

# Democratic Republic of the Congo – Complex Emergency

SEPTEMBER 30, 2021

## SITUATION AT A GLANCE

|  |  |   |   |  |
|--|--|---|---|--|
| <p><b>19.6</b><br/>MILLION</p> <p>Estimated Population in Need of Assistance</p> <p><i>UN – September 2021</i></p> | <p><b>26.2</b><br/>MILLION</p> <p>Estimated Acutely Food-Insecure Population</p> <p><i>IPC – July 2021</i></p> | <p><b>5.2</b><br/>MILLION</p> <p>Estimated Number of IDPs in the DRC</p> <p><i>UNHCR – September 2021</i></p> | <p><b>962,000</b></p> <p>Estimated Number of Congolese Refugees in Neighboring Countries</p> <p><i>UNHCR – September 2021</i></p> | <p><b>515,000</b></p> <p>Estimated Number of Refugees Sheltering in the DRC</p> <p><i>UNHCR – September 2021</i></p> |
|--|--|---|---|--|

- Intensified military operations conducted by security forces in eastern DRC and armed group attacks on civilian populations have resulted in numerous casualties and mass displacement in recent months.
- Malnutrition among children ages five years and younger and pregnant and lactating women is projected to significantly increase in health zones across the DRC, according to a September IPC analysis.
- Armed attacks on civilian and humanitarian traffic continue to affect humanitarian organizations operating in the DRC.



|  |                        |                      |
|--|------------------------|----------------------|
| <b>TOTAL U.S. GOVERNMENT HUMANITARIAN FUNDING</b><br>For the DRC Response in FY 2021 | USAID <sup>1</sup>     | \$403,146,334        |
|  | State/PRM <sup>2</sup> | \$39,375,000         |
|  | <b>Total</b>           | <b>\$442,521,334</b> |

*For complete funding breakdown with partners, see detailed chart on page 5*

<sup>1</sup>This total includes approximately \$400 million in funding through USAID’s Bureau for Humanitarian Assistance (USAID/BHA) for the complex emergency and Ebola virus disease (EVD) response, as well as \$1.5 million in funding through USAID’s Bureau for Global Health (USAID/GH) for EVD response activities.

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

## KEY DEVELOPMENTS

### Increased Clashes Lead to Civilian Casualties in Ituri and North Kivu

Despite the continuing “state of siege” in Ituri and North Kivu provinces, declared by the Government of the Democratic Republic of the Congo (GoDRC) on May 6, security conditions in Ituri have continued to deteriorate as the Armed Forces of the DRC (FARDC) engage armed groups in the province, leading to civilian casualties and displacement, according to a UN Joint Human Rights Office (UNJHRO) September report. Clashes between FARDC elements and armed actors—most prominently the Allied Democratic Forces (ADF)—in Ituri’s Irumu and Djugu territories resulted in the deaths of 268 civilians and more than 60 civilian injuries from mid-June to early September.

While ADF has conducted its operations throughout southern Ituri, the group has primarily concentrated their attacks in two areas of Ituri’s Irumu Territory, along the Komanda-Luna road and near the town of Boga, according to relief actors and local media reports. ADF operations in Irumu have resulted in the deaths of 134 citizens, the abduction of an estimated 230 people, and the displacement of more than 13,200 people between June 19 and September 6, reports UNJHRO. In a recent incident, ADF forces attacked Irumu’s Makutano village on September 4, killing 30 people, according to international media.

ADF elements have also increasingly targeted civilians in North Kivu’s Beni Territory, resulting in 121 civilian deaths and more than 30 injuries between mid-June and early September, according to UNJHRO. ADF combatants have also specifically targeted civil society representatives and local chiefs engaged in protection and human rights activities, killing three such individuals between June and September.

### Increasing Insecurity Prompts Displacement in South Kivu Highlands

Clashes between FARDC elements and armed groups continue to prompt widespread displacement in South Kivu Province, generating increased humanitarian needs among displaced populations. Hostilities in mid-August in the South Kivu highlands—also known as the Hauts-Plateaux region—displaced nearly 4,400 people from South Kivu’s Fizi Territory to nearby Uvira Territory, according to the UN. Armed actors continue to maintain a presence in outlying villages of Fizi and Uvira, and attacks by these armed groups resulted in the displacement of 150 households from several localities in Uvira in late September.

Beyond the South Kivu highland region, the security situation in Uvira’s Ruzizi health zone—a GoDRC geographical subdivision of a territory—has specifically deteriorated in recent months; UNJHRO reported more than 70 incidents of violence—including the kidnapping of civilians—in the health zone from mid-June to early September. This insecurity continued through September, as clashes between the FARDC elements and armed groups have displaced more than 2,600 people in Ruzizi as of mid-September, the UN reports.

Security-related access constraints have limited humanitarian capacity and prevented internally displaced persons (IDPs) in South Kivu from receiving urgently-needed emergency assistance, such as food, health, shelter, and other emergency supplies, as of September 15, the UN reports. UN Deputy Humanitarian Coordinator (DHC) Suzanna Tkalec called on relief actors to scale up their presence and operations in South Kivu to meet rising needs as security conditions permit—particularly in areas where the increased FARDC presence has improved security conditions—following a visit to the affected areas of South Kivu on August 27. While security conditions in areas of South Kivu highlands remain volatile, the UN Humanitarian Air Service (UNHAS) resumed flights to certain Fizi localities in mid-September, and non-

governmental organizations (NGOs) are reportedly returning to the area following a period of relative calm, the UN reports.

### **August Clashes in Kasai Result in Continued Displacement**

From August 16 to 18, armed clashes between FARDC and local armed groups in Kasai Province's Mweka Territory displaced at least 20,000 people from Mweka's Kakenge Health Zone, the UN reports. Despite the presence of FARDC soldiers in Kakenge, return movements had not commenced to the health zone as of mid-September due to security and protection concerns related to intercommunal violence and incidents of physical assault, sexual assault, and abductions. Kakenge has experienced several outbreaks of violence in recent months, resulting in the displacement of approximately 60,000 people between December 2020 and August 2021. While multi-sector assessments are required to determine the range of IDP needs, humanitarian actors have identified the presence of unaccompanied children among IDPs sheltering in host communities as a significant protection risk.

### **Insecurity Continues to Impact Relief Agencies Operating in Eastern DRC**

The UN recorded nearly 220 security incidents affecting relief agencies across the DRC between January and August, the majority of which were violent or criminal acts, such as armed assault, looting, robbery, and theft. More than 80 percent of these incidents occurred in eastern DRC, with nearly 70 percent—approximately 150 incidents—recorded in Ituri, North Kivu, and South Kivu. As of late August, insecurity had resulted in the deaths of at least five aid workers and injured 19 others. Armed actors also abducted at least 19 humanitarian personnel during the same period, reflecting the risk relief actors face while delivering life-saving assistance in volatile parts of eastern DRC.

### **Deterioration of Nutrition Levels Across 70 Health Zones Countrywide**

Approximately 900,000 children ages five years and younger and nearly 470,000 pregnant and lactating women in DRC are likely to experience wasting—the deadliest form of malnutrition—through August 2022, according to a September 2021 Integrated Food Security Phase Classification (IPC) analysis.<sup>1</sup> Additionally, of the children likely to experience wasting, an estimated 220,000 are projected to experience severe wasting—a life-threatening form of malnutrition—between September 2021 and August 2022. The analysis, which surveyed individuals in 70 of the nearly 520 health zones in DRC, found that insecurity and displacement; chronic food insecurity; poor child feeding practices; inadequate water, sanitation, and hygiene (WASH) services; and a high prevalence of illnesses, including malaria, diarrhea, measles, and cholera, were the main drivers of acute malnutrition among the surveyed population.

<sup>1</sup> The 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 and time, ranges from Minimal—IPC 1—to Famine—IPC 5—for acute food insecurity.

## KEY FIGURES



**4.6 Million**

Individuals provided food assistance in 2021 by USAID/BHA partner WFP



**\$58 Million**

In dedicated USG support for nutrition assistance in FY 2021



**\$26.8 Million**

In dedicated USG support for life-saving health care and Ebola response and preparedness programming in FY 2021



**\$22.7 Million**

In dedicated USG support for shelter and settlements programming in FY 2021

## U.S. GOVERNMENT RESPONSE

### FOOD SECURITY

USAID/BHA partners, including the UN World Food Program (WFP), continue to provide emergency food assistance to host community members, IDPs, refugees, and other vulnerable populations facing acute food insecurity in the DRC. With approximately \$222 million in USAID/BHA support in Fiscal Year (FY) 2021, NGO and UN partners are providing cash transfers for food, food vouchers, and in-kind food assistance—including U.S.-sourced commodities—to help vulnerable households meet their basic food needs.

### NUTRITION

USAID/BHA provided more than \$58 million in FY 2021 funding to assist acutely malnourished individuals; UN agencies and NGO partners also conduct activities to support improved nutrition outcomes, such as distributing tools and seeds to bolster household agricultural production and conducting awareness campaigns on dietary needs. USAID/BHA also provides funding to strengthen the coordination of food and nutrition interventions and ensure critical assistance is reaching the most vulnerable.

### HEALTH

USAID/BHA provided more than \$22.6 million in FY 2021 funding to expand community access to primary health care services, increase the availability of essential medicines and supplies, and support disease surveillance and response efforts, among other activities. Notably, USAID/BHA supports the procurement and distribution of post-exposure prophylaxis kits, as well as related health worker training, bolstering the clinical management of gender-based violence cases in health facilities across 10 provinces. USAID also supports health messaging efforts, encouraging the adoption of recommended health and hygiene best practices to prevent the spread of communicable diseases, including coronavirus disease (COVID-19).

### SHELTER AND SETTLEMENTS

USAID/BHA provided approximately \$23 million in FY 2021 to support the provision of shelter assistance to IDPs and returnees in crisis-affected areas of the DRC. U.S. Government (USG) partners play a leading role in constructing emergency shelters for displaced individuals and managing IDP and refugee camps in the DRC. In addition, USAID/BHA partners provide longer term shelter solutions for returnees in areas where the situation has stabilized, paired with legal assistance to help families secure land for farming and habitation in areas where IDPs are resettled. USG partners also provide relief commodities and household items, including blankets, mats, tools, and water containers, to assist IDP, returnee, and refugee households to meet their basic needs.



3

USAID/BHA partners providing WASH support to volcano-affected populations in Goma in FY 2021

## WASH

USAID/BHA has provided approximately \$27 million in FY 2021 funding to support WASH activities in 10 provinces across the DRC, helping to improve access to safe drinking water and sanitation infrastructure and reduce the spread of infectious diseases, such as cholera, COVID-19, measles, and EVD. USAID/BHA-supported activities include constructing and rehabilitating WASH infrastructure, including handwashing stations, latrines, showers, and water points; transporting emergency water reserves to IDP sites; and distributing hygiene kits and other essential WASH commodities. In addition, with USAID/BHA support, Mercy Corps, Oxfam, and the UN Children's Fund (UNICEF) are providing critical WASH assistance to populations in Goma displaced or otherwise affected by the eruption of Mount Nyiragongo.

## CONTEXT IN BRIEF

- Despite the implementation of a peace agreement in 2003, fighting between forces loyal to the GoDRC and various armed entities, including the Democratic Forces for the Liberation of Rwanda and Mai Mai elements, 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.
- Citing a rising number of armed group attacks against civilians, President of the DRC Félix Tshisekedi declared a 30-day “state of siege” in eastern DRC’s Ituri and North Kivu provinces on May 6, which authorities extended for the seventh time on September 1. The GoDRC edict vastly expands the powers of the FARDC in the two provinces, allowing FARDC officials to temporarily assume control of the provincial governments.
- On November 3, 2020, U.S. Ambassador to the DRC Michael A. Hammer re-declared a disaster for FY 2021 due to ongoing complex emergency conditions in the DRC, citing the significant level of unmet humanitarian needs in the DRC exceeding the government’s capacity to respond and the willingness of the GoDRC to accept humanitarian assistance.
- EVD is endemic to some animal species in the DRC, with periodic human disease outbreaks occurring in the country. Ambassador Hammer re-declared a disaster due to the humanitarian impact of the EVD outbreak in Équateur Province on October 16, 2020.
- On May 25, 2021, U.S. Chargé d’Affaires in the DRC Marion Ekpuk declared a disaster due to the effects of the May 22 Mount Nyiragongo volcanic eruption in North Kivu.

**USG HUMANITARIAN FUNDING FOR THE DRC RESPONSE IN FY 2021<sup>1</sup>**

| <b>IMPLEMENTING PARTNER</b>                                  | <b>ACTIVITY</b>  | <b>LOCATION</b>  | <b>AMOUNT</b> |
|--|--|--|---------------|
| <b>FUNDING IN THE DRC FOR THE COMPLEX EMERGENCY RESPONSE</b> |  |  |               |
| <b>USAID/BHA</b>   |  |  |               |
| Action contre la Faim (ACF)                                  | Agriculture, Food Assistance—Vouchers, Nutrition   | Ituri  | \$9,800,000   |
| Adventist Development and Relief Agency (ADRA)               | Agriculture; Economic Recovery and Market Systems (ERMS); Food Assistance—Local, Regional, and International Procurement (LRIP); WASH  | Kasaï  | \$7,000,000   |
| African Initiatives for Relief and Development (AIRD)        | Shelter and Settlements, WASH  | Ituri  | \$1,649,995   |
| Agency for Technical Cooperation and Development (ACTED)     | Agriculture; ERMS; Food Assistance—Cash Transfers for Food and LRIP; Humanitarian Coordination, Information Management, and Assessments (HCIMA); Shelter and Settlements; WASH | Bas-Uélé, Ituri, Maniema, Nord-Ubangi, North Kivu, South Kivu, Sud-Ubangi, Tanganyika                    | \$24,362,924  |
| CARE   | Health; Protection; WASH   | North Kivu   | \$3,390,414   |
| Catholic Relief Services (CRS)                               | Agriculture; Food Assistance—Cash Transfers for Food, LRIP, and Vouchers; Shelter and Settlements; WASH  | Tanganyika   | \$6,999,580   |
| Concern Worldwide  | Agriculture; ERMS; Food Assistance—Cash Transfers for Food and Vouchers  | Tanganyika   | \$10,000,000  |
| DanChurchAid   | ERMS; Protection; Shelter and Settlements; WASH  | North Kivu   | \$3,500,000   |
| Danish Refugee Council                                       | Agriculture; ERMS; Protection; Shelter and Settlements; WASH   | Ituri, North Kivu  | \$4,249,964   |
| Doctors of the World   | Health; Nutrition; Protection; WASH  | South Kivu   | \$2,945,000   |
| FHI 360  | Health; Nutrition; WASH  | Ituri, North Kivu  | \$6,495,873   |
| Interchurch Medical Assistance                               | Health   | Bas-Uélé, Haut-Katanga, Ituri, Kasaï, Kasaï Central, Maniema, North Kivu, South Kivu, Tanganyika, Tshopo | \$1,860,757   |
| International Medical Corps (IMC)                            | Health; Nutrition; Protection  | South Kivu   | \$6,495,000   |
| International NGO Safety Organization (INSO)                 | HCIMA  | Ituri, North Kivu, South Kivu  | \$897,210     |
| International Organization for Migration (IOM)               | HCIMA; Shelter and Settlements; WASH   | Ituri, North Kivu, Tanganyika  | \$12,500,000  |
| International Rescue Committee (IRC)                         | Health; Protection   | Ituri, North Kivu  | \$3,895,804   |
| Internews  | Health   | Countrywide  | \$500,000     |
| Medair   | Health; Nutrition; WASH  | Ituri, North Kivu  | \$5,430,652   |
| Norwegian Refugee Council (NRC)                              | Agriculture; Protection; Shelter and Settlements; WASH   | Ituri, Tanganyika  | \$5,150,000   |
| Oxfam  | WASH   | Ituri, Maniema, North Kivu, South Kivu, Tanganyika   | \$4,707,452   |
| People in Need   | Agriculture; Food Assistance—Vouchers; Nutrition   | South Kivu   | \$1,650,000   |

|  |  |                                      |                      |
|--|--|--------------------------------------|----------------------|
| Première Urgence Internationale (PUI)                            | Health; Nutrition; WASH  | North Kivu                           | \$2,000,000          |
| Samaritan's Purse  | Agriculture; Food Assistance—LRIP and Vouchers; Shelter and Settlements; WASH      | Haut-Uélé, Ituri, North Kivu, Tshopo | \$15,473,982         |
| Save the Children Federation (SCF)                               | Health; Nutrition; Protection; WASH  | Ituri, Kasai-Oriental                | \$7,850,000          |
| Swiss Interchurch Aid (HEKS)                                     | ERMS; Multipurpose Cash Assistance; WASH   | South Kivu                           | \$1,155,000          |
| Tearfund   | Agriculture; WASH  | Ituri                                | \$4,974,389          |
| UN Humanitarian Air Service (UNHAS)                              | Logistics Support  | Countrywide                          | \$4,850,000          |
| UNICEF   | HCIMA; Nutrition   | Countrywide                          | \$11,636,237         |
|  | WASH   | North Kivu                           | \$500,000            |
| UN Office for the Coordination of Humanitarian Affairs (OCHA)    | HCIMA  | Countrywide                          | \$1,000,000          |
| USAID Global Health Bureau (USAID/GH)                            | Nutrition  | Countrywide                          | \$500,000            |
| Welthungerhilfe (WHH)  | Agriculture; WASH  | North Kivu                           | \$1,471,000          |
| WFP  | Food Assistance— Cash Transfers for Food, LRIP, U.S. In-Kind Food Aid <sup>2</sup> | Countrywide                          | \$175,797,502        |
|  | HCIMA; Nutrition <sup>2</sup>  | Countrywide                          | \$39,254,638         |
| World Relief International (WRI)                                 | Agriculture  | Tanganyika                           | \$3,999,989          |
| World Vision   | WASH   | North Kivu                           | \$1,744,206          |
|  | Program Support  |                                      | \$9,461              |
| <b>TOTAL USAID/BHA FUNDING</b>                                   |  |                                      | <b>\$394,697,030</b> |
| <b>STATE/PRM<sup>3,4</sup></b>                                   |  |                                      |                      |
| UNHCR  | Multi-Sector Assistance for Refugees; Protection; Shelter and Settlements          | Countrywide                          | \$20,900,000         |
| International Committee of the Red Cross (ICRC)                  | Multi-Sector Assistance  | Countrywide                          | \$18,475,000         |
| <b>TOTAL STATE/PRM FUNDING</b>                                   |  |                                      | <b>\$39,375,000</b>  |
| <b>TOTAL USG FUNDING FOR COMPLEX EMERGENCY IN DRC IN FY 2021</b> |  |                                      | <b>\$434,072,030</b> |

### FUNDING IN THE DRC AND NEIGHBORING COUNTRIES FOR EVD OUTBREAK RESPONSE AND PREPAREDNESS<sup>2</sup>

| USAID/BHA |                   |          |             |
|-----------|-------------------|----------|-------------|
| Internews | Health            | Équateur | \$745,916   |
| IOM       | Health            | Équateur | \$1,888,612 |
| UNHAS     | Logistics Support | Équateur | \$3,267,354 |
|           | Program Support   |          | \$47,422    |

|   |        |  |                    |
|---|--------|--|--------------------|
| <b>TOTAL USAID/BHA FUNDING</b>  |        |  | <b>\$5,949,304</b> |
| <b>USAID/GH</b>   |        |  |                    |
| UNICEF  | Health | Équateur, Mai-Ndombe, Mongala, Tshuapa | \$1,150,000        |
| UNICEF  | Health | Republic of Congo                      | \$350,000          |
| <b>TOTAL USAID/GH FUNDING</b>   |        |  | <b>\$1,500,000</b> |
| <b>TOTAL USG FUNDING FOR EVD OUTBREAK PREPAREDNESS &amp; RESPONSE IN DRC IN FY 2021</b> |        |  | <b>\$7,449,304</b> |

|   |  |                      |
|---|--|----------------------|
| <b>TOTAL USAID FUNDING FOR THE DRC RESPONSE IN FY 2021</b>            |  | <b>\$403,146,334</b> |
| <b>TOTAL STATE/PRM FUNDING FOR THE DRC RESPONSE IN FY 2021</b>        |  | <b>\$39,375,000</b>  |
| <b>TOTAL USG HUMANITARIAN FUNDING FOR THE DRC RESPONSE IN FY 2021</b> |  | <b>\$442,521,334</b> |

<sup>1</sup> Year of funding indicates the date of commitment or obligation, not appropriation, of funds. Funding figures reflect publicly announced funding as of September 30, 2021.

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

<sup>3</sup> Funding for State/PRM does not include an additional \$29 million in funding for refugees and host community populations in the DRC.

<sup>4</sup> This total does not include more than \$73 million in FY 2021 State/PRM funding for Congolese refugees in neighboring countries, of which \$9.1 is directed towards responding to COVID-19, which increases the total USG emergency funding for the DRC complex emergency in FY 2021 to approximately \$507 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)