Worsening of the Food Security situation in Ituri (Province Orientale) en in Boende (Equateur); Persistence of the Emergency phases in Punia (Maniema), Shabunda (South-Kivu), Manono, Mitwaba et Pweto (Katanga)

Phases of the Integrated Phased Classification of Food Security (IPC)

<table>
<thead>
<tr>
<th>1- Minimal</th>
<th>2- Stressed</th>
<th>3- Crisis</th>
<th>4- Emergency</th>
<th>5- Famine</th>
</tr>
</thead>
<tbody>
<tr>
<td>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.</td>
<td>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.</td>
<td>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 excess mortality OR Extreme loss of livelihood assets that will lead to food consumption gaps in the short term.</td>
<td>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.</td>
<td>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.).</td>
</tr>
</tbody>
</table>

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 12th IPC cycle analysis in DRC

The analysis of the 12th IPC cycle IPC covered the entire rural areas of the national territory; the analysis of the urban areas has not yet been addressed until to date. The work performed by the technical groups enabled to pin point:

- 7 territories in Emergency (phase 4) in the provinces of Katanga (Manono, Mitwaba and Pweto), of Maniema (Punia), of South Kivu (Shabunda), of the Province Orientale (Irumu) and of Equateur (Boende);
- 61 territories are entirely or partially in crisis (phase 3);
- 65 territories are under pressure and stressed (phase 2);
- 12 territories have not been classified due to insufficient proof.

With the exception of Boende Territory, where the Emergency phase is a consequence of the epidemic caused by the haemorrhagic fever with Ebola virus, the other localities classified in phase 4 are the result of armed conflicts and associated violence, having induced important population movements and having greatly impacted the population’s livelihoods.
Partners having contributed to the Analysis and Support Organizations

Legend
- Lakes and Rivers
- Country Border
- Provincial Border
- Territory Border

Present or imminent phasis
- Unanalysed area
- Unsufficient prof area
- Minimal
- Stressed
- Crisis
- Emergency
- Famine

Source de Données Vectorielles : Référentiel Géographique Commun
Source de Données Thématiques : UNFAO/PAM
Système de Données : Datum/WGS84; Degré Décimal
Juin 2014
Les Nations Unies ne seraient être tenues responsable de limites, des noms et dégradation sur la carte.
Main Conclusions and Stakes of the Analysis

Because of the large size of the territories, which constitute the IPC units of analysis in DRC, important disparities can be observed within a single territory. Not a single territory is fully in Emergency phase (phase 4). These Emergency phases concern areas which have experienced shocks such as the Djera sector, epicenter of the Ebola outbreak inside the Boende Territory in Equateur province.

The attacks of the ADF/NALU armed group in the Beni Territory in North Kivu; as well as the incursions of elements of the FRPI armed group caused important population movements in the southern part of Irumu Territory and Orientale Province. The frequent clashes between these armed groups and the FARDC; as well as the community tensions in the Ruzizi plains and the succession conflicts in Ninja (West Kabare), Kalonge (Kalehe) and Kalole have caused similar consequences in the Shabunda Territory in South Kivu. A similar situation was observed in Manono in Katanga province, with the persistence of the inter-communal conflicts Bantu-Pygmys, armed conflicts, and Mai Mai activism burning villages and causing population movements and displacements in Pweto, Mitwaba, Kalemie, Kabalo, Malemba Nkulu and Nyunzu. The health zone of Punia in Maniema was exposed the collateral effects from the conflicts in Shabunda Territory and is also gravely affected by malnutrition and high mortality in an environment of structural poverty.

Finally, the areas in crisis (phase 3) are, among others, characterized by repeated attacks of armed groups, the burning of villages and crop fields, the movement of families towards extraction sites and protected areas, the recurrence of epizootic and phytopathology outbreaks, of grave structural problems and a general context of poverty with important impacts on the food security (poor scores of food consumption, poor food diversity, malnutrition exceeding emergency levels, loss of livelihoods assets and means of production).

While comparing the IPC analysis of this current cycle to those of June 2014 (zones in the East) and December 2013 (entire country), one observes that the acute food insecurity has increased in South Irumu (Orientale Province) and in Djera (Equateur Province).

In total, the number of people facing an acute food security crisis and of their assets and means of livelihoods (phases 3 and 4) is estimated at 6.5 million people in the areas that were classified under crisis (or an overall reduction of 0.5 million people comparatively to the preceding IPC cycles, but with an increase by about 523,000 people for those under Emergency (phase 4).

Method and Process

The 12th IPC cycle was preceded by a level I training session financed by SADC through the Regional Vulnerability Assessment and Analysis Programme (RVAA), from 4 to 7 November 2014 at Kisantu (Bas Congo). The trained IPC analysts supported their provincial technical working groups during the preparation and the national validation workshop, held from 11 to 14 December 2014 in Bukavu (South Kivu).

The analysis of the acute Food insecurity (providing information on the food consumption indicators, the nutritional status, the evolution of the livelihood means and mortality data) included about 145 territories of the DRC. In 2015, the training and IPC analysis will allow to better assess the situation of chronic food insecurity is the provinces in the West of the DRC.

Recommendations for the Responses

Actions to save lives and avoid the collapse of the means of livelihoods must be undertaken in those areas in emergency phase (phase 4) in the Provinces of Katanga, South Kivu, Maniema, Orientale and Equateur.

Those areas in crisis (phase 3), the objective will be to protect means of livelihoods, prevent malnutrition, and prevent deaths by combining emergency activities and appropriate early recovery programs adapted to the local context of each area/territory. Besides, the territories in the Stressed phase require multi-sectoral programs capable of transforming the local economy of the region and to create wealth.

Contacts for additional information
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Global IPC Support Unit: www.ipcinfo.org