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Upsurge of violence in Rutshuru and Masisi territories, DRC

SitRep # 15

27 Feb-30 April 2023

Highlights

- Heavy clashes continued in several locations in the Masisi territories leading to massive displacements toward Goma
- Over 1.16 million people have been displaced since the beginning of the crisis in March 2022 with 90% of them since October 2022 and over 40% since February 2023. Almost 60% live in overcrowded sites and collective shelters just outside Goma
- The impact of the crisis on children and women is multi-faceted with serious concerns on gender-based violence and the lack of protection of children who bear the brunt of the conflict and displacement, while the scale of the humanitarian response remains substantially insufficient to address the escalating lifesaving needs
- The number of suspected cholera cases and measles cases is being increasingly notified with 87% of the cholera cases in the country notified around Goma.
- UNICEF, through its partners, continues to provide lifesaving multisectoral assistance to affected children and their families despite the challenging operational conditions.

Situation Overview

From the end of February to mid-March, clashes between M23, FARDC and other armed groups intensified in several locations in the Masisi territories on the three axes around the locality of Sake: Sake- Mweso-Kitshanga (northern axis), Sake-Mushake-Rubaya (western axis) and Sake- Shasha -Minova (southern axis). Injuries and death of civilians were reported together with the destruction of schools and infrastructures. These clashes led to massive displacements mainly towards Goma and a sudden uncontrolled expansion of the new IDP sites recently established in the western part of the provincial capital in Rusayo, Bulengo, Lushagara and Lushagala. Fighting also led to population movements towards South Kivu province where over 78 000 IDPs were reported in the Kalehe territory.¹ Since mid-March, a relative calm has been noted on most frontlines as M23 withdrew from several localities, including Kitshanga, Mweso, Rutshuru, Kiwanja and the Mabenga bridge. Burundian troops from the East African Community (EAC) were then deployed to Kilolirwe and Kitshanga. Consequently, since April, some timid returns have been

¹ IOM, DTM-ETT, April 25, 2023

reported although varying greatly from one area to another. According to OCHA, around to 280,000 people would have returned but the sustainability of those returns needs to be confirmed as situation remains very volatile.

Overall, over 1.16 million people have been displaced since the beginning of the crisis in March 2022 with 90% of them since October 2022 and over 40% since February 2023. More than half are children and almost 60% live in overcrowded sites and collective shelters just outside Goma.

The impact of the crisis on children and women is multi-faceted with serious concerns on the protection of children who bear the brunt of the conflict and displacement. Over a 12-month period, more than 2,815 unaccompanied and separated children have been identified, which represents 3-fold increase in the number of unaccompanied and separated children identified over the same period during the previous year. This situation, coupled with the intensification of fighting between the various parties, have led to a sharp increase in grave violations perpetrated against children, notably child recruitment, abductions, and sexual violence. An increase of child recruitment by armed groups is being reported notably in Rutshuru and Masisi territories. Of particular concern are also the extremely high levels of sexual violence and exploitation reported against children and women in and around IDP camps.

A humanitarian air bridge (7 cargo flights) organized by the European Union and supported by France brought emergency supplies for the humanitarian agencies including UNICEF to accelerate the response. Nonetheless, the humanitarian response remains insufficient to address the escalating lifesaving needs of displaced children and their families. As such, the wash cluster estimates that only 4.3 liters of drinking water per person per day is available in the sites around Goma which is far below the 15 liter per day in humanitarian setting and only 1 latrine for 186 persons – almost a fourth of the humanitarian standards of 50 pers per emergency latrine.

Overcrowded conditions in the IDP sites and limited WASH services increase the risk of outbreaks of waterborne and communicable diseases. From 1 January till 30 April 2023, 13,126 cholera cases were reported, compared to 895 during the same period in 2022. 87% of the cases in the country are notified around Goma. More than 70% of these suspected cases are children and more than 38% are under the age of 5. In March, from epidemiological week (EW) 10 to 12, a sharp increase of cholera cases was noted with an average of 100 cases reported per day. Most of these cases were coming from Bulengo, Lushagala, Kashaka and Rusayo sites that have very poor WASH facilities. The mobilization of WASH and health actors allowed to contain the situation. Since EW 13 (26 March- 1 April) and until now, while the number of cases remains high a decrease in the number of cases is observed and the lethality rate has been of 0% over the last 2 weeks. While the epidemic is currently under control, the situation remains very fragile. In addition, the measles epidemic is worryingly increasing, with 21,594 cases of measles reported in North Kivu since the beginning of the year.



² OCHA, Population Commission Movement, March 2023

UNICEF's Response

From the first days of the crisis in April 2022, UNICEF has been responding to the humanitarian needs with a response in WASH, child protection, non-food item distribution, health, nutrition, and education in the territories of Rutshuru, Nyiragongo, Lubero, Masisi and Kalehe for affected populations.

Despite the very volatile and unpredictable environment, UNICEF and partners continue to support the most vulnerable affected by this crisis in the following sectors. Since the 24 April, UNICEF resumed a permanent presence in Rutshuru to support the response in the area.



Child Protection/Gender-Based Violence

Over the past three months, 126 children exited non-state armed groups in Rutshuru territory alone. These figures imply a significant increase in child recruitment over the past few months and indicate that hundreds more cases will be identified in the coming months. According to reports by local actors and community networks, Masisi territory has equally witnessed high recruitment figures, but the current security situation does not allow child protection actors to intervene in the area for now.

In collaboration with the Provincial Division of Social Affairs in North Kivu (DIVAS) and the NGOs UPDECO, CAJED, ACOPE, and Heal Africa, UNICEF continued to provide essential protection services for children and their families affected by the conflict. Child protection actors are still focusing on active family tracing of identified unaccompanied and separated children (UASC), and on the quality of care by closely monitoring interim care centers and foster families who were provided with NFI, Hygiene Kits, and food supplies by UNICEF in collaboration with DIVAS. UNICEF also scaled up its interventions to prevent and respond to Gender-Based Violence (GBV) cases in all IDP sites. Of particular concern are indeed the upsurge of rape and other sexual violence cases since January 2023 (four-fold increase compared to a similar period last year), as well as very high levels of child sexual exploitation in more than 1,000 identified sites in and around the IDP camps.

Fixed and mobile child protection teams have also been deployed to Bulengo, Lushagala, and Rusayo sites to ensure a rapid response to protection cases. Child-Friendly Spaces have been established to provide psychosocial support to children affected by the crisis. Thanks to a strong collaboration between the WASH and the Child Protection sections, these spaces now benefit from essential WASH infrastructures. Social workers and para-social workers on the ground have equally established referral pathways with Nutrition and GBV response actors to ensure holistic service provision to children.

In Rutshuru territory, UNICEF continues to work with partners to provide a much-needed child protection response while re-establishing a permanent UNICEF presence there. In April, UNICEF delivered 25 mattresses, 50 hygiene kits, and 20 NFI kits to local foster families.

For the reporting period and through its partners, UNICEF identified:

- In Nyiragongo/Goma IDP sites: 151 UASC (including 86 girls) and 7 CAAFAGs (all boys),
- In Rutshuru territory: 141 UASC (including 58 girls) and 126 CAAFAGs (including 108 boys),
- In Lubero territory: 177 UASC (including 95 girls) and 74 CAAFAGs (including 51 boys),
- GBV Response:
 - Nyiragongo/Goma: 283 survivors of GBV (girls and women) benefited from protection services (healthcare, PSS, PEP & Hygiene kits, legal services, etc.)
 - Lubero: 120 survivors of GBV (girls and women) benefited from protection services (healthcare, PSS, PEP & Hygiene kits, legal services, etc.)



Water, Hygiene and Sanitation (WASH)

UNICEF through its partners AVUDS, Yme Grands Lacs and BIFERD continues its WASH assistance in Bushagara, Kanyaruchinya, Bulengo, Lushagala, Kashaka and Nzulo IDP sites in Nyiragongo, Karisimbi and Goma health zones.

During the reporting period, UNICEF contributed by providing the following responses:

- 35,241 m³ (526 m³ per day) of drinking water per truck, benefitting 52,000 affected people,
- Construction of 129 latrines, 128 showers, and 25 garbage pits,
- Installation of 103 handwashing points against contamination of waterborne diseases,
- Hygiene promotion sessions for 106,105 people, sensitization on PSEA for 72,929 persons and on GBV for 90,718 persons,
- A systematic follow-up on the water quality by sampling free residual chlorine in truck-supplied water,

As exit strategy to water trucking, UNICEF has started extending the Goma urban water supply network to provide clean water to 80,000 people (IDPs and hosting communities) in Kanyaruchinya and Bushagara and areas. There is an urgent need to scale-up the provision of drinking water and sanitation facilities for the newer IDP sites around Goma such as Rusayo, Lushagala, Kashaka, Shabindu, Bulengo.

Additionally, through its partners CAUB, UNICEF has strengthened its response capacities in the Lubero territory for displaced persons in Kanyabayonga and Kamandi-Gite by launching water-trucking, building 400 latrines and 114 showers, and by starting the rehabilitation of the water supply network of Kamandi-Gite.



Cholera response – Case Area Targeted Interventions (CATI)

During the reporting period, CATI teams were deployed in Bulengo, Lushagala and Rusayo IDP sites and realized 1,760 responses overall – 84% of these responses were in IDP sites. All the responses were completed within 24 hours and covered 98% of confirmed cholera cases. Approximately 10,041 households received at least one water treatment product, while 1,728 cholera kits (soap, bucket with tap, ORS) were distributed. Teams also monitored cases of severe dehydration, decontaminated latrines, and monitored water quality within the IDP sites. They sensitized 98,414 people on handwashing and the importance of using latrines.



Rapid response (UniRR)

During the reporting period, through UniRR, UNICEF and the North-Kivu Red Cross distributed emergency supplies (NFI and WASH kits) to 55,203 persons to improve their living conditions and preserve their dignity. These distributions took place in the IDP sites of Rusayo, Lushagara and Kashaka (Karisimbi health zone). The distributions were coordinated with other NFI actors as well as with WFP to ensure complementarity with food distributions in the sites and harmonization of the beneficiaries' lists.

The mobile clinic activities carried out in the IDP sites of Elohim and Kashaka allow access to primary health care to 1,233 patients. 93 cases of severe acute malnutrition and 840 cases of moderate malnutrition were also taken care of. These activities have been held in coordination with MSF-France.



Education

For the reporting period, 32 new Temporary Learning Spaces (TLS) have been completed and equipped: 20 at the EP Lwashi, 3 at the EP Sadoki, 3 at the EP Karambi and 3 at the EP Beu, thanks to the local NGO GRACE. 22 TLS more are under construction (10 at the EP Don Boso, 6 at the EP Kibaya and 6 at the EP Mujoga). These TLS benefit 7,247 children who are displaced and from the hosting communities. Furthermore, 3,505 children received educational kits and 27 teachers, while 11 schools were assisted with didactic and recreational kits.

Protection activities through sensitization on different themes (protection/prevention against Sexual Exploitation and Abuse in schools, GBV, handwashing, importance of schooling) were organized for approximately 14,912 children. 250 children benefitted from recreational and psychosocial support activities in the 5 Child-Friendly Spaces set in the Kibari, Mujoga, AFDI, Lwashi and CBCA primary schools.

Additionally, UNICEF's partner Children's Voice is currently vocationally training 230 teenagers from 15 to 17 years old (95 girls and 135 boys) in culinary arts, mechanics, entrepreneurship, and hairdressing in Kibati and CBCA. 60 other teenagers (15 girls and 45 boys) are also literacy trained in Kibati.



Nutrition

UNICEF and its partners continued their activities in Nyiragongo, Rwanguba and Rutshuru territories. The following activities were realized:

- In the Bushagara site:
 - Construction of the shed housing the activities of supervision and awakening for 191 children (98 girls and 93 boys),
 - 69 cooking demonstration sessions were organized,
- 15 community relays briefed
- Admission of 243 children affected by severe wasting in the 5 healthcare centers in Rutshuru health zone, who benefited from the supply of 1.5 tons of RUTF for the care of at least 200 children,
- Admission of 1,266 children affected by severe wasting in the Nyiragongo and Rwanguba health zones (including 354 displaced children and 909 children from the hosting community),
- Sensitization of 4,280 persons on infant and young children feeding, including 1,524 breastfeeding women, 1,214 baby caretakers, and 685 pregnant women,
- Screening of 1,205 children under 5 by the community relays,
- Production of 336 commercials and 8 community radio programs,
- Realization of 51 home visits to children treated for severe wasting.

In addition, UNICEF provided MSF with 2,030 boxes of plumpynut.



Health

During the reporting period, UNICEF continue to support access to primary health care in Nyiragongo and Rutshuru health zones in 4 healthcare structures: Kibututu health center, Munigi health center, Nyiragongo general hospital and Rusayo health center:

- 5,805 persons benefitted of ambulatory care, including 1,841 children while 305 deliveries were assisted.
- 284 patients were referred to the General Hospital, including 183 children under 5, with 8 patients benefitting from a blood transfusion and 11 patients (including 3 children under 5) going through a major surgery.
- 223 children were vaccinated against measles; 85 children received all the recommended vaccinations; 242 children received the DTaP (Diphtheria-Tetanus-Pertussis) vaccine

In support to the emergency response against measles in the sites, UNICEF facilitated the coordination with the Ministry of Health to send vaccines and organize the vaccination team on the sites. The emergency response started on 21 April. This response is coupled with a screening for severe wasting done jointly between UNICEF, MSF France, ACF, PUI.

In addition, UNICEF provided MSF with:

- 4.4 tons of medical kits and medicines for the prevention and treatment of mother and child diseases to MSF France in Kanyabayunga as well as in Kiwanja for the supply of health structures
- 17 medical kits for the treatment of 1,700 cases of simple measles (5 to MSF Belgium and 12 to MSF France)

As the delivery of medical supplies from the usual provider is blocked in Rutshuru territory due to the on-going conflict, UNICEF facilitated also logistical support to deliver 8.6 tonnes of medical supplies for Ntamugenga health center in Rutshuru territory.



Protection from Sexual Exploitation and Abuse (PSEA)

UNICEF in collaboration with partner HEAL AFRICA has strengthened prevention measures against sexual exploitation and abuse, considering the alerts received, through the development of an action plan, the establishment and the reinforcement of complaint mechanisms in the Kayna area and in the IDP sites (especially in Bulengo). During the

reporting period, 3,114 persons (including 1,357 women) have been sensitized and informed about the available care services.



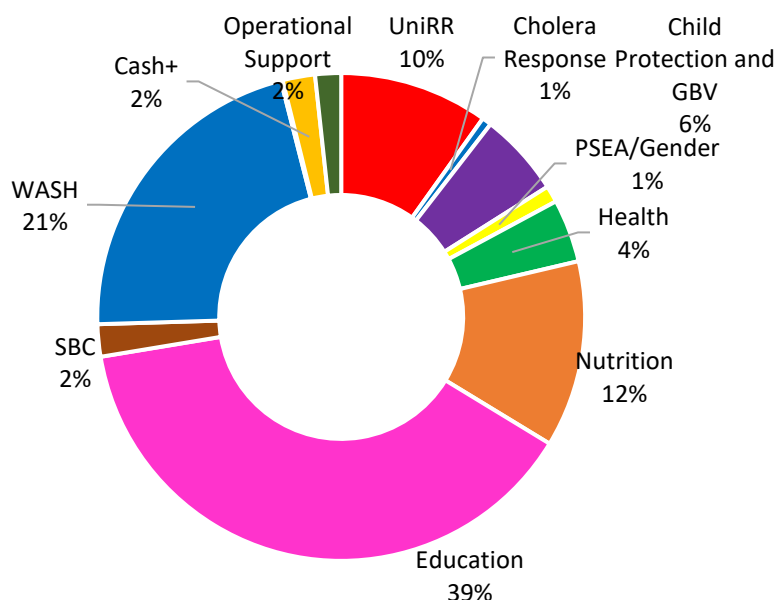
Funding Requirements

As the situation worsens and additional resources are needed, UNICEF updated its response plan for an additional six months (May to October 2023). UNICEF's total funding required to implement the plan is **US\$ 250.5 million** with US\$ 163.6 million required for phase 1 (May- July) and US\$86.9 million required for phase 2 (August- October). UNICEF already mobilized **US\$ 15.4 million**, leaving a **funding gap of US\$ 235.1 million** that needs to be urgently mobilized to scale up its humanitarian response.

UNICEF expresses its sincere gratitude to all donors, notably SIDA, BHA, ECHO, France, and CERF for their continuous support. More than ever, UNICEF needs flexible and timely funding to respond where the needs are the greatest as the situation unfolds.

This response plan is part of the UNICEF DRC Humanitarian Action for Children 2023 and funding requested for this specific response is included in it.

Area of intervention	Total Funding Requirements (US\$)	Total Funding received (US\$)	Total Funding Gap (US\$)
UNICEF Rapid Response (UNIRR)	24,720,760	5,020,000	19,700,760
CATI	1,575,000	1,075,000	500,000
WASH	53,851,031	1,100,000	52,751,031
Child Protection and Gender Based Violence	13,883,784	2,291,414	11,592,370
Health	10,483,338	380,000	10,103,338
Nutrition	30,998,419	3,190,368	27,808,051
Education	96,936,616	1,200,000	95,916,616
Social & Behaviour Change (SBC)	5,356,904	-	5,356,904
Integrated Analysis Cell (IAC)	300,000	-	300,000
PSEA/ Gender	2,768,000	45,000	2,723,000
Cash+	5,375,000	-	5,375,000
Operational support Cost	4,300,000	1,300,000	3,000,000
Total	250,548,852	15,421,782	235,127,070



Summary of UNICEF's Response Results since March 2022

Sector	UNICEF and IPs Response	
	UNICEF Target ³	Total Results
WATER, SANITATION & HYGIENE		
# of people accessing a sufficient quantity of safe water for drinking and domestic needs	572,270	295,200
# of people use safe and appropriate sanitation facilities	361,736	135,555
# of people targeted around suspected cholera cases who received an appropriate and complete response within 48 hours of case notification through a responsive epidemiological surveillance system	485,000	469,320
CHILD PROTECTION		
# of children accessing mental health and psychosocial support	58,137	+ 18,000
# of children GBV survivors accessing holistic care	2,739	1,444
# of children released from armed forces and groups reintegrated with their families/communities and/or provided with adequate care and services	1556	598
# of unaccompanied and/or separated children reunified with their primary caregiver or provided with family-based care/alternative care services	5,349	2,815
RAPID RESPONSE MECHANISM		
# of people whose life-saving non-food items and WASH supplies (including menstrual hygiene items) needs were met through supplies or cash distributions within 7 days of needs assessments	363,758	245,758
EDUCATION		
# of children accessing formal or non-formal education, including early learning	47,800	15,902
# of children receiving individual learning materials	59,420	19,403
# of temporary learning spaces established	207	100
NUTRITION		
# of children aged 6 to 59 months affected by SAM admitted for treatment	21,686	5,002
# of primary caregivers of children aged 0 to 23 months receiving infant and young child feeding counselling	40,029	27,542
HEALTH		
# of children and women receiving primary health care in UNICEF-supported facilities	64,966	20,504

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³ Cumulative targets since the beginning of the crisis (March 2022 - May 2023)