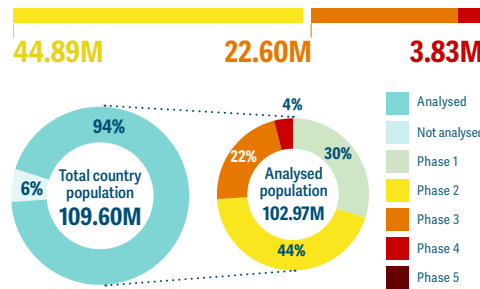


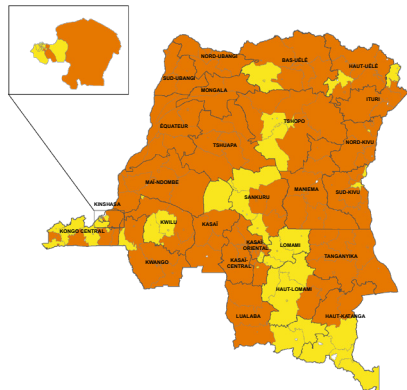
Democratic Republic of the Congo

ACUTE FOOD INSECURITY PEAK 2022

26.43M people or **26%** of the analysed population in IPC Phase 3 or above, July–December 2022



IPC acute food insecurity situation, July–December 2022



1 - Minimal 2 - Stressed 3 - Crisis
4 - Emergency 5 - Famine Not analysed

The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.
Source: Democratic Republic of the Congo IPC TWG, October 2022.

Food crisis overview

The number of people in Crisis or worse (IPC Phase 3 or above) remained very high in the last six months of 2022 at 26.43 million (representing 26 percent of the analysed population). This figure marks a decline by 800 000 people compared with the 2021 peak of 27.26 million in February–July.

More marked was the decrease in the number of people in Emergency (IPC Phase 4), down by around 2.9 million between 2021 and 2022. While these decreases must be considered in the context of an almost 7 million increase in the population analysed, the percentage of people in IPC Phase 4 has also fallen from 7 percent to 4 percent, largely due to improving security in certain areas, the reopening of the border with Angola and rehabilitation of key roads favouring resumption of trade, as well as the easing of COVID-19 measures (IPC, December 2022).

The highest numbers of acutely food-insecure people in need of urgent assistance were in the provinces of Nord-Kivu, Kinshasa, Kasai-Central, Sud-Kivu and Tanganyika – each with more than 1.5 million people in IPC Phase 3 or above. In some territories and cities in Ituri, the Kasai provinces, Nord-Kivu and Sud-Kivu, Kwilu, Lomami, Maniema, Mongala, Tanganyika, Nord-Ubangi and Sud-Ubangi, 40–50 percent of the population was in IPC Phase 3 or above.

The most-affected populations were IDPs, returnees, households hosting displaced or returned families, and those living in conflict zones or zones affected by natural disasters, as well as the poorest populations in urban and peri-urban areas who have low purchasing power and high dependence on markets for food supplies. More than 6 million people – 21 percent of the population – living in urban areas were in IPC Phase 3 or above.

The territories of Beni and Masisi in Nord-Kivu had 15 percent of their populations in Emergency (IPC Phase 4), although this did not reach the threshold to classify the whole area in IPC Phase 4 (IPC, October 2022).

Improvement projected for 2023

In the first six months of 2023, the number of people in IPC Phase 3 or above was expected to decrease to 24.5 million and the number of areas classified in IPC Phase 3 to reduce from 124 to 107. Almost 1 million fewer people were expected to be in Emergency (IPC Phase 4) with the arrival of the harvests facilitating food availability and reducing pressure on food prices. A positive macroeconomic projection at the national level was expected to help stabilize the local currency and market prices, thereby improving households' food access (IPC, October 2022).

Drivers of the crisis, 2022–23

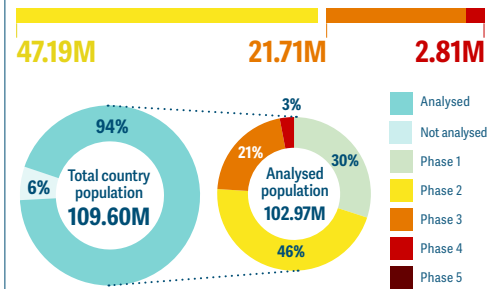
Conflict/Insecurity Despite efforts to prevent and stabilize conflicts, areas of insecurity persist, particularly in the provinces of Ituri, Kasai, Nord-Kivu and Sud-Kivu, and Tanganyika, where more than 100 armed groups operate (IPC, December 2022). In 2022, Ituri and Nord-Kivu experienced a peak in violence and fatalities not seen since 2019, causing deaths, displacement, destruction of crops and loss of livelihoods (FEWS NET, August 2022). Conflict and mass displacement disrupted households' participation in agricultural activities, contributing to lower season B harvests compared with the previous three-year average for the eastern zone, a trend already observed in previous seasons (IPC, December 2022).

Economic shocks Conflict and rising global energy and food prices due to the ongoing war in Ukraine put upward pressure on transport costs and food prices. These, twinned with poor access to employment opportunities, were the main contributory factors to food insecurity in urban areas, where most households depend on markets.

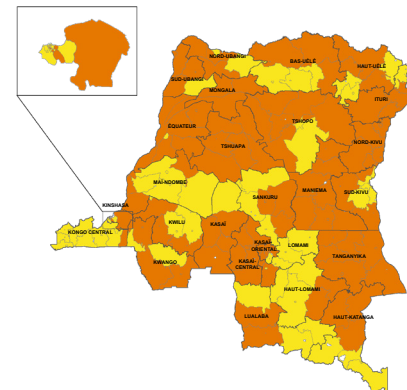
According to the June Bulletin of the Joint Market Monitoring Initiative, the cost of the Minimum Food Basket (MFB) increased nationally from January to June 2022, with a peak in April followed by a slight decrease in prices from May and the start of the season B harvests

ACUTE FOOD INSECURITY PROJECTION 2023

24.52M people or **24%** of the analysed population in IPC Phase 3 or above, January–June 2023



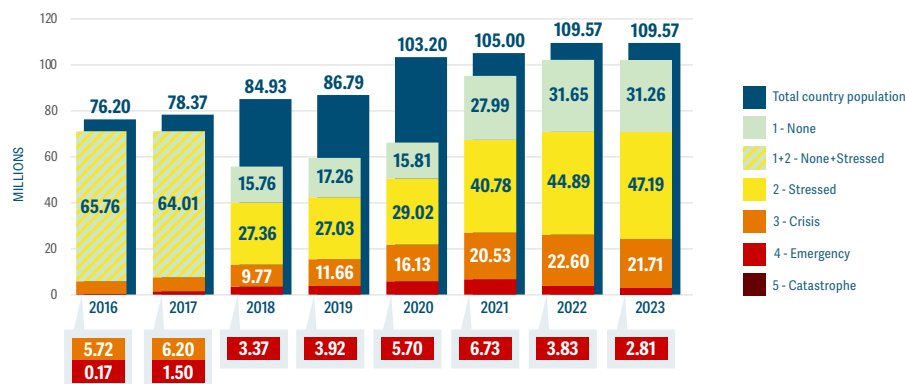
Projected IPC acute food insecurity situation, January–July 2023



1 - Minimal 2 - Stressed 3 - Crisis
4 - Emergency 5 - Famine Not analysed

The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.
Source: Democratic Republic of the Congo IPC TWG, October 2022.

Numbers of people by phase of acute food insecurity, 2016–2023



Source: Democratic Republic of the Congo IPC TWG.

(IPC, December 2022). By December 2022, staple food prices were 56 percent above the recent five-year average and 32 percent above the same period of the previous year (FEWS NET, December 2022).

Crop pests and livestock diseases Agricultural activities were affected by crop diseases such as cassava mosaic and fall army worm, which ravaged maize crops. Nearly 47 percent of households surveyed as part of the 2022 Emergency Food Security Assessment declared having experienced epizootic disease-related livestock losses during the preceding six months (IPC, December 2022).

Weather extremes From October 2022, excessive precipitation triggered floods in several localities, particularly in the central-northern provinces of Maniema, Tshopo and Équateur, which damaged standing crops and hampered access to lands, exacerbating food insecurity in an area already burdened by displacements (FEWS NET, December 2022). Around 5 000 households were affected by floods and landslides across five municipalities in Kinshasa in December 2022 (OCHA, December 2022).

Acute food insecurity since 2016

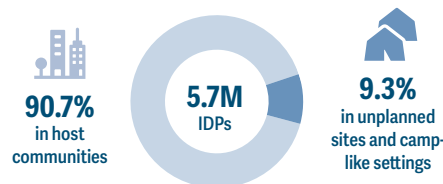
For all seven editions of the GRFC, the Democratic Republic of the Congo has been among the countries with the highest number of people in Crisis or worse (IPC Phase 3 or above). As well as being a large and populous country, this has resulted from a combination of factors including one of the world's longest-running armed conflicts, widespread increases in food prices and transport costs, weather extremes, crop diseases, pest attacks, and the impact of COVID-19 and other epidemics including Ebola, underpinned by widespread poverty. Over 60 million people, or 64 percent of the population, are living on less than USD 2.15 a day (WB, March 2023).

The coverage of IPC analyses has increased between 2018 and 2022, from 101 areas to a national coverage of 185 including 138 rural and 47 urban areas, of which 24 are municipalities in Kinshasa. Since 2018, the population covered by the analyses has increased from 56.2 million to nearly 103 million people in 2022.

After a 2020 peak when 33 percent of the analysed population was in IPC Phase 3 or above, the proportion of people in these phases decreased to 26 percent in July–December 2022 and is projected to decrease further to 24 percent in January–June 2023.

DISPLACEMENT

IDPs living in host communities or displacement sites



Source: HNO, January 2023.

IDPs The Democratic Republic of the Congo has the largest internally displaced population in Africa (UNHCR, February 2023). As of 31 December 2022, over 5.7 million people remained displaced due to one of the world's longest-running armed conflicts. Most IDPs (90.7 percent) live in host families, while only 9.3 percent live in camps (HNO, January 2023).

While conflicts, armed attacks and clashes remain the main drivers of displacement (83.5 percent), other drivers include intercommunal and land conflicts (11.9 percent), and natural disasters, including floods and landslides (4.1 percent) (UNHCR, December 2022).

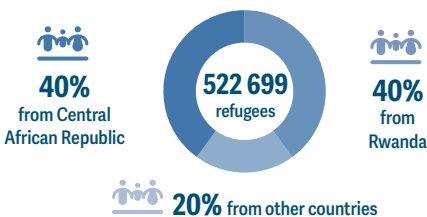
Acute food insecurity is of high concern for millions of IDPs due to disrupted livelihoods. Most live in the eastern provinces of Nord-Kivu, Sud-Kivu, Tanganyika, Ituri, Maniema and the Kasai provinces, where levels of acute food insecurity are very high (UNHCR, December 2022).

For those living in camps and settlements, their situation is aggravated by food ration reductions and other cuts to essential services due to funding shortages, forcing many IDPs to resort to negative coping strategies, increasing their vulnerability to exploitation and abuse.

Communities hosting IDPs must share their already scarce resources with more people, compelling both displaced and host households to adopt harmful coping strategies such as selling their means of production, borrowing money to buy food, or consuming seeds and unripe crops. Such strategies affect their current and future food security status (HNO, January 2023).

The persisting conflict, further aggravated by the lingering impacts of COVID-19, Ebola and measles outbreaks, acute food insecurity, and natural disasters, are expected to worsen the displacement situation in the Democratic Republic of the Congo in 2023 (UNHCR, February 2023), both in terms of numbers of displaced people and the deterioration of food security and their living conditions.

Refugees mainly from Central African Republic and Rwanda



Other countries: Sudan (11%), Burundi (8%), Angola, Chad, Côte d'Ivoire, Eritrea, Liberia, Congo, Sierra Leone, Somalia, Syria and Uganda.

Source: UNHCR, February 2023.

Refugees The country hosts over 520 000 refugees and asylum seekers. Most of them fled from violence in neighbouring countries, mainly the Central African Republic and Rwanda. They reside in 20 of the country's 26 provinces, mainly in the north and east: Nord-Kivu, Sud-Kivu, Nord-Ubangi, Sud-Ubangi, Haut-Uélé and Ituri. These provinces are among the most underserved and insecure in the country with low access to healthcare and high levels of acute food insecurity, acute malnutrition, epidemics and natural disasters (HNO, January 2023).

Most refugees (74 percent) live with host families while 25 percent live in camps, most of which are difficult to access. One percent live in urban areas (HNO, December 2021).

The wave of violence following the presidential elections in the Central African Republic brought 92 000 new refugees to the Democratic Republic of the Congo, mainly living in poor and underserved areas of the country. According to an October 2021 WFP survey,

only 9 percent of households lived in permanent housing. Only 33 percent of households had acceptable food consumption. While almost all refugee heads of household were employed before arriving in the country, 71 percent were unemployed in displacement (UNHCR & WFP, May 2022).

NUTRITION

Number of children under 5 years old with wasting, July 2022–June 2023



2.20M pregnant and lactating women acutely malnourished, July 2022–June 2023

Source: Democratic Republic of the Congo IPC TWG, October 2022.

According to the IPC AMN analysis covering 150 out of 189 health zones, 2.78 million children under 5 years were expected to suffer from wasting from July 2022 to June 2023. Of them, some 0.89 million were expected to be severely wasted.

Nearly half of the analysed areas covered in the IPC AMN analysis were classified in Serious or worse (IPC AMN Phase 3 or above) – 120 in Serious (IPC AMN Phase 3) and 46 in Critical (IPC AMN Phase 4) from July to December 2022. Between January and June 2023, a significant deterioration in the nutritional situation is expected, with 253 analysed areas projected to be in Serious or worse (IPC AMN Phase 3 or above) – including 50 in Critical (IPC AMN Phase 4) – unless urgent action is taken to address the local factors that aggravate acute malnutrition (IPC, October 2022).

Drivers of undernutrition

Inadequate maternal and child-feeding practices The majority of children in analysed areas classified in Serious or worse (IPC AMN Phase 3 or above) do not have access to an adequate quality of diet, with only 5–15 percent of children aged 6–23 months receiving a Minimum Dietary Diversity (MDD).

Low rates of exclusive breastfeeding for infants under 6 months, continued breastfeeding and early introduction of adequate complementary foods are more marked in health zones in Kwango, Maï-Ndombe, Kwilu, Sankuru, and Kasai-Oriental and Kasai-Central provinces (IPC, October 2022).

Limited access to health and nutrition services The volatile security situation impacted the delivery of basic social services, nutrition services and humanitarian aid. Poor access and availability of health services persist, with only 0.28 doctors and 1.19 nurses and midwives per 10 000 people (IPC, October 2022).

Remoteness of communities, vaccine hesitancy, and low measles vaccination coverage and vitamin A supplementation are barriers in Haut-Lomami, Tanganyika, Sud-Kivu, Tshuapa, Kwango, Kasai-Oriental and Maï-Ndombe (IPC, October 2022).

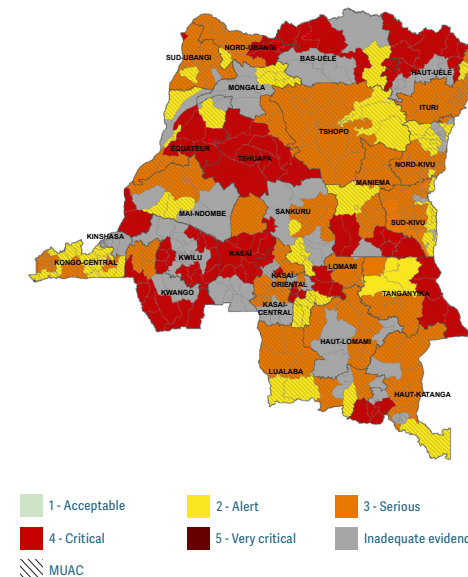
High prevalence of infectious diseases Diseases such as measles and malaria are prevalent, further increasing malnutrition risks among children. In July 2022, the country experienced its 14th outbreak of Ebola virus disease in 46 years, leading to movement restrictions that affected markets. Over the past four years, six outbreaks occurred in two provinces (Nord-Kivu and Équateur) and in April 2022, another case was confirmed in Mbandaka, Equateur province, raising fears of another outbreak. Sankuru province faced a cholera outbreak that started in mid-August while the cholera caseload in Tanganyika province in October 2022 was three times higher than the same period in 2021 (IPC, October 2022).

Around 40 percent of households do not have access to improved water points and more than 60 percent lack access to adequate sanitation facilities. Flooding in central and northern provinces affected the already weak health, water and sanitation infrastructure, contributing

to degrading the nutritional status of the most vulnerable groups (IPC, October 2022).

Food insecurity and lack of access to healthy diets Overall, high levels of acute malnutrition are consistently reported in areas where acute food insecurity was also high, suggesting that acute food insecurity contributes substantially to malnutrition, although it is not the only driver. Out of the 78 territories covered in both analyses, nearly half had a nutritional classification that was more severe than the IPC acute food insecurity classification: among these 38 territories, 31 had a Critical (IPC AMN Phase 4) malnutrition situation (IPC, October 2022).

IPC acute malnutrition situation, July–December 2022



The boundaries and names shown and the designations used on these maps do not imply official endorsement or acceptance by the United Nations.

Source: Democratic Republic of the Congo IPC TWG, October 2022.