THE DEMOCRATIC REPUBLIC OF CONGO SITUATION

This update concerns the situation of Congolese refugees and asylum seekers in countries in the region.

As of 30 April 2019, 849,662 Congolese refugees are being hosted in African countries. From 1 January to 30 April 2019 alone, some 32,570 Congolese fled to neighboring countries, with a significant increase in refugee flows to Uganda.

UNHCR together with 56 humanitarian and development partners launched the 2019-2020 Regional Refugee Response Plan (RRRP) on 11 December 2018 for US$743 million to help respond to the needs of Congolese refugees in Africa.

KEY INDICATORS

- **849,662*** Total of refugees and asylum-seekers from the DRC
- **14,618** New arrivals in April 2019
- **32,570 ** Total of new arrivals in 2019
- **51** Total number of Congolese refugees assisted to return in 2018.

AGE, GENDER BREAKDOWN ***

- **50.2%** Men
- **49.8%** Women
- **55%** Children
- **42.4%** Adults
- **2.6%** Elderly

FUNDING

USD 743 million

Interagency RRRP requirements for 2019

- **9 %** FUNDED
- **66.8 million**

- **91 %** FUNDING GAP
- **676.6 million**

POPULATION OF CONCERN IN HOST COUNTRIES

<table>
<thead>
<tr>
<th>Country</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>UGANDA</td>
<td>339,476</td>
</tr>
<tr>
<td>TANZANIA</td>
<td>83,207</td>
</tr>
<tr>
<td>RWANDA</td>
<td>77,760</td>
</tr>
<tr>
<td>BURUNDI</td>
<td>77,706</td>
</tr>
<tr>
<td>SOUTHERN AFRICA******</td>
<td>74,105</td>
</tr>
<tr>
<td>ZAMBIA</td>
<td>42,069</td>
</tr>
<tr>
<td>OTHER COUNTRIES****</td>
<td>41,964</td>
</tr>
<tr>
<td>ANGOLA</td>
<td>37,709</td>
</tr>
<tr>
<td>REPUBLIC OF THE CONGO</td>
<td>23,941</td>
</tr>
<tr>
<td>MALAWI</td>
<td>23,758</td>
</tr>
<tr>
<td>SOUTH SUDAN</td>
<td>15,804</td>
</tr>
<tr>
<td>ZIMBABWE</td>
<td>10,315</td>
</tr>
<tr>
<td>CENTRAL AFRICAN REPUBLIC</td>
<td>1,848</td>
</tr>
</tbody>
</table>

* Total number includes figures from Angola, Botswana, Burundi, the Central African Republic, Chad, Kenya, the Kingdom of Eswatini, Lesotho, Madagascar, Malawi, Mozambique, Namibia, the Republic of Congo, Rwanda, South Africa, South Sudan, Uganda, the United Republic of Tanzania, Zambia and Zimbabwe.

** New arrivals include figures from Angola, Botswana, Burundi, Kenya, the Kingdom of Eswatini, Lesotho, Malawi, Mozambique, Namibia, South Sudan, Uganda, Zambia and Zimbabwe.

*** This age and gender breakdown include figures from Angola, Botswana, Burundi, Central African Republic, Chad, Kenya, the Kingdom of Eswatini, Lesotho, Madagascar, Malawi, Mozambique, Namibia, the Republic of Congo, Rwanda, South Sudan, Uganda, the United Republic of Tanzania, Zambia and Zimbabwe.

**** Other countries include Chad and Kenya.

***** Southern Africa includes Botswana, the Kingdom of Eswatini, Lesotho, Madagascar, Mozambique, Namibia and South Africa.

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NUMBER OF REFUGEES & ASYLUM-SEEKERS in countries of asylum, as of the end of April 2019

Total of population in African countries : **849,662**

- Total of population in countries of asylum involved in the Consubregency Planning : **775,223**
- International Boundary
- Provincial Boundary
- Undetermined Boundary
- Abyei Region

The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations. Feedback: codhidrcim@unhcr.org

Creation date: 30 April 2019  Sources: UNHCR - Kinshasa
Regional Highlights and Operational Context

- UNHCR photographer’s essay on Congolese women refugees won prestigious award. Humanitarian photographer Giles Duley won a prestigious Amnesty International Media Award for his powerful series depicting the plight and resilience of Congolese female refugees in Angola at the annual ceremony in London on Wednesday, 3 April 2019. His powerful photo essay, “We Are Here Because We Are Strong”, was commissioned by UNHCR, the UN Refugee Agency, and published in Humanity magazine.

Duley’s black-and-white portraits are stark, capturing the pain of the women’s ordeal, as well as the inner reserves that they somehow found. They serve as a reminder of the appalling sexual abuse of women in conflicts around the world. In a UNHCR settlement in Lóvua, where the photos were taken, 75 per cent of the Congolese refugees are women and children.

Read more here UNHCR photographer’s essay on Congolese women refugees wins prestigious award http://bit.ly/2JVXdHF

PROVINCES OF ORIGIN of Congolese Refugees

The above map includes figures from Angola, Botswana, Burundi, Central African Republic, Chad, Kenya, the Kingdom of Eswatini, Lesotho, Madagascar, Malawi, Mozambique, Namibia, the Republic of the Congo, Rwanda, South Sudan, Uganda, the United Republic of Tanzania, Zambia and Zimbabwe.
EDUCATION LEVEL OF REFUGEES
Number of Persons per Level

<table>
<thead>
<tr>
<th>Level</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Post university level</td>
<td>997</td>
</tr>
<tr>
<td>14 years (or Grade 14)</td>
<td>1,951</td>
</tr>
<tr>
<td>Informal education</td>
<td>3,188</td>
</tr>
<tr>
<td>Technical or vocational</td>
<td>3,600</td>
</tr>
<tr>
<td>13 years (or Grade 13)</td>
<td>5,189</td>
</tr>
<tr>
<td>11 years (or Grade 11)</td>
<td>14,108</td>
</tr>
<tr>
<td>University level</td>
<td>15,283</td>
</tr>
<tr>
<td>10 years (or Grade 10)</td>
<td>17,085</td>
</tr>
<tr>
<td>7 years (or Grade 7)</td>
<td>20,695</td>
</tr>
<tr>
<td>8 years (or Grade 8)</td>
<td>20,921</td>
</tr>
<tr>
<td>9 years (or Grade 9)</td>
<td>23,056</td>
</tr>
<tr>
<td>Kindergarten</td>
<td>24,187</td>
</tr>
<tr>
<td>12 years (or Grade 12)</td>
<td>32,694</td>
</tr>
<tr>
<td>5 years (or Grade 5)</td>
<td>34,050</td>
</tr>
<tr>
<td>2 years (or Grade 2)</td>
<td>35,405</td>
</tr>
<tr>
<td>4 years (or Grade 4)</td>
<td>36,331</td>
</tr>
<tr>
<td>1 year (or Grade 1)</td>
<td>37,726</td>
</tr>
<tr>
<td>3 years (or Grade 3)</td>
<td>37,843</td>
</tr>
<tr>
<td>6 years (or Grade 6)</td>
<td>54,766</td>
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<tr>
<td>Unknown</td>
<td>85,175</td>
</tr>
<tr>
<td>No education</td>
<td>331,123</td>
</tr>
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</table>

OCCUPATION OF REFUGEES
Number of Persons by Type of Occupation

<table>
<thead>
<tr>
<th>Occupation</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Business services agents and</td>
<td>482</td>
</tr>
<tr>
<td>Secondary education teachers</td>
<td>619</td>
</tr>
<tr>
<td>Salespersons</td>
<td>1,279</td>
</tr>
<tr>
<td>Primary education teachers</td>
<td>1,417</td>
</tr>
<tr>
<td>General managers (own or small)</td>
<td>1,418</td>
</tr>
<tr>
<td>Dairy and livestock producers</td>
<td>2,017</td>
</tr>
<tr>
<td>Street food vendors</td>
<td>2,074</td>
</tr>
<tr>
<td>Stall &amp; market salespersons</td>
<td>3,173</td>
</tr>
<tr>
<td>Sales...</td>
<td>3,175</td>
</tr>
<tr>
<td>Religious professionals</td>
<td>4,231</td>
</tr>
<tr>
<td>Farm-hands &amp; labourers</td>
<td>6,187</td>
</tr>
<tr>
<td>Business professionals</td>
<td>15,138</td>
</tr>
<tr>
<td>Motor-cycle drivers</td>
<td>25,355</td>
</tr>
<tr>
<td>Fishermen</td>
<td>25,375</td>
</tr>
<tr>
<td>Tailors, dressmakers and hatters</td>
<td>28,868</td>
</tr>
<tr>
<td>Hairdressers, barbers, etc.</td>
<td>39,333</td>
</tr>
<tr>
<td>Housekeepers (including...</td>
<td>50,546</td>
</tr>
<tr>
<td>Subsistence farmers and</td>
<td>53,324</td>
</tr>
<tr>
<td>No occupation</td>
<td>75,061</td>
</tr>
<tr>
<td>Farmers (crop and vegetable)</td>
<td>87,796</td>
</tr>
<tr>
<td>Unknown</td>
<td>93,864</td>
</tr>
<tr>
<td>Student</td>
<td>185,314</td>
</tr>
</tbody>
</table>

NUMBER OF PERSONS WITH SPECIFIC NEEDS
Per Country of Asylum

- Uganda: 22,388
- Burundi: 20,891
- Rwanda: 15,531
- Tanzania: 9,492
- Kenya: 6,715
- Zambia: 6,051
- South Sudan: 3,816
- Malawi: 2,837
- Republic of Congo: 1,822
- Zimbabwe: 1,227
- Mozambique: 1,153
- Angola: 1,131
- Central African Republic: 1,003
- Namibia: 491
- Botswana: 179
- Chad: 137
- Eswatini: 51
- Lesotho: 3

**11.17 %**
Of the total refugee population

NUMBER OF PERSONS WITH SPECIFIC NEEDS
Per Category of Concern

- Family unity: 964
- Survivor of torture: 1,257
- Specific legal and physical protection needs: 2,264
- SGBV*: 3,092
- Child at risk: 4,842
- Older person at risk: 10,649
- Woman at risk: 10,977
- Disability: 11,649
- Serious medical condition: 14,589
- Single parent or caregiver: 15,586
- Unaccompanied or separated child: 19,048

* Sexual and Gender Based Violence (SGBV)

The above charts include figures from Angola, Botswana, Burundi, Central African Republic, Chad, Kenya, the Kingdom of Eswatini, Lesotho, Malawi, Mozambique, Namibia, the Republic of Congo, Rwanda, South Sudan, Uganda, the United Republic of Tanzania, Zambia and Zimbabwe.
Achievements during the Reporting Period

ANGOLA

PROTECTION

- Out of 36,655 individuals biometrically registered, 20,145 individuals (5,042 families) received assistance in Lovua settlement.

EDUCATION

- There were some 3,839 school-aged children enrolled in the three formal primary schools as well as antenna schools in the settlement, organised in 60 classes, with an average of 64 students per class.
- The Government of Angola donated a total of 18,256 textbooks and 14,000 notebooks to the three formal primary schools in the settlement.

HEALTH

- Partners launched a menstrual health management project in Lovua settlement to help refugee women and girls to cope with menstruation by using menstrual cups, as well as to teach women and girls about menstruation cycle and its challenges. Social mobilizers were trained to ensure the full implementation and monitoring of the project.
- Some 7,200 male condoms were distributed to men and women in Lovua settlement to strength HIV/AIDS prevention program, including Sexually Transmitted Infections.
- A total of 500 dignity kits were distributed to 500 girls in schools and 400 “Mama and new born kits” were distributed to 400 visibly pregnant women at Women Friendly Spaces.
- Blood donations for patients referred to hospitals in Dundo remained an urgent need; a blood donation system needs to be set up.
- Campaign on Sexual Reproductive Health that targets both men and women needs to start.

SITE PLANNING, SHELTER & NFIs

- The construction of Refugee Housing Units (RHU) continued and a total of 55 RHUs were installed. The accumulative total since the start of the installations in March 2019 is 73.

WASH

- Monitoring of construction works for the boreholes continued and clearing of water stream sources started. Two boreholes were in use despite the small size of the submersible pumps, which need urgent replacement to increase pumping capacity.

NEWS & STORIES

- Portraits of Congolese Refugee Women in Lóvua, Angola. Photos and interviews by Giles Duley

  “As a refugee it is harder as a woman, as we have the responsibility for food and the children.” Said Congolese refugee Ani Tcheba, 19 years old.

  “We left our village in Congo on a Monday morning at 6 a.m. I remember I had no strength. I was heavily pregnant. It had been a difficult pregnancy and I was so worried I’d lose the baby. My husband pulled me. As a refugee it is harder as a woman, as we have the responsibility for food and the children. But here the women have given me inspiration. We share food. When I am missing something they give it to me and vice versa. We help each other with the hardships. We are stronger together.”

  Read more here: Portraits of Congolese Refugee Women | http://bit.ly/2MrF0nt
OPERATIONAL CONTEXT & COORDINATION
- Between 16 and 23 April 2019, synergy, camp management and coordination meetings were organized in all refugee camps. Various actors involved in assistance delivery and protection, as well as the representatives of the refugees participated in those meetings. SGBV prevention and assistance to survivors are among issues that were discussed.
- Under staffing of UNHCR and partners that affects the operation, remained a major challenge.

PROTECTION
- A total of 775 new asylum seekers from the DRC were registered, including 359 new arrivals and refugee status was granted to 338 Congolese asylum seekers. A total of 120 resettlement cases were submitted, and 254 Congolese refugees departed for resettlement countries.
- In Muyinga and Ruyigi, two sensitization sessions were organized by the International Rescue Committee (IRC) for 98 chiefs of camp cells/quarters on SGBV issues.
- A sensitization session on family links restoration was jointly conducted by UNHCR and ICRC in Bwagiriza and Nyankanda camps.
- Some 17 police staff working in Musasa and Gasorwe refugee camps were trained on UNHCR mandate, international protection and on the rights and obligations of refugees. They were also trained on how to keep security in refugee camps and transit centers and briefed on UNHCR's code of conduct.
- In the context of family reunification, 18 families of 27 individuals were transferred from eastern refugee camps to the Northern camps. Likewise, six households of seven individuals left northern camps to eastern camps. Further, a total of 60 Best interest assessments (BIA) were completed and 16 Best interest determinations (BID) were completed. There were 16 cases in need of trans border family tracing which were submitted to ICRC.
- There was lack of means to conduct rapid assessments for all registered children in the camp to avoid cases of children without Best interest Assessment (BIA). A rapid assessment would facilitate the implementation of all stages of individual case management in child protection, which is not yet systematic due a limited number of child protection staff;
- Following the establishment of the fifth refugee camp in Nyankanda, there is a need to quickly fill the staffing gap to adequately undertake protection and assistance activities;

EDUCATION
- Some 17,501 refugee pupils, including 8,427 girls are enrolled in five secondary schools in camps. Follow-up and coaching were organized for 765 urban refugee pupils in 11 pilot schools and 320 urban refugee pupils are following catchup classes in Kirundi. Identified 340 refugee pupils in urban communities with pedagogical difficulties are assisted with extra coaching in Kirundi (local language).
- Six sensitization session were organized in all refugee camps on the importance of education and of the fight against sexual harassment.
- The total number of beneficiaries of the DAFI and DAFI/AUF programs reached 77 students since the beginning of 2019. They are all enrolled at Université Lumière de Bujumbura and at Université de Ngozi.
- Classes remain overcrowded (between 70 and 80 students per classroom) and school materials/manuals are lacking in refugee camps. There is need for qualified teachers in refugee camps.
- Dropouts: Students whose files are at an advanced stage of resettlement do not want to continue attending camp schools; early marriage and pregnancy are aloso among the reasons for dropouts.

HEALTH
- Overall low mortality rate at 0.24 / 1000 / month, as well as in children under 5 years old at 0.8 / 1000 / month. There was good immunization coverage in the EPI program which reached 94 per cent for measles.
- A total of 758 households of refugees in urban areas were enrolled in confessional health facilities at Saint Michel (2,502 cases) and Mosucob (1,000 cases). More than 40,000 individuals living in refugee camps were supported by UNHCR with medical care.
- The long process of drug purchase and supply impacts on the health care provision of refugees, as well as lack of efficient response to complex and chronic medical cases and lack of necessary equipment, medical staff and supplies in refugee medical centers.
FOOD SECURITY & NUTRITION

- Food distributions took place in all five camps since 8 April 2019 and cooking briquettes were distributed in refugee camps.
- Refugees with moderate acute malnutrition living in refugee camps, as well as Persons with Specific Needs were assisted.
- There were insufficient cooking biomass in refugee camps, as well as insufficient cash distribution to refugees to buy fresh food to meet daily need of food intake.
- The standard of 2100kcal/pers/day was not respected: food distribution covered only 1900kcal/pers/day.
- Nutrition support/supplementation assistance targets only pregnant women, lactating mothers and the persons living with HIV chronic diseases. The diet of persons with specific needs has yet to be improved.
- Nutritional assistance to refugees with severe acute malnutrition is provided by UNICEF through Government’s health structures outside refugee camps.
- There is a lack of enough financial means to assist malnourished refugees in camps.

SITE PLANNING, SHELTER & NFI s

- The new refugee camp in Nyankanda was inaugurated on 18 April 2019. Biomass briquettes were distributed in all refugee camps, but quantities were not enough for all the households.
- In addition to WASH routine activities, rehabilitation of old latrines and bathrooms in refugee camps and transit centers continued according to available budget. An assessment of the condition of infrastructures in the camps is ongoing.
- There was lack of enough cooking briquettes and lack of enough budget to protect camps from erosion, as well as for additional street lights in refugee camps. Access roads to Kavumu and Bwagiriza camps need repairs. There remains a need for non-food items in Kavumu and Bwagiriza refugee camps.

WASH

- Doctors without borders (MSF) pulverized Kavumu refugee camp in prevention of Malaria. Sensitization session to good hygiene in refugee camps was undertaken.
- Water network and water points were maintained and defective parts replaced. Individual houses and latrines were disinfected and water was chlorinated in all refugee camps.
- Budget constraints do not allow replacing old latrines with drainable ones in Kavumu and Bwagiriza. Water supply is still an issue in the newly constructed Makombe transit center in Rumonge and in Cishemere transit center in Cibitoke.

REPUBLIC OF CONGO

PROTECTION

- Some 8,452 new asylum seekers from the DRC enrolled and registered in the ProGres database. In their majority, those asylum seekers had crossed the borders into RoC in December 2018. Each family received a ration card as initial identification document.
- A total of five persons with specific needs (four women and one man) were assisted in April.

EDUCATION

- The new asylum seekers’ settlement in Bouemba has only 3 classrooms for a total of 380 school-aged children.

HEALTH

- Terre sans Frontières (health partner of UNHCR) conducted regular medical consultation at the CSI, the integrated health center in Betou and the Hospital in Impfondo. Some 817 patients, of which 149 under-five years and 668 beyond-five years were medically treated. Two Congolese refugees from Impfondo were referred to the general Hospital in Impfondo.
- Seven Congolese refugees were screened for HIV, among whom one was declared HIV positive and received assistance. Advice on attitudes to adopt were given to patients by health professionals during their appointments for screening results.
• Some 69 Congolese refugee women went for prenatal consultations by a medical doctor. A total of 22 births were attended by qualified staff and a woman delivered at home. Some 19 family planning and 11 after birth consultations were conducted.

• There is lack of essential drugs at the CSI Betou, as well as of ARV tablets for adults and HIV tests. There are insufficient financial resources to cover the nutritional assistance of persons living with HIV and other patients.

**FOOD SECURITY & NUTRITION**

• Food distribution took place in Bouemba, including 10.5kg of peas, 3kg of beans, 1L oil, and salt per registered person.

• Some 10 pregnant women and 11 breastfeeding women benefited from free nutritional inputs and 23 children from 0 to 59 months went for nutritional screening, as part of the implementation of the supplementation program for children from 0 to 59 months and pregnant and breastfeeding women, malnourished or at risk of malnutrition. In addition, some 44 refugees were sensitized on prevention measures against global acute malnutrition.

**SITE PLANNING, SHELTER & NFIs**

• Construction of temporary individual shelters at the Bouemba site continued. Some 52 shelters were finalized and 30 were under construction.

• More than 70 per cent of the beneficiaries settled in Mpouya area live in eight villages inaccessible by road making it hard to reach out to the DRC asylum seekers in those villages.

• No NFIs provided in April in the Likouala Department. However, hygiene kits and undergarments were distributed by UNHCR in Bouemba.

**PROTECTION**

• A total of 37 cases of 156 individuals were submitted for resettlement and a total of 152 individuals, 59 cases, departed to resettlement countries.

• Humanity and Inclusion partner provided assistive devices (crutches) to three refugees with physical disabilities in Gihembe camp. In addition, community based rehabilitation services were provided to 35 children (18 girls and 17 boys) with disabilities in Gihembe camp and to 78 children with disabilities in Nyabiheke camp (38 females, 40 males).

• A total of 16 refugee females who diagnosed to have anxiety, depression and Post Traumatic Stress Disorder were provided with psychotherapy in Nyabiheke camp.

• There is lack of police presence in Nyabiheke camp and lack of Child Friendly Space facilities in Gihembe and Nyabiheke refugee camps which hinders provision of age appropriate psycho-social support services to children.

**EDUCATION**

• There were 6,276 refugee children enrolled in primary, 3,134 in secondary, and 1,472 in ECD in Kiziba refugee camp; some 2,438 refugee children enrolled in primary, 1,319 in secondary, and 839 in ECD in Gihembe refugee camp and 2,932 in primary, 1,802 in secondary, and 718 in ECD in Nyabiheke refugee camp. In Kigeme refugee camp there were 4,075 refugee children enrolled in primary, 2,340 in secondary, and 1,437 in ECD and some2,495 in primary, 1,260 in secondary, and 820 in ECD in Mugombwa refugee camp.

• There is insufficient number of classrooms for ECD in Kigeme refugee camp and no fence at the GS Gasaka School and ECD site A and GS Gasaka in Kigeme camp.

**HEALTH**

• Some 14,357 persons benefited from outpatient medical consultation and there were 220 referrals to secondary and tertiary level hospitals. A total of 661 people were under HIV care and treatment.

• A total of 62,880 condoms were distributed by community health workers, peer educators, and through home based care provision and anti AIDS clubs for HIV prevention and family planning.

• There were 153 birth deliveries (100 per cent) attended by trained health staff.

• There is still no management capacity for Viral Hepatitis infection and there remains a need for dental chairs in Gihembe and Nyabiheke camps.
FOOD SECURITY & NUTRITION

- The management of severe and moderate malnutrition for children under-five and supplementary feeding program for children aged from six to 23 months, pregnant and lactating mothers, and persons with Tuberculosis and HIV was done for both urban and camp-based Congolese refugees.
- A total of 422 pregnant and lactating women and 400 with chronic disease (TB & HIV) benefited from supplementary feeding and five severely acute malnourished (SAM) and 54 moderately acute malnourished children were admitted for treatment.

SITE PLANNING, SHELTER & NFIs

- A total of 62 shelters were rehabilitated in Nyabiheke, Kigeme and Kiziba refugee camps in order to improve the shelter conditions.
- There is a gap of more than 1,700 family shelters which requires to be constructed in all the five Congolese refugee camps but the lack of land is a major challenge.
- The Congolese refugee camps are very congested with no proper delineation in terms of access roads, fire break points, sanitation corridors and shelters being very close. In addition, due to inadequate drainage channels within the camps towards the host communities, big ravines/gullies have developed.

WASH

- The average of water supplied per person per day was 20.32 litres in Kiziba refugee camp, 20 litres in Gihembe refugee camp, 15 litres in Nyabiheke refugee camp, 11.89 litres in Kigeme refugee camp and 20.32 litres in Mugombwa refugee camp.
- The Church of Jesus Christ of Latter-day Saints (LDS) latrines’ construction in Nyabiheke camp was completed bringing the total number of latrines to 60 blocks of 12 drop holes each and enabling the camp to meet the standard of 20 persons per drop hole.
- The average water supply in Nyabiheke camp remains 15 litres per person per day which is below the minimum standard of 20 litres per person per day due to the fact that generators are used to pump water from underground and the water pump capacity only provides 15 litres per person per day. A total of US$ 500,000 is needed to connect the camp to the district’s public water supply system (WASAC) to ensure regular supply. Further, an average of 11.89 litres of water per person per day of potable water was supplied in Kigeme camp which is below the minimum standard of 20 litres per person per day.
- At least 50 shower blocks needs to be built in Gihembe and Nyabiheke camps. In Kiziba, the use of latrines is 41 users per drop hole, compared to standard of 20 persons per drop hole. An additional number of 442 drop holes and 37 latrines are urgently needed to meet the standard.
- In Kiziba camp, there are 178 users per shower cubicle compared to a standard of 50 persons per shower cubicle. There is need for 250 shower cubicles to cover the gap.

LIVELIHOODS

- Some 655 Congolese refugees as well as 198 Rwandan entrepreneurs from the host communities were trained by Inkomoko in business. The trainings included bookkeeping, cash flow and inventory management, boot camp and business consulting. There were some 44 Congolese refugee entrepreneurs who received business loans from Inkomoko of 28,340,000 RWF to expand their businesses.
- There are limited spaces for individuals to open shops or for livelihoods opportunities and limited land for farming activities, in particular in Kigeme camp, as well as limited budget for start-up capital for Congolese refugees in all camps.

OPERATIONAL CONTEXT & COORDINATION

- As of 30 April, Tanzania was host to 83,126 Congolese refugees and asylum seekers living in Nduta, Mtendeli and Nyarugusu camps.
- The common markets in all three camps remained closed during the reporting period. Advocacy with the Government of Tanzania to lift all restrictions is ongoing.

PROTECTION
• A total of 704 Congolese refugees were resettled to Australia, Canada and the USA in April. A further 633 cases were submitted for resettlement.
• A series of awareness-raising sessions were held in Nyarugusu camp, reaching over 200 Congolese people of concern. Various topics were discussed, including SGBV reporting and referral pathways.
• Women and girls continue to face significant protection risks during firewood collection. In an effort to address these risks, Community Environmental Management and Development Organization (CEMDO) distributed 5,000 insert stoves to Congolese people of concern in Nyarugusu. In addition, UNHCR held several awareness-raising sessions on SGBV and firewood distribution and collection.

EDUCATION
• A total of 330 primary and secondary school teachers from six schools in Nyarugusu camp attended an Instant Network Schools training. The objective was to equip teachers with learner-centered approach skills and improve refugees’ access to quality education through technology.
• The International Rescue Committee (IRC) led a two-day training workshop for 1,200 teachers and incentive workers in Nyarugusu camp on the prevention of sexual abuse and exploitation. IRC distributed 25 French language dictionaries donated by the French Embassy in Tanzania to schools across the three camps.
• A shortage of textbooks in secondary schools remains. More funding is required to address the existing gap.
• A high teacher turnover continues to be a major obstacle in all three camps. More funding is required to increase teachers’ wages so as to help retain qualified teachers and curb the high teacher turnover.

HEALTH
• The crude mortality rate stood at 0.15/1000 population/month and under five mortality rate at 0.7/1000 population/month in April, which are both within the SPHERE minimum standard. Over 20,000 consultations were carried out across various health facilities serving the Congolese population during the reporting period. The leading cause of morbidity during the reporting period was malaria, followed by upper respiratory tract infection, lower respiratory tract infection, urinary tract infection and diarrhoea.
• In collaboration with Tanzania Red Cross Society (TRCS), Medical Teams International (MTI) launched a project called Channel of Hope in Nyarugusu camp. The objective of the project is to provide training to religious leaders on how to promote healthy habits in the refugee community.
• MTI, in collaboration with TRCS and IRC, conducted a five-day capacity building workshop for eight laboratory technicians in Nyarugusu camp on how to improve blood transfusion management, commodity management, transportation, storage and quality assurance at the camp level.
• Access to health services remains a challenge for Congolese people of concern in Nyarugusu camp, with many walking long distances to receive medical attention. More funding is needed to build additional health facilities in the camp.
• More funding is required to rehabilitate existing shelters for people waiting to see a health practitioner in Nyarugusu camp that were destroyed by heavy rains.

FOOD SECURITY & NUTRITION
• Food entitlements were distributed at 100 per cent of the full ration in April with refugees receiving all their cereals, pulses, corn-soya blend, salt and oil entitlements. Supplementary feeding was also delivered at 100 per cent.
• Opportunities for refugees to diversify their diets remains a major challenge across the three camps following the closure of the common markets in February 2019.

SITE PLANNING, SHELTER & NFIs
• A total of 94 refugee housing units (RHUs) were installed for Congolese people with specific needs in April. RHUs are innovative shelter solutions designed through a collaboration between UNHCR, Better Shelter and the IKEA Foundation that provide refugees with more protection and security.
• More funding is required to carry out urgent repairs on old and dilapidated shelters in all three camps.

WASH
• During the reporting period, water supply in Nyarugusu camp stood at 25 litres per person per day, exceeding the SPHERE minimum standard of 15 liters per person per day.
• Construction of a new borehole in Nyarugusu camp is underway. Once complete, this borehole will increase Congolese refugees’ access to safe and clean water.
• More funding is required to rehabilitate water storage tanks in Nyarugusu camp so as to ensure refugees have regular access to water.
LIVELIHOODS

- Over 200 Congolese refugees took part in a kitchen garden project led by GNTZ in Nyarugusu camp. Small scale farming helps refugee families diversify their diet and also provides them with a small source of income.
- Following sustained advocacy by UNHCR, all Congolese people of concern with trading experience will now be able to access financial services through informal savings groups and develop their financial know-how through digital literacy training provided by UNCDF and partners. This programme will help bridge the gap between traditional livelihoods programming and financial inclusion and increase refugees' resilience.
- The closure of the refugee common markets and certain refugee-run businesses continues to affect livelihoods opportunities for Congolese people of concern. Advocacy with the Government of Tanzania to lift all livelihoods restrictions is ongoing.

OPERATIONAL CONTEXT & COORDINATION

- Some 4,561 Congolese asylum seekers arrived in Uganda, mainly through the border-entry points of Bunagana, Lake Albert (Sebagaro & Nsonga), Ishasha/Kihihi, Ntoroko and Nteko.
- Ebola Virus Disease (EVD) screening, surveillance, infection prevention and control activities were ongoing in all six refugees hosting districts in the Southwestern region.

PROTECTION

- A Memorandum of Understanding between Government of Uganda and UNHCR has been signed, establishing a framework for refugee registration and population management in Uganda. The MOU was signed on 04 of April 2019 in Kampala. A new ID card printing module that supports batch printing was successfully piloted in Kampala and will be rolled out in all locations to increase the level of individual documentation. Meanwhile, monthly demographic profiles were developed and published for each of the settlements and Kampala, to allow tracking of key population indicators and registration trends.

HEALTH

- The Health Sector Integrated Refugee Response Plan budgeted at 100 million USD was launched in January 2019. The Ministry of Health conducted dissemination meetings in the Southwest to raise awareness of the plan and key indicators to be applied at District Level.

FOOD SECURITY & NUTRITION

- WFP conducted a quarterly Post-Distribution Monitoring (PDM) in the thirteen refugee settlements, to assess beneficiary accessibility, utilization and satisfaction, with food assistance in the first quarter of 2019. The PDM findings show that 68 percent of the refugee households reported acceptable Food Consumption Scores (FCS) with no significant difference from the previous PDMs. Beneficiaries that received cash were more likely to have acceptable FCS than those that received food. In addition, 60% of refugee households reported that women participated in the decision making on the use of food assistance. Overall, 97 percent of the beneficiaries were satisfied with the new food assistance collection procedures.

SITE PLANNING, SHELTER & NFIs

- In Kyaka II refugee settlement, the Office of the Prime Minister (OPM) demarcated 1,500 plots (each 30m x 30m) throughout April 2019 for newly registered arrivals. A total of 1,152 individuals from 584 households were allocated new plots in Kakoni and Sweswe zones, within the settlement.
- The progress report on household plot surveying and physical planning in Nakivale and Kyangwali refugeesettlements was finalised and published by the Refugee Settlement Land Taskforce (RSLT). Of the planned 10,000 plots, 7,142 plots are ready to receive new arrivals (4,700 in Nakivale & 2,442 in Kyangwali). The corresponding livelihood plots are yet to be demarcated for new arrivals, as well as for those existing settled refugees who would lose their livelihood plots with the demarcation of the new residential plots. Resource mobilisation is required for OPM and Ministry of Land, Housing and Urban Development (MoLHUD), to execute these pending tasks and complete the pilot project.
WASH

- Access to water for populations in West Nile and South West continues to improve as the rainy season progresses, stabilizing shallow ground water and improving functionality of hand-pumps. Four solar hybrid pumping schemes were completed and commissioned. On average 17.3 litres per person per day was supplied to populations.

ENVIRONMENT

- The development of the Water and Environment Refugee Response Plan is further progressing through Regional stakeholder consultative workshops. Workshops in the South West and West Nile, brought together political leaders and technical staff from refugee hosting district local government, humanitarian and development partners, private sector actors, and environmentalists to further shape the plan. The meetings included joint field visits to gain more understanding on water and environment issues. The costed Response Plan will be launched by the Minister for Water and Environment, to guide the overall delivery of water and environment services in refugee settlement and host communities.

PROTECTION

- During the reporting period, nine newly arrived unaccompanied and separated children (UASCs) from the DRC had their Best Interest Determination (BIDs) compiled and paneled in Meheba refugee settlement. Thus, eight children were referred for shelter, non-food items (NFIs) and education support and one was referred for family re-unification.
- In Mantapala Settlement, 163 children, adolescents, women and men benefited from psychosocial counselling, of which 70 were girls, 56 boys, 30 women and seven men.
- A total of 295 phone calls for Congolese refugees in need of restoration of family links were made, with 195 calls successfully reaching relatives in various parts of the DRC.
- UNHCR conducted visits to the three correctional facilities in Lusaka. Hygiene kits were distributed to persons of concern (PoCs) who were identified in the correctional facilities. A total of 47 PoCs received hygiene kits. These included 22 detained Congolese refugees, detained for lacking documents to conduct business in urban areas or having expired Gate Passes from the settlements, which were not renewed.
- Lack of and delayed decisions on reviewed appeals from the Office of the Commissioner for Refugees (COR) impacted on timely protection and further assistance interventions. UNHCR has engaged COR to expedite decisions on appeals.
- Run-away SGBV perpetrators are preventing prosecution to take place thereby causing survivors more trauma and lose confidence in the justice system and others not to come forward to report incidences.

EDUCATION

- Construction of the two schools in Mantapala settlement continued, however, due to limited funding progress slowed. School-age Congolese children continued being enrolled in the existing school system in Meheba and Mantapala settlements.
- Lack of learning and teaching materials, including lack of staffing and insufficient WASH facilities, continued. UNICEF will look into providing adequate WASH facilities, while UNHCR and other partners are looking into ways to source learning and teaching materials.
- In Meheba and Mayukwayukwa settlements, dilapidated classrooms and inadequate and/or delayed provision of textbooks as well as language difficulties for newly arrived refugees.

HEALTH

- Construction of the new and permanent clinic and staff house in Mantapala was completed and await physical inspection and certification by the Provincial Health office engineers before they can be used.
- A total of 28 deliveries were recorded in Mantapala Settlement during the reporting period, four were from the host community and 24 from the refugee community.
- In Mantapala, outreach activities were not adequately conducted because of long distances between the health facility and most households in the settlement. This has also caused most pregnant women to report late to the health facility when in labour.
There is more need for specialized medical examinations such as CT scans, MRI, ECO and ECG scans among urban refugees who are vulnerable and cannot afford to pay while allocated budget to partners can also not accommodate the high medical fees.

There is still a challenge in timely submission of reports from the health facilities in the refugee Settlements.

Transport challenges still exist because of limited or lack of utility vehicles in the settlements.

**FOOD SECURITY & NUTRITION**

Food distribution was conducted by the World Food Programme (WFP) in Mantapala during the month of April.

The WPF-UNHCR Cash-Based-Transfer (CBT) mission undertaken in January 2019 to look at the feasibility of introducing cash-based-intervention in Mantapala from dry rations, completed and submitted its report during the month under review. The report confirms the feasibility of undertaking CBT in Mantapala. The CBT mission further concluded that a livelihood and markets support approach will best serve the Comprehensive Refugee Response Framework (CRRF) objectives.

Limited funding continued to constrain many refugees and host community from receiving support to undertake livelihood activities.

The health facilities continued to screen children under-five for malnutrition in the three refugee settlements and in Lusaka. In Meheba, two of the children were identified to be malnourished out of the 386 children screened for malnutrition and have since been put on supplementary feeding.

There is still no current data on malnutrition rates in the settlements to inform programming because no recent survey has been conducted. In addition, there is lack of food for supplementary feeding program in the three refugee settlements although there are plans to procure by UNHCR.

**SITE PLANNING, SHELTER & NFIs**

Construction of permanent distribution centres in block 4 and 17 in Mantapala Settlement reached the gable level and the erection of trusses will begin soon. Once completed, there will be a total of three permanent distribution centres in the settlement.

In Meheba, the Ministry of Community Development and Social Services (MCDSS) and a refugee community-led Shelter Support Group (SSG) mounted Refugee Housing Units (RHUs) in Blocks B, C and D, which will serve as protection Help Desks and will provide, amongst other things, counselling services closer to where refugees reside. Six RHUs have since been mounted in the settlement. With the erection of the RHUs, new arrivals, who are mainly from the DRC, will be easily reached with regard to the provision of services.

Teachers in both schools do not have permanent shelters. UNHCR has provided Refugee Housing Units to teachers in both schools as resource mobilization for construction of permanent shelters for teachers continues. The Police do not have permanent offices and shelters. They have continued to operate from tents and Refugee Housing Units.

Financial constraints delayed timely construction of the targeted number of buildings in the refugee settlements and in Lusaka.

The Mayukwayukwa settlement, which also receives new arrivals from the DRC has not benefitted from any construction of any RHU. Consideration is being given to transfer enough stocks of RHUs from Lusaka to the settlement.

**WASH**

Hygiene sensitisation continued in the settlements targeting households with breastfeeding mothers to prevent cases of diarrhoea in children below two years and to prevent choler from occurring.

The gap of 2, 077 household latrines which require durable sub-structure and a total of 4, 218 households with no durable toilet superstructures has continued in Mantapala.

**LIVELIHOODS**

Out of a total of 2,168 Cash-Based-Intervention (CBI) beneficiaries for March - April, with the majority of persons with specific needs and new arrivals being from the DRC, some 1,539 received cash through Airtel and others through other agents in Meheba.

A total of 13 individuals, who included Congolese refugees, were weaned from CBI and linked to livelihoods to enhance their welfare.

Non-updating of sim card numbers in ProGres delayed CBI processes as lists were generated without phone numbers which affected timely cash distribution to Congolese refugees. The Registration Unit has assumed the responsibility of updating phone numbers in ProGres which will improve the May-June CBI process.
ZIMBABWE

OPERATIONAL CONTEXT & COORDINATION

- The cyclone Idai affected tens of thousands of people when it struck the eastern coast of Southern Africa during the night of 14–15 March, causing torrential rain and flooding in parts of Zimbabwe, Mozambique and Malawi. In Tongogara refugee camp, there are 12,800 residents, the majority of whom are of Congolese origin. Approximately 1,200 refugee homes were damaged or destroyed during the cyclone due to excessive rain weakening their structure, affecting 6,000 people. UNHCR was already working to build stronger homes in the camp and many families were able to find temporary shelter in these structures. Tents have been provided to a limited number of families with no shelter. UNHCR is prioritizing the construction of stronger and seasonal homes so that the whole refugee population have homes that can withstand heavy rains.

- UNHCR has joined the collective UN systems efforts in response to the emergency. UNHCR has deployed Emergency Response Teams and dispatched relief items. The UN cluster system has been officially activated and UNHCR is leading the protection cluster. UNHCR will support the ongoing efforts to respond to the urgent life-saving needs of the affected people and stands in solidarity with the people of Zimbabwe, who have for decade’s generously hosted refugees and shared their resources with them.

- In Zimbabwe, relief items stored in Chipinge District are being distributed to affected Zimbabweans as well as to refugees and asylum-seekers in Tongogara refugee camp by UNHCR’s NGO partner, GOAL. UNHCR airlifted additional shelter and core relief items to some 5,300 refugees and asylum-seekers in Tongogara refugee camp.

*Zimbabwe. Two women walk past a house destroyed during Cyclone Idai’s landfall at Tongogara Refugee Camp in Chipinge District, southeastern Zimbabwe ©UNHCR/Zinvange Antony.*
Financial Information

UNHCR is very grateful for the financial support provided by donors who have contributed to our activities with unearmarked and broadly earmarked funds as well as for those who have contributed directly to the situation or operations.

**Donors who have contributed to the Interagency RRRP for the DRC situation (Funds received in US$)**

- Germany 33.9 million
- European Union 11.2 million
- Allocation of unearmarked / broadly funding 7.2 million
- United States of America 5.0 million
- Private donors 3.5 million
- Sweden 1.5 million
- CERF 0.9 million
- United Kingdom 0.6 million
- Norway 0.5 million
- Japan 0.5 million
- Finland 0.5 million
- The Netherlands 0.3 million
- France 0.2 million
- Czech Republic 0.2 million

For more information: [http://reporting.unhcr.org](http://reporting.unhcr.org)

Zambia. A Congolese refugee woman at a water point in Mayukwayukwa settlement. ©UNHCR/Kelvin Shimoh
Working in Partnership

Partners in the 2019-2020 Regional Refugee Response Plan (RRRP) for the DRC include:


Links / click for access

UNHCR Operational Portal | UNHCR Brochure on Underfunded Situations in 2018
Refugee Situations | UNHCR and UNDP Joint Programming for the DRC situation
DRC SITUATION

UNHCR Global Focus | 2019-2020 Regional Refugee Response Plan (RRRP) for the DRC situation
Operations Worldwide | 2018 Regional Refugee Response Plan (RRRP) for the DRC situation
DRC SITUATION

REGIONAL COORDINATION

- **Ann Encontre** is the Regional Refugee Coordinator (RRC) for the DRC situation, covering Congolese refugees in Angola, Burundi, Central African Republic, Rwanda, Republic of the Congo, South Sudan, the United Republic of Tanzania, Uganda, Zambia and other countries receiving refugees from the DRC.
- UNHCR leads and coordinates the response to the DRC refugee emergency, ensuring that the response is coherent with developments within the DRC, in close collaboration and consultation with relevant government counterparts, and with the support of UN Country Teams and other humanitarian and developments partners.

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