

# Complex Emergency in the Kasai region, DR Congo

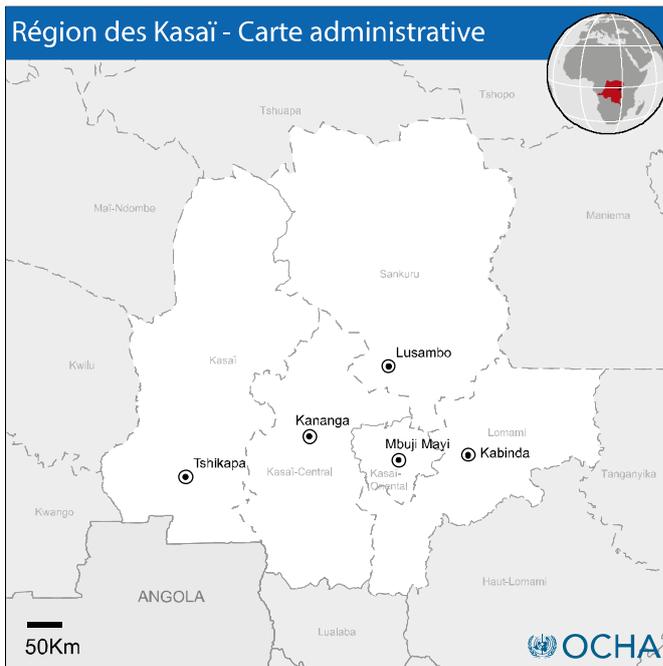
## Situation Report No.8 (22 June 2017)



This report was produced by OCHA DR Congo in collaboration with partners in Kasai, Central Kasai and Eastern Kasai. It covers the period from 1 June (following the SitRep n°7) to 22 June 2017. The Kasai region here refers to the provinces of Kasai, Central Kasai, Eastern Kasai, Lomami and Sankuru.

## Highlights

- Under-Secretary-General for Humanitarian Affairs and Emergency Relief Coordinator Stephen O'Brien said the situation in the Kasai is a maximum emergency for OCHA (*Corporate Emergency*).
- OCHA's Director of Operations, Mr. John Ging, visited Kananga on 9 June, where he met affected communities, authorities and humanitarian actors.
- An "Emergency" envelope of the DRC Humanitarian Fund for an amount of two million US dollars was approved on 22 June by the Humanitarian Coordinator for assistance in protection and education.
- 55,940 newly displaced persons have been registered in the town of Tshikapa (Kasai province) since the last report.
- Some 500 girls and boys used as combatants or "human shield" by militias and 600 cases of gender-based violence (GBV), reported since August 2016.



Source: OCHA DRC  
The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations.



Source : See endnote on page 7.<sup>1</sup>

1 In the volatile context of the complex emergencies in the Kasai Region, population movements are currently dynamic and complex (sometimes involving pendular, preventive or multiple displacements). This complicates the distinction between internally displaced people and returnees in the provinces of Central Kasai, Kasai and Lomami.

2 The number of returnees only applies to the provinces of Eastern Kasai and Lomami, where the reported calm in some areas has allowed internally displaced people to return to their areas of origin.

3 This number of members of the host communities / families refers exclusively to the areas that have undergone a needs assessment.

4 These people receive emergency assistance in one or more sectors for at least the next two months. The number of people 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.

5 Source: UNHCR, 12 May 2017

6 Source: Monitoring reports of January, February and March 2017 from the NGO AJID

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

## Situation overview

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**Population displacement caused by conflict continues, with 55,940 new internally displaced persons reported since the last situation report (Sitrep No. 7).** These persons were registered by the permanent committees in the five municipalities of Tshikapa (Kasai Province). In addition, there are other alerts concerning displacements (notably in Kwilu Province) or return movements (in Kananga), but monitoring of this information is ongoing. Meanwhile, the number of Congolese refugees who have fled the Kasai region to seek refuge in Angola is now 30,000<sup>7</sup>, according to the United Nations High Commissioner for Refugees (UNHCR) - an increase of 6,500 in less than a month.

**Civilian populations are daily subjected to severe violence perpetrated not only by alleged militiamen Kamuina Nsapu but also by members of ethnic militias.** Four serious incidents of protection were allegedly perpetrated by an ethnic militia in Kasai Province from 2 to 10 June 2017: the alleged massacre of the population of Kamanyenga; the looting of medicines and equipment from the Mulunda Tshonza reference health center (45 km from Tshikapa); the decapitation of Lukombo grouping's Chief (85 km from Tshikapa); and the rape of five women on the Tshikapa-Kananga axis. In addition, on 10 June, 12 people were reportedly beheaded by alleged militiamen Kamuina Nsapu in Kalala Diboko (Luiza territory) in the Central Kasai Province. According to local sources, the militia also allegedly attacked three young employees of the Independent National Electoral Commission (CENI) - currently missing - in the territory of Tshilenge (Eastern Kasai).

**The protection situation stands alarming, with 500 girls and boys being used as combatants or human shields by militias. In addition, 600 cases of gender-based violence - mainly rape - have been reported since the beginning of the crisis in August 2016,** according to the results of a GBV sub-cluster assessment mission in Kasai and Eastern Kasai provinces (26 May to 2 June). From January to May 2017, UNICEF and partners resulted in the release of 474 children associated with the militia and detained in Kananga prison. Children are among the main victims of violence, at risk of injury or death in combat. 150,000 children of primary school age are denied access to education in Central Kasai Province, following the destruction of 639 schools by attacks, according to UNICEF.

**Despite a security lull in several areas thanks to the deployment of the Armed Forces of the DRC (FARDC), which has helped to contain the conflict, several violence spots still persist and limit humanitarian access.** In Central Kasai Province, the situation is calm in Kananga but volatile in the territories of Demba, Dimbelenge and Dibaya. In the Kasai Province, unstable areas include: the Kamonia axis, the Angolan border, and the Kabambaye-Katoka axis (north of Tshikapa). Finally, in the Province of Eastern Kasai, insecurity persists in the territories of Kamiji, as well as the southern territories of Luilu and Miabi. Since 19 June (to 24 June), the Special Adviser to the Secretary-General of the United Nations for the Prevention of Genocide, Mr. Adama Dieng, is visiting the DRC; He will travel to Tshikapa and Kananga.

## Financing

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Two months after the launch of the Flash Appeal, the \$ 64.5 million required for the complex emergency response in the Kasai region remains poorly funded. On 22 June, the Humanitarian Coordinator in the DRC approved the allocation of an "Emergency" envelope of the DRC Humanitarian Fund for the amount of two million US dollars to provide assistance in the education and child protection sectors. The call for projects will be announced in the coming days. As a reminder, three million dollars were allocated in May for protection, logistics and health activities.

The NGO Save the Children Canada funded a gender-based protection/sexual assault project targeting 9,500 beneficiaries for six months (US \$ 171,000); the NGO has also received US \$ 230,000 funded by Sweden for its activities. Norwegian Refugee Council (NRC) also received \$ 575,000 from Sweden for emergency education activities. Funding of \$ 4.5 million from the Central Emergency Response Fund (CERF) was allocated at the beginning of the crisis to cover initial needs.

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<sup>7</sup> Source: UNHCR, 12 June 2017. See \$ 65 million appeal for assistance to Congolese refugees in Angola <http://www.unhcr.org/fr/news/press/2017/6/593fd238a/appel-fonds-65-millions-dollars-laide-refugies-congolais-angola.html>

## Humanitarian response

Humanitarian actors continue to conduct on-site assessment missions to extend the response in areas where access is gradually improving. A delegation led by the World Food Program (WFP) and Food and Agriculture Organization (FAO) emergency directors was on mission to Tshikapa and Kananga on 20 and 21 June to assess the situation. Several actors have started activities on the ground: Oxfam and Save the People International (Kasai Province), NRC (Central Kasai) and Solidarités International and Caritas (Lomami Province). Concerning the response to the 30,000 Congolese from the Kasai who sought refuge in Angola, UNHCR has issued a call for US \$ 6.5 million to help them.

Humanitarian access remains limited in several areas due to violence, which slows down the implementation of some projects financed by the CERF. OCHA continues to sensitize humanitarian actors regarding compliance with civil-military coordination guidelines in the DRC, including the use of escorts as a last resort. In collaboration with OCHA, the International NGO World Vision has launched a process to update scenarios on the evolving context using the Good Enough Country Analysis for Rapid Response (GECARR) approach to facilitate decision-making.



### Water, hygiene and sanitation (WASH)

- In Kasai Province, CARITAS Luebo implements a project to equip 48 water sources in 48 villages of Mweka and Luebo health zones. Nine community relays started a three-day training on the promotion of hygiene in Kalonda Ouest health zone which had to be suspended due to clashes on the third day. Action Against Hunger (UNICEF partner) conducted six awareness-raising sessions in favor of 532 people in Kasala and Kabeya Lumbu health areas.
- In Eastern Kasai Province, the NGO APEDE (UNICEF partner) distributes a WASH package to 2,255 people in Kabeya Kamuanga, Tshilundu and Miabi territories.

**283,732**

People targeted by WASH assistance



### Education

- Since March, the education component of a CERF-funded project is being put into place in the three provinces of Kasai, Central Kasai and Eastern Kasai. 3,500 children who have to sit primary school final examinations (TENAFEP) will attend remedial classes. The project supposed to end this month exceeded the set objectives: 1,610 school children attended these classes (including 782 girls) compared to the 1,500 initially planned in Eastern Kasai Province; and 2,000 school children attended these classes (including 691 girls) compared to the 1,500 initially planned in Kasai and Central Kasai provinces. These children were able to take their examination -whose costs were covered- and received material and school uniforms. In the three provinces, 46 teachers (including 2 women) of the 30 envisaged attended the trainings. These activities are aimed at facilitating access to inclusive and relevant quality education in a safe and protective learning environment for all children aged 6 to 17 and indigenous people affected by these displacement waves. The project is jointly implemented with the Ministry of Primary, Secondary and Vocational Education (EPSP) in Kasai and Central Kasai provinces and with a national NGO in Eastern Kasai Province.

**41,964**

Children targeted by emergency education



### Nutrition

- In Eastern Kasai Province, 1,858 children receive treatment during 5 months in Tshilundu (four health areas) and Miabi (three health areas) health zone as part of CERF-funded projects. However, 11 other health areas located in Tshilundu health zone are not covered while they record severe acute malnutrition rates superior to the emergency threshold. The situation in Miabi health zone is unknown due to lack of assessment in the area.
- In Kasai Province, the NGO Action Against Hunger implements a UNICEF project funded by CERF that aims at treating 1,738 severely malnourished children in four nutritional therapeutic ambulatory units (UNTA) and equip

**4,513**

Severely malnourished children targeted by nutritional assistance

15 water sources and 6 latrines in 6 of the 11 targeted health structures. This project is initially planned to last five months. Due to limited access to Kalonda Ouest and Kamwasha health zones, the project was relocated to Kanzala, Tshikapa and Kalonda Ouest that are more easily accessible.

- In Central Kasai Province (Luiza Territory), the NGO COOPI implements activities focused on nutritional rehabilitation and access to water, hygiene and sanitation of affected communities until the end of August 2017.

## Protection

- In Kasai Province (Tshikapa Territory), CARITAS, with the support of UNICEF, implements a transitional care project for 98 unaccompanied children -including 39 girls- in host families. The search for their parents is ongoing with a view to reunite them. 39 community volunteers (6 women) were trained on minimum standards for child protection in emergency situation. Six playgrounds were set up where 3,590 children (including 1,548 girls) participated in sporting, educational and recreational activities. In addition, 229 new unaccompanied children were identified (79 girls and 70 per cent orphans).
- In Central Kasai Province (Kananga Territory), through the National Catholic Child Bureau (BNCE), UNICEF provides psychosocial support to 42 children (including 2 girls) in the center of Kananga and reunited 12 children with their families. In Dibaya Territory, 80 children were reunited with their families and 240 children were identified. Thirty injured children were identified, six of whom were referred. Thirty children were also sent to the BNCE in Kananga for guidance and rehabilitation.
- In Eastern Kasai Province (Kabeya Kamuanga and Miabi territories), 412 new unaccompanied children were identified, 12 children were reunited with their families and 113 other injured children were transferred to medical structures where they received treatment. Eight playgrounds have been set up and 85 unaccompanied children have been identified (including 30 girls). CAAP-T has trained 40 community volunteers in the reunification process and psychosocial accompaniment of unaccompanied children.
- According to the Child Protection Working Group (GTPE), 55 organizations contributed to child protection activities in Kasai, Central Kasai, Eastern Kasai, Lomami and Sankuru provinces in May 2017 (compared with 27 in February 2017). These partners, more than 70% of whom are national NGOs, intervene mainly in Kananga and to a lesser extent in Tshikapa and Mbuji-Mayi. A map of the operational presence of child protection actors was [published at the end of May](#).
- Medical and legal assistance for survivors of violence is underway with the support of the Global Fund and UNICEF. However, the response in the field of psychosocial support needs to be strengthened.

### 408,047

People targeted by protection assistance

## Health

- The NGO ADRA is implementing a "Project of access to primary health care and secondary referencing for the populations and families affected by the conflicts in Kasai, Central Kasai and Eastern Kasai". This project of the World Health Organization (WHO) is funded by the CERF. Planned and/or ongoing activities include training of community relays and care providers, distribution of essential medicines and medical equipment, free treatment of patients in 58 health facilities, mobile clinics and incentives for medical staff. The project, which will last 5 months, targets 112,255 beneficiaries (IDPs and host communities). The selected health zones are: Dibaya, Kalonda, Kamwasha in Kasai Province; Katende, Mutoto, Mweshi and Tshikula in Central Kasai; and Kabeya Kamuanga, Miabi, and Tshilundu in Eastern Kasai.
- CARITAS Kananga, CARITAS Luebo and the National Catholic Child Bureau (BNCE) are implementing a transitional medical project for the care of 60 unaccompanied children and 35 injured children in Kasai Province. Six listening spaces are set up for psycho-social accompaniment and awareness-raising sessions on the risks to involve children in armed forces and groups.

### 371,971

People targeted by health assistance



## Food security

- In Kasai Province, 5,000 displaced households are assisted by the NGOs AMOR, CADEFA and COPROMOR as part of an FAO project funded by CERF to support the production of vegetable. Spaces are already developed and NGOs are waiting for assistance to be provided. The project is expected to last two months.

**330,354**

People targeted by food security assistance



## Emergency shelter / Essential Household Items (EHI)

- Activities are ongoing.

**382,875**

People targeted by EHI assistance



## Logistics

- In support of the humanitarian response, the cluster is setting up the logistics platform in Kasai Province. In this context, four trucks loaded with three mobile storage units and 15,000 liters of diesel arrived in Kananga on 9 June from Lubumbashi. The service will be provided by WFP (Kananga, Central Kasai Province) and Handicap International (Tshikapa, Kasai Province). This platform is funded by the DRC Humanitarian Fund for an initial period of three months.
- In the Central Kasai Province, in coordination with OCHA, the Logistics Working Group, the Provincial Health Delegation (DPS) and the Central Drug Purchasing and Distribution Center (CADIMEK) facilitate the transportation of generic essential medicines from Kananga to 26 health zones of the province, 22 of which have already been supplied.



## Multisectoral cash assistance

- In Eastern Kasai, 8,469 households out of 8,505 (99.6%) received cash assistance in Kabeya Kamuanga health zone (Ciaciacia, Ciondo, Dibula, Dikundi, Lake Mukamba and Matadi). This activity is being implemented by the NGOs Catholic Relief Services (CRS) and Caritas under the UNICEF-funded ARCC 3 project (Alternative Responses to Communities in Crisis).

## General coordination

On 9 June, the United Nations Under-Secretary-General for Humanitarian Affairs and Emergency Relief Coordinator Mr. Stephen O'Brien said the situation in the Kasai region is a top emergency for OCHA (Corporate Emergency) for the next six months. Until December 2017, all requests for support to OCHA operations in the field will be addressed as a priority and additional resources will be deployed to strengthen coordination of the response.

From 8 to 9 June, during his mission in DRC, OCHA's Director of Operations, Mr. John Ging, traveled to Kananga to meet with victims of violence and humanitarian actors. On the eve of his arrival, the Humanitarian Coordinator, Mr. Mamadou Diallo, completed a 48-hour evaluation mission to Kananga and Tshikapa.

On 2 June, during a meeting of the Task Force held in Kinshasa, participants agreed, inter alia, to: continue the assessments in order to have better visibility on needs; strengthen collaboration with local actors to facilitate access and streamline identification of IDPs. In the field, OCHA maintains a continuous presence in Kasai (Tshikapa), Central Kasai (Kananga) and Eastern Kasai (Mbuji-Mayi) provinces through a rotation of its staff. A [map of the operational presence](#) in the Kasai region ("who does what?") was published by OCHA at the end of May.

**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 the 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 deterioration of the conflict has resulted in increasingly violent and indiscriminate violent acts against civilians 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 triggered by the recent redefinition of provincial boundaries, the crumbling of traditional mediation and customary power structures, as well as the local expression of national-level political rivalries. Peaceful coexistence is threatened by communities perceived as supporting the militia and those accused of supporting the government. This situation leads to multiple internal displacements in the various above-mentioned provinces, 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) improve access to vulnerable communities by overcoming physical and security constraints; (iv) agree 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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Sources of updated figures: all data for all provinces are based on information provided by the Provincial Health Directorate (DPS), unverified alerts from international, national or local civil society organizations, or evaluations (where possible, as is the case in some areas of Kasai and Eastern Kasai provinces). The number of returnees, host families and host communities are still difficult to estimate due to reduced humanitarian access and ongoing population displacements caused by militia activities and FARDC operations. In the immediate future, total reliability is impossible due to the volatility of the situation and of the population movements.