

# DR CONGO HUMANITARIAN CRISIS

INTERNATIONAL ORGANIZATION FOR MIGRATION



- During the reporting period, IOM assisted 230 Internally Displaced Persons living in the Ecole Primaire la Gloire collective centre in Kalemie to return voluntarily to their chosen area of return in Tanganyika.
- 59 survivors of Gender-Based Violence were trained on management of small businesses as a first step to assist them with Income-Generating Activities.
- IOM trained 100 enumerators on data collection in the greater Kasai region in preparation for displacement monitoring activities.

#### **Situation Overview**

The humanitarian consequences of the incursions during the first week of February by armed groups in the Oicha Health Zone, in the Beni Territory, have displaced more than 2,200 people adding to about 1,500 people who had been displaced at the end of January. As of 14 February, there were more than 12,000 displaced people in the Oicha Health Zone.

In addition, there is a humanitarian response gap in the north of Beni territory; due to lack of capacity, no humanitarian actors have yet reached these localities to meet urgent needs in basic household items and food.

During the reporting period, there has been a surge of inter-ethnic violence in Djugu territory, in the north-eastern province of Ituri. The conflict between the Hema and Lendu ethnic groups have caused people to flee their burning village in fear of ethnic violence. The crisis has produced both refugees and Internally Displaced Persons (IDPs). 34,000 Congolese have crossed Lake Albert to Uganda since the beginning of January 2018 and approximately 28,634 IDPs have sought shelter in Bunia, Ituri's provincial capital in the last couple of weeks.

#### **CONTACTS**

#### **IOM RESPONSE**



## **DISPLACEMENT TRACKING**

The Greater Kasai region, consisting of the three provinces Kasai, Kasai Central, Kasai Oriental,

Lomami and Sankuru is one of the regions previously considered calm, but has since 2016 experienced intercommunity and land conflicts. This conflict resulted in a massive displacement crisis and during the worst days of 2017, the region had a population of approximately 1.3 million IDPs. Today, the region hosts 896,000 IDPs but also has had the largest population of 605,000 returnees in the last 18 months.

IOM has launched a project to monitor the displacement situation in Kasai region. To this end, 100 enumerators were trained by IOM in February 2018 on how to conduct Displacement Tracking Matrix (DTM) activities, and multisectorial evaluations in the conflict-affected provinces of Kasai Central and Kasai Oriental.

Once, the data collection has started, the teams will cover each village in these two provinces to collect data on population movements, the number of IDPs, and returnees. IOM will equally collect data on multi-sectorial needs for each health zone<sup>1</sup> in the region. The data collected will then be analysed by IOM and shared to the humanitarian community and Congolese authorities for appropriate assistance.

CAMP COORDINATION AND CAMP MANAGEMENT

IOM is currently organising the relocation of IDPs from the collective centres to displacement sites in Kalemie, Tanganyika's provincial capital, and is also assisting those who wish to return voluntary to either their areas of origin or chosen areas of return.

In preparation for the IDP households that will arrive at the Kalunga displacement site, IOM has prepared 1,000 plots in accordance with local CCCM standards where the IDPs will be able to install their shelters. IOM has equally prepared sanitary corridors and Water, Hygiene and Sanitation (WASH) infrastructure, as well as two transit hangars which can accommodate between 150 and 200 households. These transit shelters will be used by households arriving at the

Kalunga displacement site during the time it takes for them to set up their own shelters.

On 17 February, IOM organised the transportation for 102 households (230 IDPs) from Ecole Primaire la Gloire collective centre in Kalemie to their chosen area of return, Kasanga-Mtoa. These households had expressed their wish to voluntarily return to their own identified area of return and IOM assisted them accordingly with transportation and refreshments. The remaining 820 households at Ecole Primaire la Gloire collective centre had expressed their wishes to be relocated to the Kalunga displacement site. Their transfer to Kalunga is planned to start at the end of February.



### **PROTECTION**

From 7 to 8 February, IOM conducted five women focus group discussions (FGD) in Kibabi Police, Kibabi Buporo, Katale and Bushani displacement sites in North Kivu. Sixty women participated in the FGDs, most of

Each province in DRC is divided into health zones, representing a specific area.



Gender-Based Violence (GBV) survivors. The them discussions centred around protection risks in the displacement sites and protection activities which could be beneficial for women. During their discussions, the women also discussed how the monitoring of GBV cases could be done, how to sensitize on the prevention and response to GBV in the displacement sites, as well as hygiene, and family planning. Among the suggestions on how IOM could intervene, they mentioned the need for IOM to support the site managers and protection committees with GBV tools such as GBV awareness tools with information on referral systems, on how to report, and how confidentiality is ensured, and the need for hygiene kits to be distributed among women and girls between the ages of 12-50 years old.

IOM, with funding from Sweden, is providing survivors of GBV with Income Generating Activities (IGAs) to enable survivors to start small businesses of their own to secure an income. During the reporting period, IOM identified 59 women who will benefit from IGAs. In order to increase the potential success of their future IGAs, the beneficiaries received training on small business management including on how to manage small businesses, financial management, and market strategies.



# Catherine's Story

"It was in April. Four of them showed up at the house -- men I had never seen before, armed with machetes. It was when I was pregnant," she recounted in a whisper.

"I was able to deliver a healthy baby," Catherine added. In a region where rapes often involve penetration with a fire arm or a sharpened stick, giving rise to serious health problems and seriously endangering any pregnancy already underway, Catherine realizes she was lucky.

"After that we ran away – me and my two children and my neighbour and her six children. We walked for three days before reaching the main road and there we were lucky – there was a UN force convoy going by and they brought us all here. I was wandering the streets as I didn't know where to go with the children when this lady said we could stay with her. She's been very good to us," she continued, her sunken cheeks drenched in sweat. She has been confined to bed for a month with malaria and has lost about half her body weight, lacking the money to go and get treatment.

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