

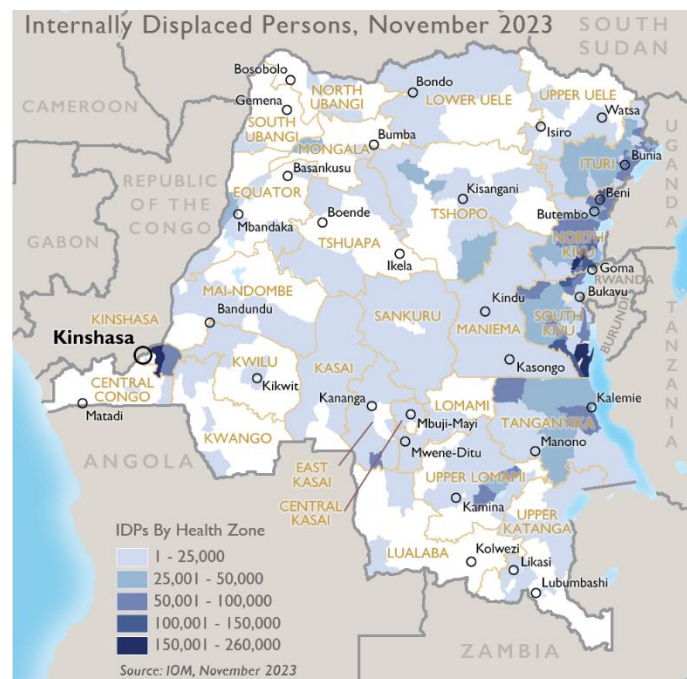
Democratic Republic of the Congo – Complex Emergency

APRIL 25, 2024

SITUATION AT A GLANCE

<p>113.6 MILLION</p> <p>Population of the DRC</p> <p><i>UN – December 2023</i></p>	<p>25.4 MILLION</p> <p>Population in Need of Assistance</p> <p><i>UN – December 2023</i></p>	<p>7.2 MILLION</p> <p>Number of IDPs in the DRC</p> <p><i>OCHA – February 2024</i></p>	<p>1.1 MILLION</p> <p>Congolese Refugees and Asylum-Seekers in Nearby Countries</p> <p><i>UNHCR – January 2024</i></p>	<p>523,426</p> <p>Refugees and Asylum-Seekers Sheltering in the DRC</p> <p><i>UNHCR – January 2024</i></p>
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- Food security and malnutrition continue to deteriorate across the DRC, with 1.6 million children ages five years and younger experiencing GAM in 2023, including 520,000 children experiencing severe acute malnutrition. The Congolese franc continues to depreciate and exacerbate food insecurity in the country.
- Individuals residing in Goma’s Kanyaruchinya IDP site face grave protection concerns, including forced recruitment into armed groups, gender-based violence, and sexual exploitation, according to relief actors.
- More than 164,000 people remain displaced and in urgent need of humanitarian assistance in Ituri Province due to ongoing CODECO–Zaire militia violence.



TOTAL U.S. GOVERNMENT HUMANITARIAN FUNDING	USAID/BHA ¹	\$362,417,909
For the DRC Response in FY 2024	State/PRM ²	\$12,710,000
Total		\$375,127,909

For complete funding breakdown with partners, see detailed chart on page 6

¹ USAID’s Bureau for Humanitarian Assistance (USAID/BHA)

² U.S. Department of State’s Bureau of Population, Refugees, and Migration (State/PRM)

KEY DEVELOPMENTS

Food and Nutrition Conditions Worsen Across DRC as 1.6 Million Children Face Global Acute Malnutrition in 2023

High prevalence of childhood diseases, low household income, and persistent insecurity, as well as poor maternal and child nutrition practices and hygiene conditions, continue to contribute to growing malnutrition across the Democratic Republic of the Congo (DRC), according to a UN Children’s Fund (UNICEF)-led assessment conducted between September and December 2023. The UN agency’s National Nutrition Survey determined that 520,000 children ages five years and younger experienced severe acute malnutrition—characterized by wasting, the deadliest form of malnutrition—in 2023. Furthermore, UNICEF reported 1.6 million cases of global acute malnutrition (GAM) in 2023—a basic nutrition indicator used to assess the overall nutrition rates in a particular area—in children younger than five years of age, representing a more than 8 percent GAM rate across the country. Two provinces—Lomami and Mai-Ndombe—reported GAM rates above the critical threshold of 15 percent, as determined by the UN World Health Organization (WHO), while seven other provinces recorded GAM rates within the 10 to 15 percent emergency threshold. In response to growing child nutrition needs in the DRC, USAID/BHA supports 12 nongovernmental organizations (NGOs) and UN agencies to implement nutrition activities across the country.

Meanwhile, households in conflict-affected areas with limited access to humanitarian assistance could face Emergency—IPC 4—levels of acute food insecurity between March and May, in part due to price increases of staple foods, the Famine Early Warning Systems Network (FEWS NET) reports.³ Households experiencing Emergency levels of acute food insecurity have large food consumption gaps and employ the selling of livelihood assets in order to meet basic food needs. Poor macroeconomic conditions—including a more than 25 percent depreciation of the Congolese franc against the U.S. dollar between March 2023 and March 2024—have contributed to an increase in basic food prices, especially imported products such as maize, leaving households unable to meet their food needs, according to the Central Bank of Congo and FEWS NET.

Difficult Displacement Conditions in Kanyaruchinya IDP Site Expose Women to Increased Risks of Gender-Based Violence

Persistent insecurity in Goma’s Kanyaruchinya internally displaced person (IDP) site in North Kivu Province has exposed residents to a range of grave protection concerns—such as extortion, sexual violence, and theft—across all demographics, including children, female and male adults, and older individuals, according to a March study by a humanitarian organization. However, the study revealed key gendered differences in protection vulnerabilities resulting from IDPs’ degraded economic conditions. While men expressed concern about forced recruitment into armed groups and a lack of income-generating opportunities, women noted concerns about economic desperation driving them to engage in survival sex to support their families, particularly in the absence of men’s access to livelihood opportunities. Additionally, adolescent girls raised persistent fears of being forced into child marriage as a negative coping strategy. Displaced women in Kanyaruchinya tend to become overburdened with expectations to generate income while also managing household work due to men’s limited access to jobs, often leading women to resort to prostitution or survival sex to support their families.

³ The Integrated Food Security Phase Classification (IPC) is a multi-partner initiative that developed a standardized scale to classify the severity and magnitude of food insecurity. The IPC scale, which is comparable across countries, ranges from Minimal (IPC 1) to Famine (IPC 5) for acute food insecurity.

Notably, IDPs' perception of protection risks was greater amongst the surveyed population compared to the number of reported cases, underscoring the pervasive fear among women and girls and the likely underreporting of incidents—such as early marriage and intimate partner violence—within shelter sites, according to the humanitarian organization. Recognizing these findings, the relief actor recommended that humanitarian interventions consider the safety risks women and girls face in IDP sites and how to reduce their reliance on accomplishing daily responsibilities in dark and insecure areas. Sexual violence, which relief actors report has increased in North Kivu in 2024, accounted for nearly 50 percent of all recorded protection incidents and affected nearly 123,000 individuals across the DRC in 2023, according to the Protection Cluster.⁴

CODECO–Zaire Militia Violence Leads to 164,000 People Needing Assistance in Ituri Province

On April 6, clashes and reprisal attacks involving Cooperative for the Development of the Congo (CODECO)-affiliated elements and the rival Zaire militia in Mongbalu Health Zone's Galayi town, in Ituri Province's Djugu Territory, resulted in the deaths of at least 25 people, according to international media. The CODECO-related attack in Galayi follows a trend of worsening humanitarian and security conditions in Ituri in recent months. Violence between CODECO and Zaire militia elements, as well as attacks attributed to Allied Democratic Forces armed group elements, resulted in numerous protection violations, including reports of killings, kidnappings, and forced labor in Ituri's Djugu, Irumu, and Mambasa territories in March, according to the UN. These incidents have also led to multiple waves of population displacement; more than 13,000 people fled armed group attacks in Drodro Health Zone's Kpanga, Libo, and Lidjoba localities to relatively stable neighboring areas between mid- and late March. The influx of individuals has exacerbated humanitarian needs, with relief actors reporting more than 164,000 displaced persons across 66 displaced persons sites around Ituri in urgent need of assistance. In response, humanitarian actors reached more than 156,000 people with food assistance between March 16 and 31 in the province, the UN reports. Moreover, relief actors reached 40,000 host community members, IDPs, and returnees in Ituri Province with multi-sector cash assistance as of March 22.

Returns to Areas of Origin Increase, Yet Needs Remain High

Difficult living conditions in areas of displacement, such as overcrowding and a lack of essential services and physical security, heightened individuals' vulnerability to exploitation and gender-based violence (GBV) and continued to drive returns to areas of origin as of March 9, according to the International Organization for Migration (IOM). Additionally, an estimated 189,000 individuals—including more than 112,000 women—were residing in informal sites not managed by the Camp Coordination and Camp Management Cluster as of March 29, where they may have faced increased security risks and poor living conditions due to lack of services. According to IOM, despite ongoing protection threats and localized fighting in North Kivu, the total number of returnees previously displaced by March 23 Movement (M23) violence increased by nearly 20 percent between March 12 and 29, with nearly 624,000 returns primarily concentrated in North Kivu's Masisi Territory's Mweso Health Zone and Rutshuru Territory's Kibirizi Health Zone due to relative calm in these areas, according to IOM.

In Rutshuru Territory, an estimated 23,000 individuals who had fled M23 armed group clashes in early March returned to their areas of origin in Kibirizi Health Zone's Kashalira, Kibirizi, and Kirima localities between March 12 and 28 amid localized security improvements and difficult living conditions in areas of displacement, according to relief actors. Many individuals returned to find their fields had been pillaged—likely by armed actors—and faced limited access to their livelihoods due to ongoing insecurity,

⁴ The Protection Cluster is the coordinating body for humanitarian protection activities, comprising UN agencies, NGOs, and other stakeholders.

hindering access to food. In response to growing humanitarian needs, Médecins Sans Frontières and USAID/BHA partner World Vision implemented health and water, sanitation, and hygiene (WASH) activities, respectively, in areas of return as of April 5, according to the UN.

KEY FIGURES



5.3 Million

People reached with food assistance between January and December 2023 by WFP



11

Number of USAID/BHA partners implementing critical nutrition programs in the DRC



70

Average number of cholera interventions conducted per day by UNICEF in 2023, primarily in North Kivu, South Kivu, and Tanganyika

U.S. GOVERNMENT RESPONSE

FOOD SECURITY AND NUTRITION

USAID/BHA partners continue to provide emergency food assistance to populations at risk of acute food insecurity in the DRC, including host community members, IDPs, and refugees. NGO and UN partners are providing cash transfers for food, food vouchers, and in-kind food assistance, including U.S.-sourced commodities, to help households meet their basic food needs. With USAID/BHA and other donor funding, the UN World Food Program (WFP) assisted 5.3 million people across the country in 2023, including 732,000 people in North Kivu; 343,000 people in South Kivu; and 172,000 people in Ituri in December. USAID/BHA is the largest contributor to WFP's food assistance programs in the DRC.

USAID/BHA currently supports 11 UN agencies and NGO partners to identify and treat acute malnutrition across the DRC. USAID/BHA partner UNICEF screened more than 2.5 million children ages five years and younger in 2023 and identified more than 319,000 children with severe wasting, all of which were admitted for treatment. With support from USAID/BHA, UNICEF trained nearly 172,000 mothers and caregivers in the family Mid-Upper Arm Circumference approach to screen for acute malnutrition during 2023. To support improved food security and nutrition outcomes in the longer term, USAID/BHA funding supports activities to build the capacity of community health workers and other health personnel to manage and refer cases of acute malnutrition to treatment centers. USAID/BHA partners also conduct outreach activities related to infant and young child feeding practices along with community-based monitoring of nutritional conditions and prevention of malnutrition outcomes. Save the Children Federation, with USAID/BHA support, delivered nutritional inputs to more than 15 health facilities in Ituri between January 15 and February 5.

HEALTH

NGO and UN partners, with U.S. Government (USG) support, are working to augment the availability of essential medicines and medical supplies, displaced and host populations' access to quality primary health care services, and disease surveillance and response efforts, while also providing training and other capacity-building measures for health workers. USG partners support reproductive health care and GBV prevention and response activities in crisis-affected communities in eastern DRC, as well as health messaging efforts that spread awareness of health and hygiene best practices to prevent communicable diseases transmission. In 2023, UNICEF reached nearly 3.6 million people with cholera response activities, more than 90 percent of whom were reached within 48 hours of case notification. In addition, during 2023, approximately 378,000 children ages five years and

younger and more than 100,000 pregnant women received primary health care services at UNICEF-supported health centers across the country.



800,000

People reached by UNICEF with GBV prevention, risk mitigation, or response interventions in 2023

PROTECTION

USG partners support critical protection services in conflict-affected areas of the DRC while integrating protection considerations into all other USG-supported humanitarian programming. USG provides funding that enables partners to support child protection and mental health and psychosocial support (MHPSS) services, the establishment of safe spaces for children and survivors of GBV, and activities that focus on staff mental health and well-being. UNICEF provided child protection services to approximately 21,500 children formerly associated with armed groups, unaccompanied and separated minors, and survivors of sexual violence in 2023, a 42 percent increase compared with 2022. UNICEF also provided MHPSS services for more than 335,000 children and caregivers in DRC during the year.



15

Number of USG partners implementing shelter programs in the DRC

SHELTER AND SETTLEMENTS

With USG support, NGO and UN partners facilitate the construction of emergency shelters for displaced individuals and support the coordination and management of IDP and refugee sites in the DRC. USG funding supports the procurement and distribution of in-kind emergency relief-items, including blankets, kitchen sets, and tarps. USG partners also provide longer-term shelter solutions for returnees in more stable areas, paired with legal assistance to help returnee families secure land for farming and habitation in their resettlement areas. State/PRM partner the Office of the UN High Commissioner for Refugees (UNHCR), in partnership with the NGO AIDES, completed the construction of 15 of 20 planned community hangars, which will serve as temporary housing for displaced households, near the Lushagalla IDP site, as of February 29.



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Provinces in which USAID/BHA partners are implementing WASH programs

WASH

The USG supports NGO and UN partners to implement WASH activities across the DRC. USG-supported activities include distributing hygiene kits and other essential WASH commodities and transporting emergency water reserves to IDP and refugee sites. USG partners also construct and rehabilitate WASH infrastructure—such as handwashing stations, latrines, showers, and water points—and facilitate safe access to existing WASH infrastructure for vulnerable populations. In 2023 UNICEF built new and rehabilitated existing sanitation infrastructure for nearly 366,000 people, including emergency toilets in IDP, health, and education sites.

CONTEXT IN BRIEF

- Despite the implementation of a peace agreement in 2003, fighting between forces aligned against M23 and various armed entities, including the Democratic Forces for the Liberation of Rwanda, Mai Mai elements, and militias affiliated with the Hema and Lendu ethnic groups, continues to contribute to high levels of insecurity and population displacement in eastern DRC.
- Violence, restricted humanitarian access, poor infrastructure, forced recruitment into armed groups, and reduced access to agricultural land and traditional markets have contributed to the deterioration of humanitarian conditions in several parts of the DRC, triggering widespread internal displacement and refugee outflows.
- Since March 2022, renewed clashes between the FARDC, M23, and other armed groups in eastern DRC have resulted in increased civilian casualties, damaged and destroyed infrastructure, and the displacement of hundreds of thousands of people within North Kivu and to South Kivu, straining humanitarian capacity in areas receiving IDPs. IDPs are facing significant disease and protection risks due to inadequate access to shelter and other emergency assistance, particularly in the outskirts of Goma, where many people have fled following the escalation of conflict in October 2022 and February 2024. Relief organizations also report severely restricted access to M23-controlled areas of North Kivu, where access to basic services and food is likely limited.
- On October 12, 2023, U.S. Ambassador Lucy Tamlyn renewed a declaration of humanitarian need for FY 2024 due to ongoing complex emergency conditions in the DRC.

USG HUMANITARIAN FUNDING FOR THE DRC RESPONSE IN FY 2024¹

IMPLEMENTING PARTNER	ACTIVITY	LOCATION	AMOUNT
USAID/BHA			
Association Locale Pour Le Développement Intégral (ALDI)	Food Assistance	Ituri	\$1,000,000
	Food Assistance—U.S. In-Kind Food Aid, Nutrition	Countrywide	\$222,340,218
WFP	Food Assistance—Cash Transfers for Food, Logistics Support	Countrywide	\$44,000,000
Tearfund	Agriculture, WASH	Ituri, North Kivu, South Kivu	\$7,000,000
UNICEF	Humanitarian Coordination, Information Management, and Assessments (HCIMA); Health; Nutrition; Protection; Shelter and Settlements; WASH	Ituri, North Kivu, South Kivu, Tanganyika	\$26,000,000
UN Office for the Coordination of Humanitarian Affairs (OCHA)	HCIMA	Countrywide	\$1,500,000
World Relief International (WRI)	Agriculture, Food Assistance—Local, Regional, and International Procurement (LRIP)	North Kivu, Tanganyika	\$5,500,000
Implementing Partners	Agriculture, Food Assistance, Health, HCIMA, Nutrition, Protection, Shelter and Settlements, WASH	Djugu, Lower Uele, Maniema, North Kivu, North Ubangi, South Kivu, South Ubangi, Tshopo	\$53,487,870
Logistics Support			\$862,936
Program Support			\$726,885
TOTAL USAID/BHA FUNDING			\$362,417,909

STATE/PRM			
International Committee of the Red Cross	Agriculture; Economic Recovery and Market Systems (ERMS); Food Assistance—Cash Transfers for Food, Food Vouchers; HCIMA; Health; Logistics Support; Multipurpose Cash Assistance (MPCA); Protection; Shelter and Settlements; WASH	Countrywide	\$3,300,000
UNHCR	Camp Coordination and Camp Management; Education, ERMS, HCIMA, Health, Logistics Support; Livelihoods; MPCA; Protection; Shelter and Settlements; WASH	Countrywide	\$9,360,000
Implementing Partners	Protection	Ituri, South Ubangi, Upper Uele	\$50,000
TOTAL STATE/PRM FUNDING			\$12,710,000
TOTAL USG HUMANITARIAN FUNDING FOR THE DRC RESPONSE IN FY 2024			\$375,127,909

¹ Year of funding indicates the date of commitment or obligation, not appropriation, of funds. Funding figures reflect publicly announced funding as of March 21, 2024.

² Estimated value of food assistance and transportation costs at time of procurement; subject to change.

³ This total does not include the more than \$11.9 million in FY 2024 State/PRM funding for Congolese refugees in neighboring countries, which increases the total USG emergency funding for the DRC complex emergency in FY 2024 to \$306 million.

PUBLIC DONATION INFORMATION

- The most effective way people can assist relief efforts is by making cash contributions to humanitarian organizations that are conducting relief operations. A list of humanitarian organizations that are accepting cash donations for disaster responses around the world can be found at [interaction.org](https://www.interaction.org).
- USAID encourages cash donations because they allow aid professionals to procure the exact items needed, often in the affected region; reduce the burden on scarce resources, such as transportation routes, staff time, and warehouse space; can be transferred very quickly and without transportation costs; support the economy of the disaster-stricken region; and ensure culturally, dietarily, and environmentally appropriate assistance.
- More information can be found at:
 - USAID Center for International Disaster Information: [cidi.org](https://www.cidi.org)
 - Information on relief activities of the humanitarian community can be found at [reliefweb.int](https://www.reliefweb.int).

USAID/BHA bulletins appear on the USAID website at [usaid.gov/humanitarian-assistance/where-we-work](https://www.usaid.gov/humanitarian-assistance/where-we-work)