

“We have abandoned them.”





The Women's Refugee Commission (WRC) improves the lives and protects the rights of women, children, youth, and other people who are often overlooked, undervalued, and underserved in humanitarian responses to displacement and crises. We work in partnership with displaced communities to research their needs, identify solutions, and advocate for gender-transformative and sustained improvement in humanitarian, development, and displacement policy and practice. Since our founding in 1989, we have been a leading expert on the needs of refugee women, children, and youth and the policies that can protect and empower them.

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## ACKNOWLEDGEMENTS

This report was conceptualized and co-authored by Oricia Ngenyibungi, Julianne Deitch, and Sadia Kidwai. Data collection was led by Jolie Koko Kabuye with support from Oricia Ngenyibungi. Kellie Leeson and Melanie Nezer provided review and additional input. The report was copyedited by Rebecca Waer and designed by Jon Garr.

WRC extends special gratitude to Every Woman Treaty for support in reaching focal points of women-led organizations and to the following organizations for participating in key informant interviews: Marchons Ensemble et Surement dans L'Assistance Scolaire et Humanitaire (MESAS), Action Sociale pour le Developpment Rural et Urbain (ASDERU), Action Pour La Justice, Paix et le Developpment Endogene (AJPDE), Solidarite Des Femmes Pour Le Developpment Integral (SOFEDI), Women for Equal Chances Congo (WEC-CONGO), Action Social Pour la Promotion des Droits Humains (ASPDH) and Action de la Femme pour le Developpment (AFEDEV). WRC is especially grateful to the ten women who shared their stories with us.

This research and report were made possible in part by the generous support of an anonymous donor. We are grateful for their commitment to advancing this work.



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# EXECUTIVE SUMMARY

## BACKGROUND

Since early 2025, the Democratic Republic of Congo (DRC) has seen an escalation of violence against the backdrop of a broader, decades-long conflict. Amid this resurgence, more than 7 million people in North and South Kivu are now internally displaced, and approximately 25 million people nationwide depend on humanitarian aid for survival. Decades of instability in the DRC have taken an especially heavy toll on the health and well-being of women and girls; sexual and gender-based violence (SGBV) is a defining feature of the conflict, and women and girls have historically had limited access to healthcare, disrupted education, and entrenched cycles of poverty.

The complex challenges of the DRC's escalating humanitarian situation have been further compounded by the sudden cuts in US foreign assistance in January 2025. In 2025, the US government committed just \$64.3 million, comprising 13.6 percent of DRC's humanitarian funding, a dramatic 95 percent decrease from their \$1.2 billion contribution in 2024. This sudden withdrawal has contributed to a massive underfunding of DRC's humanitarian response. The immense challenge of responding to increasing needs with fewer resources is particularly acute for women-led organizations (WLOs), which remain the primary providers of services for women and girls in North and South Kivu.

## RESEARCH OBJECTIVES AND METHODOLOGY

Little is known about how WLOs in the DRC are navigating the convergence of escalating violence, mass displacement, and shrinking humanitarian resources. This research seeks to fill this gap by examining how the dual shocks of renewed conflict and funding withdrawal are affecting the capacity, resilience, and sustainability of WLOs in North and South Kivu and the women and girls they serve.

Data was collected in August 2025 and includes key informant interviews (KIIs) with eight WLOs and storytelling from ten internally displaced women in North and South Kivu. Informed consent was obtained from all participants prior to data collection. Interviews were audio-recorded and transcribed into French for analysis.

## KEY FINDINGS

### 1. Women and girls are experiencing heightened insecurity, continuous displacement, and extreme protection risks.

- The current conflict has led to a continuous and unpredictable pattern of movement for women and girls in North and South Kivu. Women and girls have become “nomads”, and many expressed feeling that nowhere was safe, with a sense of constantly being followed and chased by M23 rebel groups.
- Women spoke about the difficulty in finding stable shelter, emphasizing the immense challenge of constantly moving with their children. Some women reported feeling safer sleeping in the street, and many stayed in strangers' homes in return for providing housekeeping or other domestic labor.
- SGBV remains a defining feature of the conflict, yet formal protection systems have effectively collapsed in North and South Kivu. Interviews documented SGBV survivors as young as six years old and widespread survival sex linked to extreme poverty and family separation.





## **2. Women and girls lack access to essential services.**

- Health systems are collapsing: 85% of facilities lack medicines, 40% are understaffed, and maternal and child health indicators have sharply deteriorated, including a four-fold rise in stillbirths and dramatic drops in vaccination and under-five visits.
- USAID funding cuts have halted key SRH services; rape kits, PEP, vaccines, hygiene kits, and essential supplies are now “almost non-existent,” forcing WLOs to purchase medicines at inflated prices.
- Continuous forced displacement makes it challenging for service providers to respond to women and girls’ ever-evolving needs, and for women and girls to have continuity of services.

## **3. Women and girls are facing acute food insecurity amid economic collapse**

- Interviews revealed severe food insecurity and widespread hunger among displaced populations. Women who once relied on small-scale farming have lost access to their land, and some noted dangers of accessing food from WFP sites.
- Women described how the markets in IDP camps were destroyed, completely wiping out family incomes and livelihood opportunities.

## **4. WLOs are frontline responders and continue to operate in an environment of extreme insecurity.**

- WLOs have evolved their programming in response to women’s changing needs. Participants described their work as multifaceted, spanning sexual and reproductive health and rights, livelihoods, peacebuilding, disability inclusion, and human rights.
- Despite fear and ongoing violence, WLOs maintain a “last to leave” presence rooted in deep community trust, often risking their own safety to deliver support.

## **5. WLOs face continued uncertainty with fragmented and unstable funding.**

- US government funding cuts have triggered project closures, staff layoffs, and severe operational disruptions, leaving WLOs unable to plan or maintain essential services.
- As indirect recipients of donor funding, many WLOs learned of funding suspensions through project intermediaries and face continued uncertainty about future funding, creating confusion, reputational strain, and loss of community trust.
- Long-term, predictable partnerships are virtually nonexistent; organizations describe “seesaw” funding cycles that undermine institutional stability and erode their ability to respond to crises.

## **6. WLOs have a range of urgent priorities.**

- Beyond financial resources, WLOs need basic operational support—transport, communication tools, office space, security measures, and data systems—to sustain even minimal programming amid insecurity.
- Organizations request long-term capacity support (leadership development, M&E systems, staff well-being and trauma support), emphasizing that they are “helping survivors but also survivors themselves.”
- WLOs urgently seek recognition as equal partners in the humanitarian system, calling for direct, flexible funding; meaningful participation in coordination structures; and inclusion in strategic decision-making.



## RECOMMENDATIONS

1. **Ensure the protection of women and girls from all forms of violence.** Armed actors must end the targeting of civilians and the use of sexual violence as a weapon of war. The government of the DRC, humanitarian actors, and donors must invest in infrastructure and services to protect women and girls from violence, and provide specialized care for survivors of gender-based violence. If renewed, the MONUSCO mandate must retain mechanisms which provide specific protections for women and girls.
2. **Ensure safe, sustained, humanitarian access across North and South Kivu to address the specific humanitarian needs of women and girls.** Armed actors must end the targeting of humanitarian actors and infrastructure, remove bureaucratic impediments to humanitarian action, and refrain from intimidation of humanitarian workers. Governments, humanitarian actors, and donors must ensure humanitarian responses address the unique needs of displaced women and girls, and design programs which target women and women-headed households.
3. **Protect, invest in, and support local women-led organizations as critical frontline providers of services and protection for displaced women and girls.** Donors and humanitarian actors must increase funding for local WLOs, and ensure funding is direct, flexible, sustained, and supports the priorities of local communities. Humanitarian coordination mechanisms must include equal and meaningful participation and leadership of WLOs.
4. **Bring a sustainable and just end to the conflict built on the leadership, participation, and rights of women and girls.** All peace processes, diplomatic efforts, and ceasefire negotiations must include the full, equal, and meaningful participation of diverse women and women-led civil society organizations. Peace agreements must include justice and accountability mechanisms for women and girls who have experienced violence and abuse. Governments must end the transfer of weapons which are being used for war crimes or crimes against humanity.





# BACKGROUND

Since early 2025, the Democratic Republic of Congo (DRC) has seen an escalation of violence against the backdrop of a broader, decades-long conflict. The country's protracted crisis is rooted in a complex interplay of colonial legacies, competition over vast mineral resources, and regional geopolitical forces that have fueled cycles of violence since the 1990s (see Box 1). The partial withdrawal of the UN Stabilization Mission in the DRC (MONUSCO) in 2024, combined with a resurgence of armed groups such as the Rwanda-backed March 23 Movement (M23), Congo River Alliance (AFC), and the Ugandan-led Allied Democratic Forces (ADF), has left civilians highly exposed to grave human rights violations.<sup>1</sup>

In January 2025, M23 seized Goma, the largest city in the eastern provinces, representing one of the most significant escalations of the conflict in over a decade. Amid this resurgence, more than 7 million people in North and South Kivu are now internally displaced, and approximately 25 million people nationwide depend on humanitarian aid for survival.<sup>2</sup> The impact of DRC's long-running wars has been devastating: An estimated 5.4 million people died from 1998 to 2007, with some estimates reaching nearly 6 million excess fatalities since 1996.<sup>3</sup>

Decades of conflict in the DRC have taken an especially heavy toll on the health and well-being of women and girls. Since the mid-1990s, sexual and gender-based violence (SGBV) has been a defining feature of the conflict, with experts estimating that more than 22 percent of women and girls in the DRC have experienced conflict-related sexual violence (CRSV).<sup>4</sup> Between 2010 and 2013, among reported cases of sexual violence documented by the UN Joint Human Rights Office, 73 percent of victims were women and 25 percent were girls.<sup>5</sup> These figures likely understate the true magnitude, as many cases go unreported due to shame, fear of retribution, lack of access to services, and impunity for perpetrators. Beyond immediate physical and psychological harm, survivors of SGBV in the DRC often face stigma, rejection, and long-term social and economic exclusion, leading to long-term, intergenerational consequences.<sup>6</sup>

Successive waves of conflict in North and South Kivu have destroyed critical infrastructure, worsening health outcomes for women and girls.<sup>7</sup> Looted health facilities, displaced health workers, and chronic underinvestment over nearly 40 years have left entire populations without reliable access to care. Studies have found that indirect causes of death such as malaria, diarrhea, malnutrition, and maternal complications far outpaced direct conflict-related casualties during the First and Second Congo War.<sup>8</sup> For women and girls, this has meant persistently high maternal mortality, poor reproductive health outcomes, and limited access to safe childbirth or emergency care, problems that remain entrenched in the region's fragile health system.<sup>9</sup>

At the same time, the armed conflict in the DRC has disrupted education and livelihoods, particularly for girls and women. Armed actors frequently attack, occupy, and close schools in North and South Kivu, depriving generations of children of learning opportunities and reinforcing gender gaps in literacy and educational attainment.<sup>10</sup> Women's economic activities have been undermined as markets collapse, land is seized, and displacement forces reliance on precarious coping strategies. Over time, these dynamics have entrenched cycles of poverty and vulnerability, leaving women and girls in North and South Kivu at the intersection of violence, displacement, poor health, and economic insecurity.



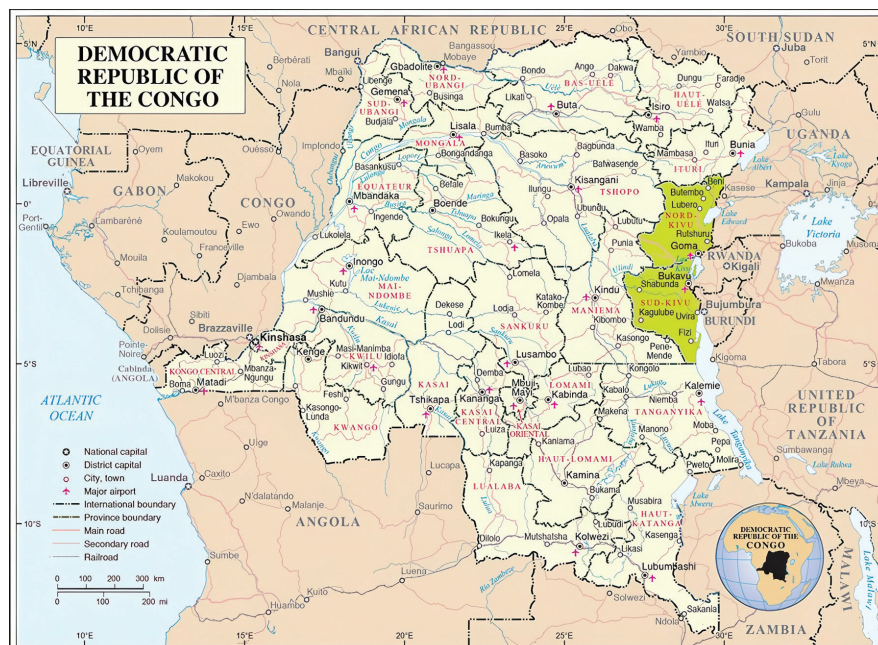
## ESCALATING CONFLICT AND SLASHED FUNDING: A CONVERGING CRISIS FOR WOMEN AND GIRLS

In the face of rampant violence and instability, local civil society organizations (CSOs), women's rights groups, and humanitarian actors have played an indispensable role in supporting women and girls in North and South Kivu. With government-provided services continuously under-resourced and disrupted, humanitarian organizations have historically faced immense pressure to provide essential services to people in dire need. Despite ongoing security risks and operational constraints, organizations have long been filling huge gaps to deliver emergency medical and psychosocial care, support SGBV survivors with legal aid and protection services, provide food and shelter to displaced populations, and advocate for recognition, accountability, and resources for women and girls.<sup>11</sup>

The complex challenges of the DRC's escalating humanitarian situation have been further compounded by the sudden cuts in US foreign assistance in January 2025. Prior to 2025, US funding to the DRC had steadily increased. The US provided approximately one-third of all humanitarian funding to the DRC between 2016 and 2018; 50 percent between 2019 and 2023; and more than 70 percent in 2024. In 2025, the US government has committed just \$64.3 million, comprising 13.6 percent of DRC's humanitarian funding, a dramatic 95 percent decrease from \$1.2 billion in 2024. This sudden and dramatic withdrawal of funding has contributed to a massive underfunding of DRC's humanitarian response. As of October 2025, the DRC's Humanitarian Response Plan, which is intended to provide aid to 8.7 million people - a fraction of the 25 million in need in the country - was just 16.5 percent funded.<sup>12</sup> The result has been a massive contraction in aid, with local actors struggling to sustain life-saving services amid escalating insecurity.

The immense challenge of responding to increasing needs with fewer resources is particularly acute for women-led organizations (WLOs), which remain the primary providers of services for women and girls in North and South Kivu. A survey by UN Women found that, globally, WLOs have been disproportionately impacted by funding cuts. Almost 50 percent of WLOs expect to shut down within six months if funding is not restored.<sup>13</sup> While global evidence highlights the disproportionate impact of funding cuts on WLOs, little is known about the impact in the DRC as escalating violence, mass displacement, and shrinking humanitarian resources converge. Our research seeks to fill this gap by examining how the dual shocks of renewed conflict and funding withdrawal are affecting the capacity, resilience, and sustainability of WLOs in North and South Kivu and the women and girls they serve.

**FIGURE 1: MAP OF DRC AND SURROUNDING REGION**





## BOX 1: HISTORICAL OVERVIEW

<b>1960</b>	Congo gains independence from Belgium.
<b>1965</b>	Mobutu Sese Seko seizes power in a coup, establishes a dictatorship, and renames the country Zaire.
<b>1996- 1997</b>	First Congo War: Rwanda and Uganda back Laurent-Désiré Kabila in overthrowing Mobutu; Zaire becomes the Democratic Republic of Congo (DRC).
<b>1999</b>	Signing of the Lusaka Ceasefire Agreement between the DRC and five regional States (Angola, Namibia, Rwanda, Uganda and Zimbabwe). The UN Security Council establishes the UN Organization Mission in the DRC (MONUC) to observe the ceasefire and disengage forces.
<b>2003</b>	Official end of Second Congo War with peace deals; foreign armies withdraw, but armed groups (FDLR, Mai-Mai, ADF) remain in the eastern provinces.
<b>2006</b>	DRC holds first democratic elections; Joseph Kabila elected president; violence continues in eastern provinces.
<b>2010</b>	The UN Security Council renames MONUC the United Nations Organization Stabilization Mission in the Democratic Republic of the Congo (MONUSCO), mandated to protect civilians and humanitarian personnel and support stabilization and peace consolidation efforts.
<b>2012- 2013</b>	Rwanda-backed M23 Rebellion captures Goma; later defeated by Congolese forces and first-ever offensive UN intervention.
<b>2016- 2018</b>	Joseph Kabila refuses to step down at end of constitutional term; mass protests and violent crackdowns.
<b>2018</b>	Félix Tshisekedi wins presidential election.
<b>2021 to 2022</b>	M23 resurfaces in North Kivu, citing government failures to uphold past peace deals.
<b>January-February 2025</b>	Ceasefire fails; M23 captures Goma (January 31) and Bukavu (February 16) from the DRC Armed Forces (FARDC).
<b>February 2025</b>	UN Security Council adopts Resolution 2773 (2025) calling for an immediate ceasefire, the withdrawal of M23/AFC forces from occupied territories, the protection of civilians, and unhindered humanitarian access.
<b>June-July 2025</b>	Qatari-mediated Doha Declaration of Principles signed by Government of the DRC and M23/AFC forces; US-brokered Peace Agreement between DRC and Rwanda, referred to as the Washington Accord, calling for the withdrawal of the Rwandan Defence Force (RDF) and for the Congolese government to end its support for the Democratic Forces for the Liberation of Rwanda (FDLR) militia.

# METHODOLOGY

This study used a qualitative research approach to understand the impact of the resurgence of violence and US funding cuts on women, girls, and WLOs in North and South Kivu, DRC. Data collection included key informant interviews (KIIs) with eight WLOs and storytelling from ten internally displaced women in North and South Kivu.

WLO participants were identified through local networks of NGOs and were selected to represent a range of different types of programs and services in both urban and rural areas in North and South Kivu. WLOs were eligible for participation if they were a local organization led by a woman; WLOs who reported previous funding from the US Government (USG) were prioritized for participation. Data from WLOs was collected through semi-structured interviews, conducted in French, both in-person and virtually.

Women participants were identified by select WLOs. Women were eligible for participation if they had previously received services from a WLO and were currently displaced. Women were selected to represent a diversity of ages, marital status, and place of residence. Data was collected using the Gender in Emergencies Group storytelling tool, which consists of open-ended questions to allow the women to raise issues that are important to them during the conversation. All conversations took place in person at the desired location and discretion of each individual woman. Interviews with women were conducted in Swahili.

Informed consent was obtained from all participants prior to data collection. Interviews were audio-recorded and transcribed into French for analysis. Thematic analysis was conducted by the research team to identify key themes across both sets of data which later informed the narrative in this report.

## LIMITATIONS

This study faced several important limitations. Due to ongoing insecurity, displacement, and limited staff capacity, some WLOs were unable to participate, particularly those operating in the most remote or conflict-affected areas. As a result, most organizational participants were based in urban or semi-urban settings, which may not fully reflect the experiences of WLOs working in hard-to-reach or frontline communities. In addition, some organizations may have been hesitant to discuss sensitive details regarding their financial status or funding relationships, given the precariousness of their operating environment. Although the research team took care to conduct interviews with women in safe and confidential spaces, the sensitivity of participants' experiences and the trauma many continue to endure may have limited what they felt comfortable sharing with the research team. Despite these limitations, the insights gathered provide a critical window into the realities facing women and WLOs in North and South Kivu.





# IN HER OWN WORDS: FLEEING FROM 14 VILLAGES TO FIND SAFETY

I don't remember the date, but I remember the month, I moved from Katale to Kahe, from Kahe to Mahindo, from Mahindo to Kashari, from Kasarhi to Burungu, from Burungu to Gandijo. We fled the M23 war which came to our home and there was intense crackling of bullets. From there again we moved from Gandijo to Bibatama.

The war was intense. We left the vehicle with all our belongings and we fled with the FARDC soldiers. We arrived at Karuba and there we were now looking for food for the children so that they could eat because since we had started to flee the children had not yet found anything to eat. After the vehicle joined us again we went up to Bambiho, where we spent the night, and in the morning we continued the road to Keshero where someone gave me somewhere to live.

Life was not easy and without anything to give to the children, I left this family to go and settle in the Rusayo Camp in Goma. I had spent a few months there and I began to benefit from aid. Suddenly the M23 war arrived again in Goma and the camp was bombed. I had gone to look for sweet potatoes to sell - when I arrived at the house I found that everyone was crying that I had died in this bombing. I found several people dead, but God spared me and my family.

We moved towards the Birere neighborhood and there too it did not work. We returned again to Bambiho, there also it did not work with intense crackling of gunshots, and we locked ourselves in the house, where the famine almost killed us. Those who had the strength went to destroy the doors of the WFP warehouse to get flour, beans and palm oil but I was afraid to go there because many people lost their lives there - especially pregnant women and children.

On our side, we bought food from the WFP in exchange for other goods - [for example] I would give him an empty 20 liter can, and he would give me a measure of flour, so that I could also find something to eat with my children. Where we were going to buy sweet potatoes, the M23 soldiers destroyed everything because according to them, if there is food left in the fields, the FARDC soldiers will stay there and their families. That is how they removed everything that was growing in the fields (potatoes, sweet potatoes, beans, cassava).

We learned that in Kibati there is an organization which is helping displaced women who have been raped and others at risk of GBV and SEA in cutting and sewing, weaving baskets and baking. I am in the baking group. I wanted to learn cutting and sewing but I arrived too late. This organization helps us overcome all these events and also supports us psychologically. When I find myself among other women, when we learn baking together, I feel good and relieved because they even give us food here. I started to run away since October 2024. This is how I live here in Rukoko.

Note: The names of villages have been changed for women's anonymity and protection. Testimonies have been condensed for length and clarity.

# FINDINGS

## IMPACT OF THE RESURGENCE OF VIOLENCE AND US FUNDING CUTS ON WOMEN AND GIRLS

### WOMEN AND GIRLS ARE EXPERIENCING HEIGHTENED INSECURITY AND CONTINUOUS DISPLACEMENT

*"This is a big problem because even before the conflict, displaced girls were living in displacement camps, and now, with the war, these camps have been dismantled. So they have also left the camps, they have become wanderers. I can say that they have become displaced and nomads at the same time." - WLO Representative*

The recent resurgence of violence in DRC has forced women and their families into a cycle of displacement as they are constantly on the move in search of safety. Displacement has been an ongoing challenge in the region for decades, yet the current conflict has led to a more continuous and unpredictable pattern of movement. In February 2025, M23 armed groups unlawfully ordered hundreds of thousands of displaced persons to leave IDP settlements in Goma and other parts of North Kivu before destroying and dismantling all 28 IDP camps in the region. This resulted in an unprecedented level of re-displacement, with 900,000 displaced persons forced to relocate from IDP camps in North Kivu.<sup>14</sup> As of July 2025, nearly 3 million people were newly displaced across North and South Kivu provinces, with an additional 2.8 million IDPs attempting to return to their places of origin. Among both newly displaced individuals and those returning, 60 percent are female, and over one-third are children.<sup>15</sup>



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The scale and nature of current displacement in North and South Kivu is reflected in women's testimonies and interviews with WLOs. Some women noted that, after being forced from IDP camps, they tried to return to their villages of origin only to find their homes either destroyed or occupied. Some noted that their villages were not safe to return to due to the presence of M23 armed groups. As one woman explained:

*"Because of the M23 war... we started to move since 2022, leaving our villages here in Goma. We no longer live in the displaced persons camps because since the arrival of the M23 rebels, we left the camps and we are now with host families. We can no longer return to our villages because that is where [M23 rebels] still are."*

Women also spoke about the difficulty in finding stable shelter, emphasizing the immense challenge of constantly moving with their children. Some women reported feeling safer sleeping in the street, and many stayed in strangers' homes in return for providing housekeeping. One woman explained, *"We used to live in abandoned schools, then we moved again and now we live on the streets and that's where we spend the night."* Another said, *"We sleep like mice, we put out the fire and tidy up the kitchen to find somewhere to sleep, sometimes I, the mother, don't sleep because I don't have anywhere to lean."*



Continuous forced displacement has severely impacted women's lives, making it incredibly challenging for program and service providers to respond to their ever-evolving needs. One WLO representative explained how needs assessments are not helpful given how rapidly women and girls' situations are changing:

*"Now, we have women sleeping outside with their children. They don't have shelter. The houses have been destroyed. That has increased their vulnerability, and it changes their profile. A woman who was married became a widow, a teenager who was a daughter became a mother, a woman who was a worker became unemployed, you see? That's the complexity of all this."*

The destruction of IDP camps has been particularly devastating for displaced women. According to displaced women and WLOs, camps not only provided safe shelter for women and their families but also served as an ecosystem with social and community support that improved their quality of life. The centralized availability of resources and humanitarian personnel in the camps also ensured that displaced households had access to food rations, health care, and education. Without a centralized hub for humanitarian assistance, women now must figure out how and where to access services while constantly on the move. As one WLO representative described:

*"When you start providing care, they're in a situation where they're in a camp and they start receiving care where they are. And then, if there's fighting between the two sides, they can't stay where they are. They have to take refuge where they'll be safe. So she moves. And when she moves like that, imagine. And then, they come and go, there are gynecological problems, and then she moves. After that, it becomes complicated, it becomes really complicated."*

## **WOMEN AND GIRLS ARE EXPOSED TO EXTREME PROTECTION RISKS**

Continuous displacement and instability have exposed women and girls in North and South Kivu to extreme protection risks. SGBV remains a defining feature of the conflict in DRC, used as a weapon of war, a tool of control, and an expression of systemic impunity. The impact of SGBV on women and girls is exacerbated by the recent erosion of humanitarian services. According to UNFPA, in early 2025, nearly 500 cases of sexual violence were reported in a single week in the Goma area, including more than 150 involving children, likely representing only a fraction of actual incidents. MSF reported treating over 7,400 survivors of sexual violence in Goma between January and April 2025. While documented cases surged, in April 2025, UNFPA reported a funding shortfall of \$35.5 million, jeopardizing life-saving health and protection services for women and girls.<sup>16</sup>



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Interviews with women and WLOs confirmed that protection needs are intensifying while formal protection systems have effectively collapsed. Many women expressed feeling that nowhere was safe, with a sense of constantly being followed and chased by M23 rebel groups. According to women who shared their experiences of M23 attacks in early 2025, invasions consistently started at 4am, with targeted killings of men in plain sight of families and children. Girls as young as 6 years old were taken to the M23 bases and raped, and girls who resisted were killed. Women and children fled their homes and villages were burned, including fields and crops. One woman recounted:

*"The war started at 4am and we fled, there were deaths, wounded people, lost children. And the girls were raped, they took us by force and brought us to their office to be raped and killed, the stubborn girls were killed. And destroyed the remaining houses, stole our cattle."*

Physical attacks by M23 rebel groups were well-calculated to separate children from their families and create vulnerable, female-headed households.<sup>17 18</sup> *"Many of these women are now female heads of household. Because many of them, as you know ... in Kabare, men are killed a lot,"* explained one WLO representative. These realities force women and adolescent girls into exploitative and dangerous situations as they struggle to survive. A 19-year-old displaced girl shared:

*"In this camp, I got pregnant ... I have neither father nor mother. I have a child now, and sometimes I do things I shouldn't - sleep with men who offer food for my baby. I know I risk illness, but I can't watch my child suffer."*

Such testimonies echo broader patterns observed by humanitarian agencies documenting "survival sex" and child exploitation among displaced populations. As one WLO representative put it, *"They didn't choose. They were forced to live through sex and survival. Many young girls are now single mothers, others pregnant, and others pushed into early marriage because of poverty."* One woman explained that, after the death of her parents, she found herself in an IDP camp, where she became pregnant. Now with a young child, she is forced into high-risk activities in order to feed her child:

*"I can't bear to see my child suffer and I find a man who will give me 5000fc (1.7\$) and refuse while the child has nothing to eat, I... have to... um (cries) do it even if I don't like what I'm doing, I sleep with men who offer me food for my baby and I understand that, I am certain that I am exposed to many risks of illness."*

Every organization interviewed in this study was engaged in SGBV prevention or response, underscoring how entrenched and widespread needs are among women and girls in North and South Kivu. Despite these needs, these organizations face critical funding and access constraints. Many safe spaces, legal clinics, and medical centers have been destroyed or closed due to insecurity, while humanitarian corridors remain blocked. As one WLO explained, *"We cannot reach women in need; even when the funds exist, we cannot move."* While most organizations highlighted the disruption of health services for SGBV survivors, others pointed to the closure of legal clinics. *"We had 19 legal clinics. Now they are closed. Several cases remain unresolved. Several perpetrators are on the run."*



## WOMEN AND GIRLS LACK ACCESS TO ESSENTIAL SERVICES

The current conflict has had an alarming impact on an already weakened health system. A recent assessment conducted by ICRC found that 85 percent of all health facilities in North and South Kivu are experiencing medicine shortages and nearly 40 percent are inadequately staffed due to an exodus of healthcare workers.<sup>19</sup> Limited access to medical facilities is especially acute for pregnant women and women with young children. In the first quarter of 2025, health facilities in North and South Kivu saw a four-fold increase in the number of stillbirths, a 50 percent reduction in the number of visits for children under age 5, and fewer than half the number of children vaccinated.<sup>20</sup> Limited access to health facilities is compounded by funding shortages, with more than 80 percent of facilities now receiving no support from humanitarian partners.<sup>21</sup>

Across nearly every interview, both WLO representatives and affected women described the collapse of basic health infrastructure and the disruption of care. As one WLO representative summarized, *“Women’s priorities have been really disrupted because there has been a disruption in access to care, especially for women and girls ... even our doctors, nurses, all the health workers in the villages were forced to leave their usual areas and move.”* WLO staff confirmed that maternal mortality was rising due to the lack of medicines, reproductive health supplies, and trained staff. One organization explained:

*“There are many maternal deaths... the shortage of medicines and medicine stocks in hospitals has become terrible, and there is an increase in the mortality rate of women. There has been a large number of deaths.”*

The termination of USAID support has had an especially devastating impact on sexual and reproductive health (SRH) services. One WLO representative noted, *“There are no rape kits in the hospital ... that’s the biggest challenge in the fight. More than 2,000 victims don’t have access to kits.”* Similarly, critical supplies such as PEP (Post-Exposure Prophylaxis) kits, tetanus, and hepatitis vaccines are *“almost non-existent,”* forcing organizations to buy medicines from private pharmacies at inflated prices. Another WLO worker said, *“There is no organization to distribute intimate hygiene kits for women and girls,”* describing this as emblematic of the systemwide regression in women’s services.

For many displaced women, the health crisis has extended beyond hospitals and service delivery to encompass every aspect of women’s daily lives. Displacement and prolonged insecurity have eroded women’s mental and psychosocial health. Many women and girls have witnessed killings, sexual violence, or the destruction of their homes and livelihoods. One woman shared, *“My feet are sick, and even my head is bothering me, but I don’t know what to do for this 10th child and my grandson.”* Another added, *“I have nowhere to live and my children have nothing to eat and do not study, many difficulties and sufferings that make me sad.”* WLO staff also described the psychological burden of listening to women’s stories without having the means to help. *“We have nothing to offer but words,”* one said.





# IN HER OWN WORDS: CARRYING THE TOLL OF HER PARENTS' DEATH AND THE RAPE OF HER 7-YEAR-OLD SISTER

I am 19 years old and studied up to the second year of secondary school. I have been moving since October 2024, when we left Bambiro and we settled here in Rukoko. During the invasion, my mother was shot as we were fleeing. Our big sister came to tell us: mom was shot, and she died on the spot. We had no way to transport her body along with all our luggage. We organized a mourning for mom, then after a month, my father also died. I don't know if it is because he was thinking too much about the war and about mom.

My little sister was raped. She was 7 years old, now she is 8. Several girls were rape... if you were there, imagine seeing a girl who comes to tell you that she was raped. There was a hospital that treated all these victims, I don't remember the name, but it was just a tent, set up in the IDP camp. My sister was treated there, too.

Now we are living with our big brother and his wife, but they no longer have work. My sister-in-law used to sell fish in the camp market, which was destroyed by the M23. After the camp was destroyed, my older brother rented a small house and that's where we all live with my older sister and our older brother's family. There are 9 of us in the family.

The needs are enormous, especially for finding work and going to school. Like me, for example, if I could just find someone who would help me with my studies, I could go back to school. Or if I could find some money and sell some things, I could use the money to go back to school.

Note: The names of villages have been changed for women's anonymity and protection. Testimonies have been condensed for length and clarity.

## WOMEN AND GIRLS ARE FACING ACUTE FOOD INSECURITY AMID ECONOMIC COLLAPSE

Displacement, looted markets, and destroyed farms have resulted in the collapse of livelihoods, pushing many households further into chronic poverty. As of early 2025, nearly 28 million people across the DRC are facing acute food insecurity (IPC Phase 3 or worse), including 3.9 million people experiencing emergency levels of hunger (IPC Phase 4). Of those experiencing emergency levels of hunger, one million are in North Kivu.<sup>22</sup> Nearly half of all people in North Kivu and over 30 percent of those in South Kivu face acute food insecurity, with the majority forced to reduce meal sizes or skip meals. For women and girls, who absorb the disproportionate burden of both care work and income generation, this crisis signals the deepening entrenchment of poverty and the evaporation of economic pathways.



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Interviews revealed severe food insecurity and widespread hunger among displaced populations. One WLO participant explained that women who once relied on small-scale farming have lost access to their land:

*"The fact of abandoning their lands is what meant that they do not have access to basic food ... Now that women have moved and do not have access to land, they do not have access to food. This would increase cases of malnutrition in the rural areas."*

A woman explained how she resorted to exchanging goods to feed her family. *"We bought food from the WFP in exchange for other goods - I had to give an empty 20-liter can for a measure of flour so that I can find something to eat for my children."* A displaced woman echoed this reality, noting the dangers of accessing food from WFP:

*"The famine almost killed us ... those who had the strength went to destroy the doors of the WFP warehouse to get flour, beans, and palm oil ... I was afraid to go there because many people lost their lives there, especially pregnant women and children."*

Household economies that once relied on petty trade, salaried work, or cultivation have unraveled. Women described how the markets in IDP camps were destroyed, wiping out family incomes. *"We were living with our big brother and his wife... they no longer have any occupation because it is the camp market which was destroyed ... where my sister-in-law sold fish."*

One woman displaced to Bukavu recounted:

*"To tell the truth, life is too complicated here in Bukavu, I don't have a job, I walk the avenues of the city to see if there is someone who will do the laundry, I ask them for money to do it, where there are construction sites, I transport the sand but it is not easy."*

WLOs also described a broader labor-market collapse. *"Women who worked in NGOs ... are unemployed; women who ran small businesses ... have lost their property due to looting ... microfinance institutions [are] closed."* For many displaced families now sheltering in unfinished buildings, even informal rent demands are untenable. *"If each displaced family can get at least ten dollars ... they can live there ... but how to find the \$10?"* The desperation for income and safe shelter may result in high-risk activities for women, as one WLO representative observed:

*"Many women have become heads of household. They don't have fields in Bukavu. They don't have income-generating activities. Well, when a man passes by and he offers her a 5,000 francs deal, and the woman who is watching her children starve to death who have already gone three or four days without eating, her children are at risk of becoming street children. These women have no choice."*





# IMPACT OF THE RESURGENCE OF VIOLENCE AND US FUNDING CUTS ON WOMEN-LED ORGANIZATIONS



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## WOMEN-LED ORGANIZATIONS ARE FRONTLINE RESPONDERS

*"[Our work] does not fit in a box or sector, instead it is driven by what women's needs are on an evolving basis." -WLO Representative*

Across North and South Kivu, WLOs continue to play a vital role in providing essential services to women and girls despite escalating insecurity and shrinking resources. Research participants described their work as multifaceted and deeply community-rooted, spanning sexual and reproductive health and rights (SRHR), livelihoods, peacebuilding, disability inclusion, and human rights.

As one WLO explained, *"We touch on everything - health, education, and peace - because women's lives don't fit into one program."* Rather

than adhering to narrow sectoral mandates, most WLOs have evolved their programming in response to women's changing needs, particularly amid rising insecurity and fluctuating funding. Several WLOs described adapting their programming to include informal support groups, mobile counseling, and community dialogues to reach people affected by displacement.

WLOs often serve as first responders in their communities, providing services for survivors of SGBV and psychosocial support, and coordinating emergency referrals when larger agencies are unable to reach affected populations. A representative of an organization in North Kivu noted, *"Even when others left, we stayed... we were the only ones to provide help when people fled the fighting."* Another participant emphasized that *"we are the first to arrive and the last to leave,"* underscoring their unwavering commitment to their communities. WLO participants emphasized their deep connection and accountability to the communities they serve. As one respondent explained, *"We are part of the population, so women come to us because they know us and trust us."*

## FUNDING FOR WOMEN-LED ORGANIZATIONS IS FRAGMENTED AND UNSTABLE

For decades, humanitarian and development financing in the DRC has been characterized by fragmentation, short-term cycles, and heavy dependence on external donors, conditions that have undermined the stability and sustainability of local organizations. For WLOs in North and South Kivu, this has created deep uncertainty and institutional fragility.

In February 2025, OCHA conducted a rapid survey of humanitarian organizations to assess the impact of the USG funding freeze. Of the 31 national NGO respondents from DRC, 20 received stop work orders directly, and none received waivers for provision of lifesaving care. A second round of data collection in April 2025 revealed that 75 percent of national NGO respondents in DRC received a notification of award termination, with the majority reporting cessation of operations, delayed implementation of planned activities, or reduction in services.



These findings illustrate the scale of disruption for local organizations but only partially reflect the realities of small WLOs, many of which operate without direct US funding and experience the consequences more indirectly, through cascading project closures and the withdrawal of international partners. Nearly all WLO participants described their financial situation as precarious and unsustainable. Many reported that the cuts to US funding, coupled with the intensification of conflict, had severely disrupted ongoing projects and reduced their ability to plan for the future. One respondent explained, *“Unfortunately, the US government’s cutbacks intervened during the crisis in the province, and so it was a double challenge.”* Another echoed this sentiment, *“What made it worse was the USAID funding cut.”*

Participants highlighted the abrupt nature of funding suspensions, which were due both to limited resources and increasing instability. *“They just stopped the partnership, simply because they realized that some partners can no longer get to their workplace,”* one organization noted, describing how both insecurity and donor risk aversion had forced projects to close. Another recalled:

*“And suddenly, Trump came to power on the 20th. Already on the 27th of January, funding was abruptly cut, just like that. Everything that was prepared fell through. Three or four people who were working, who were involved in this project, gone just like that. So that’s what we’ve already had in terms of funding from the American government.”*

This pattern of “seesaw” funding cycles is not unique to 2025 and has resulted in a constant state of uncertainty and instability for WLOs. One leader reflected, *“Overall, the evolution of funding for many structures like ours here is a seesaw. Sometimes you are at levels that suit you, other times you are in troughs. You always have to fight.”* They went on to explain that long-term, predictable partnerships were non-existent. *“Indeed, there is no partner with whom we work, for example, for three years, hoping that we can renew for another three years. They are rare, really, that we have funding like that.”*

Several organizations said that they do not receive funding from large international donors and that domestic financing of WLOs is extremely limited. One WLO representative observed:

*“There’s very little local funding. UNDP funding has never been seen. There’s always the humanitarian fire, but we don’t have any funding. Maybe we’re in negotiations, maybe in the coming months, we could have that .... Even from the government, apart from some technical facilitation and technical support ... No funding from the government. Even when we advocated to include the budget line for the purchase of contraceptives, this amount was never released to be able to cover it.”*



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## CONTINUED UNCERTAINTY FOR WOMEN-LED ORGANIZATIONS

*"In fact, the impact of the funding changes is twofold. First, at the organizational level and at the level of our beneficiaries." - WLO Representative*

Throughout early 2025, limited information and communication from the US government about implementation of the funding cuts left organizations unsure whether ongoing projects would be suspended, restructured, or abruptly terminated. For WLOs, this uncertainty was even more profound. Many reported learning about the cuts indirectly through partner organizations or social media, rather than from official channels. This lack of clarity severely disrupted planning and decision-making. As one participant explained, *"We were waiting for confirmation, but there was no communication; we didn't know whether to continue or to stop."*

Most of the organizations interviewed do not receive funding directly from large institutional donors and instead rely on intermediary partnerships with international NGOs. These indirect channels amplify vulnerability to donor shifts, often leaving WLOs last in line for information or excluded from contingency planning. Several participants described the resulting confusion and reputational strain. *"The beneficiaries were waiting for us to come and execute this project ... but as soon as we tell them that we are still waiting for donor feedback, they are really impatient."* Others noted the moral weight of managing community expectations without clear answers or resources. *"We are accountable to the women who trust us, but when the funds stop, they think we have abandoned them."* The abrupt nature of funding disruptions strained relationships between WLOs and their beneficiaries, eroding trust built over years of service and advocacy.

Just as funding cuts were abrupt, so, too, was the disruption of services. The consequences of this uncertainty extend far beyond budgets; they compromise the continuity of life-saving services and the credibility of local humanitarian actors. As one organization noted, *"We find ourselves increasingly with many people in need, especially girls and women who are on the move, who have difficulty with their reproductive health."*

## WOMEN-LED ORGANIZATIONS CONTINUE TO OPERATE IN AN ENVIRONMENT OF EXTREME INSECURITY

*"Simply, people are brave and courageous. Since we have to continue living, we have to continue doing things. Security is not guaranteed, it is not assured, and accessibility is also uncertain." -WLO Representative*

The resurgence of M23 activity has severely undermined the work of WLOs and created a climate of pervasive fear among civilians and humanitarian workers in North and South Kivu. Between January and August 2025, more than 300 incidents of violence against humanitarian actors have been documented in North and South Kivu, underscoring the rapid deterioration of safety conditions in the region.

These attacks, ranging from harassment and road ambushes to targeted killings, have disrupted operations, restricted movement, and sharply reduced the efficiency and reach of services for women and girls.<sup>23</sup> For WLOs, which often work at the frontlines and with minimal security infrastructure, this environment has constrained operations and placed both their teams and beneficiaries at heightened risk.

Interviews with WLO representatives reveal the extent to which insecurity has paralyzed local operations. One organization described how *"the humanitarian corridor is closed"* and *"accessibility in the nooks and crannies of the province is not guaranteed due to lack of security,"* making it impossible to reach rural women and girls in need. Another explained that *"some partners can no longer get to their workplace or work sites,"* forcing projects to end prematurely despite urgent needs.



One organization reported that several staff members were arrested on suspicion of being part of M23 and were released after several days and a hefty payment. Another organization reported that they did in fact have to coordinate with M23 to deliver services in rural areas:

*"[We] asked them for a humanitarian corridor, so that humanitarians can enter the area. But they gave us a condition. The M23 gave us a condition before going into the field. You must first consult our team. Our humanitarian team. Because they also have their humanitarian team. So, before going into the field, we will first have the mission orders signed."*

Multiple peace treaties have been signed by DRC and Rwanda committing to a ceasefire and other resolutions, without success. While participants were hopeful that the US brokered ceasefire in June 2025 would finally end the violence in DRC, almost all expressed that nothing has changed since the peace deal was signed. As one WLO participant explained, *"Well, so far we haven't seen any positive or negative consequences yet ... because the situation has remained the same. Clashes are being reported here and there every day."* Another participant expressed that communities are tired of empty promises, and will only believe in the potential for peace when they see actual change:

*"We've already been used to agreements. Well, obviously, overall, it has created a little relief among the population, but no more, no more. People have already been so cheated, that from now on, they will only stick to facts, to things that are real."*

## **WOMEN-LED ORGANIZATION STAFF ARE STRETCHED TO THE LIMIT**

The simultaneous escalation of conflict and abrupt withdrawal of donor funding has profoundly impacted staff working at WLOs across North and South Kivu. WLO staff, often community members themselves, are simultaneously frontline responders and conflict-affected survivors. The erosion of their safety and ability to operate threatens not only immediate service delivery but also the continuity of locally led responses that have long sustained women and girls through cycles of violence.

Many organizations reported sharp reductions in personnel, with some shrinking from over 40 staff to fewer than 15. Others described the collapse of salaried positions and a shift to volunteer labor:

*"Well, when USAID funding was abruptly cut, we were forced to ask some people to stay home, to stop working. Unless they wanted to come to the office from time to time to volunteer. Volunteering means you come without being paid."*

This contraction has not only diminished service delivery but also intensified burnout among remaining workers who must shoulder expanded responsibilities amid insecurity and resource scarcity. Several WLO representatives expressed that funding cuts required them to completely overhaul their work, leading to a feeling of hopelessness for the future of their organizations. As one participant explained: *"I was saying that our organization has [regressed]. Instead of us being able to evolve, we have regressed. So, our capacities are totally reduced. We are starting again from scratch."*

Conflict-related displacement has compounded the strains of limited funding. Staff in rural and semi-urban areas have been forced to flee, disrupting community-based programming and leaving local partners "internally displaced" themselves. As one WLO representative described, *"You should know that since we work in rural areas, we work much more with focal points [in the field]. All these focal points have also found themselves to be internally displaced."* The psychological toll of displacement, insecurity, and interrupted work has been significant, with one participant describing their team as *"disoriented, unbalanced, [and] desolate."*



## WOMEN-LED ORGANIZATIONS HAVE A RANGE OF PRESSING NEEDS

*"We continue to look for other financial partners who might be interested in our modest work, to make women resilient, to make women autonomous, to make women fulfilled in their rights but also in their obligations so that we can move forward." -WLO Representative*

While the restoration of funding remains an urgent priority, WLOs across North and South Kivu consistently emphasized that financial resources alone are not sufficient to sustain their operations or safeguard the women and girls they serve. Interviews revealed a complex web of interrelated needs, spanning capacity, recognition, and well-being, that determine their ability to continue functioning amid escalating conflict.

WLOs emphasized the need for basic logistical support including vehicles, office space, communications tools, and data protection systems. Several WLOs explained that these functions would allow basic services and programming to continue, even without targeted program funding. Participants reported that secure mobility, protective measures, and coordination with security actors were essential to ensure continuity of services for women and girls. Several participants suggested the establishment of protection networks and community early-warning systems for civil society actors.

WLOs noted that, beyond short-term project funding, they need investment in long-term capacity strengthening, including support for management systems, leadership development, and monitoring and evaluation. One participant stressed, *"We need accompaniment, not just projects that come and go."* Another added that staff need psychosocial support to manage burnout and trauma. *"We are helping survivors, but we are also survivors."* Ensuring staff well-being and professional growth was seen as essential to organizational survival and effectiveness.

Many WLOs expressed a strong desire for recognition as equal and indispensable partners within the humanitarian ecosystem. Participants described being "consulted but not included" or serving as "implementers, not decision-makers." WLOs called for more equitable partnerships that respect their expertise, include them in coordination and funding decisions, and channel resources directly to local organizations rather than through intermediaries. As one respondent stated, *"We need donors to trust us, to fund us directly and not only through big NGOs."* Another emphasized the need for inclusion in strategic dialogues. *"We are closest to the communities, yet we are the last to be heard."*



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# CONCLUSION

In North and South Kivu, women and girls stand at the crossroads of displacement, insecurity, and economic collapse, bearing the disproportionate weight of violence and deprivation. The findings of this research illustrate how the convergence of renewed conflict and sudden aid withdrawal has deepened existing gendered inequalities in the DRC.

WLOs, often the first and last responders in times of crisis, have sustained communities through successive waves of conflict, yet now face an existential threat. The erosion of funding, combined with escalating insecurity, has not only disrupted service delivery but also threatens to undermine the trust and accountability that local organizations have built over decades.

Findings illuminate the realities that macro-level data often obscure: local WLOs operate in the most volatile environments with the least protection, and their survival is directly tied to the wellbeing of women and girls in their communities. As funding collapses and violence intensifies, these organizations are forced to make impossible choices: between paying staff and keeping safe houses open, or between maintaining a legal clinic and delivering reproductive health care. Their resilience, innovation, and deep community ties have kept essential lifelines intact even as international actors have withdrawn.

The situation in the DRC exemplifies the fragility of a humanitarian system that has historically relied on local women's labor while failing to invest in their security and institutional strength. This report underscores the long history of underinvestment in women and girls in the DRC and the chronic neglect of women-led organizations that serve them. For decades, donors have bypassed local women's movements in favor of larger international intermediaries, perpetuating inequities in power and resources. As this crisis unfolds, reversing that pattern is both urgent and necessary. Sustainable peace, recovery, and justice in the DRC will depend on centering women's leadership, not only as victims of conflict but as architects of the country's future.

# RECOMMENDATIONS

The converging crises facing women and girls in the DRC follow decades of conflict, displacement, and attacks on lifesaving and life-sustaining services, in which women and girls have experienced disproportionate harms. All actors must take urgent steps to ensure an immediate end to the conflict and a safe, sustained humanitarian response and to build long-term, sustainable peace, address the root causes of conflict and gendered violence, enshrine the rights and protection of women and girls, and ensure justice and accountability for survivors of violence.

## **ENSURE THE PROTECTION OF WOMEN AND GIRLS FROM ALL FORMS OF VIOLENCE.**

1. All armed parties to the conflict, including the M23/AFC, ADF, RDF, FARDC, and all affiliated militia, must abide by their obligations under international humanitarian law, and immediately end the targeting of civilians and civilian infrastructure, end the use of sexual violence as a weapon of war, and take action to ensure the protection of civilians from all forms of violence.
2. UN Member States, the UN Security Council, the African Union, and other international actors must use every diplomatic tool at their disposal to ensure parties to the conflict - including the M23/AFC forces, ADF, RDF, and the FARDC, and the governments of the DRC and Rwanda - abide by obligations under international law and ensure the protection of civilians is a non-negotiable condition of all diplomatic efforts.

3. Any renewal of the mandate of MONUSCO, the stabilization mission for the Democratic Republic of Congo, must retain mechanisms which provide specific protections to women and girls. These include requests to include gender considerations as a cross-cutting issue across the MONUSCO mandate; retaining the roles of UN Women Protection Advisors and Gender Advisors; investing in ongoing coordination efforts between MONUSCO, the government, and humanitarian workers to ensure protection of civilians and accountability for violations of international humanitarian law; and requests of the UN Secretary-General to include gender considerations in all reports to the UN Security Council.
4. The government of the DRC must work closely with donors and humanitarian actors to invest in infrastructure and services to protect women and girls during conflict and displacement, including protection networks and community-based early warning systems, safe shelters, safe spaces for survivors of gender-based violence, access to all forms of healthcare including sexual and reproductive healthcare, particularly rape kits and specialized care for survivors of sexual violence, and access to justice and accountability mechanisms to address violations of rights. All actors must target cash-based assistance and livelihoods support to women and girls, to mitigate the risks of survival sex and other harmful coping mechanisms.

### **ENSURE SAFE, SUSTAINED, HUMANITARIAN ACCESS ACROSS NORTH AND SOUTH KIVU TO ADDRESS THE SPECIFIC HUMANITARIAN NEEDS OF WOMEN AND GIRLS.**

1. All armed actors, including the M23/AFC and FARDC must ensure safe humanitarian access to civilian populations across the DRC. This includes ending the targeting of humanitarian actors and infrastructure; removing all bureaucratic impediments to humanitarian response, including unreasonable registration process and intimidation tactics; and support free movement of humanitarian goods into and across the DRC.
2. UN Member States must support UN agencies and international and local humanitarian actors in applying diplomatic pressure and supporting coordinated negotiations with armed groups and local authorities to ensure safe and sustained humanitarian access to all civilians across the DRC.
3. The government of DRC must coordinate with donors and humanitarian actors to restore essential services in North and South Kivu, ensure humanitarian responses address the unique needs of displaced women and girls, and design food, shelter, healthcare, water and sanitation, education, and livelihoods programs which specifically target women, girls, and women-headed households.

### **PROTECT, INVEST IN, AND SUPPORT LOCAL WOMEN-LED ORGANIZATIONS AS CRITICAL FRONTLINE PROVIDERS OF SERVICES AND PROTECTION FOR DISPLACED WOMEN AND GIRLS.**

1. International donors and humanitarian actors must direct a greater proportion of humanitarian funding for the DRC to local women-led and women-focused organizations, ensuring such funds are direct, flexible, sustained, invest in institutional capacity, and support the priorities of local communities.
2. Humanitarian actors must ensure the meaningful participation, equal partnership, and integrated leadership of local women-led organizations in humanitarian coordination, response, and decision-making mechanisms.
3. The government of the DRC must work closely with international humanitarian actors to increase technical, logistical and security support for local women-led and women-focused organizations that have been disproportionately impacted by recent funding cuts.





**BRING A SUSTAINABLE AND JUST END TO THE CONFLICT BUILT ON THE LEADERSHIP, PARTICIPATION, AND RIGHTS OF WOMEN AND GIRLS.**

1. All parties must immediately cease hostilities and engage in diplomatic solutions to the conflict. The governments of the DRC and Rwanda must cease support to their respective allied militias, and call on the RDF and its M23/AFC proxies to immediately withdraw from the DRC in accordance with UN Security Council Resolution 2773 (2025).
2. UN Member States must uphold their obligations under international law and cease the transfer of weapons to actors engaged in war crimes or crimes against humanity. Governments and private entities must take action to end illegal mineral resource extraction and export in the DRC which continues to fund armed groups, exploit women and girls, and destabilize chances for long-term peace.
3. All actors engaged in ongoing peace processes and agreements, including the Washington Agreement and Doha Declaration of Principles, must ensure the full, equal, and meaningful participation of diverse women and women-led civil society organizations in all phases of the peace process at local, regional, and national levels.
4. All actors engaged in peace negotiations must ensure peace agreements center human rights, and include independent and rigorous justice and accountability mechanisms for all abuses against civilians, including survivors of conflict-related sexual violence.



# ACRONYMS AND ABBREVIATIONS

ADF	Allied Democratic Forces
AFC	Congo River Alliance (Alliance Fleuve Congo)
CRSV	Conflict-related sexual violence
DRC	Democratic Republic of the Congo
FARDC	Armed Forces of the Democratic Republic of the Congo
FDLR	Democratic Forces for the Liberation of Rwanda
IDP	Internally Displaced Person
M23	March 23 Movement
MONUSCO	United Nations Stabilization Mission
PEP	Post-Exposure Prophylaxis
RDF	Rwandan Defence Force
SGBV	Sexual and gender-based violence
SRH	Sexual and reproductive health
SRHR	Sexual and reproductive health and rights
UN	United Nations
US	United States
USG	US Government
WLO	Women-led organization
WRC	Women's Refugee Commission



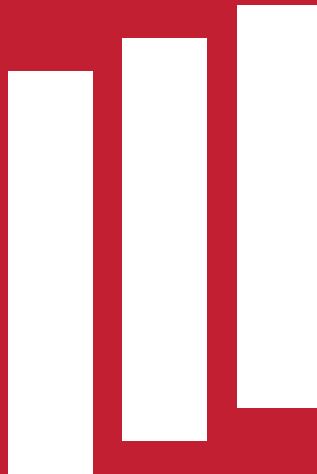
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