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Upsurge of violence in  
Rutshuru territory,  
DRC

SitRep # 12

2 - 8 January 2023

## Highlights

- While the M23 gave away control of the Rumangabo military camp to the East African Regional Force, heavy fighting continues in Rutshuru and Masisi territory, leading to new population displacement movements. In addition, formation of new armed groups is being reported. According to OCHA, over 510,000 persons have been displaced in Rutshuru, Nyiragongo and Masisi territories since March 2022.
- The cholera situation remains fragile with still a risk of major outbreak. Since the end of October, 2,995 suspected cases of cholera and 16 deaths have been reported. Almost 73% of these suspected cases are children under 18 years old and 38% under 5 years old.
- Despite the very volatile and unpredictable environment, UNICEF and partners continue to assist the most vulnerable in WASH, child protection, health, education, NFI kits and nutrition, in coordination with other humanitarian actors.

## Situation Overview

On 6 January, after an occupation of over 2 months, the M23 withdrew from Rumangabo military camp that was taken over by the Kenyan contingent of the East African Regional Force. However, in Rutshuru territory, fighting intensified in and around the villages of Bwiza and Kalinga, pushing civilian population towards Kilorwe, Sake and Burungu, as well as in Mudugudu, pushing civilians towards Katsiru and Mulimbi. As of 4 January, the M23 is reportedly controlling the villages of Chabafu, Buramaba, and the city of Nyamilima, in Binza Grouping, while populations have fled towards Buganza and Munyaga.

In Masisi territory, fighting was reported between M23 and the FARDC who are allegedly receiving support of local self-defense militias. These violent episodes induce multiple population displacements from Mweso, Kitshanga, Burungu, Kilolirwe in the National Virunga Park. It should be noted that new armed groups seem to be forming, taking advantage of the deteriorating security situation in the area.

According to OCHA, more than 510,000 persons have been displaced in Rutshuru, Nyiragongo and Masisi territories since March including over 370,000 since fighting resumed late October. 49% live in sites and collective shelters, 92% of the sites are in Nyiragongo territory. (DTM – IOM)

During epidemiological week 01-2023 (02 Jan. – 8 Jan.), 602 suspected cholera cases were reported in North Kivu, and 3 deaths (community deaths). Out of those, 581 cases (96%) were from the Kanyaruchinya health area and all from IDP sites, 50 were from Karisimbi health zone. These 581 suspected cases notified in EW01-2023 represent a decrease of 21% compared to EW52-2022 (733 suspected cases). Since week 44-2022, 2,995 suspected cases and 16 deaths have been reported in the IDP sites. Almost 73% of these suspected cases are children under 18 years old and 38% under 5 years old.

Despite the slight decrease of suspected cases during the reporting period, the situation remains very fragile and it is too early to consider that the epidemic reached its peak yet.

## UNICEF's Response

From the first days of the crisis in April 2022, UNICEF has been responding to the humanitarian needs with a response in WASH, child protection, non-food item distribution, health and nutrition, emergency education in the territories of Rutshuru and Nyiragongo. Despite the very volatile and unpredictable environment, UNICEF and partners continue to aid the most vulnerable displaced affected by this crisis in Rutshuru and to the various locations where the displaced are currently located and where more are moving to. Since the start of November, UNICEF is focusing its interventions in the Nyiragongo territory, as a large influx of displaced persons living in dire conditions has been noted. Following the latest developments, UNICEF and its partners are scaling up the multi-sectoral assistance as follows:



### Water, Hygiene and Sanitation (WASH)

UNICEF and its partners, AVUDS, BIFERD and YME Grands Lacs, continue water-trucking activities in and around Kanyaruchinya in Nyiragongo territory.

During the reporting period:

- 700 m<sup>3</sup> (100 m<sup>3</sup> per day on average) of drinking water was distributed in six sites, providing drinking water to 20,000 people per day with daily water chlorination monitoring on each bladder,
- Continuation of latrine and shower disinfection activities in the Kanyaruchinya site,
- Finalization of 350 latrine doors to service 17,500 persons, and 220 shower doors to service 22,000 persons in and around Kanyaruchinya,
- Finalization of the 200 planned latrine doors and 100 shower doors in the site of Bushagara established by UNHCR
- Evaluation of the number of full latrines and subsequent planification of emptying activities in Kanyaruchinya,
- Awareness activities on good hygiene practices reached 80,391 people (including 41,099 women and 39,392 men), and awareness on GBV reached 28,859 people during the reporting period (including 13,677 people with messages on PSEA)

BIFERD is closing its intervention in Kanyaruchinya as of 10 January. The sites supported by BIFERD have already been taken over by AVUDS with the same volume of water per day, i.e. 40,000 liters/day.

The setup of the 70 m<sup>3</sup> Oxfam water tank has been completed at the Bushagara site by YME Grands Lacs and will be filled through water-trucking. 154 latrine doors have already been built out of the 200 planned, and 60 shower doors out of the 100 planned.



### Rapid response (UniRR)

UNICEF's rapid response team conducted a rapid multisectoral assessment in the Kamuronza Grouping in Masisi Territory, including healthcare and nutrition facilities.

The emergency activities in health and nutrition are on-going with the provision of free primary health care for IDPs and host community around in the Murambi IDP site, while cases with complications (including cases of MAS with complications) are referred to the Nyiragongo Hospital



### Cholera response – Case Area Targeted Interventions (CATI)

Given the rapid increase of suspected cholera cases and to reduce the delays in reporting the cases, the CATI program has fully transitioned to active surveillance with 18 Red Cross North Kivu and DPS (Provincial Health Division) teams deployed in the province, and 10 directly in IDP sites with the objective of responding within 24 hours to every detected case when the WASH actors have not yet distributed hygiene kits. CATI teams follow up on severe dehydration and confirmed cases, open chlorination points and decontaminate latrines, as well as monitor water quality. All CATI activities are coordinated with UNICEF emergency unit, WASH Cluster and UNICEF WASH Section.

During the reporting period, 237 CATI responses were realized in North-Kivu, covering all severe dehydration and confirmed cases of cholera. All responses were completed in less than 24 hours and covered 100% of IDP sites' confirmed cholera cases.

Since EW44, a total of 1,410 concerned responses were completed in less than 24h. Over 60,000 people benefited from decontamination, including of their latrines, and if needed the distribution of basic cholera kits (soaps, jerry cans, ORS and buckets), as well as cholera risk awareness and hygiene promotion.

51 manual chlorination points were opened for a period of 1 month in Kanyaruchinya Health Area and Karisimbi Health Zone to protect the Goma urban area from further spread of the epidemic.



## Child Protection

UNICEF and its partners UPDECO, CAJED, ACOPE, Heal Africa and North Kivu DIVAS are providing essential protection services to children including identification, care and family reunification for Unaccompanied and Separated Children (UASC) and Children Associated with Armed Forces and Armed Groups (CAFAAGs), psychosocial support to affected populations, deployment of social workers and para-social workers to support identification in IDP sites as well as holistic case management for Gender-based Violence (GBV) survivors.

During the reporting period, no new case of UASC was registered in Nyiragongo IDPs sites. Child protection actors are still focusing on active family tracing of identified UASC in all IDPs sites, as well as on the quality of care by monitoring closely foster families and collective centers. To prepare the opening of the Bushagara site welcoming the most vulnerable displaced persons, child protection actors were positioned in key areas to monitor the movement of population and ensure a rapid response to cases of protection notably concerning family separations and cases of GBV. Meanwhile, 11 UASC (9 boys and 2 girls) received protection services from local partners CAJED & DIVAS, and 5 SGBV cases (all girls) received medical care by UNICEF's partner Heal Africa.

In Rutshuru territory, 7 UASC (including 3 girls) and 8 CAAFAGs (including 3 girls) were identified and received protection services via UPDECO partner. In the southern part of Lubero territory, UNICEF's partner ACOPE identified and provided holistic support to 14 UASC (6 boys and 8 girls).

Since the beginning of the crisis in March 2022, UNICEF's partners have identified a total of 2,071 UASC (1,181 boys and 890 girls) – 1,772 of which have been reunified (1,005 boys and 767 girls). In the same time frame, 340 CAAFAGs (287 boys and 53 girls) have been identified and benefited from protection services by UNICEF's partners and over 8,000 children affected by the crisis received psychosocial care.



## Education

12 schools are still being used as shelters by IDPs in Nyiragongo Health Zone, while 18 Temporary Learning Spaces are functional in the Nyiragongo territory, schooling 2,886 children. The construction of 2 emergency latrines blocks is underway.

UNICEF continues its advocacy towards local authorities to prioritize the IDPs using classrooms as shelter to be relocated first to the Bushagara IDP site.

During the reporting period, 725 children (307 girls and 418 boys) have been sensibilized to the importance of returning to school through participative theater, while 1,446 IDPs (607 men and 839 women) have been sensibilized to the key role of community in protection and keeping a clean and sane environment around these TLS, as well as prevention of epidemics and personal/menstrual hygiene.



## Nutrition

During the reporting period, UNICEF and its partners continued their activities in the three territories of Nyiragongo, Rwanguba and Rutshuru territories.

In Rutshuru Health Zone, the following activities were realized with the partner AOF:

- Support for the management of SAM in 10 of the 12 Health Areas, while Rugari and Kakomera Health Areas are still not accessible,
- Admission of 37 children (14 girls and 23 boys) to the ambulatory nutrition units in 4 UNTAs.

In Rwanguba Health Zone, our partner WVI is operational in 6 Health Areas (Shinda, Karambi, Nyarukwangara, Mutabo, Kakondo and Ntamugenga), and admitted 50 children (26 boys and 24 girls), including 2 in UNTIs.

In Nyiragongo Health Zone, the following activities were realized with the partners WVI and AOF:

- Admission of 74 SAM children (36 girls and 38 boys), including 11 in UNTIs, with 27% of children who were displaced children,
- 738 people were sensitized on breastfeeding including 448 women, among whose 117 were breastfeeding, 130 men, 72 girls and 88 boys,
- Screening of 590 children and 9 breastfeeding women, among whose 10 referred to healthcare facilities.

## Health

UNICEF is supporting primary care in Rutshuru, Rwanguba and Nyiragongo Health Zones, with 1,392 persons benefitting of ambulatory care, including 402 children under 5 (194 girls and 208 boys), while 57 deliveries were assisted, and 23 patients referred to GRH.

In the Kibututu Health Center, Rutshuru Health Zone, 492 persons benefitted of ambulatory care, including 164 children under 5 (92 girls and 64 boys), while 7 deliveries were performed. All the patients were from the host communities.

In Nyiragongo Health Zone specifically, UNICEF and its partner AOF realized the following activities during the reporting period:

- Supply of drugs and medical equipment, including PCI kits to the General Reference Hospital of Nyiragongo, relocated in the former Ebola treatment Center of Munigi,
- Activation of the flat rate for blood transfusion at the Nyiragongo GRH's emergency room,
- Provision of primary and secondary health care for IDPs and host populations:
  - Munigi Health Center: 220 consultations including 77 children under 5 (47 boys, 33 girls), 7 deliveries, 40 patients referred to the Munigi HGR for complications. All the patients were from the host communities,
  - Nyiragongo GRH: 331 consultations including 149 children under 5 (78 girls and 71 boys) and 182 persons above 5 (86 women and 96 men), 6 deliveries. 51 persons were admitted (including 22 children under 5), especially for malaria, diarrheas, and accidental traumas. All the patients were displaced persons.

## Protection from Sexual Exploitation and Abuse (PSEA)

Given the increase rates of survival sex, UNICEF is supporting its partner NGO Heal Africa in its awareness and response activities to SEA. 87 persons (7 men, 27 girls and 53 women) have been sensitized to complaint and referral mechanisms, sharing widely the free phone number and the available services for victims. During the reporting period, no allegation of EAS was reported.

Heal Africa organized capacity building sessions for psycho-social assistants, through briefing sessions focused on case management, complaint mechanisms and the use of reporting tools.

## Funding Requirements

UNICEF needs US\$13.4 million to scale-up its humanitarian response for three months (Dec 2022- February 2023) as detailed in the [response plan](#). The funding gap to date is 66%. UNICEF expresses its sincere gratitude to all donors notably SIDA and CERF for their support. More than ever, UNICEF needs flexible and timely funding to respond where the needs are the greatest as the situation unfolds.

| Area of intervention                       | Funding Requirements (US\$) |
|--------------------------------------------|-----------------------------|
| UNICEF Rapid Response (UNIRR)              | \$3,000,000                 |
| WASH and cholera response                  | \$4,395,000                 |
| Child Protection and Gender Based Violence | \$1,313,080                 |
| Health                                     | \$255,500                   |
| Nutrition                                  | \$2,425,170                 |
| Education                                  | \$1,250,000                 |
| Social & Behaviour Change                  | \$310,000                   |
| Integrated Analysis Cell                   | \$140,000                   |
| PSEA/ Gender                               | \$149,500                   |
| Operational support Cost                   | \$200,000                   |
| <b>Total</b>                               | <b>\$13,438,250</b>         |

## Summary of Response Results since March 2022

|                                        |                                                                                                                                                                                                     | UNICEF and IPs Response    |               |
|----------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|---------------|
| Sector                                 | Indicator                                                                                                                                                                                           | UNICEF Target <sup>1</sup> | Total Results |
| <b>WATER, SANITATION &amp; HYGIENE</b> |                                                                                                                                                                                                     |                            |               |
|                                        | # of people accessing a sufficient quantity of safe water for drinking and domestic needs                                                                                                           | 202,816                    | 165,000       |
|                                        | # of people use safe and appropriate sanitation facilities                                                                                                                                          | 101,736                    | 129,105       |
| <b>CHILD PROTECTION</b>                |                                                                                                                                                                                                     |                            |               |
|                                        | # of children accessing mental health and psychosocial support                                                                                                                                      | 11,750                     | 7,603         |
|                                        | # of children GBV survivors accessing holistic care                                                                                                                                                 | 720                        | 686           |
|                                        | # of children released from armed forces and groups reintegrated with their families/communities and/or provided with adequate care and services                                                    | 860                        | 330           |
|                                        | # of unaccompanied and/or separated children reunified with their primary caregiver or provided with family-based care/alternative care services                                                    | 1,380                      | 2,046         |
| <b>Rapid Response Mechanism</b>        |                                                                                                                                                                                                     |                            |               |
|                                        | # of people whose life-saving non-food items and WASH supplies (including menstrual hygiene items) needs were met through supplies or cash distributions within 7 days of needs assessments         | 120,000                    | 109,608       |
|                                        | # of people targeted around suspected cholera cases who received an appropriate and complete response within 48 hours of case notification through a responsive epidemiological surveillance system | 135,000                    | 376,776       |
| <b>EDUCATION</b>                       |                                                                                                                                                                                                     |                            |               |
|                                        | # of children accessing formal or non-formal education, including early learning                                                                                                                    | 23,800                     | 2,855         |
|                                        | # of children receiving individual learning materials                                                                                                                                               | 35,420                     | 12,225        |
|                                        | # of temporary learning spaces established                                                                                                                                                          | 144                        | 29            |
| <b>NUTRITION</b>                       |                                                                                                                                                                                                     |                            |               |
|                                        | # of children aged 6 to 59 months affected by SAM admitted for treatment                                                                                                                            | 3,147                      | 2,440         |
|                                        | # of primary caregivers of children aged 0 to 23 months receiving infant and young child feeding counselling                                                                                        | 15,829                     | 17,948        |
| <b>HEALTH</b>                          |                                                                                                                                                                                                     |                            |               |
|                                        | # of children and women receiving primary health care in UNICEF-supported facilities                                                                                                                | 45,052                     | 5,354         |

## UNICEF's Contacts in DRC

Grant Leaity  
Representative  
UNICEF DRC  
Email: [glaity@unicef.org](mailto:glaity@unicef.org)

Katya Marino  
Deputy Representative  
UNICEF DRC  
Email: [kmarino@unicef.org](mailto:kmarino@unicef.org)

Typhaine Gendron  
Chief Emergency  
UNICEF DRC  
Email: [tgendron@unicef.org](mailto:tgendron@unicef.org)

Jean Metenier  
Senior Coordinator  
UNICEF DRC (Goma)  
Email: [jmetenier@unicef.org](mailto:jmetenier@unicef.org)

<sup>1</sup> Targets since the beginning of the crisis with the new target for 3 months (December- February 2023)