

*COVID-19 impacts amid prolonged conflict drive unprecedented assistance needs*

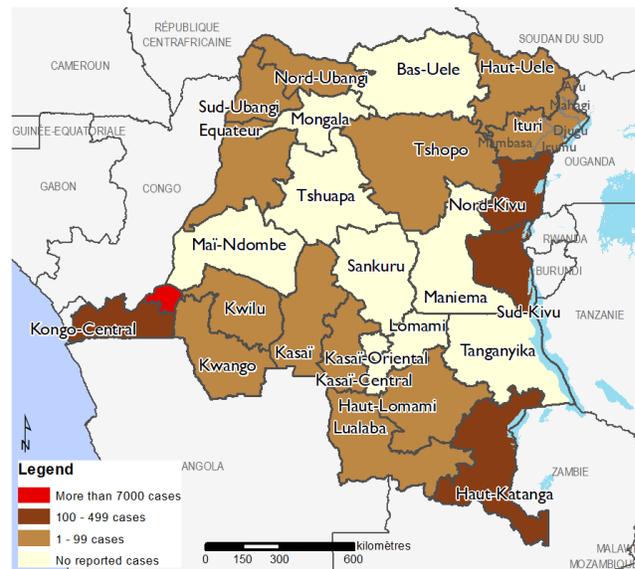
COVID-19 appeared in the Democratic Republic of the Congo (DRC) amid multiple crises, including armed conflicts that have displaced over 5 million people in the past two years. In addition to the direct impacts of the COVID-19 pandemic, restrictions put in place to contain the spread of the virus have also negatively affected poor households' access to income. This, coupled with above-average prices resulting from the toll of the pandemic on DRC's economy, has restricted poor households' capacity to purchase sufficient food to meet their needs. Overall, the population in Crisis (IPC Phase 3) or worse in DRC through the remainder of 2020 is expected to remain significantly higher than the average in recent years, with needs expected to peak during the atypically long September to November lean season.

To curb the spread of the pandemic, the government of the DRC enacted a state of emergency in mid-March that included international and provincial border closures, curfews, and the closure of businesses and schools. The first case of COVID-19 was reported on March 10, 2020 and by August 10, there were 9,453 confirmed cases across more than half (17) of the country's provinces (Figure 1). However, testing capacity remains low and the true number and spread of cases is likely greater. On July 22, the president announced the lifting of the state of emergency and a phased easing of movement restrictions, with businesses, schools, and international borders all reopened by August 15. Despite this, poor households' access to food and income has been notably impacted by the previously enacted restrictions, and access to income is expected to remain constrained as demand remains low for many of the income-generating activities through which poor households typically earn income.

Poor households in both urban and rural areas, in particular poor households along DRC's borders with Uganda, Rwanda, Burundi, Tanzania, Zambia, and Angola, have lost key sources of income due to declining demand for informal labor and reduced ability to engage in informal trade, which are typical income-generating activities for poor households in these areas. Formal cross border trade is still permitted, and the aggregate volumes imported have not been severely affected in most areas, ensuring food availability at most main markets. However, informal cross border trade activities have declined along many border-crossing points. Poor farmers across DRC have also been negatively impacted by COVID-19 restrictions, as border closures have limited trade flows of agricultural inputs, which are normally imported from neighboring countries. This is expected to result in decreased area planted, fewer agricultural labor opportunities, and overall below-average Season B production, the main season in northeastern and central-eastern DRC. Furthermore, domestic trade between the country's rural and urban areas has slowed, making it difficult for some farmers in rural areas to sell their goods, resulting in lower income from crop sales than is typical.

The COVID-19 pandemic has also had macro-level economic impacts, which have secondary effects for poor households' food access. Remittances sent by the Congolese diaspora, which normally bring nearly 1.5 billion USD annually to the DRC, have decreased with the recent contracting of the global economy, further lowering the incomes of poor households throughout the DRC. The country is also facing foreign currency shortages due to reductions in exports (coffee, tobacco, cacao, and industrial metals) due to movement restrictions and reduced global demand. Together these have led to lower government revenue and contributed to a 14 percent depreciation of the CDF, from 1,850 CDF/USD in April to 2,050 CDF/USD by the end

**Figure 1.** Confirmed cases of COVID-19 in the DRC as of August 10, 2020



Source: FEWS NET with data from Ministère de la Santé RDC

of June. This has in turn increased the prices of imported goods that the DRC is structurally dependent on. Maize prices in Kinshasa as of July remain nearly 80 percent higher than the prices reported in February.

The COVID-19 pandemic and its indirect impacts represent a further shock in DRC, in addition to the protracted conflict in the eastern half of the country, localized flooding, and large-scale health crises, including Ebola, measles, and cholera. Unlike conflict and flooding, which have caused significant population displacement, COVID-19 restrictions have confined populations, restricting their mobility, limiting their ability to find alternative or additional income and food sources. Movement restrictions have also negatively affected the movement and response capacity of humanitarians to some parts of the DRC, as necessary social distancing measures have increased the time needed for assistance operations, thereby delaying some distributions.

The indirect impacts of COVID-19 have reduced the incomes of poor urban and rural households nationwide, particularly among those working in the informal sector, resulting in decreased household purchasing power and limiting their access to food. In addition, the Congolese health system, already strained by the needs of the ongoing Ebola, cholera, and measles outbreaks, is being pushed to its capacity as the number of COVID-19 cases increases. Despite the easing of COVID-19 related restrictions and the reopening of the Congolese economy, poor households are expected to continue facing difficulty meeting their food needs in the near term as demand remains low for the activities through which they generate income. Overall, a significantly higher population in DRC is expected to need humanitarian food assistance in 2020 compared to recent years, with needs peaking during the 2020 lean season in northeast and east-central DRC, which is expected to start atypically early in September and end in November. Areas of greatest concern include those that were already in Crisis (IPC Phase 3) in eastern and southern areas of the country - including the Kasai region, and Tanganyika, Sud-Kivu, Nord-Kivu, and Ituri Provinces - and in urban and rural areas along borders.