



## Democratic Republic of the Congo

The Democratic Republic of the Congo is facing a significant escalation of violence and armed conflict. In the provinces of North Kivu, South Kivu and Tanganyika, and in the Kasai region, violence has forced more than 2.1 million people to leave their homes.<sup>1</sup> As of mid-2018, an estimated 12.8 million people<sup>2</sup> were at risk of severe food insecurity and acute malnutrition, representing a 30 per cent increase since 2017.<sup>3</sup> The cholera epidemic persisted in 2018, with over 25,000 cases and 857 deaths by early October.<sup>4</sup> Two Ebola outbreaks took place in Équateur and North Kivu provinces during the year, with 388 cases and 242 deaths recorded.<sup>5</sup> The Ebola outbreak in North Kivu and Ituri is still ongoing. The humanitarian community estimates that in 2019, 12.8 million people will require assistance and protection across the country, including 4.2 million children at risk of global acute malnutrition (GAM).<sup>6</sup> The situation is compounded by violations of children's rights, including children out of school, forced recruitment by armed groups and sexual abuse. These violations are preventing more than 5.6 million children from accessing their basic rights, such as education, health care, safe water and adequate sanitation and hygiene facilities.<sup>7</sup>

### Humanitarian strategy

In 2019, UNICEF will continue to provide an integrated, multi-sectoral response in the Democratic Republic of the Congo, primarily in the regions facing constant population displacement and epidemics, including Ebola. The Rapid Response to Movements of Population (RRMP) mechanism will target areas affected by shocks and mass displacement and provide a multi-sectoral package, including non-food items, multipurpose unconditional cash transfers and water, sanitation and hygiene (WASH) services. In post-conflict areas, UNICEF will re-establish or reinforce access to social services to ensure a protective environment for children. UNICEF and partners will be among the first responders to outbreaks, including of Ebola, providing prevention and control through WASH, nutrition and health assistance, education, psychosocial support and communication for development activities. Outreach for the screening, referral and treatment of severe acute malnutrition (SAM) will be increased to absorb a larger share of the national SAM burden in health facilities and communities. Child protection services will include the provision of psychosocial support and early learning, early stimulation and learning through play activities for children who are displaced, separated, unaccompanied, formerly associated with armed groups and/or survivors of sexual violence. UNICEF will continue to lead four clusters<sup>8</sup> and the child protection sub-cluster and co-lead the Cash Working Group.

### Results from 2018

As of 31 October 2018, UNICEF had US\$109 million available against the US\$268.1 million appeals (41 per cent funded).<sup>9</sup> UNICEF provided basic WASH services to more than 828,000 people affected by conflict and natural disasters and responded to the unprecedented cholera and Ebola outbreaks by providing WASH response packages to nearly 2.4 million people in Ebola-prone zones. Through UNICEF's nutrition interventions, more than 220,000 children with SAM were admitted for therapeutic care, with a cure rate of nearly 87 per cent. Nearly 717,000 children were vaccinated against measles; and medical drugs were provided to treat over 25,000 cholera cases. In addition, nearly 246,000 displaced, refugee and returnee children gained safe access to community spaces for socialization, play and learning, and more than 5,000 unaccompanied and separated children were placed in alternative care arrangements. Given the rise in population movements, the RRMP played a key role in assisting internally displaced persons, returnees and host families through a multi-sectoral package that included non-food items, multipurpose cash transfers and WASH services. These services reached some 1,642,000 people.

# Humanitarian Action for Children

unicef 

**Total people in need:** 12.8 million<sup>10</sup>

**Total children (<18) in need:** 5.6 million<sup>11</sup>

**Total people to be reached:** 6.1 million<sup>12</sup>

**Total children to be reached:** 4.3 million<sup>13</sup>

### 2019 programme targets:

#### Nutrition

- 888,037 children aged 6 to 59 months with SAM admitted for therapeutic care

#### Health

- 969,284 children aged 6 months to 14 years in humanitarian situations vaccinated against measles
- 415,332 people affected by conflict and disease outbreaks received access to primary health care

#### WASH

- 892,848 natural disaster and conflict-affected people with access to WASH basic services<sup>14</sup>
- 2,574,593 persons in cholera-prone zones and other epidemic-affected zones (Ebola, yellow fever, etc.) benefiting from preventive as well as WASH cholera response packages
- 258,879 severely malnourished children and host families receiving WASH assistance from nutrition centres, through to the household level

#### Child protection

- 8,000 unaccompanied and separated children identified and placed in family-based care or an appropriate alternative
- 6,000 children associated with armed forces/groups benefited from community-based socio-economic reintegration support
- 5,000 girl and boy survivors of gender-based violence provided with a comprehensive response
- 120,000 children benefited from psychosocial support, including access to child-friendly spaces

#### Education

- 785,660 girls and boys aged 3 to 17 years affected by natural disasters or conflict received access to quality education and psychosocial support
- 615,000 students reached with Ebola prevention information in schools

#### Communication for development

- 75,000 members of the formal community development structures and 2019 programme targets 14 frontline workers trained, certified and actively engaged in community surveillance and participation approaches
- 1.5 million at-risk people in Ebola-affected zones engaged through face-to-face activities and mass media

#### Non-food items/shelter (RRMP)

- 1,325,940 people provided with essential household non-food items/shelter materials, conditional cash for non-food items and unrestricted cash<sup>15</sup>

	Cluster 2018 targets	Cluster total results	UNICEF 2018 targets	UNICEF total results
<b>NUTRITION</b>				
Children aged 6 to 59 months with SAM admitted for therapeutic care <sup>i</sup>	1,306,000	282,705	1,100,000	220,243
<b>HEALTH</b>				
Children aged 6 months to 14 years vaccinated against measles			970,000	716,988
People affected by conflict and disease outbreaks supported to access primary health care			520,000	245,707
<b>WATER, SANITATION AND HYGIENE</b>				
People affected by natural disaster and conflict provided with access to WASH services <sup>ii</sup>	3,262,000	1,700,034	1,200,000	828,094
Persons in cholera-prone zones and other epidemic-affected areas benefiting from preventative and WASH cholera response packages	4,304,000	3,434,532	1,500,000	2,392,716
Severely malnourished children and host families receiving WASH assistance <sup>iii</sup>	652,627	47,366	550,000	46,536
<b>CHILD PROTECTION</b>				
Children formerly associated with an armed group provided with reintegration support	7,200	5,082	6,000	4,251
Separated and unaccompanied children identified and reunited with their families	13,000	6,312	11,700 <sup>iv</sup>	5,185
Identified survivors of sexual violence provided with a comprehensive response			5,200	3,336
<b>EDUCATION</b>				
Girls and boys aged 5 to 11 years affected by conflict or natural disasters given access to quality education and psychosocial activities	1,700,000	444,097	510,000	277,482
<b>MULTIPURPOSE CASH-BASED ASSISTANCE</b>				
People assisted with an unconditional cash grant	3,971,050	355,119	437,500	355,119
<b>NON-FOOD ITEMS/SHELTER</b>				
People accessing essential household items and shelter materials	3,700,000	1,403,260	437,500	697,702

Results are through 31 October 2018.

<sup>i</sup> In 2018, cluster and UNICEF SAM treatment targets increased significantly; this was aligned with the cluster strategy focusing on increased resource mobilization for the Democratic Republic of the Congo nutrition crisis. However, in 2018, the nutrition sector remained critically underfunded and UNICEF's funding gap for nutrition was 83 per cent. This, combined with the limited capacities of partners to implement at scale in the country, resulted in significant underachievement.

<sup>ii</sup> This is an integrated package of WASH services with each person receiving access to safe water, improved sanitation facilities and hygiene materials.

<sup>iii</sup> Hygiene kits with key hygiene messages.

<sup>iv</sup> This child protection indicator has been split at the Country Office level to "unaccompanied and separated children identified and/or placed in alternative care arrangements and/or who benefited from individual follow-up (girls/boys)" with a UNICEF target of 11,700 children and "separated and unaccompanied children identified and reunited with their families" with a UNICEF target of 2,500.

## Funding requirements

In line with the country level multi-year inter-agency Humanitarian Response Plan (2017–2019), UNICEF has increased its funding request from US\$268.1 million in 2018 to US\$326.1 million in 2019 to support children and families in need of humanitarian assistance in the Democratic Republic of the Congo. The budget increase is due to the increase in education targets and the underestimated costs in the nutrition and education sectors. Without adequate and timely funding in 2019, UNICEF and its partners will be unable to address the critical humanitarian needs of children and families in the Democratic Republic of the Congo.

Sector	2019 requirements (US\$)
Nutrition	143,861,994 <sup>16</sup>
Health	17,398,569
Water, sanitation and hygiene	23,961,326
Child protection	7,550,000 <sup>17</sup>
Education	60,260,103 <sup>18</sup>
Communication for development	22,560,200
Humanitarian multi-sectoral response (including the RRMP, cash-based interventions, etc.)	48,895,000 <sup>19</sup>
Cluster/sector coordination	1,621,102
<b>Total</b>	<b>326,108,294</b>

<sup>1</sup> Office for the Coordination of Humanitarian Affairs, 'Democratic Republic of the Congo: 2019 Humanitarian Response Plan' (draft), OCHA, 2018. The Humanitarian Response Plan document was not finalized/published at the time of writing this appeal. The appeal will be updated to be aligned with the published Humanitarian Response Plan, once finalized.

<sup>2</sup> Provisional figures pending the release of 'Democratic Republic of the Congo: 2019 Humanitarian Response Plan' (draft).

<sup>3</sup> 'Democratic Republic of the Congo: 2019 Humanitarian Response Plan' (draft).

<sup>4</sup> Government of the Democratic Republic of the Congo Ministry of Health Epidemiological Surveillance Directorate, IDS database week 43, October 2018.

<sup>5</sup> Ebola response figures include the epidemics in both the Equateur and North Kivu provinces.

<sup>6</sup> 'Democratic Republic of the Congo: 2019 Humanitarian Response Plan' (draft).

<sup>7</sup> Provisional figures pending the release of 'Democratic Republic of the Congo: 2019 Humanitarian Response Plan' (draft).

<sup>8</sup> UNICEF leads the education, non-food items and shelter, nutrition and WASH clusters.

<sup>9</sup> Available funds include US\$80 million received against the current appeal and US\$28.9 million carried forward from the previous year.

<sup>10</sup> Provisional figures pending the release of 'Democratic Republic of the Congo: 2019 Humanitarian Response Plan' (draft).

<sup>11</sup> Ibid.

<sup>12</sup> This figure was calculated based on 888,034 children under 5 years with SAM treatment; 2,574,593 persons in cholera-prone zones and other epidemic-affected zones (Ebola, yellow fever, etc.) to be reached with preventive as well as WASH cholera response packages; 785,660 girls and boys aged 3 to 17 years affected by natural disasters or conflict to receive access to quality education and psychosocial support; 615,000 students to be reached with Ebola prevention information in schools; and 1,325,940 people to be provided with essential household non-food items/shelter materials, conditional cash for non-food items and unrestricted cash.

<sup>13</sup> This figure was calculated based on 888,034 children under 5 years to be reached with SAM treatment; 1,390,593 children in cholera-prone zones and other epidemic-affected zones (Ebola, yellow fever, etc.) to be reached with preventive as well as WASH cholera response packages; 785,660 girls and boys aged 3 to 17 years affected by natural disasters or conflict to receive access to quality education and psychosocial support; 615,000 students to be reached with Ebola prevention information in schools; and 716,008 children to be reached with essential household non-food items/shelter materials, conditional cash for non-food items and unrestricted cash.

<sup>14</sup> This is an integrated package of WASH services with each person receiving access to safe water, improved sanitation facilities and hygiene materials.

<sup>15</sup> This target includes 481,250 people targeted for cash assistance.

<sup>16</sup> The nutrition cluster unit cost is US\$162 per beneficiary.

<sup>17</sup> The budget has been rationalized and calculated according to the needs identified.

<sup>18</sup> UNICEF applied the education cluster unit costs (US\$65 per child according to the 2019 Humanitarian Response Plan). UNICEF expanded its education programming and coverage in the Kasai region and Ituri province given the massive reconstruction needs in this sector.

<sup>19</sup> The humanitarian multi-sectoral response budget breakdown is as follows: non-food items/shelter and cash transfer: US\$31.7 million; nutrition/health: US\$7.11 million; WASH: US\$5 million; education/protection: US\$5 million.

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