

UNICEF HUMANITARIAN ACTION UPDATE

Democratic Republic of the Congo

22 June 2009

CHILDREN IN THE DEMOCRATIC REPUBLIC OF THE CONGO ARE STILL SUFFERING FROM THE IMPACT OF ON-GOING VIOLENCE IN THE EAST OF THE COUNTRY

- Despite returnees, 1.4 million people still displaced in the Democratic Republic of Congo (DRC)
- Continued attacks on civilians by the Lord's Resistance Army in Haut Uele have triggered new displacement
- Continued insecurity in the East make humanitarian access difficult
- Initiative to help women survivors of sexual violence 'break the silence'



UNICEF/DRC/Delphine Brun/2008

1. ISSUES FOR CHILDREN

Large-scale conflict and population displacement continues to ravage large areas of the eastern part of the Democratic Republic of the Congo (DRC). While news of the humanitarian crisis in eastern DRC has faded from international headlines, the situation for hundreds of thousands of children and women has not improved significantly since the outbreak of large-scale violence in late 2008. Insecurity in North Kivu and especially in southern Lubero territory is widespread and has triggered since January 2009 the displacement of about 425,000 people, half of them being children under 18 years old.

At the same time, in areas of relative security, 300,000 people have returned home in North Kivu since January. Continued attacks by the Ugandan Lord's Resistance Army (LRA) have also caused new displacement of thousands of people in the remote northeastern territory of Haut Uele. According to OCHA, as of March 2009, there were 841,648 internally displaced people in North Kivu; 335,783 in South Kivu; 17,758 in Orientale/Ituri and 162,142 in Orientale/Haut-Uélé. Humanitarian actors are deeply concerned that planned military operations could displace thousands more in South Kivu, where during the last three months, already over 124,000 people have fled their homes.

In total, as of April 2009, there are still an estimated 1.4 million people internally displaced in the DRC. Children, women and men are still exposed to risks of violence, forced recruitment into armed forces, forced labour, sexual violence and looting. The 16 year old crisis has left the eastern provinces shattered. In many areas, basic health services and schools have been destroyed and will take years to rebuild.

The situation of children and women is particularly precarious during extended periods of violence. Children and women are vulnerable to abuse and hardship as they have been uprooted from their homes. Displaced, separated, and out-of-school children are vulnerable to recruitment and other forms of violence, including sexual abuse and exploitation. While over 1,200 children have been released from armed groups since January 2009 in the Kivus, recruitment and abduction continue.

Sexual violence against women and girls continues in eastern DRC but also touches the rest of the country. UNICEF partners provided essential assistance for over 20,000 survivors of sexual violence in 2008, 30% of whom were children. One fourth of these cases were in North Kivu alone. In the first semester of 2009, consolidated figures from UNFPA for cases treated across the country reached 2,799, of whom more than 50% are children. As many women and girls are ashamed to talk about their suffering, UNICEF believes that there are hundreds of more cases left unreported. Due to the lack of a functioning judiciary system, these violations of human rights and widespread impunity - often committed by armed forces against the civilian population—remain largely unpunished.

During 2009, humanitarian access has become more difficult in many parts of the East, impeding the delivery of humanitarian assistance. From January to April 2009, 44 attacks in North Kivu against humanitarian workers have been reported, which is an increase of 22% compared to the first trimester of 2008.

Apart from on-going violence and displacement due to conflict, the DRC is also affected by frequent epidemics of measles, cholera and typhoid. Malnutrition is widespread, with 13% of children under-five suffering from moderate or severe acute malnutrition (wasting/low weight for height) and 38% suffering from stunting (low height for age). Only 46% of the total population has access to safe drinking water. The educational system is particularly weak, with a Gross Enrolment Rate (GER) of barely 55%, poor quality learning environment, such as destroyed schools and decaying infrastructures.

2. UNICEF RESPONSE: ACTIVITIES, ACHIEVEMENTS AND CONSTRAINTS

UNICEF is closely working with other humanitarian actors in the DRC, including UN agencies, local and international NGOs, civil society and the Government of the DRC within the framework of the Humanitarian Action Plan (HAP) to alleviate the suffering of children and women. UNICEF and its partners are reaching about 1.5 million people in the East of the DRC through a variety of humanitarian programmes.

UNICEF is leading four out of the ten IASC clusters activated in the DRC: Nutrition; Water, Sanitation and Hygiene (WASH); Education; and Non-food Items (NFI)/Emergency Shelter. UNICEF is also co-leading the Emergency Telecommunications cluster together with the World Food Programme.

Rapid Response Mechanism

In eastern DRC, together with OCHA, Solidarités and the International Rescue Committee (IRC), UNICEF manages the Rapid Response Mechanism, which is designed to provide essential multi-sectoral assistance to victims of complex emergencies, natural disasters and epidemics in the DRC.

Since January, UNICEF and the RRM partners have seen constant levels of demand for multi-sectoral needs assessments and response interventions to provide conflict-affected families with essential household materials (non-food items - NFIs) and emergency shelter reinforcement materials, emergency WASH and education. Often when families have been uprooted from their homes to flee insecurity or potential threats to their security, they are able to carry little more than a few essential items. As such, RRM provides essential household and personal items to families to meet their essential needs with dignity during their period of displacement. NFI assistance includes relief supplies such as blankets, sleeping mats, soap, water containers, cooking and eating utensils, clothing, plastic tarpaulin and mosquito nets.

In North Kivu, 60 multi-sectoral assessments have been undertaken by the RRM partners since January. All reports are shared with the wider humanitarian community through provincial clusters and other humanitarian coordination networks to help other actors prioritize information and interventions to address critical needs in emergency-affected areas of North Kivu.

RRM partners have distributed 70,489 NFI kits so far benefiting over 351,285 displaced and conflict-affected people in North Kivu, South Kivu, Ituri and Haut-Uélé, with approximately half of the beneficiaries being children. Water, hygiene and sanitation assistance was provided for 92,800 people in the affected areas, with construction of water sources, rehabilitated networks, and establishment of 58 chlorination points. Latrines and showers for 61,914 IDPs (1,038 latrines) were constructed according to (RRM) standard with separate facilities for men and women. A total of 67 emergency classrooms have been reconstructed or rehabilitated; while 3,449 education/ recreation kits for children and 74 kits for teachers have been provided.

Programme of Expanded Assistance to Returnees (PEAR)

The safe return and reintegration of refugees and IDPs are key issues for sustained peace. While security is still considered precarious, in some areas people are returning home in large numbers. In North Kivu, an estimated 300,000 people have returned in recent months. The security situation in many of these areas is extremely fragile, and people who return home are often in need of assistance to restart their lives. In anticipation of increased returns in the coming months, PEAR is planning to scale up capacity quickly.

Similar to the RRM program, the PEAR programme is based on partnerships with specialized international NGOs, who work with local government and return committees to conduct detailed needs assessments in return zones and deliver assistance in the most vulnerable IDP return areas: AVSI for South Kivu, Norwegian Refugee Council (NRC) for North Kivu, and Solidarités for Ituri district (Orientale). Since January, PEAR partners have undertaken several multi-sectoral evaluations in areas of IDP return.

Since 2008, UNICEF, in partnership with Catholic Relief Services (CRS) and the PEAR partners, have been piloting an innovative approach of providing vulnerable returnee families with household materials and NFIs that best meet their needs. Partners coordinate with local vendors to create a 'market day' where returning IDP families use cash-valued vouchers to purchase the items that they need most. This approach, called 'NFI fairs' has reached nearly 4,000 returning displaced families in North Kivu's remote Walikale area and in Orientale province's Ituri territory. UNICEF will expand this approach with RRM and other partners to reach over 15,000 families this year.

From January to April 2009, PEAR has assisted 49,175 returnees in the territories of Beni and Lubero through the direct distribution of 7,027 NFI kits and by organizing NFI 'fairs' for 2,808 households or 14,040 people in Walikale. Many more families have been assisted in both Ituri and South Kivu.

Health

Massive displacement due to the ongoing conflict has limited access of vulnerable communities to health care and made them even more vulnerable to disease. Dozens of health facilities have been abandoned and health workers have fled.

With the Ministry of Health, UNICEF has undertaken emergency interventions in eight health structures in North Kivu's conflict-affected Masisi territory. From 15 December 2008 to 28 February 2009:

- o 18,572 persons were assisted with basic health care in 8 health centers;
- o 1,457 pregnant women, 173 of them displaced, attended prenatal consultations more than once;
- o 1,099 children, 1,016 of them displaced, attended pre-schooling consultations more than once;
- o 453 deliveries took place in 8 health centers, 418 of them were displaced women;
- o 785 children under one were vaccinated against measles; 949 had a third dose of DTC-HEP B.

An integrated polio vaccination, vitamin A and de-worming campaign took place from 2-4 April in 21 Health zones in North Kivu, targeting 1,135,652 children between 0-59 months. Reports of preliminary results are:

- o 1,057,403 children 0-59 months vaccinated against polio;
- o 903,009 children 6-59 months received Vitamin A supplementation;
- o 799,332 children 1-5 years received treatment against intestinal worms.

From 9-13 April, UNICEF has also financed and coordinated emergency vaccinations in Pinga, a remote and previously FDLR held town in northern Masisi territory, reaching almost 13,000 children aged 6 to 59 months. 7,722 children 6-59 months were vaccinated against measles and received Vitamin A supplementation. 6,489 children 1-5 years received treatment against intestinal worms.

Nutrition

As thousands of people are displaced and often unable to access their fields to harvest crops or plant new ones, the nutritional situation of children is assumed to have deteriorated. In order to gauge the impact of the on-going crisis and displacement on the nutritional status of children in eastern DRC, UNICEF's network of nutritional partners have carried out multiple surveys in 2009. From January to March, UNICEF partners, the International Medical Corps (IMC), World Vision, COOPI and the government nutrition counterpart PRONANUT have carried out nutritional surveys among children aged 6 to 59 months in several health zones. The prevalence rate for 'global acute malnutrition' was higher than DRC 10% emergency threshold in several health zones, indicating a serious nutritional situation. Malnourished children in all of these health zones are treated in programmes and nutritional centers which receive therapeutic supplies and other materials from UNICEF.

From January to March 2009, 6,081 cases of severe acute malnutrition and 6,148 cases of moderate acute malnutrition have been treated in 93 therapeutic nutrition units and 115 supplementary nutrition units in North Kivu. Throughout DRC, UNICEF has been expanding the pilot use of the community-based therapeutic care approach to treat malnourished children without requiring the children and their care-givers stay in nutritional centers. This approach is practiced alongside the continued use of conventional nutritional centers. PRONANUT together with UNICEF have created community groups who will ensure the care of 668 children suffering from acute malnutrition via this community-based approach.

Water, Sanitation and Hygiene (WASH)

UNICEF and partner NGOs have been able to assist 60,000 people (over half of whom are children under 18 years) with provision of some 450 m³ potable water per day through emergency water trucking, rehabilitation and creation of new water supply systems, and chlorination programmes. UNICEF WASH activities are focused on host communities with large numbers of IDPs as well as spontaneously self-settled sites. About 20,000 households have benefited from hygiene promotion activities including distributions of soap and hygiene kits. Most interventions are within the RRM framework mentioned above.

Within the framework of UNICEF's global "gender in emergencies" pilot project, the Rapid Response Mechanism and other WASH partners have sought to better incorporate the different needs of girls, boys, women and men in water, sanitation and hygiene through more participatory approaches. The technical standards used for the construction of toilets and showers have also been modified so as to better address the needs of protection and dignity of the displaced population.

Education

In the DRC, even families with limited resources prioritize sending children to school when and where they can. The continuous disruption of formal education created by the on-going insecurity in eastern DRC puts enormous strain on children's educational and psychosocial development.

Since the beginning of 2009, UNICEF has provided support to enroll 6,663 displaced and host community children in IDP sites near Goma. In Masisi, Ruthuru and Lubero, 170,980 children and 6,605 teachers in 968 schools have received school material. UNICEF partners have held trainings for 115 teachers in peace education and psychosocial support to enable them to better support children affected by traumatic events.

UNICEF partners have undertaken sensitization programmes for HIV/AIDS in IDP camps reaching approximately 10,000 adolescents via information sessions and booths as well as twenty video forums.

Child Protection and Mine Risk Education

Thousands of children have been recruited and used as combatants, porters and sex slaves in the armed conflicts that have devastated eastern DRC for the past decade. These children are separated from their families, denied their right to education, and exposed to physical and emotional harm. In the panic and chaos of displacement, other children become separated from their families and require temporary foster care while tracing for family members can be conducted.

UNICEF is assisting unaccompanied and separated children in order to protect them from abuses and help to reunify them with their families or to place them in temporary foster families while tracing is underway. Since the beginning of the year, 811 unaccompanied or separated children have been identified and 1,075¹ have been reunified with their families in North Kivu, despite the fluctuating security situation.

While the majority of displaced persons in the DRC live with friends or relatives in 'host family' arrangements, tens of thousands of children and their families live in collective camps or sites. UNICEF and partners established 'Child Friendly Spaces' (CFS) in over 25 IDP sites to provide recreational, educational, and psycho-social support to displaced children. Since January, over 33,300 children and adolescents (17,624 girls and 15,628 boys) have taken part in CFS activities. UNICEF and World Vision, have organized workshops, games and sports activities for 24,290 children (12,448 girls and 11,842 boys) in seven Child Friendly Spaces. 65% of adolescents have been reached with sensitization messages on peace, HIV/AIDS, the importance of school and the rights and duties of children. The teenage girls-only discussion groups that have been introduced in the CFS as part of UNICEF's global initiative on gender in emergencies. This forum provides a safe place for displaced adolescent girls to discuss, share and learn about issues of importance to them including sexual violence, relations with boys, parents, and peers, and personal hygiene in the camps. Adolescent boys' discussion groups will be introduced in the second half of the year.

The Disarmament, Demobilization and Reintegration (DDR) process in DRC advocates for and coordinates the release of children associated with armed forces and groups. Since 2004, over 31,200 children have been released and assisted in reintegrating in their families and communities by the national program for children in the DDR. This represents approximately 10% of the estimated children associated with armed forces and groups world-wide. UNICEF DDR programmes in partnership with local and international NGO partners are engaged in all steps of the process: advocacy for the release of children, identification, verification, temporary care of the released children and reintegration, to help them to return to normal life within their families and communities. Since 2009, the 17 UNICEF-supported Transition and Reorientation Centers and 270 host families have received 1,663 children; 1,215 have been reunified with their families, and 512 remain in the centers or host families pending their reunification and reintegration.

UNICEF is working with communities and partners on the prevention of sexual violence and in providing assistance to survivors. The campaign 'Stop Raping our Greatest Resource', initiated with *V-day* in November 2007, has trained over 250 activists and their outreach has raised awareness of 261,358 people through theater, video, cartoons and more. UNICEF and partners programmatic response has ensured that in 2008 alone, over 20,000 survivors of sexual violence have been assisted with medical services, HIV/AIDS prophylaxis, psychosocial care and judicial assistance in 5 provinces. In June, UNICEF organized an event in Kinshasa under the patronage of the first lady, Olive Kabila, and including testimonies from five survivors to 'break the silence' and raise awareness about sexual violence particularly in the conflict-affected east of the country.

¹ Includes children identified in 2008.

3. FUNDING REQUIREMENTS AND RECEIPTS

The UN humanitarian response in DRC is organized around the Humanitarian Action Plan (HAP), which was launched in November 2008 for US\$831 million. There is no funding breakdown for different organizations, as the HAP is organized around clusters and not organizations. UNICEF requirements are therefore monitored against the UNICEF Humanitarian Action Report 2009 (HAR), which amounts to US\$115.5 million. So far, only 20% (US\$ 22.63 million) of the total humanitarian requirements have been received six months into the appeal.

Significant humanitarian funding was received in late 2008 in response to the renewed outbreak of violent conflict in North Kivu, which helped sustain and expand essential emergency programming into the early months of 2009. However, since then, the situation has not improved significantly and the situation in South Kivu is at risk of further deterioration in the months to come. Early and flexible funding is thus important in order to be able to carry out a rapid response. Out of a total shortfall of US\$92.87 million, UNICEF has identified priority needs for the next three months amounting to US\$ 24.8 million (Table 2) to help children and women in the DRC to survive.

Table 1: Funds Received against the UNICEF Humanitarian Action Report 2009*

Appeal Sector	Initial HAR Requirements (US\$)	Funds Received (US\$)	Unmet Requirements (US\$)	% Unfunded
Rapid Response Mechanism	22,000,000	9,160,387	12,839,613	58%
Programme of Expanded Assistance to Returnees	20,000,000	5,492,230	14,507,770	73%
Health	18,000,000	-	18,000,000	100%
Nutrition	15,000,000	3,589,915	11,410,085	76%
Water, Sanitation and Hygiene	15,000,000	1,838,447	13,161,553	88%
Education	9,750,000	944,764	8,805,236	90%
Child Protection and Mine Risk Education	15,750,000	1,607,314	14,142,686	90%
Total**	115,500,000	22,633,057	92,866,943	80%

* Funds received against this appeal will be used to respond to both the immediate and medium-term needs of children and women as outlined above. If UNICEF should receive funds in excess of the medium-term funding requirements for this emergency, UNICEF will use those funds to support other, under-funded emergencies.

** The total includes a maximum recovery rate of 7%. The actual recovery rate on contributions will be calculated in accordance with UNICEF Executive Board Decision 2006/7 dated 9 June 2006.

Table 2: UNICEF Funding Priorities as of May 2009 for June to August 2009

Project	Beneficiaries/coverage	Amount Required (US\$)
Rapid Response Mechanism Distribution of NFI kits, emergency activities in WASH and Education.	50,000 beneficiaries in South Lubero, 35,000 beneficiaries in South Kivu and 22,500 in Haut Uele	8,062,500
Programme of Expanded Assistance to Returnees	50,000 families, 250,000 persons	5,000,000
Health (1) Measles vaccination with Vitamin A supplementation (2) Assistance to displaced children and women with primary health care (emergency kits, midwifery kits, anti-malaria products, iron, folic acid, new formula Oral Rehydration Salts)	(1) 336,000 children from 6 to 59 months in South Kivu (2) 400,000 IDPs (75,500 children under 15 years old and 16,000 pregnant women) in South Kivu	1,537,346
Nutrition Reinforcement of nutritional activities and the integration of community-based programmes for severe acute malnutrition in the health zones of South Kivu, Lubero, Katanga and Kasai Oriental and Occidental.	38,500 children among them 18,500 severely malnourished and 20,000 moderately malnourished	3,500,000
Water, Sanitation and Hygiene (1) Distribution of minimum water and hygiene intervention package (WES package ²) for IDPs in North and South Kivu (2) RRM with 60 chlorination points to face a potential cholera outbreak in Kalemie town (Katanga), following the announced electricity maintenance operation and safe water rupture.	(1) 80,000 internally displaced people (2) 160,000 persons	1,700,000
Education Providing formal and non formal education to 43,600 IDP and host community children and adolescents in North and South Kivu	13600 children in South Kivu and 30,000 in North Kivu	2,583,000
Child Protection and Mine Risk Education (1) 50,000 children and families will learn to identify and avoid landmines and unexploded ordnance (UXOs) (2) 15,000 displaced children will be protected in Child Friendly Spaces in IDP sites (3) 1,000 separated and/or unaccompanied children will be identified/ reunified with their families/ communities (4) 3,500 survivors of sexual violence will be provided medical, psychosocial and reintegration care (5) 600 children released from armed forces and groups will be provided temporary care and reintegration support	70,100 children	2,500,000
Total Priority needs		24,882,846

Further information on the DR Congo emergency programme can be obtained from:

<p>Pierrette Vu Thi Representative</p> <p>UNICEF DR Congo Tel: + 243 (0) 81 519 81 42</p> <p>E-mail: pvuthi@unicef.org</p>	<p>Dermot Carty Deputy Director Office of Emergency Programmes (EMOPS) UNICEF Geneva Tel: + 41 22 909 5601 Fax: + 41 22 909 5902 E-mail: dcarty@unicef.org</p>	<p>Gary Stahl Deputy Director Public Sector Alliances and Resource Mobilization (PARMO) UNICEF New York Tel: + 1-212 326 7009 Fax: + 1-212 326 7165 Email : gstahl@unicef.org</p>
--	--	---

² See HAP 2009: Minimum package for IDPs include one public latrine per 50 persons, at least 10 liters of water/ person/ day and 450gr of soap per household per month