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SPOTLIGHT

DRC

An acute L3 emergency without the funding to match

The Democratic Republic of the Congo (DRC) has been ravaged by conflict for decades, and there is no end to the violence in sight. The already dire humanitarian situation in the country deteriorated still further in 2017, prompting the UN to declare a level-three (L3) emergency, a designation reserved for only the most complex crises.⁷¹ As many as 2,166,000 new displacements were recorded during the year, second only to Syria, and there were about 4.5 million IDPs in the country as of the end of 2017.

The L3 designation is intended to highlight the scale of the needs involved and mobilise maximum funding and capacity to respond, but little has changed on the ground since it was declared. Nor is the designation countrywide. It applies only to the provinces of South Kivu and Tanganyika and the region of Kasai, raising the concern that funding earmarked for other provinces with acute humanitarian needs, such as North Kivu, will simply be reallocated to the L3 areas.

Doing so would have potentially serious implications. There has already been a significant reduction in the number of humanitarian organisations working in North Kivu because of funding shortages, and this despite a resurgence of mass displacement caused by renewed fighting between DRC's armed forces and the Allied Democratic Forces (ADF), a Ugandan rebel group. With as many as 1.2 million people living in displacement as of the end of the year, North Kivu accounted for about 26 per cent of the country's IDPs.

The humanitarian coordinator in Kinshasa has described DRC as "one of the world's largest, most acute and complex" humanitarian crises with "unrelenting cycles of violence, diseases, malnutrition and loss of livelihoods", and OCHA has launched its largest-ever funding appeal for the country to assist the 10.5 million people in need of aid in 2018.⁷² The importance of attracting new funds rather than diverting existing commitments has been widely stressed, and the development sector,



which has been all but absent from DRC, has been called upon to play its part in re-establishing the health and other key services, so that much-needed humanitarian funding does not have to be redirected.

DRC's IDPs have a wide range of protection needs, and children make up about 60 per cent of the country's displaced population.⁷³ The UN verified 2,334 grave violations against children in 2016, the highest number since 2012. The figure includes the recruitment of 492 children by armed groups, 82 per cent of which occurred in North Kivu.⁷⁴ NRC also reported that the education of as many as 64,000 children was at risk in the Kasai region because armed groups had occupied schools and instilled a climate of fear.⁷⁵ Children deprived of education opportunities are more likely to join armed groups.⁷⁶

Food insecurity is also at the highest level on record. About 9.9 million people in DRC are food insecure and two million children are at risk of severe acute malnutrition, accounting for 12 per cent of the global caseload.⁷⁷ More than 55,000 people contracted cholera in 2017, during an epidemic that claimed more than 1,000 lives. It is against this backdrop that OCHA has requested \$1.68 billion for DRC in 2018, but given that the 2017 appeal for \$812.5 million was only 50 per cent met, the outlook for closing the funding gap this year is bleak.⁷⁸