

# 12-MONTHS UPDATE

## Democratic Republic of Congo | Population Movement

<b>Emergency appeal №: MDRCD043</b> <b>Emergency appeal launched: 20/02/2024</b> <b>Operational Strategy published: 15/04/2024</b>	<b>Glide №:</b> <b>OT-2024-000029-COD</b>
<b>Operation update #4: 12-Months Update</b> <b>Date of issue: 17/02/2025</b>	<b>Timeframe covered by this update:</b> From 20/02/2024 to 20/02/2025
<b>Operation timeframe: 20/02/2024 – 31/12/2025</b>	<b>Number of people being assisted: 500,000</b>
<b>Funding requirements (CHF):</b> CHF 30 million through the IFRC Emergency Appeal CHF 50 million Federation-wide	<b>DREF amount initially allocated:</b> CHF 750,000

*To date, this Emergency Appeal, which seeks CHF 30,000,000, is 3.5 per cent funded. Further funding contributions are needed to enable the DRC Red Cross, with the support of the IFRC and members to provide humanitarian assistance and protection to people on the move.*



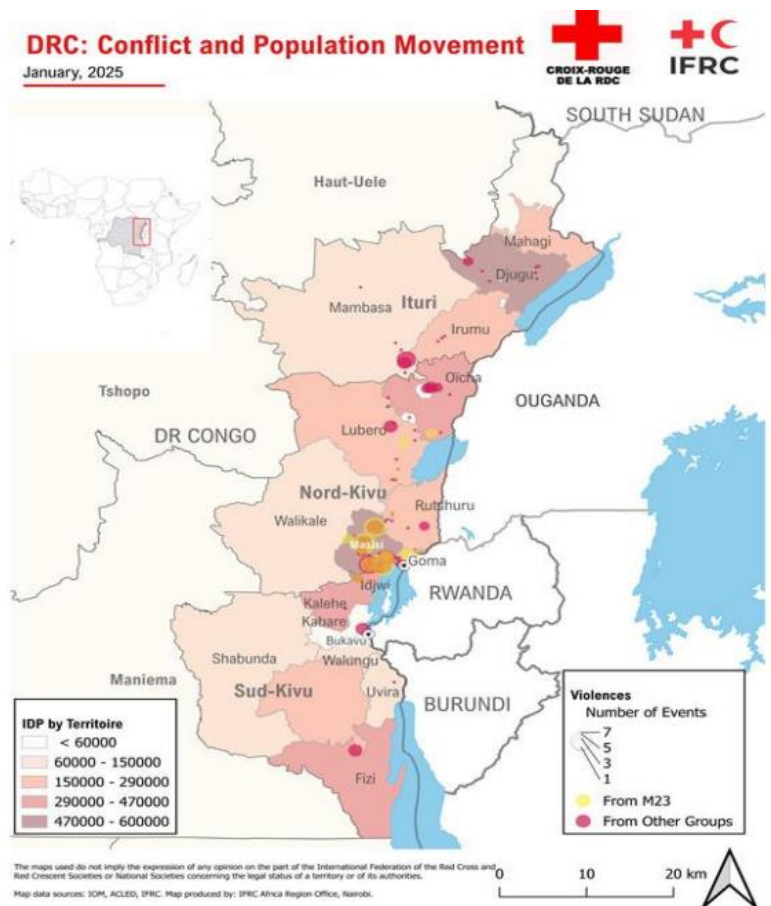
*NFI distribution in the Lushagala extension camp in North Kivu @DRC Red Cross*

# A. SITUATION ANALYSIS

## Description of the crisis

The eastern regions of the Democratic Republic of Congo (DRC) are experiencing an unprecedented humanitarian crisis, with 5.2 million internally displaced persons (IDPs)—96% of whom have been forced to flee due to armed attacks and clashes in North Kivu, South Kivu, and Ituri. These areas, historically plagued by chronic poverty, weak governance, and limited access to basic services, have become epicentres of violence due to their rich reserves of metals and rare earth minerals, making them highly contested territories.

For more than a decade, conflict between the Armed Forces of the DRC (FARDC)/Wazalendo and the M23 rebel group has intensified. Since August 2024, the security situation has rapidly deteriorated, particularly in North Kivu, following M23's attacks in Lubero, which triggered massive displacements towards southern North Kivu and into South Kivu. The humanitarian consequences are catastrophic, with heavy impacts on Goma, Butembo, Minova, and surrounding villages.



### Recent Escalation & Key Events

- August – October 2024: Ceasefire agreements between DRC and Rwanda (Luanda, July 2024) fail to hold as clashes continue.
- January 2025: Fighting escalates in Goma's outskirts, culminating in a full-scale assault on the city.
- January 25, 2025: M23 seizes large parts of Goma, including the airport, triggering mass displacement.
- January 29, 2025: Goma falls completely under M23 control, marking the beginning of their advance towards South Kivu.
- February 2025: [WHO](#) reports 3,082 injured civilians, with 843 deaths in medical facilities since late February. The total casualty count since March 2024 stands at 6,151.

The collapse of mediated peace talks in December 2024 was a major turning point, as M23 captured strategic localities like Masisi and Minova, severing supply routes and further destabilizing the region. By January 25, 2025, the takeover of Goma led to an exodus of hundreds of thousands, with over 300,000 people forced out of displacement sites around the city. The ongoing crisis has severely impacted civilians, exacerbating food insecurity, health crises, and forced displacement:

- 400,000 new displacements since early January 2025, with IDPs highly exposed to starvation, disease, and violence.
- 2.81 million IDPs and 1.49 million returnees in North Kivu as of January 2025 (OCHA).
- Mass evacuations of displacement sites along the Goma–Rutshuru axis, with key camps like Kanyaruchinya, Munigi, and Bushagara nearly emptied ([WFP](#)).

- M23 pressuring displaced persons to return home despite unstable security conditions (RFI).

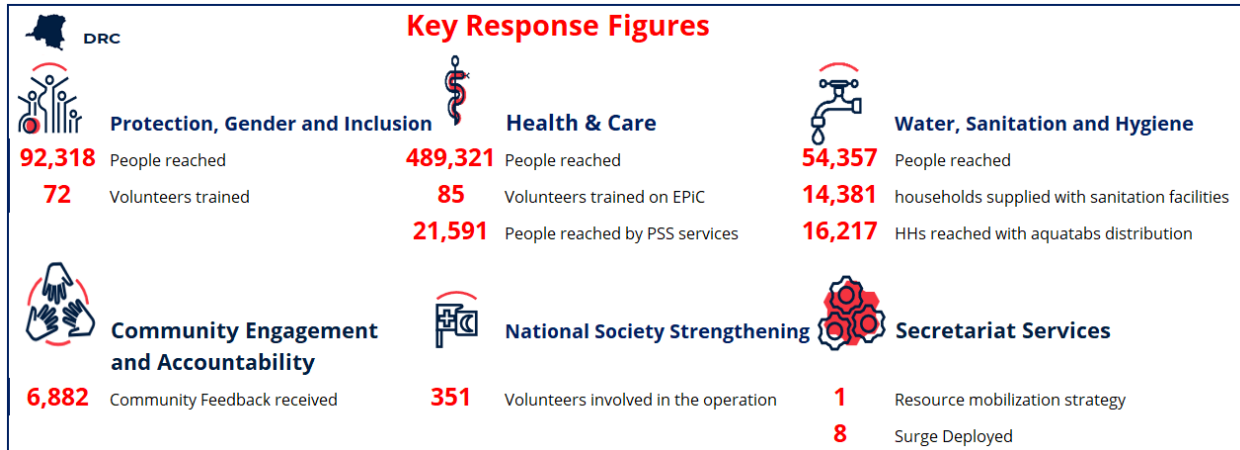
The complexity of the conflict is further heightened by the involvement of neighbouring countries (Rwanda, Burundi, Uganda) and the potential for intervention by other armed groups such as the Allied Democratic Forces (ADF). Additionally, natural hazards such as floods in the coming months may compound the crisis, creating multiple layers of humanitarian challenges.

## Summary of response

### Overview of the host National Society and ongoing response

The Democratic Republic of the Congo Red Cross (DRC RC) has been at the forefront of responding to the escalating humanitarian crisis in North and South Kivu, working in close collaboration with and support from the ICRC and IFRC. In the context of the January 2025 Movement strategic platform (mini summit), the Red Cross Movement aimed to assess available response capacities and enhance coordination mechanisms under the Movement Coordination Agreement (MCA). Despite the volatile security situation, DRC RC has continued delivering critical humanitarian services, including first aid, psychological support, safe and dignified burials, food and economic assistance, water and sanitation interventions, and the protection of family ties.

The DRC RC actions are focused on the population movement, targeting food assistance, water, sanitation, and psychosocial support. As of January 2025, the DRC RC has provided food assistance to over 9,252 displaced persons and host families in North Kivu. The IFRC supported Emergency Appeal has also enabled DRC RC to reach 489,321 people with health and hygiene promotion activities, while over 21,591 individuals have received psychosocial support and 92,318 were reached through gender protection and inclusion (PGI) services.



The resurgence of conflict in Eastern DRC has triggered a severe humanitarian crisis, with thousands fleeing into neighbouring countries. In Rwanda, around 2,000 people crossed into Rubavu district, where temporary emergency shelters were established. Casualties were reported in Gisenyi due to cross-border shelling, while markets and schools temporarily closed. The Rwanda Red Cross (RRCS), in coordination with government authorities, deployed 102 volunteers, provided psychosocial support, emergency shelter, hygiene services, and an ambulance for medical evacuations. As security improved, many displaced persons returned home or were transferred to Nkamira transit centre, where RRCS continues to provide essential services. The Rwandan government praised RRCS for its rapid response and professionalism.

Meanwhile, the Burundi Red Cross (BRC) and Congo Republic Red Cross (CRC) are responding to significant population movements. In Burundi, over 321,000 displaced persons have arrived since February 2025, mainly through Gatumba border post and Rumonge port, prompting BRC to revise contingency plans and provide relief services, transit registration, and essential supplies. In Congo Brazzaville, 8,779 refugees have crossed the Congo River due to ethnic

conflicts in Mai-Ndombé, DRC, with many sheltering in churches, classrooms, and host families. The CRC has mobilized 150 volunteers to support registration, water distribution, hygiene promotion, and relief assistance, while the government coordinates emergency aid efforts. These cross-border humanitarian responses remain critical in addressing the growing needs of displaced populations across the region.

The IFRC is currently in discussions with all concerned National Societies to define the most appropriate response options to support their humanitarian assistance to people on the move.

## Needs analysis

The crisis in North Kivu, South Kivu, and Ituri is driven by a combination of armed conflict, economic instability, and environmental degradation. The resurgence of the M23 rebellion has been a major driver of displacement. The ADF's attacks in Ituri and North Kivu have also contributed to the displacement crisis. Overall, the humanitarian crisis in the region has resulted in over 4 million internally displaced people in the eastern provinces of South Kivu, North Kivu, and Ituri. The damage and losses are extensive. Schools, health facilities, and water systems have been destroyed or rendered non-functional. Over 8 million people in these provinces face acute food insecurity, and half a million children are at risk of severe acute malnutrition. The disruption of agricultural systems due to displacement and violence has further exacerbated food shortages. In Ituri, intercommunal violence between the Hema and Lendu communities has surged since 2022, leading to widespread destruction of villages and livelihoods. Geographically, North Kivu remains the epicentre of the crisis, with Goma serving as a hub for displaced populations. South Kivu and Ituri also face significant challenges, with Ituri experiencing a surge in intercommunal violence and displacement. The crisis has created a ripple effect, with neighbouring provinces and countries receiving over 700,000 people.

Following the recent escalation, all IDP settlements have been evacuated, and displaced persons had to flee, reportedly concentrated in some schools and empty spaces in the city of Goma and into northern territories. The humanitarian crisis is exacerbated by the very limited access to relief services which raises urgent concerns for the safety and well-being of civilians. Prior to these clashes, Goma and its immediate surroundings were already hosting over 2 million IDPs. Since October 2024, approximately 480,000 people have fled from Rutshuru, Lubero, Masisi, and Walikale in North Kivu. Additionally, intense fighting in Minova and Kalehe territory has displaced 178,000 individuals between January 4 and January 20, 2025. Of 658,000 recently displaced individuals, an estimated 380,000 are women, and over 100,000 are children under five years old. Overcrowding has exacerbated issues related to water supply, sanitation, hygiene, shelter quality, and access to essential services such as health care and child protection. This situation is further complicated by a rise in cholera cases.



Displaced families sheltering in schools

Following the escalation of the conflict in January, the DRC RC has carried out a rapid needs assessment in North and South Kivu. Below are some of the results per sector:

### **FOOD SECURITY AND LIVELIHOODS**

During the M23's occupation of Goma, many warehouses and shops were ransacked and looted. The main roads that facilitate access to food have been cut off. The airport is not yet operational and cannot facilitate the delivery of food to those in need. Before the occupation of Goma, the acute food insecurity IPC has revealed that all territories of North Kivu were in the phase 3 and all camps and sites in the phase 4. This highlighted the significance of the food insecurity in this area. The arrival of the rainy season, marked by heavy rainfall and flooding in several provinces, is also disrupting agricultural activities. The increasing number of attacks, acts of violence, and resulting displacements are significantly impacting the population's capacity to cultivate land and engage in income-generating activities. Additionally, inflation has been further aggravated by the depreciation of the Congolese franc since the beginning of the year, leading to substantial price increases for key food items like beans and cassava.

Prices for staple foods continue to rise unusually in markets across the DRC. The depreciation of the local currency, coupled with the persistent increase in the cost of essential goods such as fuel and the inadequate network of agricultural feeder roads, is contributing to the upward trend in food prices.

### **HEALTH**

The emergence and spread of disease is particularly affecting displaced populations, due to their living conditions, density and limited access to health and hygiene facilities and services. The number of cholera cases is particularly worrying, due to the continuous waves of displaced people arriving on the outskirts of host camps and communities, and their limited access to latrines and other hygiene facilities (such as chlorination). In December 2024 (Week 49), the province of North Kivu (17,452 cases) recorded the most cases, i.e. 58.0% of the country's total, followed by Haut-Katanga (4,502 cases), Sud-Kivu (3,525 cases) and Haut-Lomami (1,930 cases). Together, these provinces account for almost 95.1% (27,409 cases) of the cases recorded in the country between week 1 and week 49 of 2024.

Since the beginning of 2024, the country has been experiencing an outbreak of Mpox. The epidemic affects all 26 of the country's provinces. In 2024, the M-POX situation in the country worsened. Between the beginning of 2024 and January 20, 2025, a total of 69,158 suspected cases and 1,392 deaths were reported, with a case-fatality rate of 2.0% (Source MoH). Until January 2025, the most 3 affected provinces were Bas-Uele, Equateur, Haut-Katanga, Haut-Lomami and Haut-Uele.

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

Cases of cholera are concentrated in IDP sites. These cases are particularly concentrated in areas of the sites where there are new arrivals, most of whom are forced to live on the outskirts of the sites, where they have limited access to latrines and water. Hygiene and sanitation practices are also a problem and contribute significantly to the rapid spread of the disease. The reports indicate major gaps in access, especially for newly displaced populations:

- The lack of latrines in the new blocks - some created for new arrivals, but many still under construction - encourages open defecation.
- Many new arrivals have not received any kits, including tarpaulins resulting in poorly constructed shelters and domestic sanitation (including stagnant water contaminated by faecal matter).
- New arrivals are forced to set up shelters on the outskirts, where existing WASH facilities are limited.
- The highest-risk areas are concentrated in the health zones of Goma, Nyiragongo, Kirotshe, and Muweso and in the IDP sites of Bulengo, Rusayo, Lushagala, Kizimba and Zaina.

### **PROTECTION, GENDER AND INCLUSION (PGI)**

As a result of the resurgence of violence, crime and attacks on civilians, there has been a sharp increase in deaths and injuries. There is also gender-based violence, the recruitment and use of children in armed groups, forced displacement and restrictions on freedom of movement, and mental and psychosocial distress among those affected. The majority of IDPs in North and South Kivu are women and children under the age of 5.

The DRC is a source, transit and destination country for human trafficking. The armed groups that control certain areas, particularly in the east of the country, are the main perpetrators of this practice. Common forms of exploitation include forced labour, forced prostitution, forced marriage of women and girls and domestic servitude. Children are employed in agriculture, mining, smuggling and begging. Although data on women and children exploited in the DRC is not available, estimates suggest that Congolese women account for around 68% of trafficking victims, while children account for 61% (Source: [IHD](#)).

## **MIGRATION**

Given the growing number of displaced people in North and South Kivu province, the needs of the displaced continue to multiply, making it all the more urgent to step up activities in specific sectors. Humanitarian service points (HSPs) are essential along migration and displacement routes. In this way, these people can safely access services such as healthcare and first aid, food, water, psychosocial support services (PSS), information and guidance, regardless of their status.

The collection and analysis of data on humanitarian needs in the DRC, and in North/South Kivu in particular, benefits from the presence of key partners with significant mobilization and staff capacities, interlocutors (such as key informants or community leaders) and established, standardized methods. However, the frequency of data collection is rarely constant, and changes according to the prioritization of each crisis.

## **Operational risk assessment**

The following risks are regularly monitored and discussed with the DRC Red Cross coordination team:

- Insufficient funding for the project. To date, only 3.5% of the financing needs have been covered. A resource mobilization strategy has been drawn up and is currently being implemented. The armed crisis in eastern DRC is one of the forgotten crises, and humanitarian funding is currently limited. The priority needs observed on the ground in terms of access to drinking water, food, shelter and basic healthcare are pressing. However, given the current lack of funding, the operation will not be able to make an effective contribution to the humanitarian response in these areas.
- The security situation in the east of the DRC remains volatile. Insecurity persists in the provinces of North and South Kivu. This situation could lead to regional conflict, taking into account the interests of each country.
- After a few months of calm, clashes between the Armed Forces of the DRC (FARDC), their allies and elements of the March 23 Movement (M23) resumed in early January 2025, with a new escalation of fighting, plunging the provinces of North and South Kivu into a sudden crisis that exacerbates the humanitarian problems of the 4.6 million IDPs already registered in the east of the Democratic Republic of Congo (DRC).
- National demonstrations in response to the M23 offensive were called for January 29. Demonstrations took place across the country, including undisciplined demonstrations in the capital Kinshasa. Peaceful demonstrations took place in Bukavu (South Kivu province), Kananga (Kasaï-Centre province), Kisangani (Tshopo province) and Lubumbashi (Haut-Katanga province).
- Despite new clashes in North Kivu and heavy fighting in South Kivu late 8 and early 9 February, a lull in the conflict was observed late 9 and early 10 February. A situation that comes the day after a call by regional leaders for the establishment of a ceasefire within five days in the east of the DRC. Leaders of nations in East and Southern Africa, including DR Congo and Rwanda, meet in Tanzania on 8 February and issued a joint declaration calling for ceasefire and resumption of talks to end DR Congo's eastern-region war; defence ministers to meet within five days to make plans for security, resumption of humanitarian aid deliveries and reopening Goma airport.
- Fearing a regional conflagration, leaders in Southern and East Africa called for an "immediate and unconditional ceasefire", the implementation of which within five days has been entrusted to the chiefs of staff of the East African Community (EAC) and the Southern African Development Community (SADC). The

joint summit of these two organizations, which was held in Tanzania with the participation of Congolese President Felix Tshisekedi (via video link) and Rwandan President Paul Kagame, also "reaffirmed its solidarity with the DRC and its unwavering commitment to support it in its quest to preserve its independence, sovereignty and territorial integrity."

- In North Kivu clashes between the M23 and Coalition for movements of change (CMC) militant group were reported on 9 February in several localities, including Lubwe-Sud (Tongo grouping) and Mashigha (Bukombo grouping) located in Rutshuru Territory. On 8 February, the M23 had occupied the locality of Bambo, taking advantage of the withdrawal of the CMC in other localities.
- Local authorities have implemented a curfew in Uvira, South Kivu, as of 8 February, citing the security situation. The measure published in a communique on 7 February applies until further notice and also prohibits the movement of vehicles to and from the city from 6:00 Pm. Only ambulances and security vehicles are allowed to transit. The measure may also aim to prevent public disorder and monitor the movement of the population to and from the city. Authorities will likely maintain an increased security presence to ensure adherence to the curfew. Additional security patrols and checkpoints will likely prompt localized transport disruptions, notably at the entry points. Locals opposed to the measure may stage protests. There is a threat of confrontations at all related gatherings, particularly during the curfew.

## **B. OPERATIONAL STRATEGY**

### **Update on the strategy**

Through this emergency appeal, the IFRC aims to support the Democratic Republic of the Congo Red Cross (DRCRC) in addressing growing humanitarian needs caused by the ongoing armed conflict in the eastern part of the country and the resulting mass population movements. The IFRC's intervention strategy will continue to focus on assisting 500,000 of the most vulnerable people, prioritizing the following key areas: integrated assistance (shelter, food security, and livelihoods—including multipurpose cash transfers), health and WASH services, and protection and prevention.

Given the escalation of the conflict and increased needs across the Eastern DRC, this Emergency Appeal will be extended until 31 December 2025. A scenario analysis was conducted in February 2025, aimed to assess potential developments in the operational environment and adapt response modalities. This approach ensured that current and future humanitarian response operations remained adaptable and resilient to changes in the crisis. The methodology focused on exploring a broad range of possible future scenarios, each with distinct characteristics, rather than solely identifying probable risks (risk analysis) or predicting the most likely outcome (forecasting). This comprehensive analysis helped refine preparedness actions and response strategies to effectively address evolving humanitarian challenge.

This Emergency Appeal continues to be grounded on the overall Movement Response Plan that was developed by the DRC Red Cross, in collaboration with the ICRC and IFRC. The activities within this emergency appeal align with the priorities of this Plan and the associated crisis scenarios. The IFRC appeal integrates operational support, national coordination within DRC, and cross-border coordination—ensuring preparedness for continued displacement of populations from DRC into Rwanda, Burundi, and Uganda.

A revised 2024 [national plan for the IFRC network](#) in the country was finalized in August 2023, prior to the escalation of the current crisis. As part of this plan, the IFRC network supported the DRC Red Cross in implementing large-scale food security programs in eastern DRC and in the Pilot Programmatic Partnership (PPP) with DG ECHO, which strengthened its preparedness and response capacities. These two programs, along with other initiatives, have strengthened overall humanitarian response capacity to deal with the current emergency situation. The plan has been

revised ([INP 2025](#)) to integrate ongoing emergency operations and long-term initiatives, serving as a platform for coordination, advocacy and resource mobilization.


### Anticipation and Adaptation to Climate Risks


The primary climate-related risks in DRC include flooding, landslides, and rising water levels. To mitigate these risks, Red Cross volunteers will continue disseminating early warnings within their communities. The DRC Red Cross will also pursue disaster preparedness activities in partnership with the ECHO Pilot Program (ECHO PPP), implement tree-planting initiatives, and strengthen community resilience efforts with the financial support of bilateral partners.

## C. DETAILED OPERATIONAL REPORT

### STRATEGIC SECTORS OF INTERVENTION

Due to severe funding constraints, this Operations Update is only reflecting the sectors that have been prioritized for action. Additional resources are fundamental to scale-up this operation and kick-off services in the areas of Shelter, Multipurpose Cash

	<b>Shelter, Housing and Settlements</b>	Female > 18: 0	Female < 18: 0
		Male > 18: 0	Male < 18: 0
<b>Objective:</b>	Communities in disaster and crisis affected areas restore and strengthen their safety, wellbeing and longer-term recovery through shelter and settlement solutions		
<b>Key indicators:</b>	<b>Indicator</b>	<b>Actual</b>	<b>Target</b>
	# of people who received shelter support	0	155,000
N/A			

	<b>Livelihoods</b>	Female > 18: 38,688	Female < 18: 41,912
		Male > 18: 32,736	Male < 18: 41,664
<b>Objective:</b>	Communities, especially in disaster and crisis affected areas, restore and strengthen their livelihoods		
<b>Key indicators:</b>	<b>Indicator</b>	<b>Actual</b>	<b>Target</b>
	# of people who have received livelihood support (essential inputs/materials/tools for farm or livestock production, etc)	0	155,000




# of people who have received training in improved production practices and production risk management	0	1,000
# of households that received in-kind support (food) to meet their basic needs after being identified and processed for transfer	0	31,000

The priority activities planned in terms of livelihoods have not been implemented due to the lack of funding for the operation. However, DRC Red Cross is implementing a food distribution project for Internally Displaced Persons (IDPs) and host families in the provinces of North Kivu and Tanganyika, with the intention of extending this to the provinces of South Kivu and Ituri. A third phase of this emergency project has been underway since August 2024. By the end of January 2025, the DRC Red Cross, with IFRC technical support and USAID/BHA funding, had provided food assistance to 13,863 households, or 92,572 displaced persons and host families in North Kivu.



Mealtime at an orphanage on the Lwashi site during a Red Cross monitoring mission, Goma. Photo IFRC

 <b>Multi-purpose Cash</b>	Female > 18: 0	Female < 18: 0	
	Male > 18: 0	Male < 18: 0	
<b>Objective:</b>	Households are provided with unconditional/multipurpose cash grants to address their basic needs		
<b>Key indicators:</b>	<b>Indicator</b>	<b>Actual</b>	<b>Target</b>
	# of households who have successfully received cash or voucher support for their basic needs and who meet the agreed minimum expenditure basket after being identified and processed for transfer	0	31,000
N/A			

 <b>Health &amp; Care</b> (Mental Health and psychosocial support / Community Health / Medical Services)	Female > 18: 128648	Female < 18: 111297
	Male > 18: 131,623	Male < 18: 117,753

<b>Objective:</b>	<i>Strengthening holistic individual and community health of the population impacted through community level interventions and health system strengthening</i>		
<b>Key indicators:</b>	<b>Indicator</b>	<b>Actual</b>	<b>Target</b>
	<i># of people benefiting from contextually appropriate health services</i>	432,791	500,000
	<i># of children &lt; 5 years of age who have been enrolled on a supplementary feeding programme from another agency following assessment by the National Society</i>	17,326	100,000
	<i># of home visits carried out to raise awareness of health promotion and water, hygiene and sanitation</i>	23,169	100,000
	<i># of people reached by messages on nutritional choices and/or food preparation</i>	17,326	250,000
	<i># of people reached by community volunteers as part of health and hygiene promotion in response to an emergency situation</i>	489,321	500,000
	<i># of people in the target population who have benefited from psychosocial support services</i>	21,591	25,000
	<i># of DRC Red Cross volunteers and staff who received psychosocial support services</i>	315	1,100

### **Community health**

Red Cross volunteers are continuing to implement RCCE activities (Risk Communication and Community Engagement) activities. A total of **489,321** people were reached by the health and hygiene promotion activities. Between August 2024 and January 2025, 6 door-to-door awareness-raising sessions on Mpox prevention were carried out by the DRC Red Cross with technical and financial support from the IFRC in the Kashaka-Shabindu sites in North Kivu. These awareness-raising sessions were carried out by 55 volunteers and reached 2,690 households for a total of 22,106 people, including 3,933 men, 5,409 women, 6,258 boys and 6,506 girls. In view of the high risk of epidemics, 9 cholera surveillance teams have been set up in Goma by the Red Cross.

### **Mental health and psychosocial support**

Red Cross teams provided psychosocial support to 122 survivors of sexual violence, including 89 in North Kivu and 33 in South Kivu, through listening centers. At least 21,591 people in households and 351 volunteers received psychosocial support.

### **Medical services**

In January 2025, technical and logistical support in terms of body bags and personal protective equipment was provided by the ICRC and the International Federation to DRCRC teams to collect remains from the streets of Goma, and then to ensure dignified treatment of these dead in accordance with good forensic practice.



## Water, Sanitation and Hygiene

Female > 18:  
129,600

Female < 18:  
140,400

Male > 18:  
105,600

Male < 18:  
114,400

<b>Objective:</b>	<i>Ensure safe drinking water, proper sanitation, and adequate hygiene awareness of the communities during relief and recovery phases of the Emergency Operation, through community and organizational interventions</i>		
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Key indicators:	Indicator	Actual	Target
	# clean water points and water sources built/rehabilitated	0	10
	# of households supplied by DRCRC with an improved protected drinking water source (according to WHO and Sphere standards)	23,761	25,000
	# of households reached with water treatment chemicals and water storage equipment	16,217	25,000
	# of households supplied by the DRCRC with an improved sanitation facility within 50 meters of their home	14,376	25,000
	# of households that received cash assistance for water, sanitation and hygiene after being identified and processed for transfer	0	31,000

The Red Cross volunteers reached at least 54,357 people, helping to alleviate the need for water, hygiene and sanitation. They contributed to the support of 23,761 households with an improved and protected drinking water source, of which 16,217 received aqua tabs. In addition, the DRC Red Cross has started the construction of 3 latrines with 4 doors each in 3 IDP sites in Idjwi North in South Kivu in view of the urgent needs in these sites. A total of 14,376 households are supplied by the DRCRC with an improved sanitation facility within 50 meters of their home



## Protection, Gender and Inclusion

Female > 18:  
22,297

Female < 18:  
25,131

Male > 18: 18,829

Male < 18: 26,061

<b>Objective:</b>	<i>Communities identify the needs of the groups most at risk and the particularly disadvantaged and marginalized as a result of inequality, violence, discrimination, exclusion and other forms of non-respect for human rights and respond to their specific needs according to the DAPS principles.</i>		
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Key indicators:	Indicator	Actual	Target
	# of people trained to implement minimum PGI standards	72	1,100
	# of people reached by protection, gender and inclusion services	92,318	155,000

A total of 72 volunteers trained in PGI have contributed to a number of achievements in the field. They reached **92,318** people through PGI services. During the reporting period the operation, activities on prevention and response to sexual exploitation and abuse (PSEA) were carried out with the target communities. Particular

emphasis was placed on identifying protection mechanisms. Several activities were organized, and the members of the communities reached were very pleased with the way in which the Red Cross had carried out the activities.


- **Lubero** : Identification and referral of 03 cases of rape (women). Medical care provided through referral. 40 dignity kits provide to 40 adolescent girls, awareness raising on child protection, documentation of 40 cases of child protection, workshop with young adolescents on early marriage with 20 girls and 15 boys

❖ **Challenges**

- Increased protection issues: family separation, GBV, cases of 1,612
- Limited ICRC and IFRC funding to the National Society will not be able to cover the needs, lack of humanitarian access to beneficiaries, gap in the current response package (e.g. dignity kits).

❖ **Planned activities**

- Update Appeal to integrated specialized protection activities
- Carry out PGI mainstreaming during food security distribution

 <b>Migration</b>	Female > 18: 4,584	Female < 18: 1,661
	Male > 18: 3,338	Male < 18: 1,778

**Objective:** *Specific vulnerabilities of displaced populations and people on the move are analysed and their needs and rights are met with dedicated humanitarian assistance, protection, and humanitarian diplomacy interventions, in coordination with relevant stakeholders.*

	<b>Indicator</b>	<b>Actual</b>	<b>Target</b>
<b>Key indicators:</b>	<i># of migrants and displaced persons reached with humanitarian assistance and protection services</i>	11,361	155,000
	<i># of HSPs providing humanitarian assistance and protection to migrants and displaced people</i>	1	6

The Red Cross team established a HSP providing humanitarian assistance and protection to 11,361 migrants and displaced people. As part of the ECHO PPP project, activities are still ongoing through 5 HSPs in Uvira in South Kivu including:

- Psychosocial care for people affected by natural disasters, cases of GBV and other people who come for psychosocial support.
- Referring cases to the SOSAME psychiatric centre for comprehensive support to help them regain a stable emotional state
- Follow-up of cases referred to the SOSAME psychiatric centre, to measure the severity of the mental health of referred cases.
- Supervision of volunteer HSP team by building their capacity to deal with various issues and difficult cases during clinical interviews.
- Raising awareness during antenatal and postnatal consultations in various health areas in the town of Uvira.
- Adopting an ongoing approach to improving the Humanitarian Service Points (HSPs) and the therapeutic framework.



## Community Engagement and Accountability

<b>Objective:</b>	<i>People and vulnerable communities affected by crisis are empowered to influence the decisions that affect them and trust the IFRC network to service their best interests.</i>		
<b>Key indicators:</b>	<b>Indicator</b>	<b>Actual</b>	<b>Target</b>
	<i># of complaints/feedback received through feedback mechanisms</i>	6,882	N/A
	<i>% of complaints/feedback on the operation that are responded to through established community communication</i>	68%	70%

In the implementation of the operation, community engagement and accountability (CEA) represents a cross cutting approach allowing for greater community support for actions/interventions. CEA activities enabled at least **374,688** people. A total of **6,882** community feedback were reported and processed by Red Cross teams. Overall, there were 23.1% of questions (about food needs, NFI kit, and diseases). 37% of the feedback were requests for food assistance, need for NFI kits, toilets, water). 21.6% were rumours and beliefs about food assistance, illnesses) and 18.3% were thanks and encouragement.

In January 2025, awareness-raising on human rights and humanitarian principles and values was carried out through the organization of community meetings in 4 IDP sites of Kitalaga, Bugeri, Mutshibwe and Bulenga in the Minova health zone with the participation of 80 leaders and heads of households, including 65 men and 15 women. In addition, the Red Cross organized a public radio program in the Bugeri IDP site with the participation of 178 IDPs, including 103 men and 75 women. The themes discussed focused on the components of the Red Cross Movement and its missions, as well as raising awareness on the care of people affected by sexual violence.



## Risk Reduction, climate adaptation and Recovery

Female > 18:	7,240	Female < 18:	1,042
Male > 18:	12,221	Male < 18:	1,242

<b>Objective:</b>	<i>Communities adopt climate-smart farming practices.</i>		
<b>Key indicators:</b>	<b>Indicator</b>	<b>Actual</b>	<b>Target</b>
	<i># of community members targeted by the DRCRC who participate in risk reduction initiatives</i>	21,745	155,000

A total of 21,745 community members targeted by the Red Cross participated in risk reduction initiatives of tree planting in South Kivu. As part of the emergency appeal, no harm reduction activities are being deployed in North Kivu. This is due to the low level of funding for this operation. In South Kivu, however, activities are underway with the support of Red Cross partners in Uvira territory (Fizi, Baraka, Kalehe Centre and Nundu).

## Enabling approaches



### National Society Strengthening

**Objective:** *The National Society is empowered to lead its own development during emergencies with the coordinated support of partners, bearing in mind a longer-term perspective.*

	Indicator	Actual	Target
<b>Key indicators:</b>	<i>The National Society has improved its preparedness, contingency and response plans following recommendations and evidence from the operation</i>	Ongoing	Yes
	<i>The National Society is part of the government-led emergency coordination platforms.</i>	Yes	Yes
	<i>The National Society is part of the official emergency response coordination platforms of the DRCRC, the interagency and the international community.</i>	Yes	Yes
	<i># of volunteers involved in the response operation who have increased their response and operations management skills</i>	351	1,100
	<i>% of volunteers mobilized covered by sickness, accident and death benefits</i>	100%	100%

There has been a revision of the budget in relation to key activities that are being implemented. A total of 351 volunteers are currently active.

With millions displaced, the demand for assistance has greatly increased, stretching the capabilities of the DRC Red Cross. Operational challenges such as lack of funding, connectivity issues, limited storage space and security concerns have hindered efficient operations. However, through strategic interventions and collaborative efforts, there have been strides in strengthening the organization's capacity to manage the crisis. Continued support and resource mobilization have been essential and ongoing for the DRC Red Cross to meet the growing demands and effectively aid those affected by the humanitarian crisis in North and South Kivu.

Supporting DRC Red Cross continues to be a key priority for IFRC and its partners to strengthen the work of DRC RC further so they can continue to operate and support the response across the country and their collaboration with other agencies such as UN. The IFRC and Movement partners have supported DRC Red Cross with logistic, financial, technical and operational resources to ensure the National Society can continue operating. IFRC pledged to continue this support through the Emergency Appeal and the Unified Plan for DRC.

#### ❖ Challenges

- In South Kivu, difficulty accessing Minova sites due to insecurity and poor road conditions.
- Increased population movements. Some people are being moved to different locations in a short span of time, as the situation worsens. This has had an impact not only on the level and type of need, but also on the targeting of beneficiaries.
- Access to humanitarian services is very limited in Goma



## Coordination and Partnerships

Objective:	<i>National Societies are members of relevant national donor platforms and forums and participate regularly.</i>		
Key indicators:	Indicator	Actual	Target
	<i># of coordination and partnership meetings on the operation held with partners and stakeholders.</i>	24	64
	<i># of joint monitoring missions carried out (DRCRC-IFRC, PNS, ICRC)</i>	4	2
	<i># assessments carried out (initial need/final assessment) (DRCRC-IFRC, PNS, ICRC)</i>	2	2
	<i># surveys carried out (KAP, PDM/Satisfaction) (DRCRC-IFRC, PNS, ICRC)</i>	1	2
	<i># lessons learned workshops/mid-term review</i>	0	2

In view of the continuing deterioration in the security situation in North and South Kivu, the Red Cross Society of the Republic of Congo (DRCRC), the International Committee of the Red Cross (ICRC) and the International Federation of Red Cross and Red Crescent Societies (IFRC) held a meeting of the strategic platform (mini summit) on 23 January 2025. The aim of the meeting was to provide a framework for the Red Cross Movement's response by consolidating information on the capacities available on the ground and planning activities in response to the crisis, which have yet to be determined in more detail. It also aimed to strengthen the Red Cross' Movement coordination mechanisms already in place through the Movement Coordination Agreement (MCA) and identify the necessary adjustments.

The DRCRC, the ICRC and the IFRC are doing their utmost to maintain an effective and coordinated humanitarian response to meet the most urgent needs of civilians affected by the crisis. They are working alongside other humanitarian actors, some of whom have been forced to reduce their teams to a strict minimum because of the uncertain security situation.

Following the issuance of the Executive Order on Reevaluating and Realigning United States Foreign Aid, the State Department and USAID communicated on January 24, 2025, that all ongoing grants were suspended as of that date. After this review, activities may either resume, be modified and resumed, or be terminated. The 90-day pause will have a great impact on food assistance to displaced population given the current situation in the eastern part of DRC.

The international appeal on population movement launched in February 2024 is crucial, as population displacement often exacerbates food security problems. Continued mobilization of resources to support this project could make a significant contribution to meeting the needs associated with these displacements and ensuring sustainable and effective aid. Only 3.5% of emergency appeal funding covered.

The IFRC Emergency Appeal combines operational support, coordination in the DRC, and cross-border coordination. IFRC is in the process of setting up cross-border coordination to contribute to the response to the current situation of population movements from the DRC to Rwanda, Burundi, Uganda, the Republic of Congo, etc.

The NS coordinates monthly technical meetings with all partners with ICRC as co-convenor within the framework of the Sevilla 2.0 agreement. External coordination with OCHA and the government is in place and informs on the situation and activities from other stakeholders. L3 agreement is in place and covers North Kivu, South Kivu and Tanganyika. Strengthening of the movement coordination in place with more regular communications and meetings



## Secretariat Services

### Objective:

*The IFRC Secretariat and National Societies use their unique position to influence decisions at local, national, and international levels that affect the most vulnerable people.*

### Key indicators:

Indicator	Actual	Target
<i>The resource mobilization strategy has been completed and implemented</i>	1	1
<i>A risk matrix is established and regularly updated.</i>	1	1
<i># financial audits carried out</i>	0	1

The support of the staff of the IFRC delegation in Kinshasa continues.

### Administration and Welcome

- Continuous Support for visa processes and travel arrangement for visitors and staff/surge deployed (Ops team (02 persons))
- Secure accommodation and transportation for visiting/deployed personnel.

### Communication

- Key messages shared with NS and validated draft media plans and budget related shared for validation. Videos are released after editing and cleaning

### PMER/IM

- Standard dashboards for Epic/CEA and feedback are in place
- Mapping of the various project processes
- Internal relocation sites georeferenced and mapped
- Contact and discussion on data reporting process with PMER and IM teams of 2 branches with sharing with management

### Safety & Security

- Security brief is organized for staff joining the operation.
- Coordination with GSU
- A security risk assessment is regularly carried out in North Kivu and Sud Kivu by the ICRC, with contributions from the DRC Red Cross and the IFRC



- Planning of security join mission in Minova and other areas (NS, IFRC and ICRC)

#### Human Resources

- Recruitment of a PGI Delegate
- Recruitment of a senior health officer
- Deployment of regional head of security Unit
- Deployment of regional finance officer

## D. FUNDING

The total Appeal funding stands at CHF 1,047,308 (3.5 per cent funded) with a DREF loan of CHF 750,000.

### II. IFRC Operating Budget Implementation

Thematic Area Code	Budget	Expenditure	Variance
AOF1 - Disaster risk reduction	0	322,049	-322,049
AOF2 - Shelter	155,031	16,541	138,490
AOF3 - Livelihoods and basic needs	74,307	4,310	69,997
AOF4 - Health	111,927	131,449	-19,522
AOF5 - Water, sanitation and hygiene	40,920	43,580	-2,660
AOF6 - Protection, Gender & Inclusion	11,141	9,983	1,158
AOF7 - Migration	0	0	0
SF11 - Strengthen National Societies	289,270	73,177	216,094
SF12 - Effective international disaster management	0	0	0
SF13 - Influence others as leading strategic partners	78,864	42,686	36,178
SF14 - Ensure a strong IFRC	162,319	111,316	51,003
<b>Grand Total</b>	<b>923,779</b>	<b>755,090</b>	<b>168,689</b>

## Contact information

For further information, specifically related to this operation please contact:

### In the DRC Red Cross

- **Secretary General** Gloria Lombo, email: [sgcrrdc@croixrouge-rdc.org](mailto:sgcrrdc@croixrouge-rdc.org), phone: +243856435031
- **Operational coordination:** Moise Kabongo Ngalula, Operations Director, email: [moise.kabongo@yahoo.fr](mailto:moise.kabongo@yahoo.fr), phone: +243 852387181

### In the IFRC

- **IFRC Regional Office for Africa DM coordinator:** Rui Alberto Oliveira, Regional Operations Lead, [rui.oliveira@ifrc.org](mailto:rui.oliveira@ifrc.org), +254 780 422276
- **IFRC Country Cluster Support Team:** Mercy LAKER, Head of Country Cluster Delegation- Kinshasa, [mercy.laker@ifrc.org](mailto:mercy.laker@ifrc.org), +243 853449555

### For IFRC Resource Mobilization and Pledges support:

- **IFRC Regional Office for Africa:** Louise Daintrey, Head of Strategic Partnerships and Resource Management; [louise.daintrey@ifrc.org](mailto:louise.daintrey@ifrc.org), +254 110 843 978

### For In-Kind donations and Mobilization table support:

- **IFRC Africa Regional Office for Logistics Unit:** Allan Masavah, Head of Africa Regional Logistics Unit; email: [allan.masavah@ifrc.org](mailto:allan.masavah@ifrc.org); Tel: +254 113 834921

### For Performance and Accountability support (planning, monitoring, evaluation, and reporting):

- **IFRC Africa Regional Office:** Beatrice Okeyo, Regional Head PMER, and Quality Assurance; email: [beatrice.okeyo@ifrc.org](mailto:beatrice.okeyo@ifrc.org); Tel: +254 732 404022

### Reference documents



Click here for:

- [Emergency Appeal](#) and [Operations Updates](#)
- [Operational Strategy](#)

## How we work

All IFRC assistance seeks to adhere the **Code of Conduct** for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGOs) in Disaster Relief, the **Humanitarian Charter and Minimum Standards in Humanitarian Response (Sphere)** in delivering assistance to the most vulnerable, to **Principles of Humanitarian Action** and **IFRC policies and procedures**. The IFRC's vision is to inspire, encourage, facilitate and promote at all times all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.