

**Humanitarian Response Scale up: Ituri, North Kivu and South Kivu Provinces** 



## **Humanitarian context**

- Ongoing fighting and recurrent natural disasters in DRC have displaced around 5,8 million people in North Kivu, South Kivu and Ituri provinces. Many of those who have been displaced are living in overcrowded sites and collective shelters, increasing women and girls' risks of unintended pregnancies, unattended obstetrical complications, maternal deaths, unmet basic needs and gender-based violence.
- Around 7,4 million people need health assistance in the east of the country,

- where the health system is at breaking point as a result of overlapping outbreaks of COVID-19, measles, polio, meningitis, and monkey pox. Yellow fever, cholera and malaria are all on the rise due to a lack of access to safe water and sanitation for those on the move.
- On 16 June 2023, an IASC System-Wide Scale-Up was activated for eastern DRC to strengthen the response of humanitarian actors.

## Situation overview

## Sexual and reproductive health

Access to Sexual and Reproductive Health services remains extremely challenging for women and girls. An estimated **220,000 women** are currently pregnant with **55,000 women** expected to deliver in the next 3 months. They urgently need access to maternal and newborn health services.

Even before the escalation of the current violence, the country's health infrastructure was weak, and DRC had one of the highest maternal mortality rates in the world.

The escalation in violence has further compromised access to maternal and newborn care, including emergency obstetric care. Women also have limited access to family planning and are unable to obtain post-exposure prophylaxis for HIV, in part due to stock outs and costs,

and a lack of awareness about available services.

## **Gender-based violence**

Sexual violence has soared in Eastern DRC in 2023. Women and girls living in displacement sites have reported that they are at risk of rape and sexual assault, exacerbated by the need to travel outside of camps in search of supplies for their basic needs and for domestic purposes and work. There are also reports of displaced women and girls who are forced to trade sex for survival, including in IDP sites. For survivors of sexual violence, access to comprehensive medical and psychosocial support is limited, especially for those seeking judicial and legal services or socioeconomic support.

## **Key statistics**











## 5,8 million

Internally displaced persons reproductive age in Ituri, North Kivu and South Kivu provinces, eastern DRC

## 1,375,000\* 220,000\* 313,478\* 6 Months

Women of

## Pregnant women

Women at risk of GBV Scale up duration

**UNFPA** targeted population for humanitarian assistance untill the end of 2023

1,375,000

Population targeted by UNFPA





Humanitarian midwife Sifa Ndele provides postnatal care to Mme Ombeni, who delivered in the mobile clinic in the internally displaced persons camp of Bulengo, North-Kivu DRC, Photo @Junior Mayindu.

# **UNFPA response: August 2023**

# Coordination

- UNFPA coordinates the Gender-Based
  Violence Area of Responsibility (GBV
  AoR) as well as the Reproductive
  Health Working Group within the
  Health Cluster. During the period
  covered by this report, these
  consultation frameworks held regular
  monthly meetings to discuss gaps,
  difficulties in service delivery and take
  actions where feasible.
- Under the leadership of UNFPA, the members of these coordination frameworks took part in the commemoration of World Humanitarian Day in all 3 target provinces.
- Meetings have also been held with government authorities, such as the military governor of Ituri, who granted an audience to the UNFPA team on 21 August to help scale up the



# UNFPA response GBV and SEA (Sexual Exploitation and Abuse): August 2023



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## **Protection from Sexual exploitation and abuse keys statistics**

## **North Kivu Province**



**148** survivors of sexual violence received medical and psychosocial support –73 within 72 hours



2 providers trained on GBV



**203** people made aware of GBV/SEA



**220** people received dignity kits

### South Kivu Province



2 survivors of sexual violence received medical and psychosocial support – 2 within 72 hours



709 people received dignity kits



890 people received information on GBV/SEA



2 service providers trained on GBV

## **Ituri province**



70 survivors of sexual violence received medical, psychosocial and lega support – 35 within 72 hours



**4,743** people received information on GBV/SEA



**760** people received dignity kits



**30** providers trained on GBV

# UNFPA response Sexual and Reproductive Health and Rights: August 2023

## **Ensuring safe births and access to other reproductive health services**

## **Service in operation**



Mobile clinics



Skilled service providers deployed to mobile clinics



Service Delivery Points (Health facilities)

# In August, 3 additional service delivery points (SDPs) were opened in different health zones.

SDPs are located in hospitals and run as mobile clinics where healthcare professionals can provide skilled, quality and confidential medical assistance to those affected by Sexual Gender-Based Violence (SGBV), including conflict-related sexual violence.



of reproductive health medicines, supplies and equipment, including contraceptives have been distributed since June 2023 to fill critical gaps in national supplies.



Pregnant women from the Bulengo internally displaced persons camp attending prenatal consultations in the mobile clinic, North Kivu DRC, Photo @Junior mayindu

# Reproductive health key statistics

## **North Kivu province**

## Province of North Kivu Target Health Zones (HZ):

HZ supported by UNFPA and IPs: Territories of Masisi (HZ Kirotshe & HZ Masisi), Rutshuru (HZ Kibirizi), Beni (HZ Mutwanga ZS Oicha) Nyiragongo (HZ Nyiragongo), Lubero (HZ Kayna & HZ Alimbongo); City of Goma (HZ Goma, HZ Karisimbi)



## **559**

new acceptors of a modern short-acting contraceptive method through communitybased distribution



## 41

new acceptors of a modern long-acting contraceptive method.



1,020

cases of STIs treated



#### 331

births assisted by qualified personnel



maternal deaths recorded



0

neonatal deaths recorded



#### 208

cases of emergency obstetric complications referred



## 1 252

Antenatal Consultation (ANC) performed



## 3,050

people sensitized on Reproductive Health, Family Planning, GBV, HIV, Covid, etc



#### 2.884

condoms distributed (male and female)



#### 204

individual delivery kits distributed



#### 52

caesarean sections performed

# Reproductive health key statistics

## **Province of South Kivu**

## **Target Health Zones (HZ)**

Kalehe territory (Kalehe and Minova HZs) and Fizi territory (Nundu and Fizi HZs).



**59** 

new acceptors of a modern short-acting contraceptive method through Community-Based Distribution



51

new acceptors of a modern long-acting contraceptive method



317

cases of STIs treated



19

births assisted by qualified personnel



0

maternal deaths recorded



n

neonatal deaths recorded



9

ANC consultations... performed



1,195

people educated about RH, FP, GBV, HIV, Covid, etc



530

condoms distributed (male and female)



45

individual delivery kits distributed

# Reproductive health key statistics

## **Province of Ituri**

## Target Health Zones (HZ)

Territories of Djugu (HZ of Drodro, Fataki, Lita, Linga and Nizi) and Mahagi (HZ of Aungba, Kambala and Logo, Mahagi), Irumu (HZ Gethy).



## 429

new acceptors of a modern short-acting contraceptive method through communitybased distribution



## 573

new acceptors of a modern long-acting contraceptive method



318 cases of STIs treated



## 656

births assisted by qualified personnel



## 0

maternal deaths recorded



## 19

neonatal deaths recorded



#### 16

cases of emergency obstetric complications referred



## 2,235

Antenatal Consultation (ANC) performed



## 6,858

people sensitized on Reproductive Health, Family Planning, GBV, HIV, Covid, etc



## 1,887

condoms distributed (male and female)



#### 210

individual delivery kits distributed



#### 65

caesarean sections performed



# Strengthening the resilience of young people

The relational transformation activities for the pacification of ties between internally displaced populations brought together around 1,000 young men and women from different cultures at different sites. notably Sake, Bulengo, Lushagara and Rusayo 1. These activities were based around a variety of cultural artistic performances ranging from traditional dance to social theater demonstrations, underlining the importance of cultural expression in building peace and mutual inter-ethnic understanding in these IDP camps. These iterative activities served to strengthen the bonds between the different ethnic groups living in these sites through messages of hope, unity in diversity and solidarity.



- Inadequate funding hampers UNFPA DRC's response, including gaps in socio-economic reintegration, which contribute to mitigating the risks of negative behaviours like transactional sex and child marriage.
- Access to certain areas, mainly Rutshuru and Irumu in the provinces of North Kivu and Ituri respectively, is very limited due to insecurity. This impedes the deployment of reproductive health supplies and also skilled workforce to support coverage of services. In turn the risk of unassisted deliveries, unattended obstetric complications and



Access to SRH information for young people remains a challenge at the Bulengo camp in North Kivu, girls from the Sikujuwa family in Photo ©Junior mayindu

preventable maternal deaths remains a critical issue.

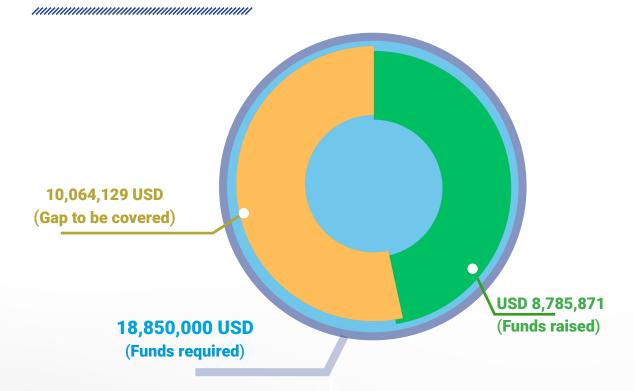
The operational presence of protection actors in eastern DRC is weak. These limitations are exacerbated by the lack of technical and financial capacity to provide quality holistic services to survivors of Gender-Based Violence, including clinical management of rape and Intimate Partner Violence, psychosocial support, legal support and socio-economic reintegration.

# Funding status

UNFPA is appealing for \$18,850,000 until the end of 2023 to strengthen reproductive health and protection services to reach the most vulnerable women and girls in North Kivu, South Kivu and Ituri. To date, the appeal is only 46% funded (US\$8,785,871).

Flexible and rapid funding will enable UNFPA and its partners to set up more mobile clinics and safe spaces, distribute vital supplies and support the deployment of additional essential staff (humanitarian midwives, GBV case managers, etc.). These service delivery points will provide clinical management of rape and obstetric emergencies, and support safe spaces for women and young girls, even in the most affected and hard-to-reach areas.

USD 8,785,871 (Funds raised) 18,850,000 (Funds required) 10,064,129 USD (Gap to be covered)





## Tumusifu's life in the Bulengo camp



**Tumusifu Borauzima**, is a 32 years old, mother of six children. She recently remarried a man she met in the IDP site of Bulengo after losing her husband during the M23 crisis on the Kalenga-Sake Road, about 30 km from Goma. She uses a modern contraceptive method to avoid undesired pregnancy, as the living conditions in the camp are not favourable.



« I have six children and the living conditions here in the camp don't allow me to have a seventh. I'm here for my contraceptive method », she explains at the mobile clinic in Bulengo, where she has presented to renew her intrauterine device (IUD). Since Tumusifu moved to Bulengo in February 2023, she has made a living from cutting firewood, which is not easy for a mother like her. Thanks to UNFPA, Tumusifu and more than 1,600 other internally displaced women in the east of the DRC were able to choose a contraceptive method of their choice during August. This choice helps them to decide when to become pregnant. When fleeing armed clashes and living in IDP sites, many women find it difficult to access modern contraceptive methods. UNFPA is supporting the government to ensure the availability of modern contraceptive methods that enable women make their choice in fulfilment of the Sexual and Reproductive Health Rights

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