2023 DEMOCRATIC REPUBLIC OF THE CONGO REGIONAL REFUGEE RESPONSE PLAN YEAR END REPORT

954,500
2023 targeted refugee population

1,038,400
2023 targeted host community members

605 M
2023 total financial requirements

69
Partners involved

Cover photo: A Congolese mother and her two children arrived in Uganda earlier this year. She is now battling to restart her life on the plot of land she was allocated in Nakivale settlement. @Yonna Tukundane/UNHCR

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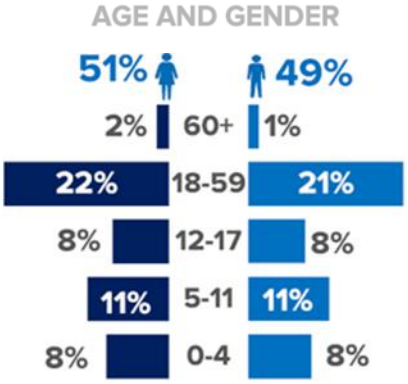
Key Figures in 2023

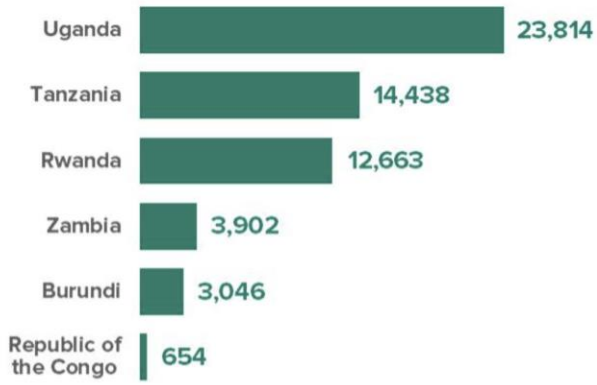
873,340

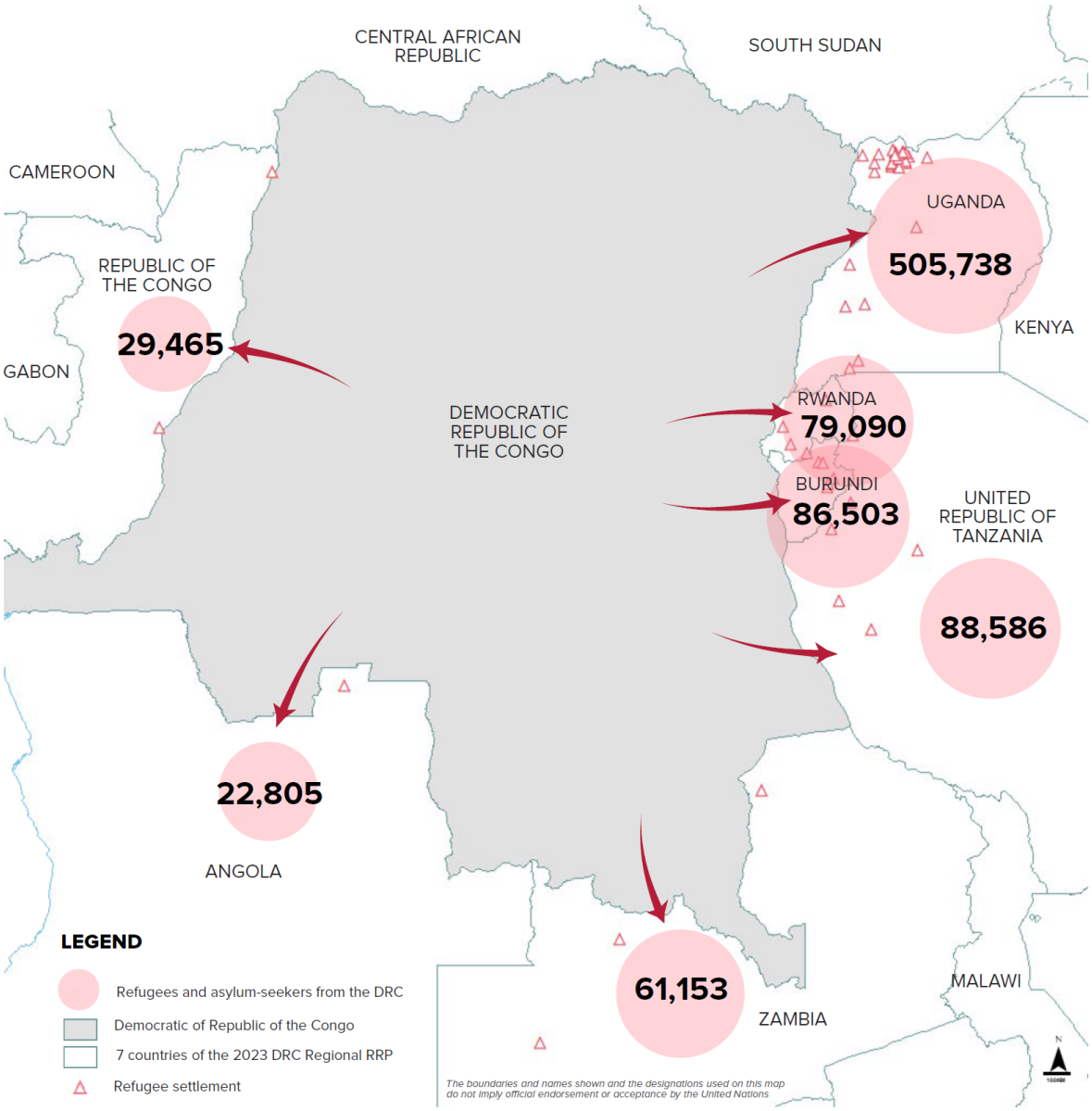
Refugees and asylum-seekers in 7 host countries



58,517

New Arrival in 7 host countries





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Achievements Against Targets

Sector	Progress		Regional target
Protection	873,340 refugees registered on individual basis	>100%	801,754
	140,180 refugees receiving legal assistance	>100%	68,129
	36% of active female participants in leadership structures	75%	48%
	1,380 of refugees who voluntarily returned to the DRC	32%	4,270
	25,829 refugees submitted for resettlement*	>100%	20,740
Child Protection	76,746 children whose birth is registered	>100%	64,412
	5,972 children at high risk with best interests procedure undertaken	77%	7,766
	9,185 individuals trained on child rights and child protection	38%	24,211
Gender-Based Violence (GBV)	100% of reported incidents where survivors receive services	>100%	94%
	7,976 trained participants who increased their GBV knowledge	13%	62,440
Education	38,883 refugee children enrolled in early childhood education	96%	40,380
	158,408 refugee children enrolled in primary education	>100%	132,001
	31,905 refugee children enrolled in secondary education	94%	34,112
Food Security	600,035 people receiving food assistance (in-kind or cash)	79%	761,645
Health & Nutrition	3,597 children aged 6 to 59 months provided with treatment of severe acute malnutrition	>100%	1,587
	36,392 children aged 9 months to 5 years who received a measles-containing vaccine	89%	41,090
Livelihoods & Resilience & Socioeconomic Inclusion	130,640 people receiving livelihood support	50%	258,900
Shelter & Non-Food Items (NFIs)	35,919 people receiving emergency shelter	41%	86,930
	179,640 households reached with NFIs	>100%	159,929
	107,009 women and girls receiving sanitary material	42%	253,038
Water, Sanitation & Hygiene	18 average litres of potable water available per person per day	86%	21
	69% of households with access to soap	71%	97%
	64% of households with household latrine/toilet	93%	69%

Country Achievement Highlights

Angola

Notable progress in 2023 includes the resumption of registration and documentation for existing refugees prior to 2015 and the automatic recognition of pending asylum seekers as refugees from the same period. It is important to note that approximately 40 per cent of refugees, approximately 9,400 individuals from DRC who arrived in Angola during the 2017 mass influx from the Kasaï region, are not presently included in the registration process. UNHCR continues to advocate for the inclusion of refugees in Lunda Norte and the reestablishment of a functional asylum system and provide support to vulnerable refugees and asylum seekers in need.

A joint project between UNHCR Angola/DRC and IOM Angola/DRC resulted in 605 refugees being voluntarily repatriated to the DRC, 61 officers from key ministries from Angola and DRC were trained on GBV and child protection case identification and response and 212 border monitoring police officers from Angola were trained in the international protection of refugees and strengthening the asylum system.

About 3,000 child refugees and asylum seekers benefited from educational support, which includes 1,593 students for primary school, 256 students for secondary school, 22 students for higher education in Lovua settlement, and 185 families received educational support including tuition and school materials in Luanda.

Refugees from the DRC in Musasa refugee camp cutting a bar of soap. ©UNHCR: B/Ntwari

Burundi

Cash assistance continued to be a priority assistance modality or tool to deliver assistance. Cash for energy and hygiene was distributed through the voucher system in the refugee camps, and cash-in-hand assistance was provided to refugees in the refugee camps to purchase briquettes. Through cash for livelihoods, refugees were empowered to run income generating activities hence enabled them to become self-reliant.

Significant progress was made with regards to housing and livelihoods through collaboration between the government, UN agencies and development actors in housing and livelihood interventions. The Burundian government allocated 60 hectares of land for the construction of a sixth refugee camp and small solar power plants were installed in refugee camps. Authorities also facilitated the inclusion of some refugees in joint livelihood programs within and outside the refugee camps, offering access to employment and supplementing the dwindling humanitarian assistance and reduced food rations.

Country Achievement Highlights

Republic of the Congo

While no major influx occurred between January and December, the deteriorated security situation in Kwamouth Territory (DRC) lead to further internal forced displacements in Mai-Ndombé and other provinces in the DRC. Continued advocacy led to prima facie recognition of the DRC asylum-seekers fleeing intercommunal violence in Mai-Ndombé province (DRC), who arrived in Plateaux in 2018 and Pool in 2022.

In November 2023, various stakeholders including the Government, UN agencies, NGOs and donors worked together to devise an interagency contingency and response plan for a future refugee influx, particularly from DRC, where elections were slated in December 2023.

UNHCR and UNFPA joined forces to respond to gender-based violence and implement reproductive health, in refugee hosting areas of the Plateaux, Pool and Likouala departments. In the Likouala department, this initiative has supported five health posts and increased the quality and reach of services where both agencies are working together such as at the new Bétou hospital (up-graded from health centre).

The mother of a newborn child receives the birth certificate from PFR in Nyabiheke refugee camp. @UNHCR Lilly Carlisle

Rwanda

Solutions continued to advance for refugees, with reinvigorated tripartite discussions between the Governments of Rwanda, DRC and UNHCR for the return of refugees from the DRC in Rwanda to the DRC and Rwandans in the DRC to Rwanda, launched in May of 2023 and ongoing technical discussions thereafter.

RRP partners invested in the livelihood sector to support refugees access business development skills, finance resources, productive assets and graduate out of poverty. In this regard, 2,015 refugees and members of the host community received loans from different financial institutions and partners to expand their businesses. Additionally, 1,099 refugees received a matching grant under the Jya Mbere project funded by the World Bank, where more than 4,000 jobs are estimated to have been created for refugees under through the project.

UNHCR and Prison Fellowship Rwanda (PFR) redoubled efforts in 2023 to address late birth registration among protracted refugees. These efforts are part of the commitments made by the Government of Rwanda on civil registration during the GRF and the High-Level Segment on Statelessness. Through these joint efforts, the birth registration rate among the over 45,000 refugees born in Rwanda, irrespective of their age, has successfully increased from 74% at the end of 2022 to 93% by end of 2023. Further, the birth registration coverage among refugee children below 5 increased from 91% at the end of 2022 to 96.5% by the end of 2023. Additionally, all new-born refugee babies across all five refugee camps had their births registered in 2023.

Country Achievement Highlights

United Republic of Tanzania

Efforts continued to ensure refugee community structures are functional across the four layers of camp administration, with 49.2% of women participating in leadership management structures. A total of 2,810 persons with specific needs were supported through community-based inclusive rehabilitation: therapeutic sessions, assistive devices, psychosocial support, and non-food items or cash assistance. Child protection interventions continued to be prioritized, whereas 300 high-risk children, including unaccompanied and separated, were supported with the best interest procedures, 5,276 newborn children were registered, and 1,524 individuals were trained on child rights and child protection prevention.

The WASH Sector supplied water to transit and reception centers for new asylum seekers and allocated zones. Also, care and maintenance of the water supply system for the old caseload were conducted. Efforts were made to improve access to safe and dignified latrines by constructing sanitary facilities for new asylum seekers at the reception and transit centers. Awareness raising was conducted to ensure proper knowledge of proper hygiene practices to be safe from communicable diseases and distributed hygiene-enabling supplies.

Efforts were increased to promote self-reliance and social cohesion, with 1773 individuals, including 850 females, benefiting from livelihood and self-reliance support, including skill-building opportunities such as kitchen gardening and vocational training in various fields. The programme aims to enhance household dietary diversity, improve employability prospects, and aid the recovery process of victims of sexual and gender-based violence (SGBV) by providing practical expertise and income-generating opportunities.

Asylum seekers waiting for family reallocation at Nyarugusu Camp. @UNHCR Maimuna Mtengela

Uganda

As one of the six co-convenors of the 2023 Global Refugee Forum (GRF), the Government of Uganda took several important steps to prepare for the event, including hosting roundtable discussions with a wide range of stakeholders to discuss GRF pledges; hosting the regional IGAD (Intergovernmental Authority on Development) – EAC (East African Community) High-Level Ministerial Conference on Durable Solutions; and engaging 11 UN Agencies resulting in the UN Common Pledge 2.0. At a pre-GRF conference, the Government announced their pledges (on durable solutions, transition, environment, livelihoods and localization) and messages of solidarity and commitments were announced by donors, development and humanitarian partners, international and national NGOs, private sector, and refugees and host communities.

The second Education Response Plan for refugees and host communities (ERP II) was launched by the First Lady and Minister of Education and Sports on 24 May 2023. Led by the Ministry of Education and Sports (MOES), the ERP II is a product of the efforts of various stakeholders who have collaborated in the formulation of the plan, including the Education in Emergency Working Group, co-led by MOES, UNHCR and Finn Church Aid. The ERP II aims to ensure that 690,540 children, adolescents, and youth from the refugee and host communities, have access to sustained quality and inclusive learning opportunities annually.

Country Achievement Highlights

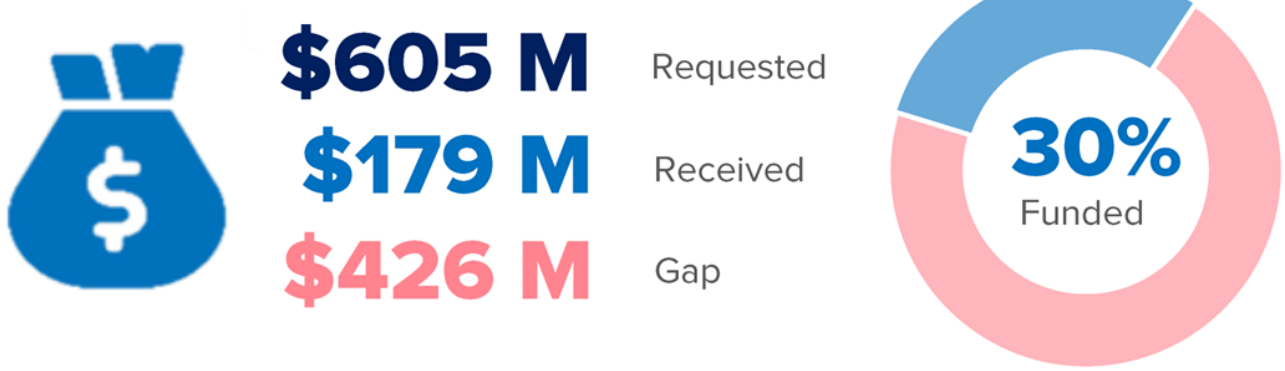
Zambia

Meheba and Mayukwayukwa refugee settlements have government run health posts, which provide the same services as the local population in remote parts of the country. Trauma counselling as part of broader psycho-social services, as well as mental health services are not offered. To this effect, RRP partners advocated for the deployment of a psychiatric specialist to the settlement by Ministry of Health, which is a work in progress that the partners will continue to follow-up. Procurement of supplementary drugs was reviewed to ensure that mental health drugs were also included. In addition, operational partners undertook to conduct a mental health study, under the auspices of the Ministry of Health, on the effectiveness of an evidence-based stepped care system for alcohol and other drug abuse problems among refugees from the DRC, under a randomized controlled trial. The outcome of the study will help to understand the increase of mental health related cases in Mantapala settlement.

In 2023 the Government of Zambia finalized its first ever National Refugee Policy, launching it on 19 January 2024. While implementation is only to begin in 2024, the policy and its implementation plan outlines a progressive approach to asylum and refugee management that reflects and articulates the central ambition of the UNHCR Global Compact on Refugees to include refugees in national systems and plans and provide greater support to the communities and countries hosting them. The policy, if effectively and efficiently implemented, will enhance the protection and rights of forcibly displaced communities and paves the way for harmonization in the regulatory framework aimed at improving refugee rights and finding local solutions. Before the promulgation of the National Refugee Policy, in the course of 2023, the government established an Inter-ministerial Steering Committee chaired by the Director at the Department of Resettlement in the Office of the Vice President. The Steering Committee is tasked with taking forward a coordinated and whole-of-government approach to deliver the revised Modernisation of Refugee Host Communities and Settlement Approach (MORHCSA) and elements of the program within the Implementation Plan for the National Refugee Policy.

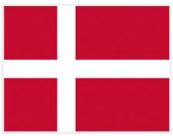
Mental health medicines being handed over to the Ministry of Health in Mantapala, @Mary Mumba, October 2023

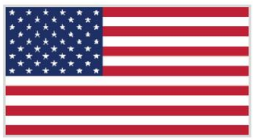
Financial Information



RRP Partners are grateful to donors who supported the seven DRC Regional RRP countries in 2023

Belgium | Canada | Denmark | European Union | Finland | France | Germany | Ireland | Japan | Netherlands | Norway | Sweden | Switzerland | United Kingdom | United Nations Peacebuilding Fund | United States of America | Private Donors





Consequences of Underfunding

Angola

In Lovua refugee settlement, the Refugee Housing Units (RHUTs) of some 150 households (accounting for 750 vulnerable refugees) haven't been repaired since 2018. In urban areas, the housing financial support for 67 households (an estimated 400 refugees) got cut leaving them extremely vulnerable and raising the risk of GBV.

Beneficiaries are only receiving 75 percent of the food ration previously provided in Lovua settlement. The reduction in the food basket is resulting in negative coping mechanisms amongst the refugee community and has raised concerns for the deterioration in food security and nutritional status of the refugees. The most vulnerable groups have been particularly impacted.

Only 60% of the total needs for medicines and medical supplies were met, which created a significant gap in health services. Currently, only half of the necessary number of doctors are available causing a longer wait time and lower service quality negatively impacting 8,926 refugees in Lovua settlement.

Burundi

Limitations were put on the rehabilitation and construction of adequate shelters for refugees. Shelters are dilapidated, especially in the oldest camps of Musasa and Kinama. In Bwagiriza, during the rainy season, the persistence of water on the surface means that the walls of the adobe houses are soaked with water, and the structures of the shelters are rotten, causing the houses to collapse. The granular soil makes it difficult to secure the poles used to build the shelter walls.

A total 55 classrooms used by refugee children (24 in Bwagiriza and 31 in Kavumu) are constructed in wood timber and are supposed to be replaced. However, only 10 classrooms could be prioritized, leaving 45 in a very bad condition putting learners at risk of accidents caused by bad weather. Other classrooms remain overpopulated – the average ratio students/classroom is 90. There is a need of 193 additional classrooms to achieve a pupil/classroom ratio of 50.

Republic of the Congo

Medical support to health facilities in refugee hosting areas was downsized. In January 2023 only three health facilities were supported while in January 2022 still ten received support. Priority was given to providing access to primary healthcare in remote and destitute rural areas where most of the refugees are hosted, and to strengthen their inclusion into the health system throughout the country.

In total 59 volunteer teachers in public schools attended by refugees stopped receiving allowances. In addition, the allowances granted by the Lisungi national social safety net project to 200 teachers in the Likouala department for two years also ended in October 2023. Volunteer teachers are waiting to be integrated into the civil service and continue to teach relying on contributions from parents.

The shelter sector remains one of the least funded sectors, despite the ever-increasing needs due to the 5,233 refugees who arrived in the Ngabé district in 2022. In the Plateaux departments, most of the the emergency shelters (RHU) were damaged due to the impact of climate change and need to be reinforced or replaced. This exacerbates the precariousness of refugees, forcing them to sleep in the open air, erect makeshift shelters and face crowded conditions.

Consequences of Underfunding

Rwanda

Cash-based transfers for food assistance to refugees in refugee camps were reduced in November. Instead of receiving 10,000 RWF a month, assistance for highly vulnerable refugees was reduced to 8,500 RWF and similarly 4,000 RWF was reduced to 4,250 RWF for moderately vulnerable refugees. This assistance represents just 63 per cent of the food basket requirements in Rwanda.

Aging WASH systems in refugee camps in Rwanda necessitate large resources for daily operation and maintenance. Constructing new facilities remains challenging. WASH KAP surveys were not conducted, resulting in lack of WASH systems monitoring. In addition, the impact of climate change in Rwanda, particularly through more intense rainfall, continues to impact WASH systems and services.

Refugees living in camps are supported with in-kind gas distribution (in Mahama and Mugombwa) or cash assistance for energy (in Kiziba, Kigeme and Nyabiheke) to meet their energy needs for cooking. Cash assistance for energy was only distributed until June 2023. The distribution of energy assistance will be targeted in 2024 whereby the least vulnerable refugee populations will not receive any support for cooking energy, potentially leading to refugees resorting to chopping down trees for firewood.

United Republic of Tanzania

Two health facilities in Nyarugusu settlement remained closed due to budget constraints, which has direct implications for an increased number of consultations at the facilities that were opened. It has led to overcrowding and long waiting times for refugees to receive consultation services due to a smaller number of healthcare workers. The reduced funds indirectly affect health service delivery by increasing mortality and morbidity, increasing the number of Severe Acute Malnutrition and low coverage of Antenatal care, Delivery at the facility level, as well as family planning and immunization services in the camps. The budget cuts have also affected the non-referral of nonemergency cases to the secondary and tertiary level hospitals due to prioritization of emergency cases. There is a shortage of medicines and medical supplies for health service delivery at the camp level.

Due to funding challenges, RRP partners have been unable to meet the NFI/CRIs sphere standards. For instance, 500gms of soap is supposed to be provided per person per month, however, now we are giving 250gms. The protracted caseload has not been able to receive CRIs apart from soap. Households that received the kitchen sets 4-5 years ago have been unable to get any support. Apart from the new arrivals, all women and girls of reproductive age are supposed to be regularly given sanitary materials, but this is not happening due to funding limitations. This situation is exacerbated by the encampment policy which results in limited livelihood opportunities.

GBV prevention, mitigation and response programming was affected by the budget cut. During the response programming, limited material support (dignity kit) was provided to GBV survivors to restore their dignity. Shortage of staff to support both Congolese new arrivals and the old caseload, as no recruitment of additional staff was made. Failure to establish a new GBV support centre for Congolese new arrivals located in Zone 14, hence distance factor affecting them to access GBV services located in other zones. Prevention activities, especially women empowerment activities were affected due to limited startup kits/materials, hence reduced enrollment of women and girls in the empowerment activities.

Consequences of Underfunding

Uganda

The roll out of a food prioritization exercise coupled with the reduction of food rations has had negative effects on refugee households. These households have resorted to reducing the number of meals a day or portions, which can in turn lead to health complications. Due to a continued severe lack of funding, only a limited number of needy families were reconsidered to start receiving assistance.

Primary services provided to GBV survivors, including mental health and psychosocial support (MHPSS) as well as medical follow-up, have been reduced (prevention and response). Furthermore, the services available are overstretched, affecting the quality of the response: a shortage of caseworkers across the settlements; GBV caseworkers often have 60-75 cases at a time, while the maximum should be 1:20.
The availability and level of WASH services has been reduced, attributed to the gap between the high rate of arrivals from the DRC and the lack of resources and need to increase the speed of infrastructure development in settlements. Rwamwanja and Nakivale settlements posted the lowest access levels with water access as low as 11 liters per person per day. The rise in the population number has strained the existing sanitation system, reducing latrine coverage in households, schools, and health centers.

Zambia

The extension of the national grid to public institutions in Mehebe, Mantapala and Mayukwayukwa settlements and surrounding areas, which has the aim to enhance protection, safety, productivity, and health for forcibly displaced and stateless people and improve the access to reliable, affordable, and sustainable energy to catalyze socio-economic development of the settlements, made limited progress and will require additional funding in 2024.

Underfunding for healthcare service provision to refugees and the host community culminated into increased disease burden and chronic healing time, which are detrimental to individual health status. The quality of treatment and care is compromised due to frequent stockouts of essential medicines and medical supplies, while the most vulnerable refugees would be unable to access services due to the rising healthcare cost.

DRC Regional Refugee Response Plan Partners

United Nations
Food and Agriculture Organization (FAO)
International Labour Organization (ILO)
International Organization for Migration (IOM)
United Nations Children's Fund (UNICEF)
United Nations Development Programme (UNDP)
United Nations High Commissioner for Refugees (UNHCR)
United Nations Population Fund (UNFPA)
United Nations Women (UN Women)
World Food Programme (WFP)
World Health Organization (WHO)
International NGOs
Japan Association for Aid and Relief (AARJ)
Action Africa Help (AAH)
Action Against Hunger (ACF)
Adventist Development and Relief Agency (ADRA)*
Africa Humanitarian Action (AHA)
Agency for Technical Cooperation and Development (ACTED)
ALIGHT
AVSI Foundation
Building Resources Across Communities (BRAC)
CARE International
CARITAS*
Catholic Relief Services (CRS)*
Danish Refugee Council (DRC)
Finn Church Aid (FCA)*
Finnish Refugee Council (FRC)
HelpAge International (HAI)
Hope Health Action East Africa (HHA)
Humanitarian Initiative Just Relief Aid (HIJRA)
Humanity & Inclusion (HI)
International Aid Services (IAS)
International Rescue Committee (IRC)
Jesuit Refugee Service (JRS)*
Lifeline-Childline Zambia (LLC)
Lutheran World Federation (LWF)*
Malteser International
Medical Teams International (MTI)
Norwegian Refugee Council (NRC)
The Oxford Committee for Famine Relief (Oxfam)
Peace Winds Japan (PWJ)
Plan International (PI)
Save the Children International (SCI)
Self Help Africa (SHA)
Street Child
Tutapona Trauma Rehabilitation (TTR)
War Child Holland (WCH)
WATER MISSION (WMT)
WeWorld-GVC
Windle International (WIU)
World Vision International (WVI)*
Zuid-Oost Azië (ZOA)
National NGOs
Ajuda de Desenvolvimento de Povo para Povo (ADPP)
Care and Assistance for Forced Migrants (CAFOMI)
CTEN (CTEN)
DanChurchAid (DCA)*
Dignity Kwanza – Community Solutions
Humane Africa Mission (HAM)
Hunger Fighters Uganda (HFU)
Igreja Evangélica Irmãos e Angola (IEIA)*
Impact Hope
KadAfrica
Prison Fellowship Rwanda (PFR)
Relief to Development Society (REDESO)
Transcultural Psychosocial Organization (TPO)
Women's Legal Aid Centre (WLAC)
Faith-based organizations
CARITAS Zambia (CZ)
Academia
Cavendish University (CU)
Kepler
Regional organizations
Inkomoko Business
Development actors
German Agency for International Cooperation (GIZ)

** These RRP Partners are also faith-based organizations.*

For more information, please contact the UNHCR Regional Bureau for Southern Africa at RBSAEXT@unhcr.org. The 2024-2025 DRC Regional RRP is available from Global Focus, and funding details for the DRC Regional RRP can be found on the Refugee Funding Tracker.