

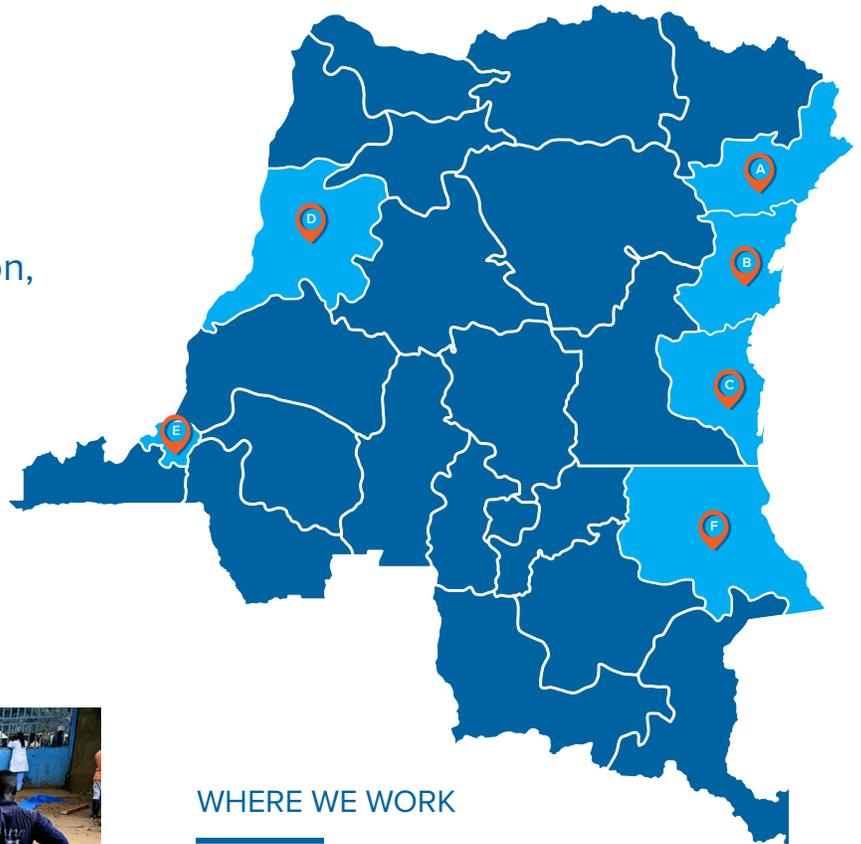
Democratic Republic of the Congo

Years after the official end of the Democratic Republic of the Congo's (DRC) decade-long civil war, violence remains pervasive throughout eastern areas of the DRC, acts of rape against women and children continue to escalate, and over a third of the population lacks access to basic health care.

Since the height of the conflict, International Medical Corps has worked in this volatile area, supporting Congolese partners to build sustainable capacity by repairing health facilities and improving the skills of medical professionals, village health workers and community members.

International Medical Corps has worked in the DRC since 1999, providing health care, capacity-building in the health sector, gender-based violence (GBV) prevention and treatment, nutrition, food security, and water and sanitation services.

International Medical Corps is currently one of the only international non-governmental organizations operating in many remote areas of Tanganyika, South and North Kivu and Ituri provinces in eastern areas of the DRC. In total, we have served more than two million people in the DRC, 80 percent of whom have been displaced by armed conflict.



WHERE WE WORK

- | | |
|---|--|
| <p>A Ituri</p> <p>Bunia
(Emergency Response Project)</p> | <p>D Equateur</p> <p>Mbandaka
(Ebola Response Project)</p> |
| <p>B North Kivu</p> <p>Goma Katoyi
Kirotshe Binza</p> | <p>E Kinshasa</p> <p>Liaison office</p> |
| <p>C South Kivu</p> <p>Fizi
Shabunda
Lulingu</p> | <p>F Tanganyika</p> <p>Kalemie Kiambi
Manono Kabalo
Ankoro Moba
Mbulula Kansimba
Kongolo Nyemba
Nyunzu</p> |

PRIMARY HEALTH CARE

International Medical Corps currently supports 64 clinics and hospitals in health zones of North Kivu, Tanganyika and South Kivu, providing essential drugs, medical supplies, training, and referral and transfer of patients who need specialized care. Our beneficiaries include internally displaced people, Congolese refugees returning home and vulnerable host populations. Given the considerable gaps in primary health care services in International Medical Corps' area of intervention, we focus on providing a comprehensive and integrated primary care package, including immunization campaigns, advancement of maternal and child health, and improved environmental sanitation and hygiene practices at targeted health facilities. More than 75% of malaria, pneumonia and diarrhea cases in International Medical Corps-supported facilities are successfully treated; we continue to support capacity-building within these health centers to ensure that treatment quality remains high.

BUILDING SUSTAINABLE LOCAL HEALTH CAPACITY

International Medical Corps works in close collaboration with the DRC's Ministry of Health and local non-governmental organizations to create a well-trained, knowledgeable cadre of local health professionals. In 2017 alone, International Medical Corps trained 204 Ministry of Health staff and 384 community health workers in medical care and administration, as well as 92 community leaders on support for victims of GBV. We also trained over 88,000 community members in health education.

REPRODUCTIVE HEALTH

International Medical Corps prioritizes reproductive health services and family planning in the DRC. Gynecological and obstetric care is especially important in an area where 98% of all obstetric complications result from either subpar medical care or rape. By increasing the quality and availability of reproductive and maternal health care, as well as the uptake of these services, International Medical Corps has significantly improved long-term health outcomes for women and children in the DRC. We also provide a wide range of health services for sexual assault survivors, including education and counseling. In addition, International Medical Corps has constructed a reproductive health complex in Chambucha hospital in North Kivu and trained health professionals in advanced gynecological and obstetric care.



“We believe there should be no impunity for the sexual and gender-based violence committed by so many.”

- Former Secretary of State Hillary Clinton
on her visit to International Medical Corps operations at
Mungunga 1 IDP camp.

GENDER-BASED VIOLENCE (GBV)

Since 2002, International Medical Corps has helped lead the battle against widespread GBV in war-ravaged eastern areas of the DRC. Our complementary USAID-funded Care, Access, Safety & Empowerment (CASE) and Behavior Change Communications (BCC) projects take a comprehensive approach to addressing the needs of GBV survivors, while also preventing future cases by changing community attitudes around gender and violence. In three health zones in the

DRC, CASE has provided an estimated 36,962 people with increased access to quality medical, psychosocial, legal and livelihood services.

Currently International Medical Corps is implementing a GBV project in collaboration with the International Rescue Committee funded by the World Bank through Fonds Social of the DRC. The project is being carried out in North and South Kivu in five health zones: Minova, Shabunda, Lulingu, Kirotshe and Binza.



NUTRITION

In partnership with UNICEF, the World Food Program and the U.S. Office of Foreign Disaster Assistance, International Medical Corps has provided nutrition services in several communities of North and South Kivu to treat severely and moderately malnourished children and adults.

To help parents take ownership of their families' nutritional needs, we provide nutritional education, seeds, tools and training to cultivate staple crops. Through our efforts and those of our local partners, thousands of children have recovered from malnutrition in North and South Kivu provinces.

International Medical Corps has a 95 percent recovery rate for children who are malnourished, including those who are severely malnourished.



**International
Medical Corps**

www.InternationalMedicalCorps.org

Since its inception more than 34 years ago, International Medical Corps' mission has been consistent: ease the suffering of those affected by war, natural disaster and disease by delivering vital healthcare services and focusing on training that provides the skills and tools required to foster self-reliance. This approach of helping people to help themselves is critical to returning devastated populations to self-reliance.

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