

# Democratic Republic of the Congo

6 May 2020

## Main highlights

- As of 5 May, there were 797 confirmed cases of COVID-19 in the DRC, with 35 reported deaths. No case has been detected amongst UNHCR's persons of concern in the DRC so far. Seven new cases of Ebola have been reported since 10 April, after almost eight weeks without new cases. The majority are in Beni (North Kivu Province), and four have died. As of 3 May, there were a total of 3,462 cases of Ebola in the DRC.
- In Bele and Meri refugee settlements (Haut-Uele Province), UNHCR started a community-based project involving the South Sudanese refugees in making their own handwashing devices called "tippy taps," recycling materials such as basins, jerry cans or plastic bottles.
- On 27 April, UNHCR launched a pilot project in Biringi refugee settlement, Ituri Province, involving 18 South Sudanese refugees and locals in the production of masks for the prevention of COVID-19. The aim is to produce an initial 5,000 masks, to be distributed to medical staff and communities, and to later turn this project into an income-generating activity.



*Vulnerable internally displaced women wait in line for their cash assistance, while respecting social distancing measures.*

© UNHCR/Lena Becker

## Operational context

The confinement of Kinshasa's Gombe commune, in place since 6 April, has been partially relaxed, while other COVID-19-hit communes have in turn been put under lockdown. On 24 April, a case of COVID-19 was confirmed in the city of Lubumbashi, making Haut-Katanga the sixth province to be affected, alongside Kinshasa, North Kivu, South Kivu, Ituri, Kwilu, and Kongo Central. The security situation in Djugu and Mahagi territories (Ituri Province) is still affecting humanitarian access to displaced persons, and thus the COVID-19 response. The ongoing conflict also causes continued displacement towards Bunia, where displaced people are staying in inadequate sanitary conditions as infrastructures in displacement sites are overwhelmed. Major floods hit the town of Uvira (South Kivu Province) on 16 and 17 April, leaving tens of thousands with little access to sanitation and hygiene.

## 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 inclusion of refugees and IDPs into the DRC's national preparedness and response plan against COVID-19, and it 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 it is 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 limit interaction between staff and persons of concern, and between persons of concern. Handwashing and social distancing are mandatory during any distribution.

UNHCR is informing its beneficiaries about COVID-19 and measures to prevent infection. Information material prepared by UNICEF 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 sensitization 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. Sensitization sessions are taking place in groups of less than 15 refugees keeping at least two meters distance from each other.



### BASIC NEEDS AND FOOD SECURITY

- So far, UNHCR and partner ADSSE provided cash assistance to 302 urban refugee households living in Kinshasa, the epicentre of the outbreak in DRC, as part of its COVID-19 emergency measures.
- 160 refugees from CAR received training on improved farming techniques so far, to respond to potential losses of livelihoods due to border closures and movement restrictions amidst the COVID-19 outbreak.
- As of 20 April, cash-for-food distributions in four refugee camps in Nord Ubangi and Sud Ubangi provinces were completed in the respect of COVID-19 prevention measures. A total of 58,834 refugees from the Central African Republic (CAR) received two-month cash rations.



### PROTECTION

- In Kinshasa, UNHCR has put in place a remote case management system to monitor cases of sexual and gender-based violence (SGBV) amongst urban refugees. The system was developed by the SGBV Sub-Cluster, led by UNFPA. So far, no case of SGBV has been recorded in Kinshasa. UNHCR is continuing to conduct remote monitoring of human rights violations throughout its areas of operation.
- In areas hosting South Sudanese refugees, UNHCR has dispatched 58 mobile phones with SIM cards, and 36 pairs of walkie-talkies to refugees, health centres and focal points to ensure communities are able to report any alerts in case of a total lockdown linked to COVID-19.



### SHELTER

- In Ituri Province, UNHCR and its partner the Danish Refugee Council (DRC) built 262 emergency shelters at the Bule displacement site in Djugu Territory, and rehabilitated 115 shelters in Angumu, Mahagi Territory. This has helped reduce overcrowding and improve social distancing amidst the COVID-19 outbreak. DRC used a remote management technique relying on newly established "humanitarian committees," which are helping supervise construction, while limiting the risk of propagation of COVID-19 through humanitarian workers and addressing any access restrictions due to insecurity.



### HEALTH

- On various roads in Kasai Central Province, six of the nine medical checkpoints supported by UNHCR have been completed. 112,000 people (including 659 coming from Kinshasa) have been checked at four medical checkpoints.
- So far, UNHCR has distributed 8,000 protective masks to its partners in all three provinces hosting refugees from the Central African Republic (CAR), in northern DRC.

**WATER AND SANITATION**

- As of 29 April, UNHCR had installed 536 handwashing stations in refugee-hosting areas, distributed 62,379 soaps to refugees and host community members, and disinfected 1,571 infrastructures for refugees (latrines, dormitories, community structures).
- UNHCR and partners also continued sensitization sessions about COVID-19 and prevention measures; as of 29 April, an estimated 84,194 displaced, refugee and host communities had been reached by sensitization sessions.
- UNHCR continued to broadcast awareness-raising on COVID-19 to an estimated 3.3 million refugees, IDPs and local populations through local radios in 27 locations<sup>1</sup>.
- As crowds often gather when fetching water at water points, UNHCR's partner ACTED raised awareness about COVID-19 prevention measures at the 85 water points of the four camps hosting refugees from CAR. Floor markings now help to implement social distancing.

---

## Operational impact and constraints

UNHCR's regular operations across the DRC are affected by confinement and social distancing measures. The main activities that have been affected so far are the following:

- In Moba and Manono territories (Tanganyika Province), victims of SGBV are still awaiting justice due to the suspension of public court hearings planned in April, amidst the COVID-19 crisis.
- In Lubumbashi (Haut-Katanga Province) the reception of refugees at UNHCR offices is temporarily suspended due to a confirmed COVID-19 case in the city.
- As UNHCR is dependent on remote methods for the monitoring of human rights violations, to counter the spread of COVID-19, the information collected is in some cases of less quality.

---

## Identified needs and gaps

**BASIC NEEDS AND FOOD SECURITY**

- In Djugu Territory (Ituri Province), the UNHCR-led Protection Cluster issued an alert about IDPs in six displacement sites having been without food or cash assistance for over seven months. Families depend on informal daily work, on their peers' charity, or at times on negative coping mechanisms such as survival sex. Insecurity limits livelihood opportunities, while there is no access to free medical care, making this group particularly vulnerable in case of a spread of COVID-19.

**PROTECTION**

- Due to ongoing violence in Ituri Province, IDPs have started to arrive in Aru Territory (also in Ituri Province), an area that hosts South Sudanese refugees. Some 380 IDPs now live with host families in Aru town, while an unconfirmed number of IDPs are in Ariwara town. The main challenge is to verify that they live in adequate conditions in the context of COVID-19, while awareness-raising on COVID-19 is also needed.
- The remote management of human rights violations remains a challenge in Tanganyika and Haut-Katanga provinces, with a lack of resources such as SIM cards and internet connection. When cases are recorded, legal assistance is a major gap, as all hearings remain suspended due to COVID-19.
- Floods in South Kivu Province have damaged roads to Kavimvira transit centre and Sange assembly point (hosting a total of 2,900 refugees and asylum-seekers); as a result Kavimvira is only accessible with difficulties, while Sange is completely cut off. This impedes protection and COVID-19 prevention activities.
- In North Kivu Province, there are reports that humanitarian workers are perceived to spread COVID-19. As a result, meetings with communities have been reduced and the collection of alerts is mainly done by telephone, which has impacted the quality of collected information.

**SHELTER**

- The rainy season in Ituri Province is posing challenges in terms of COVID-19 prevention. In displacement sites, leaks in emergency shelters are pushing displaced persons towards even smaller spaces to escape the rain. This restricts social distancing and increases the risk of COVID-19 propagation.

---

<sup>1</sup> Calculation based on an estimated 40% reached of the total audience of radios for which information was available.

- 77,790 persons (15,558 households) were affected by major floods in Uvira, South Kivu Province, according to the Shelter Cluster, with 3,457 shelters and 2,772 latrines destroyed. Many victims sought shelter in 17 informal sites (school, churches etc.) with little to no access to healthcare or hygiene facilities. Given the limited space available at the sites, respecting COVID-19 preventive measures is a challenge, while the lack of land in areas safe enough to build shelters is a major concern.

#### HEALTH

- In Tanganyika Province, national health system has insufficient medical equipment, while there is a total lack of ambulances and quarantine infrastructure. As there are no health infrastructures at all in displacement sites, IDPs especially vulnerable to a spread of COVID-19.
- UNHCR had to drastically reduce the quantities of medicines and medical items purchased for the COVID-19 response, due to its limited budget. Additional funding is needed to acquire sufficient quantities.



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

- In Uvira, South Kivu Province, there is a need to rebuild the drinking water station, which was destroyed by floods, to ensure access to water in case COVID-19 reaches the area.
- In Bunia, Ituri Province, new influxes of persons fleeing violence in Djugu Territory to displacement sites is increasing overpopulation and pressure on WASH facilities.
- In North Kivu and Ituri provinces, many persons of concern living in remote areas have not yet been reached by awareness-raising on COVID-19. This includes IDPs living in sites managed by UNHCR and IOM, but that are difficult to access due to insecurity in the area.

### Working in partnership

- In Ituri Province, the Protection Cluster has noted that good hygiene practices established during the Ebola outbreak are generally not well observed for the COVID-19 outbreak. The Cluster and Working Groups are working with UNICEF and IFRC to include psycho-education approaches in awareness-raising campaigns, particularly for children.
- In South Kivu Province, members of the Protection Cluster started to raise awareness about COVID-19 among those affected by the floods. However, compliance with preventive measures remains a major challenge due to the lack of space and of social distancing in sites and host families. Access to land, shelter and latrines remain the most urgent needs.

## External / Donor Relations

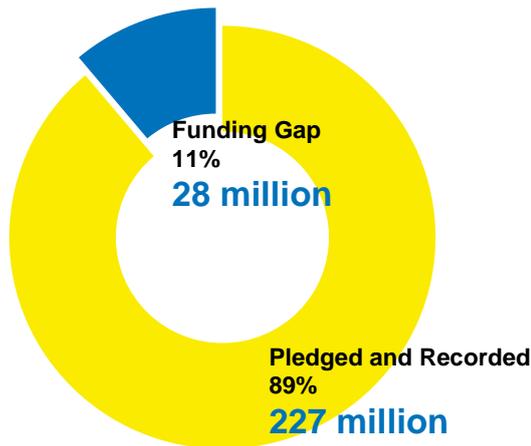
### FUNDING REQUESTED FOR THE CORONAVIRUS EMERGENCY SITUATION

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 255M

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

As of 6 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 28.7 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 | Australia 0.8 M | Monaco 0.2 M | Iceland 0.1 | Portugal 0.1 M | 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

**Johannes van Gemund**, Senior External Relations Officer, UNHCR Representation in Kinshasa, DRC  
 gemund@unhcr.org, +243 817 009 484

**Alexandra Stenbock-Fermor**, Associate External Relations and Reporting Officer, UNHCR Representation in Kinshasa, DRC, stenbock@unhcr.org, +243 822 253 121