

HUMANITARIAN IMPLEMENTATION PLAN (HIP) GREAT LAKES¹

The activities proposed hereafter are still subject to the adoption of the financing decision ECHO/WWD/ BUD/2023/01000

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The present Humanitarian Implementation Plan (HIP) was prepared on the basis of financing decision ECHO/WWD/BUD/2023/01000 (Worldwide Decision) and the related General Guidelines for Operational Priorities on Humanitarian Aid (Operational Priorities). The purpose of the HIP and its annexes² is to serve as a communication tool for the partners of DG ECHO³ and to assist in the preparation of their proposals. The provisions of the Worldwide Decision and the General Conditions of the Agreement with the European Commission shall take precedence over the provisions in this document.

1. CONTEXT

Humanitarian crises in the Great Lakes' region are compounded by poor governance, structural poverty, insufficient development, as well as a high infectious disease potential. Against a backdrop of limited investment in social services and the impact of corruption and violence on livelihoods, crisis-affected people in the fragile states of the region⁴ generally lack livelihood opportunities and often live in extreme poverty. Access to basic social services is inadequate, especially in the **Democratic Republic of the Congo (DRC)**, and to a lesser extent in **Burundi** and the **Republic of Congo**.

While this HIP covers five countries, it focuses in particular on the humanitarian needs (a) triggered by the crisis in the **DRC** and (b) of the **Burundian refugees** in Tanzania, Rwanda and the DRC⁵, as well as refugee returns back to Burundi.

For both crises, humanitarian needs are assessed to be very high and so is the vulnerability of the crisis-affected populations. The DRC and the Burundi refugee situation are also both categorised as forgotten crises.

¹ The Great Lakes' region in this HIP covers the following five countries: Burundi, Democratic Republic of the Congo, Republic of Congo, Rwanda and Tanzania.

² Technical annex and thematic policies annex

³ Directorate-General for European Civil Protection and Humanitarian Aid Operations (ECHO)

⁴ Out of 179 countries assessed in the Fragile States Index 2022 by the Fund for Peace, the **DRC** was considered the 6th most fragile country in the world (and on "high alert"), **Burundi** was ranked the 19th and the **Republic of Congo** the 24th (both on "alert"), **Rwanda** the 41st ("high warning") and **Tanzania** the 61st ("elevated warning") most fragile state globally.

⁵ Uganda also hosts a considerable number of Burundian refugees, but is covered by the HIP for the Greater Horn of Africa.

Year 2022	DRC	Burundi	Tanzania ⁶	Rwanda ⁷	Republic of Congo
INFORM risk index⁸	7.6/10 “very high”	5.9/10 “high”	5.3/10 “high”	4.5/10 “medium”	5.2/10 “high”
Vulnerability index	7.4/10	6.3/10	5.5/10	5.9/10	6.1/10
Hazard and exposure	7.4/10	4.7/10	4.3/10	3.0/10	3.1/10
Lack of coping capacity	8.1/10	6.8/10	6.3/10	5.1/10	7.6/10
INFORM crisis severity index	5/5 “very high”	4/5 “high”	3/5 “Medium”	3/5 “Medium”	4/5 “high”
Projected conflict risk	10/10	8.0/10	4.5/10	3.4/10	3.0/10
Uprooted people index	9.6/10	6.5/10	6.4/10	6.6/10	7.7/10
Humanitarian conditions	9.0/10	5.7/10	3.2/5	2.4/5	2.1/10
Natural disaster index	4.5/10	3.6/10	5.2/10	3.5/10	3.9/10
Epidemics risk	8.5/10	6.9/10	7.0/10	6.3/10	7.0/10
HDI ranking ⁹	175/189	185/189	163/189	160/189	149/189
Total population (projections & estimates)	99 million	11.9 million	59.7 million	13.7 million	5.5 million

The **DRC**, although endowed with vast natural resources, including some of world’s most important mineral reserves, and home to the second largest tropical forest on earth, remains a fragile, low-income country. More than 70 percent of Congolese citizens live in extreme poverty. The humanitarian situation in the country remains complex and has overall worsened in recent years, consisting of multiple and overlapping crises across the country, and essentially in its eastern provinces, which face rampant violence and armed conflicts. The insecurity has triggered vast and repeated displacements. The impact of the violence on civilians is a major concern with regular violations of human rights and international humanitarian law, including targeted attacks against civilians and a high prevalence of sexual and gender-based violence. The prevailing violence is also partly responsible for excess morbidity and mortality. The impact of the decades-long conflict on people’s mental health in affected areas is deemed significant.

The DRC hosts the ‘*Mission de l’Organisation des Nations Unies pour la Stabilisation en République Démocratique du Congo*’ (MONUSCO). It is mandated to engage in direct military interventions against non-state armed actors in close collaboration with the Congolese army, the ‘*Forces Armées de la République Démocratique du Congo*’ (FARDC). MONUSCO is progressively withdrawing from a number of provinces, while at the same time facing criticism from at least parts of the Congolese society for its perceived lack of success in protecting civilians, both of which contains the risk to further expose populations of concern to armed groups, while also negatively impacting on humanitarian access. Civil-military coordination remains of utmost importance.

⁶ This table provides information on Tanzania’s overall situation, but not for the refugees it hosts and who are the sole focus of DG ECHO action in the country.

⁷ This table provides information on the Rwanda’s overall situation, but not for the refugees it hosts and who are the sole focus of DG ECHO action in the country.

⁸ INFORM is a global, open-source risk assessment for humanitarian crises and disasters.

⁹ Human development index, developed by the UN Development Programme. Latest HDI from 2020.

Since the elections in **Burundi** in 2020, an increased number of refugees have returned home. Most of them had left their country of origin due to violence and repression in the context of the previous elections in 2015. By mid-2022, around 260 000 Burundian refugees were registered in the four main asylum countries: Tanzania, DRC, Rwanda and Uganda. At the same time, UNHCR reported the assisted repatriation of over 193 000 individuals. While the situation in Burundi seems to be more conducive for return, the absorption capacity to allow a sustainable reintegration of large numbers of returnees remains a critical issue¹⁰ together with human rights and protection concerns. In fact, the number of returnees substantially decreased in the first half of 2022 compared to 2021.

The Congo River basin, the world's second largest rainforest, is expected to be significantly affected by climate change, with raising temperatures and extreme weather events. Eastern **DRC** is also prone to tectonic activities and volcanic eruptions. At the same time, the **DRC** and the **Republic of Congo** lack efficient working systems and available resources to prevent and respond to natural disasters. Poor infrastructure and low access to basic services make the populations extremely vulnerable to any disaster. **Burundi** is highly exposed to a wide range of natural disasters, mainly floods, landslides and drought. Given its very high population density, the poorest communities often settle in areas prone to flooding and landslides, including those returning from exile. Climate change is expected to increase the frequency and impact of hydro-meteorological hazards (including their impact on food security and disease outbreaks) in the region.

The Great Lakes' region faces increasing socio-economic challenges that have been further compounded by collateral damage from COVID-19. It remains to be seen how the pandemic evolves in 2023. The region, particularly the **DRC**, is affected by recurrent epidemics (and emerging diseases), the control of which remains challenging due to weak health systems, insecurity and inefficiencies in health alert and response mechanisms.

The overall political and humanitarian situation in the Great Lakes is not expected to improve in 2023. The root causes of the violence in eastern **DRC** remain.¹¹ The refugee situation in the region is likely to continue. In total, the Great Lakes' region hosted around one million refugees by mid-2022. The voluntary repatriation process of Burundian refugees is expected to continue in 2023, but it is difficult to predict its pace.

The **DRC** is structurally food insecure. It imports more than 80 percent of its needs in food. The agricultural sector is under-invested and under-developed (only 10 percent of arable land are farmed).

¹⁰ 72 percent of Burundians live below the poverty line (WFP Burundi country brief, July 2022).

¹¹ At EU level, the European External Action Service (EEAS) is working on an EU strategy for the Great Lakes, as well as a Political Framework for Crisis Approach (PFCA) to address violence in eastern DRC. EU Member States are expected to discuss these initiatives in autumn 2022.

2. HUMANITARIAN NEEDS

1) People in need of humanitarian assistance

¹²	DRC	Burundi	Tanzania	Rwanda	Republic of Congo
Registered refugees/ asylum seekers	533.000	105 000	210 000	128 000	55 000
IDPs	5.53 million	116 000			105 000
Severely food insecure people (IPC 3+4) ¹³	27 million	1.4 million			
Acutely malnourished children under 5y	2.4 million	140 000			
Protection needs (SGBV ¹⁴ ; children out of school)	9.5 million	310 000			

(All figures in the table are rounded)

2.1.1. Refugees and asylum seekers

Recurrent crises in the DRC, Burundi, South Sudan and the Central African Republic (CAR) have led to multiple waves of refugees in the Great Lakes' region. Most of them live in camps, except in the **DRC**, where many settled in local Congolese communities. Refugee camps in the Great Lakes are mainly managed by UNHCR. Many if not most refugees depend fully on humanitarian aid provided by the international community, with exceptions in the **DRC**, **Rwanda** and in the **Republic of Congo**, where limited – and largely informal – livelihood options exist. The low level of funding in response to refugees' needs in recent years and the absence or limited presence of long-term programmes have led to cuts in basic services and food rations in several camps and locations.

The **DRC** and **Rwanda** have developed refugee responses in line with the Global Compact on Refugees, granting freedom of movement to refugees, giving them access to national social services and supporting the goal of self-reliance.

The **DRC** hosts more than half a million refugees, mainly from Rwanda, Burundi, CAR and South Sudan. The quality of the refugee response is insufficient and access to basic services, interlinked with protection needs, requires specific attention. However, unless a new wave of refugees occurs, long-term solutions should be a priority for addressing their needs and those of host communities. The DRC is also the country of origin of over 900 000 refugees in neighbouring countries: Uganda, Tanzania, Rwanda, Burundi, Zambia, Angola and the Republic of Congo, some for more than a decade.

Rwanda hosts around 80 000 refugees from the DRC and around 48 000 refugees from Burundi. The large majority of Burundians live in one camp (Mahama). Around 35 000

¹² Sources: Refugees: United Nations High Commissioner for Refugees (UNHCR). Other: Humanitarian Response Plans for Burundi and the DRC. RoC – IDPs: International Displacement Monitoring Centre.

¹³ Integrated Food Security Phase Classification (IPC). Phase 3 represents 'crisis level' and 4 'emergency'. Phase 5 is the highest level and represents 'famine'.

¹⁴ Sexual and gender-based violence.

Burundian refugees have already returned to their country of origin. While refugees have the right to work and freedom of movement, livelihood opportunities remain limited. Access to core protection services exists, but SGBV risks and child protection remain of concern. Rwanda remains committed to the protection of refugees on its territory and reiterated its readiness to facilitate the safe and dignified return of those who choose to repatriate in collaboration with UNHCR and relevant governments. Monitoring of these returns is essential to ensure protection and sustainability.

Burundi hosts nearly 90 000 refugees and asylum-seekers, mainly from the DRC. The majority lives in camps, often for many years. Despite the progressive content of the national law on asylum, the reality is different. While urban refugees are able to move around the country with little impediments, camp-based refugees are required to obtain a “billet de sortie” (exit permit) from local authorities if they want to leave their camp. Similarly, there are restrictions on access to the labour market, access to finance and basic social services, which are the most challenging obstacles to their economic integration and self-reliance. Due to funding cuts, WFP reduced food rations drastically in 2022, increasing their vulnerability.

In **Tanzania**, around 210 000 refugees were hosted mainly in camps in the Kigoma region by mid-2022, the majority from Burundi (around 130 000) as well as from the DRC (approx. 80 000). The majority of Burundians arrived after the political turmoil in their country in 2015. Tanzania stopped granting *prima facie* refugee status to Burundians in 2017. It stopped registering new asylum seekers and withdrew from the Comprehensive Refugee Response Framework (CRRF) in 2018. The country applies a strict encampment policy and restrictive livelihood environment, while promoting the repatriation of Burundian refugees. A tripartite agreement on voluntary repatriation between Tanzania, Burundi and UNHCR entered into force in September 2017. More than 30 000 refugees repatriated from Tanzania to Burundi in 2021 alone, but this figure dropped to less than 1 200 in the first four months in 2022 – in line with the overall return trend.

The **Republic of Congo** hosts around 55 000 refugees mainly from CAR and the DRC and provides them to some extent with access to farming and fishing opportunities.

Past experience shows that refugee movements in the region are protracted while return movements are normally slow and relatively limited in numbers due to the lack of improvement of root causes that triggered the exodus, or the willingness to remain in the host country. Almost all refugees need support to cover their basic humanitarian needs. Access to basic services such as food, health, water, sanitation, hygiene and education is most important. Protection needs are extremely high for all displaced populations.

2.1.2. Returnees

Increasing numbers of refugees repatriated to **Burundi** since mid-2020 with over 65 000 returnees in 2021 alone. However, this trend reversed in 2022 with overall no more than around 7 500 individuals returning between January and April 2022. This substantial decrease has mainly been due to the many challenges returnees face regarding reintegration and limited livelihood options, but also remaining protection concerns. An increase in secondary displacement of returnees was already observed in 2021. Return and protection monitoring at regional level is essential to ensure protection and sustainability. Durable solutions for both returnees and host communities should be a priority for development actors.

2.1.3. Internally Displaced Persons (IDPs)

Around 5.53 million people are internally displaced (IDP) in the **DRC**, including 1.29 million in 2022 alone. Some have been displaced for years, but still face limited perspectives in the absence of substantial investments in durable solutions. Newly displaced populations need immediate and comprehensive multi-sector assistance, including protection, but also, in certain regions, of longer-term investment in order to secure sustainable relocation/reintegration. IDPs are often located in remote areas, difficult to access and not always accepted by the local/host community. The main reason for internal displacement in the DRC is conflict, which affects in particular the eastern provinces of Ituri, North and South Kivu, and Tanganyika.

Burundi counted around 116 000 IDPs, mainly due to natural disasters.

2.1.4. Populations affected by food insecurity and under-nutrition

Food insecurity and undernutrition are widespread and chronic (with frequent episodes of acute spikes) in the region with multiple root causes. They are particularly alarming in the **DRC** and, to a lesser extent, in **Burundi**. The socio-economic impact of the COVID-19 pandemic since 2020 and the consequences of Russia's war on Ukraine in terms of food exports, as well as the impact of climate change, have further aggravated food insecurity in **all countries** covered by this HIP, especially in urban areas.

A staggering 27 million people in the **DRC** were highly food insecure (IPC phases 3 and 4), according to the Integrated Food Security Phase Classification (IPC). Agricultural productivity is low in the DRC. The country does not produce enough food to meet the needs of its population and relies heavily on imports. A nutritious diet is unaffordable for half the population, according to the World Food Programme (WFP). Structural poverty and under-development, poor infrastructure and poor governance that limit agricultural and economic activities in rural areas, agricultural pests and livestock diseases, forced displacement due to conflict, weather conditions and climate change, as well as recurrent epidemics and a high disease burden, contribute to the alarming food insecurity. In addition, the lack of appropriate and accessible/affordable health care, access to clean water, availability of sanitary infrastructure, knowledge and attitudes as well as insufficient nutritional support mechanisms have dramatic consequences: an estimated 2.4 million children under five years of age suffered from global acute malnutrition.

In **Burundi**, a combination of recurrent climatic hazards, associated displacement and destruction of infrastructure, intense repatriation flows in 2020/2021, the persisting impact of the COVID-19 pandemic particularly on subsistence activities, the impact of the Ukrainian war, inflation, structural factors (including inadequate access to land), weak economic opportunities and an overall low resilience of the population are all factors explaining the food insecurity identified by the IPC: 12 percent of the population – 1.4 million people – were projected to face acute food insecurity (IPC phases 3 and 4) during the lean season in the last quarter of 2022. At the same time, more than one in two children under the age of five (55.8%) are chronically malnourished.

Almost all **refugees** in camps and settlements in the Great Lakes' region rely on humanitarian aid to meet their basic needs and most have at least occasionally experienced food ration cuts due to funding challenges for the refugee response.

2) Description of the most acute humanitarian needs

2.2.1. Protection

The humanitarian crisis in the **DRC** is essentially a protection crisis. The security and protection context in the east exposes civilian populations to human rights' violations and protection risks. The *Etat de siège*, which the President declared for the provinces of Ituri and North Kivu in May 2021, has remained in place so far, but has failed to better protect the civilian population. As the East African Community (EAC) considers a potential deployment of a regional force to eastern DRC, the effects of such a deployment on civilians would need to be seen. MONUSCO withdrew from Tanganyika in 2021, but remains present in Ituri, North and South Kivu. Any withdrawal or temporary suspension of the UN mission risks increasing insecurity as the DRC's armed forces FARDC and its national police are also perpetrators of human rights violations.¹⁵

Ratification of the 2009 Kampala Convention for the protection and assistance of IDPs is not yet concluded in the DRC. IHL violations including gender-based violence, sexual exploitation and abuse, child recruitment, extortion, physical violence, murder, abduction, torture, attacks on health structures and schools and looting continue to be reported on a daily basis and in a context of years of impunity.

The Humanitarian Response Plan (HRP) 2022 estimated that 9.2 million people have protection needs and that 7.2 million are at risk of gender-based violence. A further deterioration of the security context must be expected in eastern DRC in 2023, further increasing protection needs.

In **Burundi**, concerns over human rights violations (and widespread impunity) persist. In addition, the considerable return of Burundian refugees in 2020 and 2021 increased hardship in return regions and thus exposure to protection and gender risks.

The asylum space for Burundians in the refugee camps in **Tanzania** remains of significant concern. Authorities will most likely continue promoting repatriation, despite indications that returnees increasingly face integration challenges.

2.2.2. Food assistance, food security & livelihoods

In the **DRC**, food insecurity has been rising in recent years with 27 million people severely food insecure in 2022. The stark increase in numbers in recent years has various reasons, but one cause of the intensifying food crisis is the upsurge of violence, conflict and instability eastern DRC and large internal displacement because of it, as well as an overall economic decline, low agricultural productivity, limited access to basic services, recurrent disease outbreaks and poverty (as outlined in 2.1.4).

In **Burundi**, food insecurity remains a structural problem due to the same underlying factors with 1.4 million people projected to be acutely food insecure between October and December 2022.

Almost all **refugees** in the Great Lakes' region rely on international humanitarian aid to meet their basic needs, including food. Some very limited livelihood options exist in Rwanda. Food ration cuts have become common in the last years due to funding challenges for the refugee response.

¹⁵ See reporting from the United Nations Joint Human Rights Office.

2.2.3. Health

The Great Lakes' region, and especially the **DRC**, is prone to outbreaks of infectious diseases such as vector-borne diseases (yellow fever, malaria, dengue, typhoid, plague, etc.), viral haemorrhagic fevers (Ebola, etc.), as well as measles, meningitis, polio, cholera, etc. The main reasons are overall poverty and inequity, prevailing natural conditions and climate change, but also rapid urbanisation, poor access to quality healthcare as well as safe water, sanitation and hygiene, exacerbated by ongoing humanitarian crises.

Epidemics often require the mobilisation of additional emergency, humanitarian and specialised for the containment and response. Disease outbreaks in recent years have highlighted some serious shortcomings of the health system in the DRC and the further need for long-term investment, better regulation and multi-sectorial response strategies.

While malaria, tuberculosis, lower respiratory tract infections and diarrheal diseases remain the top causes of mortality, the burden due to non-communicable diseases is increasing at a fast rate. Decades of conflict, poverty, inequity and exploitation have left a huge mental health burden on the Congolese people. COVID-19 increased their vulnerability due to reduced vaccination and interrupted treatment of chronic conditions.

The resilience of the health system is further compounded by disruptive effects due to conflicts (exodus of human resources, looting of facilities, direct attacks against health workers, etc.). As such, humanitarian settings suffer from excess morbidity and mortality due to low access and availability of quality health services (including maternal, new-born and child health care) as well as increased health threats.

While the risk for high impact disease outbreaks is somewhat lower for those affected by the **Burundi** crisis, both in **Burundi** and in **refugee camps in neighbouring countries**, communicable disease outbreaks have occurred in the past. A long-term investment in health systems is needed with built-in surge capacities and improved infection control measures as well as improved mental health and psychosocial services.

2.2.4. Nutrition

In the **DRC**, malnutrition remains the most important risk factor contributing to death and disability combined. In 2022, the nutrition cluster targeted 2.4 million persons for support against acute malnutrition (children under five and pregnant and lactating women).

In **Burundi**, the nutritional situation among children under the age of 5 years has deteriorated over the past years. The majority of children younger than five are chronically malnourished (55.8%). Poor access to safe drinking water and proper sanitation facilities, a high level of food insecurity and a minimum dietary diversity, contribute to the increased levels of acute malnutrition, while high levels of infectious diseases are key drivers.

2.2.5. Water, sanitation and hygiene (WASH)

In the **DRC**, there are structural problems of water quality (rather than quantity). Access to water supplies, basic sanitation and basic means to adopt adequate personal hygiene practices are largely insufficient. Such a situation creates even higher public health risks in context of population displacement and causes the spreading of waterborne diseases.

WASH needs remain for refugees in **Tanzania**, mainly for additional school and household latrines (in the context of camp consolidation).

2.2.6. *Shelter and non-food-items (NFI)*

In the region, and in particular in the **DRC**, people displaced for years coexist with others newly displaced, some of them victims of multiple displacements. The first category needs durable solutions, while the second one needs emergency assistance.

2.2.7. *Education in Emergencies (EiE)*

Displacement, including returns, education costs – and conflict in the **DRC** – have significantly affected the rights of children in the **Great Lakes**, including their access to education. The absence of civil documentation may prevent displaced children from accessing the education system. Gender-based discrimination also significantly hamper girls' access to education, especially the transition to secondary level. COVID-19 further disrupted education efforts in the region between 2020 and 2022 and raised the need for harmonised and accredited accelerated education programmes in order to help out-of-school children to initially access non-formal education and then integrate into the formal education system.

Children affected by conflict and displacement are usually traumatised and in need of psychosocial and/or mental health support.

Schools in the **DRC** are also frequently used by IDPs for shelter (for the lack of alternatives) or occupied by armed actors, in breach of the “safe school” declaration ratified by the country.

2.2.8. *Disaster preparedness and resilience*

All countries in the Great Lakes region are prone to both natural and human-induced disasters. Coping capacities of communities and authorities are quickly overwhelmed, and as such they are unprepared and unable to provide appropriate and timely response. Continuous conflict (in the **DRC**) and the impact of climate change further exacerbate risks. However, investment in disaster preparedness and emergency response is generally weak due to conflicting priorities, political instability and lack of a long-term vision.

The **DRC** is home to multiple natural and man-made risks ranging from volcanic and tectonic activities to flooding, a high recurrence of disease outbreaks, and on-going internal conflicts resulting in back-and-forth, protracted and short-term displacement and humanitarian needs.

In **Burundi**, around 116 000 people were internally displaced in mid-2022 mainly because of recurrent floods, landslides and other natural disasters. Such disasters are expected to increase with climate change. It is important to build in-country capacity to respond to low- and medium-scale disasters, to strengthen local actors' disaster preparedness and response mechanisms, to develop and operationalise community-based contingency planning and to strengthen community capacity for early warning and action.

Floods in the **Republic of Congo** in recent years highlighted the authorities' lack of preparedness and capacity to respond. The damage and destruction caused by recurrent flooding leads to displacement, rising food insecurity, reduced water quality and an increase of water-borne diseases, thus exacerbating humanitarian needs that national authorities have not been able to manage.

3. HUMANITARIAN RESPONSE AND COORDINATION

3.1. National / local response and involvement

Despite very limited resources, all countries in the region host refugees fleeing from violence in their respective home country, granting them the appropriate status, but sometimes with reservations on the conventions (freedom of movement, right to employment, etc.). The **DRC** grants *prima facie* status to refugees from Burundi, CAR and South Sudan. The government of **Rwanda**, which signed up to the CRRF in 2018, grants *prima facie* refugee status to refugees from Burundi and the DRC.

Rwanda has been particularly active in ensuring registration, providing security and even issuing national ID cards to refugees to enable them to move freely and access social services and jobs. The Ministry for Disaster Management is an active site manager for all transit and refugee sites.

Tanzania lifted the *prima facie* status for Burundian refugees in 2017, going back to individual refugee status determination and encourages actively repatriation. Authorities take the view that the situation in Burundi is as such that it allows refugees to return. The voluntariness of the return processes – in line with legal obligations and the tripartite agreement – requires close scrutiny as well as the sustainability of these returns. Tanzania is not willing to grant asylum to Mozambicans fleeing the conflict in Cabo Delgado, citing security reasons, and is so far not granting UNHCR access to the border areas.

In **Burundi**, a new law promulgated on 5 November 2021 regulates immigration and emigration in Burundi, covering all foreigners, including asylum seekers, refugees and stateless persons. It puts the management of asylum under the responsibility of the national police. The implementation decree for the new law has not yet been published.

In the **Republic of Congo**, the registration of refugees and asylum-seekers – essentially from CAR and the DRC – is done in close collaboration with the government through the National Commission for Assistance to Refugees.

National and local authorities in the **DRC** lack the capacity and/or willingness to address the root causes of the humanitarian crises. However, the government tries to address the insecurity in eastern DRC. A military “*Etat de siege*” to address conflict and violence in Ituri and North Kivu provinces has not improved the situation for civilians since its introduction in 2021. The DRC is seeking solutions also at regional level to address the insecurity in its eastern provinces, including through the East African Community, which it joined in 2022. However, fighting in eastern DRC has so far rather intensified and not decreased. The role of MONUSCO is questioned by some political actors and parts of the civil society. At the same time, interventions by the national armed forces are sometimes perceived by local populations as “part of the problem” rather than part of the solution. Impunity is still the norm and limited efforts have been made for prosecuting perpetrators.

Efforts to address the root causes of food, nutritional and health crises are still limited. Government expenditure on social services and physical infrastructures remains very low compared to the huge scale of needs and the size of the DRC. Setting up a national plan of universal health coverage and free primary education are part of the government’s priorities in the DRC, but without secured funding so far. An effective decentralisation remains an important bottleneck in emergency response. A national programme for health emergencies – *Programme National des Urgences et Action Humanitaire* – is

attached to the Ministry of Health, which assists with human resources during major health emergencies/outbreaks.

The Government of the DRC has started working with UNDP to develop the country's first disaster risk reduction policy. The country has no functioning disaster management body, only a poorly functioning civil protection mechanism. Disaster preparedness activities are not prioritised, resulting in missed opportunities to prepare and strengthen local capacity and resilience, and undermining the ability to anticipate, prepare for and respond effectively to recurrent man-made or natural disasters.

While the **Republic of Congo** is prone to natural disasters, it lacks basic infrastructure, social services and a working system to manage natural or man-made disasters, rendering its population extremely vulnerable to any disaster. A national strategy and action plan for the prevention and reduction of risks was developed, but has not been fully implemented due to lack of technical expertise and financial resources

In **Burundi**, disaster preparedness needs to strengthen a risk-informed approach and adequate multi-hazard early warning and early response mechanisms to enhance the capacity to prepare for, anticipate and respond to a crisis. The country has introduced reforms to deal with disease outbreaks (decentralisation).

3.2. International Humanitarian Response

Coordination and advocacy are key to address the protracted complex emergencies affecting the Great Lakes and protect humanitarian space from undue interference by authorities and conflict-parties. Moreover, due to the regional nature of some of the displacement crises in the Great Lakes, the need to further strengthen cross-country and regional coordination and political analysis remains relevant.

Out of 27 million Congolese identified as being in need of assistance, the 2022 Humanitarian Response Plan (HRP) for the **DRC** targets the 8.8 million most vulnerable people and required USD 1.88 billion. 33.1 percent of the funding requirement were met on 1 September 2022.¹⁶ The response is led by a Humanitarian Coordinator – who is also the Deputy Special Representative of the UN Secretary-General and UN Resident Coordinator – and his/her deputy. The humanitarian coordination system includes a Humanitarian Country Team (HCT) of which the European Commission (DG ECHO) is a member. Inter-cluster coordination consisting of nine clusters. Donors' coordination includes the Commission, EU Members States and other donors such as Canada, Norway, Switzerland, the UK and the USA. The NGO Forum covers over 100 international aid organisations.

The UN works as an integrated mission in the DRC. MONUSCO engages in direct military interventions against non-state armed actors in close collaboration with the FARDC (while members of the latter are also identified as human rights' violators¹⁷). The complex nature of the conflict in the DRC and MONUSCO's mandate require a clear distinction between independent humanitarian aid and the instruments for political stabilisation as well as a solid civil-military coordination and clear respect of civil-military guidelines. Concerted efforts of humanitarian actors to advocate for principled

¹⁶ Financial Tracking System (FTS) by the United Nations' Office for the Coordination of Humanitarian Affairs (UN OCHA). HRP funding requirements do not include appeals by the International Committee of the Red Cross and *Médecins Sans Frontières*. To note that funding varies widely among sectors.

¹⁷ See reporting by the UN Joint Human Rights Office of MONUSCO and the UN High Commissioner for Human Rights.

actions are vital, in order to ensure access to conflict-affected populations, and to build a positive understanding of humanitarian actions and principles, as well as of International Humanitarian Law. Advocacy and communication could help increase the level of understanding about the issues at stake in the region – and help bridging the gap between emergency, relief and rehabilitation, while engaging with development actors to cover gaps and look at more sustainable investments, thus enabling humanitarians to focus on emergency needs.

Over one million Congolese refugees and asylum seekers remain hosted in neighbouring countries (Angola, Burundi, Republic of Congo, Rwanda, Tanzania, Uganda and Zambia).

In **Burundi**, the presence of OCHA has led to a better coordination of the humanitarian actors in situ. The 2022 Burundi HRP required USD 182.4 million, targeting one million most vulnerable people. However, only 14.4 percent of these requirements were met on 1 September 2022. In addition, and in light of the considerable number of refugee returns since mid-2020, a **Joint Refugee Return and Reintegration Plan (JRRRP)** was developed in 2021, also trying to create synergies across the humanitarian-development-peace nexus (the Burundi Regional Refugee Response Plan was discontinued in 2022). UNHCR's regional approach for the assistance to the Burundian refugees allows for better coordination and cross-border information sharing, as well as the management of the flows of people of concern, be they refugees or returnees.

There is no HRP neither in the **Republic of Congo** nor in **Rwanda** and **Tanzania**, but the latter two are included in the Burundi Regional Refugee Response Plan.

3.3. Operational constraints

3.3.1. Access/humanitarian space

Restricted access, due to insecurity and/or administrative requirements by authorities, as well as context-specific difficulties, such as remoteness and logistical challenges, are major constraints in the region, especially in the **DRC** and, to a lesser extent, in **Burundi**, the **Republic of Congo** and **Tanzania**.

Safety and security are key constraints for the humanitarian response in the Great Lakes' region, especially in the **DRC**, as threats and attacks against civilians, humanitarian staff, infrastructure and supplies are recurrent. Political instability and the expected further reduction of MONUSCO presence increase safety, security and protection risks. Such situations call for enhanced and coordinated safety and security awareness, as well as strictly neutral, impartial, and independent actions. Another worrying trend is the level of pressure and obstruction from various parties that constrain the independence, impartiality and operating space for aid organisations. Military operations, repeated attacks or retaliation on local populations but also on humanitarian workers, and the shift of fighting to more remote areas increase the difficulties in maintaining an appropriate response capacity. Insecurity due to banditry has also increased. Civilians and aid workers are victims of attacks and kidnapping for ransom. The security situation remains extremely worrying and volatile in many regions, and aid organisations need to be cautious in order to gain safe access to beneficiaries.

Preserving humanitarian space depends on the acceptance by communities, weapon bearers and authorities, and on the delivery of humanitarian assistance based on independently assessed and verified needs, as well as a conflict-sensitive and 'do no harm' approach. In that respect, coordinated advocacy efforts for the respect of

humanitarian space, principles and International Humanitarian Law (IHL) as well as dialogue with all parties needs to be pursued and IHL dissemination ensured. The risk of humanitarian aid being instrumentalised remains high, leading to a potential misperception about the independence and neutrality of humanitarian action. It puts humanitarian workers' safety at risk while reducing access to the most vulnerable.

In addition, humanitarian organisations working in the Great Lakes regularly face administrative hurdles to do their job, such as obstacles to import equipment, obtain visas or work permits and/or recruit international staff for the humanitarian response, as well as registration and formal and informal taxation demands, and restrictions to collect, analyse and share data for needs assessments and monitoring. All these hurdles hamper the capacity to deliver aid in a timely, effective and accountable manner.

Populations in need of humanitarian assistance are dispersed across the region, often in areas that are hard to access due to geographical remoteness, lack of infrastructure and/or volatile security situations. This is especially true for the DRC: operating in the vast country is tremendously complicated in logistical terms. There are very few paved roads or cleared waterways, aircraft and airport infrastructures are in appalling conditions, and flight companies not reliable. Logistics are crucial to implement aid projects, but also an important cost factor, requiring adequate attention, capacity and a proper strategy. In this context, the European Union Humanitarian Aid Flight (EUHAF – formerly “ECHO Flight”) provides humanitarian air services in the **DRC**, which are essential to enable the presence of humanitarian actors and provision of humanitarian assistance.

In **Burundi**, administrative requirements by authorities impact on humanitarian access and space. However, an increased collaboration with national authorities has been noted since the lifting of appropriate measures under article 96 of the Cotonou Agreement in February 2022. Monitoring of access to basic services by returnees as well as potential violations of their rights should be carefully monitored in order to maintain a protective/conducive environment in areas of return.

In **Tanzania**, the shrinking of the humanitarian space (including access issues to refugee camps for international staff) as well as the restriction of movement (for refugees) by authorities remains a serious concern for the quality of service delivery. The strict encampment policies continue to negatively impact living conditions of refugees, who continue to be exposed to protection risks and a dire economic situation.

3.3.2. Partners (presence, capacity), including absorption capacity on the ground

DG ECHO has an extensive partner network in most of the countries of the Great Lakes' region, in particular in the DRC. It is paramount for DG ECHO partners to ensure high quality of programmes, with adequate implementing capacities (financial and human resources), as well as supporting the capacity-building of local humanitarian non-governmental partner organisations, when possible. Local actors also play an important part in disaster preparedness action. It will need to be seen how the COVID-19 pandemic evolves in 2023 and what consequences this could create regarding the deployment, presence and movement of humanitarian workers and goods within countries and across borders.

3.3.3. Other

The costs of operating in the **DRC** are very high, linked to access challenges, high insecurity, the vastness of the country and lack of adequate transport infrastructure.

In addition, humanitarian organisations operate in a context where corruption, fraud and sexual exploitation and abuse are widespread, and must therefore take adequate prevention and control measures, in relation with the anti-fraud minimum engagements validated by the Humanitarian Country Team in February 2021.

The increasing use of cash assistance in the DRC can address some of the operational challenges faced in providing humanitarian assistance in the DRC, but with the appropriate risk management mechanisms in place.

4. HUMANITARIAN – DEVELOPMENT – PEACE NEXUS

Complementarity between peace and security, humanitarian and development policies and interventions, following a nexus approach, allows to link urgent relief with longer-term and sustainable solutions, in a people-centred and rights-based way. This approach must be addressed and implemented in full respect of the humanitarian principles – humanity, neutrality, impartiality and independence – and abide by the principle of ‘do no harm’. It needs to be done by delivering practical solutions through dedicated and enhanced coordination, in a pragmatic but principled approach and simultaneously aiming at crisis response, stabilisation and early recovery.

4.1. Nexus opportunities in the DRC

The humanitarian-development-peace nexus is not systematically operationalised, despite increased efforts of EU and other actors. Poor governance, lack of political engagement, a very low national budget and the poor capacity of social services are serious obstacles for a nexus approach and durable solutions to the ongoing crises in the DRC. A nexus donor group exists but needs further streamlining in order to be more operational. Considering these challenges, the nexus approach needs to be adapted to the context, to secure longer-term commitment and work towards a better delivery of basic services and a peaceful environment for crises-affected populations to return to. In addition, investments in disaster preparedness and resilience building of local populations are important.

Given the size of the DRC, Congolese authorities and the UN country team (and other stakeholders) have identified Kasai and Tanganyika provinces as focus areas for a nexus approach, with Tanganyika being the “pilot province” for sustainable solutions for IDPs.

DG ECHO continues to focus on the eastern part of the country, in particular conflict-affected provinces (mainly Ituri, North Kivu, South Kivu, Maniema, Tanganyika).¹⁸

DG INTPA¹⁹ is in charge of the 2021-27 Multi-Annual Indicative Programme for the DRC that aims at fostering stabilisation, reinforcing public institutions and consolidating the social contract, reducing inequalities and preserve biodiversity and global public goods. Three priority areas are: (i) governance, peace, and security; (ii) human development; (iii) alliance for sustainable development. EUR 424 million are allocated until 2024.

The cooperation among the DGs follows a comprehensive approach, especially in Eastern DRC. DG INTPA plans development interventions in 2023 in the health sector in

¹⁸ This geographical focus does not apply to DG ECHO’s support for emergency responses to high impact communicable disease outbreaks.

¹⁹ The European Commission’s Directorate-General for International Partnerships (DG INTPA).

Ituri and North Kivu²⁰ and in the education sector in North and South Kivu.²¹ Given DG ECHO's ongoing support to health and nutrition as well as education in emergencies' (EiE) projects in these provinces, advances in a nexus implementation should be made (including for opportunities establishing a continuum of care in protection, especially regarding GBV), while reaching out to authorities at local, provincial and national level to work towards a phased-in ownership of authorities.

In this context, DGs ECHO and INTPA and the FPI²² will also look pro-actively into ways to create geographical areas of convergence in Eastern DRC that allow the return of displaced persons, but also the reintegration of ex-combatants, as well as to improve the resilience of the host population in general (notwithstanding DG INTPA's general objective of institution building and policy support). Such convergence zones would need to benefit from a focus of humanitarian, development and stabilisation projects, in particular in the sectors of health and education, as well as agriculture and nutrition, and potential stabilisation projects of FPI. They would need to be carefully selected, based on a profound needs' analysis, feasibility considerations and the scope of current projects and programmes and/or those being planned for the coming years, in order to promote a continuity of services in the different sectors. This should also include dialogue with other international and EU donors.

The root causes of conflict and humanitarian crisis in the DRC ultimately need to be addressed politically. Recent initiatives – also at EU level – are therefore important. At EU level, the European External Action Service (EEAS) is working on an EU strategy for the Great Lakes, as well as a Political Framework for Crisis Approach (PFCA) to address violence in eastern DRC. The Council of the EU is expected to start discussing these initiatives from autumn 2022 onwards.

4.2.Nexus opportunities in the Burundi regional crisis context (Burundi, DRC, Rwanda, Tanzania)

Nexus opportunities will focus on durable solutions for refugees and returnees in the context of the “EU regional project to provide durable solutions for the Burundian refugee crisis in the Great Lakes region”, implemented through DG INTPA and with a budget of EUR 40 million, financed under the Neighbourhood, Development and International Cooperation Instrument (NDICI-Global Europe). Benefitting countries are **Burundi, DRC, Rwanda, Tanzania and Uganda**. The specific objective of the regional project is to address the protection and long-term needs and support durable solutions for forcibly displaced populations – refugees, returnees and IDPs – and their host communities. The action aims at providing regional comprehensive and multi-sectoral response for durable solutions to the Burundian refugee crisis following a nexus approach combining humanitarian, development and peace and security components in the Great Lakes Region. Synergies with the health, education and resilience programmes, implemented under the national MIP, will also be sought.

²⁰ The DG INTPA annual action plan 2022 includes the action “*Unis pour la santé*” with a budget of EUR 35 million to support the health sector, focusing on the quality of care and the access to care for the most vulnerable. It will also target the determinants of health (e.g. birth registration).

²¹ The DG INTPA annual action plan 2022 includes the action “*Unis pour l'éducation*” with a budget of EUR 19 million and a focus on the return and maintained presence of children in schools in areas affected by crisis, in line with the humanitarian-development-peace nexus.

²² The European Commission's Service for Foreign Policy Instruments (FPI).

DG ECHO will also continue its advocacy towards development donors to support the Burundi Joint Refugee Return and Reintegration Plan.

4.3. Nexus opportunities in the Republic of Congo

Disaster preparedness and disaster risk reduction: DG ECHO will continue to support strengthening the resilience of local populations and institutions against the risks of catastrophes, with a main focus on natural disasters/climate events and with the aim to strengthen and link early warning to early community action. The DP action aims at complementing (EU) development projects in the country – and with a view to progressively hand-over the responsibility to national and local authorities, as well as local communities.

5. ENVISAGED DG ECHO RESPONSE AND EXPECTED RESULTS OF HUMANITARIAN AID INTERVENTIONS

The humanitarian response shall be compliant with EU thematic policies and guidelines that are described in the HIP's policy annex and its technical annex.

5.1. Envisaged DG ECHO response

The Great Lakes' region is affected by extreme poverty and acute humanitarian crises, especially in the DRC. Given the limited funding availability compared to identified humanitarian needs, a continued focus on life-saving assistance to the most vulnerable – those affected by recent conflicts and/or epidemics and/or new displacements – covering basic services through a multi-sectorial response is needed. The nature of the crises in the region requires a specific focus on protection and a conflict sensitive approach (“do no harm”), which needs to be considered in all activities and the strategic needs' analysis. DG ECHO will pay particular attention to the impact of interventions on local populations and their wellbeing, and how they complement/support other ongoing activities implemented by the same partner or others, including development actors.

A multi-sector response should be the norm and may involve several partners and/or mechanisms. A detailed multi-risk needs assessment should explain the response (sectors and modality of interventions). The added value of the response (e.g., in terms of reduction of excess morbidity and mortality) and comparative advantage of aid modalities needs to be documented throughout the response, when possible.

DG ECHO supports the coordination of the humanitarian response to the respective crises in the Great Lakes to maximise the impact and timeliness of the action. This includes civil-military coordination and humanitarian advocacy in line with humanitarian principles. DG ECHO also supports organisations engaging in a contextualisation of international humanitarian law, international human rights law, refugee law and humanitarian standards to improve the situation of conflict-affected people. Given the volatile security context especially in the DRC and in order to assist humanitarian organisations in doing their work, DG ECHO supports the provision of essential security coordination and information services that help to understand the operating environment and reduce the risks confronting humanitarian staff and operations.

Given that logistics represent in general between 60 percent and 80 percent of humanitarian operational budgets, DG ECHO is keen to support a more efficient and effective response especially in the **DRC**, where access and logistics are particularly challenging. DG ECHO's recently published 'Humanitarian Logistics Policy' provides

useful guidance.²³ The humanitarian response in the DRC already benefits from EU Humanitarian Aid Flight (EUHAF) air service operations. In addition DG ECHO could, for example, also envisage supporting strategic projects that embrace collaborative approaches and/or technology and/or environmental sustainability, e.g. common services and/or the digitalisation of supply chains.²⁴ The Commission and its partner organisations in the Great Lakes will also be able to draw upon the **European Humanitarian Response Capacity** (see section 5.2.), if an emergency situation/response requires it and if activated by the Commission.

Specific attention is given to Education in Emergencies (EiE) for the most vulnerable children either displaced and/or conflict-affected. The aim is to increase their access to primary education (formal and non-formal). Integrated EiE and child protection programming are strongly encouraged. New EiE funding in 2023 will focus on the **DRC**.

In the **DRC**, DG ECHO continues to focus on the eastern part of the country, in particular conflict-affected provinces.²⁵ DG ECHO will systematically address emergency preparedness and early response through a) flexibility tools embedded in other actions – including the use of “crisis modifiers” that partners are encouraged to develop and b) emergency/rapid response mechanisms (ERM/RRM) as standalone actions when no other solution is possible or in support of other actions (last resort principle) and c) disaster preparedness (DP) investments reinforcing local response capacities, and hence increasing resilience.

DG ECHO recognises the complexity of the context in the **DRC**. One approach cannot fit all, and several operational modalities should work together in order to maximise the impact of DG ECHO’s humanitarian action. A proper understanding of the local context is a must and should be the entry point for all interventions. Humanitarian projects should be flexible enough for responding or facilitating the response to a new crisis in the areas of implementation.

The Great Lakes’ region is prone to communicable diseases. In the **DRC**, DG ECHO will support the emergency response to high impact communicable disease outbreaks. In addition, a strong linkage between the health sector and nutrition programmes will be encouraged. COVID-19 as well as recent Ebola and cholera outbreaks have highlighted the need for a multi-sectorial approach (beyond a pure health response) right from the start, and even before at preparedness stage. It is essential to work better with local communities and to make the emergency/humanitarian system more resilient and less vulnerable.

In the context of the **Burundi refugee and return situation**, DG ECHO will continue its regional approach while encouraging longer term solutions, working with development actors – and in particular DG INTPA – for more protracted situations and where refugees are allowed to work towards self-reliance. Advocacy for the voluntary character of any refugee return will be pursued. In **Burundi**, DG ECHO will focus mainly on protection activities, including for returning refugees.

Given the Great Lakes’ vulnerability to man-made and natural disasters, DG ECHO supports ongoing disaster preparedness (DP) actions in Burundi, the Republic of Congo

²³ https://ec.europa.eu/echo/files/policies/sectoral/humanitarian_logistics_thematic_policy_document_en.pdf

²⁴ For example, DG ECHO co-finances a two-year project for an online platform for humanitarian organisations to do joint procurement, including in the DRC and till early 2023.

²⁵ This focus does not exclude potential support to those affected by new, emerging conflicts and/or new displacements in other parts of the DRC.

and the DRC and will provide additional funds in **Burundi** and **Congo** in 2023 to help overcome the lack of preparedness and response capacity due to the absence of early warning systems and contingency planning at all levels by enhancing such capacity of local stakeholders and first responders.

While DG ECHO receives an annual budget and most of the projects it funds are within that timeframe, the DG continues to support multi-annual projects (with an initial funding allocation for 24 months or more) in case the partner organisation demonstrates the efficiency gains and the operational logic of a longer-lasting project, as it is for example already the case with EiE and disaster preparedness projects that usually run for (at least) two years.

In the logic of multi-annual, strategic humanitarian projects, DG ECHO also supports programmatic partnerships and would consider such an approach within the Great Lakes' HIP if partner organisations – NGOs with a DG ECHO programmatic partnership certificate, UN agencies and the Red Cross/Crescent family – demonstrate the strategic and/or innovative character of the action and the gains being achieved through such a longer-term partnership. A programmatic partnership can be implemented through multi-year funding (with an initial funding allocation for 24 months or more) or through a staged approach where funding is allocated annually.

The longer term horizon of a programmatic partnership and/or multi-year funding is also beneficial for projects that not only include national/local partners (NGOs), but also strive to strengthen the capacity of the latter.

From a DG ECHO perspective, the health and education sectors in a geographical area also targeted by a humanitarian-development-peace nexus approach, such as the **DRC's** Ituri province (without excluding other provinces), constitutes a relevant opportunity for both, multi-annual projects and/or programmatic partnerships (again, with a strong linkage between the health sector and nutrition programmes).

Multi-annual funding or programmatic partnerships would also be considered for humanitarian action that approaches environmental sustainability in an innovative and more strategic (mainstreaming) way.

DG ECHO will also pay specific attention to lessons learnt from previous experiences, in particular on prevention of fraud and corruption, misconduct and abuse, access restrictions, as well as protection and direct support to beneficiaries, support to frontline responders, cost efficiency, and contingency planning. Accountability to affected populations should be part if not the basis of every project.

Humanitarian projects should aim at building resilience of local communities and to be well coordinated with relevant actions carried out in the development sphere. DG ECHO partners should strive to ensure this complementarity, including on funding: co-funding of activities should be the norm. Consortia, including for example national and/or local NGOs, are welcomed, if they benefit the action.

Funding requests/proposals have to be compliant with minimum environmental requirements and should mainstream environmental considerations, when relevant.

5.2. Other DG ECHO interventions

The Emergency Toolbox HIP may be drawn upon for the prevention of, and response to, outbreaks of Epidemics. Under the Emergency Toolbox HIP, the Small-Scale Response, Acute Large Emergency Response Tool (ALERT) and Disaster Relief Emergency Fund (DREF) instruments may also provide funding options.

In view of the importance of logistics for humanitarian operations, DG ECHO remains also committed to contribute to logistics operations, via funding or any other tool, such as the European Humanitarian Response Capacity (EHRC), at its disposal.

The EHRC is a global initiative, aiming at supporting the delivery of humanitarian assistance with a gap-filling approach. Under the EHRC, the Commission has several tools at its disposal that can be activated in case of sudden onset disasters, e.g., a series of common logistics services – including air operations, warehousing services, last-mile ground transportation, etc. – and a stockpile of emergency WASH and shelter items to be pre-positioned in regional warehouses worldwide.

The budget for the EU Humanitarian Aid Flight (EUHAF) air service operations in the DRC is covered by a separate HIP.
