

THE DEMOCRATIC REPUBLIC OF CONGO SITUATION

This update concerns the situation of Congolese refugees and asylum seekers in countries in the region.

As of 31 December 2018, **814,975 Congolese refugees are being hosted in African countries**. From 1 January to 31 December 2018 alone, some 159,074 Congolese fled to neighboring countries, with a particularly significant increase in refugee flows to Uganda, Burundi, Zambia and Kenya.

UNHCR together with 56 humanitarian and development partners launched the **2019-2020 Regional Refugee Response Plan (RRRP)** on 11 December 2018 for **US\$743 million to help respond to the needs of Congolese refugees in Africa**.

KEY INDICATORS

 **814,975***

Total of refugees and asylum-seekers from the DRC



4,798

New arrivals in December 2018

159,074 **

Total of new arrivals in 2018

 **51**

Total number of Congolese refugees assisted to return since January 2018.

AGE, GENDER BREAKDOWN ***



49%
Men



51%
Women



55%
Children

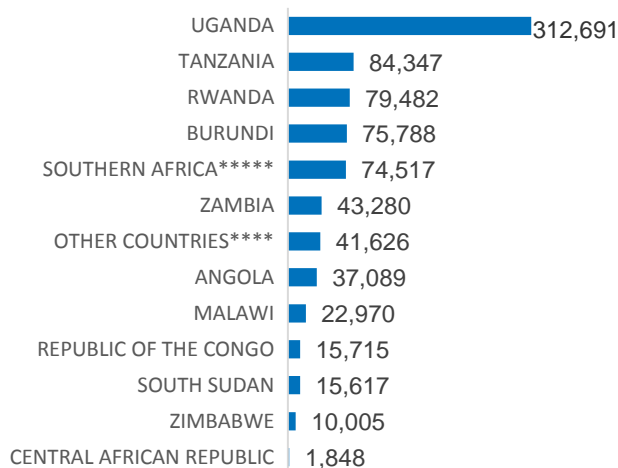


42%
Adults



3%
Elderly

POPULATION OF CONCERN IN HOST COUNTRIES



FUNDING

USD 368.7 million

UNHCR's requirements, including for internally displaced in DRC

FUNDED
46%

171.3 million

FUNDING GAP
54%
197.4 million

USD 547 million

Interagency 2018 RRRP requirements

FUNDED
34%

185.2 million

FUNDING GAP
66%
361.8 million

* **Total number** includes figures from Angola, Botswana Burundi Central African Republic, Chad, Kenya, the Kingdom of Eswatini, Lesotho, Madagascar, Malawi, Mozambique, Namibia, Republic of the Congo, Rwanda, South Africa, South Sudan, Uganda, the United Republic of Tanzania, Zambia and Zimbabwe.

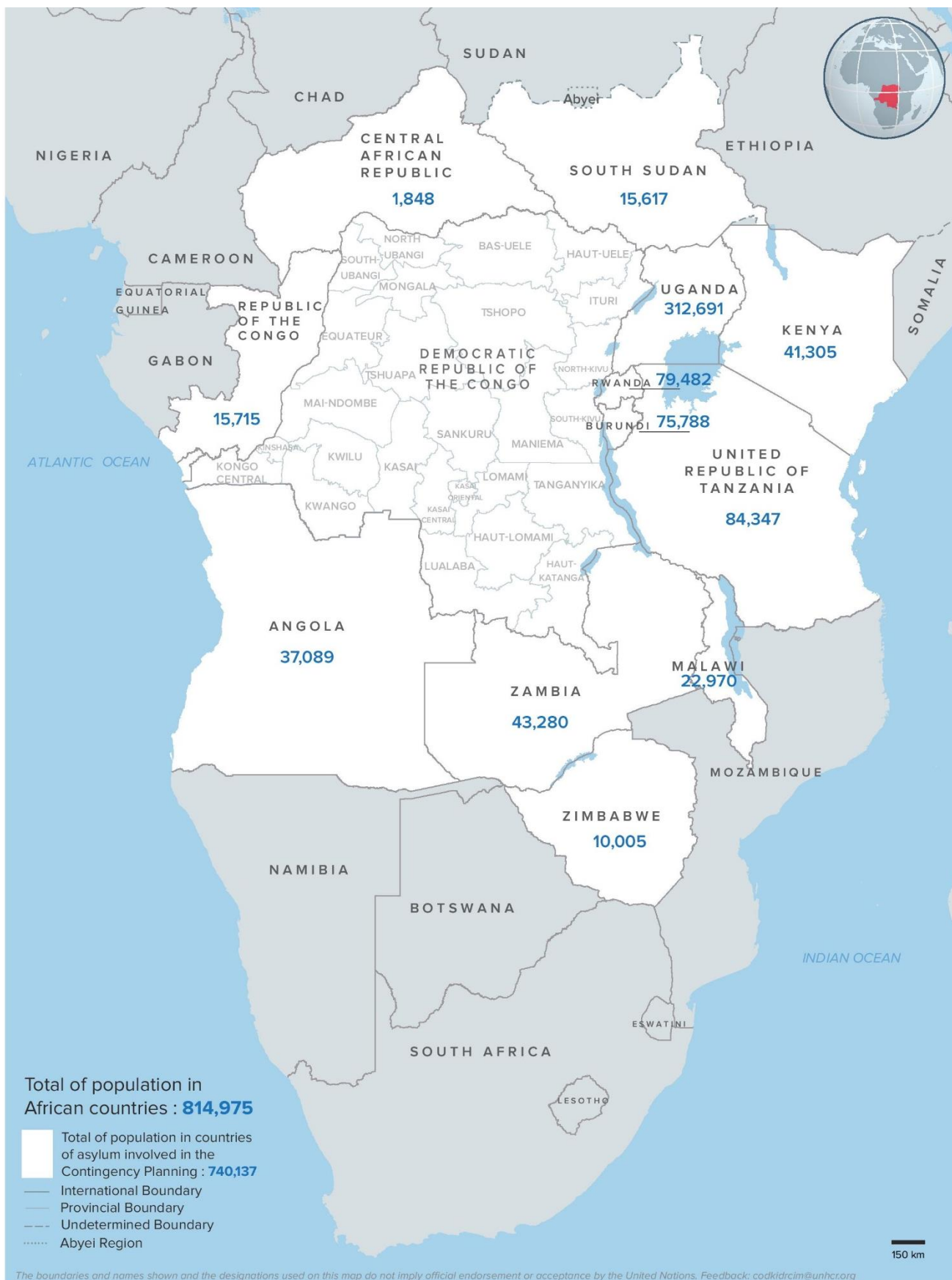
** **New arrivals** include figures from Angola, Botswana Burundi Chad, Central African Republic, Kenya, the Kingdom of Eswatini Madagascar, Malawi, Mozambique, Republic of the Congo, Rwanda, South Sudan, Uganda, the United Republic of Tanzania and Zimbabwe.

*** **This age and gender breakdown** includes figures from Angola, Botswana Burundi, Chad, Central African Republic, Kenya, the Kingdom of Eswatini, Madagascar, Malawi, Mozambique, Republic of the Congo, Rwanda, South Sudan, Uganda, the United Republic of Tanzania, Zambia and Zimbabwe.

**** **Other countries** include Chad and Kenya.

***** **Southern Africa** includes Botswana, the Kingdom of Eswatini, Lesotho, Madagascar, Mozambique, Namibia and South Africa.

NUMBER OF REFUGEES & ASYLUM-SEEKERS in countries of asylum as of the end of December 2018

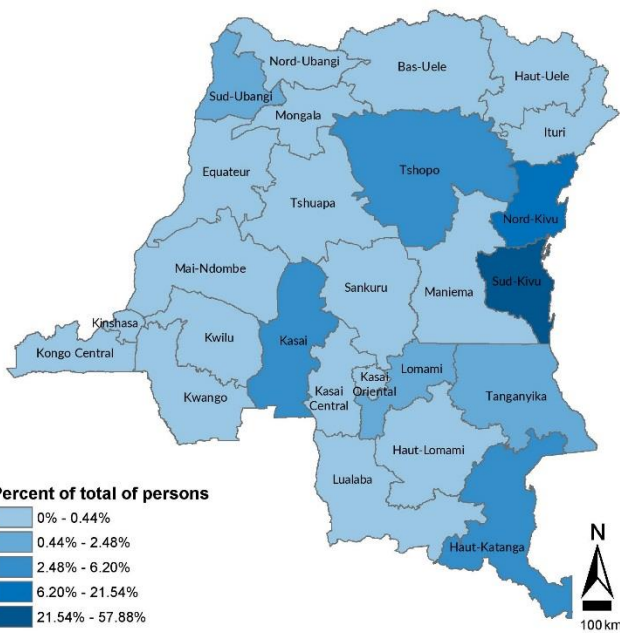


Creation date: 31 December 2018 Sources: UNHCR - Kinshasa Feedback: codkidrcim@unhcr.org

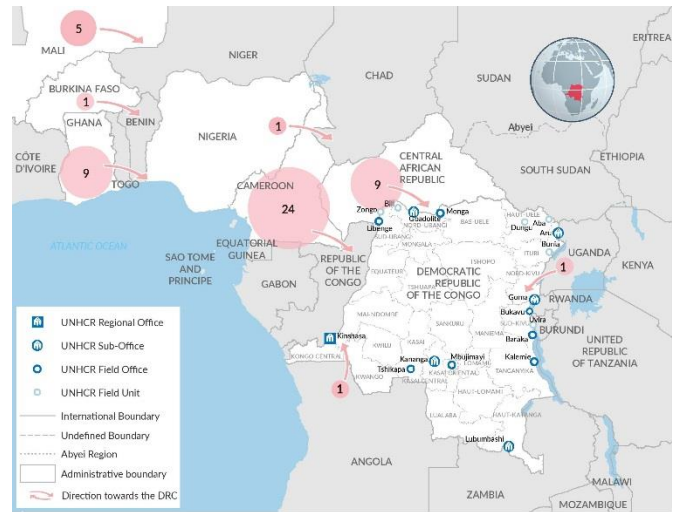
Regional Highlights and Operational Context

- A total of **814,975 Congolese refugees and asylum-seekers** are being hosted in countries in Africa, which have generously maintained an open door policy in granting asylum to old and new asylum seekers.
- **Contingency planning** has been undertaken in connection with the current volatile security and socio-economic situation in the DRC, which could result in more outflows of Congolese refugees to neighbouring countries. The **Regional Contingency Plan** for the DRC situation estimates that, in the event of a major emergency in the country related to the presidential elections and in the post-election period, over 386,000 new Congolese refugees and asylum seekers could arrive in countries of asylum. Further, it is estimated that some 78,000 refugees currently residing in the DRC might return to their countries of origin.
- UNHCR received **\$171.3 million** for the DRC situation, representing **46 per cent** of the total requirements of \$368.7 million for 2018.
- The interagency Regional Refugee Response Plan (RRRP) for the DRC situation received **\$185.2 million**, representing **34 per cent** of the total requirements of \$547 million for 2018.

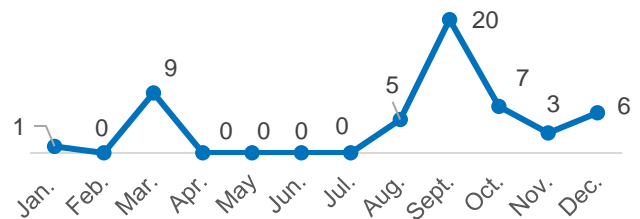
PROVINCES OF ORIGIN of Congolese Refugees



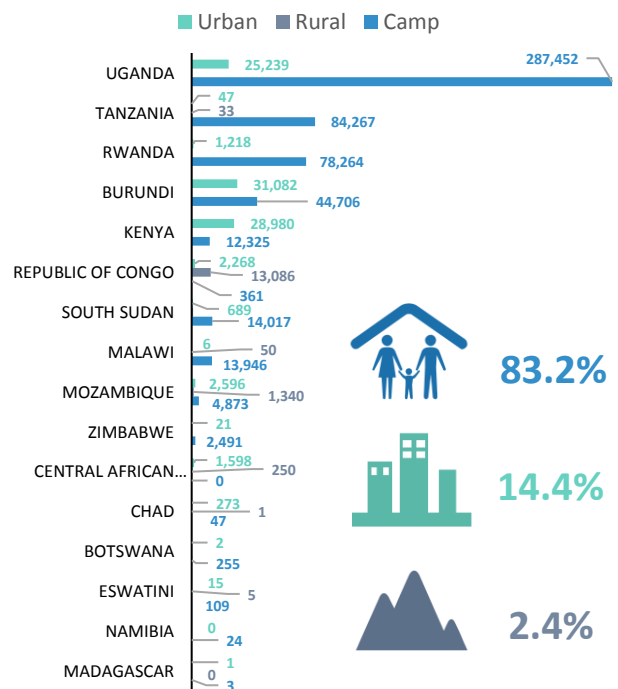
RETURNEES As of 31 December 2018



MONTHLY RETURN TREND Since January 2018



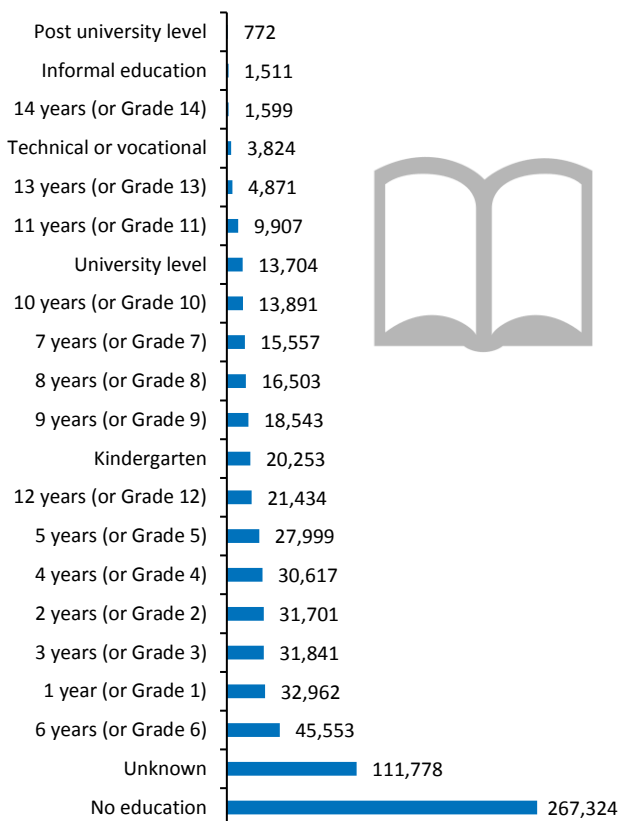
TYPE OF SETTLEMENT In Countries Of Asylum



The above map includes figures from Angola, Botswana, Burundi, Chad, Central African Republic, Kenya, the Kingdom of Eswatini, Madagascar, Malawi, Mozambique, Namibia, Republic of the Congo, Rwanda, South Sudan, the United Republic of Tanzania, Zambia and Zimbabwe.

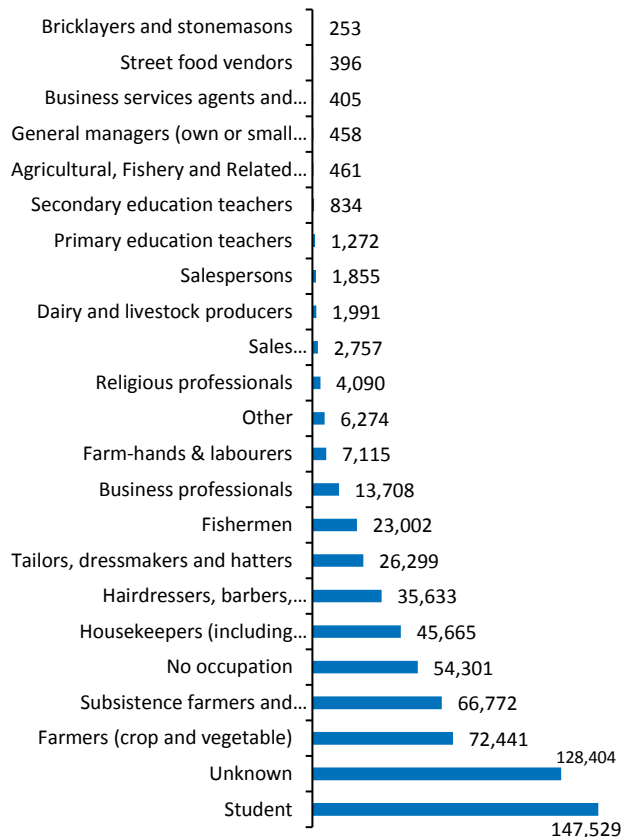
EDUCATION LEVEL OF REFUGEES

Number Of Persons Per Level



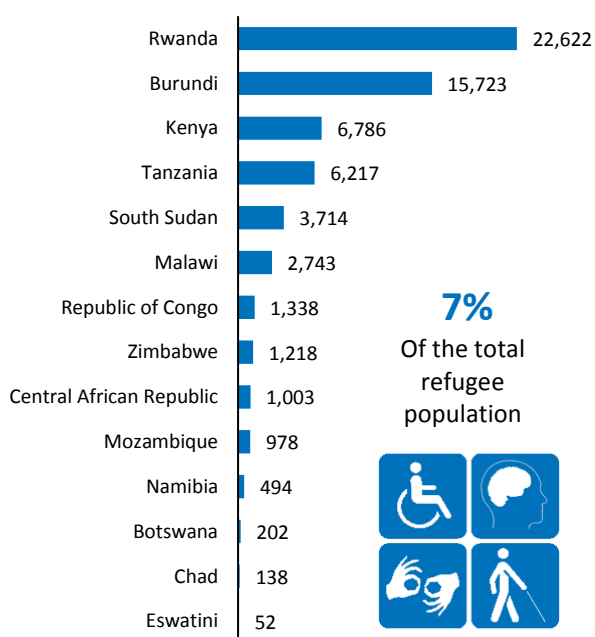
OCCUPATION OF REFUGEES

Number Of Persons By Type Of Occupation



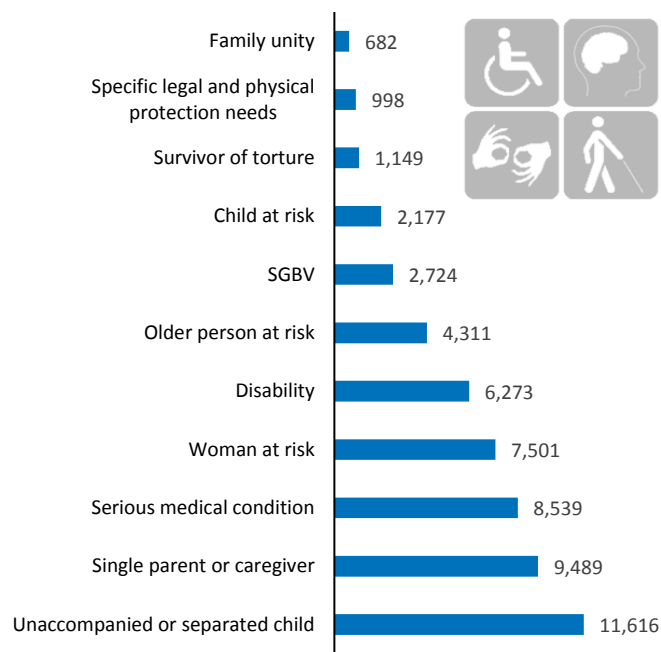
NUMBER OF PERSONS WITH SPECIFIC NEEDS

Per Country of Asylum



NUMBER OF PERSONS WITH SPECIFIC NEEDS

Per Category of Concern



* Sexual and Gender Based Violence (SGBV)

The above charts include figures from Botswana, Burundi, Chad, Central African Republic, the Kingdom of Eswatini, Kenya, Malawi, Namibia, Mozambique, Republic of Congo, Rwanda, South Sudan, the United Republic of Tanzania and Zimbabwe.

Achievements during the Reporting Period

ANGOLA

Latest developments

- On 4-5 December, a delegation composed of the Spanish and Belgian Embassies, private companies, NGOs and the Luanda International School, visited Lovua settlement and explored opportunities of developing projects.
- On 6 December, a mission by the Angolan State Secretary for Education (MoE) was undertaken to the settlement, where the transition phase from informal to formal education is ongoing. The MoE delegation had the chance to analyse the progress of the three schools of eight classrooms each that are being constructed. Partners explained the education needs in Lovua settlement, showing the number of students attending informal classes and the number of teachers who will work in the schools for 2019.

Achievements

- By the end of December, a total of 3,633 individuals were relocated from the urban areas of Dundo to Lovua settlement.
- In commemoration of the 16 days of activism against gender based violence (GBV) in Lovua settlement, some 200 people joined workshops and focus group discussions on domestic violence, gender equality, and women and girls' empowerment.
- Six education tents in Lovua settlement were installed and immediately started being used.
- Over 2,300 medical consultations were held in the two clinics of Lovua settlement, including 622 for children under five years old. Vaccinators from Lovua municipality were present twice a week in the health centers of the settlement, and all the vaccines from the national calendar were available to children and adults.
- Community dialogues on breastfeeding were conducted by mobilizers, reaching a total of 730 people.
- A total of 2,770 transitional shelters were built; 2,614 using timber poles and mud as well as 156 using sun dried bricks.
- The Aquatabs distribution campaign started on 17 December and 96 trained mobilizers gave each person 30 pills for one month (30pills/person/month to treat 20L/Person/Day).
- The drilling of boreholes and the construction of the water distribution network in Lovua settlement were still ongoing.

Challenges

- Domestic violence, child and forced marriage, high rate of teenage pregnancy and HIV among pregnant women are among the main challenges in Lovua settlement. As a response, a total of four women-friendly spaces were established and 24 social mobilizers have been conducting outreach and awareness activities in Lovua settlement.
- Since the beginning of the *Operação Transparência* (Operation Transparency) in October 2018, only a few families were reunified during the ongoing relocation of the urban refugee population to Lovua settlement.
- Some 120 children were under moderate acute malnutrition treatment and 10 under severe acute malnutrition treatment.

BURUNDI

Latest developments

- The construction of the new refugee camp in Nyankanda is completed. On 19 December 2018, the first convoy of about 270 Congolese refugees, including 54 persons with specific needs, arrived in the newly built Nyankanda camp. Refugees were given the option to choose between a traditional individual house built with iron sheets and mud-covered walls and IKEA constructed houses. A total of 19 households opted for IKEA units.

Achievements

- Refugee status was granted to 138 asylum seekers from the DRC.

- A total of 55 resettlement cases were submitted and 138 Congolese refugees departed for resettlement countries. In total, 2,476 Congolese refugees were resettled and 2,420 cases submitted for resettlement in 2018.
- Some 28 refugees were preselected in Bwagiriza (10) and Kavumu (18) camps as beneficiaries of the DAFI and DAFI/AUF scholarships and will attend a training session facilitated by AUF before the final tests and interviews.
- UNHCR Burundi continued to implement Ebola preventive mechanisms in refugee camps and in transit centers, in line with the national prevention protocols. These included as well campaigns and training of medical and field staff. Isolation places were established in refugee camps and in transit centers. Medical screening of new refugee arrivals continued.
- Joint Assessment Mission (JAM) exercise was carried out in Musasa and Kavumu refugee camps to assess food security and nutrition.
- Food fares were organized in all refugee camps. Available food items included maize and cassava flour, beans, local and imported rice, as well as oil and salt. Cooking briquettes were distributed in refugee camps.
- Dignity kits were distributed to pupils in secondary and primary schools in refugee camps.
- Four drainable latrine blocks constructed with World Vision funds were handed over in Kinama camp. Old latrines and bathrooms were rehabilitated in the same camp.

Challenges

- The operation remains underfunded. This situation has a negative impact on the overall assistance of refugees, including self-reliance activities and education.
- Reluctance of parents to initiate tracing of separated children because of the resettlement process they are undergoing.
- Updating biodatas remains a challenge, pending the verification of all refugees.
- There are overcrowded classes (between 70 and 80 student per classroom) and lack of school materials/manuals in all refugee camps. There is need for qualified teachers in refugee camps.
- Drug purchase and supply process is lengthy. This situation has an impact on the health care provision to refugees.
- There are discrepancies between the in kind and cash distribution list and delays in cash distribution. A distribution plan will be established in anticipation, in order to avoid such situation in the future.
- Nutrition support/supplementation assistance targets only pregnant women and lactating mothers and persons living with the HIV/ AIDS and chronic diseases. The diet of persons with specific needs has yet to be improved.
- There is need for additional street lights and for extension of distribution hangars in refugee camps. The fences in Musasa refugee camp and in Cishemere transit center need to be rehabilitated.
- Budget constraints do not allow replacing old latrines with drainable ones, as well as rehabilitating emergency latrines and repairing 500 defective latrines in Kavumu and in Bwagiriza camps.
- Water supply is still an issue in the newly constructed Makombe transit center in Rumonge and in Cishemere transit center in Cibitoke.

MALAWI

Latest developments

- The 40th Refugee Committee meeting was held on 12 December 2018 and granted refugee status to 685 cases of 1,994 individuals from the DRC.

Achievements

- Health services were provided at Karonga transit centre for children under five years old, including integrated management of childhood illnesses, vaccination, deworming and growth monitoring. Any serious cases and ailments for adults are referred to Karonga or Chitipa district hospitals.
- Despite funding challenges and the anticipation of food ration cuts to 50 per cent in Dzaleka, full distribution was carried out at 100 per cent. This was enabled through an extension of support from USAID, which allowed for blanket coverage of Dzaleka over a period of three months.
- Refugees and asylum seekers in Karonga began receiving the full food basket again in the latter half of December as WFP addressed the gap in the commodity supply chain.

- Welthungerhilfe (WHH), a WASH operational partner sunk a borehole and installed the solar powered submersible pump in Karonga Transit Centre in November, which became functional in December.
- Jesuit Refugee Service (JRS), another WASH partner, carried out a series of interventions, including regular hygiene promotion, the procurement of twelve buckets at Mbilima, six general site cleanings and the procurement of hand washing soaps and sweeping brooms.

Challenges

- Continued detention of new arrivals at the borders under the guise that they are being screened for Ebola. New arrivals are staying between one to three weeks, sometimes longer, at the border points. Young men are the most at risk.
- Access to transport, water, and food was raised as the main challenge at all the border points. New arrivals are reported to be begging and engaging in negative coping practices including selling belongings to get access to food.
- Health service delivery at Karonga transit centre, and Chitipa and Mbilima reception centers need to be strengthened by providing transportation and ensuring constant supply of antibiotic and antipyretic medications. At the same time, infection prevention and control measures are not fully followed. Purchase of a health passport to be used at the district hospitals cost MK 200 and most of the asylum seekers cannot afford it.
- There is a need to provide additional hand washing buckets and soap at Karonga transit shelter. Asylum seekers receive blankets and mosquito nets that have already been used. There is also a shortage of chlorine and insufficient working materials like gloves, rakes and wheelbarrows.

REPUBLIC OF CONGO

Latest developments

- In December, following deadly clashes between two communities in the province of Mai-Ndombe in the DRC, the Districts of Makotipoko and Bouemba (Plateaux Department, Republic of the Congo) received several thousand asylum seekers. On 18 December, authorities of the Republic of Congo and UN System organized a joint mission and visited the localities of Makotipoko and Bouemba for a quick assessment of the situation. Local authorities confirmed the presence of some 7,000 asylum seekers. Various assessment missions were conducted to the refugee sites, and the number of asylum seekers was estimated at 16,000 individuals. UNHCR requested the Government of RoC to grant refugee status to these asylum seekers on a prima facie basis.
- A physical verification of refugees and asylum seekers, which started in November, continued in December. Figures of the verification exercise will be published once the data is analyzed.

Achievements

- Regarding the new influx of refugees from the DRC, UNHCR participated in joint assessment missions with other UN agencies (WFP, UNICEF, WHO) and the Government. Several NFIs were delivered, including kitchen sets, mosquito nets and blankets.
- Terre sans Frontières, UNHCR's health partner, conducted regular medical consultation at the CSI integrated health center in Betou and at the local Hospital in Impfondo. A total of 1,694 patients were medically treated, of which 271 under five years and 1,423 over five years.
- In total, 13 DRC refugees were screened for HIV and one was declared HIV positive. Advice on attitudes to adopt were given to patients by health professionals during their appointments for screening results.
- Some 137 refugee women went to a doctor for prenatal consultations, and 31 family planning and 21 after birth consultations were conducted.
- Two cases of SGBV were reported at the CSI and the survivors received medical treatment.

Challenges

- The areas of settlement of the new asylum seekers from the DRC are very remote and there is need for significant logistical arrangements for humanitarian access. The areas of Makotimpoko and Bouemba are exposed to flooding risks. Recommendations have been made to relocate the asylum seekers.
- Lack of nutritional inputs (F75, F1000, plumpynuts, Plumpysup, CSB, CSB++, Oil, Sugar, etc.) for severe and moderate acute malnutrition, and insufficient medical consumables (transfusers, catheters, infusers, syringes) and nursing stuff.
- Insufficient financial resources to cover the nutritional assistance of PVVIH patients (especially indigenous people) with the consequences of in-patient evasion, the lack of follow-up and the risk of spread of the disease within the community.
- Limited access to health care and irregular nutritional activities of refugees from the localities of Thanry, Lopola, Lombo, Mokabi and the southern fluvial axis, particularly as a result of logistical constraints and the isolation of the area.

RWANDA

Latest developments

- A total of 60 Congolese refugee youth from Gihembe camp aged between 17 and 25 participated in a one week poetry training followed by a competition organized by Rwanda leading poetry trainers from *Transpoesie Rwanda* in Gihembe camp. One refugee woman won the competition, qualifying her for the national competition scheduled to take place in Kigali during the first quarter of 2019.

Achievements

- In Kiziba camp, youth clubs have conducted dialogue sessions on drug prevention, adolescent pregnancy and child abuse. Community mobilizers carried out focus group discussions in the community regarding child neglect and the role of parents.
- A total of 2,176 (out of 2,613) refugee students who sat for the national exams to complete their primary level education performed well and passed, and a total of 836 (out of 1,175) refugee students performed well and passed the national exams to complete their secondary lower level education.
- The construction of eight early childhood development (ECD) classrooms in Gihembe camp was completed. These classrooms will improve the learning conditions for more than 600 children enrolled in ECD. Construction work of 16 classrooms in the host community schools near Nyabiheke Camp (GS Nyabucwamba and GS Nyabiheke) is ongoing.
- In a total of 196 live births, 98 per cent were attended by skilled health workers and 19 per cent of all births were performed by caesarean section. The contraceptive prevalence rate stood at 46 per cent.
- Community mobilizations on Ebola awareness were conducted in all camps.
- Some 27 new moderately acute malnourished (MAM) and six new severely acute malnourished (SAM) cases were admitted. The management of severe and moderate malnutrition for children under five years, and pregnant and lactating mothers was done in clinics both outside and inside the camps.
- The recovery rates for moderate and severe malnutrition were 100 per cent while the average length of stay in the supplementary feeding programme for moderate malnutrition and the therapeutic feeding programme for severe malnutrition were 12.1 days and 75.3 days, respectively.
- A total of 500 plastic sheets were distributed in Gihembe camp for households requiring roof renovations. In Nyabiheke camp, 19 families were supported with materials to repair damages caused by erosion to their shelters.
- The public market in Kiziba camp was renovated.
- An average of 20 litres of water per person per day was provided in Gihembe camp and 21.9 liters in Kiziba camp.
- A sensitization campaign was conducted on community behaviour change regarding hygiene in Gihembe camp and 12 garbage pits were emptied and maintained in Kiziba Camp.

Challenges

- There is an urgent need to expand/extend all the Congolese refugee camps to accommodate the increasing number of refugees. An estimated 1,500 shelters are still covered in plastic sheeting in Gihembe and Nyabiheke camps, creating discomfort and poor living conditions, especially during the rainy season.
- Congolese students enrolled in boarding schools away from the refugee camps still do not have access to healthcare, whereas the schools are obliging them to get insured.
- There is still a limited budget for medical referrals in all camps, which results in many needs not being met. There is lack of treatment for Hepatitis B and C and of long lasting insecticide treated mosquito nets while the instance of malaria is increasing. Kiziba camp needs more than 5,000 mosquito nets and Mugombwa camp needs more than 3,000.
- Semi-permanent nutrition structures in Nyabiheke camp need to be changed to permanent structures.
- The average water supply in Nyabiheke camp remains 15.3 litres per person per day (below the minimum standard of 20 litres per person per day. There is a need for US\$ 500,000 to connect the camp to the district's public water supply system (WASAC) to ensure regular supply.
- The usage of toilets in Kiziba camp is currently of 41 people per drop hole whereas the standard is 20 people per drop hole.

UNITED REPUBLIC OF TANZANIA

Latest developments

- In an effort to strengthen sexual and gender based violence (SGBV) mainstreaming and better address the SGBV risks facing refugee communities in all three camps, a national action plan with priority action points was developed. The national action plan will allow sectors to take the lead on a prioritized SGBV risk and to consider the roles each sector has in mitigating all or parts of the risk in the face of reduced funding and shrinking protection space.

Achievements

- A total of 53 people of concern (PoCs) accessed legal services and representation at Nyarugusu camp and at detention centers in Kasulu, and 180 PoCs received assistance at the reception desk before being referred to other units for follow up, including individual protection assessments.
- A total of 648 Form Six students and 2,820 Grade Six candidates were verified by inspectors from the DRC's Ministry of Education and one representative from the DRC consulate in Kigoma who visited Nyarugusu camp to verify the number of Form Six candidates eligible to sit for national examinations for the 2018/19 academic year.
- The International Rescue Committee conducted subject specific training to 367 primary and secondary school teachers in Nyarugusu camp, as well as community sensitization visits in collaboration with the Parents and Teachers' Association (PTA). With support from Congolese zonal leaders, a total of 7,973 individuals were reached.
- In collaboration with Tanzania Red Cross National Society, UNHCR conducted a vitamin A supplementation (VAS), deworming and mass mid-upper arm circumference (MUAC) screening campaign in Nyarugusu camp.
- The crude mortality rate was 0.3/1000 population/month and under five mortality rate was 0.7/1000 population/month, both of which are within the SPHERE minimum standards. The leading cause of morbidity was malaria followed by upper respiratory tract infection, lower respiratory tract infection, urinary tract infection and diarrhea. During the same reporting period, a total of 209 live births were conducted with 95% of total births carried out in health facilities by skilled personnel.
- Food entitlements for December were distributed at 100% of the full basket.
- A total of 480 transitional shelters were upgraded. In addition, 20 emergency shelters were constructed to accommodate refugees with protection cases and those living in dilapidated shelters.
- Construction work on a new primary school intended to ease the current classroom gap was completed. The school has twelve semi-permanent classrooms that will cater to a total of 1,700 students.
- The average water supply in Nyarugusu camp was 26.6 litres per person per day, which is over 10 litres above the SPHERE minimum standards.

Challenges

- A shortage of classrooms continues to exist due to funding shortfalls. Although the double shift strategy has temporarily eased this pressure, 77 additional classrooms are still required in Nyarugusu camp.
- Poor health infrastructures in the Congolese zones of Nyarugusu camp continues to remain a challenge.
- More funding is required to extend the existing waiting shelter at center one in Nyarugusu camp, which cannot accommodate the entire population that needs to be served.
- A serious shortage of core relief items (CRIs) continues to exist due to budgetary constraints.
- Due to funding shortages, a number of WASH gaps remain. More funding is required to construct additional bathing shelters, latrines and water points.

UGANDA

Latest developments

- A total of 2,613 asylum-seekers from DRC arrived in the South West mainly through the border-entry points of Bunagana, Lake Albert (Sebagaro& Nsonga), Ishasha/Kihihi, Ntoroko and Nteko.

Achievements

- UNHCR deployed an offline version of the registration module in proGres also known as Rapid Application (RApp) to Kisoro, Matanda, Kyaka II and Kyangwali for the DRC emergency registration response. RApp has been tested in Uganda and found to increase registration processing capacity by more than three times that of proGres v4. The Global Distribution Tool (GDT) deployment was completed countrywide by UNHCR and WFP in December 2018.
- The Education Sector finalized the Business Continuity Plan for the Ebola Response, which proposed a number of alternative education delivery mechanisms.
- Service delivery in water, sanitation and hygiene awareness continued to improve in all refugee settlements within Uganda. On average, 20.5 million litres of potable water were supplied daily to people of concern, ensuring per capita access remained on average above 19 litres per person per day, in all settlements. A total of seven water schemes were commissioned, reducing water trucking to less than 5%. Ebola preparedness activities were escalated, focusing on personal and environmental hygiene at reception and transit centres, and within settlements. Over 1,500 family latrines were constructed, raising latrine coverage to 69%. Construction works for the DRC emergency influx and Ebola preparedness in the Southwest, at points of entry (PoE), collection points (CP), transit centres (TC) and Reception Centres (RC), were ongoing.
- One Rice Farmers' Association was formed on 5 December 2018, in Lobule Refugee Settlement, Koboko district, which is home to refugees from the DRC. The association is to build the capacity of rice farmers in the eight clusters within the settlement, in order to benefit from economies of scale accruing from joint purchase of inputs, collective storage and collective marketing.

Challenges

- The prevention of the spread of the Ebola virus into Uganda remains a challenge. The National Task Force appointed UNHCR to coordinate and support Ebola Screening of all DRC arrivals at the Points of Entry in Kisoro, Kanungu and Kikuube districts. In addition, UNHCR and Infectious Diseases Institute (IDI), agreed to support Arua District Local Government, in Point of Entry Ebola screening for all DRC arrivals.

ZAMBIA

Latest developments

- UNHCR organized an SGBV prevention and response meeting of partners in Meheba, which included the Ministry of Community Development, the Zambia Police, District Health and NGOs, to strengthen community sensitization and community response structures.

- In order to reduce the dependency of refugees on food distribution, the Commissioner of Refugees and District Ministry of Agriculture in Nchelenge demarked a total of 840 farm plots (measuring 0.5 ha each) and allocated them to 492 refugees in Mantapala. Additionally, 164 farm plots (0.5 ha each) were allocated to host community members from five different villages (Sikazwe, Sekesa, Pule, Shimwangilwa and Champo) within the settlement. About 426 households of refugee and host community beneficiaries were trained in conservation agriculture and received farming tools and seeds (maize, beans, groundnuts, cassava and sweet potatoes). Some 120 beneficiaries (90 refugees and 30 host community members) attended basic entrepreneurship trainings and thereafter received a business cash grant support ranging from USD 100 to USD 300, bringing the number of refugee and host community entrepreneurs in Mantapala who received business start-up support in 2018 to 220.

Achievements

- In Meheba, a total of 132 refugees received a decision for resettlement bringing the total number of refugees who received decisions from January to December 2018 to 329 individuals while 299 individuals (out of the 329) departed to various locations including Sweden (22 persons), Finland (three persons), Canada (23 persons) and the United States of America (251 persons) in the same period.
- In Mantapala, a total of 3,946 Alien Cards were issued to refugees giving them the right to access services in a manner similar to Zambian citizens. The Provincial National Registration Passport and Citizenship Office (NRPC) trained a total of 18 staff (three from each health facility) on the process of registering children and filling in notices of birth forms, so that more refugees could obtain Alien Cards and Birth Certificates.
- The Ministry of General Education deployed a total of 12 qualified teachers to Mantapala to increase the number of teachers who were mainly volunteer teachers from the refugee population and host communities. The total number of enrolled pupils in the two schools of the settlement was 5,514 by the end of December. All the 214 pupils in grade seven (77 girls and 137 boys) and 82 pupils (37 girls and 58 boys) out of the 95 in grade nine were found eligible to book a seat for the 2019 national examinations. In Meheba, UNHCR and the Ministry of General Education assisted a total of 26 pupils to pay for examination fees and 92 pupils to pay for tuition fees.
- The number of moderate malnutrition cases in Mantapala was 528, among them there were 181 pregnant women and 347 lactating women. There were 109 severely malnourished women, among them 37 pregnant women and 72 lactating women.
- In Mantapala, a total of 196.455 MT of food consisting of mealie meal, beans, salt and vegetable oil was distributed to 12,827 refugees. An additional 10.314 MT of food was distributed to a total of 825 new arrivals at the reception centre in Mantapala while another 20 MT of food was transported to border reception centres in Chiengi, Kaputa, Nsumbu and Mpulungu in the north for distribution to people who were expected to arrive. In Meheba, hot (Wet) meals were distributed to a total of 160 new arrivals, including unaccompanied and separated children, as well as mentally disabled persons who arrived at Transit Centre 36.
- In Mantapala, a total of 51 drilled boreholes were providing 423m³/day and 30 litres/person/day to the population in the settlement. A total of 14 Pump Minders (four women & ten men) from refugee and host community population were trained to ensure that the boreholes were repaired whenever they broke down, and were ensuring that all water points in the settlement were kept clean to avoid occurrence of water-borne diseases. There were 73 hygiene promotion volunteers conducting door-to-door visits and passing hygiene promotion messages in the settlement. The ratio of hygiene promoters to the population was 1:178.

Challenges

- Youth empowerment opportunities in the form of skills development, vocational training and assistance for those wishing to continue with tertiary education (like the DAFI Scholarship) are required in Mantapala, where 59 per cent of the refugee population is under 18 years.
- The construction of two schools Mantapala (A) and Mantapala (B) are incomplete with no doors, plaster, windows, furniture for school offices, and no permanent toilets. Support to complete the construction of two schools and permanent toilets is required.
- In Mantapala, the number of mental health patients involving anxiety disorder, schizophrenia, major depression among others, increased up to 80 people and specialised mental health medics and psychiatrists and counsellors are required. Because of the lack of treatments and services in Mantapala, such persons are referred either to Nchelenge district or the capital Lusaka, for appropriate treatment.
- A total of 1,879 households in Mantapala, including the recent arrivals, live without durable household latrines and bath shelters. Households and institutions with no toilets require assistance to construct durable toilets especially during the rainy season to avoid the possibility of the occurrence of water borne diseases caused by open defaecation.

ZIMBABWE**Latest developments**

- After completion of a verification exercise that conducted in December, it was established that 9,885 (5435M:4450F) Congolese reside in Tongogara refugee camp and 121 (68M: 53F) live in urban areas around the country, mainly in Harare. As part of the verification exercise, a total of 2,056 refugee identity cards were issued to eligible refugees. A total of 824 birth certificates were issued to refugee children born in Zimbabwe.

Achievements

- Persons with specific needs in Tongogara camp benefitted from targeted protection interventions including psychosocial support and referral assistance. Best interests determination (BID) assessments were conducted for 28 unaccompanied children with the aim of implementing placement in kinship care.
- The Zimbabwe Immigration Department conducted its monthly visit to Tongogara from 17 to 19 December 2018. A total of 611 refugee temporal residence permits were extended and 44 new permits were issued.
- The pass rate of the Tongogara Primary school seventh grade public examinations increased from 55.8 per cent in 2017 to 68.85 per cent in 2018. The pass rate that has been improving on a yearly basis has been attributed to the support received by the school from all stakeholders in Tongogara including Terre Des Hommes (TDH), Department of Social Welfare (DSW) and UNHCR.
- Both primary and secondary school students enrolled in boarding schools outside Tongogara refugee camp were transported back to the camp by TDH when schools went on recess at the end of the 2018 academic year. The TDH Education Officer addressed issues relating to discipline in the school and performance with the students.
- Visits to Tongogara camp by specialist nurses (cervical cancer screening, mental health care and eye care) and a general practitioner were facilitated by TDH with the aim of ensuring increased access to medical services for refugees and the host community living close to the camp.
- Monthly monitoring of all tuberculosis patients under treatment was conducted with no new cases recorded. Twenty-five (25) mosquito nets were distributed to expecting mothers for malaria prevention.
- The GOAL managed agricultural livelihood project in Tongogara has cultivated summer maize. Ninety (90) per cent of the maize was described as having grown beyond the average human knee height. However, some of the maize was observed as having being moderately infected by army worms. Refugee farmers have since started applying pesticides to control the infestation.
- The WFP funded poultry project and the slaughter house were successfully fenced under one enclosure thus enhancing physical and bio security of the premises.
- Micronutrient distribution continued in the reporting period and 26 children were assisted.
- Construction work of 200 shelters and of a new secondary school was ongoing in Tongogara camp.
- Construction of 35 latrines with financial resources from the Julia Taft fund and of 210 latrines funded by Chinese Aid started in December.
- A total of 1,372 water purification tablets (aqua tablets) were distributed in the camp by trained community group members.
- The Environmental Health Technician (EHT) inspected cattle (4), goats (23) and pigs (16) at the slaughter pole to ensure that meat being sold in Tongogara butcheries is fit for human consumption.

Challenges

- Given that most children born outside Tongogara camp did not have hospital birth confirmations, the process of issuing birth certificates during the verification exercise was slowed down as the hospital birth confirmation documents are a prerequisite for issuance of a birth certificate. UNHCR and partners agreed to set up an ongoing process for new mothers to collect hospital documentation as soon as possible.
- Reports of indiscipline among refugee students enrolled in schools outside Tongogara camp continued to be received.
- Demand for pig farming has continued to increase. This is putting pressure on the existing infrastructure. The need to expand the project will be explored by GOAL.

Financial Information

UNHCR is very grateful for the financial support provided by donors who have contributed to our activities with unearmarked and broadly earmarked funds as well as for those who have contributed directly to the situation or operations.

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Working in Partnership

Partners involved in the 2018 Regional Refugee Response Plan (RRRP) for the DRC include:

Action Africa Help | Action Against Hunger | Adventist Development and Relief Agency | African Initiative for Relief and Development | Agency for Technical Cooperation and Development | American Refugee Committee | Building Resources Across Communities | CARE International | Caritas | Danish Refugee Council | Fédération Luthérienne Mondiale | Finn Church Aid | Food and Agriculture Organisation | Good Neighbours International - Tanzania | Gruppo di Volontariato Civile | Help Age International | Humanitarian Open Street Map Team | Humanity and Inclusion | International Aid Services | International Organisation for Migration | International Rescue Committee | Jesuit Refugee Service | Johanniter | Kabarole Research and Resource Center | Lutheran World Federation | Médecins du Monde | Medical Teams International | Norwegian Church Aid | Norwegian Refugee Council | OXFAM | People in Need | Plan International | Save the Children International | Tutapona | Uganda Red Cross Society | United Nations Children's Fund | United Nations Department of Safety and Security | United Nations Development Programme | United Nations High Commissioner for Refugees | United Nations Population Fund | United Nations Resident Coordinator's Office | World Food Programme | World Health Organisation

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REGIONAL COORDINATION

- **Ann Encontre** is the Regional Refugee Coordinator (RRC) for the DRC situation, covering Congoese refugees in Angola, Burundi, Central African Republic, Rwanda, Republic of the Congo, South Sudan, the United Republic of Tanzania, Uganda, Zambia and other countries receiving refugees from the DRC.
- UNHCR leads and coordinates the response to the DRC refugee emergency, ensuring that the response is coherent with developments within the DRC, in close collaboration and consultation with relevant government counterparts, and with the support of UN Country Teams and other humanitarian and developments partners.

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