



An International Medical Corps mobile medical unit provides services in Minova.

Two weeks after the Rwandan backed rebel group M23 attacked and seized Minova, a city in South Kivu province bordering North Kivu province, and Goma, the capital city of North Kivu that is home to more than 2 million people, the group advanced further south than ever before, taking control of the city of Kalehe and the Kavumu airport, ultimately making its way to Bukavu, the capital of South Kivu. These attacks and occupations have created waves of internal displacements, with hundreds of thousands fleeing the fighting.

M23 is accused of widespread human rights violations in the Democratic Republic of the Congo (DRC), including killing civilians, summary executions, rape and sexual violence, forced recruitment, systematic looting and kidnappings. Reports of mass sexual violence, including against children, have surfaced during these attacks. It is well understood that violence against women and girls increases in times of conflict, and the need for protection services cannot be overstated. Since the occupation of Goma, the city has seen a stark increase in killings, robberies and mob justice.

The fact that M23's occupation of Bukavu has so far resulted in fewer civilian casualties compared to Goma is partly due to the Congolese military's strategic withdrawal. However, the capture of Bukavu signals a serious escalation in the ongoing conflict between M23 and government forces. M23's backing by Rwanda has raised concerns about the potential for broader regional instability, particularly as tensions between Rwanda and the DRC continue to intensify. On January 25, the DRC recalled its ambassadors from Rwanda and expelled Rwandan consular staff from Kinshasa, the DRC's capital, in response to the violence and escalating diplomatic tensions.

Even before the latest wave of M23 attacks, the situation in Goma and surrounding areas was dire. Chronic poverty, widespread food insecurity, and limited access to essential services such as healthcare and clean water have plagued the region for years. Vulnerable populations—including internally displaced persons (IDPs), children, pregnant and lactating women, older people and people with disabilities—have been disproportionately affected. IDPs in Goma often live in overcrowded and makeshift shelters, with inadequate access to sanitation and clean water, increasing their susceptibility to communicable diseases such as cholera. Additionally, the ongoing mpox epidemic in the DRC, which has been spreading since 2022, has compounded the already fragile health situation.

FAST FACTS

- M23 reached the center of Bukavu, the capital of South Kivu province, on Friday, February 14.
- After they occupied Goma, the capital city of North Kivu province in eastern DRC, on January 27, M23 officials had declared a ceasefire on February 4. Attacks resumed a few days later, ultimately ending the ceasefire.
- Hundreds of thousands of people have been displaced by this conflict. More than 1 million IDPs were already located in Goma and Minova, and attacks by M23 have left them with nowhere to go.
- Hospitals in Goma are already overwhelmed with people injured by the conflict. Healthcare staff, medical and surgical supplies, pharmaceuticals and blood for transfusions are critically limited.
- North Kivu has been plagued by conflict since the 1990s, with the first and second Congolese civil wars followed by decades of instability and violence.
- Fears of regional destabilization have risen due to the conflict, with Burundi, Rwanda and Uganda being implicated and affected by the war.

OUR RESPONSE

- International Medical Corps, with a base in Goma, has been responding in the DRC since 1999.
- We are deploying mobile medical units in Minova and Goma to provide immediate, lifesaving care to internally displaced persons and people affected by the conflict.
- We provide safe spaces and listening centers to survivors of violence, as well as protection and mental health services and support.

Bukavu faces many of the same challenges, struggling with insufficient infrastructure to accommodate the surge in displaced populations. M23's violence has exacerbated these existing vulnerabilities, creating an even more dire humanitarian crisis. Hospitals in the region are overwhelmed, facing severe shortages of medical supplies, blood for transfusions and skilled personnel. The demand for surgical care has increased dramatically due to the rising number of civilian casualties. The urgent need for access to safe food, clean water, shelter and sanitation remains critical. Humanitarian organizations operating in the region, including the United Nations, have also faced setbacks. Several warehouses were looted during the occupation of Goma, resulting in the loss of vital supplies and severely hindering the ability of relief agencies to meet the escalating needs of the population.

International Medical Corps Response

International Medical Corps first began operations in the Democratic Republic of Congo in 1999. Our main office in the country is in Goma, with more than 80 staff members present in the city. We also have an office in Bukavu, with more than 25 staff, and an office in Minova, with almost 20 staff. None of our staff have so far been injured by the attacks, nor have our warehouses been looted. In response to the attacks, we have mobilized as quickly as possible while focusing on safety and security.

Health, including mental health: In North Kivu, we deployed a mobile medical unit (MMU) to respond to the crisis February 4–9, treating more than 700 IDPs in Goma. We deployed a second MMU between February 12–15, treating more than 800 patients, and are preparing to deploy our next MMU this week. MMU staff conduct health consultations, including screenings for malnutrition, and provide referrals to nearby hospitals. Through these MMUs, IDPs can access mental health and psychosocial support services, such as counseling, psychotropic pharmaceuticals and group therapy. Needs remain extremely high for this growing number of IDPs. Support for emergency surgery—including medical supplies, pharmaceuticals, human resources and blood for transfusions—is essential. Increased access to emergency psychological first aid and ongoing psychosocial support will be critical for survivors of this traumatic conflict.

In Minova, International Medical Corps continued to deploy MMUs to provide IDPs fleeing the M23 conflict with access to quality healthcare. Our first deployment occurred between February 1–4, after Minova had been occupied by M23, and treated more than 700 patients. Typically, International Medical Corps deploys MMUs to provide these services in IDP camps, but due to the occupation of Minova and M23's forced evacuation of these camps, we are focusing on reaching IDPs where they are being hosted, within the host community.

We also are participating in cluster meetings and ensuring coordination with other actors in the area, making sure that coverage is maximized and there is no duplication of efforts.

WASH and IPC: Overloaded and inadequate water infrastructure systems, overcrowding and low access to hygiene have seriously increased the risk of communicable diseases such as cholera, typhoid and other serious conditions. Continued support for access to water, sanitation and hygiene (WASH) and infection prevention and control (IPC) services is necessary to prevent further outbreaks. Before the attacks on Goma, Minova and Sake, International Medical Corps was providing significant support in responding to the mpox epidemic in both North and South Kivu, conducting training sessions on case identification and management, as well as WASH and IPC services. We are continuing this critical work in Minova and Goma now that we are able to resume working with local health facilities.

Protection: The need for protection services for those affected by the conflict cannot be overstated. UNICEF has reported that rape cases in 42 health facilities across Goma had increased five times in just one week following the January 27 occupation. Of those survivors, 30% were children. Violence against women and girls often flares up in times of conflict, and—given the context, where rates are already high—the need for protection and support services is critical. International Medical Corps is currently providing protection services to IDPs in Minova via our MMUs and through support we provide to health centers and hospitals, as well as support we provide to community-based organizations where survivors of violence can receive services. Survivors of violence are referred through MMUs or International Medical Corps-supported static health centers for medical support and treatment after instances of violence. We also provide survivors with safe spaces, group counseling, psychological first aid, individual counseling and psychosocial support via our MMUs. In addition, community-based organizations that we support provide safe spaces and psychosocial support.