

BURUNDI

Displacement from DRC

Escalation of fighting between the armed forces of the DRC (FARDC) and armed groups in South Kivu province, DRC, have caused large population movements in January both internally and across Lake Tanganyika to Burundi. About 7,000 people arrived in Burundi between 24 and 29 January and new arrivals have been reported daily since then. Poor underlying conditions in affected areas of Burundi, including Rumonge and Makamba provinces, exacerbate acute shelter, food, WASH, health, and protection needs. Transit centres and refugee camps in the country are overstretched.

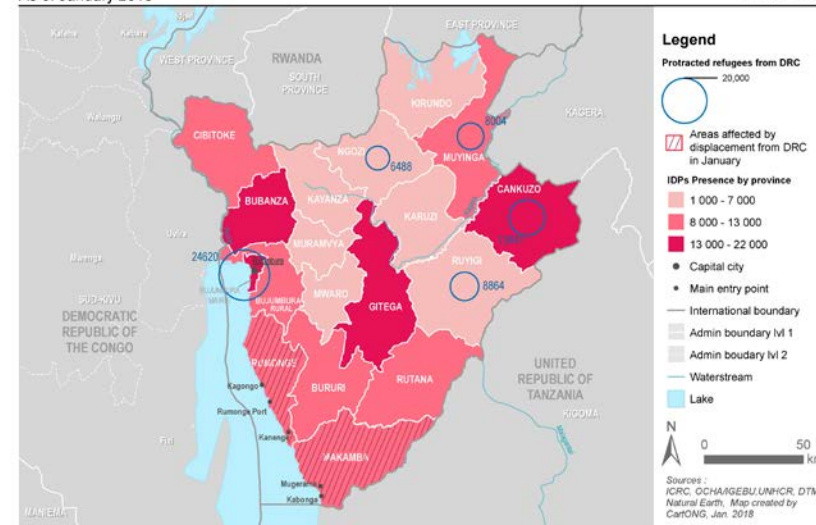
• NEED FOR INTERNATIONAL ASSISTANCE



IMPACT



Burundi : Displaced population in Burundi
As of January 2018



Anticipated scope and scale

Even though the displaced have been arriving mostly in southern provinces of Burundi, the north and east of the country are also likely to be affected due to **transfers of the newly arrived** to existing refugee camps. The number of arrivals is likely to rise, as the **security situation in DRC** remains volatile. Health conditions risk worsening during the rainy season, due to an increase in the **caseload of cholera and malaria**. The upcoming lean season from February is likely to cause deteriorating **food security** among both displaced and the host communities.

Key priorities



+7000 displaced
to Burundi since 24 January



2.6 million (est.)
in IPC 3 or higher in December 2017



displacement sites
are overcrowded



poor WASH conditions
and risk of cholera

Humanitarian constraints



Upcoming rainy season (February – May) is likely to affect humanitarian access and risks causing damage to makeshift shelters. Incidents of attacks on displacement sites are reported sporadically in Burundi.

Limitations

Local media is an important source of information but must be closely analysed given political interference with the media in Burundi since 2015. Reports by the UN and international media have been published and multiple sources allow for triangulation, but overall, the information environment remains limited. Assessments are understood to be ongoing but are yet to be published. The displacement situation inside South Kivu, DRC is understood to be extremely concerning, but information is lacking due to insecurity and access constraints.

Crisis impact

Conflict between the FARDC (armed forces of DRC) and Mayi-Mayi Yakutumba armed group in Fizi territory, South Kivu province, Democratic Republic of Congo (DRC) has caused large-scale displacement since 21 January. The villages of Nemba (8,000 residents) and Kikonde (5,500 residents) in Fizi territory were reported abandoned on 23 January. At least 1,400 people fled to Uvira territory. Intense clashes along the borders of Fizi territory in Kamambare, Maniema province, resulted in displacement of up to 16,000 people within and outside of Maniema. The security situation in South Kivu remains volatile and affects up to 100,000 people (OCHA 30/01/2018, OCHA 23/01/2018).

Displacement has spilled from DRC into Burundi. Since 24 January, more than 7,000 people have reached Burundi, mostly by crossing Lake Tanganyika, often on small fishing boats (UNHCR 30/01/2018). The most affected areas include Rumonge commune (in Rumonge province) and Nyanza-Lac commune (Makamba province). More than half of the displaced, over 4,600 people, have arrived in Rumonge commune as of 29 January (ECHO 29/01/2018).

Capacity and services at reception areas in Burundi are extremely limited, and new arrivals are being transferred to transit centres and refugee camps in north and east Burundi (Cankuzo, Ruyigi, Ngozi provinces) and in Makamba. An estimated 5,000 people have been transferred so far; however, the capacity to accommodate newly displaced is likely to be low as those sites are already overcrowded (IWACU 30/01/2018; UNHCR 30/01/2018; IWACU 29/01/2018).

Food: Food needs are reported among the newly displaced and likely to increase without assistance (Red Cross Burundi 25/01/2018). The provinces affected by the influx, Rumonge and Makamba, are among the most affected by food insecurity in the country (FAO 24/11/2017).

Health: The displaced population in Rumonge and Nyanza-Lac communes lack access to health services and medicine. 40 people have been treated for symptoms of malaria or diarrhoea and vomiting and two people have died (IWACU 30/01/2018).

Disease outbreaks due to congestion, lack of shelter and lack of WASH infrastructure present a serious risk. No mosquito nets are available for the displaced despite a high presence of mosquitoes (IWACU 30/01/2017).

WASH: Inadequate WASH infrastructure and shortages of drinking water are among the main needs of the newly displaced. Lack of latrines have led to open defecation practices, exacerbating health risks (IWACU 30/01/2018; Red Cross Burundi 25/01/2018).

Shelter and NFIs: New arrivals lack shelter in reception areas and were reported to be sleeping out in the open (IWACU 29/01/2018). Transit centres and refugee camps in north and east Burundi report congestion and therefore have limited capacity to accommodate

new arrivals (UNHCR 30/01/2018). Blankets and WASH supplies were reported among the main needs (IWACU 29/01/2018).

Torrential rains have impacted several provinces across the country in January (Citiboke, Mwara, Bubanza, Kirundo, Bujumbura Mairie, Bujumbura Rural Ruyigi, Bururi, Rutana), causing damage to shelters (IOM 20/01/2018; IOM 27/01/2018). Some of the newly displaced have been transferred to refugee camps in provinces affected by torrential rains (IWACU 10/01/2018).

Protection: The displaced population reported fleeing from violence, forced recruitment, and abuses by armed groups in DRC (UNHCR 30/01/2018; The Guardian 02/02/2018). Victims of gender based violence (GBV) are likely to be among the newly displaced and face difficulties in accessing specialised care services, particularly in Rumonge where such services are unavailable in over 90% of collines (IOM 11/2017). Freedom of movement of the affected population is likely to be affected by legal procedures and obligatory registration, even when they intend to move further (including back to DRC) (IWACU 30/01/2018).

Vulnerable groups affected

The newly displaced population is reported to be mainly composed of women, children, and older people (IWACU 29/01/2018). **Children** in Burundi are at high risk of contracting malaria and cholera or suffering from undernutrition (UNICEF 31/12/2017).

Over 1,600 of the newly arrived are reported to be **Burundian returnees** from DRC, who were initially displaced to DRC in 2015 during the political unrest (IWACU 30/01/2018). Most Burundian refugees in DRC were unwilling to return in 2017 quoting prevailing protection concerns in their home country (lack of freedom, safety, and dignity) (UNHCR 8/12/2017). Due to protracted and multiple displacement, their resilience to crisis is expected to be lower and vulnerability higher (UNHCR 8/12/2017).

Humanitarian and operational constraints

The Burundian government is known to have interfered with humanitarian operations in the past. Access improved in 2017 compared to recent years, but between July and September 2017 two incidents of NGO closure and staff detention were still reported (Insecurity Insight 12/2017). Security incidents have decreased in the country compared to 2016, however sporadic grenade attacks continue. In November, an IDP camp in Karuzi province was targeted by grenade attack injuring three people (Insecurity Insight 11/2017).

The main rainy season, which starts in February (FEWSNET) could hamper response, particularly due to the lack of paved roads across Burundi (CIA World Factbook).

Aggravating factors

Seasonal information

The main rainy season lasts from February until May (FEWSNET). Shelter and food needs are likely to increase due to damage caused by the rain. Outbreaks of measles, cholera, and malaria risk being aggravated.

At the same time, the minor lean season starts in February and lasts until mid-May (FEWSNET). Above average rainfall in January and favourable harvest led to an improved food security situation, so most of Makamba and Rumonge provinces are currently categorised in IPC 2 (Stressed). However, poor households in the worst affected areas are likely to face IPC 3 (Crisis) throughout the upcoming lean season (FEWSNET). 2.6 million people were projected to be in IPC Phase 3 (Crisis) or above during the last major lean season, which ended in December 2017 (FAO 24/11/2017).

Disease outbreaks

Malaria: About 7.4 million cases of malaria were reported in 2017 across the country; however, the southern provinces where the influx is arriving were among those least affected by the outbreak (World Vision; OCHA September 2017).

Cholera: Since August 2017, 167 cases of cholera were reported across Burundi, with 30 cases from Nyanza-Lac (WHO 26/01/2018). Cholera cases spiked in DRC in 2017 and the eastern parts of the country, including South Kivu, were affected the most (WHO 19/01/2018).

Measles: Since December 2017 more than 190 cases of measles have been reported in eastern South Kivu, putting about 25,000 children at risk of contracting the disease (OCHA 23/01/2018). The risk of measles spreading among the displaced is an aggravating factor.

Lack of WASH infrastructure

Some communities affected by the influx lack access to clean water and sanitation facilities. Coping mechanisms such as drinking from rivers or contaminated boreholes were reported in the south of the country, compounding the risk of waterborne diseases spreading (ACTED August 2017).

Natural disasters

Makamba and Rumonge provinces are often affected by torrential rains and strong winds, which cause high levels of shelter and crop damage, at times leading to displacement. Provinces hosting protracted refugees from DRC (Ruyigi, Cankuzo, Ngozi) report wildfire and drought conditions during dry seasons (IOM 13/11/2017).

Contextual information

Security situation in Burundi

Even though no active hostilities have been reported in Burundi in recent months, the country is still considered insecure. The government, Imbonerakure – the youth wing of the ruling party – have carried out repeated incidents of arbitrary detention, abductions, grenade attacks, and violence – in recent years. Opposition groups have also been implicated in the violence. The Imbonerakure often target civilians, but the number of reported fatalities have been decreasing in the second half of 2017 and remains at lowest level since 2015 (ACLEDD 10/2017).

IDP presence in Burundi

There are approximately 180,000 IDPs in Burundi following different waves of displacement caused by natural hazards and insecurity since the political unrest started in 2015. Almost 50% of those IDPs were displaced in 2015. Rumonge and Makamba provinces host about 12,500 IDPs each, mostly in the west of the provinces where the new influx from DRC is arriving. (IOM 12/2017; IOM 11/2017). Most of the IDPs in December were displaced due to natural disasters (68%), with the remaining 32% displaced due to the socio-political situation.

Refugee presence in Burundi

There are about 61,500 protracted refugees from DRC in Burundi. Over 70% arrived before 2014 (UNHCR). The majority lives in refugee camps in Cankuzo (22%), Ruyigi (14.5%), Muyinga (13%), and Ngozi (10.5%) provinces. The remaining 40% are in urban areas of Bujumbura (UNHCR 30/04/2017). Continuous instability in DRC prevents the refugees from returning: just over 1,000 have returned to DRC since 2011.

Burundian refugees in DRC

There are currently 44,450 registered Burundian refugees in DRC. 42,000 are in the conflict affected province of South Kivu. A small number of them returned to Burundi in 2017. The majority were unwilling to return, quoting protection risks in the country. Refugees from Burundi also face protection issues in DRC, mainly related to insecurity in South Kivu. In September 2017, the FARDC opened fire on a group of protesting Burundian refugees, injuring 117 and killing 37 (BBC 16/01/2017).

Other countries affected in the region

Tanzania hosts over 62,500 refugees from DRC and over 232,500 refugees from Burundi. New arrivals were reported in January, especially around the city of Kigoma (UNHCR; UNHCR).

Uganda hosts over 242,000 refugees from DRC and close to 30,000 refugees from Burundi. In January around 330 displaced arrived in Uganda daily. Since December, more than 15,000 new arrivals have been reported (UNHCR; UNHCR).

Key characteristics

Demographic profile: total population of Burundi: 11,466,756 (est. 2017), urban population: 12.7%.

Food: last IPC figures (as of September 2017) counted 1.76 million in IPC 3 or higher and projected an increase up to 2.6 million in IPC 3 or higher in lean season (October-December 2017).

Nutrition: prevalence of stunting: 57.7%, prevalence of wasting: 5.8%, SAM admissions in 2017 (January-October): 43,444.

Health statistics: infant mortality rate: 58.8 deaths/1000 live births (male: 65.3, female: 52.2 deaths, 2017 est.), under-5 mortality rate: 54.1 deaths/1000 live births, maternal mortality rate: 712 deaths/100,000 live births (2015 est.).

WASH statistics: access to improved sources of drinking water: urban (91%), rural (73.8%); access to improved sanitation facilities: urban (43.8%), rural: (48.6%) (2015 est.).

Lighting and cooking sources: electrification - total population: 5% (2013).

Literacy levels: 85.6% (male: 88.2%; female: 83.1%) (2015 est.).

Sources: CIA World Factbook, UNICEF, UNICEF, Jeune Afrique,

Response capacity

Local and national response capacity

Local authorities from affected provinces have called for international assistance and reported no capacity to respond to the influx. Local NGOs, namely Red Cross Burundi, are responding, however their response does not meet the needs of the affected population (IWACU 26/01/2018; Red Cross Burundi 25/01/2018).

International response capacity

The need for international assistance is high and likely to grow if the conflict in DRC further escalates. UNHCR reports on displacement in both Burundi and DRC and started coordinating the response activities on the ground. The response so far has focused on transferring the affected population to transfer sites and refugee camps, as well as providing immediate assistance after arrival in Rumonge and Makamba provinces (IWACU 26/01/2018).

Multiple UN agencies and international NGOs are known to respond to refugee crises in Burundi and neighbouring countries, undertaking activities in various sectors (mostly in health and nutrition). Funding is often a challenge (UNHCR 1/02/2018; OCHA 23/01/2018).

Several donors have introduced sanctions and suspended financial aid to Burundi after the contested elections in 2015. The suspension of support has impacted the delivery of basic services and the economy (OCHA 13/11/2017).

Information gaps and needs

- The displacement situation inside South Kivu is understood to be extremely concerning, but information is lacking due to insecurity and access constraints.
- Limited information of current conditions inside the camps and transit sites hosting refugee and IDPs in Burundi.
- Information on the latest food security situation is limited.
- Lack of detailed information on current security situation in affected areas.

Lessons learned

- Support towards host community is crucial to address food security needs and avoid further deterioration of displacement conditions.
- Information sharing has proven crucial to effective coordination in previous DRC refugee responses in Burundi (NRC 06/2008).
- Insufficient registration data caused challenges during resettlement activities of previously displaced refugees from DRC in Burundi, particularly because of the often complex family composition among the Congolese refugee population (UNHCR).
- Humanitarian actors need to appreciate the language complexities among the displaced population from DRC to respond effectively. Kinyarwanda and Kiswahili are mostly spoken, and French is spoken more commonly than English (UNHCR).
- Livelihood support can increase the level of self-sufficiency of refugees. The majority of the Congolese refugees work in agriculture (UNHCR).

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