

TECHNICAL ANNEX

Great Lakes 2024¹

FINANCIAL, ADMINISTRATIVE, AND OPERATIONAL INFORMATION

The provisions of the financing decision ECHO/WWD/BUD/2024/01000 and the General Conditions of the Agreement with the European Commission shall take precedence over the provisions in this document.

The activities proposed hereafter are subject to any terms and conditions that may be included in the related Humanitarian Implementation Plan (HIP).

1. CONTACTS

Operational Unit in charge

DG ECHO²/D3

Contact persons at HQ

Head of Sector Great Lakes	Daniel Göhring	daniel.gohring@ec.europa.eu
DRC (national; Ituri, Kasai, North Kivu), Republic of Congo	Katia De Keukeleire (Desk Officer)	katia.de-keukeleire@ec.europa.eu
DRC (South Kivu, Tanganyika, Maniema), Burundi crisis (Burundi, DRC, Rwanda, Tanzania)	Raphaële Magoni (Desk Officer)	raphaele.magoni@ec.europa.eu

Contact persons at Field

Great Lakes	Johan Heffinck (Head of Office based in Kinshasa)	johan.heffinck@echofield.eu
DRC (national), Burundi crisis (Burundi, DRC, Rwanda, Tanzania), Republic of Congo	Julie Bodin (Technical Assistant based in Kinshasa)	julie.bodin@echofield.eu
DRC (eastern provinces)	Norik Soubrier (Technical Assistant based in Goma) Julie La Roche (Technical Assistant based in Goma)	norik.soubrier@echofield.eu julie.la-roche@echofield.eu

¹ This HIP covers the following countries: Burundi, Democratic Republic of the Congo, Republic of Congo, Rwanda, Tanzania.

² Directorate-General for European Civil Protection and Humanitarian Aid Operations (ECHO)

2. FINANCIAL INFO

Indicative Allocation³: **EUR 110 683 339** of which an indicative amount of **EUR 6 000 000** for Education in Emergencies.

Programmatic Partnerships:

Programmatic Partnerships have been launched since 2020 with a limited number of partners. An indicative amount of **EUR 2 250 000** will be dedicated to ongoing Programmatic Partnerships in 2024⁴. New Programmatic Partnerships could be funded under this HIP⁵.

Indicative breakdown per Actions as per Worldwide Decision (in euros)⁶:

Country(ies)	Action (a) Human-induced crises and natural hazards	Action (b) Initial emergency response/small-scale/epidemics	Action (c) Disaster Preparedness	Actions (d) to (f) Transport / Complementary activities	TOTAL
DRC & Great Lakes Region	98 391 564		4 750 000		103 141 564
Burundi regional	6 000 000				6 000 000
Congo Brazzaville	1 200 000				1 200 000
Coordination and communication	341 775				341 775
Total	105 933 339		4 750 000		110 683 339

3. PROPOSAL ASSESSMENT

a) Co-financing:

Under the EU Financial Regulation, grants must involve co-financing; as a result, the resources necessary to carry out the action must not be provided entirely by the grant. An action may only be financed in full by the grant where this is essential for

³ The Commission reserves the right not to award all or part of the funds made or to be made available under the HIP to which this Annex relates, or to allocate part of the funding to interventions with a regional or multi-country approach.

⁴ EUR 1 750 000 million for the ongoing OCHA PP and EUR 5 944 400 for the ongoing IFRC PP.

⁵ More information can be found in the 'Guidance to Partners – DG ECHO Programmatic partnerships 2024' <https://www.dgecho-partners-helpdesk.eu/programmatic-partnership/programmatic-partnership>

⁶ For flexibility and fast responsiveness purposes, this breakdown can be adjusted within certain limits based on newly arising needs.

it to be carried out. In such a case, justification must be provided in the Single Form (section 10.4)⁷.

b) Financial support to third parties (implementing partners)

Pursuant to Art. 204 Financial Regulation, for the implementation of actions under direct management under this HIP, partners may provide financial support to third parties, e.g., implementing partners. This financial support can only exceed EUR 60 000 if the objectives of the action would otherwise be impossible or excessively difficult to achieve. In such cases, justification must be provided in the Single Form (section 10.6) based on the following grounds: a limited number of non-profit NGOs have the capacity, skills or expertise required; there are only a limited number of organisations in the country of operation, or in the region(s) where the action takes place; in a confederation, family or network context, the partner would rely on other members of the confederation, family or network to ensure geographical coverage, while minimising costs and avoiding duplication.

c) Alternative arrangements

In case of country or crisis-specific issues or unforeseeable circumstances, which arise during the implementation of the action, the Commission (DG ECHO) may issue specific ad-hoc instructions which partners must follow. Partners may also introduce via the Single Form duly justified requests for alternative arrangements to be agreed by the Commission (DG ECHO) in accordance with Annex 5 to the Grant Agreement.

d) Field office costs

Costs for use of the field office during the action are eligible and may be declared as unit cost according to usual cost accounting practices, if they fulfil the general eligibility conditions for such unit costs and the amount per unit is calculated:

- i. using the actual costs for the field office recorded in the beneficiary's accounts, attributed at the rate of office use, and excluding any cost which are ineligible or already included in other budget categories; the actual costs may be adjusted on the basis of budgeted or estimated elements, if they are relevant for calculating the costs, reasonable and correspond to objective and verifiable information

and

- ii. according to usual cost accounting practices which are applied in a consistent manner, based on objective criteria, regardless of the source of funding.

e) Actions embedded in multi-annual Programmatic Partnerships⁸

⁷ Single form guidelines: <https://www.dgecho-partners-helpdesk.eu/ngo/action-proposal/fill-in-the-single-form>

⁸ See the dedicated [guidance](#) on Programmatic Partnerships.

Funding under this HIP may be used to finance actions implemented in the framework of multi-annual strategies (Programmatic Partnerships), as and when provided for in the HIP. Programmatic Partnerships can be at country, multi-country or regional level. If multi-country/regional, the proposals should specify the breakdown between the different country allocations.

f) Regional and multi-country actions (non-Programmatic Partnerships)

Regional/multi-country actions can be supported under this HIP (and where relevant in conjunction with other HIPs⁹), where they are proven more suitable/effective than country-based interventions to respond to identified needs, taking into account the operating context, the strategy and the priorities set out in the HIP (or respective HIPs), the operational guidelines provided in section 4.1.2. of this Annex, as well as the applicant organisation's capacities. The proposals should specify the breakdown between the different country allocations.

g) Multi-year funding actions¹⁰

HIPs may be used for multi-year funding actions, which should have a duration of minimum 24 months and the full budget is committed upfront. Specific policy areas for multi-year funding may be mentioned in the respective HIP. Multi-year funding actions aim at generating additional efficiency gains and improve design and delivery of humanitarian assistance. The submitted proposals should demonstrate these gains, which should be monitored during the implementation of the action and will have to be reported in the final reports of the action.

It is possible to request multi-year funding in the context of a Programmatic Partnership to be concluded with DG ECHO. In this situation, see section 3.e.

4. ADMINISTRATIVE INFO

Allocation round 2¹¹

For the part on Programmatic partnerships with IFRC

- a) Indicative amount : up to **EUR 5 933 339**.
- b) Costs will be eligible from **01/06/2023**.
- c) Potential partner: IFRC. The allocation is intended for the pilot programmatic partnership 'Accelerating local action in humanitarian and health crises' in DRC and Congo Brazzaville.

⁹ For multi country actions falling under more than one HIP, partners are requested to submit only one proposal in APPEL. The single form should refer to the HIP that covers the majority of targeted countries.

¹⁰ For more information - See the factsheet on EU Humanitarian Aid Multi-Year Funding available on the DG ECHO Website ([DGEcho WebSite \(dgecho-partners-helpdesk.eu\)](http://dgecho-partners-helpdesk.eu)) Additional information can be found here: Grand Bargain Quality funding commitments: [Grand Bargain Caucus on Quality Funding - Outcome Document - final - 11Jul22.pdf \(interagencystandingcommittee.org\)](https://interagencystandingcommittee.org) and Grand Bargain definitions: [Multi-year and flexible funding - Definitions Guidance Summary - Narrative Section January 2020.pdf \(interagencystandingcommittee.org\)](https://interagencystandingcommittee.org)

¹¹ The full implementation of this version of the HIP is conditional upon the approval of the transfer by the Budgetary Authorities.

d) Information to be provided: Single Form¹²For interventions in the Democratic Republic of the Congo (DRC):

- a) Indicative amount: up to **EUR 35 000 000**.
- b) Costs will be eligible from **01/07/2024**¹³
- c) The initial duration for the Action may be up to 24 months or more¹⁴ provided that the added value of a multi-annual duration is demonstrated by the partner¹⁵. Education in Emergencies and Disaster preparedness actions do not need further justification and should have an initial duration of at least 24 months unless there is a needs- or context-based justification for a shorter duration. Follow-up actions, which continue/extend ongoing operations financed under a previous Humanitarian Implementation Plan, can be submitted as modification requests to extend the overall duration to a maximum of 48 months. The same approach may also be used to the extent appropriate in furtherance of any multi-annual strategies provided for by the HIP (see point e) of section 2 above).
- d) Potential partners¹⁶:
 - **First priority:** Partners whose proposals for funding submitted under allocation round 1 were put “on hold” due to a lack of available budget during allocation round 1, and whose proposals are still considered relevant and feasible.
 - **Second priority:** Partners whose proposals were selected for funding under allocation round 1 can apply for a top-up to address the priority sectors and areas mentioned below under point (e). These partners are already implementing ECHO funding in affected areas, thus are able to provide an immediate response to the additional needs identified by reinforcing their ongoing action in the priority sector(s) mentioned, having demonstrated already their capacity to operate in hard-to reach areas and to deliver a highly effective response in their sector(s).
- e) Priority sectors and areas: Health, nutrition, RRM, WASH, protection, shelter and food security interventions, in particular in under-served geographic areas (South Kivu, Tanganyika), but also in North Kivu, Ituri and Mai-Ndombe to respond to new and unforeseen humanitarian needs. Only interventions in the **Democratic Republic of the Congo (DRC)** are eligible under allocation round 2.

¹² Les formulaires uniques doivent être adressés à la DG ECHO à l'aide du système APPEL.

¹³ *The eligibility date of the Action is not linked to the date of receipt of the Single Form. It is either the eligibility date set in the Single form or the eligibility date of the HIP, whatever occurs latest. In case of amendments to existing agreements, the eligible date will however be the eligible date set in the initial agreement.*

¹⁴ Maximum duration of an action is 48 months.

¹⁵ See the factsheet on EU Humanitarian Aid Multi-Year Funding (November 2022) available on the DG ECHO Website ([DGEcho WebSite \(dgecho-partners-helpdesk.eu\)](https://dgecho-partners-helpdesk.eu))

¹⁶ Unless otherwise specified potential NGO partners refer to certified partner organisations.

- f) Information to be provided: Single Form (for first priority partners) or Modifications requests of on-going actions (for second priority partners).¹⁷
- g) Indicative date for receipt of the above requested information: by **28/08/2024**.

Allocation round 1

- a) Indicative amount: up to **EUR 69 750 000**.
- b) Costs will be eligible from **01/01/2024**¹⁸
- c) The initial duration for the Action may be up to 24 months or more¹⁹ provided that the added value of a multi-annual duration is demonstrated by the partner²⁰. Education in Emergencies and Disaster preparedness actions do not need further justification and should have an initial duration of at least 24 months unless there is a needs- or context-based justification for a shorter duration. Follow-up actions, which continue/extend ongoing operations financed under a previous Humanitarian Implementation Plan, can be submitted as modification requests to extend the overall duration to a maximum of 48 months. Actions that are extended further to modification requests can be funded under a maximum of three successive Humanitarian Implementation Plans. The same approach may also be used to the extent appropriate in furtherance of any multi-annual strategies provided for by the HIP (see point e) of section 2 above).
- d) Potential partners²¹: All DG ECHO Partners
- e) Information to be provided: Single Form or Modifications requests of on-going actions²²
- f) Indicative date for receipt of the above requested information: by **11/01/2024**.

4.1. Operational requirements:

4.1.1. Assessment criteria:

- 1) Relevance
 - How relevant is the proposed intervention; is it compliant with the objectives of the HIP?
 - Has a joint needs assessment been used for the proposed intervention (if existing)? How have the local partners been included in the needs

¹⁷ Single Forms will be submitted to DG ECHO using APPEL.

¹⁸ *The eligibility date of the Action is not linked to the date of receipt of the Single Form. It is either the eligibility date set in the Single form or the eligibility date of the HIP, whatever occurs latest. In case of amendments to existing agreements, the eligible date will however be the eligible date set in the initial agreement.*

¹⁹ Maximum duration of an action is 48 months.

²⁰ See the factsheet on EU Humanitarian Aid Multi-Year Funding (November 2022) available on the DG ECHO Website ([DGEcho WebSite \(dgecho-partners-helpdesk.eu\)](https://dgecho-partners-helpdesk.eu))

²¹ Unless otherwise specified potential NGO partners refer to certified partner organisations.

²² Single Forms will be submitted to DG ECHO using APPEL.

assessment efforts? Have other recent and comprehensive needs assessments been used?

- Has the proposed intervention been coordinated with other humanitarian actors and local and national actors?
- 2) Capacity and expertise (including in support to the localisation approach)
- Does the partner, with its implementing partners, have sufficient expertise (country / region and / or technical)?
 - How does the partner contribute to developing/strengthening local capacity?
- 3) Methodology and feasibility
- Quality of the proposed response strategy, including intervention logic / logframe, output & outcome indicators, risks, and challenges.
 - Feasibility, including security and access constraints.
 - Quality of the monitoring arrangements.
 - Quality of the proposed localisation approach, and measures taken to minimise the transfer of risks.
- 4) Coordination and relevant post-intervention elements
- Extent to which the proposed intervention is building on ongoing local response and in coordination with other humanitarian actors and actions (including, where relevant, the use of single interoperable registries of beneficiaries).
 - Extent to which the proposed intervention contributes to resilience and sustainability, including the sustainability of locally driven responses.
- 5) Cost-effectiveness/efficiency/transparency
- Does the proposed intervention display an appropriate relationship between the resources to employed, the activities to be undertaken and the objectives to be achieved?
 - Is the breakdown of costs sufficiently documented/explained, including the information on percentage of funding to be implemented by local actors and the share of overhead costs transferred to them?²³

In case of actions ongoing in the field, where DG ECHO is requested to fund the continuation thereof, a field visit may be conducted by DG ECHO field expert (TA) to determine the feasibility and quality of the follow-up action proposed.

In case of a Programmatic Partnership, the proposed action shall be assessed under the same criteria as listed above. However, a Programmatic Partnership proposal must also

²³ In accordance with the relevant section of the Single Form guidelines (section10)

demonstrate a clear added value (e.g. efficiency gains; longer term outcomes, scaling up of innovative approaches; contribution to a specific policy; etc.). See dedicated guidance to partners for more details.

No award will be made to NGO partner organisations which have not complied with their obligations concerning the submission of audited financial statements (i.e., which would not have submitted those in due time to the Commission without a proper justification) or which would appear not to offer sufficient guarantee as to their financial capacity to implement the proposed actions (in light of their liquidity and independency ratios as appearing from their latest available annual statutory accounts certified by an approved external auditor).

All awards made using EU Funds must respect the Conditionality Measures²⁴ issued under any Council Implementing Decision adopted in accordance with Article 6 of EU Regulation 2020/2092 on a general regime of conditionality for the protection of the Union budget²⁵ (“Conditionality Decision”).

The Commission hereby notifies applicants under this HIP/TA of the following Conditionality Decision (valid at the date of publication of this HIP/TA):

- **Council Implementing Decision (EU) 2022/2506 of 15 December 2022 on measures for the protection of the Union budget against breaches of the principles of the rule of law in Hungary²⁶.**

This Conditionality Decision, in particular its Article 2.2, prohibits legal commitments under direct and indirect management with any public interest trust established by Hungarian Act IX of 2021²⁷, including those entities listed in Annex I to Hungarian Act IX of 2021²⁸ and other affiliated entities maintained by them (“Concerned Entities”). The Commission will further notify when the above-mentioned Conditionality Measures are lifted.

4.1.2. Specific operational guidelines and operational assessment criteria:

This section outlines the specific operational guidelines that DG ECHO partners need to consider in the design of humanitarian operations supported by DG ECHO. It also lists and explains the assessment criteria – based on those outlined in section 4.1.1 - that DG ECHO will apply in the specific context of the HIP to which this Technical Annex relates when assessing proposals submitted in response to the related HIP.

²⁴ Conditionality Measures against a Concerned Entity, may, for example, include, amongst others, the requirement to: suspend payments or the implementation of the legal commitment to/with the Concerned Entity; and/or terminate the legal commitment with the Concerned Entity; and/or prohibit entering into new legal commitments with the Concerned Entity. Conditionality Decisions and Measures issued under Council Implementing Decisions may impact the implementation of grants, contributions and procurement contracts awarded, as the Commission is required to ensure the application of these Conditionality Decisions and Measures in the implementation of the EU budget via both direct and indirect management.

²⁵ Regulation (EU, Euratom) 2020/2092 of the European Parliament and of the Council of 16 December 2020 on a general regime of conditionality for the protection of the Union budget OJ L 433I , 22.12.2020, p. 1–10

²⁶ OJ L 325, 20.12.2022, p. 94–109

²⁷ Act IX of 2021 on public interest trust foundations with a public service mission (entry into force 01/01/2023).

²⁸ Available (in Hungarian) at: <https://njt.hu/jogszabaly/2021-9-00-00>

In line with the DG ECHO guidance on **localisation**²⁹, and unless duly justified, DG ECHO will expect that proposals are based on partnerships with local actors, including through the participation and leadership of local and national actors in the project cycle, giving them space in the governance process, allocating an appropriate share of funding to local partners. In case of proposals of similar quality and focus, DG ECHO will give priority to proposals where at least 25% of DG ECHO's contribution will be spent on activities implemented by local and national actors. DG ECHO also expects partners to provide an adequate share of overhead cost to their local implementing partners. In addition, DG ECHO will prioritize proposals where the locally led action constitutes a central element and which are designed bottom up, and where DG ECHO partners provide relevant support to local partners' response (technical training, institutional support, peer learning). DG ECHO encourages proposals that include capacity strengthening and capacity sharing methodologies and initiatives, including institutional capacity strengthening of L/NAs. Similarly, DG ECHO will support partners in providing L/NAs with safety- and security-related resources and equipment to mitigate risks, including safety- and security-related training, where such costs are shown to contribute to achieving the objectives of the action.

Regarding **logistics (meaning the entire supply chain)**, DG ECHO will consider supporting strategic solutions such as shared and / or common services, joint procurement, etc. if their cost-efficiency and benefit in increasing effectiveness and timeliness of the response is demonstrated, in line with DG ECHO's Humanitarian Logistics Policy (or Humanitarian Strategic Supply Chain and Logistics – SSC). DG ECHO also encourages the application of the Humanitarian Logistics Policy more widely, in particular the key considerations set out in Annex 1: Framework for Operations.

The majority of organisations' environmental footprint comes from their logistics/supply chains, and as such these offer an opportunity to minimise environmental impacts³⁰. Preference should be given to procurement, distribution, and use of environmentally sustainable items, reducing and optimising secondary and tertiary packaging, avoiding procuring single-use items, and favouring products with greater durability and high recycled content.

For **Education in Emergencies actions**, priority will be given to funding projects which target at least 50 % girls, unless there is a context-based justification for different targeting.

For cash in education projects, particular attention should be paid to sustainability of the interventions and, when possible, linkages to longer-term livelihood solutions.

Where assistance is to be delivered in the form of cash transfers, particular attention will be paid to the principles laid down in DG ECHO's cash thematic policy³¹, which will form the basis for the assessment and selection of partners. Partners will be expected to demonstrate a satisfactory efficiency ratio and should ensure that it is maintained

²⁹ Preference should be given to procurement, distribution, and use of environmentally sustainable items, reducing and optimising secondary and tertiary packaging, avoiding procuring single-use items, and favouring products with greater durability and high recycled content.

³¹ https://ec.europa.eu/echo/files/policies/sectoral/thematic_policy_document_no_3_cash_transfers_en.pdf

throughout the action, unless otherwise approved by DG ECHO. To the extent possible and considering the operational context, partners will be assessed on their ability to work based on common targeting criteria, single or interoperable beneficiary registries, a single payment mechanism, a common feedback mechanism and a common results framework. The large-scale cash guidance note (Annex 1 of the cash thematic policy) includes specific considerations for large-scale cash transfers: segregation of functions, cost-efficiency (including indirect costs), and full transparency on the costs to calculate the efficiency ratio.

Specific implementation of the following elements in the proposal should be demonstrated as appropriate:

- Mainstreaming of protection, gender, age and disability inclusion based on a comprehensive needs and risk analysis
- Strategies for effective prevention of and response to Gender Based Violence (GBV);
- Strategies for effective prevention of and response to Sexual Exploitation, Abuse and Harassment (SEAH), including adequate and victim/survivor-centred response approaches and reporting channels
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Environmental considerations

All partners are expected to include context-specific measures to reduce the environmental footprint of the proposed actions, while preserving their effectiveness, in compliance with the minimum environmental requirements set out in DG ECHO's Guidance on the operationalisation of the Minimum Environmental Requirements and Recommendations for EU-funded humanitarian aid operations³².

The minimum environmental requirements should be applied through a 'mainstreaming' approach with environmental impacts mitigated across sectors, projects and programmes with the aim to consider the environment holistically when designing and implementing actions. The requirements will apply to all sectors with special attention on mitigating the negative environmental impacts in protracted, chronic situations.

The HIP Policy Annex should be consulted in parallel.

4.1.2.1. Sector-Specific Priorities

Sector-specific priorities should reflect the minimum environmental requirements and be aligned with the text of the HIP itself.

STRENGTHENING EARLY RESPONSE CAPACITY

(1) Emergency/Rapid Response Mechanisms (ERM/RRM) as standalone actions

³² https://civil-protection-humanitarian-aid.ec.europa.eu/what/humanitarian-aid/climate-change-and-environment_en

Emergency/Rapid Response Mechanisms (ERMs/RRMs) are stand-alone actions pooling capacities of different partners for improved and more coordinated preparedness and early response, guided by early warning and contingency plans. ERMs/RRMs are designed to provide initial lifesaving multipurpose assistance when other response mechanisms are not yet in place. ERMs/RRMs are mostly used for rapid onset crises. For slow onset crises, objective indicators with thresholds for engagement / disengagement should be defined in coordination with other stakeholders including the State Authorities.

(2) Flexibility embedded into the actions

Whenever relevant, partners should introduce flexibility such as crisis modifiers to mobilise resources from on-going actions and swiftly respond to and/or act in advance of any new emerging shocks occurring and/or forecasted in the area of their operations (a crisis within a crisis). Flexibility measures can be triggered to provide initial lifesaving multipurpose response in the aftermath of a rapid onset crisis, as well as to act in advance of an imminent shock; the three main scenarios are: i) to fill the time gap while waiting for additional resources; ii) to respond to small scale humanitarian needs which would otherwise remain unattended; iii) to provide assistance in advance of an imminent shock to prevent or reduce its acute humanitarian impact, according to a pre-agreed plan with defined triggers and actions.

The application of flexibility measures should be based on a multi-risk analysis and the development of worst and most likely scenarios. Partners should develop a detailed plan considering prepositioning of stocks, surge staff, triggers, and sectors of intervention.

ERM/RRM and flexibility measures are complementary and do not exclude each-other; flexibility measures enable to act in advance and to bridge the time gap between the shock and the time needed to mobilize ad-hoc resources through the ERM/RRM or additional funding. Timeliness of response is a key element for effectiveness of both flexibility measures and ERM/RRM. Partners should adopt indicators to measure the time required to deliver the first assistance (e.g., lifesaving response for xxx persons, and/or need assessment within xxx days from the displacement/disaster/alert/exceeded triggers).]

(3) European Humanitarian Response Capacity (EHRC):

DG ECHO can decide on the activation of the EHRC should operational and logistical gaps emerge. The use of the EHRC support is described in the relevant EHRC Humanitarian Implementation Plan and its Technical Annex.

Under this HIP, DG ECHO can propose directly to one or more partners to receive and oversee the distribution of emergency relief items or hosting an EHRC humanitarian expertise. The choice of the partner will be taken by DG ECHO based on a set of criteria, such as presence in the affected area, and experience. The EHRC inputs will be part of the partner's response action and will, where relevant, be included in existing grant agreements.

(4) Disaster Preparedness actions

During the last years, an increasing number of countries and regions have been implementing targeted Disaster Preparedness actions, stretching the limited resources assigned to Disaster Preparedness to the maximum. In order to adapt to this increased demand in Disaster Preparedness, while ensuring an efficient use of the limited funds, and

with the recommendation for actions to have an initial duration of 24 months, starting from 2024 the Disaster Preparedness budget line will be allocated on a biennial basis. This means that a given country/region will receive Disaster Preparedness funding every two years, unless exceptional circumstances would require otherwise. Two-year allocations will allow more predictability and sustainability of the DP strategy in the relevant countries/regions, with expected higher impact and effectiveness of its objectives.

In order to ensure a smooth transition from the previous annual allocation of funds to the current biennial frequency, a limited envelope has been established in 2024 to facilitate the shift between modalities and address specific gaps in some countries impacted by the transition. These “bridge funds” will be typically allocated for the extension of ongoing actions that, based on strategic and programmatic considerations, are considered eligible for a top up to ensure expected objectives are met, and to mitigate any identified gaps resulting from the shift to the new allocation frequency. This measure will be applied only in 2024 to avert discontinuity and it is not meant to be repeated in 2025.

PROTECTION

DG ECHO will address urgent crisis-induced needs in the Great Lakes with **protection as an entry point for all sectors** and programmes to guarantee access to humanitarian aid for people of concern. It will support a humanitarian response that ensures **integrated programming with clearly articulated protection outcomes and protection mainstreaming**.

To safeguard the **centrality of protection**, partners should mainstream protection and use protection-sensitive targeting across other sectors, using gender and age markers. Access to basic services should be in line with a **do-no-harm approach**, meaningful access, accountability and participation. Special attention should be paid to **GBV risk mitigation** actions in humanitarian response actions. DG ECHO recommends referring to the recent guidance note and toolkit available online.

Interventions to strengthen **protection of civilians** exposed to violence, abuse, exploitation and/or neglect will be supported, including gender-based violence, child protection and violence in general. DG ECHO funds will prioritise integrated protection interventions to address violence against the most vulnerable and at-risk groups, including women and girls, adolescents, and men and boys. **Integrated protection actions** could cover the following activities: (i) protection and cross-border monitoring and information management system; (ii) comprehensive (age/gender sensitive) case management and/or referral; (iii) holistic GBV response actions, including access to health care (within 72hrs), mental health and psychosocial support, legal assistance, when feasible and appropriate, coupled with a strong advocacy component of access to justice for survivors of violence, and sustainable socio-economic integration alternatives/opportunities (in a nexus context), targeting survivors and at-risk populations without contributing to stigma or discrimination; (iv) cash transfer interventions (with a focus on protection needs) and individual protection assistance for vulnerable persons; (v) particular gaps in civil documentation; (vi) liaison with social protection mechanisms, especially in areas of returns, when possible; (vii) community-based protection approaches could be strengthened through community self-protection plans against any upsurge of violence, community structures and protection networks, mapping of shock-responsive social care structures and mechanisms in conflict-affected settings (include mapping of mobile response and static response capabilities); (viii) public dissemination of basic information on protection risks and available services through campaigns, social media, outreach and community mobilisation.

Structured prevention activities, in line with international standards and with clearly articulated intentional protection outcomes, may also be considered. (e.g. behavioural change actions)

New methodologies and innovative approaches should be explored to engage with humanitarian-development-peace nexus approaches.

Humanitarian advocacy on protection and respect of IHL should be embedded in the overall protection strategy of the organisation.

FOOD ASSISTANCE

Food assistance will be supported to address emergency needs within an **integrated multi-sectoral approach** to programming that aims at meeting **basic needs** of affected populations. DG ECHO prioritises **multipurpose cash** (MPC) to meet basic needs and timely referrals, to expand the access and provision of basic services and meet specific

sectoral outcomes. **Enhanced coordination**, starting with the adoption of **common, interoperable registration and delivery platforms**, are encouraged.

Assistance should prioritize **newly affected populations** such as recently displaced or recent shock-affected populations and **principled beneficiary targeting and verification** mechanisms should be in place. Food assistance for protracted displacements and/or in a crisis should be based on clear **needs-based vulnerability criteria** and livelihoods capacities going beyond the mere status and categorical-based approach giving first priority to the identified humanitarian needs.

HFA actions demonstrating **adequate cost efficiency** (TCTR) (refer to the cash policy for more information) alongside other quality programming aspects will be favoured. One-off assistance should be avoided where possible. **Markets** should be consistently monitored to inform and adapt assistance, irrespective of the modality. Attention should also be given to energy needs for cooking, to avoid unintended deforestation. DG-ECHO assistance should be provided **free of conditionality**, cash-for-work approaches are not encouraged.

NUTRITION

An intervention's entry point should be established based on **exceeding the emergency thresholds** for global acute malnutrition and/or a high probability that those levels will be exceeded in the short term such as in case of aggravating factors (such as displacement, natural disaster, disease outbreaks).

All nutrition needs analysis must be supported by surveys, studies and/or other technically sound evidence.

Direct involvement of humanitarian organisations in the provision of nutritional care is mandatory.

DG ECHO funding will **prioritise severe acute malnutrition** (SAM), but this could be extended in some cases to the **continuum of care** for moderately acutely malnourished children and pregnant and lactating women. Stand-alone services for moderate acute malnutrition will not be considered for funding. Actions applying the **simplified approaches** will be considered with interest, if health authorities in-country are supportive (as is the case now in the DRC), especially during emergencies when it could improve quality, efficiency and coverage of the nutrition program.

The treatment of acute malnutrition and any related medical complications should be **integrated in existing health systems** and must be provided to the beneficiaries free of charge.

Activities undertaken in all sectors should aim at **optimising impact on the nutrition** status of target communities to ensure a holistic and multi-sectoral approach for preventing under-nutrition and reducing risk of malnutrition. Attention should also be paid to proper waste management of nutrition packaging.

HEALTH

(Risk of) crisis-induced **excess morbidity/mortality** should be the entry point for a health response. The medical response (lifesaving first – focus on main killers) can be through support to existing health services/systems and/or stand-alone service delivery.

Humanitarian support to health systems/facilities supported by development partners should be complementary (to the extent possible) and address **humanitarian health gaps**. An overview of capacities, performance, gaps, (population based) risks and support by different actors/donors is to be provided per facility (updated/complemented throughout the action). Financial and other support to facilities/systems needs to be harmonized (mise en commun) to the extent possible and use of development partners' financial systems to be considered. Cost-efficiency estimates for supported facilities need to take into account support by other actors/donors.

Quality assurance mechanisms/measures for health services need to be documented. A 'critical incident analysis' to assess service delivery gaps is recommended. Gaps in coverage in preventive health (e.g. vaccination) which are induced by population movement are to be assessed and addressed with a description of partners' comparative advantages (in complement to existing systems).

A **risk assessment for** disease outbreaks and other **health emergencies** is to be provided (updated throughout action) and gaps identified/addressed. Partners should be able to provide an initial medical response (crisis modifier). Risks for nosocomial transmission in supported health facilities should be addressed, as should be community engagement for early case-detection and outbreak control.

Screening for, prevention and treatment of **severe acute malnutrition is to be integrated** in supported health facilities/communities health actions. A specific focus is encouraged on **SRH** (for adolescents, also in the context of SGBV) and **MHPSS** (coordination, capacity building): increased access to services for most vulnerable with provision of community outreach services when needed.

For the follow-up of high-need individuals (GBV, severe illness/mental health, victims of violence,...), a protection centered approach is to be adopted. Measures to improve safety of healthcare workers/premises and supplies are to be part of health proposals.

Mechanism to monitor **population data/vital statistics** are to be included also to identify coverage gaps for health and nutrition interventions. Documentation of (health) needs and (impact of) response is to be continued throughout the action and be utilized for advocacy (other sectors' needs) when needed. National health data management systems (DHIS2) need to be used (supported in case of need) also to increase transparency. Baselines and trend analyses need to be done based on these data. Use of supplementary data systems needs to be well considered to prevent overload of health workers.

Performance monitoring for medical supply management needs to be provided (% of supplies used). Proper waste management of healthcare waste should be ensured.

WASH & SHELTER

Emergency WASH interventions in conflict or natural disaster affected communities should focus on the **restoration** (repairs, mainly) of existing services damaged by the parties in conflicts or natural disasters to resume **minimum required services** to the affected populations. No upgrading of services is foreseen unless communities are hosting a high number of IDPs, refugees or returnees whose presence is likely to overwhelm their initial capacity and/or generate a public health related hazard.

WASH in protracted displacement situations should focus on **building self-reliance** looking at water supply as a market. **Water trucking** is to be considered only as a **last resort** with a clearly demonstrated - through a preliminary feasibility study - exit strategy and should be funded by default using Cash modality. **Water quality standards** assurance and monitoring is required. Quality assurance is a must for all WASH and Shelter interventions (including quality of technical survey/design and quality control of construction materials). In case of infrastructural works, the **cost of water production** per m³ should be estimated based on O&M needs and cost assumptions. In case of sanitation construction (latrine), beyond the number of facilities to be built, the **duration** of the use should be provided based on the size of the pit and estimated number of users. In case of de-sludgeable latrines, the **feasibility** to safely collect and dispose the sludge should be demonstrated (with cost estimation).

WASH response to Cholera, Ebola and other related **epidemics** must complement the health response for affected populations focusing on risk communication, community engagement (RCCE) and interventions aiming at preventing further spreading. This is to be achieved through disinfection of potential sources of contamination and strengthening access to safe water.

Shelter & Settlements should address access to minimum accommodation and all basic services for the most vulnerable of the affected populations. Cost analysis should be provided to ensure optimal use of resources in order to maximize impact in a context of high needs and limited resources.

All WASH and Shelter and Settlement interventions must be developed **based on the outcomes of the environmental screening** which should be carried out before implementation. An environmental report should outline the main environmental challenges specific to the interventions and the mitigation strategies that have been considered to address them.

EDUCATION IN EMERGENCIES (EiE)

Proposals should explicitly and transparently demonstrate **sound coordination with other education initiatives** and development actors (such as ECW, GPE and EU funds), be in line with existing government-led education response plans and prepare where necessary the transition of programmes to education authorities and communities.

EiE interventions should target the **most vulnerable children**, displaced or affected by conflict, and more specifically out-of-school and drop-out boys and girls, over-age children, through formal and non-formal education opportunities. All EiE actions should target a **minimum of 50 percent girls**.

Project proposals should aim at **increasing access to primary level formal and non-formal education opportunities** for vulnerable children, with priority given to IDPs and refugees. Interventions should **tackle identified barriers to education**, i.e. through provision of teaching and learning material, support and compensation to teaching personnel, provision of temporary learning spaces (TLS) or light school building rehabilitation, establishment of, or support to, already existing non-formal education (NFE)¹ programmes.

Project proposals should also aim at **increasing education quality and learning outcomes** and be aligned with the school academic year to avoid any further disruptions. Environmental activities (e.g. extracurricular activities) should also be considered in the day-to-day running of schools. All EiE actions should have a **minimum duration of 24 months**.

Retention and transition of children to the next school year and cycle should be measured. Teachers and other education personnel should be supported with relevant and tailored **professional development opportunities**, so that teachers are at ease with the curriculum and can deliver it to their classes which often have an overwhelming number of students. This is important for increasing motivation and attendance and decreasing turnover of staff. Teacher well-being is important recognising the direct impact that teacher well-being has on learning.

Child safeguarding mechanisms must be established and must be built upon a **sound risk analysis** and should address the most **life-threatening protection risks**. Proposed actions should promote protection of the schools from attacks and support the implementation of the ‘Guidelines for Protecting Schools and Universities from Military Use during Armed Conflict’.

Integrated programming beyond just EiE and child protection is strongly recommended, to maximize the impact of the intervention in each conflict-affected context, including referral systems and/or provision of PSS and MHPSS services.

DG ECHO is encouraging partners to **increase the timeliness of their interventions in EiE**, through rapid education responses following the guidelines developed by the Global Education Cluster. These rapid education responses may be integrated into multi-sectoral rapid response mechanisms or could be in parallel or standalone, ensuring established exit strategies.

DISASTER PREPAREDNESS

Proposed DP approaches should address all prevailing hazards and risks – including slow-onset, secondary and compounding risks such as conflict, displacement, epidemics etc, and clearly demonstrate the linkages based on the context. In addition to preparedness in conflict and fragile settings, there is a clear need for preparedness for conflict and other situations of violence. All interventions should as much as possible aim at integrating anticipatory/early actions, based on forecasts from recognized authorities/sources and backed up by a comprehensive risk analysis, preferably conducted in collaboration with other stakeholders (DG ECHO Disaster Preparedness Guidance Note³³).

Anticipatory action and enhanced predictability of response can only be achieved if local preparedness and response capacities are in place; therefore, preparedness actions must strengthen first responders’ capacity to act as locally and as early as possible. A system-wide approach is encouraged to ensure linkages and simultaneous capacity-strengthening from community to national governmental level, whenever possible, whilst respecting the do no harm principle, and other humanitarian principles.

³³ https://civil-protection-humanitarian-aid.ec.europa.eu/document/download/13015e8b-acaf-4d8a-b665-d2aab142c97b_en

Gender perspectives and cultural diversity, including the local/indigenous knowledge should be taken on board to ensure no population at risk is left behind.

Multi Hazard Early Warnings Systems (MHEWS) play a crucial role in promoting DP. Actions proposing EWS strengthening should elaborate on which components of the EWS are included and how these will be interlinked. ³⁴

Coordination with developmental actors to promote and advocate for the institutionalization of Disaster Preparedness strategies - notably around disaster risk financing including adaptive/shock-responsive social protection systems that could be activated by pre agreed, well defined risk triggers - will be crucial.

For this region, **DRC will be funded for targeted disaster preparedness action**, specific details can be found in the country specific component below. Besides, **regional projects** that promote regional or multi-country approaches and strategies are encouraged where relevant.

4.1.2.2. Country Specific Priorities

DEMOCRATIC REPUBLIC OF THE CONGO

Initial general orientations:

1. Sectorial priorities highlighted earlier in this document must form the basis of the design of the response.
2. Humanitarian action should take into consideration the significant deterioration of the security context in the eastern part of the DRC, the increased access and logistic constraints and the need for an efficient rapid response in reply to higher levels of acute internal displacement and related protection needs, as well as to high impact communicable disease outbreaks and natural disasters.
3. DG ECHO's **geographical focus** will remain on the eastern part of the country and its conflict-affected provinces (Ituri, North Kivu, South Kivu, Tanganyika, Maniema) as well as the Mai Ndombe crisis. Emergency response to high impact communicable disease outbreaks and natural hazards or to newly emerging crises elsewhere based on conflict are also potentially eligible.
4. Humanitarian Coordination, information management and streamlining of the rapid response systems remain crucial including civil-military coordination in view of the multiplicity of armed actors in the context. In this perspective DG ECHO will continue its engagement with UNOCHA in the framework of the Partnership Agreement started in 2022.
5. Gender and Protection mainstreaming should be considered in all programming.
6. DG ECHO encourages the inclusion of national/local NGOs in the implementation of aid projects, also with the aim to increase their capacity.
7. Humanitarian action that approaches environmental sustainability in an innovative and strategic way (e.g. through mainstreaming) could also be considered for funding (e.g. through a Programmatic Partnership – either “multi-year funded” or

³⁴ The 4 components of the EWS: Risk knowledge, Hazard monitoring and warning services, Dissemination and communication, Response capabilities

“staged approach” or through non-Programmatic Partnership multi-year funding). All projects should respond to the Minimal Environmental Requirements.

DG ECHO will in principle focus its support on the following areas of concern:

A. Displaced population: increase quantity and quality of coverage of millions of displaced people and their host families.

- Support via a multi-sectorial response based on integrated programming, using cash wherever feasible and justified, and aiming to address the basic needs of those affected by recent conflicts and/or epidemics and/or new displacements (which includes IDPs, returnees/refugees and host communities). Where appropriate and possible, support to voluntary, safe and dignified return to the points of origin will be eligible.
- Humanitarian protection: Mainstreaming of core protection principles is compulsory in all proposed actions. The protection of civilians remains a priority and an entry point for DG ECHO supported humanitarian actions. Protection mainstreaming, IHL promotion and humanitarian protection interventions and advocacy to influence humanitarian diplomacy are highly recommended. Proposed actions should focus on: (1) humanitarian protection advocacy and diplomacy at local, regional and/or global level, promoting IHL and International Refugee Law; (2) increasing the centrality of protection and accountability to affected population in the humanitarian response; (3) improving meaningful, safe and dignified access to services including child protection, gender-based violence, mental health and psychosocial support (MHPSS), protection of civilians (including people with special needs, elderly, etc.) in conflict-affected areas; (4) protection of schools, medical facilities and staff against attacks. It is mandatory to apply a “protection lens” in the needs’ analysis and in the planning of activities. In addition, the use of the protection mainstreaming key outcome indicator (KOI) is strongly recommended (when feasible) to ensure that ‘do no harm’, meaningful access, accountability and beneficiary participation are fully considered.
- DG ECHO will place specific importance on addressing issues related to gender-based violence, including prevention and response to GBV. Priority will be given to interventions in which GBV is responded to holistically. This includes all four pillars of GBV response work: Pillar 1 Health, Pillar 2 MHPSS, Pillar 3 legal, and Pillar 4 socio-economic response, as part of an integrated response to the humanitarian needs in the DRC. The integration between access to Health and the provision of MHPSS as part of the holistic GBV response is essential. Emphasis will be placed on actions that support all types of survivors of sexual violence (women, girls, adolescents, men and boys) to access health facilities within the first 72 hours. MHPSS approaches must be a core element of the integrated response for survivors seeking care, building on best practices in mental health care provision for survivors of GBV in a displacement context and a volatile security environment. The legal support to GBV survivors should at minimum include access to information to support informed decision-making, as well as the administrative support to survivors exploring avenues to justice. Finally, DG ECHO will consider scalable pilot actions that provide (emergency) economic recovery options/alternatives for survivors and at-risk populations, including

adolescents. GBV actions must adhere to ‘do-no-harm’ principle, ensure a survivor-centric approach, as well as include best practices of caring for child survivors, and must be designed in a manner that does not lead to stigmatisation of survivors or those forced to engage in survival sex. Inclusion of a strong prevention component to combat the prevalence of GBV in integrated actions is furthermore encouraged, including working with men and boys, community structures, and armed actors to combat GBV. GBV-prevention actions should also pay attention to the fact that a lack of energy access, especially for cooking, puts people at risk of GBV, especially women and girls, who have to travel far in search of fuelwood. Special attention will be paid to child-survivors of and children at risk of GBV as they are amongst the most vulnerable population groups and require integrated specialised response services. Working with adolescent survivors and those at risk will also be considered, ensuring that this often-overlooked group is part of a holistic approach to addressing and preventing GBV. All ECHO partners engaged in humanitarian action must demonstrate how they will ensure that their actions do not further contribute to GBV through solid GBV risk mitigation actions to be assessed at proposal stage and during monitoring.

- The provision and reinforcement of health and nutrition services is to be aligned to basic principles of humanitarian health, as per DG ECHO health guidelines, and to be implemented by qualified partners. Humanitarian health needs and the added value of the assistance provided must be measured, analysed, and reported throughout the action to in-country humanitarian and development fora. The reinforcement of epidemic preparedness and response capacities in humanitarian settings remains key in the DRC. In addition, the health sector constitutes a relevant opportunity for a Programmatic Partnership (“multi-year funded” or “staged approach”) or for non-Programmatic Partnership multi-year funding in a geographical area targeted by the humanitarian-development-peace nexus (such as Ituri province). See further under nexus. The gratuity of the health care for vulnerable crisis affected populations is mandatory. Beyond helping to cover the financial aspects to guarantee the gratuity of care, the potential inclusion in nexus programmes of humanitarian aspects such as nutrition, surveillance, mental health and SGBV should be looked at. Nutrition programmes must be integrated in the health sector.
- Education in Emergencies (EiE): DG ECHO will continue supporting EiE projects for the most vulnerable children either displaced and/or conflict-affected to increase their access to primary education (formal and non-formal). DG ECHO will continue encouraging projects that integrate EiE, child protection and mental health and psychosocial support. The aim is to restore a protective and safe learning environment for children by comprising psychosocial and social emotional learning. Projects should include an adequate learning environment for IDPs and non-formal education programmes to transition children to the formal school system. Wherever possible the link to longer term programmes (financed by other donors) should be made. (See further under nexus). Rapid education responses need to have a clear exit strategy.
- The provision of non-food items, shelter and camp management, clean water systems and latrines, basic food rations or cash transfers remain fully eligible.

- Special attention should be given to the possible negative effects of providing humanitarian aid in areas under occupation of a Non State Armed Group. The instrumentalisation of humanitarian aid must be countered by a solid conflict sensitive programming and a realistic do no harm approach.

B. Rapid Response: improved coordination and shortened lead times

Strengthening general rapid response capacity, in focus areas where DG ECHO supports the humanitarian action, is needed. Such rapid response capacity, or mechanism, should be timely, flexible, geographically focused, and well-coordinated with other humanitarian rapid response actions or mechanisms (financed or not by DG ECHO).

It should be guided by information gathered and analysed by the provincial coordination structures, such as the “Coordination Opérationnelle Humanitaire Provinciale” (COHP). The rapid response mechanism could be organised in a consortium run by several partner organisations, with one lead agency in one programme and defined by one general logframe for maximum efficiency.

In general, all humanitarian projects supported by DG ECHO in the DRC should have the capacity to swiftly respond or adapt to a new emerging shock by adding flexibility into the action design (such as crisis modifiers).

C. Nexus and durable solutions wherever possible in “zones de convergence” where simultaneously crisis response, stabilisation and early recovery can be applied

DG INTPA plans development interventions covering the period 2023-2025 in the health sector in Ituri and North Kivu and in the education/vocational training sectors in North, South Kivu and Ituri. Given DG ECHO’s ongoing support to health and nutrition as well as to EiE projects in these provinces, opportunities for a nexus approach should be tackled wherever possible. (including opportunities establishing a continuum of care in protection, esp. regarding GBV). Longer term education and health programmes, financed by other donors, can be supported via a emergency/crisis modifier approach financed by DG ECHO, for example in case of a new displacement influx in crisis area’s covered by development donors. DG ECHO encourages partner organisations to seek (and demonstrate) synergies and complementarities with development action and actors, including e.g. EU programmes in Eastern DRC, also with a view on durable solutions for IDPs, and in disaster preparedness (see HIP section 4 on the humanitarian-development-peace nexus). In this context, DG ECHO, INTPA and FPI are looking pro-actively into ways to identify geographical “zones de convergence” in Eastern DRC that allow the return of displaced persons, but also the reintegration of ex-combatants, as well as to improve the resilience of the displaced and host population in general. By promoting a continuum of care and services in different domains for beneficiaries transitioning from a humanitarian setting to a more stable environment, more durable and sustainable systems can be established. This should maximise the impact of interventions in the long run, while preserving a surge capacity in case of an unpredictable deterioration of the security situation.

D. Logistic support as a primordial cornerstone for better access

DG ECHO is willing to contribute further to a more efficient and effective humanitarian response through reinforcing the logistics system also in view of the additional restrictions imposed by an eventual withdrawal of MONUSCO. In this context, DG ECHO can consider supporting strategic projects that embrace collaborative approaches and/or technology.

This can include common logistic services for storage and transport ³⁵, digitalisation of supply chains, increasing the availability and flexibility of transport systems (in particular the last mile delivery), pre-positioning of strategic stocks of shelter, NFIs and WASH equipment/materials, small scale urgent repair work on secondary roads and bridges, ...

The role of the logistics cluster as a common coordinating platform needs to be clearly spelled out in these proposals.

E. Disaster Preparedness (DP)

Building upon previous Disaster Preparedness actions, the action should demonstrate its capacity to integrate multiple hazards, including a contribution to the consolidation of various multi-hazard early warning systems and displacement prediction models for early/anticipatory action against common, recurrent humanitarian consequences in hot spot areas in Eastern DRC.

Multi-hazard, including conflict, preparedness and response actions are to demonstrate: i) capacity to develop triggering mechanisms and protocols able to incorporate the linkages between and cumulative impact of key hazards, risks and events; ii) anticipatory/early actions strategies to ensure multi-sectoral humanitarian interventions with clear role for protection services in areas of conflict; iii) ensure better knowledge management and coordination between key actors working in the field and involvement of state and local actors where relevant.

ECHO will also support projects that aim at strengthening local actors' rapid/early response capacity, including their integration in existing Rapid Response Mechanisms.

Environmental degradation affects natural processes, increases vulnerability, lessens overall resilience, and challenges traditional coping strategies. The DP trainings, workshops and other tools should therefore integrate environmental screenings, risk-mitigation exercises and/or environmental aspects relevant for a specific context and needs, especially the ones that directly aggravate disaster risk aspects (e.g. deforestation of slopes leading to an increased landslide hazard, solid waste accumulation in drainage systems increasing flooding risks, etc.).

Finally, ECHO is ready to support actions that aim to enhance humanitarian community's overall capacity to deliver timely and good quality (anticipatory) cash responses in hot spot areas, making use of innovative technologies and promoting coordination.

³⁵ Such as the EUHAF, former ECHO FLIGHT or the HAB (Humanitarian Air Bridge)

BURUNDI CRISIS (BURUNDI, TANZANIA, RWANDA, DRC)

Humanitarian assistance

DG ECHO will consider regional interventions that focus on protection of refugees (in the countries of asylum) and returnees (including spontaneous returnees) in Burundi to ensure their protection at the different steps of their displacement, to enhance follow-up of displaced people, and to address needs for regional coordination and advocacy. This will include documentation, protection and post return monitoring, community-based interventions enhancing social cohesion (refugees, returnees, IDPs, host communities), prevention and assistance to victims of violence (including GBV, HLP and legal assistance, MHPSS), child protection (UASC, child at risks/affected by psychosocial distress), ensuring refugees' access to basic services through assistance to obtain civil and legal documents.

In preparation of a humanitarian aid exit strategy in the coming years, interventions should establish a link with development actors to set up durable solutions for returnees and host communities as well as ensure inclusion of long-term refugees into development programmes, in line with the CRRF and the EU Pact on Migration and Asylum.

Food assistance will be considered for camp-based refugees who do not have sufficient access to livelihood opportunities. Humanitarian surveillance in Burundi through humanitarian information management and overall humanitarian response coordination remains a priority.

Regarding the influx of new Congolese refugees in neighbouring countries (Rwanda, Burundi, Tanzania), humanitarian actions should support safe and dignified arrangements for the reception of asylum seekers/refugees, advocate for the recognition of prima facie to facilitate access to refugee status, prepare contingency plans to anticipate the potential risks of an additional influx linked to the forthcoming elections and the possible deterioration in the security situation in DRC. Finally, the interventions will have to initiate advocacy strategies to find alternative solutions to the lack of funding for humanitarian operations in the sub-region and strengthen the regional humanitarian-development-peace nexus approaches to facilitate local integration or other sustainable solutions.

REPUBLIC OF CONGO

Unless a new humanitarian crisis emerges, DG ECHO remains in surveillance mode.