Forced displacement and Return movements in Kasai Central - Assessment Report
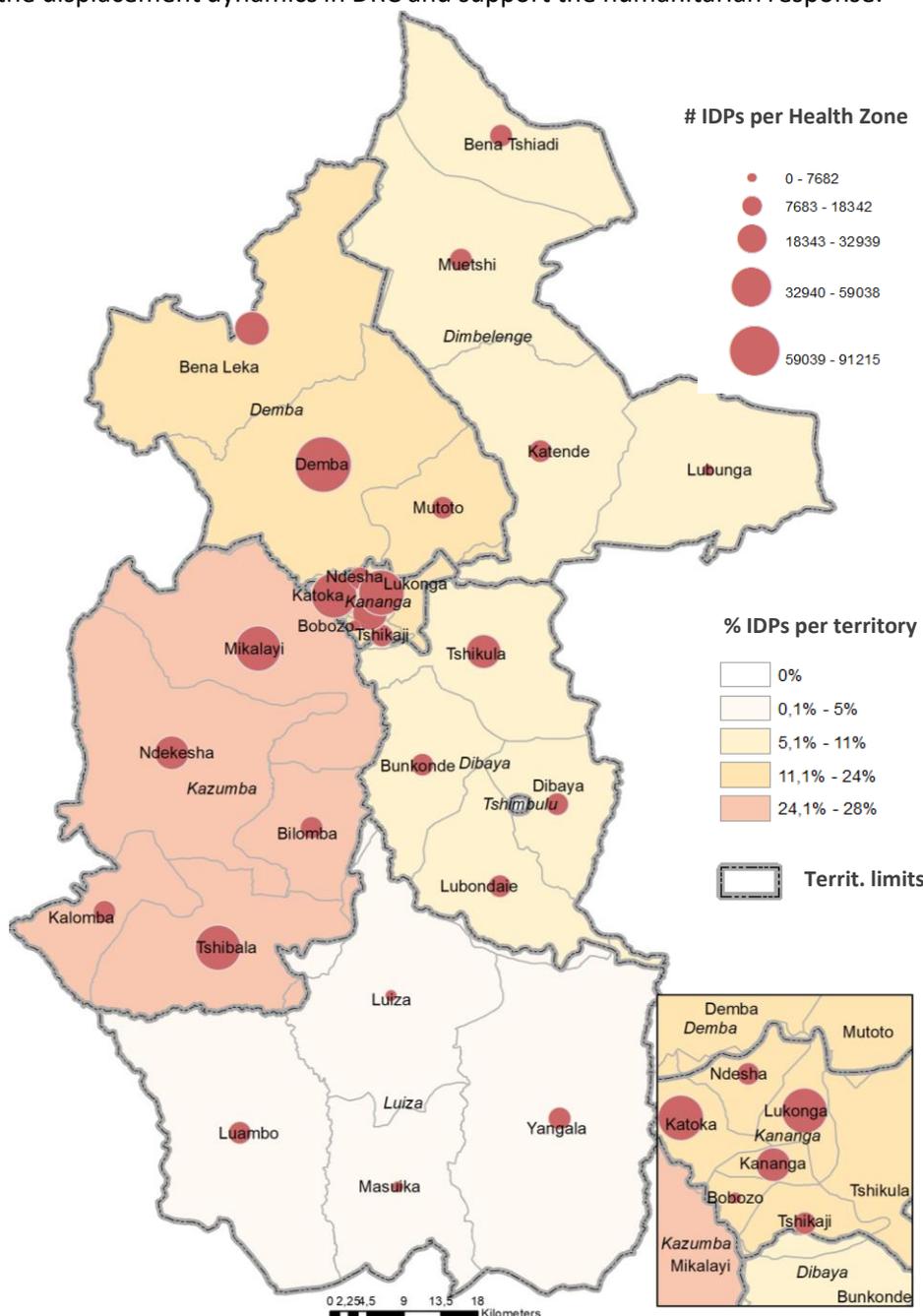
As a response to the humanitarian crisis that is currently affecting the **Democratic Republic of Congo**, the International Organization for Migration launched DTM exercises (Displacement Tracking Matrix) in seven (7) provinces of the country in order to collect up-to-date information on forcibly displaced persons and returnees. These results will provide a better understanding of the displacement dynamics in DRC and support the humanitarian response.

This report provides the main findings of the DTM assessments that were conducted in the **Kasai Central** province from the 5th of March to the 25th of March 2018 within 330 health areas (aires de santé). The information provided in this report reflects population movements that occured in 2016, 2017 and during the first quarter of 2018.

These assessments were conducted following standard DTM methodologies and tools that were developed by IOM in different countries in the world. Field teams have reached all the accessible villages in the Kasai Central province and collected data through key informants interviews. For these assessments, a total of 2,858 villages have been evaluated through 4,825 key informants' interviews by IOM's partner TDH in collaboration with the DPS (Division Provinciale de la Santé).

In general, most of the IDPs in the province have been identified in the territories of Kazumba, Demba and Ville Kananga (23 %, 28 % and 24 % respectively). According to field observations, affected populations are more likely to flee to remote areas (jungle) where they suffer from lack of assistance and access to basic services.

Kazumba, which is the territory mostly affected by internal displacement movements, is also the main returning area where 28 % of the return movements have occurred. In Bukonde, Bilomba and Mutoto health zones, the returnees respectively represent 81 %, 53 % and 53 % of the local population – these are the highest rates in the province.

 # IDPs per Health Zone
- 0 - 7682
- 7683 - 18342
- 18343 - 32939
- 32940 - 59038
- 59039 - 91215

% IDPs per territory
- 0%
- 0,1% - 5%
- 5,1% - 11%
- 11,1% - 24%
- 24,1% - 28%

☐ Territ. limits

Sources: DTM assessment Feb. Mar. 2018.

|			
2,858	**4,825**	**584,432**	**1,081,268**
Assessed Villages	Key informants	IDPs*	Returnees*

* Estimations - The results presented in this report are based on estimations provided by key informants in each village.

Methodology and geographic coverage

Approximately 77 % of the villages reported by the Health provincial division in the Kasai Central province have been evaluated (2,854). The coverage of some areas has remained incomplete because of logistical and security limitations. Bridges and roads were missing for some of these unaccessible villages. Furthermore, while some villages did not exist on the original list provided by the DPS, a total of 214 new villages have been found and evaluated by the enumerators in the field. For the majority of these villages, the GPS coordinates have been recorded. Though health zones were all accessible – with a coverage rate higher than 75 % for most of them -, in particular in Masuika (Luiza), the security limitations have prevented the field teams to cover the areas in an exhaustive way.*
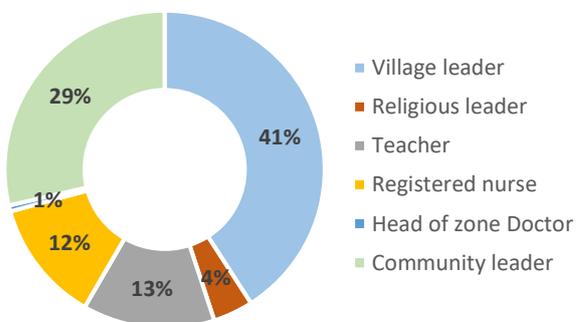
Villages assessed

Health zones	All Villages (DPS)	# Villages assessed	Coverage rate
BENA LEKA	228	110	48%
BENA TSHIADI	104	94	90%
BILOMBA	120	89	74%
BOBOZO	40	0	0%
BUNKONDE	136	123	90%
DEMBA	253	189	75%
DIBAYA	148	121	82%
KALOMBA	159	69	43%
KANANGA	107	105	98%
KATENDE	74	73	99%
KATOKA	68	68	100%
LUAMBO	253	205	81%
LUBONDAIE	141	120	85%
LUBUNGA	118	50	42%
LUIZA	107	102	95%
LUKONGA	127	124	98%
MASUIKA	205	70	34%
MIKALAYI	321	185	58%
MUETSHI	85	95	112%
MUTOTO	141	140	99%
NDEKESHA	186	109	59%
NDESHA	44	54	123%
TSHIBALA	272	164	60%
TSHIKAJI	103	102	99%
TSHIKULA	188	169	90%
YANGALA	210	124	59%
Total	**3 938**	**2 854**	**77%**
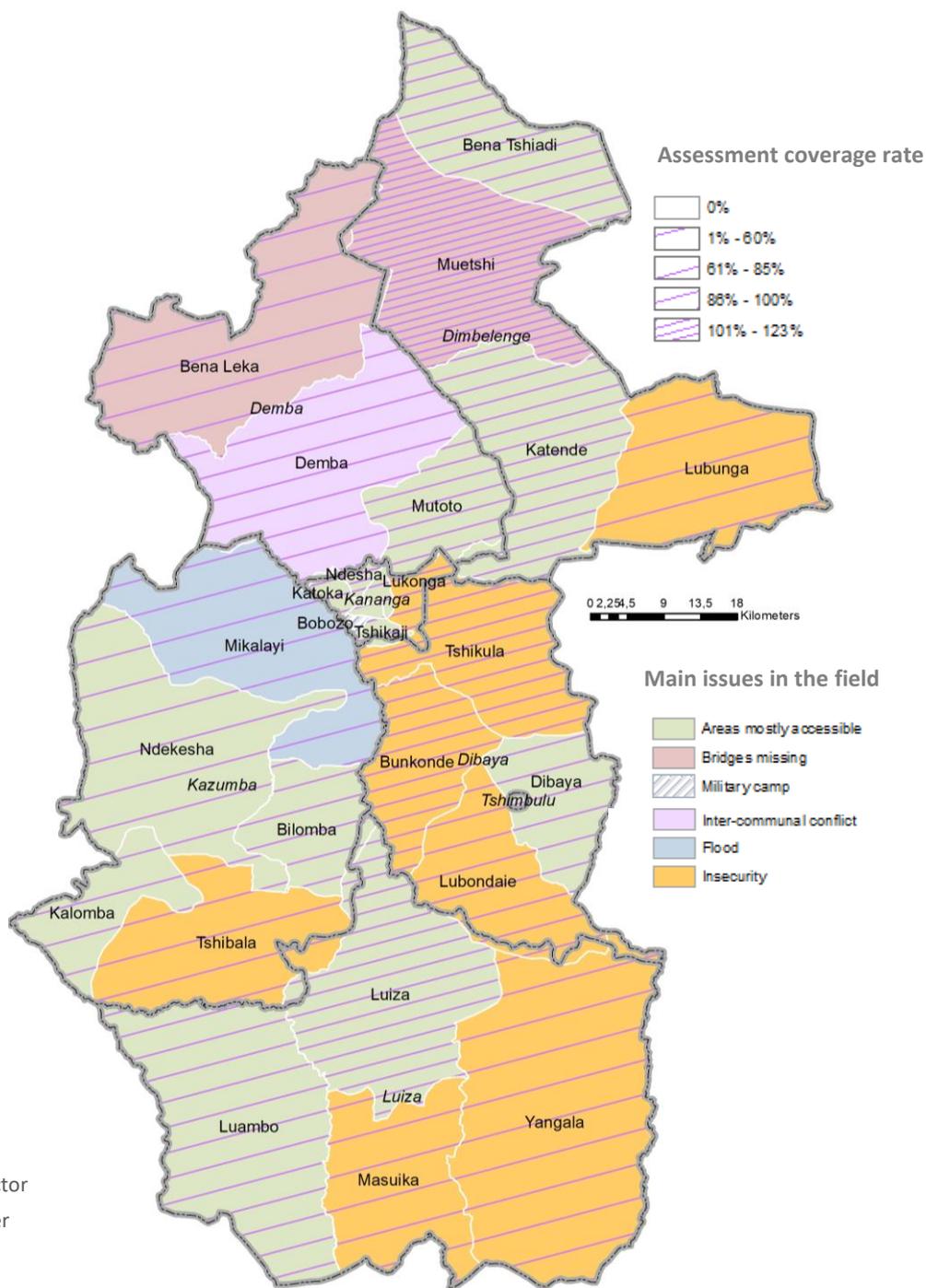
For some villages, the rate is higher than 100%: this is explained by the fact that new villages have been found in the field, those villages were not recorded in the list provided by the DPS.

Key Informants

- 41% Village leader
- 4% Religious leader
- 13% Teacher
- 12% Registered nurse
- 1% Head of zone Doctor
- 29% Community leader

Assessment coverage rate
- 0%
- 1% - 60%
- 61% - 85%
- 86% - 100%
- 101% - 123%

Main issues in the field
- Areas mostly accessible
- Bridges missing
- Military camp
- Inter-communal conflict
- Flood
- Insecurity

What are Health zones and Health areas? *In DRC, the DTM teams are working in close collaboration with the Ministry of Health and its provincincial divisions - the DPS (Division Provinciale de la Santé). These provincial divisions work at three geographical levels of subdivisions: territories, health zones and health areas. The territories are comprised of a set of health zones which are themselves composed of a lower set of subdivisions called health areas (aires de santé).*

A comparison of this data with the results of the last DTM exercise that was conducted in November in the same province would not be entirely feasible as the geographical coverage is not the same: some villages and health areas that were covered in 2017 could not be reached during this exercise. Conversely, data was collected in March 2018 in some areas that were not accessible in 2017.

**Data regarding the villages accesssibility is available upon request. ** The GPS coordinates of some villages are not available*

# Displaced persons

Forced displacement and demography
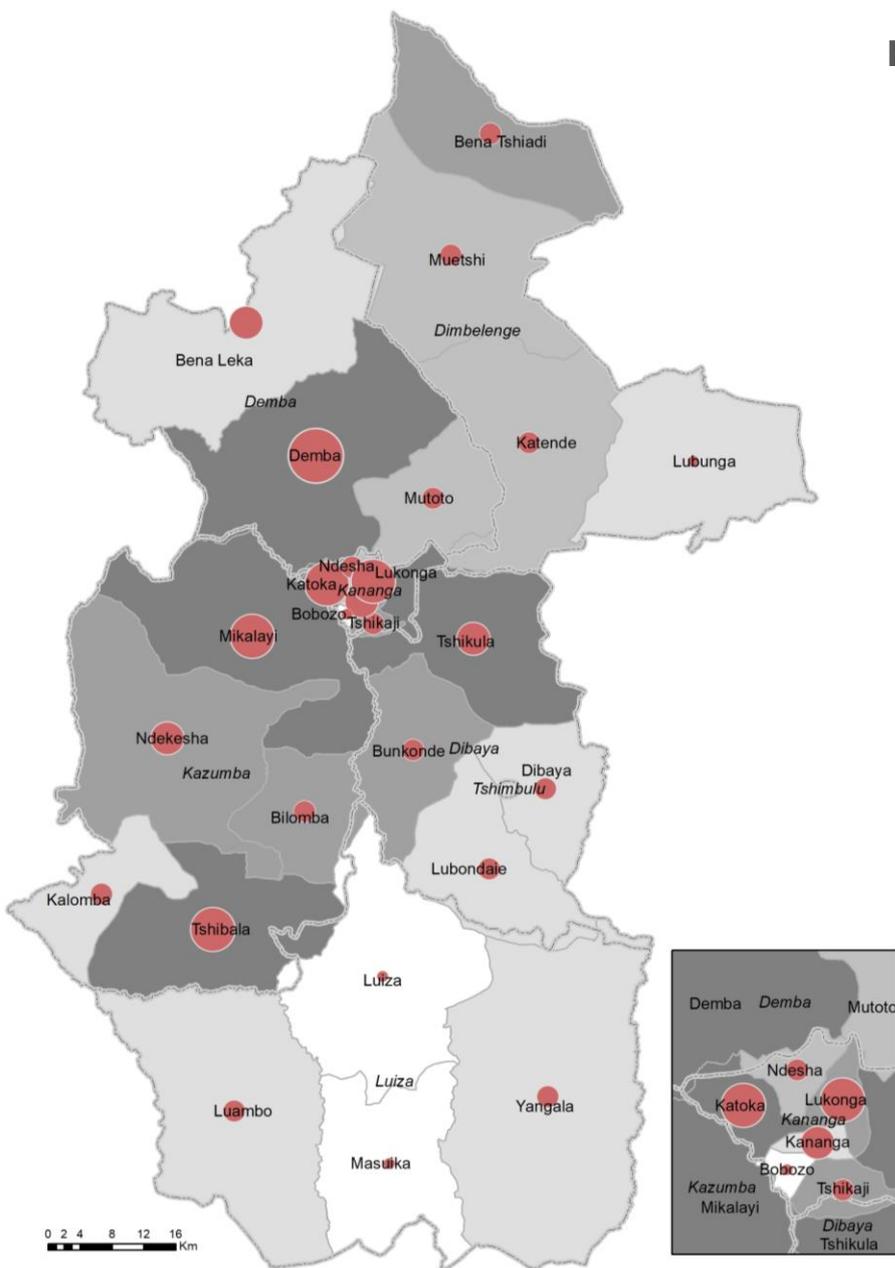
Territory	Health Zone	# IDPs	% IDPs
DEMBA	BENA LEKA	25 473	4,4%
	DEMBA	91 215	15,6%
	MUTOTO	16 069	2,7%
Total DEMBA		132 757	22,7%
DIBAYA	BUNKONDE	13 369	2,3%
	DIBAYA	10 935	1,9%
	LUBONDAIE	12 980	2,2%
	TSHIKULA	28 903	4,9%
Total DIBAYA		66 187	11,3%
DIMBELENGE	BENA TSHIADI	18 342	3,1%
	KATENDE	11 224	1,9%
	LUBUNGA	7 682	1,3%
	MUETSHI	14 567	2,5%
Total DIMBELE		51 815	8,9%
KAZUMBA	BILOMBA	15 259	2,6%
	KALOMBA	14 507	2,5%
	MIKALAYI	59 038	10,1%
	NDEKESHA	32 939	5,6%
	TSHIBALA	42 883	7,3%
Total KAZUMBA		164 626	28,2%
LUIZA	LUAMBO	12 028	2,1%
	LUIZA	3 477	0,6%
	MASUIKA	2 988	0,5%
	YANGALA	11 006	1,9%
Total LUIZA		29 499	5,0%
VILLE KANANG	KANANGA	22 309	3,8%
	KATOKA	40 745	7,0%
	LUKONGA	50 174	8,6%
	NDESHA	9 384	1,6%
	TSHIKAJI	16 936	2,9%
Total VILLE KANANGA		139 548	23,9%
Total		**584 432**	**100%,**

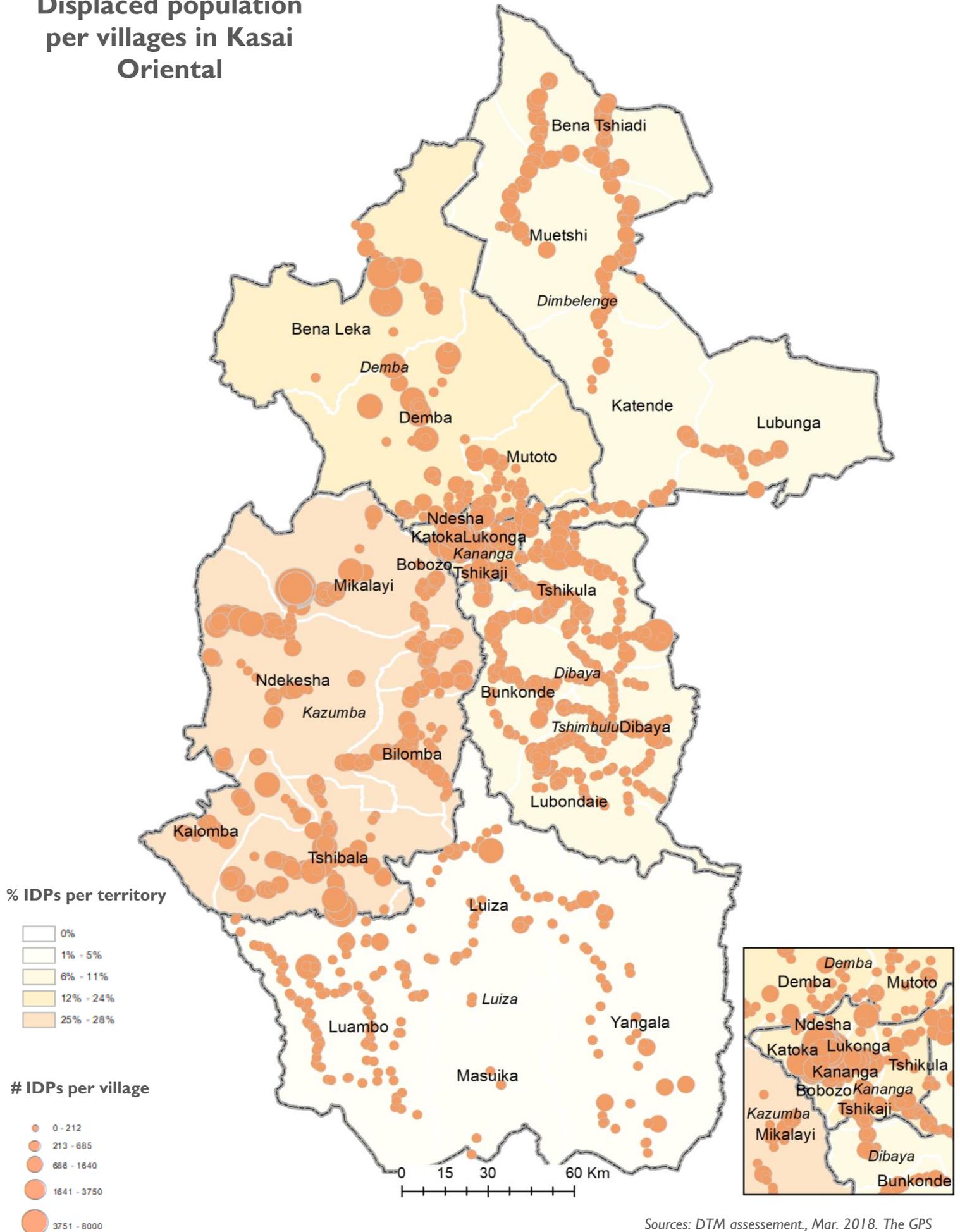*Sources: Census, DPS - DTM Feb/Mar. 2018*

 # IDPs per health zone
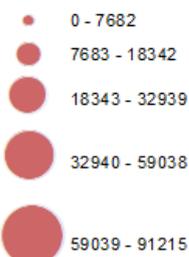
% of IDP / total population in Health zone (Census)
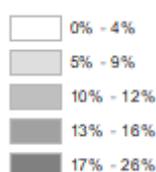
The territories of Demba, Kazumba and Ville Kananga host most of the IDPs in the province (23 %, 28 % and 24%, respectively). With 91,215 IDPs, Demba is the most affected health zone, followed by Mikalayi and Lukonga. More over, in Demba, the IDPs who arrived in the health areas of Nsangabantu and Tshibambula represent more than 8% of the IDPs in the province (31,522 and 18,633 respectively). The pressure of the displacement is extremely high in these areas: indeed, the presence of the IDPs represent more than 75 % of the total population in Tshibambula and 289 % in Nsaganbantu.

More broadly, whereas the population densities in Demba and Mikalayi health zones are particularly weak compared to the rest of the province, Kananga has the highest population density of the province, 6,878 inh./km². Furthermore, in Demba and Mikalayi, the IDP population represents respectively 25 % and 26 % of the total population in these health zones. Local populations in these two health zones may therefore certainly feel the presence of the IDPs more acutely than in Ville Kananga.

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## Displaced population per villages in Kasai Oriental

Bena Tshiadi

Muetshi

Dimbelenge

Bena Leka

Demba

Demba

Katende

Lubunga

Mutoto

Ndesha
Katoka Lukonga
Kananga
Bobozo
Tshikaji

Tshikula

Mikalayi

Ndekesha

Dibaya

Bunkonde

Kazumba

Tshimbulu Dibaya

Bilomba

Lubondaie

Kalomba

Tshibala

Luiza

Luiza

Yangala

Luambo

Masuika

% IDPs per territory

- 0%
- 1% - 5%
- 6% - 11%
- 12% - 24%
- 25% - 28%

 # IDPs per village

- 0 - 212
- 213 - 685
- 686 - 1640
- 1641 - 3750
- 3751 - 8000

0   15   30   60 Km

Inset map labels:
Demba
Demba   Mutoto
Ndesha
Katoka Lukonga
Kananga   Tshikula
Bobozo *Kananga*
Kazumba Tshikaji
Mikalayi
Dibaya
Bunkonde

Sources: DTM assessement., Mar. 2018. The GPS coordinates of the villages are not all available, this map does not display all the villages assessed.
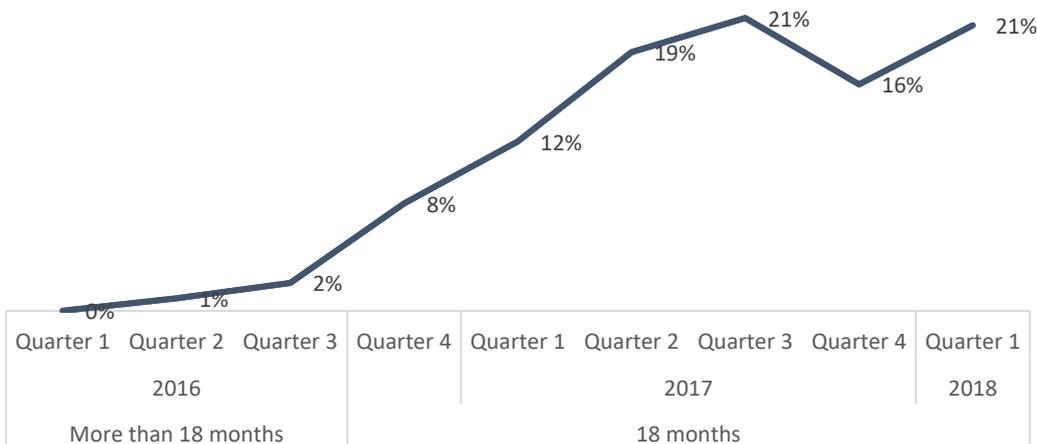
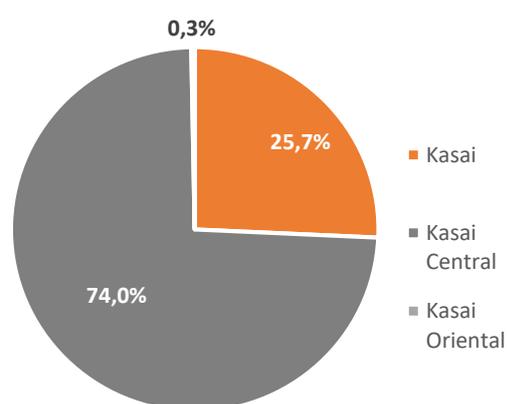## Displacement period
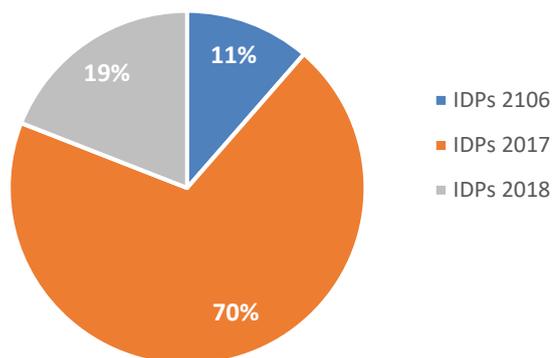

Displacement period per territory
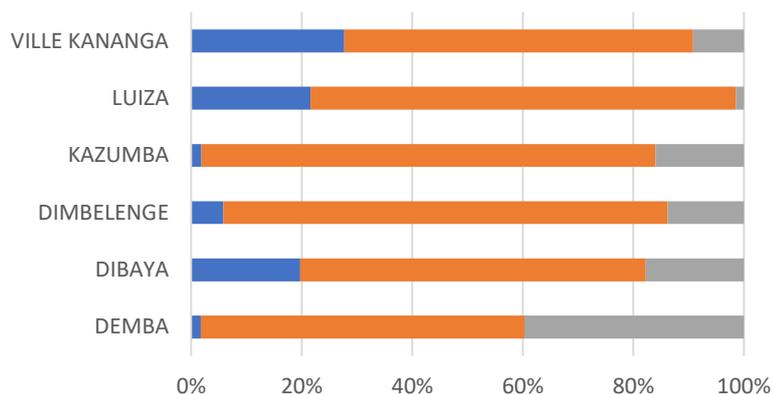
Thus far, in Kasai Central, most of the households were displaced in 2017. Internal displacement movements during the first two months of 2018, were mostly observed in Demba (40 %) and Dibaya (18 %) territories. In Ville Kananga, 28 % of the IDPs arrived in 2016.

Only 3 % of the IDPs were displaced more than 18 months ago. Most of the IDPs (42 %) have been displaced during the third quarter of 2017 and the first quarter of 2018.

Origin of the IDPs

Most of the IDPS used to live in the Kasai Central province before their displacement (74 %). They mainly come from the territories of Demba, Dibaya and Kazumba (26 %, 17 % and 14 %, respectively). The other provinces of origin are Kasai (26%) and Kasai Oriental (0,3%). The IDPs coming from Kasai mainly used to live in the territories of Tshikapa and Kamonia.


Territories of origin – 2016 to 2018 displacements
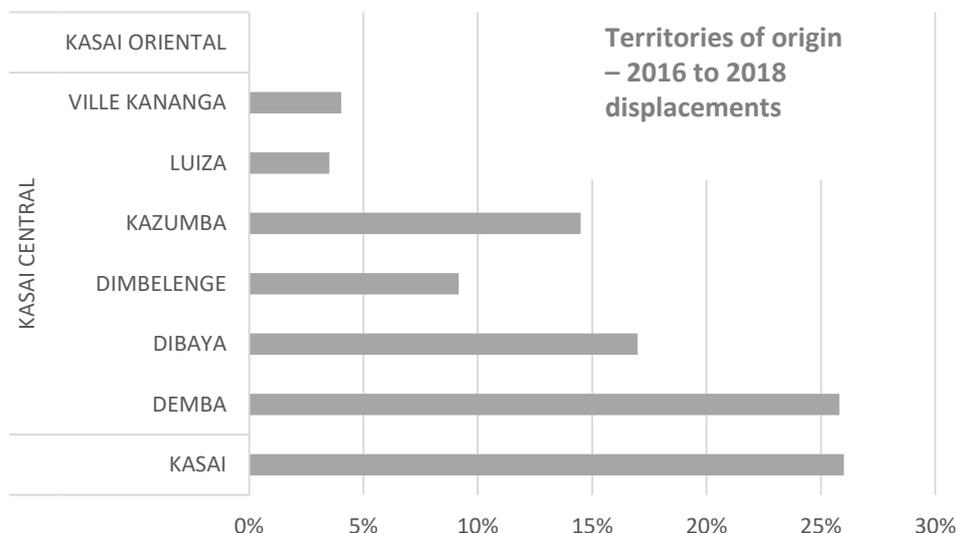
Types of movement

At the level of the health zones, data indicates that most of the displacements occur between the health zones of the province (45 %) – in other words, IDPs fled out of their health zone when they were displaced but did not leave the province. Most of the IDPs may have travelled long distance after their displacement which may have an impact on future return movements.

The health zones located in the Western part of the province mainly received IDPs coming from another province: indeed, 26 % of the IDPs come from the Kasai province (West of Kasai Central). Population movements occuring at the level of the health zones are less (28%) and mostly concern the Eastern part of the province.
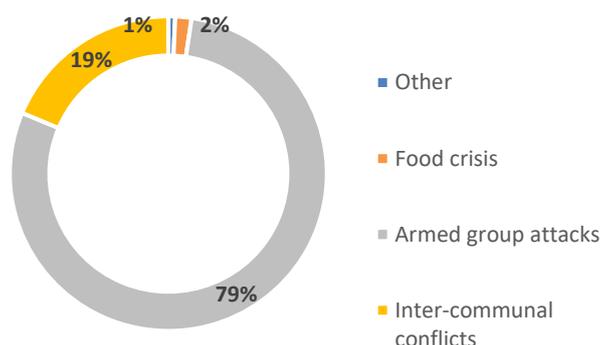
IDPs mainly come from another province

IDPs mainly come from a different health zone, but within the same province

IDPs mainly come from the same Health zone
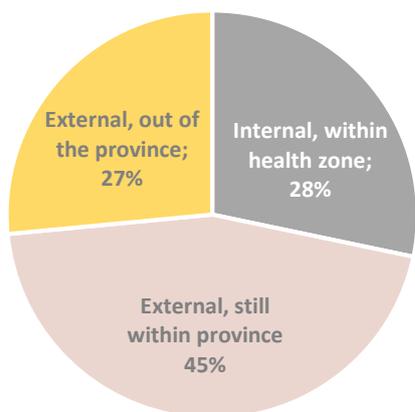
Health Zone	Internal, within health zone	External, still within province	External, out of the province
BENA LEKA	32%	33%	35%
DEMBA	53%	39%	9%
MUTOTO	18%	74%	8%
BUNKONDE	19%	46%	34%
DIBAYA	63%	14%	23%
LUBONDAIE	58%	27%	15%
TSHIKULA	69%	29%	3%
BENA TSHIADI	32%	65%	2%
KATENDE	60%	40%	0%
LUBUNGA	70%	30%	0%
MUETSHI	69%	31%	0%
BILOMBA	13%	25%	62%
KALOMBA	22%	6%	72%
MIKALAYI	19%	6%	75%
NDEKESHA	30%	11%	59%
TSHIBALA	12%	17%	71%
LUAMBO	6%	44%	50%
LUIZA	6%	94%	0%
MASUIKA	4%	44%	52%
YANGALA	3%	73%	24%
KANANGA	19%	81%	0%
KATOKA	0%	100%	0%
LUKONGA	1%	98%	1%
NDESHA	3%	86%	11%
TSHIKAJI	3%	96%	2%
Total	**28%**	**45%**	**27%**

External, out of the province; 27%

Internal, within health zone; 28%

External, still within province 45%

Sources: DTM assessment, Feb, Mar. 2018.

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Reasons for displacement

According to the data collected, people were displaced mainly because of armed group attacks either in 2016, 2017 or 2018, which corresponds to 88 % of the total. However, it is worth noting that 27% of the IDPs displaced in 2018 fled because of inter-communal conflicts – this type of displacement has been increasing from 4 % in 2016 to 27% in 2018.

Reasons for displacement	# Individuals displaced in 2016	% Individuals displaced in 2016	# Individuals displaced in 2017	% Individuals displaced in 2017	# Individuals displaced in 2018	% Individuals displaced in 2018	# IDPs Total	% IDPs Total
Other	81	0,1%	3 167	0,8%	795	0,7%	4 043	0,7%
Food crisis	2 048	3,1%	3 865	1,0%	3 798	3,4%	9 711	1,7%
Armed group attacks	61 526	92,7%	323 373	79,5%	76 555	68,8%	461 454	79,0%
Inter-communal conflicts	2 747	4,1%	76 433	18,8%	30 044	27,0%	109 224	18,7%
Total	**66 402**	**100%**	**406 838**	**100%**	**111 192**	**100%**	**584 432**	**100%**

Presence of IDPs and Returnees in the villages

Presence of IDPs and Returnees in villages per Territory
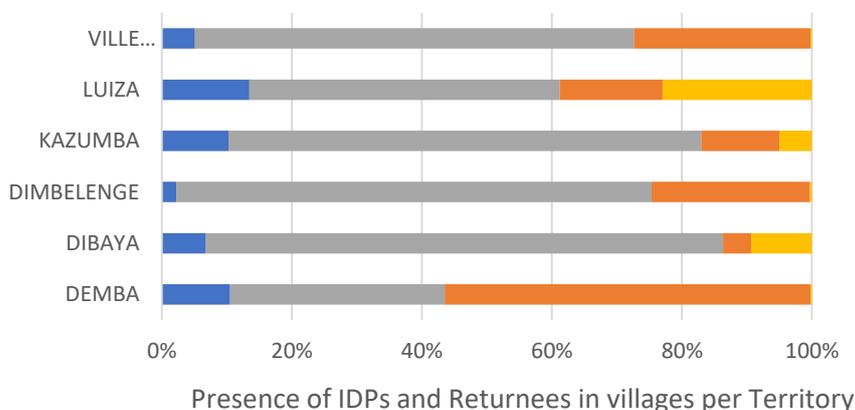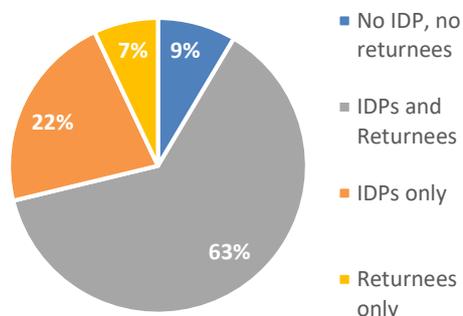
In total, 9 % of the villages do not host IDPs or Returnees. There are both IDPs and Returnees in the majority of the villages, 63 %. However, in 22 % of the villages, only IDPs have been identified, in particular in Demba, where 56 % of the villages only host IDPs. Villages where both IDPs and Returnees have been identified may be more deeply affected by the pressure of these population movements.
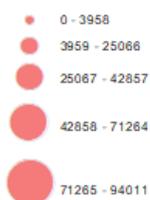
Returnees

Returnees and demography

Sources: DTM assessment, Mar. 2018.
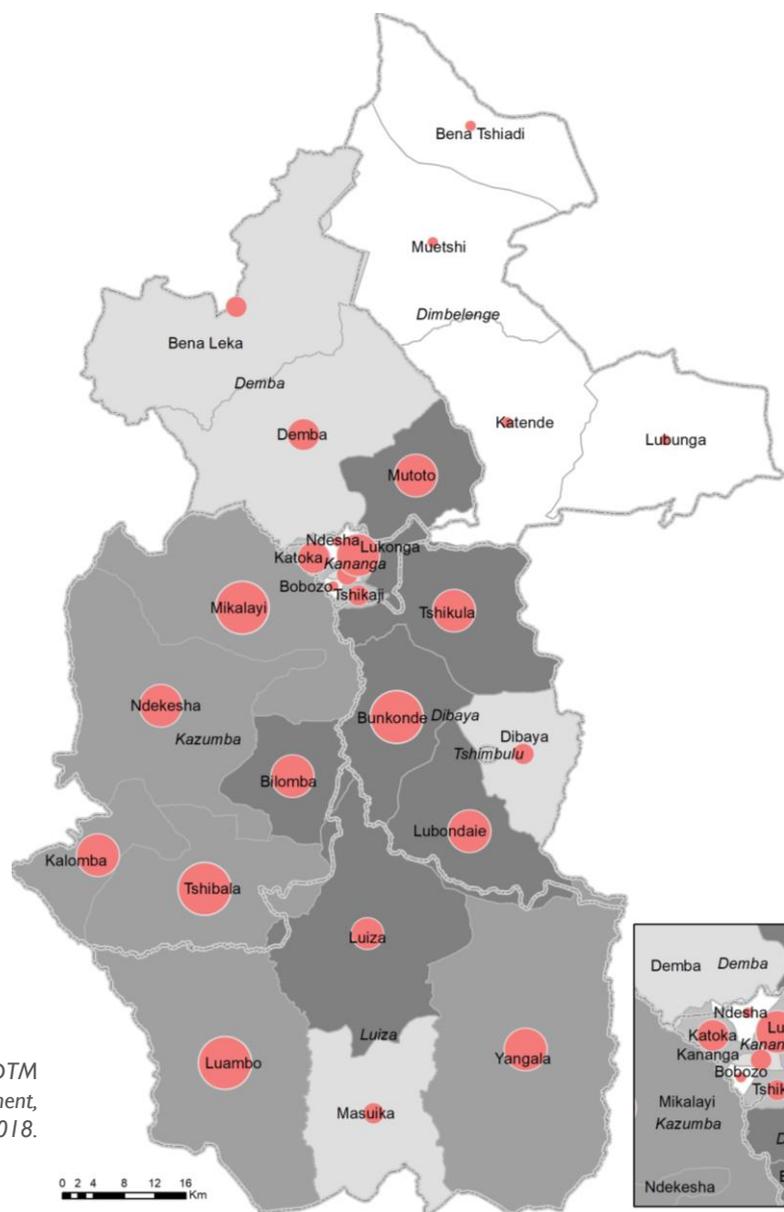
Territory	Health zone	# Returnees	% Returnees
DEMBA	BENA LEKA	20 930	1,9%
	DEMBA	40 561	3,8%
	MUTOTO	71 211	6,6%
Total DEMBA		132 702	12,3%
DIBAYA	BUNKONDE	81 923	7,6%
	DIBAYA	16 837	1,6%
	LUBONDAIE	67 674	6,3%
	TSHIKULA	65 504	6,1%
Total DIBAYA		231 938	21,5%
DIMBELENGE	BENA TSHIADI	3 958	0,4%
	KATENDE	2 867	0,3%
	LUBUNGA	1 909	0,2%
	MUETSHI	3 192	0,3%
Total DIMBELENGE		11 926	1,1%
KAZUMBA	BILOMBA	55 870	5,2%
	KALOMBA	64 700	6,0%
	MIKALAYI	82 781	7,7%
	NDEKESHA	71 264	6,6%
	TSHIBALA	94 011	8,7%
Total KAZUMBA		368 626	34,1%
LUIZA	LUAMBO	82 220	7,6%
	LUIZA	42 857	4,0%
	MASUIKA	12 025	1,1%
	YANGALA	56 396	5,2%
Total LUIZA		193 498	17,9%
VILLE KANANG	KANANGA	19 241	1,8%
	KATOKA	39 697	3,7%
	LUKONGA	56 530	5,2%
	NDESHA	2 044	0,2%
	TSHIKAJI	25 066	2,3%
Total VILLE KANANGA		142 578	13,2%
Total		**1 081 268**	**100%**

 # Returnees per health zone

- 0 - 3958
- 3959 - 25066
- 25067 - 42857
- 42858 - 71264
- 71265 - 94011

% Returnees / population total in Health Zone
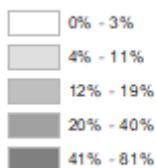
- 0% - 3%
- 4% - 11%
- 12% - 19%
- 20% - 40%
- 41% - 81%

Kazumba, which is the territory mostly affected by internal displacement movements, is also the main returning area in which 34 % of the return movements have occurred. The territory of Dibaya is less affected by the arrival of internally displaced persons than by the return movements : 21,5 % of the returnees have been identified in this territory. Field observations confirm that returnee populations are in urgent need of assistance.

In total, **1 081 268** indivuals have returned to their area of origin since 2016 and are no longer counted as IDPs. The main health zones where return movements have been observed are Tshibala and Milalayi in Kazumba (17 %), Luambo in Luiza (8 %) and Bukonde in Dibaya (8 %). In Bukonde, Bilomba and Mutoto health zones, these return movements may be more significant as regards to the proportion of returnee compared to the total population: the returnees respectively represent 81 %, 53 % and 53 % of the local population in the corresponding zones – these are the highest rates in the province.

Return period
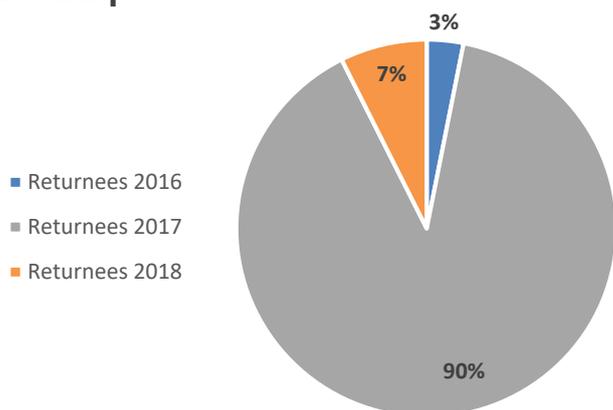
### Return period per territory
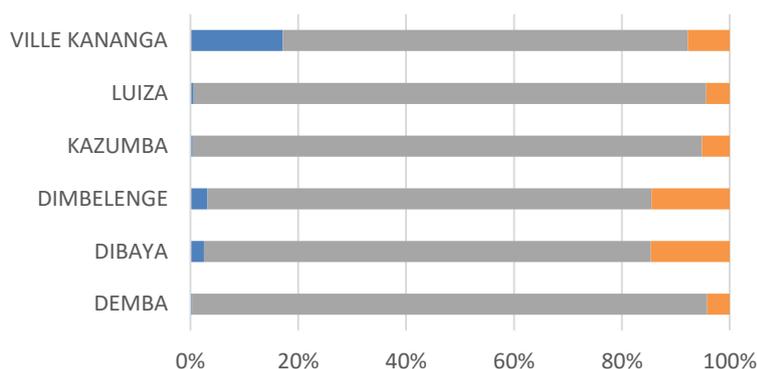
The data collected indicates that most of the return movements occured in 2017. Since the beginning of 2018, it is worth noting that all these territories have already received returnees especially in Diabaya and Dimbelenge – where respectively 15 % and 14% of the returnees have been reported thus far.

Field teams highlighted that IDPs are struggling to gather sufficient funding that would allow them to return to their places of origin. The security situation and the strong military presence in the field also deter them to plan their return journey.
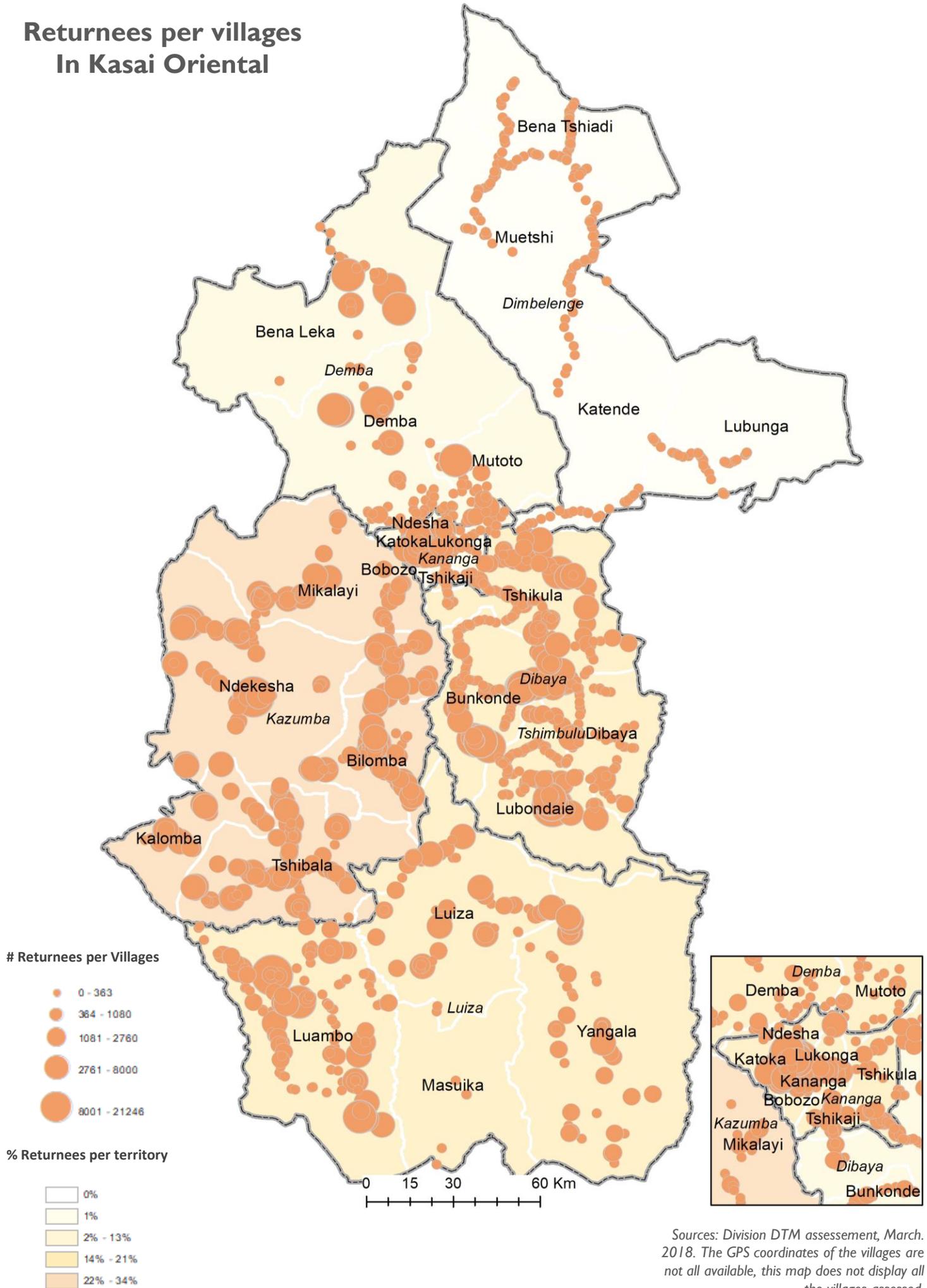
Reasons for Return movements
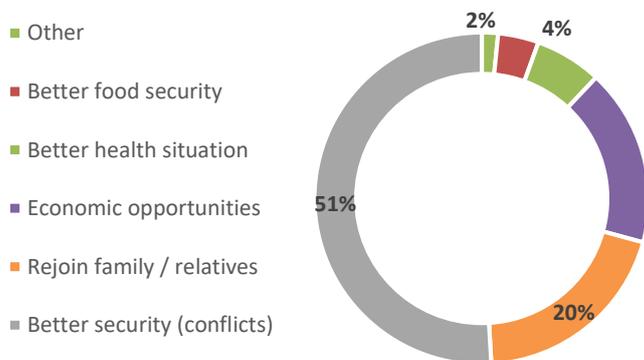
The data collected indicates that 51 % of the returnees went back to their area of origin because the security situation had improved. In 2018, 36 % of the returnees declared that they were willing to rejoin their family and relatives – this return driver has been increasing since 2016. Field teams have raised the fact that returnees may have to find new places to live as many houses were destroyed and burned. Similarly, though the security situation has improved, the local economy is still extremely weak; returned populations suffer from lack of food mainly caused by the absence of agricultural activities during the displacement period.

Reasons for Return	# Returnees 2016	% Returnees 2016	# Returnees 2017	% Returnees 2017	# Returnees 2018	% Returnees 2018	# Returnees All periods	% Returnees All periods
Better food security	149	0,4%	42 018	4,3%	394	0,5%	42 561	3,9%
Better health situation	476	1,4%	66 379	6,9%	3 216	4,1%	70 071	6,5%
Other	32	0,1%	3 365	0,3%	93	0,1%	3 490	0,3%
Inter-communal conflict	0	0,0%	50	0,0%	0	0,0%	50	0,0%
Better security (Conflicts)	16 243	48,3%	497 911	51,4%	36 331	45,8%	550 485	50,9%
Economic opportunities	8 735	26,0%	167 797	17,3%	10 217	12,9%	186 749	17,3%
School	56	0,2%	12 225	1,3%	1 129	1,4%	13 410	1,2%
Rejoin family / relatives	7 948	23,6%	178 129	18,4%	28 372	35,8%	214 449	19,8%
Total	**33 639**	**100%**	**967 874**	**100%**	**79 358**	**100%**	**1 081 265**	**100%**

Returnees per villages
In Kasai Oriental

Returnees per Villages

- 0 - 363
- 364 - 1080
- 1081 - 2760
- 2761 - 8000
- 8001 - 21246

% Returnees per territory
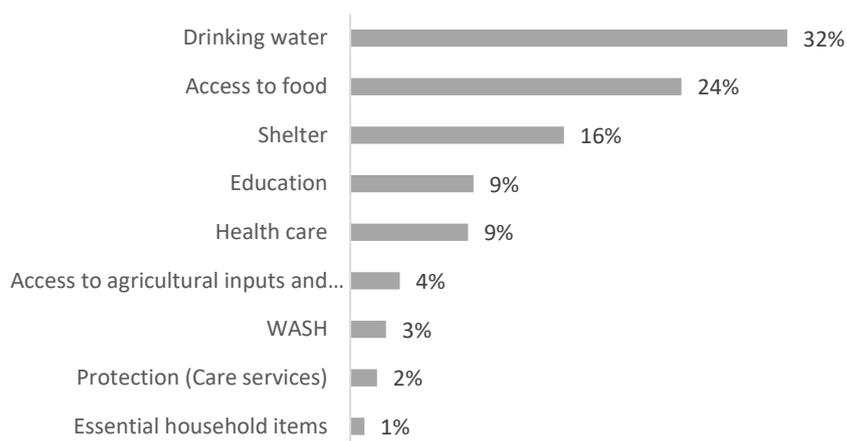
- 0%
- 1%
- 2% - 13%
- 14% - 21%
- 22% - 34%

*Sources: Division DTM assessement, March.
2018. The GPS coordinates of the villages are
not all available, this map does not display all
the villages assessed.*
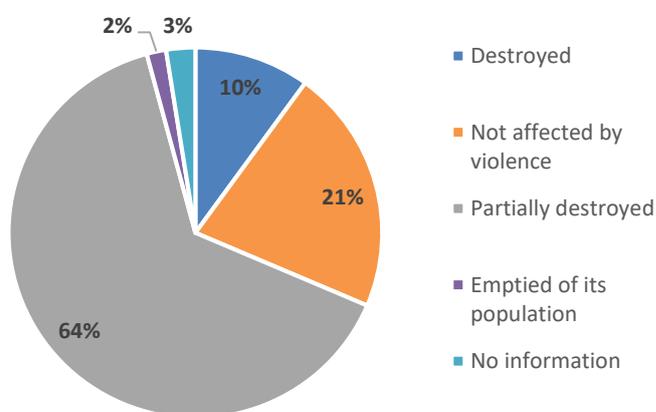
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Infrastructures and priority needs

The situation of the villages regarding access to health care, education and security, is worrying. The weak density of these areas is very much linked to the lack of operational infrastructures. Indeed, out of the villages assessed, only in 48 %, the local population has access to an operational health center. In Demba, Dibaya and Luiza territories, this rate reaches 35 %, 33 %, and 44 % respectively. Furthermore, only 59 % of the villages evaluated can count on an operational school and 28 % of the villages lack of an operational police antenna. Beyond these figures, field enumerators also reported acute malnutrition cases in Mushongo, a village located in Bena Bele Health area (Bena Tshiadi health zone) and in all the villages evaluated in Yangala health zone.

In 32 % of the villages, access to drinking water has been raised as a priority need. In Kazumba territory in particular, access to drinking water is a priority for 28 % of the villages on average. More generally, in the most affected territories by internal displacement (Ville Kananga, Demba and Kazumba), drinking water, followed by access to food and shelter have been raised by the key informants as the main needs in the villages.

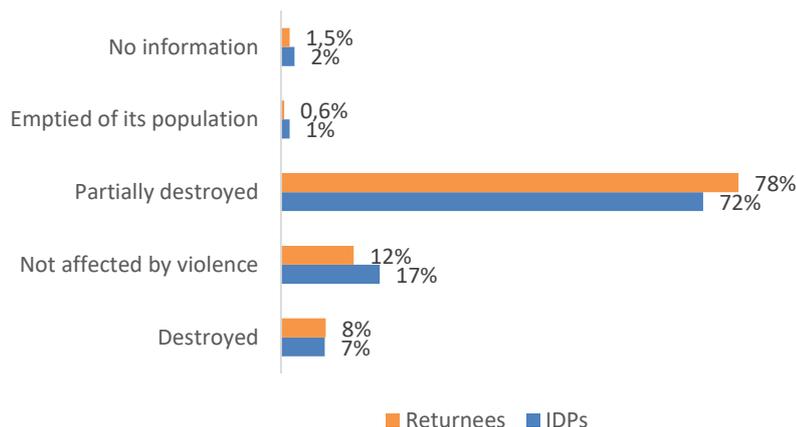| Priority need	%
Drinking water	32%
Access to food	24%
Shelter	16%
Education	9%
Health care	9%
Access to agricultural inputs and…	4%
WASH	3%
Protection (Care services)	2%
Essential household items	1%

Situation of the villages

Internally displaced persons and returnees have been seeking relatively safer places after having fled – this situation is reflected in the data collected that shows that 64 % of all the villages that have been evaluated have not been affected by violence. However, 21 % of the villages have been partially destroyed. Most of those villages are located in Kazumba (28 %) and Dibaya (23 %).

Pie chart: Destroyed 10%, Not affected by violence 21%, Partially destroyed 64%, Emptied of its population 2%, No information 3%

More precisely, respectively 78 % of the returnees and 72 % of the IDPs now live in partially destroyed villages whereas 12 % of the returnees and 17 % of the IDPs live in village that have not been affected by violence.

Bar chart (Returnees / IDPs):
	Returnees	IDPs
No information	1,5%	2%
Emptied of its population	0,6%	1%
Partially destroyed	78%	72%
Not affected by violence	12%	17%
Destroyed	8%	7%

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Infrastructures in the Kasai Central province

Sources: DTM assessment, Feb/Mar. 2018.

Chief Town
Hospital
Health center
Registered health center
School
General hospital
Gen. Ref. hospital
Market place
Health post
Clinic
Province
Health zone
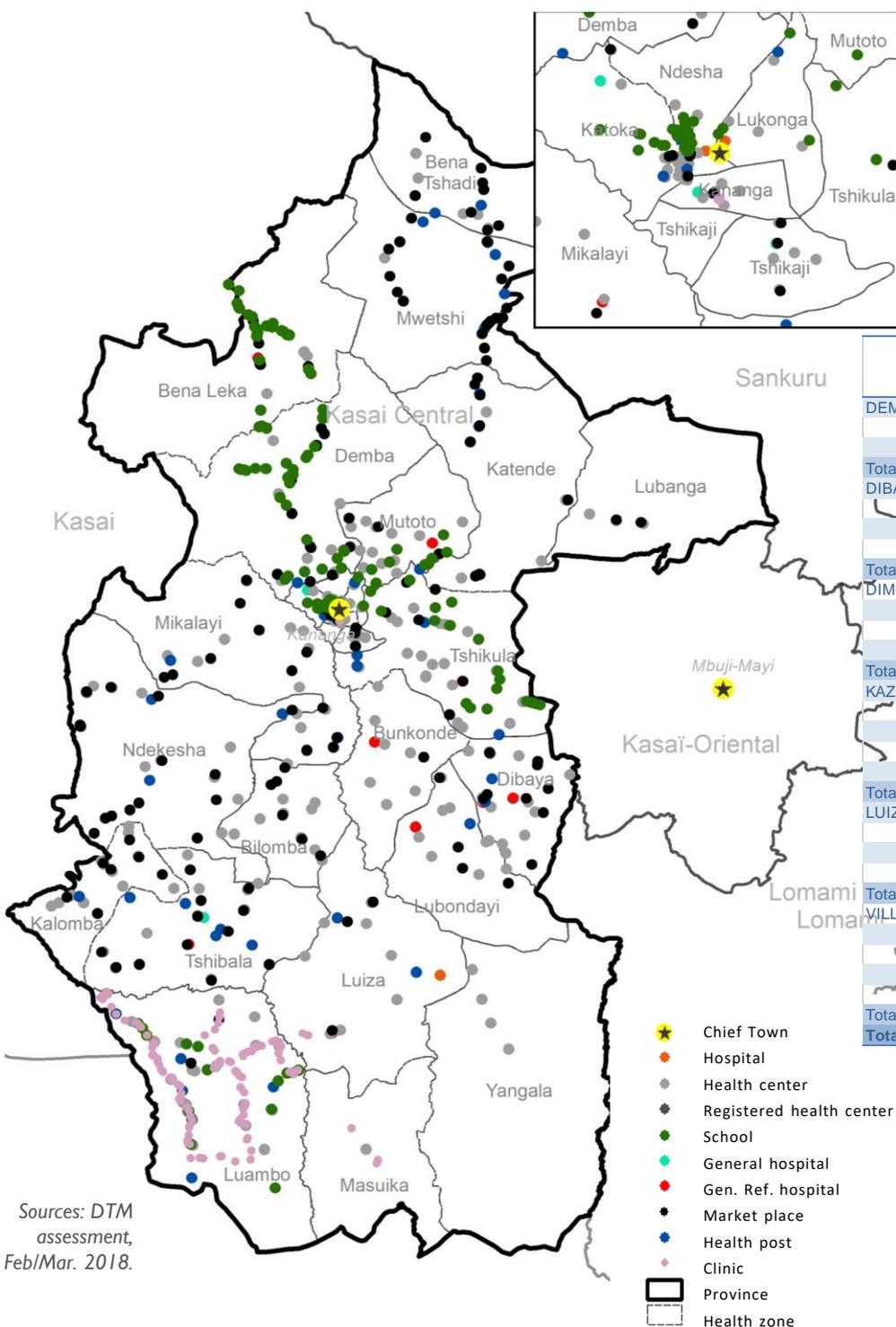
Access to operational health infrastructures

Territory	Health Zone	No	Yes	No information
DEMBA	BENA LEKA	42,2%	51,4%	6,4%
	DEMBA	61,4%	38,0%	0,5%
	MUTOTO	82,5%	17,5%	0,0%
Total DEMBA		63,3%	34,9%	1,9%
DIBAYA	BUNKONDE	72,4%	25,2%	2,4%
	DIBAYA	52,5%	35,8%	11,7%
	LUBONDAIE	61,3%	35,3%	3,4%
	TSHIKULA	65,7%	33,7%	0,6%
Total DIBAYA		63,3%	32,6%	4,1%
DIMBELENGE	BENA TSHIADI	34,0%	66,0%	0,0%
	KATENDE	37,0%	63,0%	0,0%
	LUBUNGA	40,0%	58,0%	2,0%
	MUETSHI	34,0%	66,0%	0,0%
Total DIMBELENGE		35,7%	64,0%	0,3%
KAZUMBA	BILOMBA	57,3%	41,6%	1,1%
	KALOMBA	69,6%	30,4%	0,0%
	MIKALAYI	48,6%	49,7%	1,6%
	NDEKESHA	42,2%	56,9%	0,9%
	TSHIBALA	45,7%	54,3%	0,0%
Total KAZUMBA		50,3%	48,9%	0,8%
LUIZA	LUAMBO	57,0%	42,5%	0,5%
	LUIZA	49,0%	51,0%	0,0%
	MASUIKA	34,3%	65,7%	0,0%
	YANGALA	67,2%	30,4%	2,4%
Total LUIZA		54,8%	44,4%	0,8%
VILLE KANANGA	KANANGA	6,7%	93,3%	0,0%
	KATOKA	32,4%	64,7%	2,9%
	LUKONGA	49,2%	50,0%	0,8%
	NDESHA	44,4%	50,0%	5,6%
	TSHIKAJI	8,9%	91,1%	0,0%
Total VILLE KANANGA		27,2%	71,5%	1,3%
Total average		**50,2%**	**48,2%**	**1,6%**

The majority of the villages, which corresponds to 50 %, does not have access to an operational health structure, either health post, health center or general hospital. These rates are particularly high in the most affected zones of the province (Kazumba, Dibaya, Demba).

- No information — 2%
- No — 50%
- Yes — 48%