

Democratic Republic of the Congo

29 May 2020

Main highlights

- As of 28 May, there were 2,832 confirmed cases of COVID-19 in the DRC, with 69 reported deaths. No case has been detected amongst UNHCR's persons of concern in the DRC so far. There was a resurgence of Ebola with seven new reported cases from 10 to 27 April, of whom four have died. No new cases have been reported since 27 April, and the countdown to declare the epidemic over has restarted. As of 26 May, there were a total of 3,463 cases of Ebola in the DRC.
- As of 17 May, UNHCR had installed 2,122 handwashing stations across DRC (including 61 donated to authorities and 288 to health structures), over 65,000 soaps have been distributed, and 1,599 community infrastructures have been disinfected (dormitories, community structures, etc.).
- In response to heightened risks of sexual and gender-based violence due to COVID-19 related movement restrictions, UNHCR is reinforcing awareness-raising on prevention, amongst Burundian and Central African refugees.



Chris, a South Sudanese refugee living in Bele refugee settlement, uses the handwashing device that he made himself, using recycled materials as part of a UNHCR challenge. © UNHCR/Jean-Jacques Soha

Operational context

Certain neighbourhoods of the DRC's capital Kinshasa remained on lockdown, although eased measures allow inhabitants to circulate to do groceries and for supermarkets to be open. All other public places remained closed, and movements to and from locked-down neighbourhoods are restricted. So far, COVID-19 has reached seven Provinces in the DRC, Haut-Katanga being the latest. On 28 May, the DRC saw its largest increase in number of confirmed cases, with 173 new cases in 24 hours. Meanwhile, displacements and human rights violation continue in eastern DRC's Ituri, North Kivu and South Kivu provinces, while floods have damaged shelters in South Kivu and Ituri provinces. New displacements are putting pressure on overcrowded displacement sites, which are already short in water and sanitation facilities, shelters, and health facilities, making displaced populations extremely vulnerable if contaminated by COVID-19. In areas hosting refugees from the Central

African Republic (CAR) in northern DRC, there are increasing fears of a spread of COVID-19 from nearby Bangui, capital of CAR where 755 cases have been confirmed so far.

UNHCR COVID-19 response

The health and well-being of refugees and internally displaced persons (IDPs) is a priority for UNHCR, and it has adjusted its operations in DRC to address the COVID-19 response and continue supporting its beneficiaries.

UNHCR has contributed to advocate for the inclusion of refugees and IDPs into the DRC's national preparedness and response plan against COVID-19 and is following up with authorities to ensure that they are fully taken into account in the implementation of preparedness, prevention and response activities.

UNHCR continues its protection and assistance activities, while at the same time, mitigating any negative impact of its actions on affected populations, in line with the principle of "do no harm". While continuing critical assistance to refugees and IDPs using remote management methods, UNHCR is reducing the number of beneficiaries being received in its offices and has adjusted its activities to promote social distancing between staff and persons of concern, and between persons of concern. Handwashing and social distancing, as well as masks, are mandatory during any distribution.

UNHCR is installing handwashing stations in refugee camps and IDP settlement across DRC, while distributing soap and disinfecting community infrastructures. UNHCR is contributing to community messaging about COVID-19 and measures to prevent infection. Information material prepared on behalf of the Ministry of Health, and translated in the languages spoken by refugees, is being distributed across the country. Awareness-raising is also being done through awareness sessions and radio broadcasts (in Kasai, Haut-Katanga, Tanganyika, Nord Ubangi, Sud Ubangi, North Kivu, South Kivu, Ituri and Haut Uele provinces), and through established community committees. Awareness-raising sessions are taking place in groups of less than 15 refugees keeping at least two meters distance from each other.

Lastly, UNHCR supports authorities and the national health system by assisting with the construction of isolation sites and medical checkpoints, and by donating medicines and equipment such as masks, handwashing stations and more, in areas hosting refugees and internally displaced persons.



PROTECTION

- As of 17 May, a total of 104,493 refugees, internally displaced persons and host community members had been reached by awareness-raising sessions on COVID-19, carried out by UNHCR and partners. This includes at least 12,332 individuals reached by community-based protection associations, which were created and supported by UNHCR in Ituri, North Kivu and South Kivu provinces. This shows the positive impact of directly involving communities in their own protection activities.
- As the presidential electoral campaign started in Burundi on 27 April, UNHCR and partners have been preparing for a potential new influx of refugees. UNHCR is supporting the government to establish new settlement areas and quarantine centers in Uvira Territory, South Kivu Province, in preparation for a potential influx.
- Despite border closures, Congolese citizens who were expelled from Angola continued to arrive in the Kasai region. UNHCR is supporting the Government by constructing an isolation center in Kamako, Kasai Province, in order for both new arrivals and any suspected case to be quarantined for two weeks.
- There is an increased risk of sexual and gender-based violence (SGBV) due to COVID-19 related movement restrictions. Out of the 15 cases of (SGBV) recorded amongst refugees from the Central African Republic this year, nine took place in March and April alone. In response to heightened risks of SGBV, UNHCR is reinforcing awareness-raising amongst refugees:
 - In South Kivu Province, UNHCR initiated awareness-raising for Burundian refugees on SGBV in the context of COVID-19, focused on domestic violence and reinforcing the referral of SGBV cases. Community-based structures received materials to carry out training in small groups in Lusenda camp, Mulongwe settlement, and host communities. Phone credit was also provided to enable them to refer cases.

- In northern DRC, door-to-door awareness-raising on SGBV and child protection was carried out in the four camps hosting Central African refugees, while children at risk are being identified and their needs assessed.
 - During a distribution of hygiene kits to 330 urban refugees in Kinshasa, UNHCR and partners also distributed documentation on referral mechanisms for SGBV and child protection incidents. The documents will then be disseminated to other refugees in order to spread information on how survivors can be referred.
 - In Tanganyika Province, COVID-19 related movement restrictions are having an impact on the monitoring of protection incidents, while the closure of schools is likely to increase the number of SGBV incidents. Partner INTERSOS briefed its monitoring staff about this risk, while the response to reporting incidents also continued.
- In eastern DRC, UNHCR is conducting focus group discussions to better understand displaced persons' perception of COVID-19. Generally, less than half believed that COVID-19 is real and deadly, or recognized the importance of hygiene measures. Those who received information about the disease were more likely to consider the disease as "terrifying" and deadly. A significant portion of respondents highlighted the need for more information and awareness-raising. In South Kivu Province, 40% of respondents stated that they would inform authorities of any COVID-19 case, while 34% said they would rather self-medicate or use traditional medicine as treatment. Surveys are ongoing and are continuously helping UNHCR to adapt its prevention and awareness-raising activities.
- A photograph showing a focus group discussion in progress. A UNHCR staff member, wearing a white protective suit, a blue cap, and a face mask, is seated on the right side of the frame, facing a group of people. The group consists of several individuals, including women in traditional colorful clothing, seated on wooden chairs in a room with wooden walls and a window with green shutters. The setting appears to be a community center or a meeting room in a camp.
- Focus group discussion with internally displaced persons in Kitchanga, North Kivu Province, to better understand the communities' perception of COVID-19.*
© Caritas/Yves Zozo
- Despite COVID-19 challenges, UNHCR registered 208 new births in Boyabu camp, Sud Ubangi Province, by working with small groups of no more than 15 people at a time. These registrations will facilitate the delivery of birth certificates and prevent statelessness amongst refugees from the Central African Republic.
 - The refugee cards of urban refugees in Kinshasa expired on 4 May, and since it is not possible to organize a registration operation due to COVID-19, UNHCR and the National Commission for Refugees (CNR) have set up an alternative manner to extend the validity of the cards and to distribute them. CNR and UNHCR shared the list of urban refugees with community groups who will inform their peers that they can pick up their renewed cards.

EDUCATION

- In three refugee camps hosting refugees from the Central African Republic in Nord and Sud Ubangi provinces, UNHCR's partner ADSSE has reopened the Instant Network Schools to allow refugee students to prepare for the national exams, and to pursue online training programmes. Instant Network Schools are funded by the Vodafone Foundation and offer primary school refugee pupils the possibility to use tablets to follow their classes digitally. They had been temporarily closed due to COVID-19. Prevention measures have now adopted by organizing lessons in small groups, while respecting social distancing and hygiene measures.
- As of 11 May, 429 urban refugee children from 109 families were following distance learning programs through Radio Okapi in the city of Lubumbashi, Haut Katanga Province. UNHCR contributed to advocate with parents for their children to follow the courses.


SHELTER

- In Ituri and North Kivu provinces, UNHCR and partners have so far built 2,584 out of 3,081 planned emergency shelters for displaced persons and rehabilitated 144 in Mahagi Territory (Ituri Province). Meanwhile, 1,000 displaced households benefitted from shelter assistance allowing them to build their own homes and latrines in South Kivu Province. Shelter constructions help reduce overcrowding in displacement sites and improve social distancing amidst the COVID-19 outbreak.
- From 21 April to 1 May, UNHCR and partners relocated 161 South Sudanese refugees from the overcrowded Meri settlement to the new Bele settlement, while respecting COVID-19 prevention measures. As of 1 May, 691 households (1,715 individuals) have been relocated to Bele settlement.



UNHCR's Representative in the DRC, Mrs. Liz Ahua, hands over two vehicles to the National Institute for Biomedical Research (INRB) in Kinshasa.
 © UNHCR/Simon Lubuku


HEALTH

- At the general hospital of Kananga, Kasai Central Province, UNHCR completed the construction of a reception facility for patients showing symptoms of COVID-19, in support for the national health system's fight against the disease.
- On 8 May, UNHCR donated a 4x4 vehicle and a minibus to the National Institute for Biomedical Research (INRB) in Kinshasa. UNHCR also donated a 4x4 vehicle to local authorities in Libenge, Sud Ubangi Province, which hosts some 35,000 refugees from the Central African Republic. Lastly on May 7, UNHCR supported Tanganyika Province's COVID-19 response committee with 2,000 masks and 2,500 gloves, which will be dispatched in health centers.

■ UNHCR's partner AIRD started rehabilitating the transit centre at Boyabu refugee camp, Sud Ubangi Province, as it has been identified as an isolation site for potential suspected COVID-19 cases. This comes amidst growing fear of a spread of COVID-19 from nearby Bangui.

- In Nord and Sud Ubangi provinces, over 23,000 people in all four camps hosting refugees from the Central African Republic have been medically screened since the start of the COVID-19 pandemic. Two persons were placed in isolation in Mole camps out of precaution. Health workers in all camps are trained to handle any eventual case.
- After supporting the Government in setting up nine medical checkpoints in Kasai Central Province, UNHCR distributed 18 blankets to two of the checkpoints, as well as food to the volunteer medical staff and police officers deployed at all checkpoints. Monitoring showed that 217 travellers have been checked so far, with no suspected COVID-19 identified.


WATER AND SANITATION

- As of 17 May, UNHCR had installed 2,122 handwashing stations across DRC (including 61 donated to authorities and 288 to health structures). In addition, over 65,000 soaps have been distributed, and 1,599 community infrastructures have been disinfected (dormitories, community structures, etc.).
- In the first week of May, UNHCR started COVID-19 prevention activities in 11 displacement sites in the town of Kalemie, Tanganyika Province. 45 handwashing stations were installed in the Kalunga and Kalonde displacement sites, while visibility vests, megaphones and sensitization materials were distributed to displaced persons supporting awareness-raising efforts in all sites.
- UNHCR and partner ADES continued to involve South Sudanese refugees in making their own handwashing devices, called "Tippy Taps", using recycled materials. After trainings in Bele and Meri settlements, a collection of empty plastic bottles was organized on 4 May. So far, 105 Tippy Taps have been installed in the settlements.

- In Bili camp, which hosts refugees from the Central African Republic in Nord Ubangi Province, UNHCR has extended the daily supply of potable water by three hours, to ensure that no large groups gather at water points at the same time. Markings on the ground also encourage social distancing. Bili camp contains 58 water points that serve an estimated 9,500 refugees.
- In Kitchanga, North Kivu Province, community-based structures, which were created and supported by UNHCR, installed handwashing devices in five displacement sites with their own funds. This is a positive example of UNHCR's approach to directly involve communities in assistance activities.

Operational impact and constraints

UNHCR's regular operations across the DRC are affected by confinement and social distancing measures adopted as part of the Government's fight against COVID-19. The main activities that have been affected so far are the following:

- In Mole refugee camp, Sud Ubangi Province, access to quality healthcare for refugees from the Central African Republic has been limited by the absence of the designated doctor at the health center. The doctor has been held back in Kinshasa due to COVID-19 related travel restrictions.
- Due to COVID-19 related measures, six unaccompanied Burundian refugee children in Lubumbashi, Haut Katanga Province, are waiting to be reunified with their families who are in Lusenda refugee camp in South Kivu Province. UNHCR is providing assistance to the children and their host families.
- 105 Rwandan refugees are awaiting their repatriation in transit centres in Goma and Bukavu, North and South Kivu provinces, which has been put on hold amidst the COVID-19 pandemic. UNHCR in the meantime distributed core relief items, including hygienic kits, clothes and soap.

Identified needs and gaps



PROTECTION

- Since the closing of schools due to the COVID-19 outbreak, and with increased economic pressure on families due to COVID-19 related movement restrictions, a growing number of displaced children from displacement sites in Bunia (Ituri Province) are begging on the streets. They are exposed to protection risks, such as sexual violence (especially for girls), kidnapping or economic exploitation. There is a risk that they will not return to school as their families now depend on the income generated by begging.



EDUCATION

- Due to power cuts and shortages in radios sets, many urban refugee children in the city of Lubumbashi are unable to follow distance education programs offered by Radio Okapi. Meanwhile, due to COVID-19 related restrictions, 791 refugee primary school pupils and 358 refugee secondary school pupils are unable to pursue their studies in the city.



SHELTER

- Heavy rains have led to the flooding of several villages around Lake Albert in Ituri Province. People have sought shelter in host families in an already-densely populated area, compromising social distancing measures. UNHCR alerted humanitarian actors about the situation and is pushing for a rapid assessment of humanitarian needs and emergency response.
- Meanwhile, heavy rains and flooding continued to affect nearly 150,000 individuals, including internally displaced persons and refugees, in Uvira and Fizi territories (South Kivu Province). Many have lost their homes and are staying in temporary sites with little social distancing, or health or sanitation facilities. The rains also damaged refugee shelters in Lusenda camp and Mulongwe settlement, which host Burundian refugees.
- Military operations continued in Masisi and Ruthshuru territories (North Kivu Province), and led to displacements and the creation of spontaneous sites with little social distancing, or sanitation or health facilities.

- Since the start of the rainy season, displaced persons in Ituri Province have been reporting that leaks in their shelters forced them into even smaller spaces to escape the rain, preventing social distancing and increasing the risk of COVID-19 propagation.

**HEALTH**

- More funds are needed for the construction of isolation sites in areas hosting refugees from the Central African Republic in Nord and Sud Ubangi provinces, as there are growing fears of a spread of COVID-19 from nearby Bangui.
- Displaced persons in Kasenyi displacement site, Ituri Province, have alerted UNHCR that as of June 2020, they will no longer have access to free health care. Health care is currently provided by the NGO Save the Children, but funding is running out. The displaced persons are already hit by dwindling economic opportunities and a decline in humanitarian assistance during the COVID-19 outbreak and are worried that they will not be able to afford basic health care themselves.

**WATER, SANITATION AND HYGIENE (WASH)**

- Due to overcrowding, limited space and insufficient funding for the WASH sector, latrines are overflowing in several displacement sites in Ituri Province, with no possibility to construct new ones. Waste is also accumulating, creating unsanitary conditions and a fertile ground for disease.

Working in partnership

- In Ituri Province, UNHCR and the Protection Cluster advocated for the Provincial Government to establish clear procedures in case of a suspected case of COVID-19 in a displacement site. Humanitarian actors also continued to advocate for the inclusion of displacement sites in the provincial COVID-19 response plan.
 - In Haut-Katanga Province, the South East Humanitarian Hub's Regional Inter Cluster group shared observations on the resurgence of rape following insecurity and domestic violence amidst COVID-19 related measures in Lubumbashi, Likasi and Kasumbalesa. In Lubumbashi, the UNHCR-led Protection Cluster held a meeting to discuss this trend and the prevention of and response to SGBV.
 - The CCCM Working Group, co-led by UNHCR and IOM, obtained access to seven hectares of land next to the displacement site of Kigonze in Bunia, Ituri Province, to build additional shelter and infrastructure. These structures will house newly relocated persons and reduce overcrowding.
 - The UNHCR-led Shelter Cluster and OCHA are advocating for additional funding to build shelters in Uvira (South Kivu Province) and Maniema Province, due the damages caused by floods and ongoing heavy rains, which increase the risk of cholera and of a propagation of COVID-19 in overcrowded sites.
 - Thanks to advocacy by UNHCR, as co-lead of the CCCM Working Group, the NGO Norwegian Refugee Council (NRC) has agreed to construct 1,350 emergency shelters and sewers in the displacement sites of Nymazaze and Bahwere. This new construction will allow to space out shelters at the overcrowded sites and to improve hygiene conditions, with the aim to reduce the risk of diseases such as COVID-19.
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External / Donor Relations

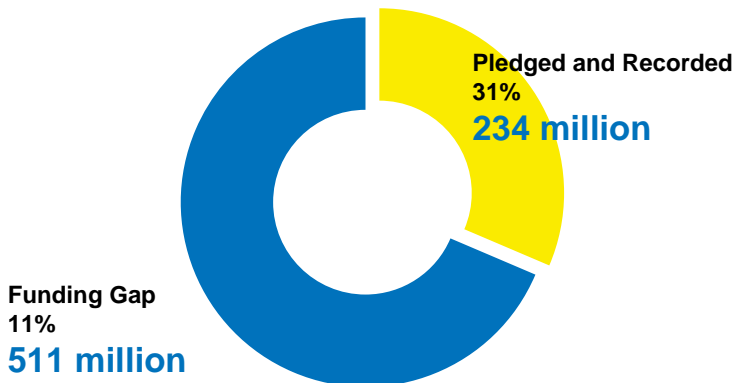
FUNDING REQUESTED FOR THE CORONAVIRUS EMERGENCY SITUATION

UNHCR is grateful for the critical support provided by donors who have provided generous and timely support to the Coronavirus Emergency Situation globally, and to DRC as well as those who have contributed to UNHCR programmes with unearmarked funding.

USD 745M

Requested for UNHCR's COVID-19 response globally over the next nine months

As of 28 May:



SOFTLY EARMARKED CONTRIBUTIONS AND PLEDGES TO THE COVID-19 APPEAL | USD

Special thanks to the major donors of softly earmarked contributions and pledges at the global level to the Coronavirus Emergency Situation giving UNHCR critical flexibility to rapidly respond to evolving needs.

United States of American 64 M | Germany 38 M | European Union 31.8 M | United Kingdom 24.8 M | Japan 23.9 M | Denmark 14.6 M | CERF 6.9 M | Canada 6.4 M | Ireland 3.3 M | Sweden 3 M | Sony Corporation 3 M | Finland 2.4 M | Private donors 1.9 M | Education Cannot Wait 1.8 M | Qatar Charity 1.5 M | Norway 1.4 M | USA for UNHCR 1 M | Australia 0.8 M | Italy 0.5 M | Private donors UK 0.6 M | España con ACNUR 0.6 M | Badr Jafar 0.5 M | Australia for UNHCR 0.4 M | Ahmed Abdelkodous Ehsan 0.3 M | Jersey 0.2 M | Estonia 0.2 M | Monaco 0.2 M | Sweden for UNHCR 0.2 M | Private donors Canada 0.2 M | Iceland 0.1 | Portugal 0.1 M | Liechtenstein 0.1 M | Russia 0.1 M | UPS 0.1 M | Unilever 0.1 M | Japan for UNHCR 0.1 M | Private donors Liechtenstein 0.1 M

UNEARMARKED CONTRIBUTIONS | USD

Special thanks to the major donors of unearmarked contributions.

Sweden 76.4 M | Norway 41.4 M | Netherlands 36.1 million | Denmark 34.6 million | United Kingdom 31.7 million | Germany 25.9 million | Private donors Spain 20 million | Switzerland 16.4 million | Private donors Republic of Korea 10.5 million

Australia | Belgium | Costa Rica | Estonia | Finland | Iceland | Indonesia | Ireland | Kuwait | Lithuania | Luxembourg | Malta | Monaco | Montenegro | New Zealand | Peru | Portugal | Qatar | Republic of Korea | Russian Federation | Saudi Arabia | Serbia | Singapore | Slovakia | South Africa | Sri Lanka | Thailand | Turkey | United Arab Emirates | Uruguay | Private donors

Contacts

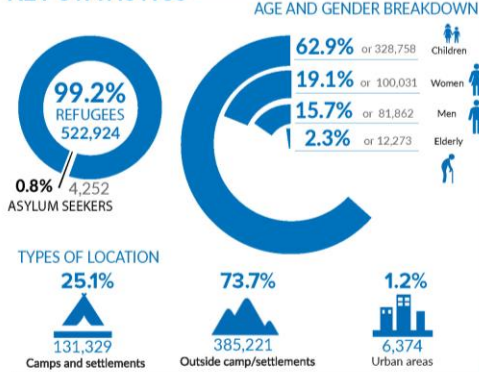
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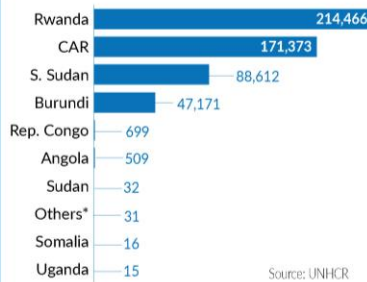
527,176

TOTAL NUMBER OF REFUGEES AND ASYLUM SEEKERS

KEY STATISTICS



REFUGEE POPULATION BY COUNTRY OF ORIGIN

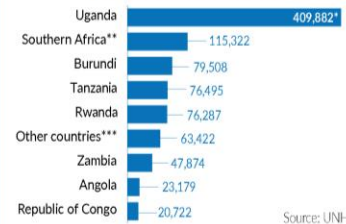


*Others include Ivory Coast, Eritrea, Syria, Liberia, Chad, etc.

REFUGEES FROM DRC IN AFRICA

912,691

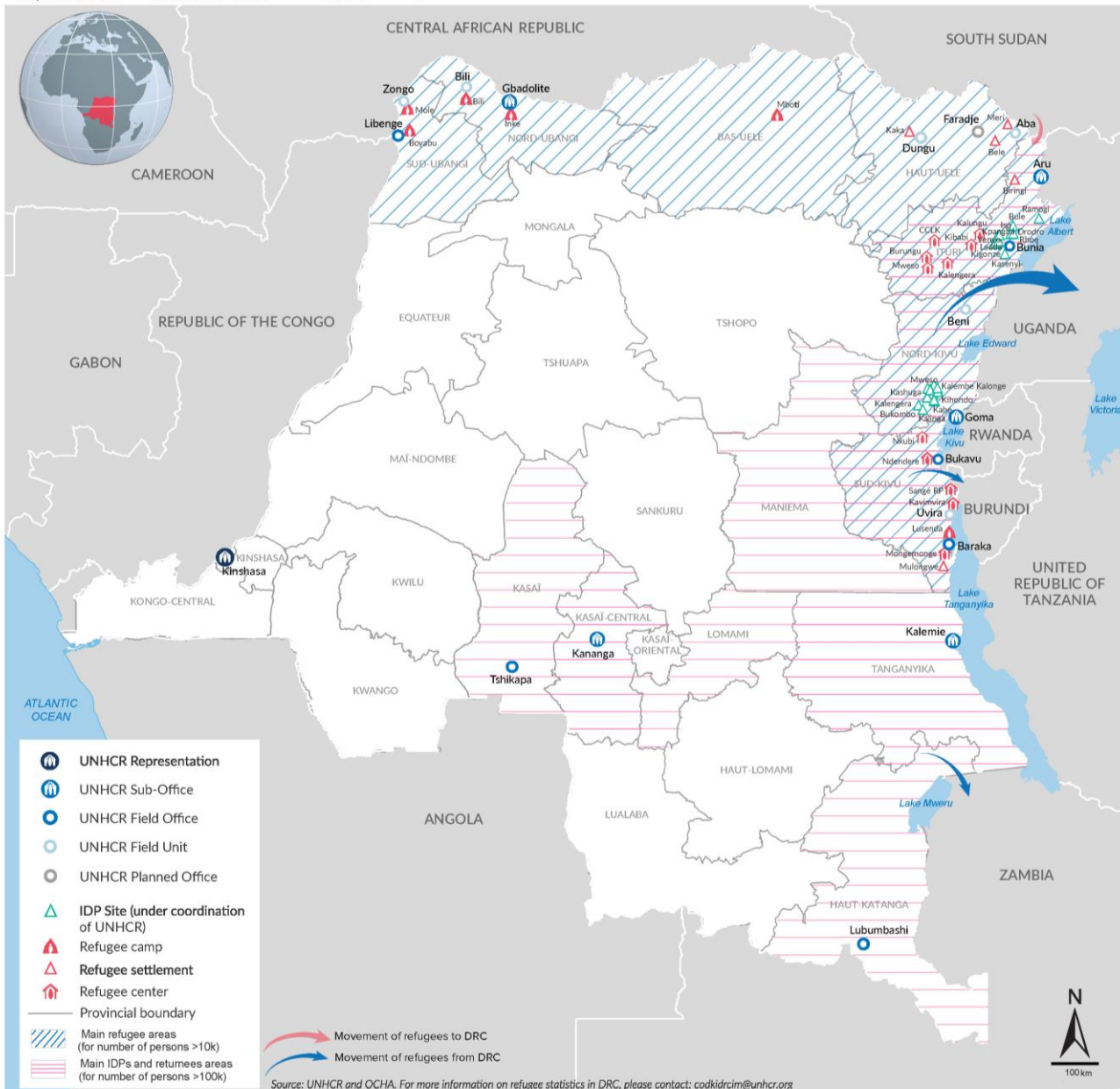
TOTAL DRC REFUGEE POPULATION



* Uganda figures are those of February 2020, the figures for April 2020 are not yet available.

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

***Other countries include South Sudan, Kenya, Central African Republic and Chad.



The boundaries and names shown on this map do not imply official endorsement or acceptance by the United Nations.

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