

“We prefer to be hungry for a week than not to sleep every night,
in fear of being beaten, raped, or killed,”

A work submitted in partial fulfilment of the requirements for the degree of Master's in
International Cooperation and Humanitarian Aid.

Final Assignment: Protection and assistance to internally displaced persons
in Africa. Case of the Republic of Congo Brazzaville

Solicited by	KALU Institute - Humanitarian Aid Studies Centre
Date	September 19, 2019
Author	Clault Aymar TITI-LEVIS
supervisors	Karin Michotte Zandra Muñoz Barrera



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It happens that the work of a researcher folds its wings in the experiences of his elders. It is thus rightly that one can find in this thesis sections already used.

1.5 Own publications included in this thesis

No publications authored by us have been included in this thesis.

1.6 Acknowledgements

I would like to express my gratitude to all the contributors to this thesis for their support for my enrollment in this programme and particularly to **Maitre Eulalie KOLYARDO-NGANGA**, lawyer, Pointe-Noire Bar association, Congo Brazzaville and **Mr. MULALEYA SAYELENGERA**- WHO executive, who both asked me to dare and i did dare as a French-speaking student in an English speaking environment.

My thanks to all the teachers of Kalu Institute including **Ms. Karin Michotte** for this training that they gave me and that i commit myself to defend everywhere : in seminars, workshops, in the professional world as well as in other academic structures.

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1.7 Dedication

This thesis is dedicated to my late father who wanted me to go further in my academic studies and beyond to the Pool's IDPs and Les Bandas flood affected people who

accepted to testify and share their views and concerns in line with this study during my visits in their localities.

2-About this document

2.1 Categories

Countries	Document Type	Subject		Institutions	Language
Congo	Case study	Protection	Humanitarian Assistance IDPs	N/P	English

2.2 Author

Clault Aymar TITI-LEVIS (5 March 1974) is a humanitarian action officer and a legal practitioner, born in Congo Brazzaville. Graduated from Marien Ngouabi's University where he held a Master in Private Law in 1998 and after three months of internship in a



lawyer firm in 1999, he worked during five years for a sheriff bailiff office. Since 2016, he has been working for the Ministry of social affairs and humanitarian action as Head, Department of Bilateral Cooperation and at the same time, volunteering as legal adviser for Mwana Villages, an NGO that cares for vulnerable children and widows, in its Congo's branch and that is based in the USA, France and Canada.

Titi participated in many courses linked to Humanitarian Law, validated by verified certificates, including:

- the 14th course of internally displaced persons, international institute of humanitarian law (Sanremo, Italy)
- humanitarian response to conflict and disaster (University of Harvard, Edx, USA)
- addressing global water crisis (SDG Academy, Stockholm)
- environmental security and peace-keeping (SDG Academy, Stockholm).

Fervent defender of children's rights, he is often consulted on issues of domestic and international adoption. As such, he participated in August 2016, alongside magistrates of renown of his country, in the seminar on the sharing practices on inter-country adoption organised by Faulkner University at the initiative of Agape for Central Alabama, in collaboration with Professors David Smolin, Jerome Dees..., and some Alabama Supreme Court Justices.

Since 2017, Titi is member of the consultation framework for civil society organizations and indigenous peoples to reduce emission from deforestation and forest degradation (CACO-REDD+) and a member of the network of the indigenous and local populations of Central African States, REPALEAC in french. Recently, he has been appointed as member of the

Commission tasked with updating and drafting legal texts of the Ministry of Social Affairs and Humanitarian Action. He bears interest in sport, music, hiking, cinema. Eldest of four children, he has the sense of responsibility and a spirit team.

2.3 Executive Summary

The multiplication of conflicts in the Pool department and the flooding of Les Bandas in the Niari region are among the problems faced by the Republic of Congo over the last ten years. Despite the limited achievements of the Government and some of its partners in assisting IDPs and managing war and flood-torn zones in these southern parts of the country, these humanitarian crisis have cast doubt about the effectiveness of the response brought in these localities. This study aims at assessing interventions already conducted in the lights of international, regional, sub-regional and national instruments on the one hand, and strategic framework on protection and assistance of Internally Displaced Persons, on the other hand. To meet its objective, the study employed qualitative and quantitative research approaches. Essentially, primary and secondary sources have been used to assess the response to the humanitarian situation or to better say, to the priority sectors of vulnerabilities identified. The finding of the study shows that the Republic of Congo does not have any computer system for the production of databases facilitating studies on protection, assistance, disasters, conflicts and their impacts, that the current legal, programmatic or strategic architecture has been playing significant role in the internal displaced persons protection. Yet in the way, it is found that there are no specific legislation, institution and special emergency assistance fund for displaced persons in the Republic of Congo Brazzaville, making the vast majority of them vulnerable. Furthermore, even, the coordination supposed to play a big part on the occasion of humanitarian crisis, shows weaknesses: it is not inclusive, effective and largely depends on the United Nations system organizations. To that end, efforts and steps should be taken by the national authorities, to better care for IDPs in the Pool and especially in Les Bandas district in the Niari region where the relocation issue of people affected by the flood of February 25, 2018, still arises.

This will justify the various multisectoral development programs or projects to be initiated by the congolese Government through certain ministerial departments, including that of social affairs and humanitarian action, in collaboration with financial partners to better protect and assist the IDPs of Pool and that of les Banda's district.

3. Introduction and background of the study

3.1 Context and justification

Internal displacement represents a cause of concern and one of the key challenges of the humanitarian community, affected countries, intergovernmental agencies and host families.

Over 55 million people worldwide are arbitrarily displaced from their habitual residence by violent armed conflicts, a situation of widespread violence, human rights violation, natural

disasters or large-scale development projects in order to find a safe refuge in another area within the borders of their own countries.

According to the Internal Displacement Monitoring Center's (IDMC) global reportⁱ, by the end of 2020, the number of concern in Sub-Saharan Africa reached 6.8 Million displacements triggered by conflict and violence and 4.3 by disasters; 2.1 Million people were living as IDPs as result of conflict and 341,000 people as a result of disasters in the Middle East and North Africa. The rains provoked flooding in localities already affected by violence, prompting other secondary displacements. The majority of internal displacements in Africa took place in the Democratic Republic of the Congo as in previous years.

These people find themselves in a vulnerable position that they need protection and assistance to live decently and with dignity. « Humanitarian protection is concerned with preventing or mitigating the most damaging effects, direct or indirect, of armed conflict on the civil population. It relates mainly to the way in which people, particularly the most vulnerable, are treated- through deliberate act or through negligence- by others. »

The Republic of Congo Brazzaville, one of the countries of central Africa, which comprises 12 departments, has not remained on the sidelines of this phenomenon of internal displacement. Two of its regions have been seriously affected over the past ten years.

With a population estimated at 300.000 inhabitants¹ the Pool region has been shaken by a humanitarian crisis during the years 2016, 2017 and 2018 following attacks on public buildings, security forces and transporters attributed by the Government to Ninja militias. This caused people to flee their villages in the district of Goma Tsé Tsé, Vindza, Kinkala, Mindouli, Kindamba, Kimba, Mayama and later in Loutété, Yamba, Madingou, Nkayi (The Bouenza region). On May 2017, the figure of 81,000² displaced persons is reached and confirmed by the Government and partners.

In October 2017, the joint evaluation mission by humanitarian partners indicates a total number of 158,717 people in dire need located in the departments of Brazzaville, Pool, Bouenza, Lekoumou, Niari, Kouilou and Pointe Noire.

The second region to register a movement of people is the Niari department with a population of more than 327,407 inhabitants³. Following a torrential rainfall that fell in this locality on 25 February 2018 in the evening, the Les Banda district that forms part of it, was fully flooded. This natural disaster resulted in casualties and material damages that lead to 583 people⁴ fleeing to a neighboring Moukondo village.

Security crisis and flood made inhabitants of the two departments above mentioned that were insufficiently prepared, vulnerable. Among people affected, women in general, out-of-school children, children enrolling school, breastfeeding teenage mothers, persons with chronic illness, people in the third age, people with disabilities as well are obliged to show

1 - 2014 projection based on the 2007 census of the National Institute of Statistics.

2 - Report on the joint evaluation UN-Government on the humanitarian crisis in the Pool region.

3 - 2014 projection based on the 2007 census of the National Institute of Statistics.

4 - See Rapport général de gestion de la catastrophe de Les Bandas. Dolisie, February-April 2018, Jean Didier Narcisse Nzila, Departmental Directorate of humanitarian action of Niari.

resilience in order to develop coping mechanisms. All these persons should benefit from the protection and assistance of National authorities and partners in essential fields of humanitarian action (Food, health, shelter, education....).

The scale of phenomena of this nature led the UN System in 1998 and later some regional organizations, to develop a reference tool « providing an advocacy and monitoring framework for assistance and protection needs of the internally displaced, indicating in details some unbinding and guiding principles that many states, in the world, should follow or incorporate freely in their domestic laws, programming frameworks and strategies ; principles based upon the respect and safeguard of human rights, international humanitarian law as well.

In this light, progress have been made in the Republic of Congo Brazzaville in the field of legislation and policies, plans, programs relating to the protection and assistance of IDPs, with the ratification of some covenants, protocols, entering into some agreements. Yet in a way, despite this good political will and commitment, the level of understanding, implementation and effectiveness of these legal instruments, policies concerning assistance and protection remain weak and inexpressive for the people affected to some extent. This calls for the creation of a new legal, institutional and strategic framework or the improvement of the existing one.

3.2 Statement of the Problem

Interventions conducted by the Congolese National authorities, UN system and other partners in the Pool region on one hand, and by the Government in les Banda districts on the other hand seem to be challenged so far and negatively interpreted.

Faced with such a situation, it has been useful for us to ask ourselves about the effectiveness of the protection and assistance operations in the two above mentioned localities, the part played by different actors and their capacities to perform such operations.

In stating this main problematic, our concern is to know whether needs and expectations of internal displaced persons during security crisis in the Pool region and flooding in les Banda district are a task commensurate with the means of responding actors.

3.3 Research goal & Research questions

The main goal of this research aims at undertaking a critical assessment of the implementation of protection and humanitarian assistance to the internal displaced persons in the Republic of Congo at the end of the security crisis in the Pool⁵ region and flooding arising at les Banda⁶ district in the Niari region. Such evaluation will allow us, to analyse problems and challenges that really arise in the course of the humanitarian response, know whether the national authorities and partners in the field are up to the

5 - The Pool region is located in the south of the Republic of Congo-Brazzaville. It has experience a multitude of conflicts opposing rebel forces called Ninjas to congolese army forces

6 - See Pre-Initial report by the Departmental Directorate of Humanitarian Action, Niari

challenges on the one hand and appreciate results of these humanitarian interventions, submit recommendations for their improvements, on the other hand.

To this end, we set ourselves the following specific objectives:

- to analyse the conception of protection and humanitarian assistance;
- to implement the conception of the protection and humanitarian assistance in the concrete case of the Pool department and les Banda district in the Niari region;
- to evaluate results of these interventions and formulate recommendations.

3.4 Significance of the Study

The resurgence of hostilities and the extent of floods in many african countries namely in DRC, Ethiopia, Mozambic and Congo Brazzaville (2016, 2017, 2018) shows how it is important for the international community to make the phenomenon of internal displacement a big challenge to overcome. Therefore, reflecting upon the effectiveness of interventions by governments and their partners concerning protection and assistance for IDPs during conflicts and disasters is theoretically and practically relevant.

From a theoretical point of view, this reflexion is important to understand the outlines of the conceptual and operational approach of the African union and Republic of Congo Brazzaville relating to protection and assistance for IDPs;

From a practical standpoint, this research shall help the reader and people to reach a better understanding concerning their expectations from the regional organisation, the government and its partners. It is instructive to remind that the protection in question in the reduced space of this study takes into account the full range of humanitarian response from security protection activities required by the Geneva Conventions (physical protection through the establishment of humanitarian corridors, settlement of IDPs in camps to avoid rapes and any other abuses, their assistance until the post conflict and disaster recovery). At this level of orientations, some questions pop out: is the use of military force during these response operations necessary? What are military means or capabilities the armed forces and other bodies involved have on the ground?

Were humanitarian interventions already conducted for populations rational? If not, what kind of humanitarian responses are needed to avoid bitter failures? Are there available reports thereof? Have difficulties met, already been settled? How to get non-state actors, local solidarity involved more?

Basically, the protection and assistance tool should favor the involvement of other actors and preparation of a post-conflict and post-disaster multi-sector recovery and development support program in affected areas of the Pool region and les Banda's district in the Niari department, which will be built around several priority areas.

Several reasons warrant the adoption of this aspect of protection and assistance:

- The project development based approach: which is conceptualised for the long-term and takes into account special needs of each category of population, strengthens

his resilience and empowers him to some extent. Here protection strategies should be streamlined into long-term development plans by communities and local authorities⁷ ;

- International humanitarian law and human rights based approach running out on the preparation of a legislative framework protecting IDPs rights with a strong sentencing system. An environment operating in ignorance of international laws and conventions is conducive to utter impunity, family separation. Which contributes to the growing vulnerability of communities or people. By what mechanisms the African union, the Republic of Congo Brazzaville and their partners control army soldiers, armed militia groups and humanitarian workers behaviours in the field in order to avoid atrocities committed and other grievances against IDPs.

In the light of the above, consideration needs to be given to different humanitarian responses undertaken and provided to displaced people in the Pool region and in les Banda district and to draw up a critical assessment thereof. These questions focus on the approach or vision of the african union and particularly the Republic of Congo Brazzaville concerning protection and assistance, the means and actions needed for its implementation, monitoring and evaluation, its effectiveness in the field and its results at the field level of the said implementation.

To conduct our research, we made the following initial assumptions:

- In Africa, protection and assistance for IDPs is an area of regional and national interest: the african union in general and the Republic of Congo in particular interest in the IDPs issue in armed conflicts and disasters as evidenced by their presence in conflicts and disasters zones. But these interventions often do not provide an effective response to the request for protection and assistance from IDPs;
- Despite the major challenges, constraints and weaknesses observed, protection and assistance to IDPs in armed conflicts and disasters in Africa in general and Congo Brazzaville in particular, are not an impossible task:
- Interventions made with a resort to force can be an effective way to guarantee protection and assistance to IDPs.

To tackle this exercise, two methodologies are employed: qualitative and quantitative research approaches.

Surveys based on priority sectors of vulnerabilities identified are conducted in the Pool and Les Bandas district.

The data collection techniques adopted have been direct observation of events in public places, in families and interviews with administrative authorities at the central (Central government) and decentralized levels, staff of UN organizations, their operational partners (NGOs) at some regards.

7 - See Kalu's Course on Protection, academic year 2019-2020.

Data collection have also been facilitated by a triangulation through focus group discussions with a sample of displaced persons and interviews with flood-affected people that allowed to confirm the information gathered from the central government or their decentralized administrations on the one hand, and from UN system organizations or their operational partners on the other, regarding the vast majority of vulnerability sectors identified and assessed.

Data have finally been collected by means of a slight opinion poll, relevant strategic and programmatic frameworks, websites and documentary researches. The evaluation has allowed to identify strengths and weaknesses of interventions conducted in each vulnerability sector.

Given the difficulties in carrying out an overall assessment of results of the humanitarian responses concerning internal displacements triggered by security crisis and disasters in all african countries in the narrow space of the present research, it has been decided to focus only on the protection and assistance to IDPs in the case of Congo Brazzaville and for that end, a particular interest has been borne in displacements that took place in the Pool department and in les Banda district in the Niari region. The two administrative units mainly the Pool region represent a challenge for the government, the UN System and other partners. The recurrence of security crisis in this area got some international organizations to make the Pool their priority areas for several years. With more than 81000 IDPs up to May 2017, the Pool also attracted the attention of many western and eastern countries and diplomatic corps accredited to the Republic of Congo Brazzaville, from the USA, France, Italy, Germany, up to China.

As for the disastrous flood of les Banda district, their extent is the reason for why we are interested in them, as well as the axes of water drainage. For the first time in its history, the Republic of Congo experienced a disaster of this size happening in the evening and overwhelming local response capabilities and seriously affecting the social and economic development of the locality, its inhabitants and lanscape, including the control and settlement capacities at the very beginning of the disaster.

3.5 Limitations of the Study

This study met many difficulties in public and UN offices or to UN personnel. Some officers and employees who have promised to share with our team of evaluators, are not forthright and cooperative in providing answers to questions raised; in some cases they purely and frankly mark their refusal at communicating with the team. Others justify themselves by saying that they remain under a strict obligation of confidentiality to anyone coming from outside their offices and seeking information deemed sensitive and might be released from that said duty of confidentiality only with the consent of their line supervisors that they unfortunately cannot give.

As for the displaced persons and local communities settled in districts, they are afraid to identify themselves and to answer questions they are asked arguing that the evaluators are there to spy them. One of the major difficulties in carrying out the study has also been.

lack of financial resources and beyond fear that animate the evaluators who are aware that they are in a very sensitive area.

To this liability and low responsiveness should be added other limitations such as those linked to the geographical access of certain areas and institutional corporate memory: The team of evaluators deployed in the field cannot reach the most remote districts nor can it accede to their opinion leaders and when they do so, data collected are not wholly trustworthy and sometimes they are a little fragmented.

3.6 Description of the Study Area

The survey sites identified during these field visits have been the district of Kingoue (Bouenza) bordering the Pool region and the districts of Kindamba, Vindza and Kimba (Pool) bordering the Bouenza department.

The department of Brazzaville has been selected because it is home to all the organizations of the United Nations system and the central government who are both implementing partners according to⁸. A part from that, Brazzaville is near the Pool region and it has been the theatre of a big population movement. As for the districts of Kingoue, Kindamba, Vindza and Kimba, their eligibility stems from the fact that, on the one hand, they have welcome displaced persons and are the most accessible districts among all, and on the other hand, they host certain external government services and the branches of some NGOs.

As regard Les Bandas district, the study areas selected have been the former Chinese base, the leprosarium in the village of Moukondo and the district of Les Bandas itself, all of which located in the Niari department.

3.7 Definition of key concepts

It is necessary to agree on the definitional and notional content of key terms used all along this research.

Protection : is defined as all activities aimed at full respect for the rights of individual regardless of age, gender, ethnic, social, religious or other background in accordance with the letter and spirit of the relevant bodies of the law, namely human rights law, international humanitarian law, refugee law⁹.

From the foregoing, protection can be seen as:

- an objective ;
- a legal responsibility ; and
- an activity.

Protection is an objective which requires full and equal respect for the right of all individuals, without discrimination, as provided for in national and international law. Protection is not limited to survival and physical security but covers the full range of rights,

8 - See <https://www.humanitarianresponse.info/ru/operations/west-and-central-africa/document/r%C3%A9publique-du-congo-rapport-d%C3%A9valuation-de-la-r%C3%A9gion-de>

9 - <https://www.google.com/search?client=firefox-b-d&q=handbook+for+the+protection+of+internally+displaced+persons>

including civil and political rights, such as the rights to freedom of movement, the rights to political participation, and economic, social and cultural rights, including the rights to education and health.

Protection is a legal responsibility, principally of the State and its agents. In situations of armed conflict, that responsibility extends to all parties to the conflict under international humanitarian law, including armed opposition groups. Humanitarian and human rights actors play an important role as well, in particular when States and other authorities are unable or unwilling to fulfill their protection obligations.

Protection is an activity because action must be taken to ensure the enjoyment of rights. There are three types of protection activities that can be carried out concurrently:

- responsive – to prevent or stop violations of rights:
- remedial- to ensure a remedy to violations, including through access to justice and reparations; and
- environment-building- to promote respect for rights and the rule of law¹⁰.

KALU Institute in its Master courses uses relevant definitions from some organizations that deserve to be quoted¹¹ :

According to the International Committee of Red Cross, protection means all activities aimed at preserving life and human dignity, and humanitarian assistance is considered as a protection activity.

For other NGOs humanitarian protection should be distinct from humanitarian assistance and mean specific and practical activities, not just legal ones, undertaken to improve the security conditions of the population directly affected by conflict.

Assistance or humanitarian assistance: is intended to save lives, alleviate suffering and maintain human dignity during and after man-made crises and disasters caused by natural hazards, as well as to prevent and strengthen preparedness for when such situations occur. Humanitarian assistance should be governed by the key humanitarian principles of: humanity, impartiality, neutrality and independence. Humanitarian assistance is different from development aid.¹²

Internally displaced persons (IDPs) : for the purposes of Guiding principles on internal displacement, internally displaced persons are persons or groups of persons who have been forced or obliged to flee or to leave their homes or places of habitual residence, in particular as a result of or in order to avoid the effects of armed conflict, situations of generalized violence, violations of human rights or natural or human-made disasters, and who have not crossed an internationally recognized state border.

Africa: is distinctively unique continent among all 7 continents of the world. A continent south of Europe and between the Atlantic and Indian Ocean. The second largest and second populous continent after Asia which covers about one-fifth of the total land surface

10 - See Handbook for the protection of internally displaced persons Part I-1 P10.

11 - See Humanitarian protection course P3, KALU Institute, Master in International Cooperation and Humanitarian Aid- academic year 2019-2021.

12 - See <http://www.globalhumanitarianassistance.org/data-guides/defining-humanitarian-aid>.

of Earth. Its total land area is approximately 11724000 square miles with a population estimated at 1,275,920, 972 in 2018.¹³

The republic of Congo Brazzaville : With an area of 342,000 km², Congo Brazzaville is bordered by Angola (the enclave of Cabinda), Cameroon, Central African Republic, Democratic Republic of the Congo(Kinshasa), and Gabon. The country is located in the central-western part of sub-Saharan Africa along the Equator. Congo-Brazzaville has a population of about 4 million people. It's Capital and largest city is Brazzaville, the city is located on the Congo River, in the south of the country, across Kinshasa, capital of the Democratic Republic of the Congo. The following are its departments or regions, from north to south: Likouala department, Sangha department, Cuvette-Ouest department, Cuvette centrale department, Plateaux department, Niari department, Lékoumou department, Pool department, Pointe-Noire department, Kouilou department, Bouenza department and Brazzaville department.

The Pool department and Les Bandas district (Niari Department) are the two localities concerned by this study.

3.8 Literature review

The outbreak of the Covid-19 pandemic on March 2020 led to the closure of several academic institutions. Because of this state of affairs, university library attendance has been prohibited by virtue of a decision by the Minister of higher education. From that moment on, it has been difficult for us to consult the directory of Masters and Theses defended in the course of previous years and to have an idea on research works carried out by experts on humanitarian protection and assistance for IDPs in the Republic of Congo Brazzaville. We deemed it useful to resort to expertise from elsewhere to find precursors on this path although their doctrine is fragmented to a certain extent.

Abdi Mohammed in his thesis on the topic « The protection of IDPs in Ethiopia : The analysis of legal and institutional Frameworks » written on October 17, 2020 and defended at the Ethiopian Civil Service University, « found that the lacks of enforcement of existing legal framework is more creates problems rather than existing gaps on IDPs protections. The existing human rights frameworks are lacks accessibility to addressing the IDPs issues in Ethiopia and also absences of effective and uniform standards protection among existing institutional frameworks are making the IDPs protection in Ethiopia more vulnerable ». A Mohammed ended his abstract in saying; « Ethiopia needs effective/ inclusive institutional frameworks that handle internally displaced persons issues in proper manner ¹⁴».

Ebunoluwa Elizabeth Adefowokan in her thesis presented at the University of Northern British Columbia, on April 2019 under the topic « Promoting internationalism ? A gendered examination of the United Nations reintegration processes for internally displaced person (IDPs) in north-east Nigeria, investigated the challenges of internally displaced persons (IDPs), particularly women and girls in northeastern Nigeria. For that purpose, she studied

13 - See [https://www.google.com/search?client=firefox-b-d&q= what+is+Africa ?](https://www.google.com/search?client=firefox-b-d&q=what+is+Africa?)

14- https://papers.ssrn.com/sol3/papers.cfm?abstract_id=3713981

the United Nations (UN) interventions and reintegration policies as the « government of the world », the implementation of these policies in the Nigerian context, and their effectiveness for women and girls after the Boko Haram insurgency. In the stemming from this study, the researcher recommended improvements in the subsistence interventions and reintegration processes of this region with special attention to gender needs of the displaced women and girls.

In either of the two doctrine briefs described above, it is needful for governments and partners to promote the effectiveness and improvements of interventions to IDPs through deepened multisectoral development programs, frameworks touching several priority areas such as trauma, civil status, empowerment and vulnerabilities often forgotten.

The approach selected within this study consisted in analyzing first and foremost, both the african and congolese conception or vision of protection and assistance to internal displaced persons about security crisis and flooding (4). Then, we have presented the implementation of the said conception in the concrete case of the Pool region and Les Banda district in the Niari department (5) in Congo, before evaluating results (6) of interventions provided to IDPs in the above mentioned localities and formulating recommendations.

4: ANALYSING THE AFRICAN AND CONGOLESE VISION OF PROTECTION AND ASSISTANCE

4.1: THE AFRICAN VISION

The african vision of protection and assistance to internally displaced persons is characterized by the initiatives and commitments made by States. International human rights law, international humanitarian law and international criminal law are all bodies generally supporting that conception in all situations of internal displacement.

Human rights mean freedoms and entitlements that every individual should benefit from. It is admitted that international human rights law guarantees these rights and obliges States to respect, protect and implement them for every individual equally, regardless of age, gender, ethnic, social, religious or other background, language, religion, political or other opinion, national or social origin, property, birth or other status, including the fact of being or having been internally displaced.

There exists three fundamental human rights instruments of which one, the universal declaration on human rights, a non-binding text, defining the main civil, political, economic, social and cultural rights to which all people are entitled; the two others developed in 1967 namely international covenant on economic, social and cultural rights and international covenant on civil and political rights are international Bill of Rights.

The former guarantees, the rights to food, shelter, clothing, health care, a proper standard of living, social welfare, education and participation in cultural life. The latter provides for a range of civil and political rights, covering the rights to life, physical integrity, recognition before the law, political participation, freedom of movement, choice of residence, and

protection of the family; To these instruments should be added, among others, the Convention against torture and other cruel, inhuman or degrading treatment or punishment developed in 1984 and instruments protecting vulnerable people or people with special needs.

Several additional international frameworks for action enhance protection and assistance to displaced persons concerning humanitarian action and disasters risk management:

- Sendai framework for disaster risk reduction 2015-2030 outlines four priorities for action adopted at Sendai, Japan, on March 18, 2015, by the third UN world conference on disaster risk reduction towards sustainable development. These are :
 - understanding disaster risk;
 - strengthening disaster risk governance to manage disaster risk;
 - investing in disaster reduction for resilience and;
 - enhancing disaster preparedness for effective response and to "Build Back Better" in recovery, rehabilitation and reconstruction.

The seventieth session of the united nations general assembly adopted the 5 core responsibilities resulting from the global commitment to protect humanity in the face of new humanitarian challenges adopted during the world summit held in Istanbul, Turkey, in 2016 concretely responsibilities to improve aid delivery, uphold international law, increase financing and prevent the crises generating the largest migration flows in 70 years. Coming in support to these commitments, Secretary- General Ban Ki-moon said « Implementing this Agenda is a necessity if we are to enable people to live in dignity and prosperity¹⁵ ».

For his part, moderating round table VII on « Women and girls : Catalyzing action to achieve gender equality » during the Istanbul summit, Mr. Eliasson, United Nations Deputy Secretary-General said participants to the meeting to make commitments to advance gender equality, women's empowerment and women's rights in humanitarian action. States could help end need when assistance addressed the priorities of women and girls. They could build resilience by supporting women's work as change agents, respond to crisis by ending violence against women and girls, and by providing universal access to sexual and reproductive health. For its part, the United Nations was committed to ramping up action on gender equality and increasing the percentage of women at all levels in its work, from humanitarian action to development, from field to headquarters. It would seek to surpass 40 per cent by 2020 and achieve a 50 per cent balanced workforce by 2030.

A special stress has been laid on the widening of financing system, the central part played by protection in humanitarian action, the establishment of an inclusive humanitarian system, strengthening the humanitarian-development nexus.

The african regional conception aligns with these international legal instruments and commitments and makes them the foundation for the protection and assistance to IDPs in the continent. The African Charter on Human and Peoples' Rights which establishes

15 - See Ban Ki-moon declaration during the world humanitarian summit 2019 in Istanbul.
<https://www.un.org/press/en/2016/iha1401.doc.htm>

political, civil, social rights, free access to property, the right to freedom of movement and choice of residence on one hand, the African Charter on the Rights and Welfare of the Child and the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa on the other hand, have both the characteristics as described under the vision supported by international legal instruments.

The main reference texts also include the African social policy framework adopted by the African union at Windhoek, Namibia in 2009 by which african countries committed to strengthening their social protection system as a way to fight against poverty, improve access of populations to basic social services and reducing the vulnerability of the poorest households to shocks.

In the same vein, Agenda 2063 the future we want for Africa, develops a vision and platform guiding the continent in order to consolidate progress underway and to exploit opportunities available in the short and medium term to ensure a positive socio-economic transformation within the fifty years to come. This pan-african program is meant for enhancing african cooperation.

In support of this vision, « efforts to integrate risk reduction strategies into development strategies for good governance, sustainable economic growth, and poverty reduction, UNISDR and the World Bank have developed a number of initiatives in the african region. Under the new Global Facility for Disaster Reduction and Recovery (GFDRR), regional disaster risk reduction initiatives in partnership with Sub-Saharan Africa countries are being promoted to develop proactive and strategic approaches to managing hazard risks ¹⁶».

The sub-regional vision of protection and assistance to internal displacement is characterized by the initiatives and commitments made by States as illustrated by the following:

- great lakes protocol on the protection and assistance to internally displaced persons established in 2006 ; the protocol on the property rights of returning persons winding up to 2006, the protocol on the prevention and suppression of sexual violence against women and children adopted in 2006, legally binding on countries that ratified them;
- the non-binding Khartoum declaration of the inter-governmental authority on development (IGAD) ministerial conference on internal displacement (2003) providing for commitments made by east african states to protect the rights of internally displaced people ;
- development of a sub-regional strategy for disaster reduction by the Inter-Governmental Authority on Development (IGAD)
- approbation in early 2007 of a sub-regional common policy and mechanisms for DRR by the economic community of west african states (ECOWAS) ;

16-See Pvi Report on the Status of Disaster Risk Reduction in the Sub-Saharan Africa Region- January 2008.

- revision by the southern african development community (SADC) of its sub-regional strategy, factoring in DRR ;
- establishment by the economic community of central African states (ECCAS) of a sub-regional center for DRR in the Republic of Congo while developing a sub-regional strategy.¹⁷

Measures and actions have been taken by the african union rights commission to monitor the implementation of the different charters and initiatives above mentioned, by States. Those are, among others:

- developing strategies protecting rights of IDPs;
- awareness campaigns on disasters and legal standards relating to IDPs protection and assistance.

The analysis carried out shows that, the signing and ratification of these various international and sub-regional texts are not really the end of the process. Much more needs to be accomplished. The main challenge remains to turn their provisions into touchable improvements in the rights, well-being and day-to-day real life of IDPs across Africa; despite the signing of these legal instruments by States, the statistics of IDPs on the african continent are increasing at an alarming rate. They account more than the third of the global IDPs of the world population.

Furthermore, some african countries don't submit their annual reports as for Charters, to the African commission on Human and People's rights or bodies designated for this end, on the implementation of their provisions and on measures undertaken to make this said implementation possible; some other countries mark their refusal at signing and ratifying these legal documents. When they do so, they hesitate to incorporate their provisions in their domestic law; some lastly show reservations and make their declarations (Egypt, South Africa, and Zambia).

Data below show the participation of african states into the regional and sub-regional instruments of human rights.

Ratification table 1: Stage of ratification of a sample of regional treaty of human rights by african states

- African charter on human and people's rights

States	Year of ratification/ accession	Optional protocols to treaties	Year of ratification/ accession	observations
Algeria	March 01, 1987			Signed april 10, 1986 Deposited March 20,1987
Angola	March 02, 1990			Signed March 02, 1990 Deposited October 09, 1990
Benin	January 20,			Signed February 11, 2004

17-See Pvi Report on the Status of Disaster Risk Reduction in the Sub-Saharan Africa Region- January 2008

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	1986			Deposited February 25, 1986
Botswana	July 17, 1986			Deposited July 22, 2001
Burkina Faso	July 06, 1984			Signed March 05, 1984 Deposited September 21, 1984
Burundi	July 28, 1989			Deposited August 30, 1989
Cameroun	June 20, 1989			Signed July 23, 1987 Deposited September 18, 1989
Cape verde	June 02, 1987			Signed March 31, 1986 Deposited August 06, 1987
Central african republic	April 26, 1986			Signed February 04, 2003 Deposited July 27, 1986
Chad	October 09, 1986			Signed May 29, 1986 November 11, 1986
Comoros	June 01, 1986			Signed December 07, 2004 Deposited July 18, 1986
Congo	December 09, 1982			Signed November 27, 1981 deposited January 17, 1983
Ivory coast	january 06, 1992			Signed August 30, 2005 Deposited March 31, 1992
Democrati c republic of the congo	July 20, 1987			Signed July 23, 1987 Deposited July 28, 1987
Djibouti	November 11, 1991			Signed December 20, 1991 Deposited December 20, 1991
Egypt.	March 20, 1984			Signed November 16, 1981 deposited April 03, 1984
Equatorial guinea	April 07, 1986			Signed August 18, 1986 Deposited August 18, 1986
Eritrea	January 14, 1999			Deposited March 15, 1999
Eswatini	September 15, 1995			Signed December 20, 1991 Deposited October 09, 1995
Ethiopia	June 15, 1998			Deposited June 22, 1998
Gabon	February 20, 1986			Signed February 26, 1982 Deposited June 26, 1986
Gambia	June 08, 1983			Signed February 11, 1983 Deposited June 13, 1983
Ghana	january 24, 1989			Signed July 03, 2004 Deposited March 01, 1989
Guinea	February 1, 1982			Signed December 09, 1981 Deposited May 13, 1982
Guinea-bissau	December 04, 1985			Signed March 08, 2005 Deposited March 06, 1986
Kenya	January 23, 1992			Deposited February 10, 1992
Lesotho	February 10,			Signed March 07, 1984

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	1992			Deposited February 27, 1992
Liberia	August 04, 1992			Signed January 31, 1983 deposited December 29, 1982
Libya	July 19, 1986			Signed May 30, 1985 Deposited March 26, 1987
Madagascar	March 09, 1992			Deposited March 19, 1992
Malawi	November 17, 1989			Signed February 23, 1990 Deposited February 23, 1990
Mali	December 21, 1981			Signed November 13, 1981 January 22, 1982
Mauritania	june 14, 1986			Signed February 25, 1982 Deposited June 26, 1986
Mauritius	june 19, 1992			Signed February 27, 1992 Deposited July 01, 1992
Mozambique	february 22, 1989			Deposited March 07, 1990
Namibia	July 30, 1992			Deposited September 16, 1992
Niger	July 15, 1986			Signed July 09, 1986 Deposited July 21, 1986
Nigeria	June 22, 1983			Signed August 31, 1982 Deposited July 22, 1983
Rwanda	July 15, 1983			Signed November 11, 1981 Deposited July 22, 1983
Sahrawi arab democratic republic	May 02, 1986			Signed April 10, 1986 Deposited May 23, 1986
Sao tome and principe	May 23, 1986			Deposited July 28, 1986
Senegal	August 13, 1982			Signed September 23, 1981 Deposited October 25, 1982
Seychelles	April 13, 1992			April 30, 1992
Sierra leone	September 21, 1983			Signed 27, 1981 Deposited January 27, 1984
Somalia	July 31, 1985			Signed February 26, 1982 Deposited March 20, 1986
South africa				Signed July 09, 1996 Deposited July 09, 1996
South Soudan	October 23, 2013			
Soudan	February 18, 1986			Signed September 03, 1982 Deposited March 11, 1986
Tanzania	February 18, 1984			Signed May 31, 1982 Deposited March 09, 1984
Togo	November 05, 1982			Signed February 26, 1982 Deposited November 22, 1982
Tunisia	March 16, 1983			Deposited 22, 1983
Uganda	May 10, 1986			Signed August 18, 1986 Deposited May 27, 1986

Zambia	January 10, 1984			Signed January 17, 1983 Deposited February 02, 1984
Zimbabwe	May 30, 1986			Signed February 20, 1986 Deposited June 12, 1986

Source : <https://www.achpr.org/ratificationtable?id=49>Source :

An observation emerges from the table above: 11 states have not signed the Charter but ratified it, one has not deposited the instrument of ratification with the Secretary-General of the body empowered to receive them, those of Egypt, South Africa and Zambia have been accompanied by reservations.

Ratification table 2: Stage of ratification of a sample of a sub-regional treaty by african states

- African union convention for the protection and assistance of internally displaced persons in Africa (Kampala convention) adopted on 23 rd. October 2009 and entered into force on 6 December 2012:

No	COUNTRY	DATE OF SIGNATURE	DATE OF RATIFICATION/ ACCESSION	DATE DEPOSITED
1	Algeria	-	-	-
2	Angola	27/01/2012	14/05/2013	14/06/2013
3	Benin	25/03/2010	28/02/2012	28/03/2012
4	Botswana	-	-	-
5	Burkina Faso	25/07/2010	05/07/2012	09/08/2012
6	Burundi	23/10/2009	-	-
7	Cameroon	-	06/04/2015	24/05/2017
8	Central African Rep.	23/10/2009	20/12/2010	08/03/2011
9	Cape Verde	-	-	-
10	Chad	24/06/2010	11/07/2011	13/10/2011
11	Côte d'Ivoire	12/11/2009	20/12/2013	22/01/2014
12	Comoros	02/02/2010	-	-
13	Congo	23/10/2009	15/11/2014	19/12/2014
14	Djibouti	23/10/2009	15/07/2015	03/08/2015
15	Democratic Rep. of Congo	02/02/2010	-	-
16	Egypt.	-	-	-
17	Equatorial Guinea	23/10/2009	26/06/2019	29/10/2019
18	Eritrea	25/04/2012	-	-
19	Ethiopia	23/10/2009	-	-
20	Gabon	29/01/2010	26/01/2011	21/02/2011
21	Gambia	23/10/2009	27/04/2011	17/08/2011
22	Ghana	02/02/2010	-	-

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23	Guinea-Bissau	04/01/2012	23/12/2011	04/01/2012
24	Guinea	05/01/2012	-	-
25	Kenya	-	-	-
26	Libya	-	-	-
27	Lesotho	20/12/2010	19/01/2012	20/02/2012
28	Liberia	23/10/2009	23/02/2014	07/03/2017
29	Madagascar	24/06/2014	-	-
30	Mali	23/11/2009	07/11/2012	26/11/2012
31	Malawi	-	18/04/2013	29/05/2013
32	Morocco	-	-	-
33	Mozambique	23/04/2010	02/12/2019	21/01/2020
34	Mauritania	27/01/2013	05/03/2015	17/03/2015
35	Mauritius	-	-	-
36	Namibia	23/10/2009	-	-
37	Nigeria	23/10/2009	17/04/2012	22/05/2012
38	Niger	-	10/05/2012	13/06/2012
39	Rwanda	23/10/2009	27/12/2012	31/01/2013
40	South Africa	-	-	-
41	Sahrawi Arab Democratic Republic	23/10/2009	27/11/2013	27/01/2014
42	Senegal	12/07/2011	-	-
43	Seychelles	-	-	-
44	Sierra Leone	23/10/2009	15/07/2010	08/10/2010
45	Somalia	23/10/2009	26/11/2019	06/03/2020
46	South Sudan	24/01/2013	26/09/2018	21/06/2019
47	Sao Tome & Principe	01/02/2010	-	-

No	COUNTRY	DATE OF SIGNATURE	DATE OF RATIFICATION/ ACCESSION	DATE DEPOSITED
48	Sudan	-	-	-
49	Eswatini	-	05/10/2012	06/11/2012
50	Tanzania	08/12/2010	-	-
51	Togo	24/12/2009	08/07/2011	09/08/2011
52	Tunisia	15/07/2012	-	-
53	Uganda	23/10/2009	29/01/2010	04/03/2010
54	Zambia	23/10/2009	14/01/2011	24/01/2011
55	Zimbabwe	23/10/2009	22/07/2013	07/11/2013
Total countries : 55	of signature : 40	of ratification : 31	of deposit : 31	

Source : <https://www.google.com/search?client=firefox-b-d&q=african+countries+which+have+signed%2C+ratified+the+Kampala+convention>

In the light of the above, it should be noted the little interest that several states have in the convention. Some have not signed, nor ratified it. Other have not yet deposited it although they already engaged in the process of signing and ratification.

4.2: THE CONGOLESE VISION OF PROTECTION AND ASSISTANCE

A good evaluation of protection and assistance activities in a country requires an appreciation of the legislative, institutional and strategic frameworks.

4.2-1: LEGISLATIVE AND REGULATORY FRAMEWORKS

- **TEXTS**

In its concern to better prevent abuses, assist and protect populations, the Republic of Congo has adopted several legal texts and declared being an integral part of fundamental principles proclaimed and guaranteed by all relevant international, regional and sub-regional texts duly ratified relating to human rights.

Among national legal texts, it is important to cite:

- The October 15, 2015 Constitution from Congo which provides the State recognition of the importance of human life, its rights and responsibilities: « the State has the primary responsibility for respecting and protecting human life » (article 8); « every citizen is entitled to a healthy, satisfying and sustainable environment...The State ensures the protection and conservation of the environment » (article 41).
- Law N°078-1984 of 17 October 1984 on the congolese family Code;
- Law n°4-2010 of 14 June 2010 on child protection ;
- Law n°5-2011 of 25 February 2011 on the promotion and protection of indigenous peoples;
- Law N°30-2011 of June 3, 2011 to address HIV/AIDS and protect the rights of people who live with HIV/AIDS with a view to addressing discrimination and stigma faced by people living with HIV/AIDS ;
- Law N° 003/91 of April 23, 1991 on environmental protection ;
- Law N°45-75 of 15 March 1975 on the Congolese Labor Code modified by Laws N° 22-88 of 17 September 1988 and N°6-96 of 6 March 1996 in addition to prohibition of forced and compulsory labor, the Labor Code prohibits the recruitment of children under the age of 18 in armed conflict ; Forced or compulsory labor shall be punishable with a one to six-month prison term and/or a fine of 18 000 to 90 000 CFA Francs (article 257) ;
- Law N°009/92 of 22 April 1992 on the status, promotion and protection of the disabled persons which describes the actions that underpin prevention, screening and solidarity. Its provisions make a direct contribution to promoting the principle of equal opportunity through individual or collective assistance, tax deductions and allowances on certain essential products, exemptions.
Law n°009/92 enshrines, under Title II, articles 8, 9 and 10, particular measures for disabled persons. It is question to make them benefit from a medico-psychosocial, counseling, systematic extension of the regulatory age limit, participation in exams

and professional competitions, grants for training and their integration into the public service.

- Law N° 10-2003 of 6 February 2003 on the transfer of powers to local authorities ;
- Law N° 43-2021 of 19 October 2021 containing guidelines for social action;
- School law N° 25-95 of 17 November 1995 modifying school law N° 008/90 of 6 September 1990 and on the re-organization of the educational system in the Republic of Congo ;
- Law N°30-2018 of 7 August 2018 on powers, organization and operation of the National Human Rights Commission;
- The Congolese Penal Code;
- Draft law on the promotion and protection of the elderly persons ;
- Draft law addressing violences against women: contains provisions on victims, repression of authors and measures of reintegrating authors into society. These provisions concern harassment, violence in war and peace time on one hand, and violence during elections on the other hand¹⁸:
- Decree N°99-149 of August 1999, on the structure and operation of environmental protection funds ;
- Decree N°2001-249 of May 26, 2001 on the organization of rescue operations in the event of natural disasters or major accidents ;
- Decree N°2010-607 of 21 September 2010 spelling out the powers and organization of the General Directorate of Humanitarian Action ;
- Decree N°2011-429 of 25 June 2011 spelling out the powers and organization of the General Directorate of Civil Security ;
- Decree N°2001-195 of 11 April 2001 spelling out the organization and operation of the National Gendarmerie ;
- Decree N°2000-298 of 1st April 2010 on the establishment, powers and operation of the National Committee for the coordination, monitoring and evaluation of the national plan action for the Disabled persons ;
- Decree N°2009-394 of 13 October 2009 spelling out the powers of the minister of home affairs and decentralization ;
- Decree N°99-88 of 19 May 1999 spelling out the powers and organization of the Ministry of Justice ;
- Decree 2019-11 of 14 January 2019 appointing members of the advisory council for people living with disabilities ;

Ministerial Decision N°16197/MASAH/ of 12 September 2019 concerning the setting up of the National Center for the prevention and treatment of psychological trauma.

¹⁸-The Supreme Court delivered its opinion on this law which is currently on the office of the general secretariat of the Government pending to be enrolled for the cabinet and ministerial councils.

- **ANALYSIS OF TEXTS**

Analysis of laws and regulations above mentioned concerning protection and assistance to IDPs has allowed to identify relevant texts to this purpose. The following observations emerge from this examination:

The October 15, 2015 Constitution from Congo contains general principles laid down by international legal instruments providing for protection of human life and assistance to all citizens. But it does not specifically target internally displaced persons, although it obliges the national authorities to protect and assist all congolese citizens in vulnerable position.

The congolese penal code contains some provisions concerning internally displaced persons. Article 63 thereof provides for an offence of failure to provide assistance to a person in danger: IDPs are indirectly targeted. They are endangered persons and as such they need to be assisted.

Provisions of law N°009/92 of 22 April 1992 pertaining to support for the education of children, pupils and students enshrined under title II (on the status, promotion and protection of the disabled persons which describes the actions that underpin prevention, screening and solidarity) are not implemented by want of implementing texts to this day. They still remain pious intentions. The current legal framework is inappropriate for the education of the disabled persons. In addition, dysfunctions are observed in the partnership between the State and religious communities: collaboration between the two parties does not take place as agreed in the agreements signed¹⁹ Law N° 10-2003 of 6 February 2003 on the transfer of powers to local authorities raises some issues: decentralization supposed to support this transfer of duties is not total, local authorities have their hands tied, they are not elected by the population but designated by the Central government. They rule administrative districts which do not have any financial autonomy; when they have it, it appears to be limited. Look at from that angle, decentralization is only devolution or deconcentration.

Concerning the draft law addressing violences against women, the congolese Supreme Court delivered its opinion on this text which is currently on the office of the general secretariat of the government pending enrollment for the next cabinet and ministerial councils. Despite progress registered, violences against women do not seem to be abating. In 2019 nearly 7,000 cases of rape and violence have been recorded across the country in centers providing support for victims of violence²⁰.

Draft law on the promotion and protection of the elderly persons introduced before, into the adoption process in 2020, will be seriously delayed with the recent cabinet reshuffle. An important thing to deplore is that despite a clear need, there are still insufficient indicators to monitor the protection of the elderly persons over time²¹.

The congolese Labor Code does not provide such words as protection and assistance but indirectly offers a certain form of protection to all citizens in completely prohibiting forced or compulsory labor (article 4) in accordance with relevant international standards governing labor legislation. This includes the prohibition of child labor, non-discrimination in

19 - See P13 Report of the study on education of the disabled persons in the Republic of Congo Brazzaville- February 2020

20 - <https://fr.africanews.com/2019/11/27/congo-un-centre-d-ecoute-pour-femmes-victimes-de-violences/> These counseling units work very closely with the Police, Gendarmerie, healthcare facilities or hospitals and courts

21 - After a cabinet reshuffle, draft laws shall bear the name of the minister newly appointed at the head of the ministerial department before being introduced again into the adoption circuit.

employment. However, a discrimination violating the principle of equality of opportunity has been observed at the beginning of year 2021 during the recruitment campaign of workers in public administration: only 20 disabled persons²² have been recruited compared to non-disabled people. Forced or compulsory labor shall be punishable with a one to six-month prison term and/or a fine of 18000 to 90000 CFA Francs (article 257); article 116 prohibits child labor and apprenticeship for children under 16 years of age, unless otherwise derogated by the Minister of national education.

Law n°4-2010 of 14 June 2010 on child protection, the Code of criminal procedure, the new Persons and Family Code Bill submitted for advice and opinion to the Supreme Court provide for an effective and solid protection for children, teenagers and adults.

Law n°5-2011 of 25 February 2011 on the promotion and protection of indigenous peoples suffered a delay in its enforcement schedule; its implementing text was taken several years after its enactment by the President of the republic: 8 years, i.e. July 12, 2019 for the six implementing decrees to be drawn up and published²³.

As for law N°30-2011 of June 3, 2011 to address HIV/AIDS and protect the rights of people who live with HIV/AIDS with a view to addressing discrimination and stigma faced by people living with HIV/AIDS, important challenges persist notably to decrease the high rate of people affected and to address discrimination and stigma despite various awareness campaigns undertaken by national authorities and various NGOs active in human rights over the last five years

Some of decrees above mentioned require to be revamped or updated, for they do not contribute optimally to the objectives for which they were drawn upon; they demonstrate their weaknesses. Others show particular attention that authorities pay to vulnerable people.

To rectify the deficiencies noticed, and help the National authorities to plug the legal vacuum that currently exists, the national representation of the United Nations High Commissioner for Refugees technically supported and accompanied the Republic of Congo, in preparing a draft law on the protection and assistance to IDPs introduced in the process of being adopted and promulgated into law. This strong system of legislation established aims at strengthening on one hand prevention, protection and assistance to Internally Displaced Persons (IDPs) and on the other hand, enhancing the sentencing system to perpetrators of atrocities against IDPs before, during and after security crisis and natural disasters;

Title I of the said law reports on the prevention of arbitrary displacements under its articles 6 and 7. Articles 12,13, 14, 15 up to 21 of Chapter I (Title III) relating to rights and duties

22 - Source: our survey.

23 - These implementing decrees are :

- Decree N°2019-199 of 12 July 2019 on special measures for granting civil-status documents to indigenous peoples
- Decree N°2019-200 of 12 July 2019 determining modalities for protecting cultural property, sacred and spiritual sites of indigenous peoples
- Decree N°2019-201 of 12 July 2019 setting the procedures for consultation and participation of indigenous peoples in socio-economic development projects and programs
- Decree N°2019 – 202 of July 2019 specifying special measures aimed at facilitating indigenous people's access to basic health and social services and at protecting their pharmacopoeia.
- Decree N° 2019-203 of July 2019 setting the composition and operating procedures of the monitoring and evaluation interministerial committee for the promotion and protection of indigenous people's rights.
- Decree N° 2019-204 of July 2019 on special measures facilitating indigenous children education and adults literacy.

of IDPs reflect international, regional and sub-regional pledges made by the Republic of Congo as regard protection and assistance to IDPs. Article 12 reads that « Internally displaced persons have the right to protection and humanitarian assistance »

Article 13: « Internally displaced persons have the right to live in human dignity. As such, they have notably, the right to:

- recognition of their legal personality in any place ;
- security of their person and property ;
- freedom of movement, residence and worship ;
- health ;
- water, nutrition and sanitation;
- education;
- basic shelter and decent housing ;
- employment, economic activities and social protection ;
- enjoyment of civil and political rights.

Article 14: « Wounded and sick internally displaced persons and those with disabilities shall receive without distinction, within the least possible delay, the medical care and attention they require. Where necessary, they shall have access to psychological and social services.

Article 15 : « Internally displaced persons have the right to claim from the national authorities concerned to issue to them any administrative and identity documents lost or destroyed such as passports, birth and marriage certificates, occupancy permit and land titles.»

Article 16: « in case of displacements justified by large-scale development projects, internally displaced persons have the right to resettlement, notably the right to benefit from lands or accommodation of equal or comparable quality.

Article 17: « the property and possessions left by internally displaced persons when living their houses or residence are protected shall be protected against illegal and arbitrary appropriation, occupation or use, pillage, direct or blind attacks, use to shield military operations or objectives, use as the object of reprisal or appropriation as a form of collective punishment and other acts of violence.

Article 18: « where the displacement situation ceases, internally displaced persons shall have the right to recover all their houses and or lands and possessions of which they would have been illegally or arbitrarily deprived.»

Article 19: « the enjoyment of the following rights by internally displaced persons, whether or not are living in camps, shall not be discriminated against :

- the right to freedom of thought, conscience, religion or belief, opinion and expression ;
- the right to seek freely employment and to participate in economic activities ;
- the right to associate freely and participate in community affairs on equal footing ;

- the right to vote and to participate in governmental and public affairs, including the right to have access to the means necessary to exercise this right ;
- the right to communicate in a language they understand. »

Article 20: « the national authorities concerned shall ensure that internally displaced persons, in particular displaced children, receive basic education that is free and compulsory in the Republic of Congo Brazzaville. »

Unfortunately, because of the latest cabinet reshuffle in Congo Brazzaville, the draft law has been withdrawn from the adoption circuit pending the amendment of the visas and the name of the new signatory²⁴.

This national legislative and regulatory framework is extended to many other international, regional and sub-regional instruments that entered in the congolese domestic juridical architecture. These International provisions carry more and more weight in the legal ordering of education, security, disasters, health, rights and freedoms and other areas. Apart from that, the Republic of Congo also acceded some rules and declarations or statements that bind it in its way of caring for vulnerable people. It is advisable to cite, inter alia, the following :

- the declaration on the rights of disabled persons of 9 December 1975 ;
- resolution on the equalization of opportunities for people with disabilities²⁵ ;
- the declaration on the rights of mentally retarded persons of 20 December 1971 ;
- the united nations convention on the rights of the child drawn up by the un on 1989 ;
- convention on the elimination of all forms of discrimination against women (CEDAW)²⁶ ;
- the world programme of action concerning disabled persons ;
- the Salamanca statement and framework for action on special needs education of June 1994 ;
- treaty for the establishment of the African rehabilitation institute (1985)²⁷ ;

The tables below reveals how the republic of Congo Brazzaville attaches or not a great importance to the subject and where it has gone in ratifying and participating in these international, regional and sub-regional texts.

Table 1: Stage of ratification of a sample of international legal instruments

N°	International instruments	Date of signature	Date of ratification/ accession	Date deposited
1	International covenant on economic, social and cultural rights	NA	5 October 1983	NA
2	Optional protocol to the international covenant on	25 Sept 2009	NA	NA

24 - We deplore the non-association of IDPs with the drafting of that draft law while international standards recommend to do so.

25-That equalization seems to be a simple illusion as illustrated by recruitment campaigns of workers in public and private administrations.

26- Women are still under-represented in higher positions.

27- Because of lack of funding, the Institute can't work.

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	Economic, Social and Cultural Rights			
3	Convention on the elimination of all forms of discrimination against women	29 July 1980	26 July 1982	NA
4	Optional protocol to the convention on the Elimination of all forms of Discrimination against women	29 Sep 2008	NA	NA
5	International convention on the Elimination of all forms racial discrimination	NA	11 July 1988	NA
6	International covenant on civil and political rights	NA	5 October 1983	NA
7	Optional protocol to the international covenant on civil and political rights	NA	5 October 1983	NA
8	Second optional protocol to the International covenant on civil and political rights, aiming at the abolition of the death penalty	NA	NA	NA
9	Convention against torture and other cruel, inhuman or degrading treatment or punishment	NA	30 July 2003	
10	Optional protocol to the convention against torture and other cruel, inhuman or degrading treatment or punishment	29 Sept 2008	NA	NA
11	Convention on the rights of persons with disabilities	30 March 2007	2 Sept 2014	NA
12	Optional protocol to the convention on the rights of persons with disabilities	30 March 2007	2 Sept 2014	NA
13	Convention on the rights of the child on the sale of children, child prostitution and child pornography	N/A	6 May 2006	N/A
14	Optional protocol on the sale of children, child prostitution and child pornography	N/A	27 October 2009	N/A
15	Optional protocol on the involvement of children in armed conflict	N/A	31 May 2006	N/A
16	Convention on the rights of the child		14 October 1993	
17	International convention for the protection of all persons against enforced	06 Feb 2007	N/A	N/A

	disappearances			
18	Hague convention on intercountry adoption		14 Feb 2014	19 Dec 2020
19	Treaty on the prohibition of nuclear weapons	20 Septembre 2017		

Source :- <https://indicators.ohchr.org/https://www.ohchr.org/FR/Countries/AfricaRegion/Pages/CGIndex.aspx>
https://tbinternet.ohchr.org/_layouts/15/TreatyBodyExternal/Treaty.aspx?CountryID=39&Lang=FR;

Table 2: Stage of ratification of a sample of regional and sub-regional legal instruments

N°	Regional and sub-regional instruments	Date of signature	Date of ratification/accession	Date deposited
1	African charter on human and people's rights	27 November 1981	9 December 1982	17 January 1983
2	Agreement for the establishment of the african rehabilitation institute	8 April 1986	22 February 1992	30 April 1992
3	Convention on the rights of persons with disabilities	2007	2014	N/A
3	AU Protocol on the right of persons with disabilities	N/A	2021	N/A
4	African charter on the rights and welfare of the child	28 February 1992	8 September 2006	10 October 2006
5	Protocol to the african charter on human and people's rights on the rights of women in Africa	27 February 2004	14 December 2011	06 Août 2012
6	African charter on democracy, elections and governance	18 June 2007	N/A	N/A
7	African union convention for the protection and assistance of internally displaced persons	23 October 2009	15 November 2014	19 December 2014
8	Pact on security, stability and development in the Great Lakes region	N/A	June 2008	N/A

From the above tables, it can be seen that much still remains to be done by the National authorities of the Republic of Congo as part of the signature, ratification/accession and deposit of international legal instruments setting out human rights protection. However, efforts made to date deserve to be encouraged and the country would gain more if it brought into the national legal ordering all international documents already signed.

4.2.2: INSTITUTIONAL FRAMEWORK

- **INSTITUTIONS :**

The implementation of humanitarian action in time of conflicts, generalized situations of human rights violation, large-scale development projects and disasters in the the Republic of Congo Brazzaville, rests with:

- **1- The ministry of social affairs and humanitarian action.** This work is precisely done by the Directorate General of Humanitarian Action which is the technical body assisting the Minister in exercising his ministerial powers, in humanitarian action. It is, in particular, in charge of :
 - developing and implementing the nation's policy in the field of humanitarian action ;
 - developing, implementing, monitoring and evaluate global and specific strategies for humanitarian action ;
 - promoting individual and community initiatives in humanitarian action ;
 - promoting the principles of humanitarian law ;
 - contributing to the protection and assistance of refugees and internally displaced persons ;
 - promoting and popularizing humanitarian action regulations and ensuring their correct implementation.

In addition to the Directorate secretariat, the Directorate General includes:

- the directorate for the promotion of humanitarian law and conventions ;
- the directorate for disaster prevention and risk reduction ;
- the directorate for humanitarian assistance ;
- the administrative and financial directorate ;
- departmental directorates.

At the departmental level, the work of the Directorate General of Humanitarian Action is done by its local authorities or local relays notably departmental directorate of humanitarian action supported by departmental directorate of social affairs and its social action units present in every district throughout the country.

The institutional response in the establishment of the primary care systems to make it easier to detect, early treat and care psychosocial, emotional and mental problems of individuals at any given time features efforts made by the State and other social actors involved in the problematic. In a Ministerial Decision N°16197/MASAH/ of 12 September 2019, the Government of the Republic of Congo set up the National Center for the prevention and treatment of psychological trauma whose purpose is to contribute to improving the mental health of the population through psychological and socio-educational support. This center is responsible for, inter alia, participating in preventing trauma, ensuring psychological support for vulnerable persons, ensuring extension and technical follow-up of psychosocial counseling units and orientation in school areas, for participating in caring for disaster victims and participating in action-research on psychological trauma.

Despite the action of the various existing institutional actors, social protection for the elderly does not have the characteristics of a coherent and integrated system. Charitable

communities and the State are not the only institutions sensitive to ageing issues. Communities and families always care, as well as they can for their elderly persons. Solidarity should be more active in families.

With the enactment of Law n°009/92 of 22 April 1992 aforementioned, the care of people with disability is entrusted with the Ministry of social Affairs through its Directorate General for disabled people. In the course of the same year, was born the National Union of Associations of Disabled People (NUADP)²⁸ which set as objectives: (i) to defend rights and interests of congolese disabled people; (ii) contribute to the establishment and development of specialized structures for disabled people; (iii) encourage public authorities to create and apply legislation relating to the protection, training and employment of handicapped persons.

With the promotion of the freedom of association and the entrepreneurial freedom (the freedom to choose a profession, the right of free enterprise, freedom to undertake economic activity, we are witnessing the proliferation of specialized institutions for disabled people.

Other actors involved in protection and assistance include the Ministries of Justice, Home Affairs and Decentralization, Environment, Labor and Social security, Health, Promotion of Women and Integration of Women into Development, the Human Rights National Committee, the National Committee for the Coordination, Monitoring and Evaluation of the National Plan Action for the Disabled, the Advisory Council for people living with Disabilities, the Police, the National Gendarmerie, the Humanitarian Mechanism.

2- The Ministry of Justice and Human Rights and promotion of indigenous people

The Ministry of justice is the body responsible for designing and carrying out the government's policy in the areas of justice, promotion and protection of human's rights and prison administration. To do so, it has several technical bodies including the Directorate General of Human Rights and Fundamental Freedoms (DGHRFF) and the Directorate General for the Promotion of Indigenous People (DGPIP). The former carries out human's rights monitoring, popularizes them, ensures a good enforcement by the country of international instruments of human rights and delivers a report of the situation every year. It assumes this legal monitoring role in the twelve departments of the country where it has its branches. The latter does the same work but specially as regard indigenous peoples²⁹.

Many other actors of the judiciary system play a meaningful role in the protection of the population. These are tribunals and courts: Instance tribunals, great instance courts, courts of appeal and Supreme Court. They are involved in the protection of victims' human rights and legal proceedings against perpetrators of offences.

28-The NUADP is governed by the registration n°120/92 of September 1992.

29-Unfortunately, for want of funding the two bodies contribute to the improvement of human rights only during world days: international day of human rights and international day of solidarity towards indigenous people. Another aspect is that Indigenous people are not really involved in the development of programmes.

3- The Ministry of Home Affairs and Decentralization

The Ministry of Home Affairs is the body responsible for designing and executing the national policy in the areas of security, Territorial Administration and decentralization. As such, it is, inter alia, tasked with:

- ensuring effective compliance with the applicable legislation and implementation of security policies ;
- ensuring the safety of people and property as well as the state territory protection ;
- ensuring state security ;
- protecting the population from risks, disasters or plagues of all kind and from the consequences of a possible conflict ;
- ensuring security, public tranquility and health ;
- initiating and implementing measures relating to the promotion and protection of fundamental rights and freedoms³⁰.

In performing its duties, the Minister is assisted by several bodies which are, among others, the national policy through the Directorate General of the Police, the Directorate General of Civil Security. The mandates of the former meet those afore-mentioned concerning the parent ministry. As for the latter, it assists the Minister in the exercise of his powers in the area of civil security. As a technical body, it is responsible for :

- developing and enforcing disaster prevention regulation ;
- studying and preparing the necessary conditions for fire prevention ;
- protecting persons, property and the environment from accidents, claims and disasters ;
- ensuring in war time tasks of civil defense ;
- participating in disaster management ;
- promoting and popularizing the rescue organization plan or organization of assistance ;
- developing the training program for civil security personnel, firms and institutions subject to the regulatory process.

In addition to the Management secretariat, the Directorate General comprises a directorate of prevention and regulation, a directorate of civil defense, a directorate of studies and rescue organization, a directorate of civil and financial affairs and departmental directorates.

The Ministry is represented at the local level by departments prefects, districts sub-prefects, mayors of municipalities and districts, neighboring chiefs, chiefs of blocks.

4- The Ministry of Environment is in charge of natural resource management and conservation on one hand, and environment protection on the other one. Its field of intervention includes: adaptation to climate change, floodings, drought, heat waves and degradation of ecosystems, deforestation and land degradation.

30-Decree n°2009-394 of October 2009 on task allocation of the Ministry of Home Affairs and Decentralization.

5- The Ministry of Labor and Social Security

This department is responsible for designing and carrying out the national policy in the areas of labor and social security. It comprises bodies such as Directorate General of Labor (DGL) which helps implementing the labor policy according to the national legislation and commitments made on the international scene.

The DGL has four country directorates which are, among others, the Directorate of Labor Regulations and International Relations (DLRIR) and the Occupational Health and Security Department. At the local level, the work of the security department is carried out in twelve counties.

6- The Ministry of Health

The Health ministry³¹ is the institution responsible for designing and carrying out the government policy in the health sector. The Directorate General of Health is the technical body which assists the Minister in performing his mandate. As such, it is tasked with :

- developing and implementing healthcare projects and programmes in compliance with the health development policy defined by the government ;
- defining strategic directions in terms of reproductive, adolescent and elderly health ;
- designing, planning and coordinating and assessing the implementation of programmes relating to : the mother's health ; child's health ; couple's health ; family planning ;
- participating in the development of reproductive standards and procedures and ensure that they are implemented ;
- participating into operational research and training in reproductive health ;
- defining national nutritional norms and standards ;
- providing advisory support for the development of activities in the health service and at community level;
- participating in developing food and nutrition programmes ;
- participating in nutrition training and research.

For institutional capacity building and better coordination of the fight against malnutrition, the Government through the ministry of health has joined the international Scaling Up Nutrition (SUN) Movement, elaborated the national protocol for the care management of severe acute malnutrition implemented in therapeutic care centers.

In this institutional response, other actors assist the Health Ministry in its tasks such as integrated health centers and public hospitals which provide preventive and curative care in terms of fight against malnutrition (awareness-raising programs and education for mothers, iron, Supplementation, folic acid, vitamin A and other nutrients, systematic deworming, screening and management of malnourished children ...).

The supplementation of vitamin A has been integrated in the Expanded Program on Immunization (EPI) activities.

31 - Decree n°2009-402 of October 2009 spelling out the powers of the Minister of Health and population.

7- The Ministry for the Promotion of Women and the Integration of Women into Development

It is responsible, inter alia, for³² :

- setting up a legislative and regulatory framework for women's advancement and integration in development ;
- providing funding support for activities relating to women's advancement ;
- ensuring monitoring, evaluation of women's advancement projects and programs ;
- promoting and consolidating cooperation with NGOs, national and international research institutions ;
- ensuring that the woman component is taken into account in other ministerial departments programs ;
- popularizing conventions, treaties and international agreements on women's rights.

8- The National Human Rights Commission

In the area of human rights, the NHRC is responsible for the following missions:

- provide in a consultative capacity, to the government, parliament or any competent body, either at the request of the authorities concerned or using its power to act on its own motion, advice, recommendations, proposals or reports regarding any human rights issues ;
- examine legislation and administrative texts in force and makes recommendations it deems necessary or appropriate with a view to guaranteeing compliance of these texts with fundamental principles of human rights ;
- develop and publish any reports on relevant issues related to human rights with a view to identifying obstacles which impede the enjoyment of human rights and making proposals to remove them ;
- contribute to the preparation of reports and documents that the republic of Congo, in accordance with its conventional human rights obligations, is bound to present before international, regional control bodies ;
- recommend, where appropriate, the revision of domestic laws and their compliance with international instruments related to human rights ratified by the republic of Congo and promote the ratification of new international legal instruments in this area ;
- push forward investigations either directly or on individual or collective requests by citizens based on violations of human rights and fundamental freedoms when no court is seized.

9- Advisory Council for people living with disabilities:

Organic law n°26-2018 of 7 August 2018 determines the organization, composition and operation of the advisory council for people living with disabilities. Under its first article, the

³²-Decree n°2005-179 of 10 March 2005 spelling out the powers of the Minister of women's empowerment and the integration of women into development (MWIWD).

Council is responsible for delivering opinions on the condition of the person living with disabilities and making suggestions to the Government aimed at their better care.

It has not yet held its inaugural session but since 2020 it works through its permanent secretariat which carries out its activities regularly.

It is important to underline that the republic of Congo is also accompanied in protecting and assisting IDPs and the entire population by financial and technical partners, NGOs, associations as illustrated by tables below:

Financial partners and their area for action (targets)

Poorest Families	Vulnerable women	Indigenous people	Orphans and vulnerable children	Disabled	Elderly persons	Jobless	Disaster affected and displaced people
UNFPA							
UNHCR							
UNICEF							
WHO							
WFP							
FAO							
World Bank							
AFD							
Chines Coopération							
American Coopération							
Italian Coopération							
European Union							

International NGOs and their area for action (targets)

Poorest Families	Vulnerables women	Indigenous people	Orphans and vulnerable children	Disabled	Elderly persons	Jobless	Disaster affected and displaced people
Fondation sur un pied d'égalité (Pays-Bas)							
Handicap International							
Orthophoniste du Monde							

To These tables should be added NGOs such as CARITAS, ICRC, AARREC, Médecins d'Afrique, CEMIR, ACTED.

- **ANALYSIS OF THE INSTITUTIONS**

It appears from an in-depth analysis of data above that, the public and private offer in support structures remains insufficient and spatially unbalanced. This is manifested by the over-representation of urban agglomerations particularly Brazzaville that is the only locality which offers a technical platform covering the vast majority of disabilities (motor, aural or hearing, visual and mental) for, it hosts the two orthopaedic-fitting centers of the country. Functional rehabilitation centers are the single types of decentralized structures. Unfortunately, because of armed conflicts arising in the country, most public centers are no longer operational.

This institutional framework has shortfalls and loopholes. At the structural level, significant problems encountered in disaster management revealed the need for revitalizing the structure responsible for the humanitarian action.

At the logistic plan, disaster management, both at the level of the center and local communities, requires the mobilization of a permanent and adapted logistic. The department shows serious weaknesses due to the lack of the appropriate warehousing structure, means of transport and marine equipment...

At the level of training, serious difficulties have been reported. Humanitarian actors need to be trained both at the center and in departments.

The Directorate General of Civil Security shows any weaknesses, inadequacies and disparities at the organizational level. Its operation does not take into account the multisectoral cooperation between different actors, just as the decree establishing it, does not provide for its accountability as integrated military command structure in conducting, supporting and coordinating rescue operations during a crisis or natural disasters. Therefore, the Directorate should be restructured and should not be maintained as it stands currently.³³

It follows from the foregoing, that there still exists : a lack of clarity on the institutional distribution of responsibilities (duplication of roles and responsibilities) as evidenced by the document of the State welfare policy³⁴ ; a lack of integrated inter-institutional coordination structure for humanitarian action ; a heavy dependence on financial partners for humanitarian action funding ; a lack of national center in charge of monitoring, analyzing and mapping risks and disasters and coordinating emergency responses, equipped with an operation room, information and communications systems. Generally speaking, problems and needs identified and weaknesses observed in terms of institutional response are all constraints to overcome which can be summed up as follows³⁵ : low budgetary allocations compromising the functioning of structures, insufficient and low-quality technical staff for want of training and retraining policy, random financing of public and

33-See P9 Reflection of the interministerial technical committee following the disaster of 4 March 2012, Mpila.

34-See P20 National Policy for Social Action (NSPA).

35-P10-16 Report of the study on education of the disabled people in the Republic of Congo.

private structures, lack of monitoring and evaluation mechanism, high cost of equipment, difficulty in functioning of OPD (associations working in favor of the disabled).

10- The Humanitarian Mechanism

The weaknesses of institutional, human, logistic and financial capacities to manage disaster risks and provide protection and assistance to forcibly displaced persons and stateless people as well as taking into account host communities over the last decade, led the Government to draw lessons in equipping itself with a Humanitarian Mechanism

This institutional and operational framework is a hierarchy of interconnected and interdependent levels of decision-making and actions on one hand, and between ministries, departments and local authorities involved in humanitarian action before, during and after a humanitarian situation, on the other hand.

The Humanitarian Mechanism is also a response to the Government's request made by the Minister of Social Affairs and Humanitarian Action to the UNHCR during the mission in Brazzaville, in February 2017, of the High Commissioner in charge of international protection, for a technical support and capacity building for executives of ministerial departments in the area of international refugee law and humanitarian response.³⁶

As a fruit of a joint collaborative endeavor of the Republic of Congo and the UNHCHR, the Humanitarian Mechanism aims at improving:

- management of IDPs, refugees and host populations ;
- monitoring, analysis and risk mapping of humanitarian disasters
- disaster risk reduction and prevention ;
- information sharing and resource management ;
- coordination within government and between government and national and international partners including development partners ;
- development of contingency plans ;
- preparedness and response to humanitarian emergencies ;
- mobilizing and deploying resources before, during and after a humanitarian situation ;
- individual, systemic and institutional capacity building ;
- taking into account and integrating the gender dimension in planning, the deployment of humanitarian missions and operations ;
- mainstreaming interventions targeting gender based violence into humanitarian action ;
- search for and implementation of durable solutions ;
- individual, systemic and institutional resilience ;
- transition between humanitarian response and sustainable development.

Its conceptual framework is based on the following reference documents:

36-Memorandum of understanding by and between the UNHCR and the Government of the Republic of Congo, 21November 2017.

- the national strategy for disaster risk reduction and prevention (NSDRRP) validated on 19 September 2016 and its action plan 2017-2018 ;
- memorandum of understanding by and between UNHCR and the government of the republic of Congo validated on 30 August 2017, then signed on 21 November 2017 on capacity building in protection, assistance to refugees and internally displaced persons ;
- action plan for implementing the memorandum of understanding and humanitarian mechanism validated on 18 December 2017.

The Mechanism is furthermore, inspired by relevant declarations made by senior officials of the United Nations and African Union on prevention of armed conflicts and other situations of violence (Moussa Faki Mahamat, KOFFI ANAN, Ban KI-MOON), disasters caused by natural hazards and the impacts of climate change, and finally on sustainable development and UNHCR strategic orientations 2017-2031, and on the place of the African continent on the world stage. To that should be added the congolese doctrine of civil and civil defense.

The Mechanism is designed to ensure successful coherence and continuation of effort made in this regard, at the level of regional government, public administration and security forces in conformity with relevant provisions of the Constitution of 6 November 2015, regulatory texts, laws and provisions in force notably law N°10-2003 of 6 February 2003 on transfer of powers to local authorities, National Policy for Social Action (NPSA) and its action plan, law containing general guidings on social action. It contains definitions of terms and standard operating procedures aiming at managing risks and disasters. Disaster risk prevention, disaster risk reduction, preparedness and response to emergency situations and assistance to internally displaced persons, refugees and stateless people remains the principal goal of the Humanitarian Mechanism.

The understanding of the Mechanism should be based on the definition of three main notions which constitute its floor notably sustainable development, social action and humanitarian action.

According to these definitions :

- sustainable development is a development that meets the needs of the present without compromising the ability of future generations to meet their own needs;
- social action is all the means by which a society acts on itself to protect its cohesion by regulatory or legislative provisions and by actions aiming to assist persons or the most fragile groups to better live, to acquire or preserve their autonomy and to adapt to the surrounding social environment;
- humanitarian action is the solidarity response to poor populations or those affected by crisis and are unable to meet their basic needs or for emancipations. It aims at helping without discrimination and peacefully the most vulnerable members of the society. It is expressed in two contexts: that of emergency and development. It is a logical vector of development.

Humanitarian Mechanism's frameworks for action

The Congo's Humanitarian Mechanism derives from two categories of frameworks for action namely: international frameworks for action and national frameworks for action³⁷.

International frameworks for action are:

- Sendai framework for disaster risk reduction 2015-2030 outlines four priorities for action adopted at Sendai, Japan, on March 18, 2015, by the third UN World Conference on Disaster Risk Reduction towards Sustainable Development ;
- the seventieth session of the United Nations General Assembly adopted the 5 core responsibilities resulting from the global commitment to protect humanity in the face of new humanitarian challenges adopted during the World Summit held in Istanbul, Turkey, in 2016 concretely responsibilities to improve aid delivery, uphold international law, increase financing and prevent the crises generating the largest migration flows in 70 years;
- the New York Declaration of 19 September 2016 on Refugees and Migrants

As for the national frameworks for action, they include the national constitutional framework and the national framework for action. The former are based on article 201 of the Congolese Constitution of 15 October 2015, whereas the latter is founded on the National Policy of Social Action (NPSA) articulated around three programs, which are social action, humanitarian action and capacity building.

Institutional and operational frameworks of the Humanitarian Mechanism

The institutional and operational framework is the one drawn by the vision born to the highest level by the President of the Republic in his different plans to restructure the Congolese society « *The path to the future* », « *The walk towards Development, Let's Go Further Together (2016-2021)* » and « *Together, Let's Continue the Walk Towards Development (2021-2026)* »; and also by the humanitarian vision of the former Government of the Republic, contained in the Agenda for Action (2017-2030), presented before the National Assembly by the former Prime Minister, Head of Government in 2017 and transformed into twelve battles in his general policy speech by the new Prime Minister on Monday 21 June 2021 before Members of the lower house of Parliament.

« The implementation of the Memorandum of Understanding with the UNHCR and its Mechanism from the 1st of January 2018 will be a long trip of 13 years up to 2030. The Government of the Republic is committed to undertaking that task for the Congolese people. We have a serious and noble humanitarian mission that we should carry out for Congolese citizens of today and future generations. It is our task dedicated in first words of the constitution of the Republic of Congo of 15 October 2015: « The Congolese People ». We are accountable to our children and little children. We should not fail³⁸.

The humanitarian mechanism is sub-divided into high levels of decision-making and actions which are: the national strategic level, the national technical level, the national operational level, the departmental strategic level, the departmental operational level, the

37-See Report on the workshop on the ownership of the Republic of Congo's Humanitarian Mechanism, September 2018.

38- Clément MOUAMBA, former Prime Minister, Head of Government in his General Policy Speech delivered before the National Assembly on Thursday 16 November 2017.

departmental technical level, the technical municipal level, and the operational municipal level.

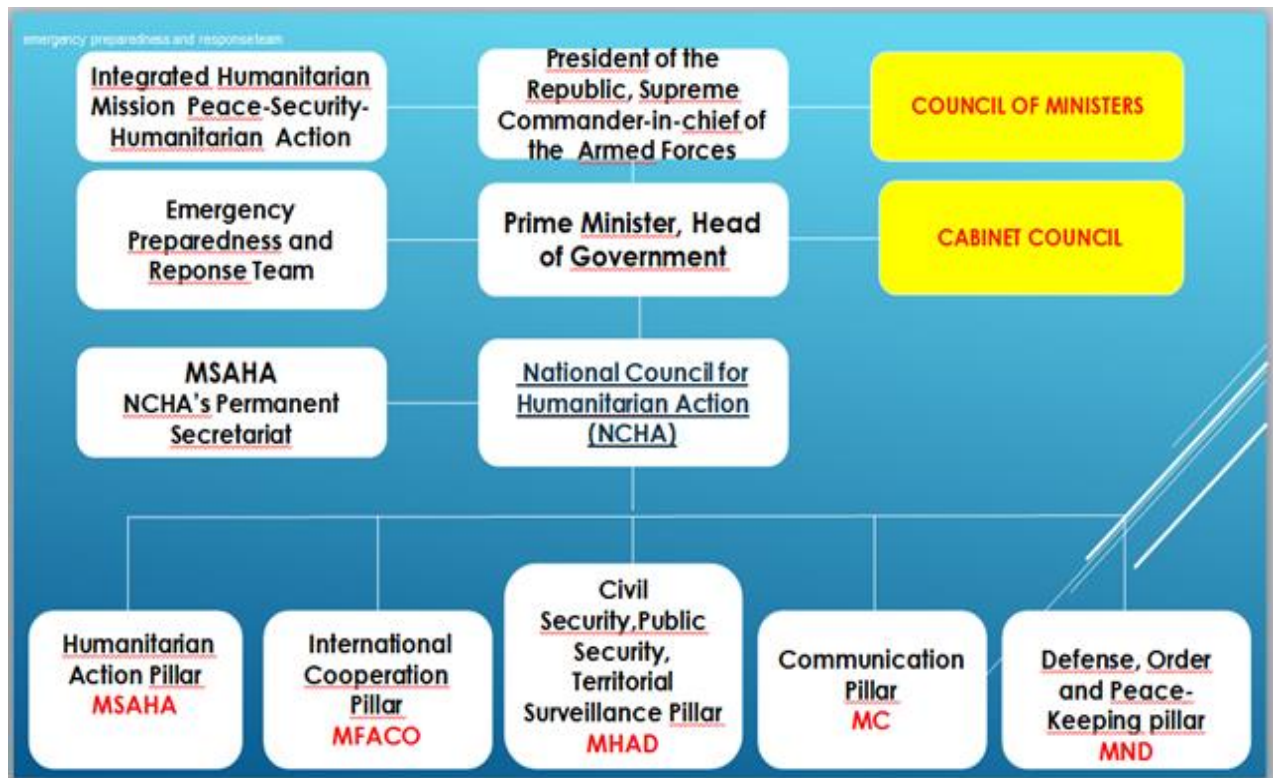
Within the meaning of the Humanitarian Mechanism, the strategic level is that of decision making and direction at political level. It is called National Council for Humanitarian Action (NCHA). It is the strategic coordination of humanitarian action at the national which includes coordination of Disaster Risk Management (DRM) ; Coordination of Assistance to Internally Displaced Persons, refugees and stateless people ; Coordination with the United Nations System, development partners, financial institutions such as the African Development Bank (ADB) and world Bank ; Cooperation at the sub-regional (economic and monetary community of central africa), regional (economic community of central african states) and african continent levels (A.U) ; Coordination of integrated missions for order and peacekeeping, civil security, humanitarian assistance ; Coordination of the missions of the National refugees, IDPs and stateless assistance Committee and of the Emergency Preparedness and Response Team.

The National Council for Humanitarian Action is placed under the authority of the Prime Minister, Head of Government. It is comprised of ministers directly and indirectly involved in the humanitarian action. It is represented at the departmental level by the Departmental Council for Humanitarian Action.

The National Council for Humanitarian Action (NCHA) includes a permanent secretariat and five strategic pillars which are under the responsibility of key ministries directly and indirectly involved in the humanitarian action. These pillars are :

- civil and public security pillar- the minister of the interior ;
- peace-keeping and defense pillar- the minister of national defense ;
- communication pillar- the minister responsible for communication ;
- humanitarian action pillar (disaster risk management, assistance to refugees, internally displaced persons and stateless people- the minister responsible for humanitarian action ;
- international cooperation pillar- minister of foreign affairs and congolese from oversea the ministry of humanitarian action acts as the permanent secretariat to the national council for humanitarian action (NCHA).

Figure 1: National Strategic Level



The National Technical level, called National Technical Committee for Humanitarian Action, is the level of control where the feasibility and implementation of orientations given are analysed and studied ; in another word, it is the technical and sectoral coordination which includes at a national level Disaster Risk Reduction (DRR) as well as assistance to refugees, internally displaced persons and stateless persons. It is comprised of key ministries directly concerned, with the technical support of Directorates General concerned and the National Gendarmerie commander. It is represented at the county level by the Departmental Technical Committee for Humanitarian Action (DTCHA).

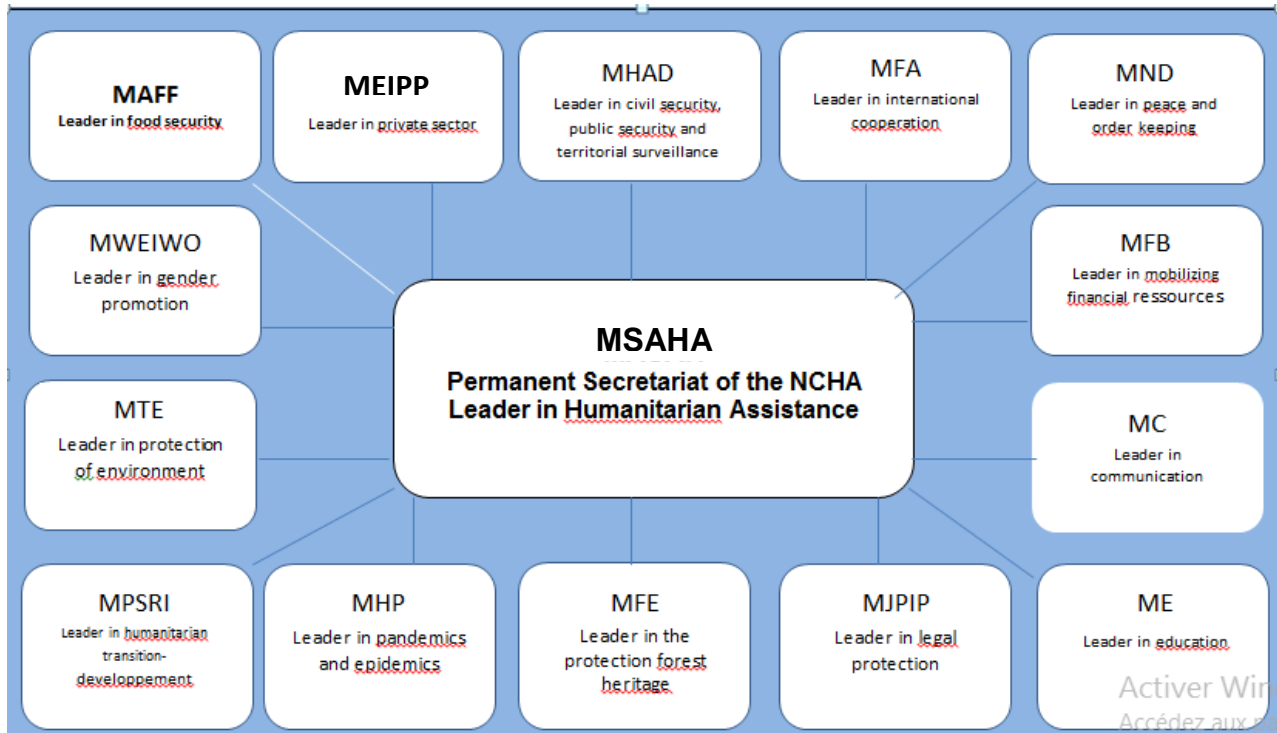
The National Technical Committee includes thirteen (13) leaders who are responsible for operational sectors. These are:

- Leader in Food Security- The Minister of Agriculture ;
- Leader in private sector- The Minister of Economy ;
- Leader in civil protection –The Minister of Interior ;
- Leader in international cooperation- The Minister of Foreign Affairs and Congolese from Overseas ;
- Leader in stability and peace-keeping- The Minister of National Defense ;
- Leader in mobilization of financial resources- The Minister of Finance ;
- Leader in communication- The Minister responsible for communication ;
- Leader in judicial protection- The Minister of Justice ;
- Leader in Environmental Protection- The Minister of Environment ;
- Leader in Pandemics and Epidemics- The Minister of Health ;
- Leader in Humanitarian Transition- Development- The Minister of Planning ;

- Leader in Humanitarian Assistance- The Minister responsible for Humanitarian Action ;
- Leader in Promotion of Gender perspective- The Minister responsible for the Women’s empowerment.

The Directorate General for Humanitarian Action (DGHA) of the Ministry of Social Affairs and Humanitarian Action (MSAHA) serves as a secretariat for the National Technical Committee for Humanitarian Action (NTCHA).

Figure 2 : National technical level



- MAFF : Minister of Agriculture and Fisheries; leader in food security ;
- MWEIWD: Minister of Women Empowerment and Integration of Women into Development, leader in gender promotion;
- MTE : Minister of Tourism and Environment leader in protection of environment ;
- MPSRI: Minister of Planning, Statistics and Regional Integration, leader in humanitarian transition-development;
- MHP : Minister of Health and Population, leader in pandemics and epidemics;
- MFE : Minister of Forest Economy, leader in the protection of forest heritage;
- MJPIP: Minister of Justice and Promotion of Indigenous People, leader in legal protection;
- ME : Minister of Education, leader in education;
- MC: Minister of Communication, leader in communication;
- MFB : Minister of Finance and Budget, leader in mobilizing financial resources;
- MND: Minister of National Defense, leader in peace and order keeping;
- MFA: Minister of Foreign Affairs, leader in international cooperation;

- MHAD: Minister of Home Affairs and Decentralization Leader in civil security, public security and territorial surveillance;
- MPIPP: Minister in charge of private sector, leader in private sector.

Finally, the National Operational level is that of implementation. These three levels are at national and departmental levels. At the municipal level, only two technical and operational level exist.

This level includes three main operational structures, namely:

- Directorates General of key ministries and lead ministries ;
- The National Refugees, IDPs and Stateless Assistance Committee (NRISAC) ;
- The Emergency Preparedness and Response Team (EPRT)

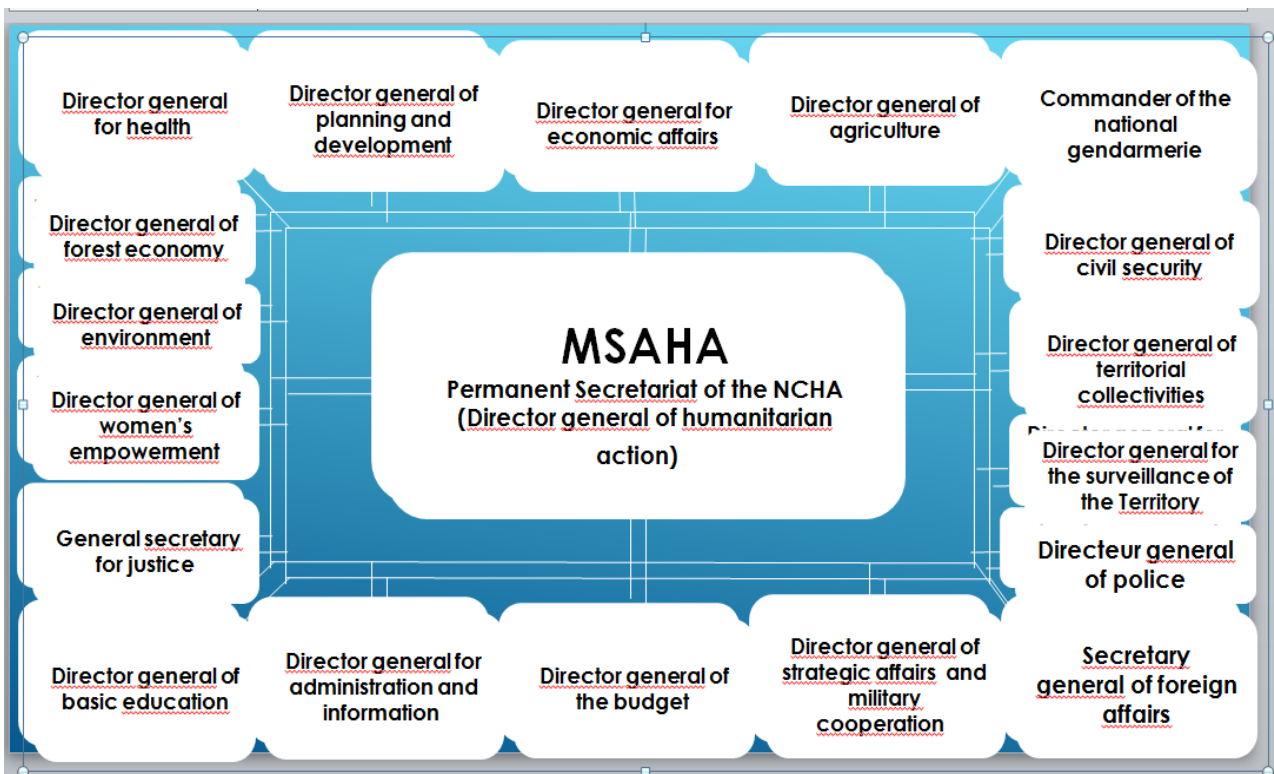
Directorates General of key ministries and lead Directorates are:

- Director General of Agriculture ;
- Director General for Economic Affairs ;
- Director General of Police ;
- Commander of the National Gendarmerie ;
- Director General of Civil Security ;
- Director General of Public Security ;
- Director General of local authority bodies (or Local Government) ;
- Secretary General of Foreign Affairs ;
- Director General of Strategic Affairs and Military Cooperation ;
- Director General of Finance and Budget ;
- Director General of Communication ;
- Director General of Justice ;
- Director General of the Environment ;
- Director General for Health ;
- Director General of Planning ;
- Director General for Humanitarian Action ;
- Director General for Women's Empowerment.

The NRISAC and EPRT shall be represented at the departmental level.

Figure 3: National operational level

Departmental operational level:



The departmental operational level includes two bodies notably:

- the Departmental Council for Humanitarian Action (DCHA) ;
- the Departmental Technical Committee for Humanitarian Action (DTCHA).

The DCHA is comprised of:

- the Prefect and the commander of the military defense zone ;
- the regional Gendarmerie Commander ;
- the president of the congolese red cross.

Departmental Directorates of lead ministries are outlined as follows:

- Departmental Directorate of Agriculture ;
- Departmental Directorate for Economic Affairs ;
- Departmental Directorate of Police ;
- Departmental Directorate of Civil Security ;
- Departmental Directorate of Public Security ;
- Departmental Directorate of local authority bodies (Local Government) ;
- Departmental Directorate of Finance and Budget ;
- Departmental Directorate of Communication ;
- Departmental Directorate of Justice ;
- Departmental Directorate of the Environment ;
- Departmental Directorate for Health ;

- Departmental Directorate of the Planning ;
- Departmental Directorate for Humanitarian Action ;
- Departmental Directorate for Women's Empowerment ;
- Departmental Directorate of the NRISAC.

The DTCHA includes :

- the secretary general of the department ;
- the mayor of the municipality or the sub-prefect ;
- representatives of departmental directors ;
- the deputy commander of the military defense zone ;
- the deputy to the regional gendarmerie commander ;
- the representative of the Congolese red cross.

STANDARD OPERATING PROCEDURE

The standard operating procedure identified in the Humanitarian Mechanism is relating to:

- analysis, monitoring and mapping of hazards and disaster risks ;
- risk management ;
- scale of impacts ;
- scale of actions ;
- response levels ;
- Humanitarian Operation Centers (HOC) ;
- The emergency preparedness and response team (EPRT) ;
- Integrated Missions (IM) ;
- Protection of civilian in conflict situation ;
- The supply and distribution logistics chain ;
- Coordination of Humanitarian Missions ;
- Management of Emergency Humanitarian Fund.

• **ANALYSIS OF THE HUMANITARIAN MECHANISM**

The humanitarian mechanism does not specify the bridges of collaboration between city councils and urban communities on the one hand, and between city councils and prefectures on the other. The tool has been popularized in different departments of the country but up to date, it has started to be implemented during the flooding situation over a large part of the country, notably in the northern regions in October, December 2019 and 2020: in Likouala, les Plateaux, la Cuvette and la Sangha. However, it is not yet introduced in the circuit of adoption to be promulgated by the President of the republic for its formalization. The file is still in the offices of the Ministry of social affairs and humanitarian action.

4.2.3: STRATEGIC FRAMEWORK

• **POLICIES AND STRATEGIES**

Under the terms of the Congolese constitution of 15 October 2015³⁹, the holistic view of social action consists in offering to the entire population a package of preventive, promotional, care and protection measures with a view to addressing poverty and vulnerability. The enforcement of these provisions was given concrete expression with the formulation of the National Policy for Social Action (NPSA) combined with an Action Plan of the National Policy for Social Action 2018-2022.

In addition to commitments made in the plan to restructure the Congolese Society⁴⁰ by the present President of the Republic of Congo Brazzaville, the NPSA is also based upon several principles which are:

A rights based approach including the universal right to social protection enshrined in the Universal Declaration of Human Rights of 1948 and other international legal instruments ratified by the Republic of Congo and also based on rights of people living with disabilities, children, elderly persons, indigenous people and women;

This listing also includes national solidarity ; gender based approach ; balanced implementation of approaches to prevention, protection, treatment care and promotion in social action ; strengthening the protective framework of the family ; subsidiarity to the management of services ; empowerment of beneficiaries ; community approach ; the right of vulnerable people to express themselves ; monitoring and evaluation of interventions ; partnership between various institutions ; humanity ; impartiality ; neutrality ; independence ; disaster management integrated approach.

The NSAP, which aligns with the National Plan for Development (NPD), aims at building an adequate and efficient social action system. It pursues three specific objectives which respond to three main priorities for building a basic protection floor, disaster management and promoting capacity building in the areas of social action and humanitarian action. These objectives are split as follows:

Specific objective 1 : Offer to the entire population a non-contributory and productive social protection floor comprising social transfers and social action services and other social intervention measures with a view to reducing poverty and inequalities, promoting human capital development, helping households and vulnerable people to better manage risks and guaranteeing human dignity to the entire population ;

Specific objective 2: Reduce natural or man-made disaster risks and their harmful effects through preventive actions, disaster preparedness, swift response and victims protection and promotion of post-disaster recovery.

Specific objective 3: build a strong social action system equipped with an adequate legal, institutional and operational framework for the effective performance of its missions. To achieve these objectives, the government proposes to intervene in three axes:

39 - Articles 8,9,16...20, 31, 37 et al

40 - The Plan is entitled « The walk towards development, together let's go further »

Axis 1: non-contributory, productive social protection and other social intervention measures

Axis 2: Prevention, risk management and disaster management

Axis 3: Institutional, organizational and operational capacity building.

It is important to emphasize the renewal and integration of other relevant policies and pledges into the NSAP such as the National Gender Policy (2016), National Employment Policy, National Youth Policy, National Strategy Documents for Strengthening the Promotion of Solidarity (2017), National Strategy for Treating and Caring Vulnerable Social Groups (2011); Strategic Framework for Enhancing the National System of Childhood Protection in the Republic of Congo (2015), National Action Plan for Disabled People (2009), National Action Plan for Improving the Quality of Life of Indigenous People (2014-2017) and Strategic Plan Action for the Elderly Persons (2017-2021).

In view of the foregoing, the Republic of Congo validated in 2018 a National Risk and Disaster Management Strategy (NRDMS). According to the national authorities, the strategy allows the populations to be protected from disaster risk in making them able to face it and to recover quickly. Its overall objective lies in improving by 2030, disaster and risk management at all level. Tasks identified to reach this general aim relate to three orders, namely:

- to implement all phases of risk and disaster management cycle (risk assessment and monitoring, preparedness to disaster, emergency response and post-disaster recovery)
- to enhance communication and international cooperation framework
- to set up an institutional and disaster management framework.

This strategy is founded upon principles set out in the constitution of the Republic of Congo, notably state recognition of the importance of human life, its rights, environment and responsibilities: « the State has the primary responsibility for respecting and protecting human life » (article 8).

« Every citizen is entitled to a healthy, satisfying and sustainable environment...The State ensures the protection and conservation of the environment » (article 41). These same principles are for the most part those defined in the Sendai framework for disaster risk reduction 2015-2030.”

Another document that reflects the political will to provide protection and assistance to the congolese people, in compliance with international legal instruments and commitment made, is the National Plan for Development (NPD) 2018-2022. This document, whose central object is the implementation of the vision of the Head of State, makes men and women the development driver while keeping the strategic government involvement in the economic and social areas.

To talk only about education, the three last decade have seen the political drive to review the development of the educational sector based on the objectives to which the country

acceded internationally (Education for all, the Millennium Development Goals) and nationally (The president's plan to restructure the congolese society). In the light of the above, a sectoral strategic document for education has been developed in 2010 split into three axis.

With the support of the UNESCO, a strategic framework for schooling and re-schooling of disabled children has been developed in 2007 built around several priority axes:

- re-organization of the legal framework in order to guarantee the right to education for disabled children;
- improvement of specific conditions for access to apprenticeship and promotion of an environment of communication;
- support for the financing and capacity building of specialized institutions
- support for informal education;
- promotion of partnership and cooperation;
- promotion of accompanying measures: coordination, studies, monitoring and evaluation.

Regarding health and health facility, the congolese constitution, sets out the right to life (article 8) and the responsibility of the State as guarantor of public health (article 30).

As headquarter of the WHO regional office for Africa, the Republic of Congo is at the forefront for subscribing to major international instruments and declarations relating to health in Africa. Law N° 014-92 on the institutionalization of the National Health Development Program (NHDP) shows the interest congolese authorities bear in this vital sector. The enforcement of this law resulted in the implementation of a first NHDP and in the adoption, in the year 2000, of the national health policy. This tool aims at improving the health status of populations in order to promote their participation into the socio economic development of the country through promotion and protection of health of individuals and local collectivities over the whole territory ; improving the quality and accessibility of population service and health care and strengthening national health system management capacities

The initiation of the strategic planning process resulted, in 2002, in the formulation of the first 2003-2007 National Strategic Framework for Addressing HIV/AIDS. In 2008, the republic of Congo initiated the second 2009-2013 national strategic framework aiming to reduce the incidence of the HIV infection in the population and to reduce HIV/ AIDS morbidity and mortality. It is structured around the following strategic axes : (i) strengthening services responsible for preventing the HIV infection and sexually transmitted infections ; (ii) strengthening services responsible for medical, psychological treating and caring for people living with HIV ; (iii) reducing the impact of AIDS and promoting human rights ;(iv) improving the monitoring and evaluation system, research, epidemiological surveillance and strategic information management ; (v) strengthening coordination, partnership and governance. To allow universal access to prevention and care, the Republic of Congo decided in 2007 the free screening, biological check-up (laboratory tests), free ARV treatment.

Elsewhere, the National Policy to Fight Malaria was translated in a Strategic Plan to Fight Malaria (2008-2012) with the objective of making 80 per cent of pregnant women and children under 5 sleep under an impregnated insecticide-treated mosquito net.

Since 2016, the Republic of Congo has embarked on a process of reviewing health sector activities which resulted in the development of a new National Health Policy (NHP) 2018-2030 supplemented by the National Health Development Plan (NHDP) for 2018-2022 and a Strategic Plan for the Reproductive Health, Maternal, Neonatal, Child and Adolescent Health for 2018-2022.

The Congolese State has various strategic and operational tools to address malnutrition including:

- the Multisectoral Strategic Framework for Combating Malnutrition (MSCM) for 2015-2025 which aims at reducing the prevalence of all forms of malnutrition by at least 50% among vulnerable populations notably children from 0 to 59 months old, pregnant and breastfeeding women. It is split into 5 strategic axes : (i) Strengthening of the legal and institutional framework to combat against malnutrition ; (ii) extension of coverage of direct interventions conducive to nutrition ; (iii) Establishment of an operational system for development ; (iv) Improving household food security (v) Capacity building, action-research on nutrition and related sectors and food, nutrition information systems ;
- the National Security and Nutritional Policy (NSNP) aims to contribute to the sustainable increase in food availability, improve the physical access of populations to food products and the nutritional status of vulnerable populations, strengthening of coordination, governance and food crisis management.

In the sectors of water, sanitation and hygiene exist several strategic documents of the Government and its partners: the national water policy, the water code, the national strategy for access to sanitation in rural and urban areas, the hygiene promotion strategy in schools, healthcare facilities and the community

• ANALYSIS OF POLICIES AND STRATEGIES

It is to note that policies and strategies above-analyzed focus on vulnerability reduction that population in general and IDPs in particular may suffer. In so doing, they fight against poverty and environmental degradation; they also increase the autonomy of disadvantaged social strata and beyond promote human rights including the right to education, dignified employment; the right to protection of the health of individuals and the right to access by each and everyone to health care and services. Seen from that angle, in addition to the National Risk and Disaster Management Strategy (NRDMS), the National policy for social action combined with the Action plan of the national policy for social action 2018-2022 and the National health development program for the same period to name a few, reflect international, regional and sub-regional commitments entered into by the Republic of Congo for the right to protection and assistance to the most vulnerable groups such as children, elderly persons, people with disability, young unmarried mothers, chronically ill... Their review would help better assess their implementing and intervention levels.

The National Risk and Disaster Management Strategy (NRDMS) formerly under the leadership of the Ministry of Social Affairs has been adopted, admittedly, but its sensitization with a view to mobilizing resources for its implementation and working as part of disaster management has not taken place. Since the 13th of August 2021, in the course of a workshop, the ministry of environment assumed its ownership to align it with the Sendai framework for action which has raised up the importance of the prevention component.

As for the National Policy for Social Action combined with the Action plan of the national policy for social action 2018-2022, a problem arose in the monitoring of activities planned to the point that the review of the action plan has not been organized yet. It is also to note a big issue in its coordination, but beyond this fact, there are grounds for questioning: did the ministry's investment budget⁴¹ meet activities planned? Has Coronavirus not impacted different plans? The economic situation of the country did not improve; funds planned for activities were reoriented for Covid-19.

This observation is applicable for the National Plan for Development and other strategic frameworks above indicated which have not been implemented as planned because of the onset of Covid-19

Covid-19 disturbed breakthrough made in fighting malaria. There is a risk that the scores acquired to date, be called into question.

According to the mid-term review report of the National Health Development Plan⁴² (NHDP), the overall rate of achievement of the implementation of the NHDP between 2018 and 2020 is of 31% in terms of execution level of Programs structured as follows:

Review of the performance framework of Program 1 « strengthening governance, leadership and management of the health sector » shows that out of 65 activities planned, 26 have been carried. The management of the plan has not been effective; the low level of appropriation of the NHPD provisions by technical bodies explains this result.

It results from the examination of the performance framework of Program 2: « improvement of equitable access for populations to a package of high-quality essential services » reveals that out of 103 activities planned, only 25% have been achieved i.e. an achievement rate of 24%. This poor result shows that much remains to be done during this last year of the NHDP 2018-2022 with regard to healthcare and services delivered to the mother, child, adolescent and young people;

As for Program 3 « health security and management of emergency situations according to the approach encompassing all threats », it has experienced a success rate of 22%, the implementation of the international health regulations has been updated, epidemiological surveillance has been strengthened. However, this low achievement rate was compensated by interventions implemented as part of responses to the Covid-19 pandemic.

41- It is about the investment budget of the ministry of social affairs and humanitarian action

42- See P7, 8 Mid-term review report of the NHDP 2018-2020

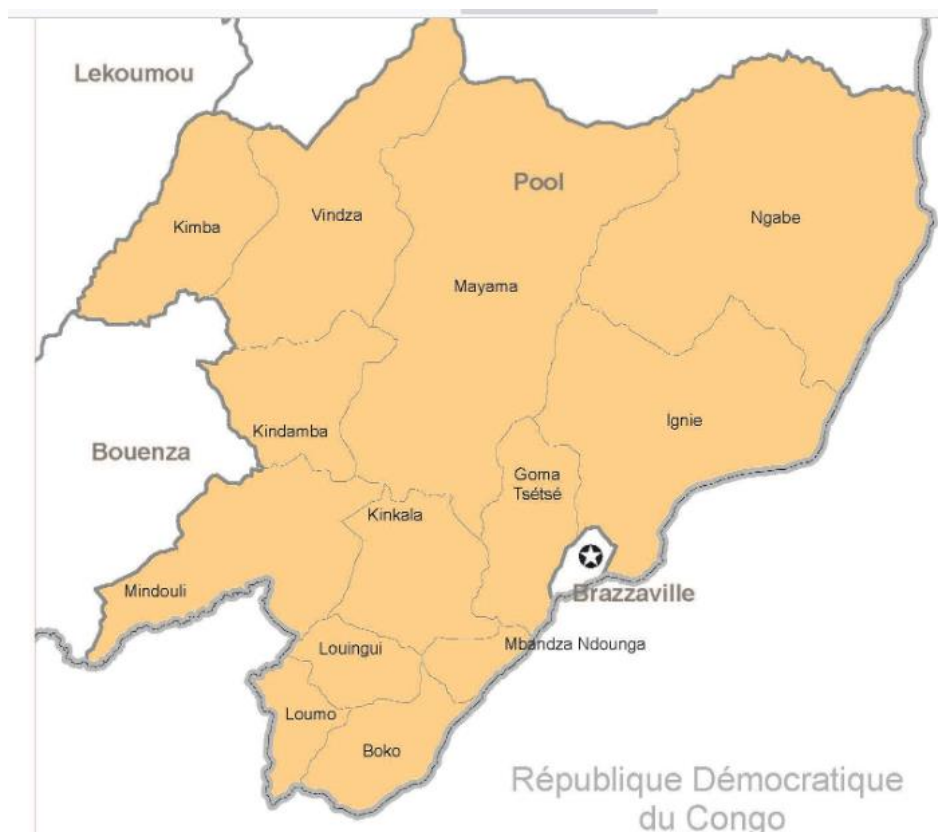
It is to note from the above that operational program of the NHDP planned for healthcare and services to the population are penalized in favor of Program 1 above-mentioned. This state of affairs jeopardizes the implementation of interventions provided for in the NHDP. The low execution level and the disproportionate distribution of disbursed resources explain this situation.

Constraints are summed up in: the insufficiency of investments; the lack of trained and qualified staff on sanitation issues and its management; lack of appropriate management structures and logistical support for the operation and maintenance.

5: ASSESSING THE IMPLEMENTATION OF THE CONGOLESE CONCEPTION OF PROTECTION AND ASSISTANCE IN THE CONCRETE CASE OF THE POOL REGION AND LES BANDAS'S DISTRICT

5.1: THE CONCRETE CASE OF THE POOL REGION

Map of the Pool region



A good approach to assess the physical protection of IDPs and their humanitarian situation in the Pool Department is to consider two periods: the first is from April 2016 to December 23⁴³, 2016 (1). It is marked by the Government's passivity in the face of Ninja's attacks against public buildings. A second period from December 23, 2016 to May 2017(2). It is

⁴³-Some reports such as Humanitarian response plan, July-December 2017, P7 mention the month of October-December 2016 other such as reports of the ministry of social affairs mention the date of 23 December 2016

characterized by interventions to improve the humanitarian situation of IDPs in the Pool department.

5.1.1: PERIOD FROM APRIL 16, 2016 TO DECEMBER 23, 2016

Two salient facts draw the attention of observers, namely the passivity of the Government and therefore the concern of the ecclesiastical authorities and Christians.

5.1.1.1: PASSIVITY OF THE GOVERNMENT

This period was characterized by the Government's notorious inertia in physically protecting displaced populations who were distraught following the April 2016 attacks on public buildings in the southern neighborhoods of Brazzaville, attacks attributed by the Government to Ninja militias. Government's intervention in the Pool Department during this period began only in December 2016 through the assistance provided to some of the displaced persons by the Ministry in charge of humanitarian action independently of the first assessments conducted in May 2016 by CARITAS NGO in some of the affected areas and the first joint multisectoral assessment by the Government, the UN and NGOs partners in late June 2016. The response plan tells us more about the chronology⁴⁴ of events in Pool.

5.1.1.2: CONCERN OF THE ECCLESIASTICAL AUTHORITIES AND CHRISTIANS

The humanitarian crisis in the Pool region was due to the fighting, of course, but above all to the impossibility of accessing basic services and humanitarian aid due to the insecurity of transportation, and also to the prohibitions on access imposed by the conflict itself, which the civilian population could do nothing about. This climate prompted Christians and the bishop of the Catholic Church in the Kinkala district at the time of the events, Monseigneur Portella Mbuyu, to express concerns on RFI⁴⁵ (Radio France Internationale, an international French radio station); In view of this, he called for the war to stop and on Monday, April 18, 2016, launched an "appeal for hope" to the Catholic followers of the region who have been victims of the army bombings for the past several weeks. Statements denounced by Mr. Thierry MOUNGALLA, Minister of Communication of the Republic of Congo who has thought that the ecclesiastical authority has "gone out of his role as a man of God".

5.1.2: PERIOD FROM DECEMBER 23, 2016 TO MAY 2017

The evaluation of interventions in the Pool Department for the above-mentioned period was launched on September 20, 2021 for the first part and on October 10 of the same year for the second part. It was carried out by a team of five (05) evaluators through a survey

44- See P7 Humanitarian Response Plan, July-December 2017, Republic of Congo Pool available on internet.

45- <https://www.google.com/search?client=firefox-bd&q=Congo+Brazzaville+crisis+of+the+pool%2C+l%27intervention+of+the+27%C3%A9v%C3%AAque+Portella+Mbuyu+on+RFI+in+April+2016>

based on priority sectors of vulnerabilities identified in the recommendations of the Report-Evaluation-Pool-Bouenza May 2017 P63-64 available on the internet.⁴⁶

The data collection techniques adopted were direct observation of events in public places, in families and interviews with administrative authorities at the central and decentralized levels, staff of UN organizations, their operational partners (NGOs); but also focus groups discussions with local populations and displaced persons.

These methods were supplemented by opinion poll and documentary research.

Apart from Brazzaville, the survey sites identified during these field visits were the district of Kingoue (Bouenza) bordering the Pool region and the districts of Kindamba, Vindza and Kimba (Pool) bordering the Bouenza department.

The department of Brazzaville was selected because it is home to all the organizations of the United Nations system and the central government who are both implementing partners, according to the above-mentioned Bouenza evaluation report. As for the districts of Kingoue, Kindamba, Vindza and Kimba, their eligibility stems from the fact that, on the one hand, they have welcome displaced persons and are the most accessible districts among all the districts, and on the other hand, they host certain external government services and the branches of some NGOs.

The surveyed population is distributed as follows:

- Of the 950 IDPs in Kindamba, a sample of 175 was selected by our team, of which 100 men and 75 women responded to our questionnaire during focus group discussions.
- In Vindza, a sample of 80 people out of 290 IDPs was selected, of which 45 were women (20 young girls and 25 adult women) and 35 men responded to our questionnaire during focus groups discussions.
- In Kimba, a sample of 60 IDPs agreed to interview us and to complete our questionnaire during focus group discussions, including 40 men and 60 women.
- Of the 507 IDPs in Kingoue, only 55 people, mostly adult women (25) and men (30), had time to respond to our questionnaire during focus group discussions.

Constraints: The team of evaluators deployed in the field had difficulty gaining access to certain administrative offices in the above-mentioned districts. Similarly, respondents were afraid to identify themselves and to answer the questions they were asked, thinking that the evaluators were there to spy them. One of the major difficulties in carrying out the study was also the lack of financial resources at our disposal and beyond the fear that animated the evaluators who were aware that they were in an accessible but very sensitive area.

As for Brazzaville, it has been noted the unavailability of certain central government officials and the lack of responsiveness of the UN personnel.

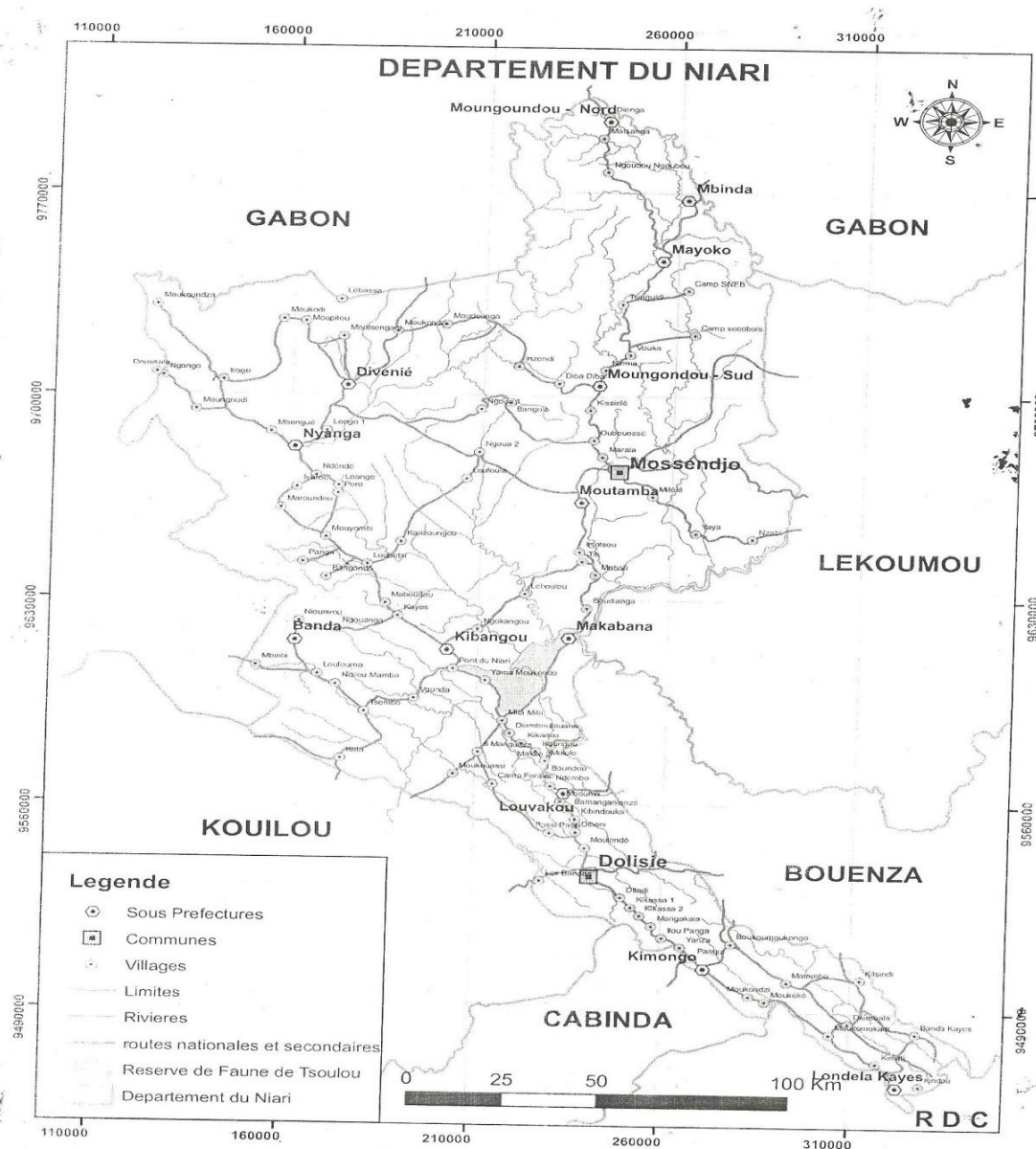
46-<https://www.humanitarianresponse.info/ru/operations/west-and-central-africa/document/r%C3%A9publique-du-congo-rapport-d%C3%A9valuation-de-la-r%C3%A9gion-de>

5.2: THE CONCRETE CASE OF LES BANDAS DISTRICT

Map of the Republic of Congo Brazzaville



Map of the department of Niari



Source: SDAT, 2013

GEOGRAPHIC LOCATION

Niari, one of the largest departments in Congo, is located in the south of the country. It has : two (2) communes (Dolisie and Mossendjo), fourteen (14) districts (Les Banda, Divenié, Kibangou, Kimongo, Londela-kayes, Louvakou, Makabana, Mayoko, Mbinda, Moundou Nord, Moundou Sud, Moutamba, Nyanga and Yaya) and five (5) urban communities (the urban community of Divenié, the urban community of Kibangou, the urban community of Kimongo, the urban community of Makabana and the urban community of Mbinda).

The Department of Niari has an area of approximately 27,852 km², with an estimated population of more than 327,407 inhabitants (source: RGPH-2007).

It is bordered by Gabon to the north and northwest, by the Department of Kouilou and the People's Republic of Angola (Cabinda Province) to the southwest, by the Democratic Republic of Congo to the southwest, and by the Departments of Bouenza and Lekoumou to the southeast.

5.2.1: REMINDER OF THE CONTEXT OF THE OCCURRENCE OF THE FLOOD

On February 25, 2018, the district of Les Bandas experienced a flood following a torrential rain that fell in the locality, causing significant human and material damage as follows:

- total number of dead people 2, missing 03;
- total number of houses affected or collapsed 105 houses.
- total number of houses totally collapsed or destroyed: 95
- total number of affected households: 159;
- total number of victims rehoused: 583 of which 287 men and 296 women
- several vulnerable people including 24 elderly people, 94 children aged 0 to 5 years, 30 nursing mothers, 07 pregnant women and 04 people living with disabilities⁴⁷.

Upon the instructions of the Prefect of the Niari department, a rapid assessment mission was organized by the departmental directorates of civil security and humanitarian action and then by the management of the Dolisie general hospital. Following this, interventions were carried out in favor of the populations affected by this disaster.

An evaluation of these operations was organized by a team of five (05) evaluators in late September 2021 and mid-November of the same year.

The evaluation methodology was based on data collection through documentary research, a questionnaire with local administrative authorities, interviews with people affected by the disaster and observation of their living environments.

The survey sites selected were the former Chinese base, the leprosarium in the village of Moukondo and the district of Les Bandas, all of which are located in the Niari department.

Our team planned to meet with 291 of the 583 relocated disaster victims in the two sites during our visit at the end of September 2021. But because of their unavailability, the study was postponed to November 15, 2021. By this date, the unavailability of the respondents obliged the team of evaluators to reduce this sample to 180 people who answered our questions and accepted an interview with us. This sample is distributed as follows: 100 men, 80 women, including 21 nursing mothers, 6 pregnant women, 15 elderly women, 38 schoolgirls.

Constraints: The evaluation team did not have the opportunity to meet with many of the local opinion leaders, as they were busy with their agricultural activities in September,

⁴⁷- See p 14, Rapport général de gestion de la catastrophe de Les Bandas Dolisie, février –avril 2018, Jean-Didier Narcisse Nzila, Departmental directorate of humanitarian action of Niari.

October and November. The few people who were willing to be interviewed or to answer our questionnaire were evasive and imprecise in many of the questions.

6: RESULTS OF THE ASSESSMENT

6.1: IN THE POOL REGION

The results of the assessment were structured by the sectors of vulnerability identified. This structuring highlights the facts observed in the field (Observation / strengths); the difficulties encountered (Weaknesses) and the possible solutions (recommendations).

1: COORDINATION

- Observation/ strengths

It has been noted that coordination meetings between the Congolese government, the financial partners and the United Nations system were held very frequently. These meetings have enabled all these actors to draw up a joint humanitarian response plan, which has served as a basic document for advocacy. During its presentations to the above-mentioned partners, the Government officially declared that the humanitarian situation in the Pool was an emergency.

As it can be seen, the Republic of Congo is active in the partnership to organize the response to the humanitarian situation thanks to the advocacy that has allowed the movement of people and the delivery of food and non-food items as evidenced by the interventions of the Congolese government, China, France, Italy, organizations of the United Nations system in favor of the displaced people of the Pool... All this is preceded by a call for international solidarity of the former Prime Minister Clement MOUAMBA.

The country has planned a dialogue committee with the National Resistance Council of Pastor Ntumi, the leader of the Ninja nsiloulou.

- Weaknesses

- Unavailability of the advocacy implementation plan;
- Weak operational and technical capacity of the Government to carry out its missions due to a lack of expertise and logistical and financial means of deployment. Most of its assistance operations have been carried out with the support of United Nations agencies: the Government's humanitarian operations budgets are highly dependent on donor funding;
- Ineffective coordination system in Congo;
- Local NGOs working in the field are accountable to the structures that fund them but are not accountable to the government.
- Weakness of decentralized government structures

-Recommendations

- Establish a body with a well-funded Humanitarian Emergency Fund and the logistical means to act as soon as a crisis breaks out in any part of the country;
- Make multi-sectoral coordination more effective and inclusive.

2: NUTRITION AND FOOD SECURITY

- Observation/ strengths

Great efforts have been made in the distribution of inputs related to the prevention and management of malnutrition among displaced persons and host communities by humanitarian actors from the Government and UN agencies who have been deployed to all sites and host families. The government's inputs include rice, salted fish, canned food, oil, peas, salt, sugar, milk, tomatoes.

These items have been distributed equally among the beneficiaries.

The crisis in the Pool region has had a serious impact on the nutritional situation of IDPs. It has been observed that adults and children have suffered from all types of malnutrition (kwashiorkor, marasmus). According to the MIC survey results, the overall chronic malnutrition rate is 27.1% [95% CI: 24.4 - 29.9] among displaced children, versus 23% for the two departments Pool and Bouenza⁴⁸.

These cases are associated with other pathologies in a small proportion of 5 to 10%. Example: anemia; infections, HIV, etc.

The consequences are mixed in terms of loss of human life. Before the management of acute malnutrition through the provision of therapeutic and supplementary foods, many cases of death were reported. During the management, it depends on the various complications that may have arisen and the capacity of the technical platform. Nevertheless, a decrease in statistics has been noted.

According to the evaluation, therapeutic food medications for children between 6 and 59 months of age are extended to adults when cases arise. Such infiltration distorts the results of interventions.

International actors (WFP, UNICEF, WHO, UNDP, etc.) and some local NGOs working in health and nutrition have managed the implementation of interventions to prevent chronic malnutrition during the first 1,000 months (from conception to age 2). Thus, an Integrated Health Center (IHC) was opened on the road to Kinkala in the Pool region for pregnant and lactating women (breast-feeding). These women have received nutritional supplements from the above-mentioned actors.

As operational partners, local NGOs have benefited from the transfer of knowledge from international organizations. For example, Médecins d'Afrique, a congolese NGO, has

48-See P9 RapportévaluationPool-Bouenza <https://www.humanitarianresponse.info/ru/operations/west-and-central-africa/document/r%C3%A9valuation-de-la-r%C3%A9gion-de>

benefited from this collaboration during the malnutrition surveys, designed to analyze the types of malnutrition faced by displaced populations.

In addition, significant progress has been made in implementing school feeding programs that have improved state exam results in the Pool department after the crisis.

Another important advantage for the displaced people has been the revival of productive activities organized by WFP: Food for Asset (work to create productive assets), as it is called, which has made it possible to open agricultural trails and ponds. To this end, beneficiaries in the districts of Mayama and Mindouli, formed into cooperatives, received market gardening inputs and fish fry for fish farming. It is important to note that the opening of the agricultural tracks was born of the coupons, food vouchers and cash that have been issued to the displaced. Hence the expressions "cash for work", "cash/vouchers for work" and "food for training" that have been planned and implemented for the beneficiaries.

- Weaknesses

-The presence of inputs for displaced persons and host communities in the markets of neighboring Pool departments (Bouenza, Brazzaville). There are two reasons for this situation:

1) The beneficiary sells part of his or her allocation to buy something else (soap, cassava, etc.);

2) Local agents create false beneficiaries to take out the inputs and then sell them;

- There is no specific government nutrition plan. This makes it difficult to monitor IDPs and host populations;

- Difficulty in obtaining statistical data on schools and students who have benefited from school feeding programs;

- Lack of data on the school attendance rate.

- Recommendations

- Provide cash for IDPs and host communities in addition to the commodities distributed during humanitarian assistance operations.

3: HEALTH

- Observation/ strengths

In the area of health, the evaluation noted the proper use of materials and medicines intended for displaced persons. The Director General of Humanitarian Action had to transport these supplies. To do this, he called on the then Departmental Director of Health in the Pool. In addition, it is worth noting the population's enthusiasm for vaccination, to which must be added a great deal of satisfaction in terms of the monitoring of nursing and pregnant women by a large number of experienced staff, since they were a priority population after the displacement.

In terms of awareness-raising, the health authorities have taken the option of organizing several focus groups and specific campaigns for the displaced population on essential family practices, using leaflets, posters and megaphones. The themes addressed during these events were gender-based violence, rape, the continuation of breastfeeding beyond 24 months to avoid malnutrition, the promotion of food hygiene, hand washing, and the use of impregnated mosquito nets.

Finally, UNICEF shared dignity kits with young girls of childbearing age at the rate of one per person, consisting of pads, sanitary towels, underwear, soap and gloves. The evaluation revealed that not all older women who are still menstruating after the age of 45 were served. This makes it somewhat difficult to manage their menstrual hygiene.

- Weaknesses

- Difficulty in knowing the number of people reached during these awareness campaigns;
- Unavailability of the communication plan;
- No follow-up or evaluation of these campaigns was undertaken.

-Recommendations

4: WATER-HYGIENE-SANITATION

- Observation/ strengths

The presence of springs for water supply is noted in most of the sites where displaced persons live. However, no special measures are taken to chlorinate this water before it is consumed, even though it is apparently potable. As a result, there have been a few isolated cases of waterborne diseases.

In view of this, communications for the adoption of behaviors conducive to the prevention of these diseases have been reinforced. These focused on themes such as hygiene promotion and hand washing. This reinforcement has further improved the health status of the population.

- Weaknesses

No report indicating the proportion of cases of waterborne diseases after the reinforcement of sensitization for the adoption of favorable behaviors for the prevention of waterborne diseases.

- Recommendations

- Provide displaced households with some water treatment products;
- Disinfect and clean water sources;
- Disinfect latrines.

5: INCOME GENERATING ACTIVITIES (IGA)- AGRICULTURE

-observation/ strengths

A response plan has been developed that takes into account displaced women and men without discrimination. Thanks to this tool, displaced households, formed into mixed groups, have received from the government and organizations of the United Nations system, the means of subsistence in the form of farming tools, agro pastoral and fishing inputs. This has enabled them to resume their habitual activities. These communities were accompanied by experts in the realization of the said activities. As it can be seen, access to IGAs has not only been the prerogative of men but also of women.

More specifically, in the area of agriculture, no resistance was noted in the granting of cultivable land to displaced populations.

- Weaknesses

- This response plan did not anticipate, let alone take into account, the repeated episodes of crises or wars that have broken out in the Pool Department;
- Lack of statistics of women and men, members of these mixed groups who received means of subsistence;
- Lack of statistics of persons not formed into groups;
- Difficulty in obtaining the exact number of IDPs, as illustrated by the present census of IDPs in the Pool region, by a team composed of agents from the Ministry of social affairs and AAREEC, an operational partner of the representation of the UNHCR Congo.

- Recommendations

6: PROTECTION

- Observation/ strengths

Cases of gender based violence (GBV) and rape have been reported in some places during discussion groups and exchanges with displaced women and girls. In this regard, with funding from the UNFPA, listening and referral units have been set up in the sites and some health centers, run by psycho-social agents under the supervision of a clinical psychologist based in the hospital, who receives and refers the most serious cases for holistic care and psychological support. In addition to this support, a kit is given to survivors.

The materials used for the preventive awareness campaigns have helped to deal with depression, anxiety and post-traumatic stress disorder (PTSD) in addition to GBV and rape. In doing so, these tools have helped to integrate almost all victims.

The ninjas and the military are the presumed perpetrators of these acts that the victims are afraid to bring before the courts even though the authorities would encourage them to denounce them.

With regard to birth registration, children born after displacement have been registered with the civil registry. The procedure for this registration is simple: the mother of the newborn child applies to the civil registry office, which issues the document as soon as possible.

In order to facilitate this delivery, the Ministry in charge of social affairs has made available to these services many birth certificates registers.

It has also been reported that there are unaccompanied and separated children in the sites. These children benefited from the community's support in terms of care, food, education and health. The families of these children were later reunited with the involvement of the Red Cross and the ICRC.

Despite some cases of looting, theft, and kidnapping by ninjas and uncontrolled elements of the regular army, the government resolved to secure the affected localities, the people, and their property. IDPs who had lost their possessions and administrative documents had to find them for some and have them restored or reconstituted for others at the end of the conflicts.

- Weaknesses

- Difficulty in obtaining data concerning cases of victims of GBV, perpetrators of these violences;
- Difficulty in obtaining data concerning children who benefited from birth certificates, unaccompanied children who were united with their families;
- Fear of interviewees to provide answers to the team of evaluators.

7: EDUCATION

- Observation/ strengths

Child-friendly and temporary learning spaces have been set up with the aim of carrying out playful and stimulating activities for children, which have aroused their interest as well as that of their parents. In order to revitalize the education sector, school kits have been distributed free of charge and without discrimination, and school canteens have been set up in areas of difficult access by UNICEF and the Government. These strategies have boosted the school attendance rate of children, from kindergarten to the final year of high school, thanks to refresher courses organized by the competent authorities. The proof is that at the end of hostilities, the Pool achieved better results in state examinations.

The educational program provided responded culturally, linguistically and socially to the needs of the displaced children and the host communities.

Compared to the capacity of the school, the learning conditions have been better. This has allowed displaced children and adolescents attending the school to overcome the emotional impact of the conflict wherever they are. Attending school also prevents recruitment of these children by Ninja militiamen. It was observed that displaced students received instruction in the official state curriculum, which includes modules on anti-

violence, abuse, and HIV/AIDS, and which is delivered without segregation of students and evaluated using the same methods for all teachers. Teachers are recruited and paid on the basis of their diplomas and skills.

- Weaknesses

- Unavailability of data concerning children attending child-friendly and temporary learning spaces.

8: SHELTERS

- Observation/ strengths

All of the displaced people have found refuge either in the Pool region or in other departments such as Bouenza, Niari, Pointe-Noire and Brazzaville. Tents have been made available to them. These temporary shelters meet humanitarian standards of distance.

6.2: RESULTS OF THE INTERVENTION EVALUATION IN LES BANDAS DISTRICT

1: COORDINATION

- Observation/Strengths

Given the magnitude of the situation, the Prefect declared a state of natural disaster and humanitarian emergency in the Niari department. A decree signed by him set up a departmental coordination committee composed of several departmental departments including social affairs, civil security, local authorities and the local RED CROSS.

For the circumstance, a concerted disaster management plan was set up to assist the population after the flooding.

The Ministry in charge of social affairs brought in a South African construction company for the reconstruction of Les Bandas' district.

In addition to the above-mentioned actors, the collective of Members of Parliament of the Niari department donated food and sheet metal.

- Weaknesses

Weaknesses in local coordination have been observed, punctuated by the non-existence of a departmental disaster management contingency plan.

-Recommendations

Set up a departmental contingency plan and an effective inclusive coordination

2: FOOD SECURITY

- Observation/ Strengths

The ration distributed to the victims consisted of salted fish, rice, canned food, salt, milk, sugar, and, and oil. The flooding did not affect the plantations of the displaced populations, which are essentially agricultural. This has led them to return to farming after the flood.

- Recommendations

- Continue to support the flood-affected populations with food until a sustainable solution is found.

3: NUTRITION

- Observation / Strengths

No cases of malnutrition have been reported among the population affected by the flooding of Les Bandas.

4: WATER-HYGIENE-SANITATION

- Observation/ Strengths

It has been noted the presence of water treatment points set up in the area where the flood victims were gathered. This water was treated according to standards using bleach and chlorine. The quantity of bleach manufactured by the CHPPS Company is 375 liters per week and varies according to the needs expressed during field visits. The quantity of bleach distributed is 285 liters.

The number of households whose containers were chlorinated is 132 at the Moukondo site and 41 at Les Bandas site.

In terms of hygiene, dignity kits were distributed to women and girls. These kits are composed of towels, cotton pads, toilet paper and underwear.

Latrines have been built and disinfected. The number of disinfected sites amounted to 3, namely the Chinese base, the leprosarium of Moukondo and the district of Les Bandas

For the occasion, awareness campaigns on hygiene promotion were conducted for the affected populations. The number of people sensitized amounted to 570 at the site of Moukondo and 65 at the site of Les Bandas.

- Weaknesses

Those of affected persons tired of living in such conditions in the sites have decided to return home.

- Recommendations

- Continue to provide households with water treatment products at home while waiting for the construction of new houses.

5: PROTECTION

- Observation/ Strengths

All arrangements have been made for birth registration.

Children attend school regularly: a total of 83 children, including 38 girls and 45 boys, have been enrolled in the Moukondo elementary school. All of them have been provided with school kits by the Ministry of Social Affairs and Humanitarian Action, as a support to their re-enrollment. These kits are composed of slates, chalk, notebooks, rulers, school bags, pencils, erasers, blue and red pens, etc.

At the psychological level, the victims of the shocks were treated by the trauma counseling team of the Ministry of Social Affairs that came from Brazzaville.

No cases of GBV were identified at the population gathering site.

6: HEALTH

- Observation/Strengths

Pregnant women have benefited from individual delivery kits.

At the epidemiological level, the monitoring of flood-related diseases has been ensured with the distribution of impregnated mosquito nets and cholera kits.

In terms of immunization, there is good coverage in the area. The number of children vaccinated per antigen is 15; all pregnant women found on the site of the Chinese base in Moukondo are correctly vaccinated with VAT.

In addition to the pharmaceutical products donated by WHO, a special envelope has been made available by the Ministry of Social Affairs and Humanitarian Action to enable the Departmental Health Directorate to take care of any sick people affected by the disaster.

- Weaknesses

Difficulty in knowing the amount and fate of the special envelope made available by the Ministry of Social Affairs to enable the departmental health department to care for any disaster victims.

No body has been set up to monitor the services provided to disaster victims.

- Recommendations

- Train community relays in case management and epidemiological surveillance;
- Supply the local health centers with drugs against malaria and diarrheal diseases;
- Continue the distribution of impregnated mosquito nets.

7: SHELTERS

- Observation/ Strengths

The departmental disaster management coordination and Les Bandas district committee have identified a relocation and housing site for people affected by the flooding in Les Bandas, near the site of the disaster, which is located on high ground.

A project for the construction of housing for the populations affected by the flood has been developed. To do this, the Ministry of Social Affairs and Humanitarian Action has brought in a South African company of buildings and public works.

The Ministry and the group of members of parliament from the Niari department donated metal sheets to the people affected by the flood.

- Weaknesses

The project has not been completed. To date, no financial partner has been found to finance the construction of these houses for the affected populations of Les Bandas.

The populations cannot stand these living conditions and decided to return to their habitual home bringing with them the metal sheets distributed by the donors.

- Recommendations

Relocate the affected populations of Les Bandas to the new site identified in Louvakou district.

Launch a call for financing to the organizations of the United Nations system and international financial partners in order to finance the construction of housing for the affected populations of Les Bandas. This response plan, the amount of which has not been identified, concern the 583 victims identified by the local flood management coordination and local partners during the rapid assessments carried out at the beginning of the crisis.

This plan should prevent the recurrence of flooding in the affected locality but also provide for capacity building sessions on natural disaster prevention at the local level.

In the meantime, provide materials for the rapid reconstruction of precarious housing in the affected district.

8: LIVELIHOODS AND OTHER DURABLE SOLUTIONS

- Recommendation

The populations, being essentially agricultural, should be supported with agro pastoral inputs and livelihoods.

7: GENERAL RECOMMENDATIONS

In light of the above, the following general recommendations to the congolese national authorities and international actors are needed for improving protection and assistance to internally displaced persons in the Pool region, at Les Bandas and in the whole country:

- equip disaster risk reduction institutions with a risk appreciation matrix based on mathematical models ;
- share information between actors and provide the country with an early warning system;
- facilitate the joint coordination of actors to ensure the coherence of national sectoral plans and programs;
- identify and reduce vulnerability to natural disasters including flooding;
- integrate the emergency preparedness and response process into the country's multisectoral development plans and programs;
- reduce the time required for the intervention and adoption of legal texts related to the protection and assistance of IDPs already introduced in the adoption circuit ;
- set up a computer system for the production of databases ;
- provide the country with a specific legal framework to govern protection and assistance to IDPs during and after conflicts and disasters, and improve outdated texts;
- provide the country with the logistics in general and nautical equipment for interventions in flooded areas in particular;
- re-specify the limits of the mandates of the ministries involved in the issue of protection and assistance to IDPs to avoid overlapping between these different entities in the interventions;
- provide the country with a special emergency assistance fund ;
- failing to set up the humanitarian mechanism, the texts of which have not yet been introduced into the adoption circuit, provide the country with a national agency for the management of emergency humanitarian situations which should function as an autonomous body under the authority of the prime minister;
- mobilize resources to build the country's and communities' capacity to prevent and mitigate natural disasters (information, sensitization and mobilization sessions for political leaders, local elected officials and the private sector; introduction of prevention in school and academic curricula and textbooks);
- build warehouses in the different departments of the country and permanently equip them ;
- ensure congo's effectiveness and commitment to risk prevention, disaster management and recovery ;
- provide the country with sites for the relocation of victims of humanitarian crises and disasters ;
- develop contingency plans and emergency intervention plans ;
- consider cross-cutting issues in future response plans: gender mainstreaming, addressing minority issues: female-headed households and pregnant women, persons living with disability, chronically ill people, displaced indigenous populations;

- - provide cash for IDPs and host communities in addition to the commodities distributed during humanitarian assistance operations.

8: CONCLUSION

This study shows that the Republic of Congo Brazzaville has made significant progress in protecting and assisting internally displaced persons (IDPs), given the treatment they receive. However, it is important to note that the country is still a vast work in progress in the two areas mentioned above. Other studies should be encouraged in the future to provide the material to justify the financing of projects for displaced populations.

The situation in Pool requires the formulation and implementation of multisectoral development projects to meet the needs of the population of the department. In the opinion of informed observers, such initiatives require the mobilization of substantial financial resources.

As for Les Bandas district, realities on the ground show that the challenges to be met are enormous. The failure of negotiations with the South African construction company should not be a reason for the national authorities to rest on their laurels, far from it. On the contrary, the momentum and solidarity actions at the national and international level should be encouraged to reduce vulnerabilities and respond effectively to the protection and assistance needs of the populations affected by the flood in Les Bandas district. In so doing, calls for funding can be launched to proceed with the construction of housing and the relocation of disaster victims and displaced persons from Les Bandas to Louvakou.

All the observations collected and weaknesses noted justify the formulation of several programmatic documents whose implementation will benefit in terms of protection and assistance in the short, medium and long term to displaced persons in the two departments above-mentioned.

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10: ANNEXES

10.1: LIST OF ACRONYMS

ACHPR	: African Charter on Human and People's Rights
ACPLD	: Advisory Council for People living with Disabilities
ACRWC	: African Charter on the Rights on Welfare of the Child
APNPSA	: Action Plan of the National Policy for Social Action
AU	: African Union
DDPRR	: Directorate for Disaster Prevention and Risk Reduction
DGCS	: Directorate General of Civil Security
DGHA	: Directorate General of Humanitarian Action
DGHRFF	: Directorate General of Human Rights and Fundamental Freedoms
DGL	: Directorate General of Labor
DGP	: Directorate General of the Police
DGPIP	: Directorate General for the Promotion of Indigenous People
DHA	: Directorate for Humanitarian Assistance
DLRIR	: Directorate of Labor Regulations and International Relations
DPHLC	: Directorate for the Promotion of Humanitarian Law and Conventions
DRR	: Disaster Risk Reduction
ECCAS	: Economic Community of Central African States
ECOWAS	: Economic Community of West African States
EPI	: Expanded Programme on Immunization
FAO	: Food and Agriculture Organization
GFDRR	: Global Facility for Disaster Reduction and Recovery
ICRC	: International Committee Red Cross
IDPs	: Internally Displaced Persons
IGAD	: Inter-Governmental Authority on Development (IGAD)
IYDP	: Institute for Young Deaf People
MDG	: Millenium Development Goals
MSFCM	: Multisectoral Strategic Framework for Combating Malnutrition
NEP	: National Employment Policy
NGO	: Non Government Organization
NGP	: National Gender Policy
NHDP	: National Health Development Plan
NHP	: National Health Policy
NPAD	: National Plan Action for the Disabled
NPD	: National Plan for Development
NPFM	: National Policy to Fight Malaria
NPSA	: National Policy for Social Action
NRDMS	: National Risk and Disaster Management Strategy
NSDSPS	: National Strategy Documents for Strengthening the Promotion of Solidarity
NSFA	: National Strategic Framework for Addressing HIV/AIDS

NSNP	: National Security and Nutritional Policy
NSTCVSG	: National Strategy for Treating and Caring Vulnerable Social Groups
NUADP	: National Union of Associations of Disabled People
NYP	: National Youth Policy
PACHPRRWA	: Protocol to the African Charter on the Human and People's Rights on the Rights of Women in Africa
RoC	: Republic of Congo
SADC	: Southern Africa Development Community
SEAF	: Special Emergency Assistance Fund
SFENSCP	: Strategic Framework for Enhancing the National System of Childhood Protection
SPAEP	: Strategic Plan Action for the Elderly Persons
SPFM	: Strategic Plan to Fight Malaria
SPRHMNCAH	: Strategic Plan for the Reproductive Health, Maternal, Neonatal, Child and Adolescent Health
SSA	: Sub-Saharan Africa
SUN	: Scaling-Up Nutrition
UDHR	: Universal Declaration of Human Rights
UN	: United Nations
UNDP	: United Nations Development Programme
UNESCO	: United Nations Educational, Scientific and Cultural Organization
UNFPA	: United Nations Fund for Population Activities
UNHCR	: United Nations High Commissioner for Refugees
UNICEF	: United Nations Children's Fund
UNISDR	: United Nations International Strategy for Disaster Reduction
WB	: World Bank
WFP	: World Food Programme
WHO	: World Health Organization

10.2: QUESTIONNAIRE FOR THE ORGANIZATIONS OF THE UN SYSTEM (WFP, UNICEF, WHO, UNDP.....) AND SOME OPERATIONAL NGOs

I- IDENTIFICATION

Name of the organization:.....

Address of the organization:.....

Headquarter:.....

Tel:.....

Email:.....

City/ Department :.....Area Code.....

Questionnaire inspection date :.....

Contact persons Name.....Contact persons phone nos.....

II- Main questions by sector taking into account recommendations entered in the Rapport Evaluation Rapide Situation Humanitaire des Déplacés du Pool, Mai 2017- P63 -64 available on the internet

II-1 COORDINATION

- 1- Have you got any advocacy implementation plan to facilitate getting into inaccessible areas of the Pool region? If so, please enclose it with this questionnaire or sum it up.
- 2- Did this advocacy allow the movement of people and the distribution of food and non-food items?
- 3- How did the advocacy work to facilitate the movement of people and humanitarian aid in areas difficult to access?

II-2 NUTRITION AND FOOD SECURITY

- 4- What have been food and non-food items that were intended for internally displaced persons and host communities? What was the distribution plan? Please share a copy thereof where applicable.
- 5- Had the food and non-food items intended for IDPs and host populations of areas difficult to access really reached the beneficiaries in the quantities planned in the distribution plan?
- 6- What has been the quality of food you have received? Did you find it in the neighboring markets?
- 7- Were these provisions not diverted or haven't they crossed into neighboring regions such as the Bouenza department? If so, have you prosecuted perpetrators of these diversions? If no, why?
- 8- In the absence of IDP law in the Republic of Congo, on what legal basis were these perpetrators prosecuted and convicted? And how many were they? What was their category: Humanitarian actors? Government's agents? Soldiers?
- 9- What was the type of malnutrition that was prevalent or pervasive across the inaccessible areas of the Pool region?
- 10- Before the reinforcement of the management of acute malnutrition through provision of therapeutic and supplementary foods, how many people were dying per day and how many were dying after this reinforcement?
- 11- Were these malnutrition cases associated with other pathologies? If so, which ones?
- 12- Were therapeutic food drugs really intended for children between 6 and 59 months or were they extended to children beyond this age group?

- 13-What were foods for work, cash activities/ coupon for work, food for training planned and carried out in favor of beneficiaries? How did they use these food and other items received?
- 14-What are local and international actors in the implementation of interventions for the prevention of chronic malnutrition over the first 1000 days (from conception to 2 years old). And what is their intervention capacity?
- 15- Had pregnant and breastfeeding women benefited from these food programs?
- 16-Had local NGOs benefited from international actors in the event both worked together?
- 17-Had schools in localities housing displaced people benefited from school feeding programs? What was the number thereof? And what are localities not taken into account in implementing school feeding programs and why? What was the impact of these programs on the school attendance rate?

II-3 HEALTH

- 18-Had equipment and drugs intended for health facilities of areas difficult to access really reached their destination?
- 19-Weren't they diverted? If so, had they faced the pathologies for which they were supposed to serve?
- 20-In the case where these equipment and drugs were diverted, what was the fate of perpetrators of these diversion or misappropriation?
- 21-What was the category of these perpetrators of diversion? (Humanitarian actors? Government's agents? Soldiers? Doctors, nurses?)
- 22-What was the vaccination coverage rate?
- 23-Had the vaccination been the object of reluctance in the displaced families? Why? (Or to tell it in other words, were there displaced families that were averse to being vaccinated, why?)
- 24-Were pregnant and breastfeeding women seen in prenatal and post-natal consultations during and after displacements?
- 25-Had pregnant women particularly benefited from care during delivery?
- 26- Was there enough staff in the health facilities in order to take care of these pregnant women?

27-Were awareness-raising campaigns on essential family practices carried out during displacements? If so, what were the objectives set, tools or materials used and what were topics addressed? Please provide the communication plan and the level of monitoring and evaluation.

28-Have women of childbearing age received the dignity kits? How many should they receive? Was the goal achieved? What were these kits made of?

II-4 WATER- HYGIENE- SANITATION

29-Were there any sources for water supply? How many were they planned in the building plan? How many were they built?

30-Was this water chlorinated before consumption? Was the amount of chlorine sufficient? Did the delivered water meet quality standards ?

31-Were there any emergency latrines in health facilities, in IDPs camps?

32-Were these latrines built taking account recommended distance standards?

33-Were communications for the adoption of behaviors favorable to the prevention of water-borne diseases reinforced?

34-What were themes addressed during these communications?

35-What were tools used for these awareness-campaigns and what was their impact after this reinforcement?

36-What was the proportion of cases of water-borne diseases after this reinforcement?

II-5 INCOME-GENERATING ACTIVITIES (IGAs), AGRICULTURE AND OTHER DURABLE SOLUTIONS

37-What strategies were put in place to promote access to IGAs as part of agriculture?

38-Were displaced women taken into account in IGAs and in agricultural activities? If so, how many were they? (Or what was their proportion).

39-Hadn't they experienced discrimination? Had these activities allowed them to meet their needs?

40-Was there any resistance in the granting of cultivable lands to displaced populations? How was the advocacy conducted for the provision of lands to displaced households?

II-6 PROTECTION

- 41-Are you aware of particular issues of violence and rights violation that women, children, disabled people and the chronically ill faced during and after displacement?
- 42-Who have been the perpetrators of these acts?
- 43-What has the State done against the perpetrators of these acts?
- 44-Were there any listening and counseling units for displaced people?
- 45-What tools or materials were used for preventive awareness campaigns against violences, stress and trauma management? Were these tools relevant?
- 46-What impact had they upon IDPs? Was there any psychological care program for displaced victims?
- 47-Did children borne during and immediately after displacement have birth certificates? How did their mothers manage to have them?
- 48-Were there any unaccompanied children in different IDPs camps? If so, what kind of support did they benefit from? Were they placed with Churches, adoptive families? Were they reunited with their families later?
- 49-What are problems met by different displaced families as regard their physical security, that of their possessions and property and that of their administrative documents in general?
- 50-Which preventive steps has your Government taken to face these problems?
- 51-Were there really child-friendly spaces (CFS)? What activities were they doing? Did they arouse the interest of parents and children?

II-7 EDUCATION

- 52-What are the main actors involved in the management of the right to education of displaced children?
- 53-What is the impact of the distribution of school kits and other forms of assistance in schools attended by displaced children, teenagers and young people?
- 54-What is the content of these kits and school canteens established in areas difficult to access?
- 55-Were some children favored to the detriment of others?
- 56-Have you heard about diversion of food intended for displaced children, teenagers and young people?

57-Were temporary learning spaces (TLS) really established in areas not having schools? What was the impact thereof?

58-How many children were attending these elementary school cycles?

59-Compared to their housing capacities, were learning conditions better?

60-Has this education helped displaced children and teenagers overcome emotional impact generated by the conflict arisen in the Pool region?

61-Has it limited the chances of recruiting displaced children by Ninja militias?

62-Has it focused on key messages such HIV/AIDS, abuse and exploitation prevention?

63-Did the curriculum culturally, linguistically and socially meet the needs of displaced children?

64-Were there appropriate methods to assess and validate results of teachings delivered?

65-Were teachers recruited according to criteria reflecting diversity and equality? Were they working in good conditions?

II-8 SHELTERS

66-Were needs for shelters for displaced people met? How?

67-Did the design and settlement of shelters meet humanitarian distance norms provided for in the Sphere Handbook or the UNCHR ones?

10.3: QUESTIONNAIRE FOR THE CENTRAL GOVERNMENT

I-IDENTIFICATION

Name of the administration:

Address of the administration:

Headquarter:

Tel:

Email:

City/ Department :.....Area Code.....

Questionnaire inspection date.....

Contact persons Name.....Contact persons phone nos.....

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2017- P63 -64 available on the internet**

II-1 COORDINATION

1. Have you got any advocacy implementation plan to facilitate getting into inaccessible areas of the Pool region? If so, please enclose it with this questionnaire or sum it up.
2. Did this advocacy allow the movement of people and the distribution of food and non-food items?
3. How did the advocacy work to facilitate the movement of people and humanitarian aid in areas difficult to access?

II-2 NUTRITION AND FOOD SECURITY

4. What have been food and non-food items that were intended for internally displaced persons and host communities? What was the distribution plan? Please share a copy thereof where applicable.
5. Had the food and non-food items intended for IDPs and host populations of areas difficult to access really reached the beneficiaries in the quantities planned in the distribution plan?
6. What has been the quality of food you have received? Did you find it in the neighboring markets?
7. Were these provisions not diverted or haven't they crossed into neighboring regions such as the Bouenza department? If so, have you prosecuted perpetrators of these diversions? If no, why?
8. In the absence of IDP law in the Republic of Congo, on what legal basis were these perpetrators prosecuted and convicted? And how many were they? What was their category: Humanitarian actors? Government's agents? Soldiers?
9. What was the type of malnutrition that was prevalent or pervasive across the inaccessible areas of the Pool region?
10. Before the reinforcement of the management of acute malnutrition through provision of therapeutic and supplementary foods, how many people were dying per day and how many were dying after this reinforcement?
11. Were these malnutrition cases associated with other pathologies? If so, which ones?
12. Were therapeutic foods drugs really intended for children between 6 and 59 months or were they extended to children beyond this age group?
13. What were foods for work, cash activities/ coupon for work, food for training planned and carried out in favor of beneficiaries? How did they use these food and other items received?

14. What are local and international actors in the implementation of interventions for the prevention of chronic malnutrition over the first 1000 days (from conception to 2 years old). And what is their intervention capacity?
15. Had pregnant and breastfeeding women benefited from these food programs?
16. Had local NGOs benefited from international actors in the event both worked together?
17. Had schools in localities housing displaced people benefited from school feeding programs? What was the number thereof? And what are localities not taken into account in implementing school feeding programs and why? What was the impact of these programs on the school attendance rate?

II-3 HEALTH

18. Had equipment and drugs intended for health facilities of areas difficult to access really reached their destination?
19. Weren't they diverted? If so, had they faced the pathologies for which they were supposed to serve?
20. In the case where these equipment and drugs were diverted, what was the fate of perpetrators of these diversion or misappropriation?
21. What was the category of these perpetrators of diversion? (Humanitarian actors? Government's agents? Soldiers? Doctors, Nurses ?)
22. What was the vaccination coverage rate?
23. Had the vaccination been the object of reluctance in the displaced families? Why? (Or to tell it in other words, were there displaced families that were averse to being vaccinated, why?)
24. Were pregnant and breastfeeding women seen in prenatal and post-natal consultations during and after displacements?
25. Had pregnant women particularly benefited from care during delivery?
26. Was there enough staff in the health facilities in order to take care of these pregnant women?
27. Were awareness-raising campaigns on essential family practices carried out during displacements? If so, what were the objectives set, tools or materials used and what were topics addressed? Please provide the communication plan and the level of monitoring and evaluation.
28. Have women of childbearing age received the dignity kits? How many should they receive? Was the goal achieved? What were these kits made of?

II-4 WATER- HYGIENE- SANITATION

29. Were there any sources for water supply? How many were they planned in the building plan? How many were they built?
30. Was this water chlorinated before consumption? Was the amount of chlorine sufficient? Did the delivered water meet quality standards ?
31. Were there any emergency latrines in health facilities, in IDPs camps?
32. Were these latrines built taking account recommended distance standards?
33. Were communications for the adoption of behaviors favorable to the prevention of water-borne diseases reinforced?
34. What were themes addressed during these communications?
35. What were tools used for these awareness-campaigns and what was their impact after this reinforcement?
36. What was the proportion of cases of water-borne diseases after this reinforcement?

II-5 INCOME-GENERATING ACTIVITIES (IGAs), AGRICULTURE AND OTHER DURABLE SOLUTIONS

37. What strategies were put in place to promote access to IGAs as part of agriculture?
38. Were displaced women taken into account in IGAs and in agricultural activities? If so, how many were they? (Or what was their proportion).
39. Hadn't they experienced discrimination? Had these activities allowed them to meet their needs?
40. Was there any resistance in the granting of cultivable lands to displaced populations? How was the advocacy conducted for the provision of lands to displaced households?

II-6 PROTECTION

41. Are you aware of particular issues of violence and rights violation that women, children, disabled people and the chronically ill faced during and after displacement?
42. Who have been the perpetrators of these acts?
43. What has the State done against the perpetrators of these acts?
44. Were there any listening and counseling units for displaced people?
45. What tools or materials were used for preventive awareness campaigns against violences, stress and trauma management? Were these tools relevant?
46. What impact had they upon IDPs? Was there any psychological care program for displaced victims?

47. Did children borne during and immediately after displacement have birth certificates? How did their mothers manage to have them?
48. Were there any unaccompanied children in different IDPs camps? If so, what kind of support did they benefit from? Were they placed with Churches, adoptive families? Were they reunited with their families later?
49. What are problems met by different displaced families as regard their physical security, that of their possessions and property and that of their administrative documents in general?
50. Which preventive steps has your Government taken to face these problems?
51. Were there really child-friendly spaces (CFS)? What activities were they doing? Did they arouse the interest of parents and children?

II-7 EDUCATION

52. What are the main actors involved in the management of the right to education of displaced children?
53. What is the impact of the distribution of school kits and other forms of assistance in schools attended by displaced children, teenagers and young people?
54. What is the content of these kits and school canteens established in areas difficult to access?
55. Were some children favored to the detriment of others?
56. Have you heard about diversion of food intended for displaced children, teenagers and young people?
57. Were temporary learning spaces (TLS) really established in areas not having schools? What was the impact thereof?
58. How many children were attending these elementary school cycles?
59. Compared to their housing capacities, were learning conditions better?
60. Has this education helped displaced children and teenagers overcome emotional impact generated by the conflict arisen in the Pool region?
61. Has it limited the chances of recruiting displaced children by Ninja militias?
62. Has it focused on key messages such HIV/AIDS, abuse and exploitation prevention?
63. Did the curriculum culturally, linguistically and socially meet the needs of displaced children?
64. Were there appropriate methods to assess and validate results of teachings delivered?

65. Were teachers recruited according to criteria reflecting diversity and equality? Were they working in good conditions?

II-8 SHELTERS

66. Were needs for shelters for displaced people met? How?

67. Did the design and settlement of shelters meet humanitarian distance norms provided for in the Sphere Handbook or the UNCHR ones?

10.4: SHEET OF QUESTIONNAIRE FOR THE FOCUS GROUP DISCUSSIONS IN SOME DISTRICTS OF THE POOL REGION

QUESTIONNAIRE FOR THE FOCUS GROUP DISCUSSIONS IN THE POOL REGION

ASSESSMENT OF THE HUMANITARIAN SITUATION OF IDPs AS A RESULT OF THE CONFLICTS IN A SAMPLE OF THREE DISTRICTS OF THE POOL DEPARTMENT NAMELY KINDAMBA, VINDZA, KIMBA AND IN THE KINGOUE DISTRICT (BOUENZA) BORDERING THE POOL IN THE REPUBLIC OF CONGO BRAZZAVILLE

QUESTIONNAIRE

Département : _____

District : _____

Village : _____

Number of participants

Men/ Young boys: |__|__|

Women/ Young girls: |__|__|

Surname/ Name of the focus group
facilitator _____

Date Visit

DAY		MONTH		YEAR			

Discussion start time : |__|__|h|__|__|min

Discussion end time : |__|__|h|__|__|min

Language used for discussions: _____

Using a translator/Interpreter? : 1=Never;2=Sometimes ;3=Always

Instructions: This discussion guide should make participants feel comfortable and keep the discussion fluid and unstructured. The moderator should make them feel that there is no right or wrong answer. Therefore, it should start with "ICE-BREAKING" questions to general questions and then boil down to more specific questions.

For reasons of confidentiality and trust, precautions were taken to separate women from men and to have focus groups of young girls among themselves, adult women among themselves, and focus groups of young boys among themselves and adult men among themselves.

Introduction

Today, we would like to discuss on your humanitarian situation during and after the forced displacement as a result of the security crises in the Pool region. We will assess and talk about the forced displacement, nutrition and food security, health, WASH, education, protection, and durable solutions. How do you understand these concepts?

In summary, the moderator must ensure that participants in group discussions are at the same level of understanding of all the above concepts.

I. PHASE 1- CONCERNING FORCED DISPLACEMENT

1. In what village did you live before moving to seek refuge here?

Note: Opinion poll participants about their reasons for moving to this district and be able to engage in conversations with their friends, etc. to find out more about these reasons in order to know what forced displacement really is..

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2. Why did you choose to come here rather than to another village?

Note: The moderator should take what the participants say to stimulate discussion and to assess their level and degree of understanding of the term forced displacement. If the participants all respond in the same way, then the moderator should ask what should be done to prevent this from happening in the future?

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II. PHASE 2 - CONCERNING NUTRITION AND FOOD SECURITY

3- Did you receive food to feed yourself, and what was the quality of it and did you eat it?

Note: The moderator should collect responses from participants to further fuel the discussion on whether they actually ate the food or sold it locally or in the market of the neighboring department of Bouenza, and whether the food was diverted, if so, by whom, and whether were they prosecuted and convicted. ?

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4- How many of the above authors were there? From which category were they?

Note: The idea here is for the moderator to get participants in the discussion to name the category of actors who diverted the food: humanitarian workers? Militiamen? Civil servants? Soldiers?

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5- What was the food you were given? Were you satisfied with it?

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6- Were there any cases of malnutrition among you? If yes, how many of them were there? Did you receive therapeutic food drugs? Did the children from 6 to 59 months old also receive them? Who brought them to you? *Note: The moderator should pay attention to the participants' responses and be able to check through the conversations whether these therapeutic food medications were also served to people over 59 months of age. Also check if after the reinforcement of these food drugs, a change was felt.*

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7- Did the school feeding programs benefit displaced children attending schools in your district or village? What was the impact of these programs on your children?

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III- PHASE 3 HEALTH

8- Have you and your children been vaccinated?

NB: The moderator needs to know if these vaccinations were resisted by the displaced populations and host communities, if so why? For example: because of their customs or traditions etc.

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9-In your opinion, were pregnant and breastfeeding women received in prenatal and postnatal consultations?

NB: the moderator must insist on how these consultations were carried out and check, in addition to the kit, whether appropriate care was given during the delivery.

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10-Were there sufficient and qualified staff in the health centers in your villages and districts? Did the staff give you a warm welcome?

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11-Were you educated on essential family practices during and after your displacement? What topics were you educated on?

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12-Did women of childbearing age and girls in general receive dignity kits? What were the contents?

Note: the moderator must check whether these women and girls take their menstrual hygiene seriously

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IV- PHASE 4 WATER-HYGIENE-SANITATION

13-How do you get your water supply? Is the water you drink safe to drink? Is it chlorinated? By whom?

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14- How do you defecate? Do you have emergency latrines at the sites? If so, were they built with the proper distances standards?

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15- Have you been educated about adopting behaviors that prevent waterborne diseases?

Note : the moderator must be able to know the number of communications made and their impact on the displaced population and even the host community before and after they are held

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IV- PHASE 5 INCOME-GENERATING ACTIVITIES, AGRICULTURE AND OTHER DURABLE SOLUTIONS

16- As women, were you included in agricultural activities? If so, how many were you?

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17- Did the women experience discrimination? Did these activities allow them to meet their needs and those of their children?

NB: These questions will be asked sequentially in order to correlate them. The moderator should ask for typical examples of discrimination for clear understanding questions

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18- Was there any resistance in granting you cultivable land? How was advocacy conducted in the granting of this land to displaced households?

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19- Apart from the agricultural activities, were there any cash-for-work, cash-for-work, food-for-training activities planned and carried out for the displaced populations?

NB: The moderator, during the conversations, should look for the level of participation of displaced people in income-generating activities..

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VI- PHASE 6 PROTECTION

20- Are you aware of the particular cases of rape, violence and violations that women, people with disabilities and the chronically ill have faced during and after displacement?

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21- In your opinion, who were the perpetrators of these acts? What did the authorities do against them?

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22- Were there listening cells in the sites where you were based? Did you benefit from preventive awareness campaigns against violence, stress and trauma management?

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23- Did you have any births during and after the displacement? How did you get your children's birth certificates?

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24- Were there any of you parents who lost children during the displacement? If so, what did you do to find them and who helped you find them? The state? UNICEF? Others?

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25- What problems have you encountered regarding your physical security, the security of your possessions and property, and the security of your administrative documents in general?

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26- Were there any child-friendly spaces in the district where you were based and what activities did they do? Were they of interest to you as parents and to the children?

VII- PHASE 7 EDUCATION

27-Did your children attend school? Did they have school kits and other assistance for their schooling? Who provided them and what did they consist of and what was the impact of providing these kits to your children?

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28- Were there any temporary learning spaces in your district/village? Did the programs in these spaces meet the cultural, linguistic, and social needs of your children?

NB: The moderator should get answers on the following: What are all the things that would discourage you from sending your child to school or these spaces? What are all the things that would encourage you to send your child there? How would you feel if you did not send your child to school? How would you feel if you did not?

On the other hand, if participants respond that they have not been interested in sending their children to school, then the moderator should build on that response and ask why?

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29-Do you think that there are weaknesses in teaching methods?

NB: The moderator should ask participants if there are things that they would like to know about best teaching methods for displaced children.

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10.5: QUESTIONNAIRE FOR LOCAL PUBLIC AUTHORITIES OR LOCAL PUBLIC ADMINISTRATIONS AT LES BANDAS IN THE NIARI REGION

III- IDENTIFICATION

Name of the administration:

Address of the administration:

Headquarter:

Tel:

Email:

City/ Department: Area Code.....

Questionnaire inspection date :.....

Contact persons Name..... Contact persons phone nos.....

I-1 COORDINATION

- 1- Were there any state actors to cope with the flooding in the Niari department particularly in the Les Bandas? If so, which ones and what are their strategies and capacities to cope with this disaster, before and after the flood?
- 2- Have these actors been assisted by local and international operational players?

I-2 FOOD SECURITY

- 3- What was the composition of the ration distributed to the population affected by the flood?
- 4- Did the plantations of the affected population survive the flood? If so, and what were the activities carried out by the public authorities and their partners to help the populations who lost their plantations?
- 5- What were the activities of the flood-affected population before and after the flood?

I-3 NUTRITION

- 6- Have there been cases of malnutrition among the population affected by the flood, particularly among pregnant and breastfeeding women and children aged 0 to 5 years? If so, have these cases been treated?

I-4 WATER- HYGIENE-SANITATION

- 7- Were water treatment points installed in the gathering sites of the population affected by the flood? If so, how was the water treated?
- 8- Were hygiene kits distributed to vulnerable population?
- 9- Were emergency latrines built in the gathering sites of flood victims? If so, were they disinfected?
- 9- Were awareness campaigns organized for the population affected by the flood? What were the themes addressed?

I-5 PROTECTION

- 11- Were adequate resources provided to families and identification services to facilitate birth registration and access to identity documents during the recovery phase?
- 12- Were play areas and other educational talks set up at the reception sites?

13- Were there any children and students who suffered psychological shock and trauma from the flood? Were these victims taken care of?

14- Were there any victims of Gender Based Violence?

I-6 HEALTH

15- Did pregnant women benefit from individual delivery kits?

16- Was epidemiological surveillance of flood-related diseases conducted?

17- Were cholera and malaria kits distributed to flood-affected populations?

18- Were impregnated mosquito nets distributed to the population affected by the flood?

19- Were children from 0 to 4 years old vaccinated against measles?

I-7 SHELTER AND NON-FOOD ITEMS

20- Were vulnerable households in Les Bandas located far from the mainland assisted in relocation? If so, how many?

21- Were vulnerable people in Les Bandas (living with disabilities, living alone, and elderly) assisted with shelter and essential household items? If so, how many?

22- Did the owners of the houses:

- affected and/or collapsed

- totally collapsed or destroyed

- partially damaged, receive kits with masonry and carpentry tools for their construction/rehabilitation?

23- Did these owners receive mud cleaning kits? Essential household items (kitchen kits, hygiene kits, protection kits etc)?

I-8 EDUCATION

24- Did the Government set up temporary education spaces to ensure the continuity of education for children affected by the flood?

25- How many students were accommodated in these spaces?

26- Did these students benefit from material and school kits? Who provided them?

27- Did girls attend these spaces or did only boys have access?

10.6: GUIDE FOR INTERVIEWS WITH RELOCATED FLOOD-AFFECTED POPULATIONS OF LES BANDAS DISTRICT IN THE NIARI REGION

A- IDENTIFICATION

- 1- What is your name?
- 2- How old are you?
- 3- What is your district, village of origin?

B-KNOWLEDGE OF NATURAL DISASTERS

- 4- Do you know natural disasters? If so, can you give us an example of a natural disaster?
- 5- How would you describe the phenomenon that occurred at Les Bandas following the rain that had fallen there on February 25, 2018?

C-PROTECTION, ASSISTANCE.....

- 6- Has local or national coordination really played its role?
- 7- Explain how were you identified?
- 8- As a pregnant woman, were you cared for normally? Were you monitored during your pregnancy and during the delivery, did you receive delivery kits?
- 9- Did you benefit from the dignity kits?
- 10- Have you been vaccinated? Have your children aged 0 to 5 years been taken into account during these vaccinations?
- 11- Have you received protection kits against malaria, cholera? Do you suffer from water-borne diseases?
- 12- Do you have drinking water supply sources? Are these waters purified? If yes, with which products? Are these products made available to you or not?
- 13- Do your children go to school? If yes, where do they find school kits? If no, are there temporary learning spaces here? Are there any child-friendly spaces?
- 14- Do the authorities conduct for you, awareness campaigns on cholera? On which themes do they base their awareness campaigns?
- 15- You are no longer at home, how do you feed yourself? Does food fall from the sky? Who supplies you with food? What is this food made of? Are you satisfied with this food?
- 16- Have you been affected psychologically by the flood of Les Bandas? How did you manage to overcome this shock? Did the government send a team to detect and follow you? Did you pay for these treatment sessions?

17-And how are your relatives and friends who suffer from chronic diseases treated?
Are they taken care of or left to their own?

18-What difference do you make in the way you are taken care of by the public
authorities before and after the flooding?

19-Are there warning systems in the community? And what would you do in the near
future if such a disaster were to happen again? Have you been taught how to resist
or cope with it? Does the department have material means and sites for relocating
populations in case of a flood or any other disaster?

20-Did you lose any property or administrative documents as a result of the flooding of
Les Bandas? What measures have been taken by the departmental authorities so
that you can recover them?

21-Where will you move to after this disaster? And what does the State plan to do to
remedy this situation?

22-What difficulties did you face?

23-How do you appreciate the capacities of the departmental and national coordination
in the care that is reserved for you?

24-What do you think the public authorities can do to allow you, in the immediate
future, to return to live in your locality of origin and, in the long term, to resume a
normal life independently?
