2.7% Fatality Rate
367 new samples tested
Kinshasa recorded 90% (2,394) of all confirmed cases. Other affected provinces including:
- North Kivu (35)
- South Kivu (16)
- Ituri (2)
- Kongo Central (189)
- Haut Katanga (21) and Kwilu (2)

### Highlights

- **3.8 million children** have access to distance learning thanks to partnerships with 237 radio stations and 15 TV channels
- **More than 18 million people** reached with key messages on how to prevent COVID-19
- **29,870 calls** managed by the COVID-19 Hotline
- **2,777 people** (including 296 children) affected by COVID-19 and 278 frontline workers provided with psychosocial support
- **Community masks production** target increased to **2 million** – over 1 million masks ordered.
- **35,604 children** vaccinated against measles in North Kivu

### UNICEF’s COVID-19 Response

| # of people reached on COVID-19 through messaging on prevention and access to services | 47%
| # of people reached with critical WASH supplies (including hygiene items) and services | 43%
| # of children who are victims of violence, including GBV, abuse, neglect or living outside of a family setting that are identified and receiving care in... | 88%
| # of children and women receiving essential healthcare services in UNICEF supported facilities | 10%
| # of caregivers of children (0-23 months) reached with messages on breastfeeding in the context of COVID-19 | 6%
| # of children supported with distance/home-based learning | 25%

* Risk Communication and Community Engagement
** Infection Prevention and Control
*** Child Protection and Psychosocial Support

### COVID-19 overview

(as of 27 May 2020)

- 2,660 confirmed cases
- 69 deaths
- 381 people recovered
- 555 cases under investigation

**Funding gap**: 82%

Funds available*: 18%

Funds required: $58,000,000

*Funds available include 9 million USD UNICEF regular resources allocated by the office for first response needs.
Risk Communication and Community Engagement (RCCE)

1) COVID-19 Hotline: Compared to the previous SitRep (13 May) the Hotline has experienced a 21% increase in the number of calls successfully managed. As of 25 May, the Hotline was successfully managing more than 4,500 calls per day. The majority of the calls are from individuals requesting general information on COVID-19. The composition of the calls is shown in the graph on the right.

2) U-Report platform

- **through its automated bot**: 9,391 people asked and received appropriate information on COVID-19 statistics, symptoms, spread mechanism, how to protect themselves and how to protect others, and myths.

- **Through its SMS center**: 6,948 people exchanged information mainly about the progression of the epidemic and the measures taken by the Government while, more than half of the audience was still enquiring about signs, symptoms and how to be protected from the disease.

- **Through the COVID-19 quiz**: A new quiz was released in the aim to evaluate the improvement of the people knowledge. The results were compared to those of the previous quiz and showed an improvement in awareness about COVID-19 (i.e. less people believed that COVID-19 is always lethal, that antibiotics are effective in preventing or treating COVID-19 and that a vaccine against COVID-19 exists).

- **Through sending key messages**: 202,065 people received at least one key message such as “coronavirus is not always lethal”; “the best way to protect yourself and other is to respect the prevention measures”, etc.
3) Mass media Communication
UNICEF trained 200 media professionals on prevention measures and warning signs of COVID-19. 253 radio stations and 60 TV channels have broadcast messages on COVID-19 in the 6 most affected provinces (Kinshasa, North Kivu, South Kivu, Kwilu, Kongo Central, Haut-Katanga and Ituri). More than 22 million people were reached with key messages on how to prevent COVID-19 through mass media channels.

Infection Prevention and Control (IPC)/Water, Hygiene and Sanitation (WASH)
UNICEF provided personal protective equipment (PPE) to 300 health workers, trained 591 health workers on infection prevention and control, provided 46,549 people with access to critical WASH and hygiene promotion services, installed 70 hand washing stations (100 liter capacity each) in public sites and 60 hand washing stations in health facilities, provided the Congolese national water company REGIDESO with 8 chlorine buckets (45-kg capacity each) to improve the quality of water.

UNICEF is taking every opportunity to include COVID-19 infection prevention and control in its other activities, such as Ebola response, emergency response to floods, and the response to chronic malnutrition.

Highlights from the provinces
UNICEF, in collaboration with its implementing partners and the Health Divisions in the various provinces of the country, has trained hygiene promoters and health workers in infection prevention and control and raised awareness among the general population on preventing COVID-19 infection. The recipients of these activities were:

- 35 WASH supervisors and 180 hygiene promoters from 35 Health Zones in Kinshasa;
- 10 health workers in Haut Katanga;
- 60 volunteer hygiene promoters and 20 Red Cross volunteers in Uvira, a town recently affected by deadly floods in South Kivu;
- 24 health workers in Kwilu;
- 887 community members in Kwango;
- 18 health workers in Equateur;
- 1,114 health workers within health centres in North Kivu;
- 986 community health workers in North Kivu;

UNICEF also provided 48 health workers in Kinshasa with personal protective equipment, 3,849 health centres and 160,072 people in North Kivu with access to critical WASH services. UNICEF also installed hand washing stations in:

- General Hospitals, isolations sites for COVID-19 patients, toll stations and health facilities in Haut Katanga (49 pedal hand washing stations);
- Public places across Uvira, South Kivu (8 hand washing stations);
- Across Kwilu Province (40 hand washing stations);

In Equateur, UNICEF provided REGIDESO with 10 tonnes of chlorine to help address the breakdown of the water pumping station in Mbandaka.

Psychosocial Support and Child Protection
UNICEF, in partnership with the Psychosocial Commission, continued to provide emotional and psychological support to COVID-19 confirmed cases and their families, especially for contacts who are in quarantine, but also to frontline medical staffs and caregivers. During the reporting period, 2,777 people (1,045 women and girls), including 296 children and adolescents (153 girls) affected by COVID-19 received psychosocial support through the UNICEF-supported Psychosocial Commission. In addition, 278 (148 women) frontline staffs benefited from psychological support.
In all the DRC provinces, UNICEF continued to monitor and advocate in favour of the release or diversion and alternative detention measures for minors in detention. During the reporting period, 99 children (2 girls) have been released and benefited from transitional care and/or family reunification. 212 minors (five girls) remain in detention and are followed up by UNICEF and social agents to guarantee adequate measures and assistance.

Through the deployment of social workers in the provinces of the country most affected by COVID-19, UNICEF provided child protection assistance, which can include psychosocial assistance, medical care, educational support, socio-economic reintegration, temporary assistance in transit centers and/or foster care families to 41 children (6 girls) many of whom are living in the street and particularly vulnerable to violence and COVID-19. 11 children (8 girls) victims of abuse or violence, including gender-based violence, have also been assisted.

Health and Nutrition

UNICEF, through financing from the World Bank, handed over a batch of equipment and health supplies worth US$ 3 million to the Ministry of Health and the Technical Secretariat of the Inter-Ministerial Committee of Response against COVID-19 on 26 May 2020. The consignment included 30 respirators, protective equipment and disinfection products such as masks and gloves, sterilizers, surgical kits for front-line healthcare workers, and other supplies needed for emergency and resuscitation services. The items will be distributed to selected health facilities in Kinshasa and other provinces affected by the pandemic, namely Central Kongo and Kwilu, as well as other provinces such as Kwango, Tshopo, Kasai Central, Maniema, North Ubangi and Equateur.

UNICEF provided the National Programme on Nutrition (PRONANUT) with 5 spring hanging (Salter) scales and 100 mid-upper arm circumference tapes to improve the nutritional diagnosis of COVID-19 patients in the prison of Ndolo in central Kinshasa, where more than 140 cases of COVID-19 infection were recorded.

Through its U-Report platform, UNICEF conducted a nutrition perception survey among women of childbearing age on the impact of COVID-19 on the food and nutrition of children. This was done with the aim to provide young women with correct information on COVID-19 and fight rumours and fake news. Around 1,900 people took the survey and the results showed that more than half of the women do not breastfeed during this COVID-19 pandemic and just above half have noticed a situation of malnutrition among their children. The survey’s results are shown in the graph below.

Highlights from the provinces

UNICEF and its partners support the case management of patients – including children – suffering from severe acute malnutrition, and promote the increase in awareness of infant and young child feeding practices in the context of COVID-19 among communities. Some of the specific activities include:
• Supporting the case management of 164 children suffering severe acute malnutrition in the Health Zone of Uvira (which was recently affected by deadly floods) and 3,791 children aged 6-59 months in 21 Health Zones of Kasai Central and 8 Health Zones of Kasai;
• Increasing awareness of infant and young child feeding in the context of COVID-19 among 1,628 women and caregivers in the Health Zone of Uvira;
• Providing 140 members of the Community Engagement Committee with hydroalcoholic gels and masks to enable them to carry out community-based nutrition activities while respecting COVID-19 prevention measures in Kabondo Health Zone in the city of Boma, Tshopo Province;

UNICEF and its partners also ensure that health workers continue perform daily tasks – including routine vaccination – safely and protected from COVID-19. For this, it has provided healthcare workers in three Health Zones of the Tshopo Province with 530 masks and 200 bottles of hydroalcoholic gels. In addition, it has trained 30 health personnel on COVID-19 prevention in hotspots such as the border between Ituri province and South Sudan and Uganda.

In North Kivu UNICEF trained 102 members health personnel of 5 Health Zones on the management of epidemics and COVID-19 in particular. More than 35,000 children were vaccinated against measles. The vaccination sessions were conducted with adherence to the COVID-19 prevention protocol (health workers were provided with gloves, thermo flashes with batteries, hand washing devices, hydroalcoholic gels).

Education

More than half of the DRC provinces are partially covered by at least one form of distance education through 237 radio stations and 15 television channels, reaching more than 3.83 million children and adolescents.

Supply and Logistics

5 oxygen concentrators were delivered to the Provincial Health Division of Katanga (3) and the Provincial Health Division of South Kivu (2).

Despite worldwide airport closures, UNICEF has been able to regularly receive shipments of materials key to the response to COVID-19. UNICEF expects to receive, by 30 June, surgical masks, PPE equipment, infrared thermometers, face shields, protective glasses, oxygen concentrators.

Social Science Analysis

The Social Science Analysis Cell (CASS) has developed a series of briefing documents outlining key lessons learned from social sciences analyses during the DRC Ebola outbreak response, aiming to connect findings from the research conducted by the CASS with recommendations for supporting and improving the approach to tackling COVID-19 and its secondary impacts in Sub-Saharan Africa. The briefs are:
1. What social sciences researchers working in humanitarian contexts (Sub-Saharan Africa) should be asking in COVID-19 and why;
2. Gender inclusiveness in COVID-19 humanitarian response operations, evidence from social sciences outbreak research;
3. Humanitarian programme recommendations for COVID-19 based on social sciences evidence from the DRC Ebola outbreak response;
4. Social sciences evidence on barriers to healthcare seeking during the DRC Ebola outbreak.

Funding Overview

UNICEF estimates that US$ 58 million is required for an immediate response within its areas of responsibility. UNICEF has advanced US$ 9 million from its own resources to meet critical needs until additional funding is secured. As of 28 May 2020, UNICEF has received $12,9 million (18% of total needs) thanks to GAVI, Global Partnership for Education (GPE), The Republic of Malta, The Solidarity Response Fund, The United States Agency for International Development (USAID), The Government of Canada and The Government of United Kingdom. Other funds are in the pipeline. More than ever, UNICEF needs flexible and timely funding to meet the most critical needs as the epidemic evolves. The UNICEF Representative in DRC has also appealed for in-kind donations.

UNICEF’s “Masks Made in DRC” initiative

Through the “Masks made in DRC” initiative, UNICEF has commissioned some NGOs and women's associations to manufacture locally one million reusable non-medical protective masks for children and adults. The enthusiasm for the production of these masks has prompted UNICEF to increase production 2 million masks. More than 200,000 masks have already been distributed to the most disadvantaged communities in the provinces most affected by COVID-19. 400,000 masks will be distributed to primary and secondary teachers carrying out distance learning. UNICEF has also shared guidelines on how to manufacture the masks so that these respect the government’s guidelines. UNICEF distributes these masks door-to-door within the communities through members of the Community Engagement Committees (CAC).

External Media

1) SOCIAL MEDIA AND ONLINE

Since the beginning of the outbreak, the communication team posted more than 328 messages on Facebook, Instagram, Twitter and LinkedIn – reaching more than 56 million people. The COVID-19 landing page is updated on a regular basis and has been consulted more than 24,000 times and allowed visitors to consult other relevant pages on the website. New multimedia material was uploaded on WeShare.

2) PRESS RELEASES


3) PRESS COVERAGE


• Coronavirus – Democratic Republic of the Congo: Child vaccinations down in DR Congo, and COVID-19 is not helping: UNICEF
  o Vaccination: La RDC pourrait perdre sa certification de pays exempt de polio et risque de connaître une résurgence de maladies mortelles, alerte l’UNICEF https://actualite.cd/2020/05/17/vaccination-la-rdc-pourrait-perdre-sa-certification-de-pays-exempt-de-polio-et-risque-de

• DR Congo: La baisse des taux de vaccination pourrait entraîner la résurgence de maladies mortelles en RDC (UNICEF) http://humanitariannews.org/20200516/dr-congo-la-baisse-des-taux-de-vaccination-pourrait-en entra-ner-la-r-surgence-de-maladies-mortelles


• Child vaccinations down in DR Congo: UNICEF http://www.xinhuanet.com/english/2020-05/16/c_139060669.htm


• Child vaccinations down in DR Congo: UNICEF http://www.china.org.cn/world/Off_the_Wire/2020-05/16/content_76050906.htm

• Declining vaccination rates in the Democratic Republic of the Congo could lead to resurgence in deadly diseases https://reliefweb.int/report/democratic-republic-congo/declining-vaccination-rates-democratic-republic-congo-could-lead


• La baisse des taux de vaccination pourrait entraîner la résurgence de maladies mortelles en RDC (UNICEF) https://news.un.org/fr/story/2020/05/1068872


UNICEF Novel Coronavirus (COVID-19) Global Appeal:
https://www.unicef.org/coronavirus/covid-19/donate

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## Annex A: Summary of Response Results

<table>
<thead>
<tr>
<th>Sector</th>
<th>UNICEF and IPs Response</th>
<th>Change since last report ▲▼</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Target</td>
<td>Total result (cumulative)</td>
</tr>
<tr>
<td><strong>Risk Communication and Community Engagement (RCCE)</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of people reached on COVID-19 through messaging on prevention and access to services</td>
<td>40,000,000</td>
<td>18,615,227</td>
</tr>
<tr>
<td>Number of people sharing their concerns and asking questions/clarifications for available support services to address their needs through established feedback mechanism.</td>
<td>1,000,000</td>
<td>323,118</td>
</tr>
<tr>
<td>Number of influencers engaged on COVID-19 through RCCE actions</td>
<td>500,000</td>
<td>138,508</td>
</tr>
<tr>
<td><strong>Infection Prevention and Control (IPC)</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of people reached with critical WASH supplies (including hygiene items) and services</td>
<td>892,829*</td>
<td>379,633</td>
</tr>
<tr>
<td>Number of healthcare workers within health facilities and communities provided with PPE</td>
<td>9,643*</td>
<td>383</td>
</tr>
<tr>
<td>Number of healthcare facility staff and community health workers trained in IPC</td>
<td>9,643*</td>
<td>2,769</td>
</tr>
<tr>
<td>Number of health facilities provided with essential WASH services</td>
<td>357*</td>
<td>103</td>
</tr>
<tr>
<td><strong>Child Protection and Psychosocial Support</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of children who are victims of violence, including GBV, abuse, neglect or living outside of a family setting that are identified and receiving care in areas affected by COVID-19</td>
<td>600</td>
<td>530</td>
</tr>
<tr>
<td>Number of children, parents and primary caregivers provided with community based mental health and psychosocial support</td>
<td>14,700</td>
<td>8,849</td>
</tr>
<tr>
<td>Number of children and adults that have access to a safe and accessible channel to report sexual exploitation and abuse</td>
<td>152,643</td>
<td>23</td>
</tr>
<tr>
<td><strong>Health</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of children and women receiving essential healthcare services in UNICEF supported facilities</td>
<td>2,776,339**</td>
<td>535,891</td>
</tr>
<tr>
<td><strong>Nutrition</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of caregivers of children (0-23 months) reached with messages on breastfeeding in the context of COVID-19</td>
<td>412,365</td>
<td>24,817</td>
</tr>
<tr>
<td>Number of children 6-59 months admitted for treatment of severe acute malnutrition (SAM)</td>
<td>54,061</td>
<td>13,100</td>
</tr>
<tr>
<td><strong>Education</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of children supported with distance/home-based learning</td>
<td>15,450,000</td>
<td>3,836,416</td>
</tr>
<tr>
<td>Number of educational homework booklets distributed to ensure continuity of children and adolescents’ learning</td>
<td>2,500,000</td>
<td>-</td>
</tr>
</tbody>
</table>

*The adjustment of targets evolves according to UNICEF’s own resources and the raising of funds for the implementation of its COVID-19 response in DRC.

**The target was adjusted following consultation with all of UNICEF’s field offices in DRC.