

- **More than 100 attacks against humanitarian actors in North Kivu in 2008**
- **Free movement of persons is restricted in Masisi**
- **2,010 new IDP families reported in Masisi centre**

### Security context/Access

The total number of attacks against humanitarian workers in Nord Kivu in 2008 has just passed the milestone of 100, including two deaths. Access constrains in this province deter a large number of displaced persons as well as other vulnerable Congolese from life-saving assistance, and also endangers the lives of humanitarians.

### **Rutshuru territory**

- The security situation continues to deteriorate in the Rutshuru-Kiwanja area and is likely to further decrease humanitarian access. Negotiations to access the most vulnerable population and preserve humanitarian space remain essential. Humanitarian actors have initiated a series of meetings and contact with the various parties to discuss this issue.
- Due to the recent security incidents, caution is recommended when operating in Rutshuru. If maintaining a humanitarian presence in some areas of the territory is necessary, continuous advocacy actions with CNDP, for the respect of humanitarian principles and free access to civilian population, are required.

### **Masisi territory**

- Freedom of movement is increasingly restricted along the Masisi-Sake axis due to road blocks established by CNDP in Mushaki and Bihambwe, by FARDC in Katale and by PARECO in Lushebere.

### Population Movements

#### **Grand Nord**

- According to the latest report of the Population Movement Commission in Kanyabayonga 15,286 households returned in the city after the widespread lootings of FARDC soldiers in November. This figure also includes 2,161 IDP families who had also fled with the population of Kanyabayonga. According to ICRC, 10,775 families returned in Kirumba as of 15<sup>th</sup> December.

#### **Masisi territory**

- **2,010 new IDP families, living with host families or in public premises, have been registered by local partners in Masisi center.** Reports indicate that there is an increase in humanitarian needs in Masisi center (health, education, nutrition, shelter, protection) due to access constrains. The situation of the old caseload of IDPs could further deteriorate due to the lack of adequate level of assistance. The need for food aid could also force some IDPs to return to the areas of origin.
- In Bihambwe, 238 families have returned since the beginning of December. However, and following the confrontations between PARECO and CNDP in the south of Masisi territory end of November, 50 new IDP families, coming from the localities of Kinigi, Shugi and Kaniro, arrived in Bihambwe.
- In Osso, 70% of the population has returned (approximately 570 out of 750 families).
- In Matanda, the entire population has returned. According to information provided by the local Health structure the total population is estimated at 1,570 families.

#### **Minova (South Kivu)**

- **IRC/RRM in South Kivu** finalized the first stage of the registration of the IDPs. In total, 3,785 households were registered: 1,513 in Mudimbi I, 563 in Mudimbi II, 873 at De la Poste, 369 in Kitalaga I, and 467 in Kitalaga II. IRC/RRM started the registration process on 17<sup>th</sup> December following the recommendations of the coordination meeting on Minova on 12 December.

### Gaps/Early warning

#### **Health**

- There is a need to identify a partner to replace MSF-H who has withdrawn from the health zone of Walikale since September. The population, accustomed to free medical services, will not be able to pay for medical care when the current program will end in 31 December.
- The WHO survey shows that the vaccine coverage of displaced children in Minova is lower than 60%. The majority of these children were not vaccinated the past three months. WHO, in partnership with the IPS, plans to organize a vaccination campaign for measles for displaced children (<5) in January 2009.

- Despite the support provided by SC-UK and the 9th FED, the health zone of Masisi (except for the areas covered by MSF-B) faces critical drug shortages due to access constraints and insecurity.

#### **Food security**

- In Masisi territory, the IDPs have missed the planting season and might be exposed to food insecurity.

#### **Multi sectoral**

- Recent evaluations showed that IDPs around the MONUC site in Kiwanja need multi sectoral assistance (Protection, food, NFI, Watsan). Despite a reduction in the cases of Cholera, the number of cases registered in some areas remains high (69 cases).

#### **Assistance**

##### **Non Food Items**

- On 21 and 22 December, the International Organization for Migrations (IOM) distributed 2.500 NFI kits to FARDC dependents in need of assistance in Lubero, Butembo and Beni. However, this distribution did not completely cover the needs of these families.
- On 19 December, World Vision distributed NFI kits to 2.000 newly displaced persons coming from Rutshuru territory and South Lubero.
- Solidarités provided corrected figures of the IDPs assisted with NFIs in Kitsumbiro. As of 15 December, 1,295 IDP families have been assisted with NFIs. On 18 December, Solidarités distributed NFI kits to 344 households in Kipese.

##### **Protection**

- The territorial commission on sexual violence in Beni reported that 18 victims of rape have been referred to the General hospital between the 5 and 18 December. The commission indicated that 11 aggressors are civilians and that 15 aggressions occurred in the homes of the victims.

##### **Assessment mission**

- A Save the Children team will remain in Minova to assess the situation of the children in 10 elementary schools. According to preliminary results, 1,022 displaced children, over 4 300 local children, have access to education in seven elementary schools.
- A SC-UK team went to Kasindi (south-east of Beni) on December 17 to assess the child protection situation and the educational needs.
- Between 18 and 22 December a NRC MSA (health and watsan) team visited the territory of Walikale and assessed the situation in Ndjingale health area, on the Lubutu-Kisangani axis.

For more information please refer to : <http://www.rdc-humanitaire.net>

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