



Humanitarian food security (IPC emergency phases) in Punia (Maniema) and Ituri (Ex-Eastern Province); deterioration in the food security situation in Nyunzu (ex-Katanga) and in some localized areas of North Kivu and South Kivu

Phases of the Integrated Food Security Classification (IPC)

	1- Minimal	2- Stressed	3- Crisis	4- Emergency	5- Famine
Food Security Outcomes	More than four in five households (HHs) are able to meet essential food and non-food needs without engaging in atypical, unsustainable strategies to access food and income, including any reliance on humanitarian assistance.	Even with any humanitarian assistance at least one in five HHs in the area have the following or worse: Minimally adequate food consumption but are unable to afford some essential non-food expenditures without engaging in irreversible coping strategies.	Even with any humanitarian assistance at least one in five HHs in the area have the following or worse: Food consumption gaps with high or above usual acute malnutrition OR Are marginally able to meet minimum food needs only with accelerated depletion of livelihood assets that will lead to food consumption gaps.	Even with any humanitarian assistance at least one in five HHs in the area have the following or worse: Large food consumption gaps resulting in very high acute malnutrition and excess mortality OR Extreme loss of livelihood assets that will lead to food consumption gaps in the short term.	Even with any humanitarian assistance at least one in five HHs in the area have an extreme lack of food and other basic needs where starvation, death, and destitution are evident. (Evidence for all three criteria of food consumption, wasting, and CDR is required to classify Famine).
Food consumption					
Livelihood change					
Nutrition					
Mortality					
Contributing factors	Action required to Build Resilience and for Disaster Risk Reduction	Action required for Disaster Risk Reduction and to Protect Livelihoods	Urgent Action Required to:		
			Protect livelihoods, reduce food consumption gaps, and reduce acute malnutrition	Save lives and livelihoods	Prevent widespread mortality and total collapse of livelihoods

Summary of the 13th cycle of IPC acute analysis in DRC

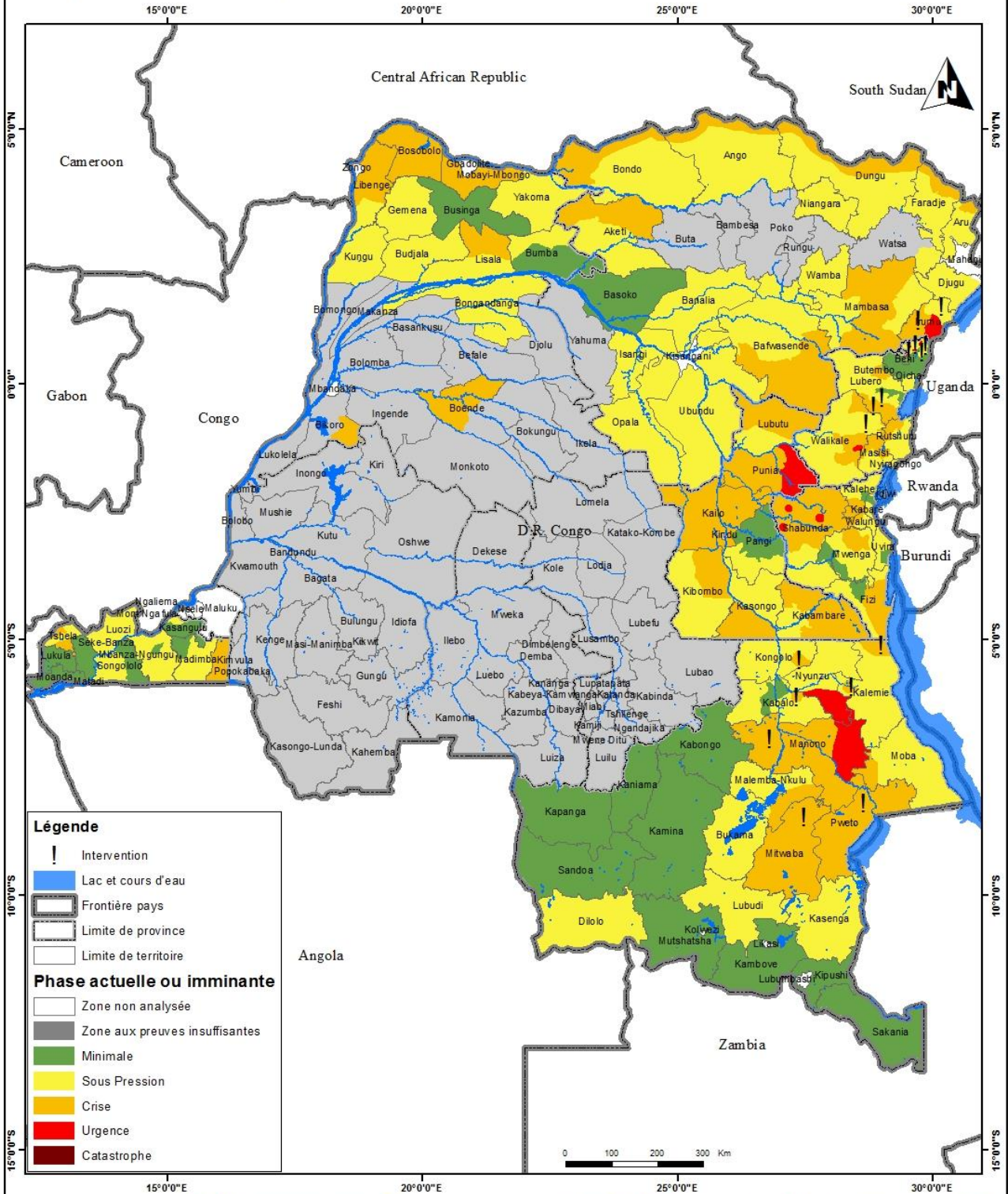
The DRC 13th IPC acute analysis covered the rural areas of North Kivu, South Kivu, Maniema, Central Kongo and former provinces of Orientale, Katanga and Equateur. The conclusion from the analysis provided by the technical working groups have helped to highlight that :

- **7 territories in emergency situation for some localized areas (IPC Phase 4) in the provinces of Maniema (Punia), the former Katanga (Nyunzu and Manono), the former Eastern Province (South Irumu), North Kivu (Beni and Walikale) and South Kivu (Shabunda);**
- 6 territories classified in crisis (**Phase 3**) and as well as some areas of 29 territories ;
- 20 territories classified in IPC stressed IPC phase (**Phase 2**) ;
- 3 provinces (former Bandundu, former Kasai Occidental and former Kasai Oriental) and 17 territories from different provinces were not classified because of lack of sufficient data.

As in previous IPC cycles, Phase 4 areas owe their classification mainly to armed conflicts and violence, which caused displacement of major population and seriously affected their livelihoods. In contrast, Punia zone (in Maniema territory) is observing deterioration of food security situation due to a combination of severe persistent structural problems and the spread of collateral effects of armed conflicts in neighbouring provinces.



Preuves et Normes pour une Meilleure Prise de Décision en Sécurité Alimentaire. Preuves, Normes, Décisions.



Légende

! Intervention

■ Lac et cours d'eau

▬ Frontière pays

▬ Limite de province

▬ Limite de territoire

Phase actuelle ou imminente

□ Zone non analysée

■ Zone aux preuves insuffisantes

■ Minimale

■ Sous Pression

■ Crise

■ Urgence

■ Catastrophe

Source de Données Vectorielles : Référentiel Géographique Commun
 Source de Données Thématiques : UNFAO/IFAD
 Système de Données : Datum/WGS84, Degré Décimal
 Décembre 2015
 Les Nations Unies ne seraient être tenues responsable de limites, résolutions et dégradations sur la carte.





Main findings and issues

The 13th cycle of IPC acute analysis of the DRC confirmed a wide range of food security situations in DRC: Phases 1 to 4, respectively Minimal (1), Stressed (2), Crisis (3) and Emergency (4) are noticeable. Compared to the 12th cycle IPC analysis results, the positive impact of the actions of partners has resulted in a slight overall improvement in the global situation. Territories, the main units of analysis, are not generally homogeneous and will vary according to smaller administrative zones such as health zones, chiefdoms, sectors, groups of households, etc.

The areas in Phase 4 concern provinces reported to be similarly affected in previous IPC acute analysis cycles of the DRC, confirming the direct correlation of conflict and armed violence with emergency situations (Phase 4) in the country.

Notwithstanding significant humanitarian activity in the area, South Irumu (former Eastern Province) still suffering the impacts of attacks and incursions of armed groups (ADF/NALU, FRPI, etc.) and instability in the neighbouring province of North Kivu, which results in significant population displacement in the southern part of the territory. Localized areas in provinces of North Kivu and South Kivu are classified in IPC Phase 4, due to high concentration of high vulnerable populations (displaced and returned populations), victims of repetitive clashes between armed groups and/or with the FARDC, and community tensions. The areas concerned are Beni and Walikale in North Kivu and Shabunda in South Kivu.

The former province of Katanga still presenting some area in Phase 4. In comparing with previous IPC analysis cycles, it has migrated to the north of the province, including Manono and Nyunzu, following the path of destruction caused by the continuing troubles between the Luba and Twa communities.

In Maniema Province, the Punia Health Zone remains classified in Phase 4 since the previous cycle. While suffering the collateral impacts of security conflicts in the Shabunda territory, it presents a precarious nutritional situation especially with high rates of malnutrition and mortality in a structural environment of poverty without major interventions.

The main causes of areas in crisis (Phase 3) are:

- (i) recurrent attacks by armed groups, burning villages / fields, communal conflict: this is the case for the former Eastern Province (Mambasa, Bafwasende Bondo, Ango, Dungu, Faradje and Aru) North Kivu (Lubero, Rutshuru, Masisi and Walikale), South Kivu for the territories of Shabunda, Walungu (Kaniola health zone), Fizi (Fizi health zone), Kalehe (Zone Kalonge and Minova in blast trays), Kabare (Chiefdom Nindja) and Mwenga (Mwenga area) and the former Katanga (Manono, Mitwaba, Pweto, Moba and Nyunzu);
- (ii) the influx of refugees in areas already having very precarious food security situations: Equateur (Bosobolo, Libenge and Mobayi-Mbongo) and Eastern Province (refugees from CAR) and South Kivu (refugees from Burundi);
- (iii) significant nutritional crises: that is the case for the former Equateur (Bikoro Iboko health zone, Lisala health zone Bosomanzi Boende and health zone), the Kongo Central (Tshela and Kisantu) and the provinces of the west and center of the country;
- (iv) other causes cited are shocks, such as flooding, the recurrence of animal diseases and plant diseases, and the disruption of markets (high prices).

The areas in Phase 2 correspond to areas typically in a state of chronic food insecurity, with an absence of major shocks. We observe the breakdown of basic services, serious structural problems and a general context of poverty, with significant impacts on food security.

In total, the number of people in acute food and livelihood crisis (Phases 3 and 4) is estimated at **4.5 million people in areas that have been classified**. A decrease from the last IPC cycle is noted in the proportion of the population in crisis, although the difference in absolute terms is small; this is due to different reference bases used for the calculation of the total population in DRC.



Method and process

The 13th IPC acute analysis cycle of the DRC was organized as follows:

- Collection of recent data by the Provincial IPC Working Groups members, and preliminary analysis by the National Working Group members;
- Five-day provincial workshops in Bunia (formerly Province Orientale), Goma (North Kivu), Kindu (Maniema), Bukavu (South Kivu), Lubumbashi (ex-Katanga), Matadi (Kongo Central) and Gemena (former Equateur) in August/September 2015; each workshop had sessions devoted to capacity building (refresher training) in addition to analysis. In total, approximately 220 persons participated in these workshops;
- National validation workshop in Kinshasa, from 22 to 25 September 2015.

The provincial and national workshops saw a wide participation of stakeholders from the Government (Ministries of Agriculture, Health and Planning), UN agencies and national and international NGOs.

The analysis of acute food insecurity (analysis based on food consumption indicators, nutritional status, trend of livelihoods, and mortality) covered 84 territories of the 145 that make up the DRC. The availability of recent data was a major challenge in this IPC cycle, and the shortage or absence of such data constitute the main reason of not classifying quite a number of territories, to the extent that entire provinces in the west of the country were left out of the analysis. The IPC analysis of chronic food insecurity currently under preparation will hopefully address some of these unclassified areas.

This present IPC cycle was made possible by technical and financial support from the Global IPC support and FEWSNET and by the financial support of USAID / FFP through its contribution to the Special Operation of the Food Security Cluster.

Populations Figures

PROVINCE	RURAL POPULATION	NUMBER OF PEOPLE IN FOOD INSECURITY			%
		PHASE 3	PHASE 4	TOTAL	
KONGO CENTRAL	3 080 907	53 324	14 891	68 215	2%
Ex-EQUATEUR	10 216 324	419 851	95 966	515 817	5%
Ex-KATANGA	10 143 018	1 273 274	385 043	1 658 317	16%
MANIEMA	2 122 944	290 843	95 211	386 054	18%
NORD KIVU	6 364 503	637 371	187 429	824 800	13%
Ex-ORIENTALE	10 046 500	308 295	156 846	465 141	5%
SUD KIVU	5 550 526	419 784	117 978	537 762	10%
TOTAL	47 524 722	3 402 742	1 053 364	4 456 106	9%

Recommendations for response

Continued systematic monitoring of the food security situation in areas in crisis or emergency.

Actions to save lives and prevent the collapse of livelihoods in Phase 4 areas in Maniema, ex-Katanga, ex-Eastern Province, North Kivu and South Kivu.

Emergency and recovery programs, tailored to the context of each Phase 3 area, to protect livelihoods, prevent malnutrition and prevent deaths by combining the / territory. Furthermore, pressure Phase territories require multisectoral programs that transform significantly the economy of these regions and create wealth.

Concerted push to gather more information for provinces that were unable to be unclassified during this present cycle: conducting surveys and including transition- and development-oriented actors in data solicitations.

Contacts for additional information

IPC Technical Working Group of the DRC: Ministries of Agriculture, Health and Plan, FAO, WFP
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