

(MAP 1-A) OUTGOING MOVEMENT FROM AFFECTED HEALTH ZONES

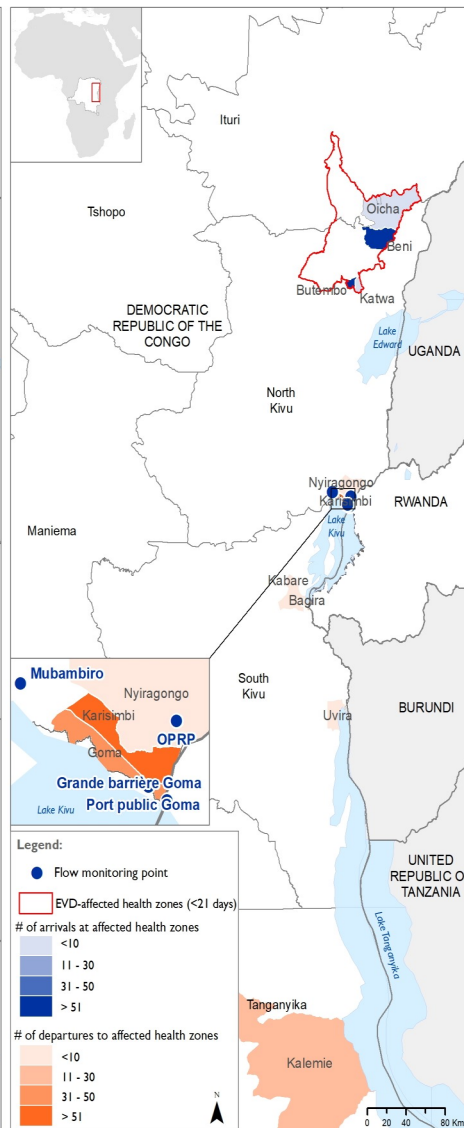
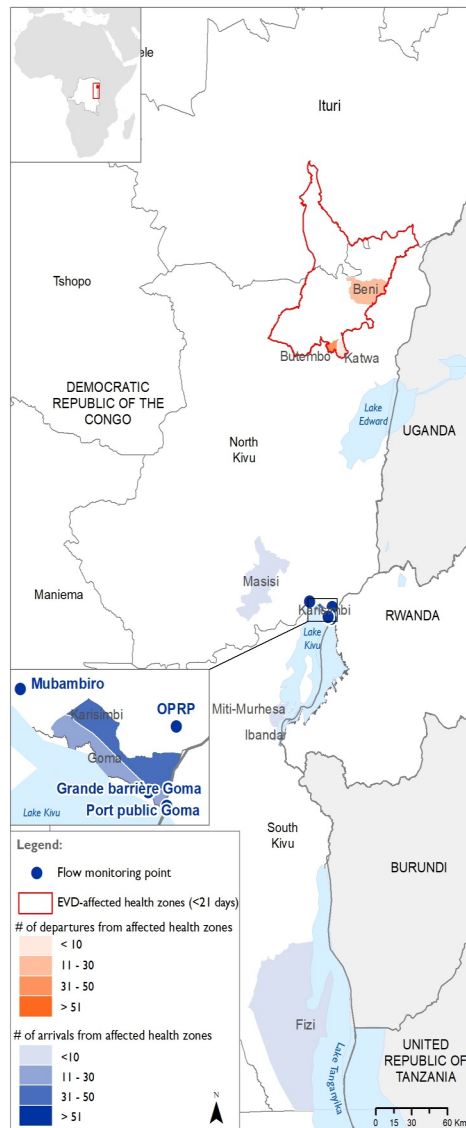
(MAP 1-B) INCOMING MOVEMENT TO AFFECTED HEALTH ZONES

KEY FIGURES

4 
Flow Monitoring Points at Points of Entry / Control

288 
Total movements observed to, from, through, and within affected zones

11,430 
Total movements observed to, from, and within DR Congo.



OVERVIEW AND TRENDS

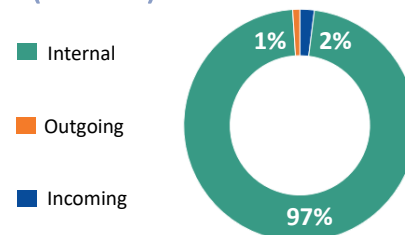
Over the reporting period from 19 to 31 December, a total of 11,430 movements were observed at four Flow Monitoring Points (FMPs) at Points of Entry and Control (PoE/PoCs): Grande Barrière de Goma, Mubambiro, OPRP, and the Port of Goma. These locations were chosen strategically for the protection of major population centres, the monitoring of cross-border movements, and the monitoring movements between affected and non-affected zones.

Data from WHO and the Ministry of Health shows that a total of eight health zones were affected during the course of November. Affected health zone is defined as any health zones that reported a confirmed positive case of Ebola Virus Disease (EVD) from 21 days prior to data collection (i.e. from 27 November to 31 December 2019). For this reporting period, affected zones included Beni, Butembo, Katwa, Biena, Kalungata, Oicha, Mabalako, and Mandima health zones.

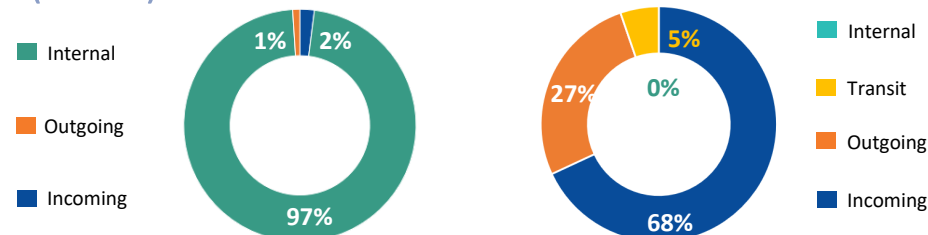
Of the 285 movements observed to, from, through, or within affected zones, DTM identified 76 outgoing movements from affected health zones (27%) and 194 incoming movements to affected areas (68%), while 15 movements were transits through affected health zones (Fig. 1-B). Most of the outgoing travelers identified as departing from affected areas reported travelling from Beni and Butembo, and going to Goma and Karisimbi via the OPRP PoC (6-B), while many traveling from Butembo also reported traveling to Ibanda in South Kivu through the Port of Goma. No travelers observed by the four active PoE/PoCs during the reporting period reported traveling directly from or to Biena, Kalungata, Mabalako, or Mandima zones. From 27 November to 31 December, the majority (62%) of new confirmed cases were reported in Mabalako health zone.

The vast majority of movements from affected zones were observed via OPRP (59%) and Port of Goma (37%) PoCs (6-B), while the vast majority of all cross-border movements were observed via Grande Barrière PoE (6-A). No travelers observed from affected zones reported their final destination as outside of DRC.

(FIG. 1-A) ALL MOVEMENTS



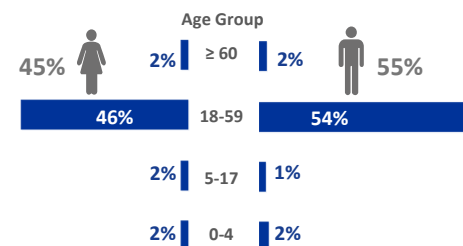
EVD AFFECTED ZONES (FIG. 1-B)



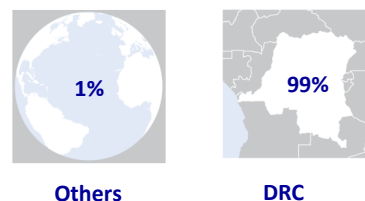
Note: Affected health zones are defined as those health zones which experienced a newly confirmed case of Ebola in the from 21 days prior to the start of the reporting period through the end of the period (i.e. from 27 November to 31 December 2019).

ALL MOVEMENTS OBSERVED

DEMOGRAPHIC (FIG. 2-A)

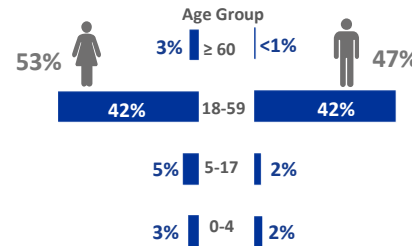


NATIONALITY (FIG. 3-A)

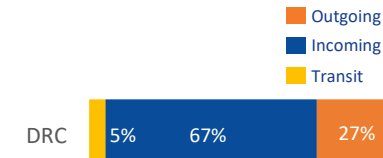


MOVEMENTS OBSERVED TO/FROM AFFECTED ZONES

DEMOGRAPHIC (FIG. 2-B)



NATIONALITY (FIG. 3-B)



All other nationalities represent less than 1 percent. Men observed as travelling from or to an affected zone outnumbered women by more than a third.

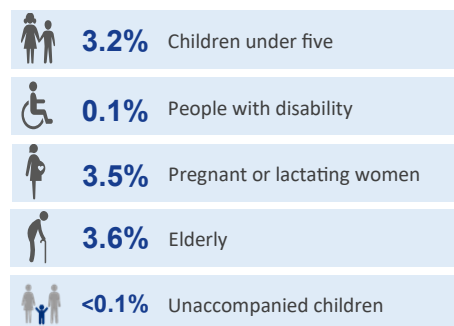
REASONS FOR MOVING (TAB. 1-A)

Reason	Total	Outgoing	Incoming	Internal
Visit family	46%	49%	29%	46%
Return to habitual residence	37%	28%	57%	37%
Economic reasons	13%	6%	7%	14%
Buy goods for personal consumption	1.0%	0%	0%	1%
Healthcare	0.6%	5%	1%	1%
Tourism	0.5%	11%	3%	3%
Education	0.2%	0%	1%	1%
Others	1.5%	1%	2%	1%
Total	100%	100%	100%	100%

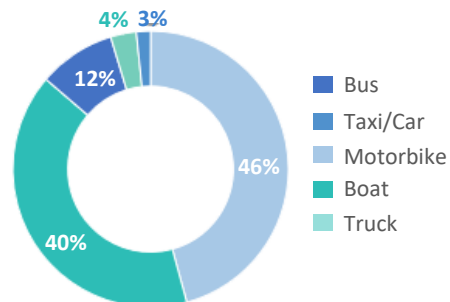
REASONS FOR MOVING (TAB. 1-B)

Reason	Total	Outgoing	Incoming	Transiting
Visit family	37%	46%	36%	7%
Return to habitual residence	58%	53%	58%	73%
Economic reasons	4%	0%	5%	0%
Buy goods for personal consumption	0%	0%	0%	0%
Tourism	0%	0%	0%	0%
Education	0%	0%	0%	0%
Seasonal	0%	0%	0%	0%
Healthcare	0%	0%	0%	0%
Others	2%	1%	1%	20%
Total	100%	100%	100%	

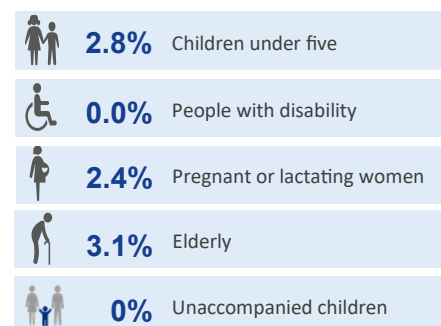
VULNERABILITY PROFILE (FIG. 4-A)



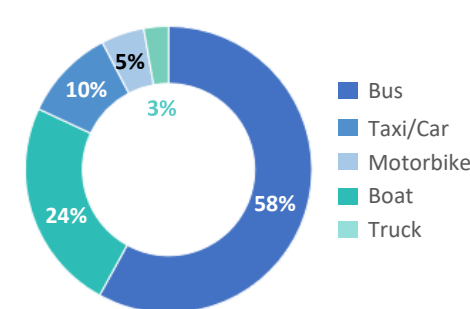
MODE OF TRANSPORT (FIG. 5-A)

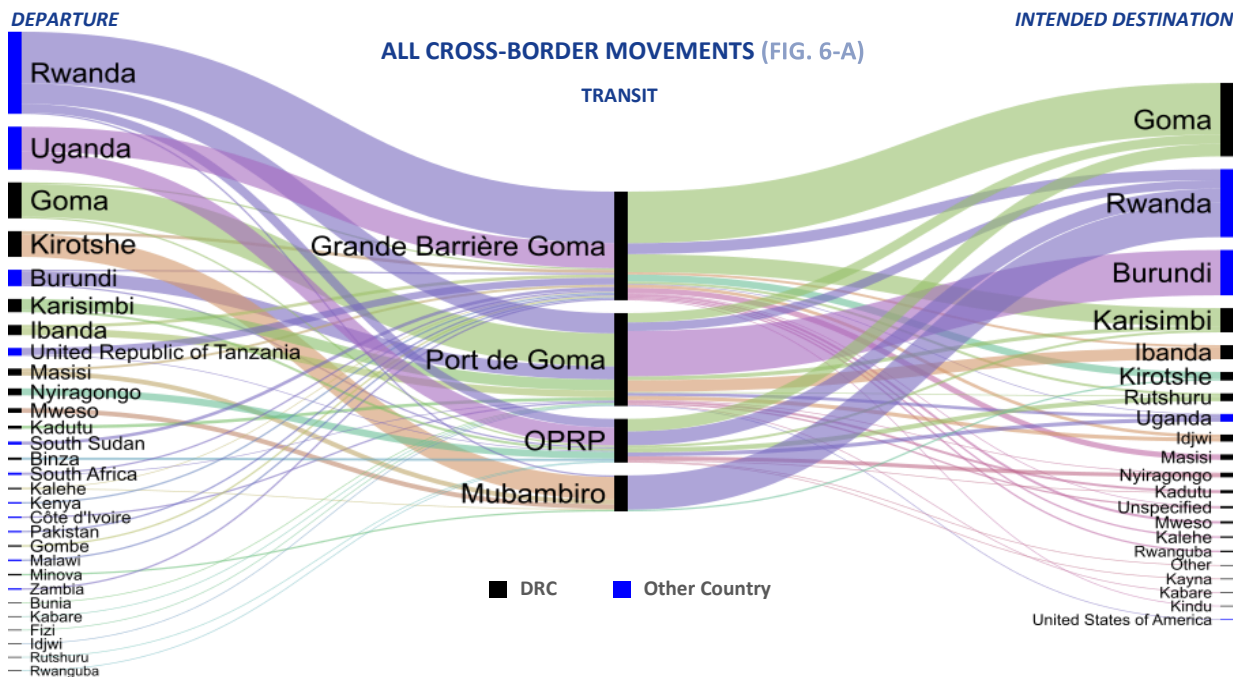


VULNERABILITY PROFILE (FIG. 4-B)



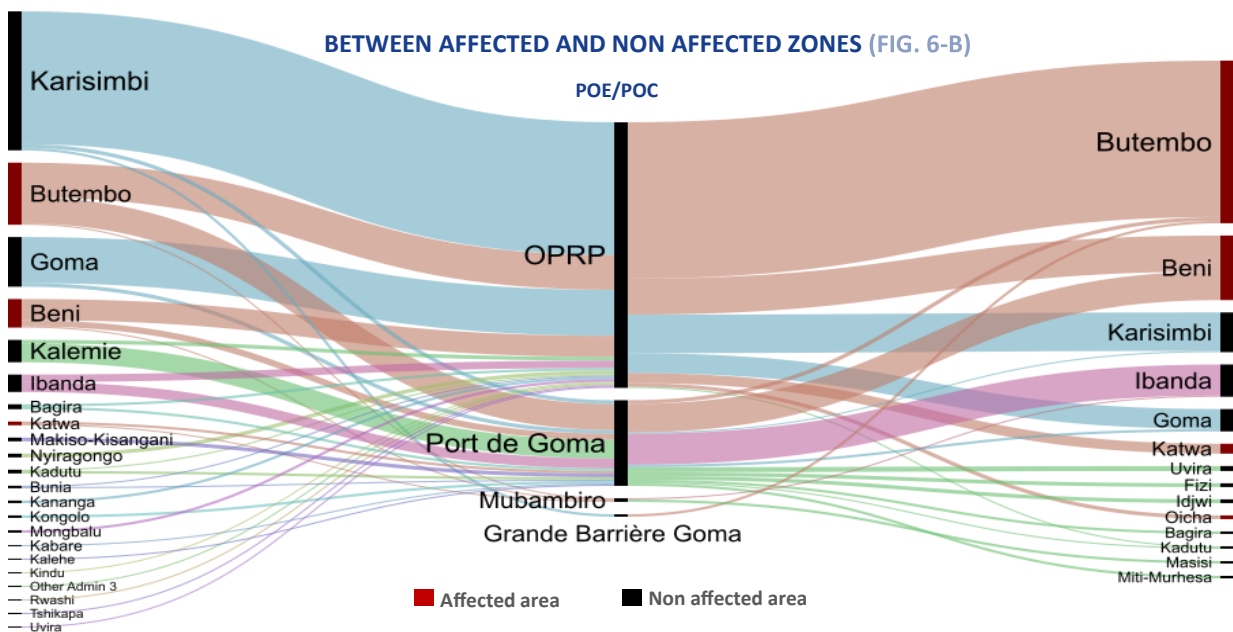
MODE OF TRANSPORT (FIG. 5-B)





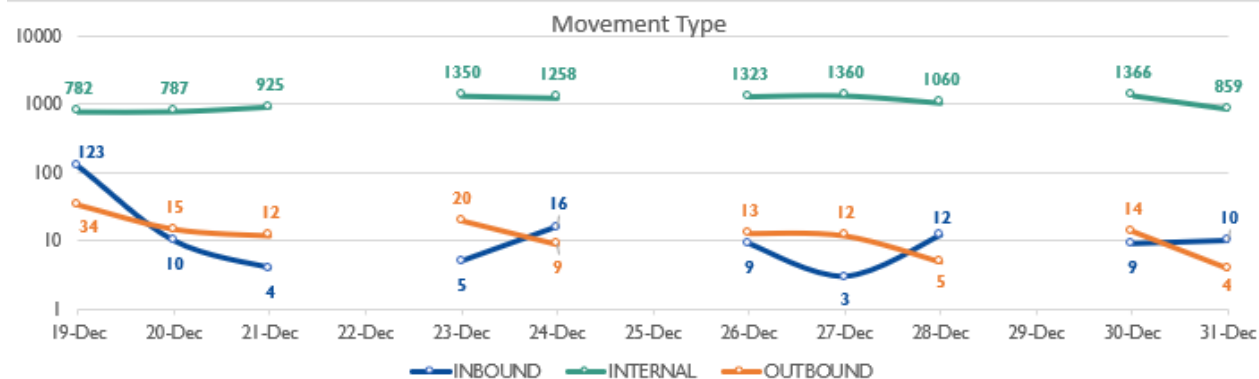
HIGHLIGHTS

- The majority of identified travelers coming from affected areas came from Beni (66%), followed by Butembo (30%), and Katwa (4%) (Map 1 & 6-B).
- The vast majority of identified travelers to affected health zones reported their destinations as Butembo (68%) and Beni (27%) (Map 1 and Fig 6-B).
- As observed by PoE/PoCs over the period, incoming movements (68%) reported to affected zones were greater than outgoing movements (27%) (Fig 1-B).
- All travelers observed transiting through an affected zone reportedly transited via Butembo, while no traveler reported moving between affected zones (Fig 1-A).
- Some 5% of all outgoing movements from DRC were to seek healthcare.
- Of all travelers observed in the period, 99% were nationals of DRC.
- Of the 4 countries reported by outgoing travelers from DRC as their final destinations, the most frequent were Rwanda (54%), Burundi (37%), Uganda (6%), and the United States of America (1%)
- No observed traveler from an affected health zone reported an intended destination outside of DRC.
- Of all movements, approximately one in ten (11%) had a vulnerability.

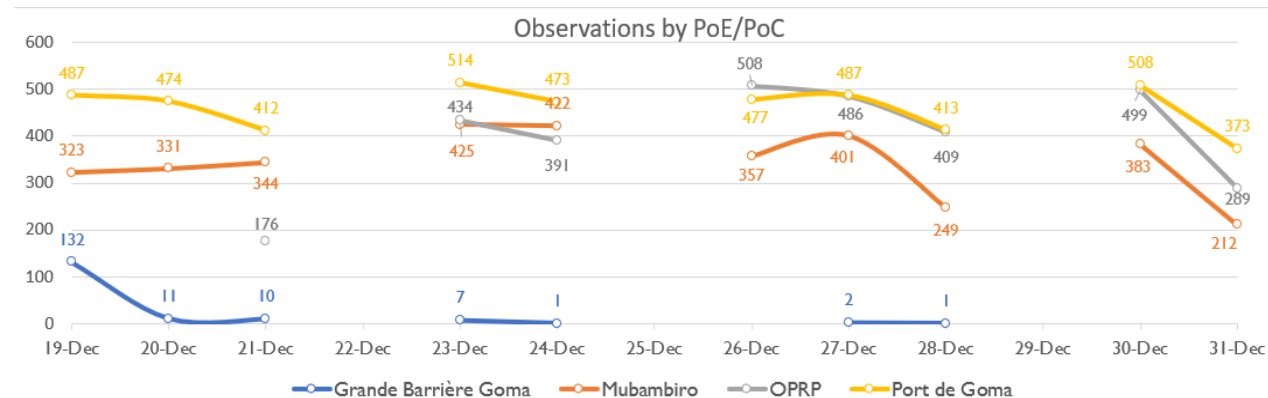


Note on Figures 6-A and 6-B: The figures portray movements originating in one city (left) and transiting through a PoE/PoC (centre) to a final destination (right). Movements are aggregated at the centre column (i.e. cannot be followed directly from left to right), and the width of a flow is scaled according to the number of persons. Origins and final destinations are coloured by category.

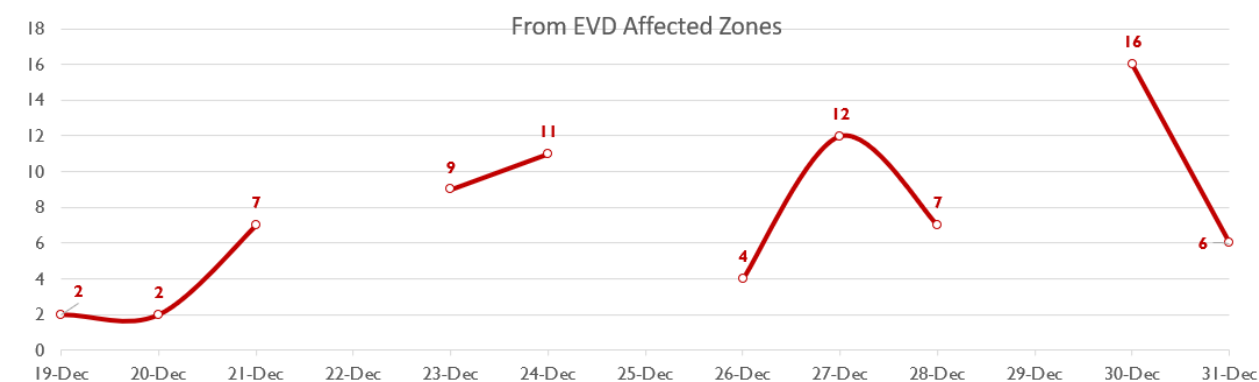
TYPE OF DAILY MOVEMENT OBSERVED DURING THE REPORTING PERIOD (FIG. 7)



MOVEMENTS OBSERVED BY POE/POC DURING THE REPORTING PERIOD (FIG. 8)



TRAVELERS FROM AFFECTED ZONES OBSERVED DURING THE REPORTING PERIOD (FIG. 9)



METHODOLOGY

Flow Monitoring (FM) is one of the components of the Displacement Tracking Matrix (DTM) which aims to capture population flows at specific points to describe trends in the volumes and characteristics of mobile populations. The FM exercise monitors movements of travelers passing through Flow Monitoring Points (FMPs) at Point of Entry (PoE) and Points of Control (PoC) supported by IOM, informing on migrants' points of departures, intended destination, reasons for moving, mode of transport, vulnerabilities and their socio-demographic characteristics. In the context of public health preparedness or response interventions, IOM DRC complements FM data with information from the Ministry of Health on the Ebola Virus Disease Outbreak. FM is conducted at points of entry bordering other countries and points of control within DRC where IOM supports surveillance, hygiene promotion, and risk communication activities. FM is conducted at PoE/PoCs which are strategically placed for the protection of population centres, the monitoring of cross-border movements and those between affected and non-affected zones. The locations of the FMPs are jointly selected by IOM's Migration Health Division and the Ministry of Health. Data is collected on tablets/phones through interviews with travelers by local enumerators. Data collection is carried out five days a week during official opening hours.

LIMITATIONS

Geographical coverage of Flow Monitoring activities is not exhaustive and is limited to Flow Monitoring Points (FMPs) at selected PoE/PoCs. Information provided is indicative only of those movements observed at the selected locations (FMPs) where they were collected. Isolated FMR results are not indicative of movements in other non-monitored transit locations and are not representative of all flows in the geographical region covered by the exercise. The findings must be read as indicative of change in trends, rather than exact measurements of mobility. FMR does not replace, in any case, official estimates at border crossing points.