UNICEF Humanitarian Action 2010

DEVELOPMENT REPUBLIC OF THE CONGO

SITUATION UPDATE

Armed conflict, violence against civilians, forced recruitment of children into armed forces and major population movement continue to affect large and new areas of eastern Democratic Republic of the Congo (DRC). According to estimates of the Office on the Coordination of Humanitarian Affairs, there are almost 1.9 million displaced people in eastern DRC, of which at least 50 per cent are children.

Children and women are particularly affected by the consequences of conflict and upheaval from homes, including separation from families and communities, limited access to basic services including water, sanitary facilities, health care, and schools, increased exposure to disease and malnutrition, and in some cases violence, abuse, and exploitation. Haut and Bas Uele districts in Orientale province continue to suffer from sporadic and violent attacks by the Ugandan Lord’s Resistance Army (LRA) rebel group, resulting in killings and civilian abductions. In North and South Kivu, military operations and reprisal attacks by the pursued armed groups have put children and women in the way of harm, including murder, rape and forced recruitment. In north-western Equateur province, unanticipated regional clashes escalated in early 2010 resulting in 134,000 refugees fleeing to neighbouring Republic of Congo (114,700) and Central African Republic (20,000) and the internal displacement in DRC of some 100,000 persons.

On 28 May, the UN Security Council prolonged the mandate of the “United Nations Organization Mission in DRC” (MONUC) until 30 June 2010. From 1 July onwards, the mission will be called “United Nations Organization Mission for the Stabilization of the DRC” or MONUSCO and its mandate will be valid until 30 June 2011.

KEY RESULTS FOR CHILDREN

Rapid Response for Movements of Population (RRMP) and Non-Food Items (NFI)/Shelter: The RRMP program provides the single largest humanitarian response mechanism in the eastern DRC. From January to May 2010, RRMP partners conducted 25 rapid multi-sectoral needs and vulnerability assessments and provided family relief kits of essential household and personal items to over 42,000 emergency-affected families (26 per cent of the revised target of 161,200 families). More than 170,000 persons were provided with a minimum package of water, hygiene and sanitation, and some 20,000 children (30 per cent of the target) benefited from better access to primary education through the distribution of school materials and the rehabilitation of classrooms.

UNICEF continues to play a critical role as Cluster Lead and provider of last resort for NFI/Shelter Cluster throughout the DRC. Apart from RRMP, another 11,109 households that were affected by such diverse emergencies as regional conflicts in Equateur, Kasai Oriental and northern Katanga, and expulsion from Angola to Kasaï Occidental received NFIs. With a total of 53,109 families assisted, UNICEF is at 30 per cent of its target of 177,200 families. Through its role as Cluster lead, UNICEF is able to leverage strategic initiatives such as the core gender commitments for women and NFI including promotion of inclusion of female hygiene kits in NFI interventions, and in training and accompanying partners in the use of cash-based vouchers as an alternative to in-kind distributions of pre-determined ‘kits’; more than one quarter of the beneficiaries used cash-based vouchers to purchase the NFI most appropriate to their needs at NFI ‘fairs.’

Health: In collaboration with partners from the Health Cluster, UNICEF has supported improved health care and mobilized vaccination campaigns in emergency-affected areas in North Kivu, South Kivu and Orientale provinces which have reached an estimated total of 400,000 persons— including displaced and vulnerable host populations. Of those people assisted, 85,000 were children under five years of age and almost 43,000 were pregnant women (80 per cent of the target). Emergency measles vaccinations in these conflict-affected areas reached 142,341 children aged between 6

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1 UNFPA preliminary and non-confirmed figures of new sexual violence cases during January – June 2010: 2,462 in North Kivu and 1,353 in South Kivu.
2 More than 270 documented cases of children released from armed forces and groups during past four months.
3 UNICEF estimate since beginning of the year based on analysis of different field reports; several thousands have returned home; other groups have been newly identified.
4 A fusion of UNICEF’s two flagship relief programs - RRM (Rapid Response Mechanism) and PEAR (Program of Expanded Assistance for Returns), the RRMP initiative is implemented in partnership with international relief NGO’s, targeting assistance to the most vulnerable disaster and conflict-affected populations, including displaced, returnees, host families, and families affected by natural disasters.
5 Note that the original HAR 2010 appeal distinguished between separate RRM and PEAR programmes for a total of 1,400,000 beneficiaries. With the fusion of these two programmes into RRMP the total beneficiary numbers for NFI assistance was revised down to 161,200 families or approximately 806,000 people. For NFI assistance outside of RRMP, the target is 16,000 families or 80,000 people.
months and 14 years (84 per cent of the target). Support to survivors of gender-based violence has increased through the supply of post-exposure prophylactic HIV kits to 30 health centres (100 per cent of HAR target) in conflict-affected communities, as well as through training of health care workers in the clinical management of rape and sexual violence cases.

**Nutrition:** Ten nutrition surveys and nine rapid assessments were conducted in 15 affected health areas (76 per cent of the target). In seven health zones identified with a rate of global acute malnutrition between five and ten per cent, a total of 39,650 children with severe acute malnutrition have been treated in around 497 health structures (13 per cent of the targeted children). Amongst these structures, 400 have consistently received support in essential drugs, equipment, therapeutic milk, and anthropometric equipment.

**Water, Sanitation and Hygiene:** UNICEF and its partners provided emergency WASH assistance to an estimated 450,000 persons. In addition to those assisted through RRMP (170,000), UNICEF and partners ensured access to safe drinking water and sanitation facilities to 34,000 displaced persons. Another 130,000 persons in northern Katanga have been provided with safe drinking water to prevent cholera outbreak. Another 50,000 flooding affected people in Katanga and the Oriental Province were assisted with soaps and water purification supplies, to prevent diarrhoea outbreaks. Beyond UNICEF and partners work, more than 2.1 million affected persons have been assisted through the interventions of WASH Cluster members. As WASH Cluster lead, UNICEF also provided emergency equipment to members in Fizi territory to assist around 50,000 newly displaced persons in endemic areas at risk of a cholera outbreak.

**Education:** Through May 2010, UNICEF’s education section and partners facilitated access to basic education by providing 168,655 conflict-affected girls and boys (130 per cent of the target) and 680 teachers with essential school supplies. Children in need of psychosocial support were assisted by teachers who have been trained in peace education and community reconciliation. Particular attention was paid to addressing notions of conflict resolution and management as well as to promoting ‘peace clubs’ and peer education workshops on peace issues.

**Child Protection:** UNICEF and its partners have identified and provided access to essential medical, psychosocial care and reintegration assistance to approximately 4,204 survivors of sexual violence in eastern DRC. To contribute to prevention efforts, over 18,000 girls and boys, men and women, participated in outreach activities to raise awareness about the consequences of sexual violence and to engage men and boys as allies in the fight against sexual violence. UNICEF and its partners have assisted 1,762 children who have been separated from armed forces and groups, including 39 girls and 1,723 boys. Of these, more than 466 children have been reunified with their families. To prevent the risk of injury or death from mines and other unexploded ordinance (UXO), UNICEF partners have set up six local committees in South Kivu; 3,540 people have been reached through awareness raising campaigns on the risks of mines and UXO’s. In Equateur province alone, local protection partners trained by UNICEF have reunified over 270 children and placed an additional 231 with foster families pending their family reunification. To support reporting on SC resolution 1612, UNICEF organized 10 trainings on the monitoring and reporting mechanism on grave violations of child rights in several locations of Eastern DRC for child protection, SGBV and education actors as well as for UNHCR partners implementing protection monitoring. Two of the trainings were organized in LRA-affected Haut-Uele, for the first time.

**KEY CHALLENGES**

Mobilizing and implementing humanitarian activities in areas inaccessible to UNICEF and partners due to the ongoing conflicts and the subsequent insecurity or non-existent infrastructure remains a critical challenge to emergency programming in DRC. According to OCHA reports, from January to May, there have been 93 security incidents involving humanitarian actors—mostly in the Kivus; a 45 per cent increase over the same period last year. While fortunately no UNICEF staff or partners have been directly affected, such considerations can severely limit movements; the security situation in certain zones of South Kivu and Equateur during this reporting period forced the temporary suspension of the work of child protection partners and their access to children affected by conflict.

Funding gaps are also limiting response capacity compared to the scale of need, particularly to cover costs for purchases of essential supplies such as ready-to-use therapeutic food, medical and obstetrical kits, WASH and Emergency Education supplies and Non-Food Items. Funding gaps for certain child protection actors have led to the temporary interruption of services for activities supporting children formerly associated with armed forces and groups and has delayed social reintegration programs for these children. In a chronic emergency context like the DRC, mobilizing support to adequately meet ever-increasing cluster coordination and leadership responsibilities has also been a challenge. Although heightened awareness within UNICEF, OCHA, and donors on the need to strengthen cluster leadership has been welcome, significant fund mobilization and prioritization of cluster work is necessary to ensure UNICEF’s continued leadership in DRC’s humanitarian community.
INTER-AGENCY COLLABORATION

UNICEF is leading four out of the nine clusters activated in the DRC, namely Nutrition, WASH, Education, and NFI/Emergency Shelter Clusters. UNICEF is also leading the Child Protection Working Group and acts as protection Cluster focal point in some provinces where UNHCR (Cluster lead) is not represented. UNICEF participates actively in the Health, Early Recovery and Logistics Clusters. For all humanitarian work, UNICEF works in close collaboration with all other UN agencies, NGOs, and Government actors in the framework of the Humanitarian Action Plan covering not only humanitarian emergencies but also post-conflict and transition. UNICEF’s multi-sectoral recovery programme, PEAR Plus, is a major part of the fourth component of the Integrated Mission’s International Stabilization and Security Support Strategy (ISSSS) for return and reintegration of IDPs in eastern DRC. As WASH Cluster lead, UNICEF (in collaboration with WHO) is also supporting the joint coordination (Government-NGO) of a transitional pilot project in Katanga dedicated to enhancing sustainable solutions to prevent humanitarian crisis (cholera outbreaks in this case). In mid-June, the implementation strategy of the comprehensive multi-agency strategy for Sexual and Gender-Based Violence in the DRC was launched. As lead for the multi-sectoral assistance component, UNICEF supports government and civil society actors for a holistic package of assistance to survivors while working with UNFPA, UNHCR, MONUC SSR (Security Sector Reform) and the UN Joint Human Rights Office to ensure close coordination with the prevention and justice components.

FUNDING REQUIREMENTS

The revised needs for humanitarian funding in the DRC for 2010 are US$122.5 million, down from US$133.5 million in the originally issued HAR. Even with this revised appeal amount and using the broadest calculations to include regular UNICEF resources not raised as part of this appeal, UNICEF’s revised HAR remains funded at 27 per cent, with US$21.5 million raised for humanitarian activities in 2010 and an additional US$11.7 million of carry-over and other resources used for emergency and post-conflict recovery. These critical gaps are felt throughout the sectors, and diminish UNICEF DRC’s capacity to deliver humanitarian response at the levels that are needed. Compared to 2009’s mid-term review, humanitarian funding is down: US$26.5 received by this time last year, compared to US$21.5 this year.

The funding requirements for RRMP have been reduced in view of the economies of scale gained by the combined program and a sharper response focus, the RRMP programme is however funded at only 15 per cent of revised requirements in June of 2010. Without significant additional funding, a drastic reduction of the overall emergency program will be required, compromising UNICEF’s capacity to support partners for essential humanitarian response in DRC. While a relative calm has returned to some areas of the east, new displacement occurs every week and the need to not only maintain but reinforce the RRMP program remains a priority.

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<th>Funds received against the HAR 2010 (US$)</th>
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<td>Sector</td>
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<td>RRMP; NFI cluster coordination and response⁷</td>
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<td>Health</td>
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<td>Nutrition</td>
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<td>Child Protection</td>
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<td><strong>Total</strong></td>
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*The total includes a maximum recovery rate of 7%. The actual recovery rate on contributions will be calculated in accordance with UNICEF Executive Board Decision 2006/7 dated 9 June 2006.

⁷ Please note that this HAR MYR includes non-emergency funds and 2009 carry-over used for humanitarian assistance. The DRC Humanitarian Action Update issued on June 1, 2010 did not include these additional funds.

⁸ For those clusters that UNICEF is leading, the requirements include funding needs for Cluster Coordination and response.

⁹ US $36 million for RRMP; US $3 million for other NFI response and cluster coordination.

*In May 2010, UNICEF DRC received a US$5 million loan from the UNICEF Emergency Programme Fund, enabling RRMP to make critical relief supply procurements and to maintain the operational response for two months. These funds are expected to be reimbursed based on funds raised against the HAR.

For more information on Humanitarian Action Report 2010, please refer to www.unicef.org/har2010
EMERGENCY PROGRAMME PRIORITIES: JULY – DECEMBER 2010

By the end of the year, UNICEF’s Humanitarian priorities based on 100 per cent of funding levels are:

Rapid Response Mechanism for Movements of Population (RRMP) and NFI/ Shelter:
UNICEF’s RRMP and NFI priorities are to provide 177,200 families with access to Non-Food Items and emergency shelter materials (an additional 124,091 families), to facilitate access to a minimum package of water, sanitation and hygiene for 630,000 persons and to support 98,000 pupils, teachers and parents for quality primary education through construction and rehabilitation of 325 emergency classrooms, distribution of education, recreation and didactic kits for 52,000 students and their teachers, and training of teachers and parents.

Health: At least 90 per cent of children in areas with known health insecurity during the year 2010 will be fully vaccinated through the sustainable outreach strategy and organization of accelerated campaigns of vaccination in emergency-affected areas. As part of a ramped support to cold-chain systems in remote and emergency-affected areas, 100 per cent of health sub-zones in these zones will be equipped with solar cold chain equipment. Stocks of essential emergency supplies of drugs, medical and obstetrical equipments, and rehydration therapy in the fight against cholera will be made available in eastern DRC to support 500,000 people in affected areas.

Nutrition: Recent data suggests that the nutrition situation in eastern part of the country is stable with however a limited number of health zones that still exhibit high rates of acute malnutrition (above 10 per cent). In this part of the country, the focus of the Nutrition Cluster will be to ensure that these areas are covered with nutrition interventions (treatment and prevention) reaching at least 20,000 children. In the rest of the country (more affected by malnutrition) UNICEF and a consortium of five international NGOs are working to provide treatment for malnutrition in all areas with more than 15 per cent malnutrition rate. The focus for the rest of the year will be consolidating these interventions by integrating preventive action such as the promotion of essential action in nutrition including exclusive breastfeeding, vitamin A supplementation, de-worming and, and progressively scaling up the intervention to areas with rate of global acute malnutrition between 10 and 15 per cent reaching at least 300,000 children.

Water, Sanitation and Hygiene:
In addition to those assisted through the WASH component of the multi-sectoral RRMP initiative,
• 200,000 persons, including 40,000 children under five years old, will benefit from projects in Katanga, South Kivu, North Kivu and Ituri to prevent cholera outbreaks and support recent IDPs;
• 40,000 persons in Equateur will benefit from emergency WASH response programmes followed by support to recovery process;
• 3,000,000 persons will be supported by the WASH Cluster members throughout the country.

Education: In addition to those assisted through the Education component of the RRMP initiative, 132,000 conflicted-affected children, currently not benefitting from UNICEF support, will have access to formal or non-formal education through the support of 200 community education initiatives and rehabilitation and furnishing of 2,600 early childhood, primary and accelerated catch-up classes, as well as increased coordination and response capacity of members of 16 clusters and sub-clusters through trainings on monitoring, gender, and program development.

Child Protection
• 8,000 girls and women survivors of sexual violence will have access to essential services, including medical care, psychosocial support, and reintegration.
• 2,000 children who have been separated from armed forces and groups will be assisted to reintegrate with their families and communities; an independent evaluation will review the outcomes and impacts of this program.
• The Child Protection Working Group will harmonize standards for community-based child protection committees, defining approaches for emergency and early recovery zones.