800,000 | - |
| DRC-07/KAT/EDU/2/04D | <u>Unspecified</u> Assurer l'accès de tous les enfants affectés par les crises à l'éducation de base (Katanga) | 1,636,896 | 1,636,896 | - | - | 1,636,896 | - |
| DRC-07/KAT/EDU/NRC | <u>NRC</u> Assurer l'accès de tous les enfants affectés par les crises à l'éducation de base (Ituri) | - | - | 350,000 | - | (350,000) | - |
| DRC-07/KAT/EDU/ UNICEF | <u>UNICEF</u> Assurer l'accès de tous les enfants affectés par les crises à l'éducation de base | - | - | 233,000 | - | (233,000) | - |
| DRC-07/KOC/EDU/2/04H | <u>Unspecified</u> Assurer l'accès de tous les enfants affectés par les crises à l'éducation de base (Kasai Occ) | 680,000 | 680,000 | - | - | 680,000 | - |
| DRC-07/KOR/EDU/2/04G | <u>Unspecified</u> Assurer l'accès de tous les enfants affectés par les crises à l'éducation de base (Kasai Oriental) | 1,700,000 | 1,700,000 | - | - | 1,700,000 | - |

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DEMOCRATIC REPUBLIC OF THE CONGO

Table III: Democratic Republic of Congo Humanitarian Action Plan 2007

List of Appeal Projects (grouped by cluster), with funding status of each
as of 10 July 2007
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by donors and appealing organisations

Page 4 of 21

| CLUSTER Project Code | Channel/ Activity | Original Requirements | Revised Requirements | Funding | % Covered | Unmet Requirements | Uncommitted Pledges |
|-------------------------------|---|--------------------------|-------------------------|------------------|--------------|-----------------------|------------------------|
| Value in US\$ | | A | B | C | C/B | B-C | D |
| EDUCATION (Continued) | | | | | | | |
| DRC-07/MAN/EDU/2/04F | <u>Unspecified</u> Assurer l'accès de tous les enfants affectés par les crises à l'éducation de base (Maniema) | 680,000 | 680,000 | - | - | 680,000 | - |
| DRC-07/MAN/EDU/ UNICEF | <u>UNICEF</u> Assurer l'accès de tous les enfants affectés par les crises à l'éducation de base | - | - | 58,250 | - | (58,250) | - |
| DRC-07/NKV/EDU/1/02B | <u>Unspecified</u> Assurer l'accès de tous les enfants affectés par les crises à l'éducation de base (Nord Kivu) | 2,040,000 | 2,040,000 | - | - | 2,040,000 | - |
| DRC-07/NKV/EDU/2/04B | <u>Unspecified</u> Assurer l'accès de tous les enfants affectés par les crises à l'éducation de base (Nord Kivu) | 1,791,800 | 1,791,800 | - | - | 1,791,800 | - |
| DRC-07/NKV/EDU/ UNICEF | <u>UNICEF</u> Assurer l'accès de tous les enfants affectés par les crises à l'éducation de base | - | - | 233,000 | - | (233,000) | - |
| DRC-07/ORI/EDU/1/02E | <u>Unspecified</u> Assurer l'accès de tous les enfants affectés par les crises à l'éducation de base (Orientale) | 340,000 | 340,000 | - | - | 340,000 | - |
| DRC-07/ORI/EDU/2/04E | <u>Unspecified</u> Assurer l'accès de tous les enfants affectés par les crises à l'éducation de base (Orientale) | 504,560 | 504,560 | - | - | 504,560 | - |
| DRC-07/PNA/EDU/1/01 | <u>Unspecified</u> Assurer l'accès de tous les enfants affectés par les crises à l'éducation de base (National) | 2,685,185 | 2,685,185 | - | - | 2,685,185 | - |
| DRC-07/PNA/EDU/2/03 | <u>Unspecified</u> Assurer l'accès de tous les enfants affectés par les crises à l'éducation de base (National) | 1,790,123 | 1,790,123 | - | - | 1,790,123 | - |
| DRC-07/PNA/EDU/ UNICEF | <u>UNICEF</u> Education in emergencies | - | - | 1,007,088 | - | (1,007,088) | - |
| DRC-07/SKV/EDU/1/02C | <u>Unspecified</u> Assurer l'accès de tous les enfants affectés par les crises à l'éducation de base (Sud Kivu) | 2,720,000 | 2,720,000 | - | - | 2,720,000 | - |
| DRC-07/SKV/EDU/2/04C | <u>Unspecified</u> Assurer l'accès de tous les enfants affectés par les crises à l'éducation de base (Sud Kivu) | 4,080,000 | 4,080,000 | - | - | 4,080,000 | - |
| DRC-07/SKV/EDU/ UNICEF | <u>UNICEF</u> Assurer l'accès de tous les enfants affectés par les crises à l'éducation de base | - | - | 233,000 | - | (233,000) | - |
| Subtotal for EDUCATION | | 26,851,844 | 26,851,844 | 2,522,088 | 9 % | 24,329,756 | - |
| EMERGENCY SHELTER | | | | | | | |
| DRC-07/BAC/SNF/2/04G | <u>Unspecified</u> Assurer que des nouveaux retournés (interne et rapatrié) depuis 3 mois ou des retournée nouvellement accessible en situation de vulnérabilité reçoivent des biens non alimentaires et des abris | 180,000 | 180,000 | - | - | 180,000 | - |

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DEMOCRATIC REPUBLIC OF THE CONGO

Table III: Democratic Republic of Congo Humanitarian Action Plan 2007

List of Appeal Projects (grouped by cluster), with funding status of each
as of 10 July 2007
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by donors and appealing organisations

Page 5 of 21

| CLUSTER Project Code | Channel Activity | Original Requirements | Revised Requirements | Funding | % Covered | Unmet Requirements | Uncommitted Pledges |
|--------------------------------------|---|--------------------------|-------------------------|---------|--------------|-----------------------|------------------------|
| Value in US\$ | | A | B | C | C/B | B-C | D |
| EMERGENCY SHELTER (Continued) | | | | | | | |
| DRC-07/EQU/SNF/2/04F | <u>Unspecified</u> Assurer que des nouveaux retournés (interne et rapatrié) depuis 3 mois ou des retournée nouvellement accessible en situation de vulnérabilité reçoivent des biens non alimentaires et des abris | 1,000,000 | 1,000,000 | - | - | 1,000,000 | - |
| DRC-07/ITU/SNF/1/02A | <u>Unspecified</u> Assurer que des personnes en situation de vulnérabilité aiguë accessibles et affectées par les crises reçoivent des biens non alimentaires de première nécessité et des abris d'urgence | 2,250,000 | 2,250,000 | - | - | 2,250,000 | - |
| DRC-07/ITU/SNF/2/04A | <u>Unspecified</u> Assurer que des nouveaux retournés (interne et rapatrié) depuis 3 mois ou des retournée nouvellement accessible en situation de vulnérabilité reçoivent des biens non alimentaires et des abris | 5,500,000 | 5,500,000 | - | - | 5,500,000 | - |
| DRC-07/ITU/SNF/CARITAS | <u>CARITAS</u> Distribution of NFIs in Ituri | - | - | 646,700 | - | (646,700) | - |
| DRC-07/ITU/SNF/COOPI | <u>COOPI</u> Renforcer la capacité institutionnelle des partenaires (NFI) | - | - | 48,925 | - | (48,925) | - |
| DRC-07/ITU/SNF/UNICEF | <u>UNICEF</u> Assurer que des personnes en situation de vulnérabilité aiguë accessibles et affectées par les crises reçoivent des biens non alimentaires de première nécessité et des abris d'urgence | - | - | 473,344 | - | (473,344) | - |
| DRC-07/KAT/SNF/1/02D | <u>Unspecified</u> Assurer que des personnes en situation de vulnérabilité aiguë accessibles et affectées par les crises reçoivent des biens non alimentaires de première nécessité et des abris d'urgence | 1,032,000 | 1,032,000 | - | - | 1,032,000 | - |
| DRC-07/KAT/SNF/2/04D | <u>Unspecified</u> Assurer que des nouveaux retournés (interne et rapatrié) depuis 3 mois ou des retournée nouvellement accessible en situation de vulnérabilité reçoivent des biens non alimentaires et des abris | 4,850,000 | 4,850,000 | - | - | 4,850,000 | - |
| DRC-07/KOC/SNF/2/04E | <u>Unspecified</u> Assurer que des nouveaux retournés (interne et rapatrié) depuis 3 mois ou des retournée nouvellement accessible en situation de vulnérabilité reçoivent des biens non alimentaires et des abris | 1,000,000 | 1,000,000 | - | - | 1,000,000 | - |
| DRC-07/NKV/SNF/1/02B | <u>Unspecified</u> Assurer que des personnes en situation de vulnérabilité aiguë accessibles et affectées par les crises reçoivent des biens non alimentaires de première nécessité et des abris d'urgence | 4,500,000 | 4,500,000 | - | - | 4,500,000 | - |
| DRC-07/NKV/SNF/2/04B | <u>Unspecified</u> Assurer que des nouveaux retournés (interne et rapatrié) depuis 3 mois ou des retournée nouvellement accessible en situation de vulnérabilité reçoivent des biens non alimentaires et des abris | 3,460,000 | 3,460,000 | - | - | 3,460,000 | - |

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DEMOCRATIC REPUBLIC OF THE CONGO

Table III: Democratic Republic of Congo Humanitarian Action Plan 2007

List of Appeal Projects (grouped by cluster), with funding status of each
as of 10 July 2007
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by donors and appealing organisations

Page 6 of 21

| CLUSTER Project Code | Channel Activity | Original Requirements | Revised Requirements | Funding | % Covered | Unmet Requirements | Uncommitted Pledges |
|--|---|--------------------------|-------------------------|------------------|--------------|-----------------------|------------------------|
| Value in US\$ | | A | B | C | C/B | B-C | D |
| EMERGENCY SHELTER (Continued) | | | | | | | |
| DRC-07/NKV/SNF/ UNICEF | <u>UNICEF</u> Assurer que des personnes en situation de vulnérabilité aiguë accessibles et affectées par les crises reçoivent des biens non alimentaires de première nécessité et des abris d'urgence | - | - | 473,344 | - | (473,344) | - |
| DRC-07/PNA/SNF/1/01 | <u>Unspecified</u> Assurer une réponse de dernier recours en biens non alimentaires et abris d'urgence | 4,345,000 | 4,345,000 | - | - | 4,345,000 | - |
| DRC-07/PNA/SNF/1/02 | <u>UNICEF</u> Emergency non-food items and shelter for returning IDPs | - | - | 2,812,126 | - | (2,812,126) | - |
| DRC-07/PNA/SNF/2/03 | <u>Unspecified</u> Renforcer la capacité institutionnelle des partenaires | 350,000 | 350,000 | - | - | 350,000 | - |
| DRC-07/PNA/SNF/ MEMISA | <u>MEMISA</u> Strategic stock of humanitarian goods | - | - | 993,377 | - | (993,377) | - |
| DRC-07/SKV/SNF/1/02C | <u>Unspecified</u> Assurer que des personnes en situation de vulnérabilité aiguë accessibles et affectées par les crises reçoivent des biens non alimentaires de première nécessité et des abris d'urgence | 6,800,000 | 6,800,000 | - | - | 6,800,000 | - |
| DRC-07/SKV/SNF/2/04C | <u>Unspecified</u> Assurer que des nouveaux retournés (interne et rapatrié) depuis 3 mois ou des retournée nouvellement accessible en situation de vulnérabilité reçoivent des biens non alimentaires et des abris | 7,750,000 | 7,750,000 | - | - | 7,750,000 | - |
| DRC-07/SKV/SNF/ OXFAM UK | <u>OXFAM UK</u> Renforcer la capacité institutionnelle des partenaires (NFI) | - | - | 432,148 | - | (432,148) | - |
| DRC-07/SKV/SNF/ UNICEF | <u>UNICEF</u> Assurer que des personnes en situation de vulnérabilité aiguë accessibles et affectées par les crises reçoivent des biens non alimentaires de première nécessité et des abris d'urgence | - | - | 368,156 | - | (368,156) | - |
| Subtotal for EMERGENCY SHELTER | | 43,017,000 | 43,017,000 | 6,248,120 | 15 % | 36,768,880 | - |
| EMERGENCY TELECOMMUNICATIONS | | | | | | | |
| DRC-07/MPR/TEL/1/02 | <u>Unspecified</u> Assurer une bonne harmonisation des télécommunications d'urgence interagences pour un usage économique des ressources et faciliter une synergie des opérations humanitaires (National) | 428,000 | 428,000 | - | - | 428,000 | - |
| DRC-07/PNA/TEL/1/01 | <u>Unspecified</u> Assurer le développement des capacités en télécommunications d'urgence afin de garantir les normes MOSS (National) | 246,965 | 246,965 | - | - | 246,965 | - |
| Subtotal for EMERGENCY TELECOMMUNICATIONS | | 674,965 | 674,965 | - | 0 % | 674,965 | - |
| FOOD SECURITY | | | | | | | |
| DRC-07/BAC/FOO/2/01L | <u>Unspecified</u> Répondre aux besoins alimentaires d'urgence, Appuyer la production alimentaire d'urgence (Bas Congo) | 1,305,000 | 1,305,000 | - | - | 1,305,000 | - |

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DEMOCRATIC REPUBLIC OF THE CONGO

Table III: Democratic Republic of Congo Humanitarian Action Plan 2007

List of Appeal Projects (grouped by cluster), with funding status of each
as of 10 July 2007
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by donors and appealing organisations

Page 7 of 21

| CLUSTER Project Code | Channel Activity | Original Requirements | Revised Requirements | Funding | % Covered | Unmet Requirements | Uncommitted Pledges |
|----------------------------------|--|--------------------------|-------------------------|-----------|--------------|-----------------------|------------------------|
| Value in US\$ | | A | B | C | C/B | B-C | D |
| FOOD SECURITY (Continued) | | | | | | | |
| DRC-07/BAC/FOO/2/02M | <u>Unspecified</u> Rétablir la capacité d'autonomie de production alimentaire, Assurer la sécurité alimentaire des retournés et rapatriés (Bas Congo) | 549,000 | 549,000 | - | - | 549,000 | - |
| DRC-07/BAN/FOO/2/02L | <u>Unspecified</u> Rétablir la capacité d'autonomie de production alimentaire, Assurer la sécurité alimentaire des retournés et rapatriés (Bandudu) | 1,560,000 | 1,560,000 | - | - | 1,560,000 | - |
| DRC-07/EQU/FOO/2/011 | <u>Unspecified</u> Répondre aux besoins alimentaires d'urgence, Appuyer la production alimentaire d'urgence (Equateur) | 14,312,822 | 14,312,822 | - | - | 14,312,822 | - |
| DRC-07/EQU/FOO/2/021 | <u>Unspecified</u> Rétablir la capacité d'autonomie de production alimentaire, Assurer la sécurité alimentaire des retournés et rapatriés (Equateur) | 5,539,000 | 5,539,000 | - | - | 5,539,000 | - |
| DRC-07/FAO | <u>FAO</u> Awaiting allocation to specific project | - | - | 6,369,266 | - | (6,369,266) | - |
| DRC-07/ITU/FOO/2/01A | <u>Unspecified</u> Répondre aux besoins alimentaires d'urgence, Appuyer la production alimentaire d'urgence (Ituri) | 16,990,000 | 16,990,000 | - | - | 16,990,000 | - |
| DRC-07/ITU/FOO/2/02A | <u>Unspecified</u> Rétablir la capacité d'autonomie de production alimentaire, Assurer la sécurité alimentaire des retournés et rapatriés (Ituri) | 7,390,000 | 7,390,000 | - | - | 7,390,000 | - |
| DRC-07/ITU/FOO/FAO | <u>FAO</u> Répondre aux besoins alimentaires d'urgence, Appuyer la production alimentaire d'urgence (Nord Kivu) | - | - | 480,180 | - | (480,180) | - |
| DRC-07/ITU/FOO/ SOLIDA | <u>Solidarités</u> Répondre aux besoins alimentaires d'urgence, Appuyer la production alimentaire d'urgence (Nord Kivu) | - | - | 534,256 | - | (534,256) | - |
| DRC-07/KAS-OC/FOO/ FAO | <u>FAO</u> Répondre aux besoins alimentaires d'urgence, Appuyer la production alimentaire d'urgence (Nord Kivu) | - | - | 297,429 | - | (297,429) | - |
| DRC-07/KAS-OR/FOO/ FAO | <u>FAO</u> Répondre aux besoins alimentaires d'urgence, Appuyer la production alimentaire d'urgence (Nord Kivu) | - | - | 354,000 | - | (354,000) | - |
| DRC-07/KAT/FOO/2/01D | <u>Unspecified</u> Répondre aux besoins alimentaires d'urgence, Appuyer la production alimentaire d'urgence (Katanga) | 33,307,740 | 33,307,740 | - | - | 33,307,740 | - |
| DRC-07/KAT/FOO/2/02D | <u>Unspecified</u> Rétablir la capacité d'autonomie de production alimentaire, Assurer la sécurité alimentaire des retournés et rapatriés (Katanga) | 15,887,000 | 15,887,000 | - | - | 15,887,000 | - |
| DRC-07/KAT/FOO/FAO | <u>FAO</u> Répondre aux besoins alimentaires d'urgence, Appuyer la production alimentaire d'urgence (Nord Kivu) | - | - | 1,307,584 | - | (1,307,584) | - |
| DRC-07/KAT/FOO/ SOLIDA | <u>Solidarités</u> Répondre aux besoins alimentaires d'urgence, Appuyer la production alimentaire d'urgence (Nord Kivu) | - | - | 530,000 | - | (530,000) | - |
| DRC-07/KOC/FOO/2/01H | <u>Unspecified</u> Répondre aux besoins alimentaires d'urgence, Appuyer la production alimentaire d'urgence (Kasai Occ.) | 1,760,000 | 1,760,000 | - | - | 1,760,000 | - |

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DEMOCRATIC REPUBLIC OF THE CONGO

Table III: Democratic Republic of Congo Humanitarian Action Plan 2007

List of Appeal Projects (grouped by cluster), with funding status of each
as of 10 July 2007
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by donors and appealing organisations

Page 8 of 21

| CLUSTER Project Code | Channel Activity | Original Requirements | Revised Requirements | Funding | % Covered | Unmet Requirements | Uncommitted Pledges |
|----------------------------------|--|--------------------------|-------------------------|-----------|--------------|-----------------------|------------------------|
| Value in US\$ | | A | B | C | C/B | B-C | D |
| FOOD SECURITY (Continued) | | | | | | | |
| DRC-07/KOC/FOO/2/02H | <u>Unspecified</u> Rétablir la capacité d'autonomie de production alimentaire, Assurer la sécurité alimentaire des retournés et rapatriés (Kasai Occ.) | 400,000 | 400,000 | - | - | 400,000 | - |
| DRC-07/KOR/FOO/2/01G | <u>Unspecified</u> Répondre aux besoins alimentaires d'urgence, Appuyer la production alimentaire d'urgence (Kasai Or.) | 2,240,000 | 2,240,000 | - | - | 2,240,000 | - |
| DRC-07/KOR/FOO/2/02G | <u>Unspecified</u> Rétablir la capacité d'autonomie de production alimentaire, Assurer la sécurité alimentaire des retournés et rapatriés (Kasai Orientale) | 800,000 | 800,000 | - | - | 800,000 | - |
| DRC-07/MAN/FOO/2/01F | <u>Unspecified</u> Répondre aux besoins alimentaires d'urgence, Appuyer la production alimentaire d'urgence (Maniema) | 5,002,000 | 5,002,000 | - | - | 5,002,000 | - |
| DRC-07/MAN/FOO/2/02F | <u>Unspecified</u> Rétablir la capacité d'autonomie de production alimentaire, Assurer la sécurité alimentaire des retournés et rapatriés (Maniema) | 2,633,000 | 2,633,000 | - | - | 2,633,000 | - |
| DRC-07/NKV/FOO/2/01B | <u>Unspecified</u> Répondre aux besoins alimentaires d'urgence, Appuyer la production alimentaire d'urgence (Nord Kivu) | 22,387,000 | 22,387,000 | - | - | 22,387,000 | - |
| DRC-07/NKV/FOO/2/02B | <u>Unspecified</u> Rétablir la capacité d'autonomie de production alimentaire, Assurer la sécurité alimentaire des retournés et rapatriés (Nord Kivu) | 9,862,000 | 9,862,000 | - | - | 9,862,000 | - |
| DRC-07/NKV/FOO/FAO | <u>FAO</u> Répondre aux besoins alimentaires d'urgence, Appuyer la production alimentaire d'urgence (Nord Kivu) | - | - | 1,068,000 | - | (1,068,000) | - |
| DRC-07/ORI/FOO/2/01E | <u>Unspecified</u> Répondre aux besoins alimentaires d'urgence, Appuyer la production alimentaire d'urgence (Orientale) | 5,964,000 | 5,964,000 | - | - | 5,964,000 | - |
| DRC-07/ORI/FOO/2/02E | <u>Unspecified</u> Rétablir la capacité d'autonomie de production alimentaire, Assurer la sécurité alimentaire des retournés et rapatriés (Orientale) | 4,547,000 | 4,547,000 | - | - | 4,547,000 | - |
| DRC-07/PNA/FOO/1/01 | <u>WFP</u> Emergency food aid for vulnerable populations | - | - | 3,400,460 | - | (3,400,460) | - |
| DRC-07/PNA/FOO/2/01 | <u>FAO</u> Strengthening of household food security in areas of population return | - | - | 3,711,830 | - | (3,711,830) | - |
| DRC-07/PNA/FOO/FAO | <u>FAO</u> Répondre aux besoins alimentaires d'urgence, Appuyer la production alimentaire d'urgence (Nord Kivu) | - | - | 1,232,495 | - | (1,232,495) | - |
| DRC-07/SKV/FOO/2/01C | <u>Unspecified</u> Répondre aux besoins alimentaires d'urgence, Appuyer la production alimentaire d'urgence (Sud Kivu) | 29,404,000 | 29,404,000 | - | - | 29,404,000 | - |
| DRC-07/SKV/FOO/2/02C | <u>Unspecified</u> Rétablir la capacité d'autonomie de production alimentaire, Assurer la sécurité alimentaire des retournés et rapatriés (Sud Kivu) | 14,376,000 | 14,376,000 | 526,316 | 4% | 13,849,684 | - |
| DRC-07/SKV/FOO/FAO | <u>FAO</u> Répondre aux besoins alimentaires d'urgence, Appuyer la production alimentaire d'urgence (Nord Kivu) | - | - | 350,000 | - | (350,000) | - |

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DEMOCRATIC REPUBLIC OF THE CONGO

Table III: Democratic Republic of Congo Humanitarian Action Plan 2007

List of Appeal Projects (grouped by cluster), with funding status of each
as of 10 July 2007
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by donors and appealing organisations

Page 9 of 21

| CLUSTER Project Code | Channel Activity | Original Requirements | Revised Requirements | Funding | % Covered | Unmet Requirements | Uncommitted Pledges |
|-----------------------------------|---|--------------------------|-------------------------|-------------------|--------------|-----------------------|------------------------|
| Value in US\$ | | A | B | C | C/B | B-C | D |
| FOOD SECURITY (Continued) | | | | | | | |
| DRC-07/SKV/FOO/MALT | <u>Malteser</u> Répondre aux besoins alimentaires d'urgence, Appuyer la production alimentaire d'urgence (Nord Kivu) | - | - | 198,540 | - | (198,540) | - |
| DRC-07/WFP | <u>WFP</u> Awaiting allocation to specific project | - | - | 53,801,515 | - | (53,801,515) | - |
| Subtotal for FOOD SECURITY | | 196,215,562 | 196,215,562 | 74,161,871 | 38 % | 122,053,691 | - |
| HEALTH | | | | | | | |
| DRC-07/BAC/HEA/1/01L | <u>Unspecified</u> Réduire la mortalité & de la morbidité de la mère et de l'enfant de moins de 5 ans, Renforcer la prise en charge médicale & psychosociale des victimes de violence (Bas Congo) | 2,778,920 | 2,778,920 | - | - | 2,778,920 | - |
| DRC-07/BAC/HEA/2/03N | <u>Unspecified</u> Renforcer l'accès aux soins de santé primaire, y compris le VIH/SIDA, aux populations vulnérables (Bas Congo) | 2,544,501 | 2,544,501 | - | - | 2,544,501 | - |
| DRC-07/BAN/HEA/2/03L | <u>Unspecified</u> Renforcer l'accès aux soins de santé primaire, y compris le VIH/SIDA, aux populations vulnérables (Bandundu) | 2,625,000 | 2,625,000 | - | - | 2,625,000 | - |
| DRC-07/EQU/HEA/1/01I | <u>Unspecified</u> Réduire la mortalité et de la morbidité de la mère et de l'enfant de moins de 5 ans, Renforcer la prise en charge médicale et psychosociale des victimes de violence (Equateur) | 2,450,000 | 2,450,000 | - | - | 2,450,000 | - |
| DRC-07/EQU/HEA/2/03I | <u>Unspecified</u> Renforcer l'accès aux soins de santé primaire, y compris le VIH/SIDA, aux populations vulnérables (Equateur) | 2,200,000 | 2,200,000 | - | - | 2,200,000 | - |
| DRC-07/ITU/HEA/1/01A | <u>Unspecified</u> Réduire la mortalité et de la morbidité de la mère et de l'enfant de moins de 5 ans, Renforcer la prise en charge médicale et psychosociale des victimes de violence (Ituri) | 1,100,000 | 1,100,000 | - | - | 1,100,000 | - |
| DRC-07/ITU/HEA/2/03A | <u>Unspecified</u> Renforcer l'accès aux soins de santé primaire, y compris le VIH/SIDA, aux populations vulnérables (Ituri) | 9,250,000 | 9,250,000 | - | - | 9,250,000 | - |
| DRC-07/ITU/HEA/COOPI | <u>COOPI</u> Renforcer l'accès aux soins de santé primaire, y compris le VIH/SIDA, aux populations vulnérables (Ituri) | - | - | 2,802,129 | - | (2,802,129) | - |
| DRC-07/ITU/HEA/FAO | <u>FAO</u> Renforcer la prise en charge médicale et psychosociale des victimes de violence de toute nature | - | - | 780,000 | - | (780,000) | - |
| DRC-07/ITU/HEA/MALT | <u>Malteser</u> Renforcer l'accès aux soins de santé primaire, y compris le VIH/SIDA, aux populations vulnérables (Ituri) | - | - | 475,166 | - | (475,166) | - |
| DRC-07/ITU/HEA/UNICEF | <u>UNICEF</u> Renforcer l'accès aux soins de santé primaire, y compris le VIH/SIDA, aux populations vulnérables (Ituri) | - | - | 691,140 | - | (691,140) | - |
| DRC-07/ITU/HEA/WHO | <u>WHO</u> Renforcer l'accès aux soins de santé primaire, y compris le VIH/SIDA, aux populations vulnérables (Ituri) | - | - | 728,135 | - | (728,135) | - |
| DRC-07/KAS-OC/HEA/FAO | <u>FAO</u> Renforcer la capacité institutionnelle des partenaires (Nutrition) | - | - | 33,048 | - | (33,048) | - |

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DEMOCRATIC REPUBLIC OF THE CONGO

Table III: Democratic Republic of Congo Humanitarian Action Plan 2007

List of Appeal Projects (grouped by cluster), with funding status of each
as of 10 July 2007
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by donors and appealing organisations

Page 10 of 21

| CLUSTER Project Code | Channel Activity | Original Requirements | Revised Requirements | Funding | % Covered | Unmet Requirements | Uncommitted Pledges |
|------------------------------|--|--------------------------|-------------------------|---------|--------------|-----------------------|------------------------|
| Value in US\$ | | A | B | C | C/B | B-C | D |
| HEALTH (Continued) | | | | | | | |
| DRC-07/KAS-OC/HEA/ WHO | <u>WHO</u> Réduire la mortalité et de la morbidité de la mère et de l'enfant de moins de 5 ans | - | - | 461,796 | - | (461,796) | - |
| DRC-07/KAS-OR/HEA/ UNFPA | <u>UNFPA</u> Réduire la mortalité et de la morbidité de la mère et de l'enfant de moins de 5 ans | - | - | 295,320 | - | (295,320) | - |
| DRC-07/KAS-OR/HEA/ UNICEF | <u>UNICEF</u> Renforcer la capacité institutionnelle des partenaires | - | - | 203,809 | - | (203,809) | - |
| DRC-07/KAT/HEA/1/01D | <u>Unspecified</u> Réduire la mortalité et de la morbidité de la mère et de l'enfant de moins de 5 ans, Renforcer la prise en charge médicale et psychosociale des victimes de violence (Katanga) | 6,150,000 | 6,150,000 | - | - | 6,150,000 | - |
| DRC-07/KAT/HEA/2/03D | <u>Unspecified</u> Renforcer l'accès aux soins de santé primaire, y compris le VIH/SIDA, aux populations vulnérables (Katanga) | 7,750,000 | 7,750,000 | - | - | 7,750,000 | - |
| DRC-07/KAT/HEA/ UNFPA | <u>UNFPA</u> Renforcer la prise en charge médicale et psychosociale des victimes de violence de toute nature | - | - | 428,535 | - | (428,535) | - |
| DRC-07/KIN/HEA/2/03M | <u>Unspecified</u> Renforcer l'accès aux soins de santé primaire, y compris le VIH/SIDA, aux populations vulnérables (Kinshasa) | 4,942,140 | 4,942,140 | - | - | 4,942,140 | - |
| DRC-07/KOC/HEA/1/01H | <u>Unspecified</u> Réduire la mortalité & de la morbidité de la mère et de l'enfant de moins de 5 ans, Renforcer la prise en charge médicale et psychosociale des victimes de violence (Kasai Occ.) | 2,700,000 | 2,700,000 | - | - | 2,700,000 | - |
| DRC-07/KOC/HEA/2/03H | <u>Unspecified</u> Renforcer l'accès aux soins de santé primaire, y compris le VIH/SIDA, aux populations vulnérables (Kasai Occ.) | 4,300,000 | 4,300,000 | - | - | 4,300,000 | - |
| DRC-07/KOR/HEA/1/01G | <u>Unspecified</u> Réduire la mortalité & de la morbidité de la mère et de l'enfant de moins de 5 ans, Renforcer la prise en charge médicale et psychosociale des victimes de violence (Kasai Oriental) | 970,000 | 970,000 | - | - | 970,000 | - |
| DRC-07/KOR/HEA/2/03G | <u>Unspecified</u> Renforcer l'accès aux soins de santé primaire, y compris le VIH/SIDA, aux populations vulnérables (Kasai Or.) | 1,884,000 | 1,884,000 | - | - | 1,884,000 | - |
| DRC-07/MAN/HEA/1/01F | <u>Unspecified</u> Réduire la mortalité et de la morbidité de la mère et de l'enfant de moins de 5 ans, Renforcer la prise en charge médicale et psychosociale des victimes de violence (Maniema) | 2,850,000 | 2,850,000 | - | - | 2,850,000 | - |
| DRC-07/MAN/HEA/2/03F | <u>Unspecified</u> Renforcer l'accès aux soins de santé primaire, y compris le VIH/SIDA, aux populations vulnérables (Maniema) | 3,400,000 | 3,400,000 | - | - | 3,400,000 | - |
| DRC-07/NKV/HEA/1/01B | <u>Unspecified</u> Réduire la mortalité et de la morbidité de la mère et de l'enfant de moins de 5 ans, Renforcer la prise en charge médicale et psychosociale des victimes de violence (Nord Kivu) | 6,600,000 | 6,600,000 | - | - | 6,600,000 | - |

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DEMOCRATIC REPUBLIC OF THE CONGO

Table III: Democratic Republic of Congo Humanitarian Action Plan 2007

List of Appeal Projects (grouped by cluster), with funding status of each
as of 10 July 2007
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by donors and appealing organisations

Page 11 of 21

| CLUSTER Project Code | Channel Activity | Original Requirements | Revised Requirements | Funding | % Covered | Unmet Requirements | Uncommitted Pledges |
|---------------------------|---|--------------------------|-------------------------|-----------|--------------|-----------------------|------------------------|
| Value in US\$ | | A | B | C | C/B | B-C | D |
| HEALTH (Continued) | | | | | | | |
| DRC-07/NKV/HEA/1/01C | <u>Unspecified</u> Réduire la mortalité et de la morbidité de la mère et de l'enfant de moins de 5 ans, Renforcer la prise en charge médicale et psychosociale des victimes de violence (Sud Kivu) | 9,100,000 | 9,100,000 | - | - | 9,100,000 | - |
| DRC-07/NKV/HEA/2/03B | <u>Unspecified</u> Renforcer l'accès aux soins de santé primaire, y compris le VIH/SIDA, aux populations vulnérables (Nord Kivu) | 9,300,000 | 9,300,000 | - | - | 9,300,000 | - |
| DRC-07/NKV/HEA/ UNFPA | <u>UNFPA</u> Réduire la mortalité et de la morbidité de la mère et de l'enfant de moins de 5 ans | - | - | 503,114 | - | (503,114) | - |
| DRC-07/NKV/HEA/ UNICEF | <u>UNICEF</u> Renforcer l'accès aux soins de santé primaire, y compris le VIH/SIDA, aux populations vulnérables (Nord Kivu) | - | - | 414,385 | - | (414,385) | - |
| DRC-07/NKV/HEA/ UNOPS | <u>UNOPS</u> Renforcer l'accès aux soins de santé primaire, y compris le VIH/SIDA, aux populations vulnérables | - | - | 426,650 | - | (426,650) | - |
| DRC-07/NKV/HEA/WHO | <u>WHO</u> Renforcer l'accès aux soins de santé primaire, y compris le VIH/SIDA, aux populations vulnérables (Nord Kivu) | - | - | 174,945 | - | (174,945) | - |
| DRC-07/ORI/HEA/1/01E | <u>Unspecified</u> Réduire la mortalité et de la morbidité de la mère et de l'enfant de moins de 5 ans, Renforcer la prise en charge médicale et psychosociale des victimes de violence (Orientale) | 3,025,712 | 3,025,712 | - | - | 3,025,712 | - |
| DRC-07/ORI/HEA/2/03E | <u>Unspecified</u> Renforcer l'accès aux soins de santé primaire, y compris le VIH/SIDA, aux populations vulnérables (Oriental) | 843,080 | 843,080 | - | - | 843,080 | - |
| DRC-07/PNA/HEA/1/01 | <u>WHO</u> Measles vaccination campaign in the provinces of Kasai Occidental, Katanga, Maniema, South Kivu | - | - | 500,000 | - | (500,000) | - |
| DRC-07/PNA/HEA/1/02 | <u>WHO</u> Strengthening of health cluster activities in DRC | - | - | 154,615 | - | (154,615) | - |
| DRC-07/PNA/HEA/1/04 | <u>UNICEF</u> Support the organisation of accelerated immunisation campaigns in the provinces of Bandundu, Maniema, Orientale, South Kivu, Katanga, Kasai Occidental. | - | - | 1,498,000 | - | (1,498,000) | - |
| DRC-07/PNA/HEA/1/05 | <u>UNICEF</u> Support to malaria control in vulnerable health zones. (North Kivu, South Kivu, Orientale) | - | - | 1,218,195 | - | (1,218,195) | - |
| DRC-07/PNA/HEA/1/06 | <u>UNFPA</u> Support to the improvement of reproductive health service provision in areas affected by humanitarian crisis and massive return of populations(Katanga, Maniema, Province Orientale) | - | - | 1,169,775 | - | (1,169,775) | - |
| DRC-07/PNA/HEA/1/07 | <u>WHO</u> Strengthen the immunization of children, pregnant women and persons exposed to meningitis in conflict and post-conflict health zones in the provinces of Kasai Oriental, North Kivu, Province Orientale | - | - | 773,870 | - | (773,870) | - |

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DEMOCRATIC REPUBLIC OF THE CONGO

Table III: Democratic Republic of Congo Humanitarian Action Plan 2007

List of Appeal Projects (grouped by cluster), with funding status of each
as of 10 July 2007
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by donors and appealing organisations

Page 12 of 21

| CLUSTER Project Code | Channel/ Activity | Original Requirements | Revised Requirements | Funding | % Covered | Unmet Requirements | Uncommitted Pledges |
|--------------------------------------|---|--------------------------|-------------------------|-------------------|--------------|-----------------------|------------------------|
| Value in US\$ | | A | B | C | C/B | B-C | D |
| HEALTH (Continued) | | | | | | | |
| DRC-07/PNA/HEA/2/02 | <u>Unspecified</u> Réduire la mortalité et de la morbidité de la mère et de l'enfant de moins de 5 ans, Renforcer la prise en charge médicale et psychosociale des victimes de violence (National) | 3,500,000 | 3,500,000 | - | - | 3,500,000 | - |
| DRC-07/PNA/HEA/AMI-France | <u>AMI-France</u> Aide médicale en faveur des populations du district Sud de la Province du Sud Kivu | - | - | 3,497,268 | - | (3,497,268) | - |
| DRC-07/PNA/HEA/IRC | <u>IRC</u> Health | - | - | 397,755 | - | (397,755) | - |
| DRC-07/PNA/HEA/JOIN | <u>JOIN</u> Basic health care in Katanga Province | - | - | 419,058 | - | (419,058) | - |
| DRC-07/PNA/HEA/WHO | <u>WHO</u> Renforcer l'accès aux soins de santé primaire, y compris le VIH/SIDA, aux populations vulnérables | - | - | 1,200,000 | - | (1,200,000) | - |
| DRC-07/SKV/HEA/2/03C | <u>Unspecified</u> Renforcer l'accès aux soins de santé primaire, y compris le VIH/SIDA, aux populations vulnérables (Sud Kivu) | 8,500,000 | 8,500,000 | - | - | 8,500,000 | - |
| DRC-07/SKV/HEA/ACF-USA | <u>ACF/USA</u> Renforcer l'accès aux soins de santé primaire, y compris le VIH/SIDA, aux populations vulnérables (Sud Kivu) | - | - | 898,449 | - | (898,449) | - |
| DRC-07/SKV/HEA/OXFAM UK | <u>OXFAM UK</u> Réduire la mortalité et de la morbidité de la mère et de l'enfant de moins de 5 ans | - | - | 240,000 | - | (240,000) | - |
| DRC-07/SKV/HEA/STICHTING VLUCHTELING | <u>Stichting Vluchteling</u> Improving the health situation of the people in South-Kivu | - | - | 1,440,918 | - | (1,440,918) | - |
| DRC-07/SKV/HEA/UNICEF | <u>UNICEF</u> Renforcer l'accès aux soins de santé primaire, y compris le VIH/SIDA, aux populations vulnérables (Sud Kivu) | - | - | 504,684 | - | (504,684) | - |
| DRC-07/SKV/HEA/WHO | <u>WHO</u> Renforcer l'accès aux soins de santé primaire, y compris le VIH/SIDA, aux populations vulnérables (Sud Kivu) | - | - | 593,422 | - | (593,422) | - |
| Subtotal for HEALTH | | 98,763,353 | 98,763,353 | 22,924,181 | 23 % | 75,839,172 | - |
| LOGISTICS | | | | | | | |
| DRC-07/EQU/LOG/1/02D | <u>Unspecified</u> Assurer l'acheminement de l'assistance d'urgence aux populations vulnérables(Equateur) | 80,290 | 80,290 | - | - | 80,290 | - |
| DRC-07/EQU/LOG/2/03G | <u>Unspecified</u> Assurer l'accès physique (réhabilitation d'infrastructures de transport) et le transport vers les zones de retour et autres zones d'intervention humanitaire (Equateur) | 6,289,000 | 6,289,000 | - | - | 6,289,000 | - |
| DRC-07/ITU/LOG/1/02A | <u>Unspecified</u> Assurer l'acheminement de l'assistance d'urgence aux populations vulnérables(Ituri) | 2,671,075 | 2,671,075 | - | - | 2,671,075 | - |
| DRC-07/ITU/LOG/2/03A | <u>Unspecified</u> Assurer l'accès physique (réhabilitation d'infrastructures de transport) et le transport vers les zones de retour et autres zones d'intervention humanitaire (Ituri) | 10,880,000 | 10,880,000 | - | - | 10,880,000 | - |

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DEMOCRATIC REPUBLIC OF THE CONGO

Table III: Democratic Republic of Congo Humanitarian Action Plan 2007

List of Appeal Projects (grouped by cluster), with funding status of each
as of 10 July 2007
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by donors and appealing organisations

Page 13 of 21

| CLUSTER Project Code | Channel Activity | Original Requirements | Revised Requirements | Funding | % Covered | Unmet Requirements | Uncommitted Pledges |
|-------------------------------|---|--------------------------|-------------------------|-------------------|--------------|-----------------------|------------------------|
| Value in US\$ | | A | B | C | C/B | B-C | D |
| LOGISTICS | | | | | | | |
| DRC-07/KAT/LOG/1/02B | <u>Unspecified</u> Assurer l'acheminement de l'assistance d'urgence aux populations vulnérables (Katanga) | 1,694,554 | 1,694,554 | - | - | 1,694,554 | - |
| DRC-07/KAT/LOG/2/03D | <u>Unspecified</u> Assurer l'accès physique (réhabilitation d'infrastructures de transport) et le transport vers les zones de retour et autres zones d'intervention humanitaire (Katanga) | 13,846,600 | 13,846,600 | - | - | 13,846,600 | - |
| DRC-07/KOC/LOG/2/03F | <u>Unspecified</u> Assurer l'accès physique (réhabilitation d'infrastructures de transport) et le transport vers les zones de retour et autres zones d'intervention humanitaire (Kasai Occ.) | 2,728,300 | 2,728,300 | - | - | 2,728,300 | - |
| DRC-07/NKV/LOG/2/03B | <u>Unspecified</u> Assurer l'accès physique (réhabilitation d'infrastructures de transport) et le transport vers les zones de retour et autres zones d'intervention humanitaire (N. Kivu) | 1,520,000 | 1,520,000 | - | - | 1,520,000 | - |
| DRC-07/ORI/LOG/1/02C | <u>Unspecified</u> Assurer l'acheminement de l'assistance d'urgence aux populations vulnérables (Orientale) | 79,200 | 79,200 | - | - | 79,200 | - |
| DRC-07/ORI/LOG/2/03E | <u>Unspecified</u> Assurer l'accès physique (réhabilitation d'infrastructures de transport) et le transport vers les zones de retour et autres zones d'intervention humanitaire (Orientale) | 3,378,396 | 3,378,396 | - | - | 3,378,396 | - |
| DRC-07/PNA/COO/ASF | <u>ASF</u> Poursuite de la ouverture de l'espace arien humanitaire dans le district de l'Ituri et les régions avoisinantes, provinces Orientale et du Kivu, phase III | - | - | 413,098 | - | (413,098) | - |
| DRC-07/PNA/COO/DAC Aviation | <u>DAC Aviation International</u> Provision of humanitarian air transport capacity to agencies implementing humanitarian and development projects | - | - | 10,245,902 | - | (10,245,902) | - |
| DRC-07/PNA/LOG/1/01 | <u>Unspecified</u> Assurer l'acheminement de l'assistance d'urgence aux populations vulnérables (National) | 29,800,000 | 29,800,000 | - | - | 29,800,000 | - |
| DRC-07/PNA/LOG/1/01A | <u>WFP</u> Enhanced Humanitarian Logistics Coordination | - | - | 5,091,143 | - | (5,091,143) | - |
| DRC-07/SKV/LOG/2/03C | <u>Unspecified</u> Assurer l'accès physique (réhabilitation d'infrastructures de transport) et le transport vers les zones de retour et autres zones d'intervention humanitaire (Sud Kivu) | 12,460,340 | 12,460,340 | - | - | 12,460,340 | - |
| Subtotal for LOGISTICS | | 85,427,755 | 85,427,755 | 15,750,143 | 18 % | 69,677,612 | - |
| MULTI-SECTOR | | | | | | | |
| DRC-07/ITU/MS/DIAKONIE | <u>Diakonie Emergency Aid</u> Food and Non-Food-Items for IDPs in Ituri | - | - | 245,033 | - | (245,033) | - |
| DRC-07/PNA/MS/ACF USA | <u>ACF/USA</u> Agriculture and food security, economy and market systems | - | - | 818,374 | - | (818,374) | - |

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DEMOCRATIC REPUBLIC OF THE CONGO

Table III: Democratic Republic of Congo Humanitarian Action Plan 2007

List of Appeal Projects (grouped by cluster), with funding status of each
as of 10 July 2007
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by donors and appealing organisations

Page 14 of 21

| CLUSTER Project Code | Channel Activity | Original Requirements | Revised Requirements | Funding | % Covered | Unmet Requirements | Uncommitted Pledges |
|----------------------------------|--|--------------------------|-------------------------|------------------|--------------|-----------------------|------------------------|
| Value in US\$ | | A | B | C | C/B | B-C | D |
| MULTI-SECTOR (Continued) | | | | | | | |
| DRC-07/PNA/MS/IMC | IMC Health, protection, water, sanitation and hygiene | - | - | 698,377 | - | (698,377) | - |
| DRC-07/PNA/MS/ OXFAM | OXFAM Emergency Humanitarian Assistance Fund | - | - | 266,667 | - | (266,667) | - |
| DRC-07/SKV/MS/ CARITAS | CARITAS Food Aid, agricultural things for returnees from Tanzania and IDPs of the Provinz South-Kivu | - | - | 873,656 | - | (873,656) | - |
| Subtotal for MULTI-SECTOR | | - | - | 2,902,107 | - | (2,902,107) | - |
| NUTRITION | | | | | | | |
| DRC-07/EQU/NUT/1/02E | <u>Unspecified</u> Assurer la prise en charge curative nutritionnelle et médicale dans les centres nutritionnels (CN) des enfants souffrant de malnutrition aiguë selon le protocole national de prise en charge (Equateur) | 906,809 | 906,809 | - | - | 906,809 | - |
| DRC-07/EQU/NUT/2/04E | <u>Unspecified</u> Renforcer les capacités des communautés dans la prévention de la malnutrition aiguë (Equateur) | 1,088,934 | 1,088,934 | - | - | 1,088,934 | - |
| DRC-07/ITU/NUT/1/02A | <u>Unspecified</u> Assurer la prise en charge curative nutritionnelle et médicale dans les centres nutritionnels (CN) des enfants souffrant de malnutrition aiguë selon le protocole national de prise en charge (Ituri) | 2,708,207 | 2,708,207 | - | - | 2,708,207 | - |
| DRC-07/ITU/NUT/2/04A | <u>Unspecified</u> Renforcer les capacités des communautés dans la prévention de la malnutrition aiguë (Ituri) | 1,549,279 | 1,549,279 | - | - | 1,549,279 | - |
| DRC-07/KAT/NUT/1/02D | <u>Unspecified</u> Assurer la prise en charge curative nutritionnelle et médicale dans les centres nutritionnels (CN) des enfants souffrant de malnutrition aiguë selon le protocole national de prise en charge (Katanga) | 2,053,732 | 2,053,732 | - | - | 2,053,732 | - |
| DRC-07/KAT/NUT/2/04D | <u>Unspecified</u> Renforcer les capacités des communautés dans la prévention de la malnutrition aiguë (Katanga) | 2,038,967 | 2,038,967 | - | - | 2,038,967 | - |
| DRC-07/NKV/NUT/1/02B | <u>Unspecified</u> Assurer la prise en charge curative nutritionnelle et médicale dans les centres nutritionnels (CN) des enfants souffrant de malnutrition aiguë selon le protocole national de prise en charge (Nord Kivu) | 1,938,197 | 1,938,197 | - | - | 1,938,197 | - |
| DRC-07/NKV/NUT/2/04B | <u>Unspecified</u> Renforcer les capacités des communautés dans la prévention de la malnutrition aiguë (Nord Kivu) | 1,536,627 | 1,536,627 | - | - | 1,536,627 | - |
| DRC-07/PNA/HEA/1/03 | UNICEF Treatment of severe malnutrition in DRC | - | - | 3,000,000 | - | (3,000,000) | - |
| DRC-07/PNA/NUT/1/01 | <u>Unspecified</u> Assurer une réponse en dernier recours (National) | 3,636,898 | 3,636,898 | - | - | 3,636,898 | - |
| DRC-07/PNA/NUT/2/03 | <u>Unspecified</u> Renforcer la capacité institutionnelle des partenaires (National) | 5,015,031 | 5,015,031 | - | - | 5,015,031 | - |

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DEMOCRATIC REPUBLIC OF THE CONGO

Table III: Democratic Republic of Congo Humanitarian Action Plan 2007

List of Appeal Projects (grouped by cluster), with funding status of each
as of 10 July 2007
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by donors and appealing organisations

Page 15 of 21

| CLUSTER Project Code | Channel Activity | Original Requirements | Revised Requirements | Funding | % Covered | Unmet Requirements | Uncommitted Pledges |
|-------------------------------|---|--------------------------|-------------------------|------------------|--------------|-----------------------|------------------------|
| Value in US\$ | | A | B | C | C/B | B-C | D |
| NUTRITION (Continued) | | | | | | | |
| DRC-07/PNA/NUT/ COOPI | <u>COOPI</u> Projet nutritionnel d'urgence d'appui la population des retournés dans la Zone de Sant de Kansimba | - | - | 880,794 | - | (880,794) | - |
| DRC-07/SKV/NUT/1/02C | <u>Unspecified</u> Assurer la prise en charge curative nutritionnelle et médicale dans les centres nutritionnels (CN) des enfants souffrant de malnutrition aiguë selon le protocole national de prise en charge (Sud Kivu) | 1,396,994 | 1,396,994 | - | - | 1,396,994 | - |
| DRC-07/SKV/NUT/2/04C | <u>Unspecified</u> Renforcer les capacités des communautés dans la prévention de la malnutrition aiguë (Sud Kivu) | 1,070,743 | 1,070,743 | - | - | 1,070,743 | - |
| Subtotal for NUTRITION | | 24,940,418 | 24,940,418 | 3,880,794 | 16 % | 21,059,624 | - |
| PROTECTION | | | | | | | |
| DRC-07/BAC/PRO/2/04F | <u>Unspecified</u> Favoriser la prise en charge locale et nationale de la protection des civils (Bas Congo) | 1,300,000 | 1,300,000 | - | - | 1,300,000 | - |
| DRC-07/BAN/PRO/1/02H | <u>Unspecified</u> Réduire le niveau de violence et les cas de violation des droits de l'Homme (Bandudu) | 664,320 | 664,320 | - | - | 664,320 | - |
| DRC-07/EQU/PRO/1/02G | <u>Unspecified</u> Réduire le niveau de violence et les cas de violation des droits de l'Homme (Equateur) | 2,800,000 | 2,800,000 | - | - | 2,800,000 | - |
| DRC-07/EQU/PRO/ UNHCR | <u>UNHCR</u> Réduire le niveau de violence et les cas de violation des droits de l'Homme | - | - | 598,000 | - | (598,000) | - |
| DRC-07/ITU/PRO/1/02A | <u>Unspecified</u> Réduire le niveau de violence et les cas de violation des droits de l'Homme (Ituri) | 8,381,829 | 8,381,829 | - | - | 8,381,829 | - |
| DRC-07/ITU/PRO/2/04A | <u>Unspecified</u> Favoriser la prise en charge locale et nationale de la protection des civils (Ituri) | 10,930,000 | 10,930,000 | - | - | 10,930,000 | - |
| DRC-07/ITU/PRO/ UNICEF | <u>UNICEF</u> Réduire le niveau de violence et les cas de violation des droits de l'Homme (Ituri) | - | - | 1,201,250 | - | (1,201,250) | - |
| DRC-07/KAS-OR/PRO/ UNICEF | <u>UNICEF</u> Réduire le niveau de violence et les cas de violation des droits de l'Homme (Kasai Oriental) | - | - | - | - | - | - |
| DRC-07/KAT/PRO/1/02D | <u>Unspecified</u> Réduire le niveau de violence et les cas de violation des droits de l'Homme (Katanga) | 4,306,868 | 4,306,868 | - | - | 4,306,868 | - |
| DRC-07/KAT/PRO/2/04D | <u>Unspecified</u> Favoriser la prise en charge locale et nationale de la protection des civils (Katanga) | 4,350,000 | 4,350,000 | - | - | 4,350,000 | - |
| DRC-07/KAT/PRO/ UNFPA | <u>UNFPA</u> Réduire le niveau de violence et les cas de violation des droits de l'Homme (Katanga) | - | - | - | - | - | - |
| DRC-07/KAT/PRO/ UNHCR | <u>UNHCR</u> Réduire le niveau de violence & les cas de violation des droits de l'Homme | - | - | 702,000 | - | (702,000) | - |

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DEMOCRATIC REPUBLIC OF THE CONGO

Table III: Democratic Republic of Congo Humanitarian Action Plan 2007

List of Appeal Projects (grouped by cluster), with funding status of each
as of 10 July 2007
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by donors and appealing organisations

Page 16 of 21

| CLUSTER Project Code | Channel/ Activity | Original Requirements | Revised Requirements | Funding | % Covered | Unmet Requirements | Uncommitted Pledges |
|-------------------------------|--|--------------------------|-------------------------|-----------|--------------|-----------------------|------------------------|
| Value in US\$ | | A | B | C | C/B | B-C | D |
| PROTECTION (Continued) | | | | | | | |
| DRC-07/MAN/PRO/1/02F | <u>Unspecified</u> Réduire le niveau de violence et les cas de violation des droits de l'Homme (Maniema) | 954,800 | 954,800 | - | - | 954,800 | - |
| DRC-07/NKV/PRO/1/02B | <u>Unspecified</u> Réduire le niveau de violence et les cas de violation des droits de l'Homme (Nord Kivu) | 5,250,000 | 5,250,000 | - | - | 5,250,000 | - |
| DRC-07/NKV/PRO/2/04B | <u>Unspecified</u> Favoriser la prise en charge locale et nationale de la protection des civils (Nord Kivu) | 2,850,000 | 2,850,000 | - | - | 2,850,000 | - |
| DRC-07/NKV/PRO/UNFPA | <u>UNFPA</u> Réduire le niveau de violence et les cas de violation des droits de l'Homme (Nord Kivu) | - | - | 22,010 | - | (22,010) | - |
| DRC-07/NKV/PRO/UNICEF | <u>UNICEF</u> Réduire le niveau de violence et les cas de violation des droits de l'Homme (Nord Kivu) | - | - | 881,250 | - | (881,250) | - |
| DRC-07/ORI/PRO/1/02E | <u>Unspecified</u> Réduire le niveau de violence et les cas de violation des droits de l'Homme (Orientale) | 1,127,000 | 1,127,000 | - | - | 1,127,000 | - |
| DRC-07/ORI/PRO/2/04E | <u>Unspecified</u> Favoriser la prise en charge locale et nationale de la protection des civils (Orientale) | 2,408,500 | 2,408,500 | - | - | 2,408,500 | - |
| DRC-07/PNA/MA/MAG | <u>MAG</u> Continued Humanitarian Mine Action | - | - | 963,215 | - | (963,215) | - |
| DRC-07/PNA/PRO/1/01 | <u>Unspecified</u> Réduire le niveau de violence et les cas de violation des droits de l'Homme (National) | 7,710,000 | 7,710,000 | - | - | 7,710,000 | - |
| DRC-07/PNA/PRO/1/02 | <u>UNFPA</u> Sexual and gender-based violence (SGBV): Strengthening prevention and response | - | - | 741,011 | - | (741,011) | - |
| DRC-07/PNA/PRO/1/03 | <u>UNICEF</u> Protection of women and children affected by armed conflict | - | - | 840,485 | - | (840,485) | - |
| DRC-07/PNA/PRO/2/01 | <u>UNHCR</u> Return and reintegration of Congolese Refugees in DRC | - | - | 1,852,647 | - | (1,852,647) | - |
| DRC-07/PNA/PRO/2/02 | <u>UNICEF</u> DRC mine-risk education programme | - | - | 353,100 | - | (353,100) | - |
| DRC-07/PNA/PRO/2/02A | <u>UNHCR</u> Protection and assistance to persons of concern | - | - | 3,251,654 | - | (3,251,654) | - |
| DRC-07/PNA/PRO/2/03 | <u>Unspecified</u> Trouver des solutions durables pour les populations cibles (retour, intégration locale, réinstallation) (National) | 2,250,000 | 2,250,000 | - | - | 2,250,000 | - |
| DRC-07/PNA/SNF/2/02 | <u>UNHCR</u> Return and reintegration of Congolese Refugees and IDPs in DRC | - | - | 2,343,877 | - | (2,343,877) | - |
| DRC-07/SKV/PRO/1/02C | <u>Unspecified</u> Réduire le niveau de violence et les cas de violation des droits de l'Homme (Sud Kivu) | 5,350,000 | 5,350,000 | - | - | 5,350,000 | - |
| DRC-07/SKV/PRO/2/04C | <u>Unspecified</u> Favoriser la prise en charge locale et nationale de la protection des civils (Sud Kivu) | 6,104,668 | 6,104,668 | - | - | 6,104,668 | - |

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DEMOCRATIC REPUBLIC OF THE CONGO

Table III: Democratic Republic of Congo Humanitarian Action Plan 2007

List of Appeal Projects (grouped by cluster), with funding status of each
as of 10 July 2007
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by donors and appealing organisations

Page 17 of 21

| CLUSTER Project Code | Channel Activity | Original Requirements | Revised Requirements | Funding | % Covered | Unmet Requirements | Uncommitted Pledges |
|-----------------------------------|--|--------------------------|-------------------------|-------------------|--------------|-----------------------|------------------------|
| Value in US\$ | | A | B | C | C/B | B-C | D |
| PROTECTION (Continued) | | | | | | | |
| DRC-07/SKV/PRO/DCA | <u>Danchurchaid</u> Réduire le niveau de violence et les cas de violation des droits de l'Homme (Sud Kivu) | - | - | 95,716 | - | (95,716) | - |
| DRC-07/SKV/PRO/UNICEF | <u>UNICEF</u> Réduire le niveau de violence et les cas de violation des droits de l'Homme (Sud Kivu) | - | - | 520,625 | - | (520,625) | - |
| DRC-07/UNHCR | <u>UNHCR</u> Awaiting allocation to specific projects | - | - | 23,269,549 | - | (23,269,549) | - |
| Subtotal for PROTECTION | | 66,737,985 | 66,737,985 | 37,636,389 | 56 % | 29,101,596 | - |
| RECOVERY AND REINTEGRATION | | | | | | | |
| DRC-07/EQU/REC/2/01F | <u>Unspecified</u> Répondre aux besoins en matière de retour, réintégration et relance communautaire qui ne sont pas couverts par les acteurs (Equateur) | 4,170,000 | 4,170,000 | - | - | 4,170,000 | - |
| DRC-07/ITU/REC/2/01A | <u>Unspecified</u> Répondre aux besoins en matière de retour, réintégration et relance communautaire qui ne sont pas couverts par les acteurs (Ituri) | 5,300,000 | 5,300,000 | - | - | 5,300,000 | - |
| DRC-07/ITU/REC/UNICEF | <u>UNICEF</u> Répondre aux besoins en matière de retour, réintégration et relance communautaire qui ne sont pas couverts par les acteurs (Ituri) | - | - | - | - | - | - |
| DRC-07/KAS-OC/REC/UNOPS | <u>UNOPS</u> Répondre aux besoins en matières de retour, réintégration et relance communautaire qui ne sont pas couverts par les acteurs. | - | - | 985,000 | - | (985,000) | - |
| DRC-07/KAT/REC/2/01D | <u>Unspecified</u> Répondre aux besoins en matière de retour, réintégration et relance communautaire qui ne sont pas couverts par les acteurs (Katanga) | 5,950,000 | 5,950,000 | - | - | 5,950,000 | - |
| DRC-07/MAN/REC/2/01E | <u>Unspecified</u> Répondre aux besoins en matière de retour, réintégration et relance communautaire qui ne sont pas couverts par les acteurs (Maniema) | 2,357,000 | 2,357,000 | - | - | 2,357,000 | - |
| DRC-07/NKV/REC/2/01B | <u>Unspecified</u> Répondre aux besoins en matière de retour, réintégration et relance communautaire qui ne sont pas couverts par les acteurs (Nord Kivu) | 6,265,000 | 6,265,000 | - | - | 6,265,000 | - |
| DRC-07/NKV/REC/UNICEF | <u>UNICEF</u> Répondre aux besoins en matière de retour, réintégration et relance communautaire qui ne sont pas couverts par les acteurs (Nord Kivu) | - | - | - | - | - | - |
| DRC-07/PNA/REC/ADRA Denmark | <u>ADRA Denmark</u> Rehabilitation and integration of IDPs, refugees and vulnerable people in North Kivu & the provinces of Orientale, DR Congo 2007 | - | - | 621,416 | - | (621,416) | - |
| DRC-07/SKV/REC/2/01C | <u>Unspecified</u> Répondre aux besoins en matière de retour, réintégration et relance communautaire qui ne sont pas couverts par les acteurs (Sud Kivu) | 5,265,000 | 5,265,000 | - | - | 5,265,000 | - |

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DEMOCRATIC REPUBLIC OF THE CONGO

Table III: Democratic Republic of Congo Humanitarian Action Plan 2007

List of Appeal Projects (grouped by cluster), with funding status of each
as of 10 July 2007
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by donors and appealing organisations

Page 18 of 21

| CLUSTER Project Code | Channel Activity | Original Requirements | Revised Requirements | Funding | % Covered | Unmet Requirements | Uncommitted Pledges |
|--|---|--------------------------|-------------------------|------------------|--------------|-----------------------|------------------------|
| Value in US\$ | | A | B | C | C/B | B-C | D |
| RECOVERY AND REINTEGRATION (Continued) | | | | | | | |
| DRC-07/SKV/REC/ ACTED | <u>ACTED</u> Répondre aux besoins en matières de retour, réintégration et relance communautaire qui ne sont pas couverts par les acteurs. | - | - | 62,720 | - | (62,720) | - |
| DRC-07/SKV/REC/ UNICEF | <u>UNICEF</u> Répondre aux besoins en matière de retour, réintégration et relance communautaire qui ne sont pas couverts par les acteurs (Sud Kivu) | - | - | - | - | - | - |
| Subtotal for RECOVERY AND REINTEGRATION | | 29,307,000 | 29,307,000 | 1,669,136 | 6 % | 27,637,864 | - |
| SHELTER | | | | | | | |
| DRC-07/PNA/SNF/NRC | <u>NRC</u> Support for the Return and Reintegration of IDPs and Refugees - Shelter Program | - | - | 1,105,874 | - | (1,105,874) | - |
| Subtotal for SHELTER | | - | - | 1,105,874 | - | (1,105,874) | - |
| WATER AND SANITATION | | | | | | | |
| DRC-07/BAC/WAT/1/01G | <u>Unspecified</u> Assurer l'accès à l'eau potable et à un environnement sain aux victimes de crises (Bas-Congo) | 204,000 | 204,000 | - | - | 204,000 | - |
| DRC-07/BAC/WAT/2/03G | <u>Unspecified</u> Réduire les risques de contamination des maladies d'origine hydrique pour les populations retournées, hôtes et autres vulnérables en leur apportant un paquet minimum d'interventions en matière d'eau, hygiène et assainissement (Bas Congo) | 432,000 | 432,000 | - | - | 432,000 | - |
| DRC-07/EQU/WAT/2/03F | <u>Unspecified</u> Réduire les risques de contamination des maladies d'origine hydrique pour les populations retournées, hôtes et autres vulnérables en leur apportant un paquet minimum d'interventions en matière d'eau, hygiène et assainissement (Equateur) | 1,520,000 | 1,520,000 | - | - | 1,520,000 | - |
| DRC-07/EQU/WAT/ UNICEF | <u>UNICEF</u> Assurer l'accès à l'eau potable et à un environnement sain aux victimes de crises | - | - | 75,000 | - | (75,000) | - |
| DRC-07/ITU/WAT/1/01A | <u>Unspecified</u> Assurer l'accès à l'eau potable et à un environnement sain aux victimes de crises | 1,650,000 | 1,650,000 | - | - | 1,650,000 | - |
| DRC-07/ITU/WAT/2/03A | <u>Unspecified</u> Réduire les risques de contamination des maladies d'origine hydrique pour les populations retournées, hôtes et autres vulnérables en leur apportant un paquet minimum d'interventions en matière d'eau, hygiène et assainissement (Ituri) | 24,700,000 | 24,700,000 | - | - | 24,700,000 | - |
| DRC-07/ITU/WAT/ OXFAM | <u>OXFAM</u> Assurer l'accès à l'eau potable et à un environnement sain aux victimes de crises | - | - | 600,000 | - | (600,000) | - |

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DEMOCRATIC REPUBLIC OF THE CONGO

Table III: Democratic Republic of Congo Humanitarian Action Plan 2007

List of Appeal Projects (grouped by cluster), with funding status of each
as of 10 July 2007
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by donors and appealing organisations

Page 19 of 21

| CLUSTER Project Code | Channel Activity | Original Requirements | Revised Requirements | Funding | % Covered | Unmet Requirements | Uncommitted Pledges |
|---|---|--------------------------|-------------------------|-----------|--------------|-----------------------|------------------------|
| Value in US\$ | | A | B | C | C/B | B-C | D |
| WATER AND SANITATION (Continued) | | | | | | | |
| DRC-07/ITU/WAT/ OXFAM UK | <u>OXFAM UK</u> Réduire les risques de contamination des maladies d'origine hydrique pour les populations retournées, hôtes et autres vulnérables en leur apportant un paquet minimum d'intervention en matière d'eau, hygiène et assainissement | - | - | 1,470,714 | - | (1,470,714) | - |
| DRC-07/ITU/WAT/ UNICEF | <u>UNICEF</u> Assurer l'accès à l'eau potable et à un environnement sain aux victimes de crises | - | - | 300,000 | - | (300,000) | - |
| DRC-07/KAS-OC/WAT/ UNICEF | <u>UNICEF</u> Assurer l'accès à l'eau potable et à un environnement sain aux victimes de crises | - | - | 75,000 | - | (75,000) | - |
| DRC-07/KAS-OR/WAT/ UNICEF | <u>UNICEF</u> Assurer l'accès à l'eau potable et à un environnement sain aux victimes de crises | - | - | 75,000 | - | (75,000) | - |
| DRC-07/KAT/WAT/1/01D | <u>Unspecified</u> Assurer l'accès à l'eau potable et à un environnement sain aux victimes de crises (Katanga) | 3,425,000 | 3,425,000 | - | - | 3,425,000 | - |
| DRC-07/KAT/WAT/2/03D | <u>Unspecified</u> Réduire les risques de contamination des maladies d'origine hydrique pour les populations retournées, hôtes et autres vulnérables en leur apportant un paquet minimum d'interventions en matière d'eau, hygiène et assainissement (Katanga) | 9,900,000 | 9,900,000 | - | - | 9,900,000 | - |
| DRC-07/KAT/WAT/ ACF USA | <u>ACF/USA</u> Répondre aux besoins alimentaires d'urgence, Appuyer la production alimentaire d'urgence (Nord Kivu) | - | - | 999,715 | - | (999,715) | - |
| DRC-07/KAT/WAT/ COOPI | <u>COOPI</u> Répondre aux besoins alimentaires d'urgence, Appuyer la production alimentaire d'urgence (Nord Kivu) | - | - | 782,831 | - | (782,831) | - |
| DRC-07/KAT/WAT/ SOLIDA | <u>Solidarités</u> Répondre aux besoins alimentaires d'urgence, Appuyer la production alimentaire d'urgence (Nord Kivu) | - | - | 528,000 | - | (528,000) | - |
| DRC-07/KAT/WAT/ UNICEF | <u>UNICEF</u> Assurer l'accès à l'eau potable et à un environnement sain aux victimes de crises | - | - | 300,000 | - | (300,000) | - |
| DRC-07/KOC/WAT/1/01F | <u>Unspecified</u> Assurer l'accès à l'eau potable et à un environnement sain aux victimes de crises (Kasai Occ.) | 750,000 | 750,000 | - | - | 750,000 | - |
| DRC-07/MAN/WAT/1/01E | <u>Unspecified</u> Assurer l'accès à l'eau potable et à un environnement sain aux victimes de crises (Maniema) | 150,000 | 150,000 | - | - | 150,000 | - |
| DRC-07/MAN/WAT/2/03E | <u>Unspecified</u> Réduire les risques de contamination des maladies d'origine hydrique pour les populations retournées, hôtes et autres vulnérables en leur apportant un paquet minimum d'interventions en matière d'eau, hygiène et assainissement (Maniema) | 1,600,000 | 1,600,000 | - | - | 1,600,000 | - |
| DRC-07/MAN/WAT/ UNICEF | <u>UNICEF</u> Assurer l'accès à l'eau potable et à un environnement sain aux victimes de crises | - | - | 75,000 | - | (75,000) | - |

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DEMOCRATIC REPUBLIC OF THE CONGO

Table III: Democratic Republic of Congo Humanitarian Action Plan 2007

List of Appeal Projects (grouped by cluster), with funding status of each
as of 10 July 2007
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by donors and appealing organisations

Page 20 of 21

| CLUSTER Project Code | Channel/ Activity | Original Requirements | Revised Requirements | Funding | % Covered | Unmet Requirements | Uncommitted Pledges |
|---|---|--------------------------|-------------------------|-----------|--------------|-----------------------|------------------------|
| Value in US\$ | | A | B | C | C/B | B-C | D |
| WATER AND SANITATION (Continued) | | | | | | | |
| DRC-07/NKV/WAT/1/01B | <u>Unspecified</u> Assurer l'accès à l'eau potable et à un environnement sain aux victimes de crises | 2,400,000 | 2,400,000 | - | - | 2,400,000 | - |
| DRC-07/NKV/WAT/2/03B | <u>Unspecified</u> Réduire les risques de contamination des maladies d'origine hydrique pour les populations retournées, hôtes et autres vulnérables en leur apportant un paquet minimum d'interventions en matière d'eau, hygiène et assainissement (Nord Kivu) | 13,200,000 | 13,200,000 | - | - | 13,200,000 | - |
| DRC-07/NKV/WAT/SOLIDA | <u>Solidarités</u> Répondre aux besoins alimentaires d'urgence, Appuyer la production alimentaire d'urgence (Nord Kivu) | - | - | 598,000 | - | (598,000) | - |
| DRC-07/NKV/WAT/UNICEF | <u>UNICEF</u> Assurer l'accès à l'eau potable et à un environnement sain aux victimes de crises | - | - | 300,000 | - | (300,000) | - |
| DRC-07/NKV/WAT/UNOPS | <u>UNOPS</u> Assurer l'accès à l'eau potable et à un environnement sain aux victimes de crises | - | - | 888,100 | - | (888,100) | - |
| DRC-07/NKV/WAT/WHO | <u>WHO</u> Réduire les risques de contamination des maladies d'origine hydrique pour les populations retournées, hôtes et autres vulnérables en leur apportant un paquet minimum d'intervention en matière d'eau, hygiène et assainissement | - | - | 298,159 | - | (298,159) | - |
| DRC-07/PNA/WAT/01/02A | <u>UNICEF</u> Emergency Water and Sanitation Response to conflict Affected Populations | - | - | 4,044,600 | - | (4,044,600) | - |
| DRC-07/PNA/WAT/1/02 | <u>Unspecified</u> Assurer l'accès à l'eau potable et à un environnement sain aux victimes de crises (National) | 8,800,000 | 8,800,000 | - | - | 8,800,000 | - |
| DRC-07/PNA/WAT/OXFAM | <u>OXFAM</u> Health Promotion through increased access of the population to water and sanitation facilities | - | - | 382,514 | - | (382,514) | - |
| DRC-07/PNA/WAT/WVI | <u>WVI</u> Water and sanitation | - | - | 423,729 | - | (423,729) | - |
| DRC-07/SKV/WAT/1/01C | <u>Unspecified</u> Assurer l'accès à l'eau potable et à un environnement sain aux victimes de crises (Sud Kivu) | 3,600,000 | 3,600,000 | - | - | 3,600,000 | - |
| DRC-07/SKV/WAT/2/03C | <u>Unspecified</u> Réduire les risques de contamination des maladies d'origine hydrique pour les populations retournées, hôtes et autres vulnérables en leur apportant un paquet minimum d'interventions en matière d'eau, hygiène et assainissement (Sud Kivu) | 27,600,000 | 27,600,000 | - | - | 27,600,000 | - |
| DRC-07/SKV/WAT/ATGL | <u>ATGL</u> Répondre aux besoins alimentaires d'urgence, Appuyer la production alimentaire d'urgence (Nord Kivu) | - | - | 200,448 | - | (200,448) | - |
| DRC-07/SKV/WAT/FHI | <u>FHI</u> Répondre aux besoins alimentaires d'urgence, Appuyer la production alimentaire d'urgence (Nord Kivu) | - | - | 395,000 | - | (395,000) | - |

The list of projects and the figures for their funding requirements in this document are a snapshot as of 10 July 2007. For continuously updated information on projects, funding requirements, and contributions to date, visit the Financial Tracking Service (www.reliefweb.int/fts).

Table III: Democratic Republic of Congo Humanitarian Action Plan 2007

List of Appeal Projects (grouped by cluster), with funding status of each

as of 10 July 2007

<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by donors and appealing organisations

Page 21 of 21

| CLUSTER Project Code | Channel Activity | Original Requirements | Revised Requirements | Funding | % Covered | Unmet Requirements | Uncommitted Pledges |
|--|--|--------------------------|-------------------------|--------------------|--------------|-----------------------|------------------------|
| Value in US\$ | | A | B | C | C/B | B-C | D |
| WATER AND SANITATION (Continued) | | | | | | | |
| DRC-07/SKV/WAT/ OXFAM UK | OXFAM UK Répondre aux besoins alimentaires d'urgence, Appuyer la production alimentaire d'urgence (Nord Kivu) | - | - | 240,000 | - | (240,000) | - |
| DRC-07/SKV/WAT/ UNICEF | UNICEF Assurer l'accès à l'eau potable et à un environnement sain aux victimes de crises | - | - | 300,000 | - | (300,000) | - |
| Subtotal for WATER AND SANITATION | | 99,931,000 | 99,931,000 | 13,351,810 | 13 % | 86,579,190 | - |
| Grand Total | | 686,591,107 | 686,591,107 | 254,905,538 | 37 % | 431,685,569 | 9,210,526 |

NOTE: "Funding" means Contributions + Commitments + Carry-over

Pledge: a non-binding announcement of an intended contribution or allocation by the donor. ("Uncommitted pledge" on these tables indicates the balance of original pledges not yet committed).

Commitment: creation of a legal, contractual obligation between the donor and recipient entity, specifying the amount to be contributed.

Contribution: the actual payment of funds or transfer of in-kind goods from the donor to the recipient entity.

The list of projects and the figures for their funding requirements in this document are a snapshot as of 10 July 2007. For continuously updated information on projects, funding requirements, and contributions to date, visit the Financial Tracking Service (www.reliefweb.int/fts).

ANNEX I.

ADDITIONAL FUNDING TABLES

Table IV: Democratic Republic of Congo Humanitarian Action Plan 2007
Total Funding per Donor (to projects listed in the Appeal) (carry over not included)
as of 10 July 2007
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by Donors and Appealing Organisations

| DONOR | Funding | % of Grand Total | Uncommitted Pledges |
|---|--------------------|------------------|---------------------|
| Values in US\$ | | | |
| United Kingdom | 58,592,500 | 23.0 % | - |
| United States | 37,970,814 | 14.9 % | - |
| Central Emergency Response Fund (CERF) | 36,587,128 | 14.4 % | - |
| European Commission (ECHO) | 25,385,149 | 10.0 % | - |
| Sweden | 15,728,811 | 6.2 % | - |
| Carry-over (donors not specified) | 14,089,953 | 5.5 % | - |
| Netherlands | 11,940,918 | 4.7 % | - |
| Belgium | 9,096,104 | 3.6 % | - |
| Canada | 6,779,146 | 2.7 % | - |
| Germany | 5,279,204 | 2.1 % | - |
| Ireland | 5,274,431 | 2.1 % | 9,210,526 |
| Allocations of unearmarked funds by UN agencies | 5,118,914 | 2.0 % | - |
| Norway | 5,080,657 | 2.0 % | - |
| Japan | 4,792,665 | 1.9 % | - |
| Spain | 3,320,550 | 1.3 % | - |
| France | 2,817,874 | 1.1 % | - |
| Finland | 1,859,960 | 0.7 % | - |
| Switzerland | 1,703,215 | 0.7 % | - |
| Denmark | 1,503,266 | 0.6 % | - |
| Private (individuals & organisations) | 1,279,364 | 0.5 % | - |
| Luxembourg | 341,530 | 0.1 % | - |
| South Africa | 221,126 | 0.1 % | - |
| Greece | 75,000 | 0.0 % | - |
| Estonia | 49,259 | 0.0 % | - |
| Grand Total | 254,905,538 | 100.0 % | 9,210,526 |

NOTE: "Funding" means Contributions + Commitments

Pledge: a non-binding announcement of an intended contribution or allocation by the donor. ("Uncommitted pledge" on these tables indicates the balance of original pledges not yet committed).

Commitment: creation of a legal, contractual obligation between the donor and recipient entity, specifying the amount to be contributed.

Contribution: the actual payment of funds or transfer of in-kind goods from the donor to the recipient entity.

The list of projects and the figures for their funding requirements in this document are a snapshot as of 10 July 2007. For continuously updated information on projects, funding requirements, and contributions to date, visit the Financial Tracking Service (www.reliefweb.int/fts).

DEMOCRATIC REPUBLIC OF THE CONGO

Table V: Democratic Republic of Congo 2007
Total Humanitarian Assistance per Donor (Appeal plus other*)(carry over not included)
as of 10 July 2007
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by Donors and Appealing Organisations

| DONOR | Funding | % of Grand Total | Uncommitted Pledges |
|---|--------------------|------------------|---------------------|
| Values in US\$ | | | |
| United Kingdom | 58,592,500 | 22.5 % | - |
| United States | 38,507,015 | 14.8 % | - |
| Central Emergency Response Fund (CERF) | 36,587,128 | 14.0 % | - |
| European Commission (ECHO) | 25,385,149 | 9.7 % | 37,663,556 |
| Sweden | 18,582,066 | 7.1 % | 10,183,530 |
| Carry-over (donors not specified) | 14,089,953 | 5.4 % | - |
| Netherlands | 11,940,918 | 4.6 % | - |
| Belgium | 9,096,104 | 3.5 % | - |
| Canada | 6,779,146 | 2.6 % | - |
| Germany | 5,279,204 | 2.0 % | - |
| Ireland | 5,274,431 | 2.0 % | 9,210,526 |
| Allocations of unearmarked funds by UN agencies | 5,118,914 | 2.0 % | - |
| Norway | 5,080,657 | 1.9 % | - |
| Japan | 4,792,665 | 1.8 % | - |
| Spain | 3,320,550 | 1.3 % | - |
| Finland | 3,193,293 | 1.2 % | - |
| France | 2,817,874 | 1.1 % | - |
| Denmark | 2,420,125 | 0.9 % | - |
| Switzerland | 1,785,182 | 0.7 % | - |
| Private (individuals & organisations) | 1,297,364 | 0.5 % | - |
| Luxembourg | 341,530 | 0.1 % | - |
| South Africa | 221,126 | 0.1 % | - |
| Greece | 75,000 | 0.0 % | - |
| Estonia | 49,259 | 0.0 % | - |
| Grand Total | 260,627,153 | 100.0 % | 57,057,612 |

NOTE: "Funding" means Contributions + Commitments

Pledge: a non-binding announcement of an intended contribution or allocation by the donor. ("Uncommitted pledge" on these tables indicates the balance of original pledges not yet committed).

Commitment: creation of a legal, contractual obligation between the donor and recipient entity, specifying the amount to be contributed.

Contribution: the actual payment of funds or transfer of in-kind goods from the donor to the recipient entity.

* includes contributions to the Consolidated Appeal and additional contributions outside of the Consolidated Appeal Process (bilateral, Red Cross, etc...)

The list of projects and the figures for their funding requirements in this document are a snapshot as of 10 July 2007. For continuously updated information on projects, funding requirements, and contributions to date, visit the Financial Tracking Service (www.reliefweb.int/fts).

DEMOCRATIC REPUBLIC OF THE CONGO

Table VI: Other Humanitarian Funding to Democratic Republic of Congo 2007

List of commitments/contributions and pledges to projects not listed in the Appeal
as of 10 July 2007
<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by Donors and Appealing Organisations.

| CHANNEL | Description | Funding | Uncommitted Pledges |
|---|---|------------------|---------------------|
| Values in US\$ | | | |
| Denmark | | | |
| MSF | Emergency Preparedness in DR Congo 2007 (46.H.7-7-113) | 916,859 | - |
| Subtotal for Denmark | | 916,859 | - |
| European Commission Humanitarian Aid Office | | | |
| UN Agencies, NGOs and Red Cross | Food aid and livelihood recovery support for vulnerable people in crises [ECHO/-FA/BUD/2007/01000] | - | 13,245,033 |
| UN Agencies, NGOs and Red Cross | Humanitarian Aid for vulnerable population groups in the democratic republic of Congo (DRC) [ECHO/COD/BUD/2007/01000-uncommitted balance] | - | 24,418,523 |
| Subtotal for European Commission Humanitarian Aid Office | | - | 37,663,556 |
| Finland | | | |
| ICRC | Protection, aid to IDP's in Congo DR | 1,333,333 | - |
| Subtotal for Finland | | 1,333,333 | - |
| Sweden | | | |
| MSF | Humanitarian support (Health and medical) | 2,578,995 | - |
| SRSA | Humanitarian support through WFP for logistic person | 274,260 | - |
| UN Agencies and NGOs (details not yet provided) | To be allocated to specific project/sector (uncommitted balance of original pledge of US\$ 14 mn) | - | 10,183,530 |
| Subtotal for Sweden | | 2,853,255 | 10,183,530 |
| Switzerland | | | |
| SDC/SHA | Contribution for humanitarian actions of the COOF | 81,967 | - |
| Subtotal for Switzerland | | 81,967 | - |
| United States of America | | | |
| USAID/DRC | Administration support and staff enhancement | 536,201 | - |
| Subtotal for United States of America | | 536,201 | - |
| Grand Total | | 5,721,615 | 47,847,086 |

NOTE: "Funding" means Contributions + Commitments

Pledge: a non-binding announcement of an intended contribution or allocation by the donor. ("Uncommitted pledge" on these tables indicates the balance of original pledges not yet committed).

Commitment: creation of a legal, contractual obligation between the donor and recipient entity, specifying the amount to be contributed.

Contribution: the actual payment of funds or transfer of in-kind goods from the donor to the recipient entity.

The list of projects and the figures for their funding requirements in this document are a snapshot as of 10 July 2007. For continuously updated information on projects, funding requirements, and contributions to date, visit the Financial Tracking Service (www.reliefweb.int/fts).

DEMOCRATIC REPUBLIC OF THE CONGO

Table VII: Democratic Republic of Congo Humanitarian Action Plan 2007

Requirements, Commitments/Contributions and Pledges per Standard Sector

as of 10 July 2007

<http://www.reliefweb.int/fts>

Compiled by OCHA on the basis of information provided by Donors and Appealing Organisations

| SECTOR | Original Requirements | Revised Requirements | Funding | % Covered | Unmet Requirements | Uncommitted Pledges |
|--------------------------------------|-----------------------|----------------------|--------------------|------------|--------------------|---------------------|
| Value in US\$ | A | B | C | C/B | B-C | D |
| COORDINATION AND SUPPORT SERVICES | 100,826,945 | 100,826,945 | 36,021,415 | 36% | 64,805,530 | - |
| ECONOMIC RECOVERY AND INFRASTRUCTURE | 29,307,000 | 29,307,000 | 4,894,898 | 17% | 24,412,102 | - |
| EDUCATION | 26,851,844 | 26,851,844 | 2,522,088 | 9% | 24,329,756 | - |
| FOOD | 196,215,562 | 196,215,562 | 74,161,871 | 38% | 122,053,691 | - |
| HEALTH | 123,703,771 | 123,703,771 | 26,804,975 | 22% | 96,898,796 | - |
| MINE ACTION | - | - | 963,215 | - | (963,215) | - |
| MULTI-SECTOR | - | - | 2,902,107 | - | (2,902,107) | - |
| PROTECTION/HUMAN RIGHTS/RULE OF LAW | 66,737,985 | 66,737,985 | 11,059,748 | 17% | 55,678,237 | - |
| SECTOR NOT YET SPECIFIED | - | - | 72,525,540 | - | (72,525,540) | 9,210,526 |
| SHELTER AND NON-FOOD ITEMS | 43,017,000 | 43,017,000 | 9,697,871 | 23% | 33,319,129 | - |
| WATER AND SANITATION | 99,931,000 | 99,931,000 | 13,351,809 | 13% | 86,579,191 | - |
| GRAND TOTAL | 686,591,107 | 686,591,107 | 254,905,538 | 37% | 431,685,569 | 9,210,526 |

NOTE: "Funding" means Contributions + Commitments + Carry-over

Pledge: a non-binding announcement of an intended contribution or allocation by the donor. ("Uncommitted pledge" on these tables indicates the balance of original pledges not yet committed).

Commitment: creation of a legal, contractual obligation between the donor and recipient entity, specifying the amount to be contributed.

Contribution: the actual payment of funds or transfer of in-kind goods from the donor to the recipient entity.

The list of projects and the figures for their funding requirements in this document are a snapshot as of 10 July 2007. For continuously updated information on projects, funding requirements, and contributions to date, visit the Financial Tracking Service (www.reliefweb.int/fts).

ANNEX II.

ACRONYMS AND ABBREVIATIONS

| | |
|--------|---|
| ACF | <i>Action Contre la Faim</i> |
| ACTED | <i>Agence d'Aide à la Coopération Technique et au Développement</i> |
| ADRA | Adventist Development and Relief Agency |
| AIDS | Acquired Immuno-Deficiency Syndrome |
| AMI | <i>Aide Médicale Internationale</i> |
| AVSI | <i>Associazione Volontari per il Servizio Internazionale</i> |
| CAF | Country Assistance Framework |
| CAP | Consolidated Appeal Process |
| CERF | Central Emergency Response Fund |
| CESVI | <i>Cooperazione e Sviluppo</i> |
| CHAP | Common Humanitarian Action Plan |
| COOPI | <i>Cooperazione Internazionale</i> |
| CRS | Catholic Relief Services |
| DCA | DanChurchAid |
| DDR | Disarmament, Demobilisation and Reintegration |
| FDLR | Democratic Liberation Forces of Rwanda (<i>Forces Démocratiques de Libération du Rwanda</i>) |
| DRC | Democratic Republic of the Congo |
| ECHO | European Commission Humanitarian Aid Office |
| EPI | Expanded Programme of Immunisation |
| ERC | Emergency Relief Coordinator |
| FAO | Food and Agriculture Organization |
| FARDC | <i>Forces Armées de la République Démocratique du Congo</i> |
| FFLOAT | <i>Ferroviaire, Fluvial, Lacustre, Opérations Aériennes</i> Task Force |
| FTS | Financial Tracking Service |
| GAA | German Agro Action |
| GoDRC | Government of Democratic Republic of the Congo |
| GTZ | <i>Deutsche Gesellschaft für Technische Zusammenarbeit</i> |
| HAP | Humanitarian Action Plan |
| HC | Humanitarian Coordinator |
| HI | Handicap International |
| HIV | Human Immunodeficiency Virus |
| HQ | headquarters |
| IASC | Inter-Agency Standing Committee |
| ICVA | International Council of Voluntary Agencies |
| IDP | internally displaced person |
| IMC | International Medical Corps |
| IRC | International Rescue Committee |
| JRS | Jesuit Refugee Service |
| MdM | <i>Médecins du Monde</i> |
| MEMISA | <i>Medische Missie Samenwerking</i> |
| MERLIN | Medical Emergency Relief International |
| MoH | Ministry of Health |
| MOB | Mobile Operation Base |
| MONUC | UN Mission in the Democratic Republic of the Congo (<i>Mission des Nations Unies en République Démocratique du Congo</i>) |
| MOSS | Minimum Operating Security Standards |
| MSF | <i>Médecins Sans Frontières</i> |
| MT | metric tonne |
| MYR | Mid-Year Review |
| NFI | non-food item |
| NGO | non-governmental organisation |
| NRC | Norwegian Refugee Council |

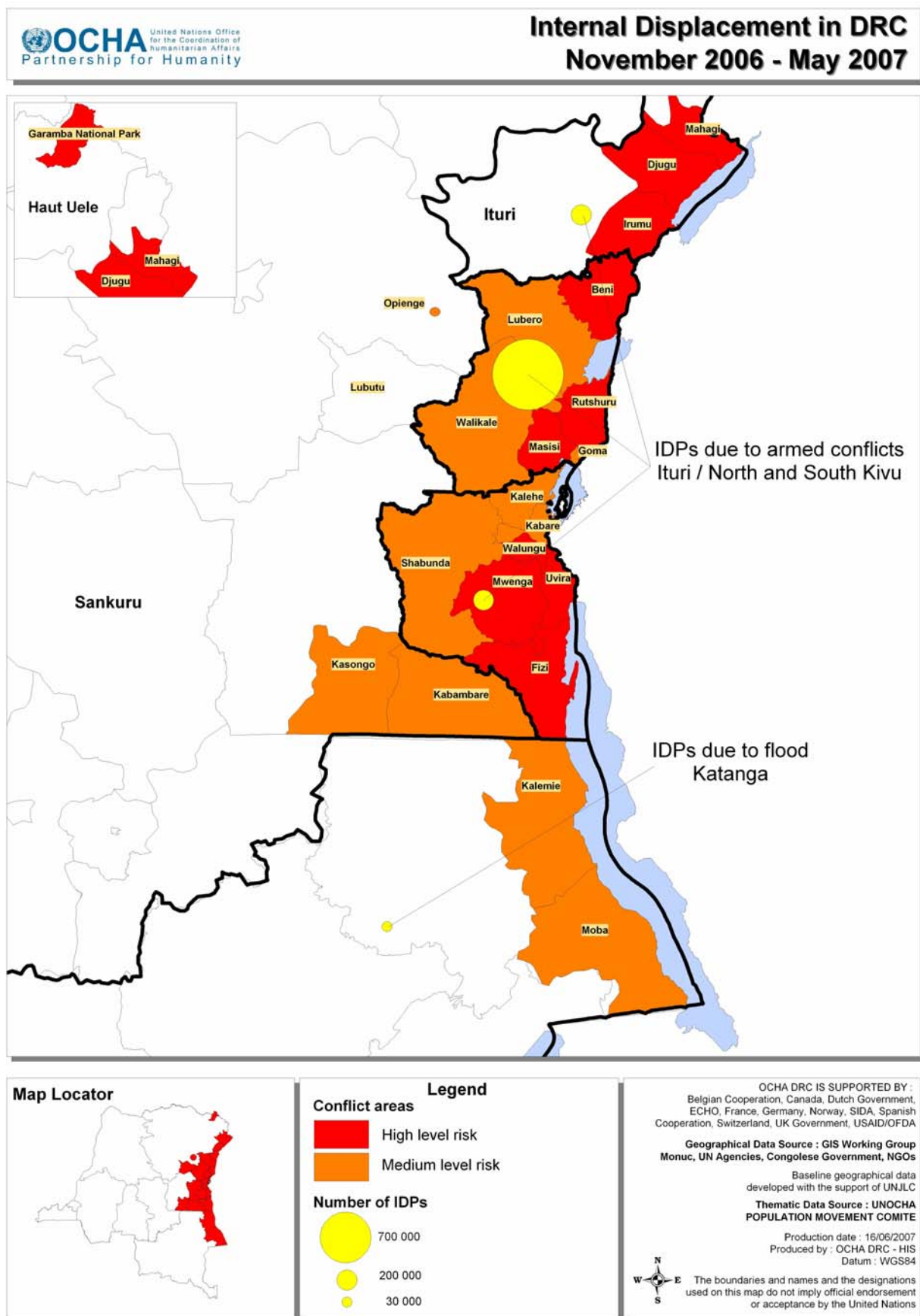
DEMOCRATIC REPUBLIC OF THE CONGO

| | |
|----------|---|
| OCHA | Office for the Coordination of Humanitarian Affairs |
| OHCHR | Office of the High Commissioner for Human Rights |
| PEAR | Programme of Expanded Assistance to Returns |
| PF | Pooled Fund |
| Pronanut | <i>Programme national de nutrition</i> |
| PRSSP | Poverty Reduction Strategy Support Programme |
| PU | <i>Première Urgence</i> |
| REGIDESO | <i>Régie de distribution d'eau de la République Démocratique du Congo</i> |
| RRM | Rapid Response Mechanism |
| S.N.C.C. | <i>Société Nationale des Chemins de fer du Congo</i> |
| SC | Save the Children |
| SCHR | Steering Committee for Humanitarian Response |
| SFC | supplementary feeding centre |
| SFCG | Search For Common Ground |
| SGBV | Sexual and Gender-Based Violence |
| TFC | therapeutic feeding centre |
| TSF | <i>Télécoms Sans Frontières</i> |
| UNDP | United Nations Development Programme |
| UNFPA | United Nations Population Fund |
| UNHCR | United Nations High Commissioner for Refugees |
| UNICEF | United Nations Children's Fund |
| UNMAC | United Nations Mine Action Centre |
| UNMACC | United Nations Mine Action Coordination Centre |
| UXO | unexploded ordnance |
| VVS | <i>victimes de violences sexuelles</i> |
| WFP | World Food Programme |
| WHO | World Health Organization |
| WVI | World Vision International |

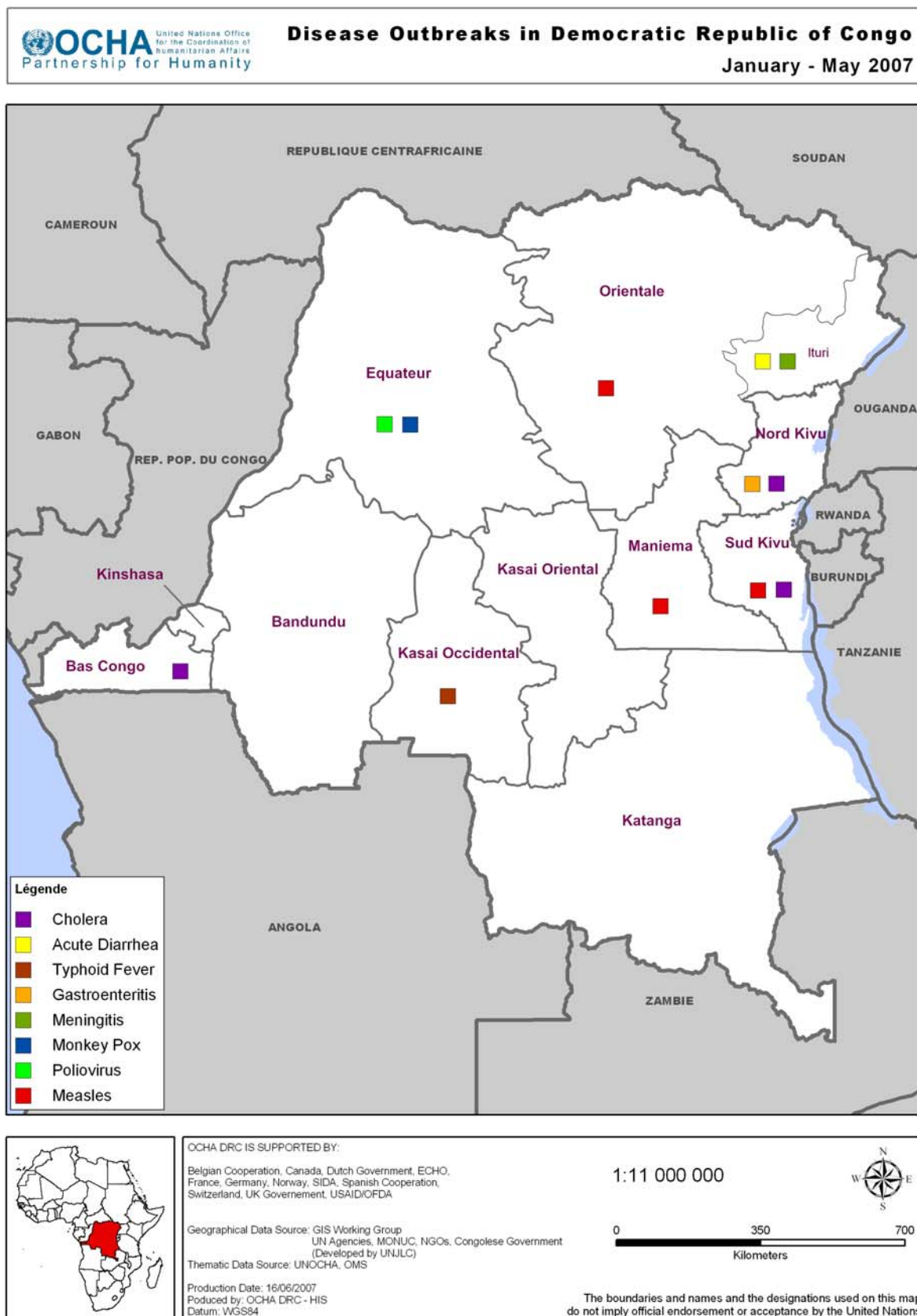
ANNEX III.

MAPS

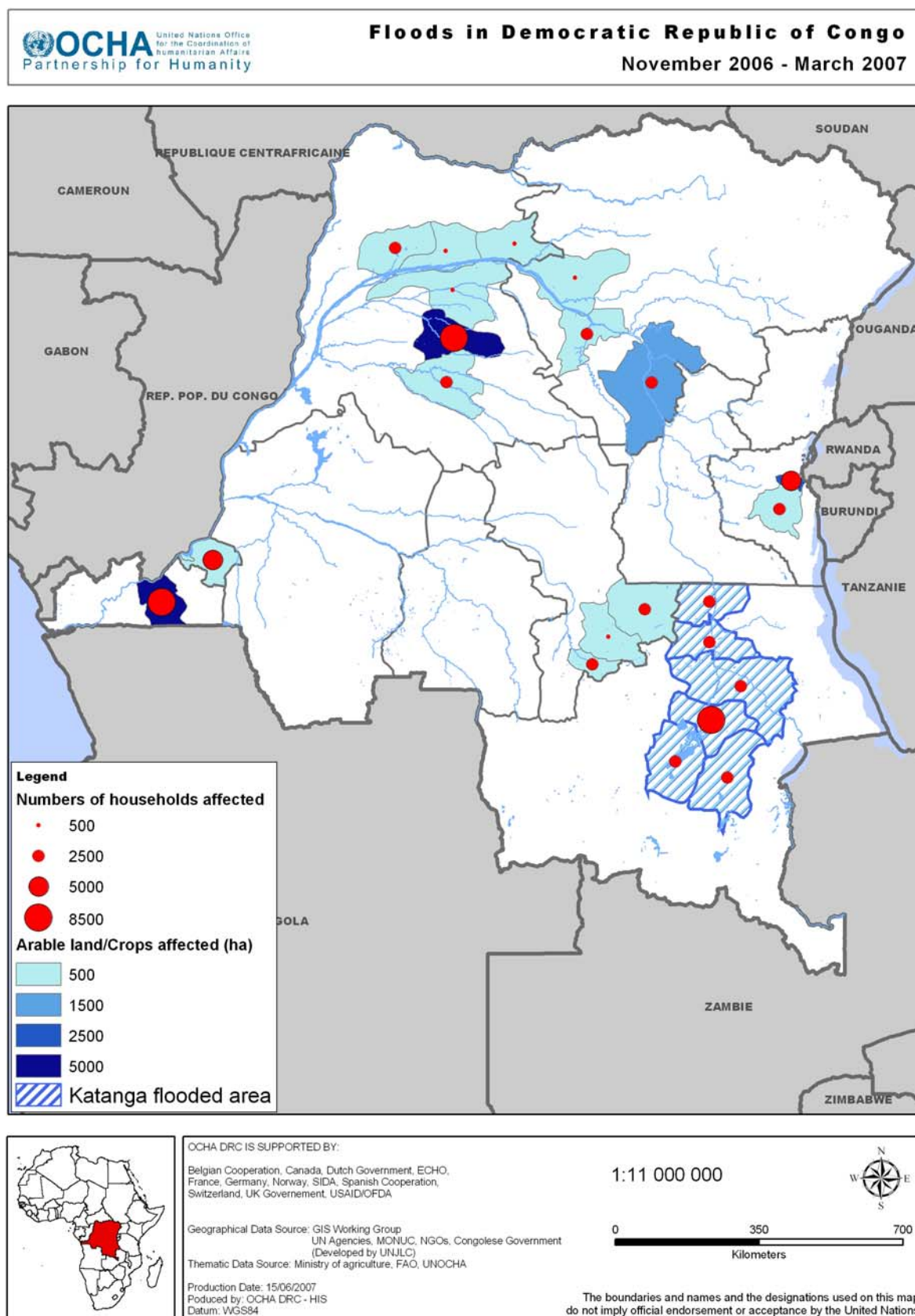
MAP 1



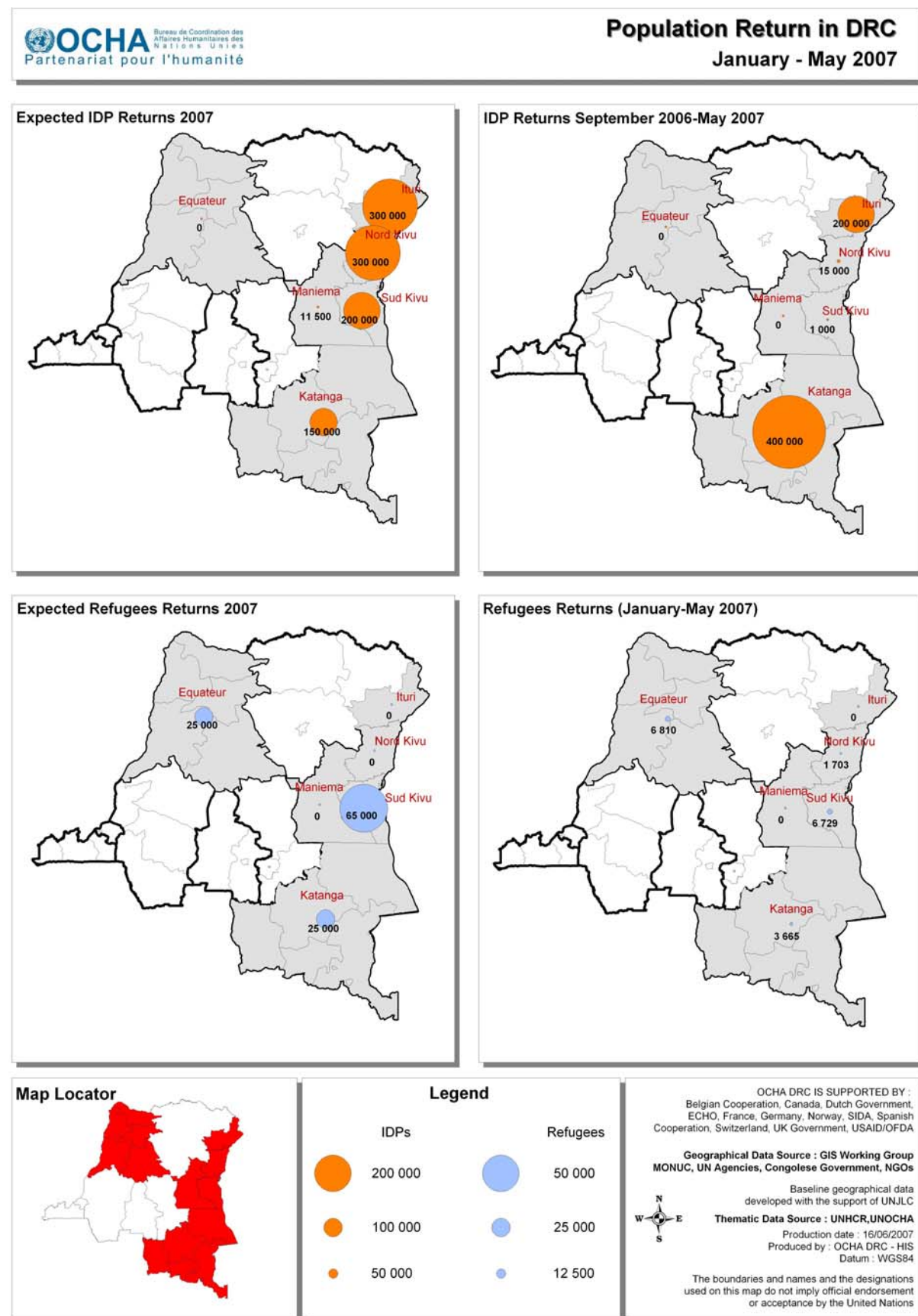
MAP 2



MAP 3



MAP 4



Humanitarian Action Plan 2007

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