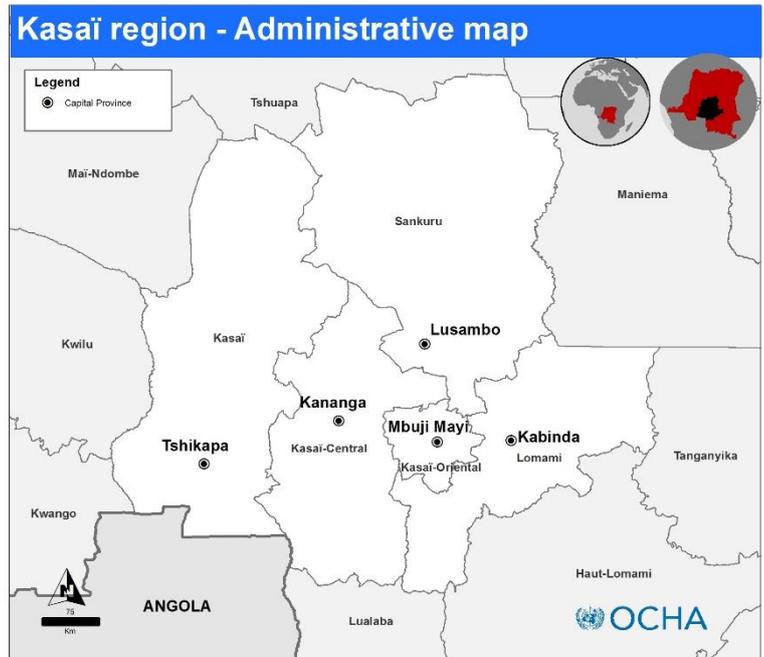




This report was produced by OCHA DR Congo in collaboration with partners in Kasai, Central Kasai and Eastern Kasai. It covers the period from 4 April (following the previous SitRep) to 12 April 2017. The next report will be published by 18 April 2017.

Highlights

- More than one million people are currently displaced in the Kasai region, of which 60 per cent come from Central Kasai. This figure has more than doubled compared to the first situation report, due to methodological improvements and new data.
- The assistance continues with 40 humanitarian actors in the field, providing multisector assistance for at least two months, to some 352,000 people in the provinces of Kasai, Central Kasai and Eastern Kasai.
- Due to security and physical constraints, humanitarian access is a challenge that needs to be considered in the humanitarian response strategy under development. There is also a need to improve the monitoring and warning system in place to monitor humanitarian displacement and needs.
- The humanitarian situation could soon worsen due to the gradual shift in the crisis, marked by the fragmentation of militias, the intensification of violence against civilians, and the growing importance of inter-community conflict dynamics (in a native vs non-native logic). The risk of inter-community clashes is particularly high in Luiza (Central Kasai) and Mweka (Kasai).



Source: OCHA.
The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations. Date of creation 11 april 2017.

| | | | | | |
|--|---|--|---|---|---|
| <p>2,44 M</p> <p>affected persons (minimum estimated figures)</p> | <p>1,03 M</p> <p>Internally Displaced People¹</p> | <p>97 084</p> <p>Returnees in Eastern Kasai²</p> | <p>130,000</p> <p>Members of communities/families hosting IDPs³</p> | <p>352,000</p> <p>People covered by the ongoing emergency assistance</p> | <p>4,562</p> <p>Congolese expelled from Angola (Figures for Jan. 2017)</p> |
|--|---|--|---|---|---|

¹ Considering the volatile context of the complex emergency in the Kasai region, population movements are currently dynamic and complex (sometimes with pendular, preventive or multiple displacements). This makes it difficult to identify IDPs and people who have returned in the provinces of Kasai, Central Kasai, Lomami and Sankuru.

² This number of returnees only applies for the province of Eastern Kasai, where the lull reported in some areas has allowed IDPs to return permanently to their native areas.

³ This number of members of communities/families hosting IDPs refers exclusively to areas that have been assessed.

Pour plus d'informations, voir "contexte de la crise" à la fin de ce rapport
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La mission du Bureau des Nations Unies pour la coordination des affaires humanitaires (UNOCHA) est de mobiliser et de coordonner une action humanitaire efficace dans le respect des principes humanitaires en partenariat avec les acteurs locaux et nationaux.

La coordination sauve des vies

Overview of the situation

As of 11 April 2017, more than one million people are displaced due to the complex crisis in the Kasai region (see table below for the breakdown by provinces). This figure has more than doubled compared to the data reported in the Situation Report No. 1. This is the result of the incorporation of newly collected data and of a reviewed and improved counting methodology based on alerts. In the same way, the number of people affected by this crisis increased from 1.74 million people to 2.44 million.

New internal displacement of people fleeing violence in various areas are reported daily as humanitarian alerts across the five provinces (Kasai, Central Kasai, Kasai Oriental, Lomami and Sankuru). On 6 April 2017, for example, a displacement of more than 57 000 persons was reported in the territories of Mweka and Luebo (Kasai province). Similarly, on 8 April, there were reports of a movement of 200 persons in the Luilu area (Eastern Kasai). As a reminder, these internal displacements are caused, on one hand, by protection risks generated by the presence of the FARDC and militia men attacks in the villages, and on the other hand by the clashes between these parties. Dynamics of multiple and pendular displacements are observed, depending on the areas where conflicts between militias and armed groups erupt. In some towns, such as Luebo (Kasai), the population chose to stay at home and submit to the authority of militias, whereas local authorities have fled the area.

Persons affected by the crisis, by categories and province ⁴

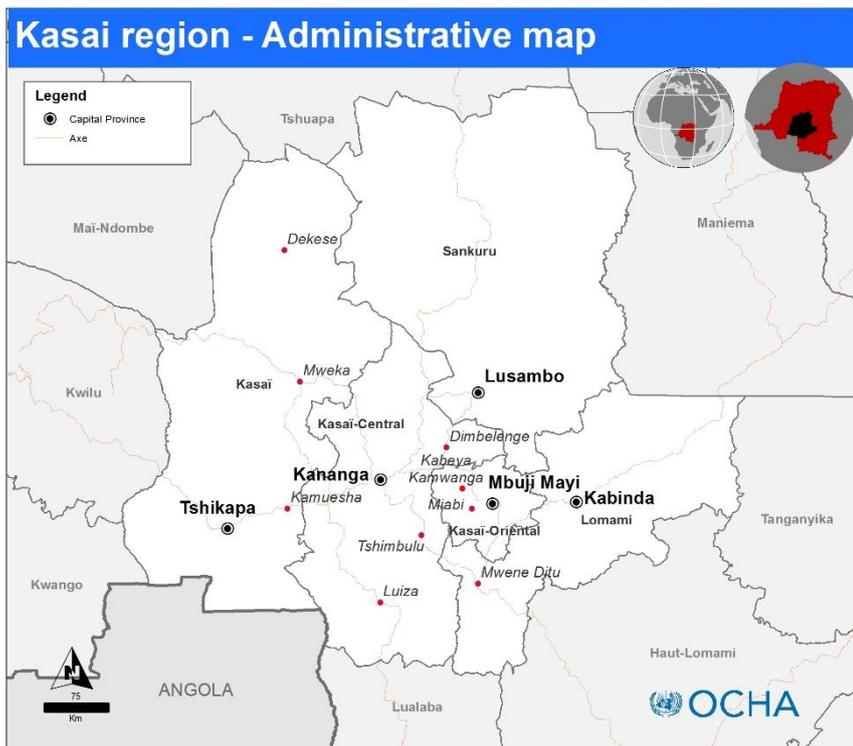
| Province | Total Population | Affected people | IDPs | Returnees | Members of host communities/ host families |
|---------------------------------|-------------------|------------------|------------------|---------------|---|
| Central Kasai | 4, 253,591 | 1, 573,628 | 637,960 | | 99,036 |
| Kasai | 4, 215,517 | 464,777 | 304,749 | | |
| Eastern Kasai Oriental | 5, 552,225 | 289,850 | 48,045 | 97,084 | 30,987 |
| Lomami | 2, 930,836 | 80,000 | 17,000 | | |
| Sankuru | 1, 846,755 | 35,000 | | | |
| Haut-Lomami (former Katanga) | 3, 632,533 | | 400 | | |
| Lualaba (former Katanga) | 2, 090,404 | | 28,000 | | |
| Total | 24,521,861 | 2,443,255 | 1,036,154 | 97,084 | 130,023 |

In this context of violence and displacements of the population, the protection situation is of great concern. In Central Kasai, for example, at least 38 cases of summary executions of civilians have been confirmed, as well as obstacles to the physical integrity of at least 23 civilians in Kananga (Nganza), during the period from 28 to 30 March. In addition, new mass graves have been discovered: four in the township of Nganza (5 April 2017); two in Tshienke (7 April) and nine in Ngandu Yamba (3 April 2017). The last two localities are situated in the territory of Dibaya respectively about 4 and 5 kilometers from Tshimbulu. Furthermore, in the Kasai

⁴ Given the limited humanitarian access, the figures for the Kasai and Central Kasai are based on assessments, unverified alerts of national NGOs or local civil society, as well as information provided by Provincial Health Directorate (DPS), for areas affected by conflict or displacement. In Eastern Kasai, estimates have a higher degree of reliability since Kabeya-Kamwanga and Miabi areas have been assessed, and that the situation of displacement has been stable. For other provinces (Lomami, Sankuru, Lualaba and Haut-Lomami), the figures are just estimates based on unverified alerts of local actors. In the province of Lomami, for example, there is a lack of data for the territory of Mwene Ditu and Luilu that have recently been affected by the violence and are currently inaccessible. The number of returnees, host families and communities are still difficult to estimate due to reduced humanitarian access and ongoing movements of IDPs, as activities of militias and FARDC continue. For now, it is not possible to achieve total reliability due to the volatility of the situation and population movements. In the volatile context of complex emergencies in the Kasais, population movements are currently dynamic and complex (sometimes with pendular, preventive or multiple displacements). This makes it difficult to distinguish between IDPs in the provinces of Central Kasai, Kasai, Lomami and Sankuru. The number of returnees returned only applies for the province of Eastern Kasai, where the reported lull in some areas has allowed IDPs to return permanently to their native areas. The number of members of communities / families hosting IDPs refers exclusively to areas that have been assessed.

province, destruction of public and private property as well as cases of summary executions of civilians and police are regularly reported, particularly in the territories of Luebo and Mweka. Populations' protection risks seem exacerbated following the change in the way militias operate, with an increasing number of attacks against civilians, whereas their initial strategy mainly targeted state symbols. In the area of child protection, some 173 children (168 boys and 5 girls) were arrested in Kananga between August 2016 and March 2017, of whom 60 per cent are still in detention to date. Similarly, in Tshikapa, 111 boys were arrested between December 2016 and April 2017, and were all subsequently released. As for Gender Based Violence (GBV), 13 cases of rapes were reported for the period from 27 March to 4 April 2017. These figures remain quite low due to the absence of a systematic and formal monitoring system.

Because of this volatile security situation, humanitarian access is severely limited in several areas of the Kasai region. Access constraints vary on a daily basis, depending on the movements and attacks of militias and areas of clashes with the FARDC. On 11 April, the situation is as follows:



Source: OCHA.

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reduced because of their occupation by the militias.

- In the province of Eastern Kasai, the territories of Kabeya- Kamwa and Miabi are accessible.
- In the province of Lomami, access is greatly reduced in Mwene - Ditu. As for the Luilu territory, it was not accessible in early April, no updated information is available.

In Kasai Central, most humanitarian organizations are based in Kananga, and it is very difficult for them to visit areas within a radius of over 100 km from this town, due to high security risks for teams. For example, no humanitarian actor is currently able to travel to Luiza, 400 km north of Kananga. The access constraints are likely to spread to other areas due to current movements of militias from Luiza towards the East, and from Luebo to the North. The lack of access is also aggravated by humanitarian actors' perception and acceptance. Respect for humanitarian presence by communities, armed forces and groups requires to increase the awareness of these stakeholders through various channels (meetings, radio messages, etc.), particularly on humanitarian identity, operations and principles. It is also important to strengthen civil-military coordination regarding humanitarian access. In this regard, the establishment of a permanent MONUSCO office in Kananga should facilitate the full use of the established framework for civil-military interaction between humanitarians and the UN mission.

- In Central

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Affected territories in the five provinces report huge security constraints to humanitarian access

Kasai province, the territories of Dibaya, Dimbelenge and the city of Kananga are accessible. However, in the territories of Kazumba and Luiza, access is severely reduced on the main roads. It should be noted that the risk of conflict is particularly high in the city of Luiza.

- In Kasai, accessible territories are Kalonda, Kamonia and Kamuesha (sporadic clashes are reported but access can be negotiated). However, Mweka and Luebo territories' accessibility is greatly

Financing and Humanitarian response

Financing ⁵

- The Central Emergency Response Fund (CERF) has allocated approximately US \$ 4.5 million to United Nations Agencies to cover 30 percent of initially assessed needs. The expected duration of project implementation is six months starting March 2017. Assistance include different sectors: Non Food Items, NFIs/Shelters (52,204 beneficiaries); Child protection (3,610 children and 1,639 adults); Child Protection / Education (3,500 students and 63 teachers); Protection / Gender Based Violence (22,265 beneficiaries); Health (430 recipients); Water Sanitation and Hygiene (54,000 beneficiaries); Nutrition (3,596 beneficiaries); Food security and livelihoods (30,750 beneficiaries).
- The United Kingdom Department for International Development (DFID/START mechanism) has disbursed an allocation of more than US\$346,000 (out of an available envelope of US\$ 500,000), part of which was donated to the NGO Action Contre la Faim (ACF) for activities in the NFI sector for 3,000 beneficiaries in the Kalonda health zone (Tshikapa territory) in Kasai province; and another part to *Christian Aid* for Food Security activities (food distribution) in favor of 5,000 persons, also in Tshikapa territory (Kasai). These projects, which began in March 2017 for a period of 45 days, will end in a few days.
- UNICEF has adapted its response strategy to changing contexts and emerging needs, for a total envelope of about US\$1 million. Part of the funds for the ARCC unconditional monetary assistance program, currently being implemented in the territory of Dibaya and Kabeya-Kamwanga, were redeployed to increase the coverage of households (unconditional cash). This program is funded through UNICEF with DFID funds and is implemented by CRS.
- Besides, the NGO Handicap International is implementing a €50,000 project funded by the Ministry of Foreign Affairs of Luxembourg, to assist wounded people in Central Kasai.

Humanitarian Response ⁶

Due to security and physical constraints, humanitarian access is limited in many affected areas of the Kasai region. Current humanitarian interventions mainly occur in accessible areas. However, discussions are underway regarding the strategy to be adopted for the air transport of inputs to areas with limited accessibility.

Response in accessible areas. In total, 39 humanitarian partners are mobilized for the response in the Kasai region. Through the projects currently being implemented, more than 352,000 people⁷ are covered by emergency assistance in one or more sectors for at least the next two months:

- In Central Kasai, at least 256,000 people are targeted by emergency assistance projects being implemented by 10 partners in various sectors (Water, Sanitation and Hygiene Food Security, Protection and Nutrition).
- In Eastern Kasai, at least 66,000 people benefit from emergency aid activities by 10 partners in various sectors (unconditional cash, Nutrition, Food Security, Health, and Protection).
- In Kasai, more than 30,000 persons are covered by humanitarian assistance through various ongoing projects implemented by 19 partners in various sectors (Nutrition, Shelter / Non Food Items, Food Security, Protection and Health).
- In the provinces of Lomani and Sankuru, no humanitarian response is underway, but OCHA continues to monitor alerts and population movements.

352 000

People receive emergency assistance in one or more sectors during the next two months.

⁵ All humanitarian partners, including donors and recipient agencies, are encouraged to inform the OCHA Financial Monitoring Service (Financial Tracking Service - <http://fts.unocha.org>) on cash and in-kind contributions by mail to: fts@un.org

⁶ For more information on all interventions (actors, sectors, amounts, number of beneficiaries, areas of intervention) please refer to "3W" document on the operational presence of the actors (who does what where?) published separately by OCHA.

⁷ The number of persons covered by the response is conservatively estimated in order to avoid double counting according to the methodology used in the 2017 – 2019 Humanitarian Response Plan

To avoid a deterioration of the humanitarian situation, the priority is to accelerate the implementation of projects funded by the CERF which have already been paid to the recipient agencies, especially as the needs have increased significantly since January. It is also necessary to ensure the rapid delivery of inputs to existing actors, while strengthening the presence of partners - even in areas with limited accessibility. Monetary assistance should be privileged in urban areas where markets are supplied and functional – subject to prior case by case analysis to ensure "Do no harm" (preventing risk of misuse of funds or assistance misappropriation). During the last week, following major gaps reported in the care of the injured people reported in the health center of Kananga (Central Kasai), the delivery of kits for blood collection and storage was organized by OCHA, thanks to donations from the National Blood Transfusion Program in Kinshasa, and the support from the World Food Program (WFP) through UNHAS flights.

Response in areas with limited accessibility. At present, no systematic humanitarian response is underway in areas where access is reduced, due to a lack of funding. In these areas, the priority is to strengthen the management of alerts. Discussions have also been held in the field regarding the rapid delivery of inputs, as these areas are often the ones with the most pressing needs. It should be emphasized that cash assistance is not possible in rural areas where the market is no longer functioning (due to sporadic supply, caused by a lack of transport means). The methodology of intervention in these areas was discussed during a meeting of the Humanitarian Country Team (HCT) on 12 April.

Complementarity with development assistance. In order to foster a contextual and proportionate humanitarian response, it is important to strengthen synergies between humanitarian and development actors. Currently development activities continue in the Kasai region, despite some supply problems. The sectors of these activities are: Nutrition; Protection; Health; Food Security and Water, Sanitation and Hygiene (provision of inputs and support to state health facilities). Discussions are ongoing between health actors in Central Kasai to harmonize emergency and development approaches, including the free access to health care and an exit strategy.

General Coordination

Coordination efforts are ongoing in Kinshasa, with the organization of several meetings dedicated to the Kasai crisis: An inter-agency coordination meeting was held on 31 March 2017 and a first meeting of the "Kasai Task Force" (offshoot of the HCT) took place on 6 April 2017. In the field, coordination was also strengthened by the three missions undertaken by OCHA in Tshikapa (Kasai), Kananga (Central Kasai) and Mbuji-Mayi (Eastern Kasai) from 22 March to 5 April 2017, including through:

- The establishment of a coordination mechanism in the Kasai province and revitalization of the existing mechanisms in Central Kasai and Eastern;
- Strengthening the existing warning system in particular through the revitalization of humanitarian focal points in each province and the systematization of information reporting and processing;
- The development of maps on the operational presence of humanitarian actors ("Who does what where?" - 3W) which are being finalized and will be shared shortly;
- The development of response strategies for each of the three provinces, and their consolidation into a single document (ongoing).

This response strategy for the complex emergency in the Kasai region (currently being finalized) and the various strategic and operational options - resulting from the coordination meetings in Kinshasa and the three OCHA field missions – have been submitted to the HCT for discussion. These options relate mainly to operational coordination, response modalities, funding, as well as advocacy and communication issues.

Context of the crisis:

The complex emergency in the Kasai region began in Tshimbulu (Central Kasai), with the violent uprising of a local militia (Kamuina Nsapu) on 8 August 2016. Since then, the crisis spread to provinces of Kasai, Eastern Kasai, Lomami and Sankuru with repeated militia attacks against symbols of the central government, and their clashes with the national security forces. The rise of the conflict has resulted in increasingly violent and indiscriminate violent acts against civilian populations by all parties to the conflict. This crisis is also reflected in an exacerbation of pre-existing inter-community tensions between multiple ethnic groups in the area, in connection with the recent redefinition of provincial boundaries, the crumbling of traditional mediation and customary power structures, as well as the local manifestation of national-level political rivalries. Peaceful coexistence is undermined between the communities perceived as supporting the militia, and those accused of supporting government. This situation leads to multiple internal displacements in the various provinces mentioned above, as well as towards provinces of Lualaba and Haut-Lomami. This generates significant humanitarian needs of emergency multisector assistance and protection. Faced with this situation, the strategic priorities of the humanitarian community are the following: (i) enhance the visibility of the needs throughout the affected territory; (ii) establish a common response strategy and mobilize attention, capacity and resources both at national and at international levels; (iii) improving access to vulnerable communities by overcoming the physical and security constraints; (iv) agreeing on a strategy for community outreach and communication with armed actors in order to facilitate the acceptance of humanitarian aid; and (v) ensure adequate coordination between humanitarian activities and development and stabilization actors.

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