EASTERN DRC SITUATION

2 February 2026

UNHCR continues to provide shelters for newly relocated refugee families at the Busuma site in Burundi, helping them to find safety, comfort and dignity again. © UNHCR

HIGHLIGHTS

- **Recurrent attacks by non-state armed groups continued to drive forced displacement in eastern DRC, exacerbated by ongoing Cholera and Mpox outbreaks in parts of South Kivu province.**

- **Local authorities in South Kivu have appealed for humanitarian assistance for around 3,000 people who arrived in Kamanyola, from Uvira, following the recent withdrawal of AFC/M23. OCHA is establishing a plan to coordinate the response.**

  Health facilities in sites hosting new arrivals from the DRC in Burundi and Uganda since December 2025, are overwhelmed, with reported shortages in medical practitioners, essential drugs and equipment.

DRC Updates

- **Population Movements:** Clashes between non-state armed groups, pro-government forces (the Wazalendo) and the Congolese armed forces (FARDC) continued in eastern DRC, with civilian casualties, looting, and continuing forced displacement. The territories of Masisi, Rutshuru, Walikale, Nyiragongo, and Lubero, in North Kivu province were the most affected.

- In a series of attacks on 24 January in Musenge, Lubero territory, Allied Defence Forces (ADF) reportedly killed 25 people and torched homes, a health centre and a church, forcing the local population to flee toward Butembo. Similar attacks a week earlier in Mavwe-Mavwe around 35

km north of Butembo, reportedly caused seven deaths and displaced roughly 6,000 people according to local authorities.

- In South Kivu province, around 3,000 people, believed to be mostly Banyamulenge, fled Uvira to Kamanyola following M23's departure. Local authorities appealed for humanitarian assistance to the displaced. OCHA is facilitating the establishment of an inter-agency mechanism for coordinated assessment and response planning for the displaced population.

- **Protection monitoring:** In South Kivu province, UNHCR and its partners continued protection monitoring and operated hotlines at the Kavimvira Transit Centre in Uvira, enabling around 200 Burundian refugees to report incidents, amid heightened protection risks following the departure of Alliance Fleuve Congo (AFC/M23) from the zone.

- UNHCR also activated a hotline for urban refugees in Bukavu through the one-stop shop. Refugees using the hotline raised issues mainly related to medical care and information on voluntary repatriation for Burundian refugees.

- UNHCR and the National Refugee Commission (CNR) held an awareness session with 52 religious leaders in Lusenda camp in South Kivu, to ease anxiety, after seven refugee households left for Kalemie, Tanganyika province, following unfounded rumours of the imminent destruction of the camp.

- **Gender-based violence**: In North Kivu province, UNHCR conducted a field visit to Kasizi in Nyiragongo territory, to monitor ongoing cash assistance to 400 forcibly displaced women and girls, aimed at strengthening their protection and promoting self-reliance.

- **Health:** Disease outbreaks continued to compound an already fragile security situation in eastern DRC. In South Kivu province, health authorities reported more than 800 cholera cases since January 2026 in the Fizi and Muungano health zones, with nine of them from the Mulongwe refugee site, though no new cases were recorded during the week. An additional 273 cases were reported in the Nundu health zone, including seven in the Lusenda camp. UNHCR and its partners are supporting the response through mass awareness campaigns, and disinfection of affected and surrounding households. But the transfer of cases to Cholera treatment centres remains challenging due to lack of functional ambulances.

- Health authorities also reported 264 cases of Mpox in South Kivu since the start of the year, including eight in the Nundu health zone where the Lusenda camp is located, although no new cases have been reported in the camp itself.

- **Self-reliance:** UNHCR and its partner INTERSOS facilitated meetings with community-based protection structures in Buhumba, Kibumba, Kanyanja, Bweremana, Shasha, Sake, and Kalengera in North Kivu province, aimed at monitoring Village Savings and Loan Associations, which are increasingly supporting income-generating activities for forcibly displaced people and their hosts, while stimulating the local economy.

Regional Updates

- Since renewed violence in eastern DRC in 2025, the number of new arrivals in neighbouring countries is currently estimated at 236,900 people, with well over half of them hosted in Burundi. Arrivals have continued, though in very small numbers.

- Regular updates on the situation in Burundi are provided through the emergency CORE, available here. In addition communication material on the ongoing emergency in Burundi can also be downloaded from refugee media (Burundi photo package and b-roll for media). UNHCR's emergency appeal- requesting $47.2 Million over a four-month period covering December to March 2026 is available here.

Country	Total New Arrivals[1] since 1 Jan 2025
Burundi	142,157[2] (as of 31 December 2025, of whom 101,440 have arrived since 6 December)
Uganda	79,943 (as of 28 January 2026)
Zambia	3,204 (as of 14 January 2026)
Rwanda	7,487[3] (as of 20 January 2026)
Tanzania	4,103 (as of 28 January 2026)
TOTAL	**236,894**

Burundi:

- As of 28 January 2026, UNHCR has supported government-led relocations of 66,913 new arrivals of refugees from eastern DRC to four sites in Burundi, including 65,129 people to the Busuma site in Buhumuza province.

- Children account for more than 60 per cent of the refugees and asylum-seekers at the Busuma site, and face heightened protection risks, exacerbated by overcrowding and limited services.

- During registration, UNHCR identified 781 households at the Busuma site with at-risk children and 727 households with unaccompanied children. High levels of psycho-social distress have been reported among children and adolescents, linked to displacement, exposure to violence, and lack of structured activities. Child protection case management systems are active but operating beyond capacity. Child-Friendly Spaces and psychosocial support services are in place, though coverage remains insufficient compared to needs.

- UNHCR and its partners also identified 3,193 households headed by at-risk women. GBV risks remain high amongst these households, due to overcrowding, lack of privacy, inadequate shelter, and limited lighting. GBV prevention, mitigation, and survivor referral mechanisms are being provided but require urgent scale-up.

- UNHCR and its partners continued to provide health services to refugees at the site, with 4,310 children between 0–15 years vaccinated against various diseases, achieving a hundred per cent coverage in active zones as of 28 January 2026. Yet health services remain severely overstretched by the scale of the population at the site, with critical gaps in staffing, essential medicines, equipment and emergency referral capacity. Mortality trends indicate preventable deaths linked to delayed access to care and system saturation.

[1] For countries where data is available, the new arrivals figure includes returnees as well as refugees from third countries, alongside the Congolese new arrivals. The inclusion of this group reflects that returnee populations and third country nationals may also have specific international protection and humanitarian needs.

[2] This includes Burundian refugees who have spontaneously returned from DRC to Burundi since 6 December

[3] This figure includes 6,047 Rwandan returnees and economic migrants who have been supported to return from DRC to Rwanda.

- UNHCR and its partners increased the number of refugee housing units at the Busuma site to 814, while community hangers reached 56. Shelters remained overcrowded and below sphere standards, heightening GBV and health risks.

- UNHCR and its partners continued to provide adequate drinking water to relocated refugees, with nine operational water bladders, though this remained insufficient, with only 75,000 litters of water/day available for the entire population. Together with insufficient sanitation facilities, there are heightened risks of waterborne diseases.

- WFP continued food distributions at the Busuma site, reaching 77,221 refugees since the beginning of the year. 85,000 people have received food assistance since the start of the crisis in January 2025. More funding is needed to sustain full food and nutrition assistance for new arrivals.

Tanzania:

- From 23-26 January 2026, Tanzania received seven new arrivals from the DRC. This brings the total number of arrivals to 160 in 2026 and 4,103 since renewed violence in eastern DRC in January 2025. The new arrivals said they were coming from Fizi and Uvira territories and entered Tanzania through land routes. The overall arrival trend remains low.

- On 23 January, 12 people (two families) shared their intention to return to the DRC. UNHCR counselled the families on the risks of returning to conflict affected areas and reiterated that, in line with UNHCR's April 2025 position, it does not facilitate returns to North Kivu, South Kivu, and Ituri.

Uganda:

- Around 1,413 new arrivals from eastern DRC arrived in Uganda, including 174 Congolese. Registration was conducted for 969 refugees and asylum-seekers between 19 and 25 January, more than thrice the 331 people the previous week. The newly registered refugees and asylum-seekers include 445 Congolese.

- In Kyaka Settlement, health officials convened a crisis meeting to address gaps in primary healthcare provision, caused by a 61 per cent reduction in Medical Teams International (MTI) staff (from 125 to 46). The officials recommended the deployment of 12 district health workers and that MTI secure two ambulance drivers (currently there is one driver for five ambulances), to improve access to healthcare for refugees and host community members .

Contacts

Lara Schlotterbeck – Head of External Engagement, Regional Bureau for West & Central Africa (schlotte@unhcr.org)
Achu Claris Neh Mokom – Associate Reporting Officer, Regional Bureau for West & Central Africa (achuc@unhcr.org)