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FACT SHEET #3, FISCAL YEAR (FY) 2012 JULY 16, 2012

DEMOCRATIC REPUBLIC OF THE CONGO – COMPLEX EMERGENCY

KEY DEVELOPMENTS

- The humanitarian situation throughout eastern Democratic Republic of the Congo (DRC) has deteriorated in recent months due to increased armed group activity. The number of internally displaced persons (IDPs) countrywide currently exceeds 2 million, according to the U.N. Office for the Coordination of Humanitarian Affairs (OCHA). The DRC has not experienced such a high level of displacement since 2009.
- Fighting between the Armed Forces of the DRC (FARDC) and the M23 opposition group—created by FARDC defectors in early April—has directly or indirectly displaced more than 220,000 people in North Kivu Province, according to OCHA. Some displacement is a result of fighting between the M23 and FARDC, while others have been displaced by advancing armed groups taking advantage of the security vacuum left by departing FARDC forces redeployed to fight the M23. The M23 conflict has also caused more than 45,000 people to flee to neighboring Rwanda and Uganda, according to the Office of the U.N. High Commissioner for Refugees (UNHCR). Displacement remains fluid; some households are returning to areas of origin while others are displaced multiple times by fighting. Humanitarian organizations struggle to accurately capture the number of IDPs in a dynamic, operationally challenging environment.
- Armed groups are also taking new ground from departing FARDC forces in southern Orientale and South Kivu provinces. In South Kivu, where displacement nearly doubled between September 2011 and March 2012, humanitarian organizations are working to meet new needs despite poor access and insecurity.
- In FY 2012 to date, the U.S. Government (USG) has provided more than $88.5 million in humanitarian assistance to the DRC. USAID's Office of U.S. Foreign Disaster Assistance (USAID/OFDA) has committed more than $18.5 million to support life-saving agriculture, health, livelihoods, and water, sanitation, and hygiene (WASH) interventions; the provision of relief items; and humanitarian coordination and information management. USAID/OFDA's support to the Rapid Response to Population Movements (RRMP) mechanism—managed by the U.N. Children's Fund (UNICEF)—is helping to meet critical non-food needs among newly displaced populations. In addition, USAID's Office of Food for Peace (USAID/FFP) has provided nearly $34.6 million to address emergency food needs among vulnerable populations in the DRC, including IDPs and refugees, while the U.S. Department of State's Bureau of Population, Refugees, and Migration (State/PRM) has provided more than $35.4 million for protection, refugee return and reintegration, and IDP and refugee support activities.

NUMBERS AT A GLANCE		Source
Total IDPs in the DRC	2,017,898	OCHA – March 31, 2012
In North Kivu Province	547,949	OCHA – March 31, 2012
In South Kivu Province	856,162	OCHA – March 31, 2012
In Orientale Province	466,637	OCHA – March 31, 2012
In Katanga Province	71,692	OCHA – March 31, 2012
In Maniema Province	66,900	OCHA – March 31, 2012
In Equateur Province	8,558	OCHA – March 31, 2012
Total DRC Refugees in Africa	473,442	UNHCR – July 6, 2012
Total Refugees in the DRC	147,812	UNHCR – March 31, 2012

HUMANITARIAN FUNDING PROVIDED TO THE DRC IN FY 2012[1]	
USAID/OFDA Assistance to the DRC	$18,565,539
USAID/FFP Assistance to the DRC	$34,587,800
State/PRM Assistance to the DRC	$35,402,115
Total USAID and State Assistance to the DRC	**$88,555,454**

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

Context

- Since the implementation of a peace agreement in 2003, fighting between forces loyal to the Kinshasa government and various armed groups—including the Allied Democratic Forces-National Army for the Liberation of Uganda, Mai Mai combatants, and the Democratic Forces for the Liberation of Rwanda (FDLR)—has contributed to high levels of insecurity and population displacement in North Kivu and South Kivu. The Lord's Resistance Army (LRA)—having increased activity in the DRC since 2008—continues to impact populations in Orientale.
- In early April, ex-members of former opposition group the National Congress for the Defense of the People (CNDP) who integrated into the FARDC in 2009 defected and created the M23 opposition group in Masisi Territory, North Kivu. In May, the M23 moved from Masisi to Runyoni town, located in the Virunga National Park area of Rutshuru Territory where the borders of the DRC, Rwanda, and Uganda meet. The M23 name references the March 23, 2009, peace agreement with the Government of the DRC.
- Restricted humanitarian access, poor infrastructure, forced child recruitment into armed groups, violence, and reduced access to agricultural land and traditional markets have contributed to the deterioration of humanitarian conditions in the DRC.
- In response to ongoing humanitarian needs, on October 12, 2011, U.S. Ambassador James F. Entwistle reissued a disaster declaration for the complex emergency in the DRC for FY 2012.

Displacement, Insecurity, and Humanitarian Access – North Kivu

- Between July 6 and 8, the M23 took control of Bunagana, Kiwanja, Ntamugenga, Rubare, and Tchengerero towns in Rutshuru Territory, North Kivu, displacing more than 5,000 people to Uganda, according to UNHCR. An unknown number of people fled toward Goma town, North Kivu's capital. On July 9, the M23 withdrew from all newly gained areas except Bunagana, a mining town on the DRC–Uganda border. On July 15, Congolese President Joseph Kabila and Rwandan President Paul Kagame agreed to the deployment of a neutral peacekeeping force along the DRC–Rwanda border to protect populations from armed groups, particularly the M23 and FDLR.
- The FARDC faces armed groups on at least five fronts in North Kivu, where more than 12 militias are active. After the redeployment of FARDC forces to Rutshuru to fight the M23, civilian populations that were either protected by the FARDC or had adjusted to conditions under one armed group fled new violence, looting, and taxes imposed by new armed groups. These changing dynamics resulted in significant population displacement in Masisi, southern Walikale, and southern Lubero territories in April and May. UNHCR reports that the 31 camps in North Kivu increased by approximately 12,700 people between mid-January and May 31, bringing the total camp population in the province to approximately 91,500 individuals.
- During the last week of June and first week of July, RRMP implementing partners distributed relief items to more than 27,000 people in Masisi and Rutshuru territories through relief items fairs, according to OCHA. Providing relief items through fairs, as opposed to directly distributing items, supports local markets and allows for greater beneficiary choice. In addition, non-governmental organization (NGO) Merlin, which supports health structures in Rutshuru through a development-focused program funded by the Swedish International Development Agency, is responding to the IDP influx through the provision of supplemental medicines and financial support to ensure that IDPs have access to free primary health care.
- The Raia Mutomboki, an armed group that formed in South Kivu, has moved into North Kivu and is attacking civilian populations, according to humanitarian agencies. Composed primarily of youth, the Raia Mutomboki targets women, children, and the elderly during the day when men are working in fields and targets populations believed to be supporting the FDLR. Meanwhile, the FDLR attacks populations perceived as sympathetic to the Raia Mutomboki, leaving civilians caught in the middle of a cycle of violence. Between May 17 and 22, at least 120 people were reportedly killed in 12 attacks in and around Katoyi town in Masisi, which resulted in the displacement of an estimated 1,500 households.
- USAID/OFDA currently supports 12 grantees in North Kivu with FY 2012 and ongoing FY 2011 funding to implement agriculture and food security, livelihoods, health, nutrition, protection, and WASH interventions, as well as to distribute relief items. In Walikale Territory, grantee International Medical Corps (IMC) supports health facilities providing primary health care to returnees, IDPs, and other vulnerable community members, including people affected by the Raia Mutomboki and FDLR. IMC's program includes a training component for local health workers on surveillance data collection, reproductive health care, and community health promotion. In addition, USAID/OFDA is supporting the pilot of a health component to the RRMP in North Kivu to provide immediate primary health care to newly displaced populations in conjunction with the distribution of relief items and emergency WASH and education assistance.

Displacement, Insecurity, and Humanitarian Access – South Kivu

- As of June 1, more than 856,000 people remained displaced in South Kivu, according to OCHA—a 93 percent increase from the September 2011 IDP figure of 444,404. OCHA reports that approximately 250,000 people were newly displaced between January 1 and March 31, while an additional 150,000 people have been newly displaced since early May, including more than 30,000 people who fled North Kivu to South Kivu, primarily due to fighting between the Raia Mutomboki and FDLR. Displacement remains fluid, and relief organizations work to record returns while meeting new needs.
- As of mid-June, fighting between the Raia Mutomboki and FDLR in Kalehe Territory had displaced up to 12,000 households to the road between Minova and Kalehe towns, according to USAID/OFDA partners. Farther west in Kalehe, fighting among the FARDC, Raia Mutomboki, and FDLR had displaced an additional 10,000 households to the road between Hombo and Bunyakiri towns.
- In western Walungu Territory, FDLR attacks in May and June displaced approximately 6,000 households to areas around Chulwe, Luhago, and Nzibira towns. The attacks occurred after a drawdown of U.N. Organization Stabilization Mission in the DRC (MONUSCO) and FARDC forces, which followed a three-month joint MONUSCO-FARDC operation against the FDLR. In northern Shabunda Territory, Raia Mutomboki attacks in Lulingu and Nduma towns in April displaced an estimated 3,500 households to the Kahuzi-Biega forest.
- The humanitarian community remains focused on new displacement in northern South Kivu; however, populations in Fizi and Uvira territories in the southern part of the province remain extremely vulnerable due to lack of basic services and armed group activity. Fizi and Uvira also benefit from few assistance programs due to chronic lack of access. In response, USAID/OFDA extended new funding to grantee ZOA in FY 2012 to provide seeds and tools and teach improved farming techniques to more than 32,000 vulnerable people, including IDPs and returnees, in southeastern Fizi.

Displacement, Insecurity, and Humanitarian Access – Orientale

- The Patriotic Resistance Force in Ituri (FRPI) and FARDC clashed in southern Irumu Territory, Ituri District, in Orientale on July 8 following a standoff that started in early April, when FARDC elements redeployed to North Kivu to fight the M23 and the FRPI gained new ground. Humanitarian organizations report minimal new displacement but remain concerned about protection risks and decreased humanitarian space. The FRPI has reportedly increased its numbers, including through the recruitment of child soldiers, and accumulated arms in recent months.
- As of June 18, fighting among Mai Mai groups, poachers, and the FARDC in Mambasa Territory in Ituri had displaced more than 3,400 households, according to OCHA. The Mambasa conflict began in early March after Mai Mai groups and poachers took advantage of a FARDC troop withdrawal to gain control of mines and other resources in the Okapi forest. The FARDC redeployed troops from Kisangani town, the capital of Orientale, and subsequent clashes between the FARDC and the Mai Mai resulted in a total of two waves of displacement in March and April to the roads between Mambasa and Nia Nia towns and Mambasa and Biakato towns, respectively. While IDP figures are not striking relative to displacement throughout eastern DRC, the Mambasa IDPs are particularly vulnerable, as they rely on mining and poaching for income and fled to areas where few basic services are available.
- LRA attacks continue to affect populations in Haut-Uélé and Bas-Uélé districts, Orientale, although humanitarian actors report a decreased level of violence and less abduction. As of March 31, approximately 341,000 people remained displaced in the DRC due to LRA-related insecurity—a decrease of approximately 6,000 people from the 347,000 IDPs reported at the end of 2011, according to OCHA. In addition, the DRC hosted an estimated 910 refugees from the Central African Republic and 2,500 refugees from South Sudan who fled LRA-related violence.
- USAID/OFDA grantee Medair supports 12 health centers in southern Irumu, three of which are in FRPI-affected areas. Medair no longer directly supervises those three centers due to potential insecurity but continues to provide medicines and supplies and train local health center staff in non-FRPI-controlled locations. In Mambasa, Solidarités and Samaritan's Purse are distributing relief items through the USAID/OFDA-supported RRMP mechanism.

Food Security and Livelihoods

- June Integrated Phase Classification (IPC) analyses indicate that many areas of the DRC remain critically food insecure, according to OCHA. The IPC working group—composed of U.N. Food and Agriculture Organization, U.N. World Food Program (WFP), NGO representatives—concluded that more than 17.3 million people in the DRC face Crisis—IPC 3—levels of food insecurity, while more than 315,000 people face Emergency—IPC 4—levels of food insecurity. The affected population is spread over 66 territories, with Kalehe and Shabunda territories in

South Kivu and Mitwaba Territory in Katanga Province the most affected. The majority of food-insecure populations are IDPs, returnees, and extremely poor households.

- Conflict and displacement limits populations' access to farming land, and IDPs often leave agricultural inputs, such as seeds and tools, in areas of origin when fleeing attacks. Armed groups benefit from abandoned crops and often exact high monetary and in-kind taxes from civilians.
- USAID/OFDA supports agricultural production throughout conflict-affected areas of eastern DRC, where security and access permit. USAID/OFDA grantees distribute tools and high-quality seeds, resulting in an increased and more varied food supply, and provide training on improved agricultural techniques. Complementary livelihoods projects—such as cash-for-work initiatives that temporarily employ people to build and improve roads and other infrastructure—increase access to markets. For example, in Haut-Uélé District, USAID/OFDA grantee Welthungerhilfe (WHH) has nearly completed the rehabilitation of the Dungu town–Niangara town road through a cash-for-work initiative funded in FY 2011, which has already significantly decreased travel time for merchants and humanitarian actors who rely on the road. In FY 2012 to date, USAID/OFDA has provided a total of more than $6.4 million to seven grantees for agriculture and food security and livelihoods programs in eastern DRC.
- In FY 2012 to date, USAID/FFP has provided nearly $34.6 million to address emergency food needs among vulnerable populations in the DRC. USAID/FFP support includes more than 19,000 metric tons (MT) of Title II, in-kind emergency food assistance benefiting more than 3.3 million conflict-affected individuals countrywide, including IDPs and refugees. USAID/FFP also supports the local and regional purchase of more than 2,400 MT of food, as well as food voucher programs, which support local markets while ensuring that vulnerable households maintain adequate access to food.

WASH

- Humanitarian actors are increasingly concerned about the spread of cholera—which is endemic to the DRC—due to increased displacement. Health facilities throughout the country reported more than 17,000 cholera cases between January 1 and June 28—representing 79 percent of total cases reported in 2011, according to OCHA. New cases are emerging in Rutshuru Territory, where the Rwanguba hospital reported more than 500 cholera cases and six deaths as of July 6, according to OCHA.
- Relief agencies are distributing chlorine tablets and delivering health promotion messages as part of the USAID/OFDA-supported RRMP WASH response in eastern DRC, and Médecins Sans Frontières is treating cholera patients in Rutshuru. On July 8, the International Committee for the Red Cross (ICRC) delivered 15,000 liters of safe drinking water to the Rwanguba hospital and installed two 15,000-liter water reservoirs.

Other Humanitarian Assistance

- The European Commission's Directorate-General for Humanitarian Aid and Civil Protection (ECHO) recently contributed funds to the U.N. Humanitarian Air Service to charter a helicopter to enable relief agencies to reach isolated populations in North Kivu and South Kivu and evacuate staff. Helicopter time is currently split evenly between the two provinces.
- As of July 16, the 2012 Humanitarian Action Plan (HAP) for the DRC had received $279 million—35 percent of the $791 million appeal. After the USG, which had contributed nearly $54 million, the European Commission, United Kingdom, Japan, and Sweden were the largest donors to the HAP.

USAID AND STATE HUMANITARIAN ASSISTANCE TO THE DRC PROVIDED IN FY 2012[1]

Implementing Partner	Activity	Location	Amount
USAID/OFDA ASSISTANCE[2]			
Concern	Economic Recovery and Market Systems (ERMS) and Logistics and Relief Commodities	North Kivu	$812,982
Catholic Relief Services (CRS)	Agriculture and Food Security and ERMS	North Kivu, Orientale	$1,995,436
Handicap International-U.S. (HI-US)	Logistics and Relief Commodities	North Kivu	$1,400,000
IMC	Health	North Kivu	$2,296,692
Medair	Health	Orientale	$1,370,994
Mercy Corps	ERMS and WASH	North Kivu, Orientale	$1,961,466
OCHA	Humanitarian Coordination and Information Management	Countrywide	$1,000,000
Première Urgence	Agriculture and Food Security and ERMS	North Kivu	$1,370,000
Tearfund	Agriculture and Food Security, ERMS, WASH	South Kivu	$995,381
UNICEF	Health, Logistics and Relief Commodities, and WASH	North Kivu, South Kivu, Orientale	$2,000,000
WFP	Logistics and Relief Commodities	Countrywide	$2,000,000
ZOA	Agriculture and Food Security	South Kivu	$1,000,000
	Program Support	Countrywide	$362,588
TOTAL USAID/OFDA			**$18,565,539**
USAID/FFP ASSISTANCE			
WFP	1,220 MT of Title II commodities to support 212,000 vulnerable individuals in Orientale	Orientale	$2,500,000
WFP	2,437 MT of locally and regionally procured emergency food assistance, as well as food vouchers for emergency operations	Countrywide	$5,000,000
WFP	15,770 MT of Title II commodities to address food insecurity among 3.3 million conflict-affected people	Countrywide	$27,087,800
TOTAL USAID/FFP			**$34,587,800[3]**
STATE/PRM ASSISTANCE			
ICRC	Protection	Equateur, Katanga, North Kivu, Orientale, South Kivu	$10,200,000
Search for Common Ground (SFCG)	Protection, Gender-Based Violence (GBV), Refugee Return and Reintegration	Equateur, South Kivu	$800,000
Women for Women International	Protection, GBV, Refugee Return and Reintegration	South Kivu	$402,115
UNHCR	Protection, Refugee Return and Reintegration, IDP and Refugee Support	Equateur, Katanga, North Kivu, Orientale, South Kivu	$24,000,000
TOTAL STATE/PRM			**$35,402,115**
TOTAL USAID AND STATE HUMANITARIAN ASSISTANCE TO THE DRC IN FY 2012			**$88,555,454**

[1] Year of funding indicates the date of commitment or obligation, not appropriation, of funds.
[2] USAID/OFDA funding represents anticipated or actual obligated amounts as of July 16, 2012.
[3] Estimated 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. Information on organizations responding to the humanitarian situation in the DRC may be available at www.reliefweb.int.
- 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:
  The 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/our_work/humanitarian_assistance/disaster_assistance/