Facts & Figures
- Ranked 176/188 in the 2016 Human Development Index
- 3.7 million internally displaced people including 1.3 in the Kasai region
- 5.9 million food insecure people
- 1.9 million severely malnourished children in 2017 (source: UNOCHA)
- More than 479,000 refugees from Rwanda, CAR, Burundi & South Sudan (UNHCR)

European Commission humanitarian funding:
- In 2016: €39 million
- So far in 2017: €27.7 million + approx. €7 million for ECHO Flight

Introduction
Old and new crises are causing untold suffering among millions of civilians in the Democratic Republic of Congo (DRC). Since conflict erupted in August 2016, in the previously peaceful Kasai region, there has been a sharp increase in the number of internally displaced people across the country, now totalling 3.7 million. The continuing violence is aggravated by general underdevelopment and political tensions.

The EU has been providing humanitarian assistance to DRC since 1994. In the past 5 years, more than €200 million have been allocated for humanitarian assistance. In July 2017, an additional €5 million was released for emergency aid to victims of violence in the conflict-torn Kasai region.

What are the needs?
Comparable in size to Western Europe, DRC is one of the world’s poorest countries notwithstanding its vast natural resources. Its complex humanitarian crisis is characterised by violent conflict, malnutrition, epidemics and mass displacement. DRC is also home to over 479,000 refugees from neighbouring countries such as Burundi and South Sudan.

Despite a proliferation of conflicts, overall humanitarian funding has decreased. The Kivu and Ituri provinces have been at the centre of fighting for over two decades. More recently clashes have erupted in the Tanganyika and Kasai provinces. 1.3 million people have had to flee their homes in the Greater Kasai region and 8 provinces in the Southwest of the country are now affected by the expanding conflict.
In May 2017, 35 000 people became newly displaced and 30 000 fled to neighbouring Angola. The UN warned that 400 000 children are at risk of severe acute malnutrition in the 5 Kasai provinces where life-saving health services have been severely disrupted. Extreme violence and atrocities against civilians are taking place in a climate of impunity. Reports include mass executions, rape, detention and forcible recruitment, also of children. The UN and Congolese Red Cross have so far discovered 52 mass graves. In March 2017, two UN experts investigating human rights violations were discovered dead.

Stepping up aid to the victims of this new conflict presents a challenge. The humanitarian presence in Kasai has traditionally been limited and access to the affected area is problematic due to its remoteness, poor road conditions, insecurity and the presence of innumerable militias, soldiers and self-defence groups.

Insecurity is also an issue in other conflict-affected regions in the East, where aid workers continue to be abducted and civilians abused. Displaced families are in need of shelter, safe water, food assistance, nutrition and health care.

DRC’s population is vulnerable to recurrent epidemics. In 2016, more than 14 million malaria cases were recorded while cholera, yellow fever and measles affected more than 53 000 people. An Ebola epidemic in Bas Uele province was confirmed in early May 2017 and declared over in July.

**How are we helping?**

EU funded humanitarian operations focus on the rapid response to population movements and helping people affected by acute malnutrition and epidemics.

Violent conflict has far-reaching consequences for families and host communities. The priority of the European Commission's European Civil Protection and Humanitarian Aid department (ECHO) is to provide victims of violence with protection and life-saving assistance. The majority of EU humanitarian aid in DRC goes to the direct victims of recent and ongoing violence.

EU humanitarian partners also respond to disease outbreaks and acute malnutrition. Given the poor state of the health care system, malaria, cholera, yellow fever and measles continue to take the lives of thousands of people. With almost 2 million children under five at risk of dying from severe acute malnutrition countrywide, the EU contributes to the scale-up of prevention measures and therapeutic care for the malnourished children.

Partners include UN agencies, the Red Cross and various NGOs. They carry out a range of activities: treating severely undernourished children and providing emergency health care, including specialised care for survivors of sexual violence; providing food assistance, livelihood support and protection; improving water, sanitation and hygiene conditions; ensuring access to education and training for displaced children; and responding to epidemic outbreaks.

In 2016, the European Commission allocated €39 million to enable live-saving assistance in the DRC and for Congolese refugees in neighbouring countries. So far in 2017, EU humanitarian funding amounts to € 27.7 million.

In addition, the Commission runs its own humanitarian air service (ECHO Flight) at an approximate cost of €7 million per year. ECHO Flight offers safe and free-of-charge transport to remote areas for ECHO partners and the wider humanitarian community. It flies to more than 15 destinations in the DRC.

In May 2017, an ECHO Flight plane transported aid workers and medical supplies to the area affected by an Ebola outbreak. The EU also contributed to the Disaster Relief Emergency Fund (DREF) allowing the International Federation of Red Cross and Red Crescent Societies (IFRC) to deploy 150 Congolese Red Cross volunteers for house-to-house sensitisation, to trace the ‘contacts’ of infected persons and conduct safe and dignified burials. After 5 confirmed and 3 probably cases in the remote Likati health zone, the eighth outbreak of Ebola in DRC since the discovery of the virus in 1976 was declared over on 2 July 2017.