

DEMOCRATIC REPUBLIC OF THE CONGO - COMPLEX EMERGENCY

FACT SHEET #1, FISCAL YEAR (FY) 2016

FEBRUARY 3, 2016

NUMBERS AT A GLANCE

7.5 million

People Requiring Humanitarian Assistance in DRC
UN – January 2016

1.6 million

IDPs in DRC
UN – September 2015

4.5 million

Acutely Food-Insecure People in DRC
Food Security Cluster – November 2015

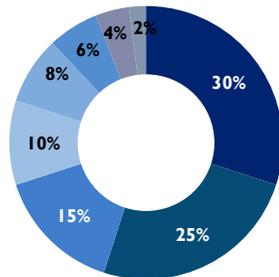
447,875

DRC Refugees in Africa
UNHCR – January 2016

247,033

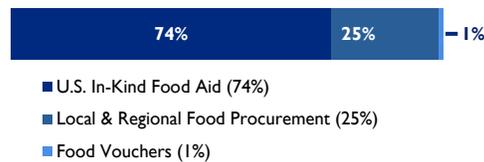
Refugees from Neighboring Countries in DRC
UNHCR – January 2016

USAID/OFDA¹ FUNDING BY SECTOR IN FY 2015–2016



- Logistics & Relief Commodities (30%)
- Health (25%)
- Water, Sanitation & Hygiene (15%)
- Agriculture & Food Security (10%)
- Humanitarian Coordination & Information Management (8%)
- Protection (6%)
- Shelter & Settlements (4%)
- Economic Recovery & Market Systems (2%)

USAID/FFP² FUNDING BY MODALITY IN FY 2015–2016



KEY DEVELOPMENTS

- In late 2015 and early 2016, clashes between armed actors and UN peacekeepers and government soldiers continued to result in deaths and population displacement across eastern Democratic Republic of the Congo (DRC), particularly in North Kivu Province.
- A November 2015 food security assessment found an approximately 31 percent decline in the population experiencing acute food insecurity compared to late 2014. Despite the improvement, nearly 4.5 million people in DRC remain acutely food-insecure.
- In FY 2015 and to date in FY 2016, the U.S. Government (USG) has provided more than \$202 million in humanitarian assistance to support conflict-affected populations in DRC. In January 2016, USAID/FFP provided an additional \$10 million in emergency food assistance, while USAID/OFDA partners assessed priority humanitarian needs and provided water, sanitation, and hygiene (WASH) support to newly displaced populations and host communities. In addition, State/PRM continued to provide life-saving emergency assistance to support more than 247,000 refugees sheltering in DRC.

HIGHLIGHTS

- Insecurity generates displacement, significant humanitarian needs
- 2016 HRP for DRC calls for \$690 million in humanitarian assistance
- USAID provides additional \$25 million in emergency food assistance and supports humanitarian assessments

HUMANITARIAN FUNDING FOR THE DRC RESPONSE IN FY 2015–2016

USAID/OFDA	\$49,386,194
USAID/FFP	\$87,115,989
State/PRM ³	\$65,550,000
\$202,052,183	

¹ USAID's Office of U.S. Foreign Disaster Assistance (USAID/OFDA)

² USAID's Office of Food for Peace (USAID/FFP)

³ U.S. Department of State's Bureau of Population, Refugees, and Migration (State/PRM)

DISPLACEMENT, INSECURITY, AND HUMANITARIAN ACCESS

Current Situation

- In late 2015 and early 2016, insecurity continued to generate population displacement, hinder humanitarian access, and exacerbate humanitarian needs in conflict-affected areas of eastern DRC. The UN has noted a recent increase in kidnappings and humanitarian convoy attacks, contributing to delays in the delivery of humanitarian assistance and forcing some relief organizations to suspend operations. During 2015, armed groups in DRC abducted at least 175 people, including humanitarian workers, UN staff, and community members, international media reported.
- In mid-December, armed actors attacked and temporarily abducted two Médecins Sans Frontières (MSF) staff members in North Kivu, according to international media. On January 20, MSF announced the end of the organization's operations in North Kivu's Mweso town, Masisi Territory, due to ongoing insecurity near the town. During 2015, MSF supported at least one health facility in Mweso that provided health care services to more than 176,000 individuals, according to the organization. Armed individuals also abducted at least 14 relief workers during an attack on a humanitarian convoy in North Kivu's Rutshuru Territory in early November; all abducted humanitarian workers were subsequently released unharmed, according to international media.
- Following the discovery of a weapon on January 6, provincial authorities in North Kivu closed the Mokoto displacement site on January 12—forcing more than 4,200 internally displaced persons (IDPs) to relocate, the UN reported. The UN Office for the Coordination of Humanitarian Affairs (OCHA) expressed concern regarding the situation and urged provincial authorities to consult with the humanitarian community prior to IDP camp closures to ensure respect for IDP rights and the safe relocation of affected individuals.

Ituri⁴ and North Kivu Provinces

- Armed groups, including Allied Democratic Forces (ADF) and the Democratic Forces for the Liberation of Rwanda (FDLR), continued to clash with Armed Forces of DRC (FARDC) personnel across North Kivu between October 2015 and January 2016. In particular, intensified FARDC military operations against the FDLR in North Kivu have resulted in increased FDLR attacks against civilian populations and generated significant population displacement. Humanitarian organizations estimate that increased insecurity in North Kivu's Lubero Territory displaced up to 90,000 people from November–January, according to the UN.
- In Lubero, the Rapid Response to Population Movement (RRPM)—a standing platform managed by the UN Children's Fund (UNICEF) with USAID/OFDA support—recently conducted humanitarian assessments to identify priority needs, such as emergency food, health care, and WASH. As of late January, the UN World Food Program (WFP), a USAID/WFP partner, was providing High-Energy Biscuits to approximately 48,000 new IDPs and host community members in the territory.
- On November 29, suspected ADF members conducted a coordinated attack against FARDC and UN Organization Stabilization Mission in DRC (MONUSCO) personnel in Eringeti town in North Kivu's Beni Territory. The attack resulted in at least 24 deaths, including seven civilians, one UN peacekeeper, and four FARDC soldiers, according to international media. At least 12 suspected ADF militants also died during the fighting. On November 30, UN Secretary-General Ban Ki-moon and the UN Security Council condemned the attack, calling for authorities to bring the perpetrators to justice. Suspected ADF forces killed more than 500 civilians in North Kivu between October 2014 and November 2015, according to the UN.
- Insecurity near the North Kivu–Ituri Province border during 2014 and 2015 generated significant population displacement. Approximately 32,500 IDPs were sheltering along the road between Ituri's Komanda and Luna towns prior to November 2015. Following late-November clashes in Eringeti between ADF and FARDC forces, up to 30,000 additional people fled the town and began sheltering in towns along the Komanda–Luna axis, relief organizations reported. In 2015, international donors provided approximately \$2.3 million to support life-saving

⁴ Located in the area formerly known as Orientale Province. In August 2015, the Government of DRC (GoDRC) began implementing a decentralization plan that redraws district and province borders, resulting in province name changes and an increase in the total number of provinces from 11 to 26.

interventions for the 32,500 IDPs; however, an additional \$1.5 million in humanitarian assistance is required to meet the needs of the 30,000 new IDPs in the area, according to the UN.

- Oxfam/Great Britain (Oxfam/GB), with ongoing USAID/OFDA FY 2015 funding, is supporting WASH interventions—such as hygiene promotion, latrine construction, and other sanitation activities—for IDPs and host communities in Ituri and North Kivu, including more than 20,300 newly displaced people. In addition, USAID/OFDA partner Medair is supporting seven health facilities in the Komanda area to provide primary health care services for IDPs and host communities.

Haut-Katanga, Haut-Lomani, Lulaba, and Tanganyika Provinces⁵

- In 2014 and 2015, more than 7,000 incidents of intercommunal violence in Tanganyika Province displaced nearly 100,000 people and resulted in more than 600 deaths, according to the UN. In addition, the UN continues to report significant protection violations across Haut-Katanga, Haut-Lomani, Lulaba, and Tanganyika provinces. Between January and October 2015, the UN reported more than 20,000 protection incidents in the four provinces, a more than 50 percent increase compared to the 13,000 protection incidents reported during 2014. The protection incidents, including gender-based violence and child recruitment, particularly affected IDPs and returnees.
- Between August and November 2015, approximately 12,600 IDPs returned to areas of origin in Haut-Katanga's Mitwaba Territory, the UN reported. From October 19–22, the USAID/OFDA-supported RRMP conducted a multi-sector humanitarian needs assessment of affected populations in the area. The assessment indicated that ongoing insecurity in the area had disrupted agricultural and livelihood activities for affected populations.

Tshopo Province⁶

- From November 2015 to January 2016, above-average rainfall across DRC generated flash flooding and destroyed houses, roads, and other infrastructure, according to the UN. The most affected areas were along the Congo River, including Équateur, Kongo Central, Mai-Ndombe, Maniema, Mongala, and Tshopo provinces.
- By mid-January 2016, the flooding had affected approximately 250,000 people in Tshopo and damaged nearly 50 health facilities, approximately 500 houses, and more than 50 schools, the UN reported. In addition, floodwaters inundated an estimated 1,100 agricultural fields and water and sanitation facilities in affected areas.
- In response to the flooding, provincial authorities and non-governmental organizations (NGOs) have provided WASH support to affected populations; delivered emergency relief commodities, including key medicines; and established a crisis committee to manage the response effort. As of late December, relief actors and international donors had provided approximately \$145,000 to local health authorities to support cholera prevention and flood-related response activities in Tshopo. Relief organizations in Tshopo have identified \$3 million in additional relief requirements to address urgent humanitarian needs, including provision of relief commodities and health, food security, shelter, and WASH support.

FOOD SECURITY, LIVELIHOODS, AND RELIEF COMMODITIES

- On November 15, 2015, the Food Security Cluster—the coordinating body for humanitarian food security activities, comprising UN agencies, NGOs, and other stakeholders—released results from the latest food security assessment in DRC. The assessment, which included 84 of DRC's 145 territories, found that nearly 4.5 million people were experiencing Crisis or Emergency—IPC 3 or 4—levels of food insecurity as of September 2015, an approximately 31 percent decline compared to the 6.5 million people identified as acutely food-insecure in December 2014.⁷
- According to the assessment, Emergency-level food insecurity is concentrated in conflict-affected areas across seven territories—Ituri's Irumu Territory; Maniema's Punia Territory; North Kivu's Beni and Walikale territories; South Kivu

⁵ Located in the area formerly known as Katanga Province.

⁶ Located in the area formerly known as Orientale Province.

⁷ The Integrated Food Security Phase Classification (IPC) is a standardized tool that aims 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.

Province's Shabunda Territory; and Tanganyika's Manono and Nyunzu territories. Armed conflict, ongoing insecurity, and population displacement are the primary drivers of food insecurity in DRC, according to the assessment.

- USAID partner Catholic Relief Services (CRS) is providing humanitarian assistance to conflict-affected populations—especially IDPs and returnees—across eastern DRC. In North Kivu's Masisi Territory during late October 2015, CRS utilized USAID/OFDA support to provide emergency relief commodities to more than 3,700 IDPs, while USAID/FFP support enabled CRS to provide food vouchers to more than 1,900 IDP households. During the same period, CRS delivered relief commodities and food vouchers to more than 960 returnee households in Haut-Katanga's Pweto Territory. CRS is also bolstering livelihood activities in Pweto through a cash-for-work program that supports up to 1,100 beneficiaries to repair and rehabilitate more than 18 miles of roads in the territory, including the main axis between Pweto's Kabanga and Mutabi towns.
- In FY 2015, USAID/FFP and USAID/OFDA provided approximately \$2.5 million and \$2.7 million, respectively, through a joint award to support CRS rapid response programs in eastern DRC.
- To date in FY 2016, USAID/FFP has provided WFP with approximately \$25 million in emergency food assistance, including in-kind and local and regional procurement, to assist conflict-affected populations in eastern DRC.

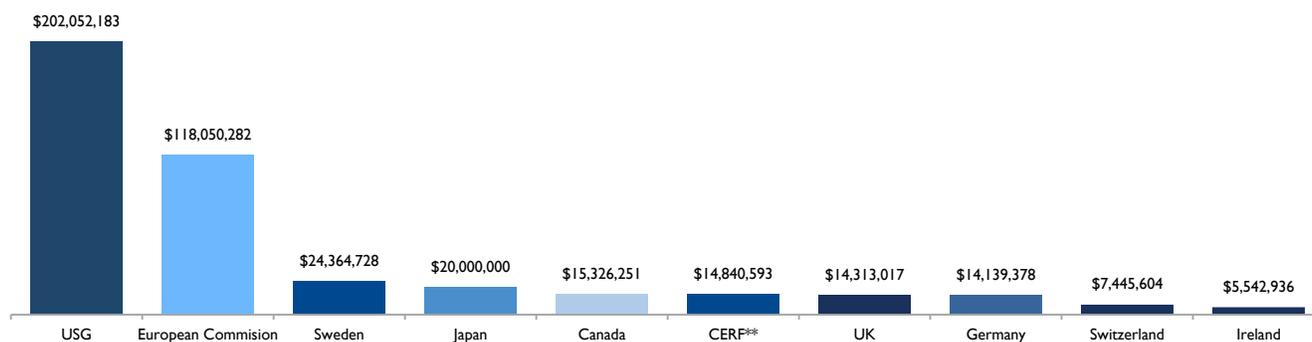
HEALTH AND WASH

- Health care workers recorded more than 47,000 suspected measles cases, including more than 500 deaths, in DRC between January and November 2015, according to UNICEF. The 2015 caseload is the worst measles epidemic in DRC since 2011, when relief organizations identified approximately 134,000 suspected measles cases. In August 2015, the UN-managed Common Humanitarian Fund—which finances under-funded, priority humanitarian interventions—allocated \$2.4 million to address the measles outbreak by supporting emergency health services and immunization campaigns in the affected provinces.
- Health actors near South Kivu's Bukavu city confirmed 80 cholera cases between November 23 and December 14, representing the first cholera cases near the city since 2013, according to the UN. The majority of reported cases were from Buholo, Igoki, and Nyamiera towns.
- USAID/OFDA partner the International Rescue Committee (IRC) and other relief actors, in collaboration with provincial health authorities, have initiated response activities, including the organization of water chlorination points and installation of safe drinking water reservoirs for cholera treatment centers. In addition, provincial health authorities, with support from MSF, UNICEF, and the UN World Health Organization (WHO), are providing life-saving medical care to cholera cases.

OTHER HUMANITARIAN ASSISTANCE

- The UN Humanitarian Country Team for DRC—comprising representatives from the UN, international organizations, and NGOs—recently released the 2016 Humanitarian Response Plan (HRP), requesting approximately \$690 million to support urgent humanitarian interventions in DRC between January and December 2016. The 2016 HRP identified an estimated 7.5 million people requiring humanitarian assistance, of which the HRP targets up to 6 million of the most vulnerable people—including more than 1.3 million people in North Kivu, approximately 700,000 people in South Kivu, and more than 475,000 people in Tanganyika, among other provinces.
- During 2015, international donors provided more than \$379 million—approximately 55 percent—towards the \$692 million 2015 HRP. Due to competing global priorities for humanitarian funding, the new HRP encourages improved efficiency in the provision of assistance. The 2016 HRP plans to target approximately 6 million vulnerable people, an approximate 7 percent increase in the number of individuals targeted for assistance compared to the 2015 HRP.
- In FY 2015 and to date in FY 2016, the USG has provided more than \$202 million to support humanitarian interventions in DRC. USG humanitarian assistance for DRC supports both HRP projects and other humanitarian activities across the country.

2015–2016 TOTAL HUMANITARIAN FUNDING* PER DONOR



*Funding figures are as of February 3, 2016. All international figures are according to the OCHA Financial Tracking Service and based on international commitments during 2015 and 2016, while USG figures are according to the USG and reflect the most recent USG commitments for FY 2015 and FY 2016—which began on October 1, 2014, and October 1, 2015, respectively.

**Central Emergency Response Fund (CERF)—a pooled humanitarian fund established and managed by the UN to support sudden-onset and underfunded emergencies.

CONTEXT

- Despite the implementation of a peace agreement in 2003, fighting between forces loyal to the GoDRC and various armed entities, including the ADF, Mai-Mai militants, and the FDLR, has contributed 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 DRC and triggered mass internal displacement and refugee outflows.
- In response to ongoing humanitarian needs, on October 1, 2015, U.S. Ambassador James C. Swan reissued a disaster declaration for the complex emergency in DRC for FY 2016.

USG HUMANITARIAN FUNDING FOR THE DRC RESPONSE IN FY 2015–2016¹

IMPLEMENTING PARTNER	ACTIVITY	LOCATION	AMOUNT
USAID/OFDA²			
Agency for Technical Cooperation and Development (ACTED)	Agriculture and Food Security, Logistics Support and Relief Commodities	Former-Katanga, Maniema, North Kivu, South Kivu	\$998,401
Concern	Logistics Support and Relief Commodities, Shelter and Settlements	North Kivu	\$1,163,677
CRS	Economic Recovery and Market Systems (ERMS), Logistics Support and Relief Commodities, Shelter and Settlements	Former-Katanga, North Kivu, South Kivu	\$2,700,633
Handicap International	Logistics Support and Relief Commodities	North Kivu	\$1,724,483
International Medical Corps (IMC)	Health	North Kivu	\$3,500,000
International NGO Safety Organization (INSO)	Humanitarian Coordination and Information Management	North Kivu, South Kivu	\$500,789
International Organization for Migration (IOM)	Humanitarian Coordination and Information Management, Shelter and Settlements	Eastern DRC	\$3,000,500

IRC	Health, Protection	North Kivu, South Kivu	\$1,548,238
Medair	Health	North Kivu, Former-Orientale	\$3,500,000
Mercy Corps	WASH	North Kivu	\$1,600,000
OCHA	Humanitarian Coordination and Information Management	Eastern DRC	\$2,000,000
Oxfam/GB	WASH	Eastern DRC	\$4,000,000
Première Urgence	Agriculture and Food Security, Logistics Support and Relief Commodities	Former-Katanga, North Kivu	\$2,000,000
Save the Children/U.S. (SC/US)	Health	North Kivu	\$1,880,883
Samaritan's Purse	Agriculture and Food Security, Logistics Support and Relief Commodities	North Kivu, Former-Orientale	\$2,435,036
UN Humanitarian Air Service (UNHAS)	Logistics Support and Relief Commodities	Countrywide	\$6,000,000
UNICEF	Health, Logistics Support and Relief Commodities, Protection, WASH	Eastern DRC	\$7,320,431
Welthungerhilfe (WHH)	Agriculture and Food Security	North Kivu	\$987,800
World Relief International (WRI)	Agriculture and Food Security, Logistics Support and Relief Commodities	North Kivu	\$1,039,603
	Program Support		\$1,485,720
TOTAL USAID/OFDA FUNDING			\$49,386,194
USAID/FFP³			
ACTED	Food Vouchers for Emergency Food Assistance	Former-Katanga, Maniema, North Kivu, South Kivu	\$2,396,802
CRS	Food Vouchers and Local Procurement for Emergency Food Assistance	Former-Katanga, Maniema, North Kivu, South Kivu	\$2,499,367
Samaritan's Purse	Food Vouchers and Local and Regional Procurement for Emergency Food Assistance	North Kivu, Former-Orientale	\$2,306,630
UNICEF	710 MT of Ready-to-Use Therapeutic Food and Programming Costs	Former-Kasai Occidental, Former-Kasai Oriental, South Kivu	\$4,977,190
WFP	29,220 MT of Emergency Food Assistance, Nutrition, Food-for-Work, Food-for-Training, and Emergency School Feeding	Eastern DRC	\$53,936,000
	Local and Regional Procurement of Emergency Food Assistance	Eastern DRC	\$17,750,000
	Strengthening Food Security Cluster Coordination	Eastern DRC	\$1,250,000
	Emergency Road Infrastructure Repairs in Support of WFP Operations	Eastern DRC	\$2,000,000
TOTAL USAID/FFP FUNDING			\$87,115,989
STATE/PRM			
ACTED	WASH Support to Central African Republic (CAR) Refugees	Nord-Ubangi, Sud-Ubangi provinces	\$1,000,000
International Committee of the Red Cross (ICRC)	Protection and Assistance for Refugees and Other Vulnerable Populations	Countrywide	\$17,300,000
IOM	Repatriation of Angolan Refugees from DRC to Angola	Kongo Central Province	\$250,000

Première Urgence	Income Generation and Livelihoods Support to CAR Refugees	Sud-Ubangi	\$1,000,000
UNHAS	Logistics Support and Relief Commodities	Countrywide	\$600,000
UNHCR	Global Appeal for Refugees and IDPs in DRC	Countrywide	\$42,800,000
	Registration and Repatriation Sensitization for Rwandan Refugees	Eastern DRC	\$1,000,000
	Supplementary Appeal in Response to Burundi Regional Crisis	Eastern DRC	\$1,600,000
TOTAL STATE/PRM FUNDING			\$65,550,000
TOTAL USG HUMANITARIAN FUNDING FOR THE DRC RESPONSE IN FY 2015–2016			\$202,052,183

¹Year of funding indicates the date of commitment or obligation, not appropriation, of funds.

²USAID/OFDA funding represents anticipated or actual obligated amounts as of February 3, 2016.

³Estimated value of food assistance.

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 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, dietary, and environmentally appropriate assistance.
- More information can be found at:
 - USAID Center for International Disaster Information: www.cidi.org or +1.202.821.1999.
 - Information on relief activities of the humanitarian community can be found at www.reliefweb.int.

USAID/OFDA bulletins appear on the USAID website at <http://www.usaid.gov/what-we-do/working-crises-and-conflict/responding-times-crisis/where-we-work>