

IDRL & Auxiliary Role Advocacy Fact Sheet, Democratic Republic of the Congo (DRC)

28 September 2025 -Ebola Virus Disease (EVD) Outbreak Response

This document is intended to provide: (i) key information to humanitarian actors (including the Red Cross and Red Crescent Movement network and Operations) relating to the regulatory and policy environment applying to the entry of incoming disaster relief (IDRL) in the DRC to respond to the Ebola Virus Disease (EVD) outbreak declared in Kasai Province (Bulape and Mweka health zones) on the 4th September 2025; (ii) advocacy messages around the special facilities to be requested to the DRC's authorities to enable humanitarian access; and (iii) advocacy messages around the auxiliary role of the DRC Red Cross (CRRDC).

I. IDRL:

Institutional and Policy Framework

- The principal authority responsible for Disaster Risk Management (DRM) in the DRC is the **Comité National de Réhabilitation des Personnes Sinistrées** (National Commission for the Rehabilitation of Disaster-Affected Persons (CNRS)), which operates under the 2012 Disaster Relief Plan, or [ORSEC Plan](#) (Organisation des Secours).
- The CNRS plays a key role in coordinating disaster response, developing disaster risk repositories, and building the capacity of various actors involved in disaster preparedness and management. Moreover, the ORSEC Plan is the national coordination framework for emergency preparedness and response, covering mobilisation of state resources, evacuation, relief logistics, and coordination with local committees. Importantly, the ORSEC Plan is the main document [defining a general procedure for managing disasters and emergencies in the DRC](#) and recognising epidemics as one of the major threats to which the country is exposed. The [ORSEC Plan has specific objectives](#), including:
 - Defining a system of coordination for disaster response
 - Developing a repository of risks and their effects on human life, infrastructure, and the environment
 - Capacity building and strengthening collaboration and cooperation between all actors
 - Clarifying government roles and responsibilities in DRM
- Importantly, Article 67 of the ORSEC provides that “In the event that national means are no longer sufficient to contain the risk or its consequences, it is appropriate to call upon international assistance.”
- According to Article 93 of the ORSEC Plan, apart from members of the Government, the CNRS includes as members the Country Representatives of humanitarian organizations and United Nations Agencies: OCHA, USAID, ICRC, UNDP, WHO, UNICEF, WFP, UNHCR, **IFRC-CR, RED CROSS OF THE DRC (CRRDC)**, CARITAS CONGO.
- However, **public health emergencies**, such as Ebola outbreaks, are not explicitly detailed in the ORSEC Plan. In practice, the [Ministry of Health \(MoH\)](#) leads epidemic responses in

coordination with the World Health Organisation (WHO) and humanitarian partners. [Law no.18/035 of 2018](#) establishes the fundamental principles relating to Public Health in the DRC and defines the roles of the MoH. The mandates of the MoH include developing and implementing public health policies, regulating medical and pharmaceutical institutions, overseeing hygiene, sanitation, and quarantine procedures, coordinating efforts for epidemic responses, and supporting universal health coverage initiatives. Importantly, per Article 103 of the ORSEC Plan, the [MoH is included as a member of the National Steering Committee](#) of the CNRS.

- Importantly, the MoH is the [source of official epidemic declarations](#) (e.g Ebola outbreak in Kasai Province).
- The [CRRDC \(DRC Red Cross\)](#) has been formally recognised as an auxiliary to public authorities in the humanitarian field through the national Decree of March 1st 1961. The CRRDC's mission is to prevent disease, alleviate suffering, and improve the living conditions of the most vulnerable populations, wherever they are, without distinction of race, religion, or political affiliation, through sustainable community development programs, [relief activities, disaster preparedness and response](#).
- The CRRDC's role in epidemic risk management was also recognised in both, the [National Response Plan to the EVD Epidemic in 2018](#), and the National Response Plan for the [EVD Epidemic in 2014](#). Both plans widely acknowledge the role of CRRDC, particularly in activities such as communication, WASH, evacuation, transportation of patients to the hospital, and epidemiological surveillance. **Importantly, the CRRDC has been a member of the CNRS since 2012**, illustrating the government's consistent reliance on the CRRDC in humanitarian activities outside of ad-hoc response operations. In fact, the [ORSEC Plan highlights the role of the CRRDC](#) in provincial and local services, health and medical services, search and rescue, supply and stocks, and prevention activities, among many others.
- The CRRDC is [exempt from all taxes and duties](#).
- At an international level, the DRC is a party to the [Revised Kyoto Convention](#) on customs procedures, which requires parties to **simplify and expedite the processing of relief consignments**. The DRC is also party to the [Chicago Convention](#), which lays out standards and recommended best practices for the simplification and harmonisation of border clearance formalities, particularly for air cargo.
- At a regional level, the DRC is a party to the [African Charter on the Rights and Welfare of the Child](#) (ACRWC), which provides that states take all appropriate measures to ensure that children who have been internally displaced, including by disasters, receive appropriate humanitarian assistance. Moreover, the DRC is a party to the [African Union Convention for the Protection and Assistance of Internally Displaced Persons in Africa](#) (Kampala Convention), which provides in article 5(7) that state parties are obligated to facilitate the coordination of international relief and allow rapid and unimpeded passage of humanitarian relief to internally displaced persons.
- From the research conducted, IFRC has a **Legal Status Agreement (LSA)** in the DRC.

State of Emergency & Request of Humanitarian Aid and Assistance

- On [4 September 2025](#), the Ministry of Health officially declared an [Ebola Virus Disease \(EVD\) outbreak](#) in Kasai Province (Bulape and Mwaka health zones). This is the 16th Outbreak of Ebola virus disease in the DRC. The Government immediately activated the **Public Health Emergency Operations Center (COUSP)**, mobilizing rapid response teams, strengthening epidemiological surveillance, and organizing triage and isolation facilities.

- [Within 48 hrs of the declaration](#), WHO airlifted 12 tonnes of outbreak control materials, including personal protective equipment, patient isolation materials, water, sanitation and hygiene supplies to support clinical care and protect frontline health workers.
- By [9th September 2025, the MoH reported](#) that a strategic coordination meeting dedicated to the response was held. According to the report, the Bulape health zone remains the epicentre with around [20 confirmed cases and 16 deaths](#). This report notes that the new national response plan, provides an initial budget of **USD 17 million** for priority activities (the national response plan could not be identified from the research conducted).
- Actions underway include:
 - the deployment of investigation and rapid response teams,
 - delivery of vaccines and medical supplies to the epicenter
 ([As of 15th September](#), WHO has begun vaccinating frontline health workers and contacts of infected individuals in response to the outbreak. An initial 400 doses of the vaccine have been delivered to Bulape, the epicentre of the Outbreak),
 - the establishment of an Ebola treatment center, and
 - the organization of airlifts to facilitate the rapid delivery of supplies.
- As of [28th September 2025](#), there are 64 people with confirmed or probable Ebola, which includes 42 deaths. The U.S Centers for Disease Control and Prevention (CDC) expects frequent changes to these case counts.
- Importantly, and according to WHO, **the MoH**, through the DRC's National Public Health Institute (INSP) and the National Public Health Emergency Operations Centre (COUSP), [is coordinating the overall response to the outbreak](#), with technical support from WHO and health partners. Therefore, **despite the CNRS being recognised as the Focal Point for international assisting actors according to the ORSEC Plan, [the focal point for the EVD response is the MoH](#)**.
- Moreover, WHO confirmed that, following the initial deployment of a national multidisciplinary rapid response team, supported Médecins Sans Frontières (MSF), UNICEF and others, the MoH has now established and deployed a **national Incident Management Team** in Bulape Health Zone. Daily coordination meetings are being held to plan and guide response activities.
- Additionally, WHO has deployed 48 national and international experts, [to support the government's response efforts](#). Health partners supporting response efforts include Africa CDC, International Organization for Migration (IOM), UNICEF, MSF, the Alliance for International Medical Action (ALIMA), **the CRRDC**, and the US's Center for Disease Control and Prevention.
- Concerning the most recent [operational support and logistics](#):
 - To **fast-track delivery of supplies and personnel**, a collaboration between WHO, WFP and the United Nations Organization Stabilization Mission in the Democratic Republic of the Congo (MONUSCO) has **established a temporary airbridge for two weeks using a helicopter from Kananga to Bulape and Mweka** (*this data was reported on 14 September 2025*);
 - Over 14 tons of essential medical supplies and equipment have been delivered to strengthen frontline response efforts with **air support from the WFP and MONUSCO to access the affected health zone**;
 - A 40-foot container truck with essential supplies has been dispatched from nearby Tshikapa to Bulape, while an additional 600 kilograms of medicines, vaccines, and

personal protective equipment (PPE) is en route from Kananga. Additional shipment of 2 tons of PPE, chlorine, and other supplies has been scheduled; and

- An Ebola Treatment Centre (ETC) was rapidly established at Bulape Hospital with 18 beds, medical supplies and consumables provided, and 4000 litres of water supplied. A supply chain system has been established, and a new ETC with expanded capacity is under construction.
- **For the Red Cross Red Crescent movement;**
 - An [Emergency Appeal was published on 17th September 2025](#). Importantly, this Emergency Appeal confirms that the Health Cluster, led by WHO, plays a central role in coordinating technical support, surveillance and response activities in DRC. The Cluster convenes regular meetings at national and provincial levels, aligning partner interventions. CRRDC is an active member of the Health Cluster, particularly on SDB, RCCE and IPC. CRRDC and IFRC are coordinating closely with key partners in the following ways:
 - WHO leads case management, epidemiological surveillance and vaccine deployment.
 - UNICEF co-leads RCCE and WASH.
 - MSF, IMC and ALIMA run Ebola treatment units and support case management and IPC in health facilities.
 - Africa CDC and US CDC provide technical expertise in surveillance, diagnostics and rapid response.
 - OCHA and WFP convene inter-cluster coordination to ensure alignment with broader humanitarian sectors (Protection, Nutrition, Food Security, Logistics).
 - Donors and multilateral agencies, including the World Bank and bilateral partners, are mobilizing resources in support of the national plan.
 - Through this system, CRRDC ensures that its activities are fully integrated into the wider response, complementing the mandates of other agencies and filling critical community-level gaps. This coordination avoids duplication, strengthens efficiency and reinforces the **auxiliary role of the Red Cross** in support of the Government of DRC.
 - Building on the **Collaboration Framework on Public Health Emergencies between WHO-AFRO and IFRC**, which was signed in February of 2025, the parties agreed to collaborate with Ministries of Health to ensure coordinated interventions and continuity of primary care during crises in Africa. **We recommend activating this provision and jointly coordinating with the MoH of the DRC to ensure that specific legal facilities are provided for assisting actors.**

➤ **Potential issues & recommendations:**

- *From the research conducted, NO OFFICIAL LIST OF NEEDS* has been issued by the Government. Therefore, it is unclear how the MoH is coordinating offers from international donors. Importantly, uncoordinated efforts may lead to the receipt of unsolicited goods (unsolicited bilateral donations or UBD).
 - **We recommend that IFRC offer technical support to the Government to prepare the List of Needs**, based on IDRL best practices.

⇒ *SPECIAL IDRL FACILITIES* for eligible international humanitarian actors:

By virtue of the International Conventions that DRC is a party to, the following **legal facilities may be invoked**:

- **Expedited customs clearance or exemption** for the importation of goods for relief assistance ([Kyoto Convention](#)); and
- **Expedited management of customs, immigration services and clearance of aircrafts containing humanitarian assistance in response to disasters** ([Chicago Convention](#)).

In any case, provided that these facilities do exist (under the law or special announcements), THE INFORMATION IS NOT READILY AVAILABLE.

- **We recommend that IFRC reach out to the MoH to offer technical assistance to prepare an IDRL Decree of Emergency to clearly plan for the granting of IDRL facilities.**

Entry of humanitarian personnel

- The applicable laws in the DRC for immigration and entry of humanitarian personnel are [Decree n° 002/2003](#), creating the General Directorate for Migration, and the [1983 Foreigners Act](#) (Ordonnance-Loi 83-033 relative à la police des étrangers). Importantly, from the aforementioned laws and the research conducted, no specific humanitarian visa exists, nor are there specified swift procedures for the entry of humanitarian personnel.
- It appears, in terms of the available law, that humanitarian personnel would [apply](#) for a short-stay or work visa via embassies and coordinate with the MoH for expedited processing. From the research conducted, personnel would require a Yellow Fever Vaccination Certificate and an invitation letter.
- Importantly, the ORSEC Plan contains several provisions that would suggest that humanitarian personnel would be granted swift access into the DRC. For instance, Article 45 provides that every Response Plan must contain a list of identified experts whose assistance is essential in responding to the crisis, and to ensure that **points of contact and resources are in place to receive and utilise external resources** when needed. Moreover, Article 91 provides that the CNRS is responsible for **streamlining the implementation of relief and response** as needed to adapt to the local context. Therefore, it is **recommended to coordinate with the MoH before deployment**, to support the entry of humanitarian personnel and simplify visa processing.

Registration of International Assisting Actors

- The law does not appear to provide specific procedures for international actors to register in the DRC. However, the ORSEC Plan does contain several provisions to support the **recommendation to coordinate with the MoH** to ensure the registration of international assisting actors. For instance, Article 45 provides that every Response Plan must contain a **list of identified experts** whose assistance is essential in responding to the crisis, and to ensure that **points of contact and resources are in place to receive and utilise external resources** when needed. Moreover, Article 91 provides that the CNRS is responsible for providing a permanent framework for consultation between humanitarian actors in matters of natural disasters and humanitarian crises, as well as **streamlining the implementation of relief and response as needed to adapt to the local context**. Lastly, Article 170 provides that humanitarian organisations are often present in disaster responses and are called upon to assist in response and immediate recovery phases. To respond effectively, these organisations must have qualified and/or experienced leaders, trained personnel, the best transportation

and **logistical support**, better means of communication, and **guidelines for working in emergencies**.

Recognition of professional qualifications

- The law does not appear to establish specific procedures for the recognition of foreign professional qualifications of international disaster assistance personnel, and no other relevant laws could be located for this review. Importantly, the DRC does take a firm stance on qualified humanitarian personnel involved in emergency operations. For instance, Article 184 of the ORSEC Plan provides that “none of the above activities can be carried out without a certain level of emergency operations management. Furthermore, **any person present in the disaster areas must have a level equivalent to the qualification required for the activity carried out** (certified first aider, in-depth training in humanitarian crisis management, etc.).”
- Notably, the ORSEC Plan in Article 91 provides that the CNRS is responsible for providing a permanent framework for consultation between humanitarian actors in matters of natural disasters and humanitarian crises, as well as **streamlining the implementation of relief and response** as needed to adapt to the local context. Furthermore, Article 170 provides that humanitarian organisations are often very present in disaster responses and are called upon to assist in response and immediate recovery phases. To respond effectively, these organisations must have **qualified and/or experienced leaders, trained personnel**, the best transportation and logistical support, better means of communication, and **guidelines for working in emergencies**. Taken together, it is **recommended to coordinate with the MoH** for the automatic or expedited recognition of foreign qualifications and licences.

Freedom of movement of international assisting actors during a disaster response

- There do not appear to be any provisions in domestic DRC law that explicitly facilitate the free movement and access of international humanitarian actors in the DRC. Importantly, an article by [Reuters indicates that from the 10th of September 2025](#), **towns in the Kasai region—including Bulape—have been placed under confinement with checkpoints established to restrict entry and exit of the population, aiming to prevent further virus transmission.**
- However, the ORSEC Plan in Article 91 provides that the CNRS is responsible for streamlining the implementation of relief and response as needed to adapt to the local context. In addition, Article 101(c) encourages the **promotion and participation of State services and humanitarian actors in monitoring missions and field evaluation**. Furthermore, Article 170 provides that humanitarian organisations are often very present in disaster responses and are called upon to assist in response and immediate recovery phases. To respond effectively, these organisations must have **qualified and/or experienced leaders, trained personnel, the best transportation and logistical support**, better means of communication, and **guidelines for working in emergencies**.
- On 15th September, the WHO confirmed that, for [Domestic and international traffic-related measures and cross-border health](#):
 - **No international traffic-related measures are currently warranted.** WHO continues to monitor cross-border risks and provide technical support to mitigate the risk of cross-border spread. Moreover, Health authorities are reinforcing surveillance at border crossings, including health screening, proactive risk communication with travellers at points of entry/points of crossing (PoEs/PoCs), sensitization for PoE staff to detect, report and manage suspected cases, integration of border communities in

affected areas into early warning systems and the national surveillance network, as well as coordination with IOM.

- Importantly, the government of [DRC signed an interministerial decree in March of 2025](#) to enable the implementation of the Common Market for Eastern and Southern Africa (COMESA) Simplified Trade Regime (STR) on its borders with neighbouring COMESA Countries. The DRC shares borders with four COMESA countries; Burundi, Rwanda, Uganda and Zambia. The Decree formally enables small-scale cross-border traders between the DRC and its neighbouring COMESA countries to trade at zero customs duty on goods/products eligible for STR. Although not specially focused on humanitarian activities or covering every country that borders the DRC, for example, Angola, the STR nevertheless illustrates the DRC's commitment to regional facilitation, relevant for informal corridor movement with neighbouring countries.
- Taken together, although not specified in the legal framework, the ORSEC Plan, read together with the latest reports from WHO, implies that freedom of movement for international assisting actors is possible, despite reports indicating that authorities have imposed ad-hoc containment controls. Therefore, it is **recommended to begin coordination with the MoH** to support the freedom of movement of international assisting actors.

Customs arrangements for specialized goods and equipment

- Concerning customs procedures, the applicable information is found on the website of the official customs agency of the DRC, the [Direction Générale des Douanes et Accises \(DGDA\)](#). Importantly, there are no simplified procedures or arrangements for specialised goods and equipment for humanitarian assisting actors. However, the DGDA does provide information on [customs clearance procedures for imports into the DRC](#). These procedures require interested parties to present: a **customs declaration (SAD form)**, **commercial invoice**, **packing list**, **transport documents (bill of lading/air waybill)**, and **certificates of origin/health/sanitary, depending on the goods**. For further information on customs procedures, contact the DGDA via email at info@douane.gouv.cd, or call on [tel:+243\(0\)821920215](tel:+243(0)821920215)
- Concerning existing tax arrangements, the applicable law in the DRC is the [General Tax Code of 2021](#). This Code establishes a few provisions which could potentially apply to humanitarian actors. More specifically, article 39 of Title III, Chapter I – establishes the goods exempt from the tax on vehicles – states that ambulances are among the exempt vehicles, together with the vehicles of officers with diplomatic privileges, and vehicles of international organisations. Furthermore, the Section 3, Article 15(2,13) provides that goods exempt from the Value Added Tax (VAT) include, among many others, sales and imports made by legally constituted non-profit associations when these operations are of a social, sporting, cultural, religious, educational or philanthropic nature in accordance with their purpose; and donations or materials provided free of charge to the State, the provinces, the Decentralized Territorial Entities and public law bodies.
- Importantly, the CRRDC Decree provides in Article 5, that the CRRDC will be exempt from all taxes and duties. Importantly, the [East African Community Customs Management Act of 2019](#) regulates the management and administration of customs duties and imports in DRC, with a decentralized system where each country collects its own revenue. This is applicable to all countries that are signatories to the East African Community (EAC) collaboration, including the DRC. Part B, Section 20 of this Act, regulates the import of goods for emergency relief purposes imported by the government, a non-governmental organization or a relief agency responsible for disaster management in a Partner State. It states that goods to be used where a natural disaster or calamity has occurred in the Partner State, shall be imported within 6

months or such further period not exceeding 12 months from the emergency. They shall be subject to exemptions as imposed by the Commissioner.

- Lastly, recalling that **Article 45(e) of the ORSEC Plan** provides that every pre-prepared Response Plan needs to include a *description of customs procedures for the rapid clearance of international aid*. DRC is also party to the **Revised Kyoto Convention**, requiring a simplified process for relief consignments.
- Taken together, it is **recommended to begin coordination with the MoH or the DGDA and to keep the MoH aware of all engagements held with other agencies**, to support the provision of exemptions from any restrictions on the import or export of goods and equipment.

Cash Donations

- There does not appear to be any information available on cash donations.

Flights

- The [Civil Aviation Law](#) (Law No. 10/014 of December 31, 2010), as amended by Law No. 23/001 on January 12, 2023, serves as the [principal domestic statute governing civil aviation in the DRC](#). It establishes the rules for safety, security, licensing, airworthiness, and airport operations, aligning them with ICAO standards. Importantly, [Law No. 10/014](#), establishes the **Autorité de l'Aviation Civile (AAC/RDC)** as the regulator and the **Bureau Permanent d'Enquêtes d'Accidents (BPEA)** as the independent accident investigation body.
- From the research conducted, neither the above law nor its established bodies **include any specific provisions targeting disaster response or expedited procedures for humanitarian assistance in emergency situations**.
- Recalling that DRC is a party to the [Chicago Convention](#), which provides procedural guidance for the clearance of aircrafts containing humanitarian assistance in response to a disaster. Importantly, Article 45 of the ORSEC plan provides that every Response Plan must ensure that **points of contact and resources are in place to receive and utilise external resources**. Moreover, Article 170 provides that humanitarian organisations must have the best **transportation and logistical support**, better means of communication, and **guidelines for working in emergencies**. Taken together, it is **recommended to begin coordination with the MoH or AAC** for the clearance of aircrafts containing humanitarian assistance.