

# Democratic Republic of the Congo:

## 2017 End of Year Report

### South Sudan - REGIONAL RRP

December 2017



**88,970**

SOUTH SUDANESE  
REFUGEES IN DRC (DEC  
2017)

**US\$72.0 M**

REQUIRED IN DRC IN  
2017

**9%**

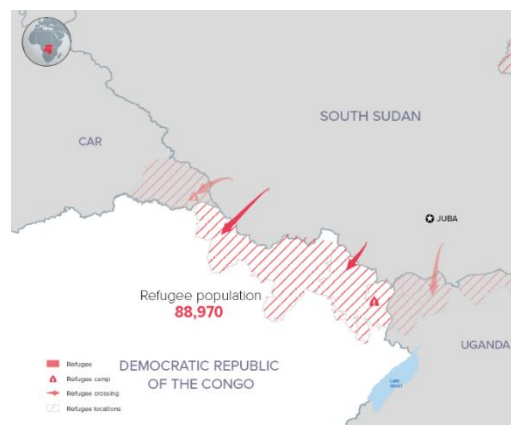
FUNDING RECEIVED  
(DEC 2017)

**4**

RRRP PARTNERS IN  
DRC

#### SITUATION OVERVIEW

The conflict that broke out in South Sudan in 2013 displaced hundreds of thousands of civilians and continues to cause an outflow of refugees into neighbouring countries. Close to 89,000 South Sudanese refugees arrived in the Democratic Republic of the Congo (DRC) in 2017. Some 60 percent live in out-of-camp settlements, mostly with host families along the border. These populations have sought protection and assistance in Haut-Uélé and Ituri provinces located in the north east of the DRC. The fear of further atrocities combined with an extreme level of food insecurity persisting across South Sudan dissuades refugees in the DRC from returning. The response to the refugee situation in the DRC is centred on advancing an “alternative to camp” approach with integrated services for both refugees and host communities, while sustaining protection activities and promoting self-reliance among refugees.



While 32,380 South Sudanese refugees are registered by the National Commission for Refugees (CNR) and UNHCR using biometrics, many South Sudanese asylum seekers residing close to the border are inaccessible due to high insecurity propagated by armed groups and coupled with poor road infrastructure. This creates logistical challenges in running operations, often coupled with a lack of mobile network coverage, which makes the response extremely difficult. Humanitarian access is dependent on the work of the *Mission de l'Organisation des Nations Unies pour la Stabilisation en République Démocratique du Congo* (MONUSCO). The dispersal of refugees along the border between the two countries represents a major protection concern, particularly in the territories of Aru (Ituri) and Dungu (Haut-Uélé). The risk of spill-over attacks and recruitment by armed groups from South Sudan, as well as Sexual and Gender-Based Violence (SGBV) and child recruitment, are high.

Despite the challenge of limited resources throughout the year, refugees continued to receive assistance, including protection and solutions-oriented support, through RRP partners. Protection monitoring was ensured, including at the borders to guarantee access to asylum, and assistance was available upon arrival at four refugee sites (Meri, Biringi, Nambili and Kaka) and one urban area (Dungu). Support was provided to the government on registration in Aru transit centre and Meri refugee site and in Dungu-center. Economic hardship and the nature of the rural and marginalized areas hosting refugees constrained capacity for self-reliance and integration. Agricultural kits and seeds, cash grants and food staples were distributed to households to compensate for scarce resources. In addition, some households were supported with access to alternative, non-agricultural income-generating activities. Child protection, response to SGBV, counselling and follow up actions continued, though incidents remained underreported due to the lack of judicial structures and cultural beliefs. RRP partners coordinated with authorities and provided funds to ensure that refugee children continued to attend school through integration into the national school system. As a result, more children are currently enrolled in primary school.


During the last semester of 2017, UNHCR opened the Kaka refugee site in Dungu (Haut-Uélé) and RRP partners supported half of the refugee population in Dungu-center with basic assistance, including food and non-food items (NFIs) and through the rehabilitation of local health and educational infrastructures (school, health centres, office of the local authorities). Throughout the year, RRP partners continued to provide shelter kits, distribute NFIs, construct WASH facilities and support health centres at the four refugee sites. Low capacity of local partners, deterioration of existing infrastructure and lack of supply negatively impacted the provision of assistance. It especially impacted access to satisfactory health care for refugees and the host communities. No funds were available in 2017 to support youth of secondary school age, which also exposes them to considerable protection risks. Refugees often arrived with very few possessions. Basic household items were urgently needed for more than 17,000 refugees. More funds are needed in general in order to strengthen the response in all areas.

## Protection

**22,000+**  
new South Sudanese refugees in 2017



**34,878**  
South Sudanese refugees issued with **refugee status certifications**



Of the 267 cases of SGBV reported in 2017, **70% of survivors received appropriate support**



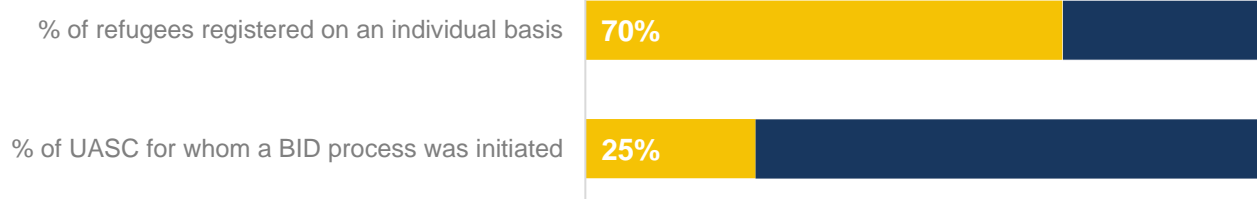
Protection, including registration, documentation, child protection and SGBV prevention and response, are key areas of intervention. In 2017, asylum seekers had access to simplified refugee status determination procedures with prima facie recognition for South Sudanese refugees. RRP partners supported the government in the Refugee Status Determination (RSD) procedure. 34,878 refugee status certifications and 560 « sauf-conduits » were issued to South Sudanese refugees; this document serves as an identity document and proof of lawful presence in the country of asylum, thus protecting them from possible harassment, detention and expulsion. Some 53% of the refugees are women and girls who are particularly exposed to the threat of sexual violence along their journey from South Sudan to the DRC. SGBV cases are not highly reported, however anecdotal evidence indicates that it is a serious issue and threat to the wellbeing of mainly women and girls. During the reporting period some 267 cases of SGBV cases were identified at three sites, including 131 in Meri, 89 in Biringi and 47 in Dungu, out of which only 70% received appropriate support (medical, psychosocial, legal and socio-economic) due to lack of funding. 64% of the refugee population are children below the age of 18. In 2017, the best interest determination (BID) process was initiated for 25% of unaccompanied and separated children (UASC).

### Key Achievements

- 100 percent of persons of concern provided with individual protection documentation.
- 13,838 identity documents issued for persons of concern (PoC).
- 70 percent of the identified SGBV survivors received appropriate support (medical, psychosocial, legal and socio-economic) in the Meri, Biringi and Dungu sites.

### Remaining Gaps

- Need to advocate for further support for the civil status authorities,
- Provision of individual identity documents to South Sudanese refugees, to facilitate their movement and reduce the risk of harassment, detention and expulsion needs to be strengthened.
- Advocacy for issuance of identity documents in different refugee hosting zones outside of refugee sites is also needed.
- Lack of judicial structures.




## Education

**19**  
primary schools received learning materials & supplies to support refugee students



**6,083**  
South Sudanese refugee children are enrolled in primary school



**13**  
new classrooms constructed



This remains a children's emergency with children making up over 64 percent of the refugee population. To date, 6,083 South Sudanese refugee children of primary school age are enrolled in 19 host schools in the provinces of Ituri and

Haut Uele. The capacity of three primary schools was strengthened with the construction of 13 additional classrooms (Biringi: 6, Aba: 6 and Kaka: 1), three executive offices (Biringi: 2, Aba: 1) and eight latrine blocks with 16 doors (Biringi: 6, Aba: 6, Kaka: 4). Five classrooms and one administration office were rehabilitated in Kaka and 19 primary schools were supported with scholastic material to strengthen their capacities to school refugee children. However, some parents remained reluctant to enrol their children into the Congolese school system due to difficulties adapting to the French-speaking program. Lack of funds for school fees, uniforms and scholastic material was another major obstacle for parents enrolling their children. Some 42 percent of school-age children at primary level remain unenrolled due to lack of resources. Additionally, parents often need their children to contribute to the household income, help with household chores and care for siblings, and as such do not send their children to school.

### Key Achievements

- 13 classrooms constructed.
- 19 primary schools supported with supplies.
- 19 host community schools receiving refugee children.

### Remaining Gaps

- 42% of school-age children at primary level remain unenrolled due to lack of resources.
- Need for increased enrolment of children and youth at the early childhood development (ECD), secondary and university level.
- Absence of vocational training program for adolescents.

% of primary school aged refugee children enrolled in primary education

58%




## Food



**925**

**pregnant & lactating mothers** received supplementary food in 2017



**3,908**

refugees were supported at the **supplementary feeding centres** in 2017



**4,326**

refugees were admitted to the **nutritional programme** in 2017



Since the influx of South Sudanese refugees to the DRC, no nutritional survey has been conducted due to lack of funds. Nutritional screenings were however conducted in 2017 to direct refugees towards nutritional support services and to raise awareness in trends of nutritional health. A community management for acute malnutrition (CMAM) programme was adopted and 4,326 people were admitted to the nutritional program during the reporting period. 418 people were suffering from cases of severe acute malnutrition and they were supported, with a recovery rate of 86.4 percent. 3,908 cases of moderate acute malnutrition were supported in the supplementary feeding centres, with a recovery rate of 90 percent and a mortality rate of 0.0 percent. 925 pregnant and lactating women received supplementary food (WFP) and 21 participants (doctors and nurses) took part in a training on CMAM which was held in collaboration with the National Nutrition Programme (PRONANUT) and the Provincial Division of Health.

### Key Achievements

- 4,326 new admissions to community management of acute malnutrition programmes.

### Remaining Gaps

- Absence of nutrition survey data.
- Frequent shortages in RUTF and RUSF due to lack of funds.
- With the frequent movement of families, the community-based approach is not always easy to be implement.



## Health & Nutrition



**80%** of refugees in Meri, Biringi, Nambili & Kaka have **access to primary & secondary health care** (while **only 40%** in the temporary relocation sites do)



**1,999** South Sudanese refugees living with HIV remain **in need of antiretroviral treatment**

**Crude Mortality Rate: 0.44/1,000/month** (within the Emergency Standard)

The influx of South Sudanese refugees impacted access to basic health services in the Doruma, Dungu, Aba, Adi and Biringi health zones, where refugees reside. The existing health facilities at Kaka refugee site, among others, required significant rehabilitation and extension to accommodate both refugees and host communities. Weak capacity of the national health system (deterioration of infrastructure, lack of qualified staff, difficulties in supply, lack of vaccines and drugs) negatively impacted access to satisfactory health care for refugees and the host communities. In 2017, only 40 percent of refugees in the temporary relocation sites had access to national health facilities. The health status of the refugee population along the border is precarious and needs constant attention.

### Key Achievements

- 80% of refugees have access to primary and secondary health care in 3 health zones: Aba (Meri), Biringi (Biringi), Dungu (Nambili and Kaka).
- Crude Mortality Rate (CMR): 0.44/1000/month.
- 4 health facilities were supported to facilitate access to primary health care in Nyalanya (Meri), Biringi (Biringi), Nambili (Doruma), Kaka (Dungu).

### Remaining Gaps

- Health zones hosting refugees received more than 150% of their case load.
- 1,999 people living with HIV/AIDS were identified since 2016 and are in need of antiretroviral treatment.
- Support is needed for comprehensive HIV/AIDS and reproductive health prevention and response.
- Low number of health partners in the zones hosting refugees.

% immunization coverage for measles

85%




## Livelihoods



**1,670** refugee households (16%) & **240** host community households in Biringi, Meri & Dungu received **livelihoods assistance**

**130** refugees trained & equipped in sewing, milling, baking, tailoring & hair dressing



To support the socio-economic integration of refugees and peaceful coexistence with the host population, self-reliance and income-generating activities for both refugee and host communities are critical. Agricultural activities are dominant in the area and opportunities for rearing livestock and trade also exist. The increased pressure on productive resources, food reserves and land due to the increased population require improved support for livelihoods. Throughout 2017, 1,670 refugee households and 240 host community households received materials for agricultural activities (seeds, agricultural tools, technical supervision and training, etc.), especially for the cultivation of rice, beans, peanuts, maize, etc. In addition to support provided for agriculture, 130 refugees were trained and equipped for other trades, including sewing, milling, baking, tailoring and hair dressing. More funds were needed in order to implement income generating activities. An International Labour Organisation (ILO) studies shows that even if the area is extremely poor and economically under developed it is possible to create small markets and income. The soil is rich and fertile, and the area has potential to be a food basket.

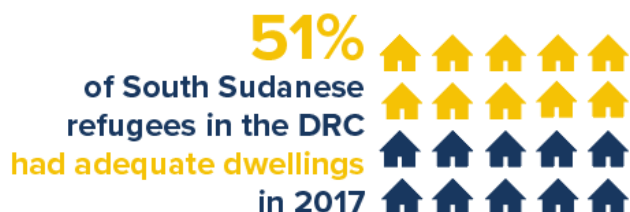
## Key Achievements

- Livelihood assistance provided, despite severe underfunding.
- 13 entrepreneurship associations were established and supported for a total of 130 individuals.

## Remaining Gaps

- Only 1.4 percent of persons of concern (aged 18-59) have their own business or are working as self-employed for more than 12 months.

## Shelter & NFIs



**17,000** South Sudanese refugees remain in urgent need of **basic household items**



The arrival of new refugees put significant stress on the basic infrastructure in the host communities, which were already in poor shape. 1,212 newly arrived refugee families were assisted through the provision of emergency shelter. In addition, RRP partners assisted 904 families in Biringi and Meri sites to upgrade their dwellings into semi-permanent shelters made of locally available construction material. However, shelter semi-permanent could not be provided to the most vulnerable refugees such as single parents, persons with disabilities or the elderly. Accommodating new arrivals was difficult given the lack of collective structures such as communal hangars and individual shelters. In addition, poor road systems resulted in high logistics costs for transport and supply of construction materials.

Refugees often arrived with few basic household items, including sleeping mats and blankets, and clothes. Basic household items are urgently needed for more than 17,000 refugees at the Meri site. Since January 2017, a limited number of sleeping mats, blankets, jerry cans, cooking utensils, buckets, soap and mosquito nets were distributed due to the lack of funds. Only 5,045 households received NFI kits in Aba, Dungu and Biringi. In addition, 560 households comprising of 1,024 refugees registered in Meri received NFIs in July 2017 (mats, blankets, casseroles, dishes, cups, second-hand clothes).

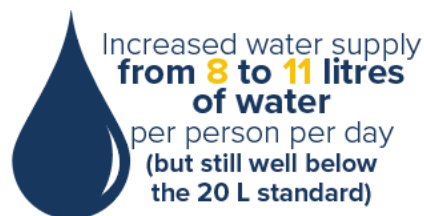
## Key Achievements

- 51 % of households living in adequate dwellings.
- 1,210 emergency shelters provided to refugee households.
- 43% of households received basic household items are met.


## Remaining Gaps

- Basic household items are urgently needed for more than 17,000 refugees at the Meri site.
- 20,000 refugees in Meri and Biringi do not have access to a mosquito nets due to lack of funds.

## WASH



An additional **45 water points** are required for the South Sudanese refugees



The water and sanitation situation was a serious concern with a significant lack of latrines and an insufficient quantity of water available at the designated refugee sites. Open defecation and long distances to WASH facilities exposed refugees to health risks and protection hazards, particularly women and girls. For refugees living outside designated sites, the situation was worse, as no actor supported the provision of safe drinking water or access to adequate sanitation facilities. In 2017, RRP partners supported the construction of 500 family latrines in Biringi, Meri, Kaka and Nambili using a cash-based intervention approach. In addition, 146 communal latrines were constructed including eight latrines at health posts (Nyalanga and Kaka), 48 at schools (Meri and Biringi), and 90 latrines/showers in Meri. Despite efforts made, access to sanitation remained low with only 17% of households having access to latrines. Efforts made



## Democratic Republic of the Congo – South Sudan Regional Refugee Response Plan

in the area of water supply raised the available quantity of water from 8 to 11 litres per refugee / day; however, this remains significantly below the standard of 20 litres.

### Key Achievements

- 500 household sanitary facilities / latrines constructed.
- 11 litres of potable water available per person per day in average.
- 15 boreholes and wells drilled / constructed.

### Remaining Gaps

- Over 9,000 latrines are needed at Biringi, Meri and Kaka sites.
- 45 additional water points are required.
- A gap of 62 washing facilities in several areas.

% of refugee households with a drop-hole latrine



17%

### RRP PARTNERS IN DRC IN 2017

- **FAO - Food and Agriculture Organisation**
- **UNHCR - United Nations High Commissioner for Refugees**
- **UNICEF - United Nations Children's Fund**
- **WFP - World Food Programme**

### FOR MORE INFORMATION

**Olivier Beer**, Deputy Regional Representative (Protection), [beer@unhcr.org](mailto:beer@unhcr.org)  
South Sudan Situation Data Portal: [data.unhcr.org/southsudan](http://data.unhcr.org/southsudan)

# SOUTH SUDAN REGIONAL REFUGEE RESPONSE PLAN

## Democratic Republic of the Congo: 2017 Key Response Figures

1 January - 31 December 2017

### PROTECTION

**22,000+**

new South Sudanese refugees in 2017



**34,878**

South Sudanese refugees issued with **refugee status certifications**



Of the 267 cases of SGBV reported in 2017, **70% of survivors** received appropriate support

### EDUCATION

**19**

primary schools received learning materials & supplies to support refugee students



**6,083**

South Sudanese refugee children are enrolled in primary school



**13**

new classrooms constructed



### FOOD

**925**

pregnant & lactating mothers received supplementary food in 2017



**3,908**

refugees were supported at the **supplementary feeding centres** in 2017



**4,326**

refugees were admitted to the **nutritional programme** in 2017



### HEALTH AND NUTRITION

**H**

**80%** of refugees in Meri, Biringi, Nambili & Kaka have **access to primary & secondary health care** (while **only 40%** in the temporary relocation sites do)



**1,999** South Sudanese refugees living with HIV remain in need of **antiretroviral treatment**

**Crude Mortality Rate: 0.44/1,000/month** (within the Emergency Standard)

### LIVELIHOODS AND ENVIRONMENT



**1,670** refugee households (16%) & **240** host community households in Biringi, Meri & Dungu received **livelihoods assistance**

**130** refugees

trained & equipped in sewing, milling, baking, tailoring & hair dressing



### SHELTER AND NFIs

**51%**

of South Sudanese refugees in the DRC had **adequate dwellings** in 2017



**17,000**

South Sudanese refugees remain in urgent need of **basic household items**



### WATER, SANITATION AND HYGIENE



Increased water supply from **8 to 11 litres** of water per person per day (but still well below the **20 L** standard)

**500**  
**146**

family latrines constructed  
communal latrines constructed



An additional **45** water points are required for the South Sudanese refugees

