

# Democratic Republic of the Congo

**Years after the official end of a decade-long civil war in the Democratic Republic of the Congo (DRC), violence remains pervasive throughout eastern DRC, sexual abuse of women and children continues to escalate, recurrent episodes of disease outbreaks**

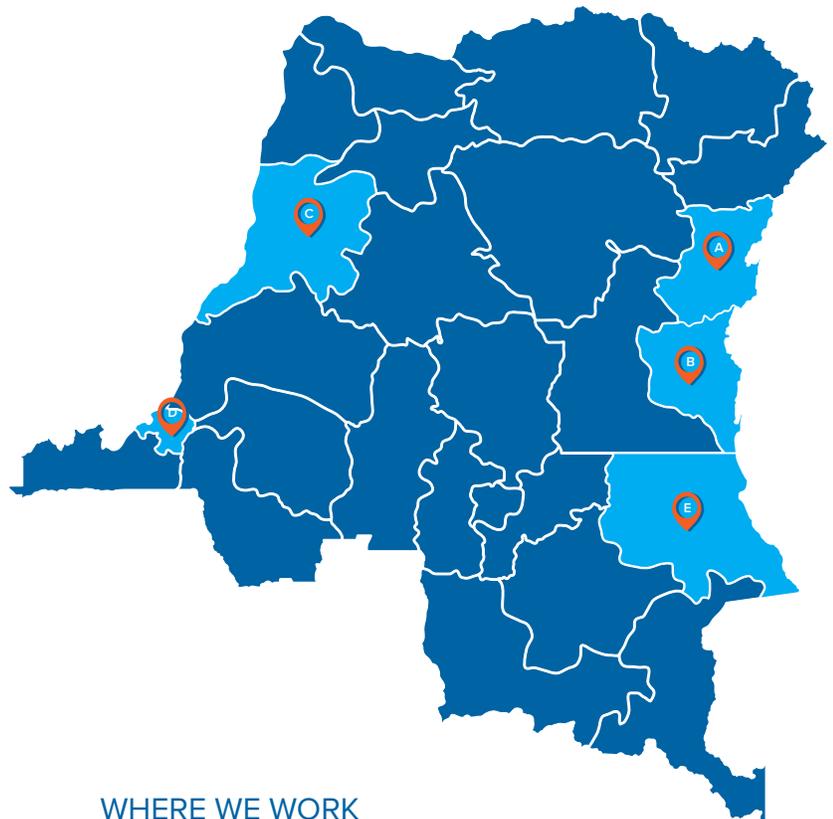
**impact different health zones and more than one-third of the population lacks access to basic healthcare.**

Since the height of the conflict, International Medical Corps has worked in this volatile environment, supporting local authorities and communities to achieve resilience through training, direct services, infrastructure rehabilitation and the provision of equipment and supplies.



International Medical Corps has worked in the DRC since 1999, providing primary and secondary healthcare, capacity building, gender-based violence (GBV) prevention and treatment, nutrition support, Social and Behavioral Change, food security programs, Mental Health and Psychosocial Support (MHPSS) and water and sanitation services. In the last three years, we have responded to multiple disease outbreaks, including Ebola, Measles, Polio, and the COVID-19 pandemic. We have also provided support to the Ministry of Health in the distribution of oral cholera vaccine.

International Medical Corps is currently serving communities in remote and hard-to-reach areas in Tanganyika, Ituri, South and North Kivu provinces in eastern DRC and Equateur province in the northwest. We have served more than 2 million people in the DRC, many of which have been affected by armed conflict.



## WHERE WE WORK

- A NORTH KIVU**  
Goma Beni  
Butembo Katwa  
Mabalako Karismbi  
Nyiragongo Kirotshe  
Masisi Birambizo
- B SOUTH KIVU**  
Fizi  
Nundu  
Bukavu
- C EQUATEUR**  
Bikoro  
Mbandaka
- D KINSHASA**  
Liaison office
- E TANGANYIKA**  
Kalemie Manono  
Ankoro Mbulula  
Kongolo Nyunzu  
Kiambi Kabalo  
Moba Kansimba  
Nyemba



## PRIMARY HEALTH CARE

International Medical Corps currently supports 133 health centers and hospitals across twenty-six health providing essential drugs, medical supplies, training, and referral and transfer of patients who need specialized care. Our beneficiaries include Ebola affected communities, internally displaced people (IDP), returnees and vulnerable host populations.

Given the considerable gaps in primary healthcare services in International Medical Corps' areas of intervention, we focus on providing a comprehensive and integrated primary care package, including immunization campaigns, advancement of maternal and child health, basic mental health and psychosocial support (MHPSS) and improved environmental sanitation and hygiene practices at targeted health facilities. We continue to support capacity-building within these health centers to ensure that

treatment quality remains high and support the referral of cases to secondary facilities for specialized care.

The DRC is prone to recurrence of known and newly discovered disease outbreaks—most recently Ebola, measles, and COVID-19. Through our work with the Ministry of Health at the health facility and community levels, International Medical Corps leverages decades of experience with infectious diseases to improve prevention, detection, and treatment. We support the ministry of health's surveillance efforts by training community health volunteers and informal health care providers such as roadside medicine vendors and traditional healers to strengthen integrated disease surveillance and response (IDSR) conducted by health facilities and promote the adoption of the One-Health approach.

## EBOLA OUTBREAK RESPONSE

International Medical Corps has been one of the primary responders to Ebola outbreaks in the DRC. We supported the Ministry of Public Health in its efforts to manage the country's tenth Ebola outbreak, which began in the province of North Kivu in August 2018 and—by the time it was declared over nearly two years later, in June 2020—grew to become the second-largest outbreak in world history.

In responding to that outbreak, International Medical Corps established two Ebola treatment centers in the towns of Mangina and Makeke, and set up 95 screening and referral units (SRUs) at health facilities in the affected areas to support the safe screening, isolation and referral of suspected and confirmed cases. The Makeke ETC was eventually converted into a general referral hospital with the generous support of Latter-Day Saints Charitie and handed over to the community. At each of these facilities, we trained all relevant staff members on infection prevention and control (IPC) measures, including proper donning and doffing of personal protective equipment, hand hygiene and appropriate waste management practices. To further reduce the spread of the disease, we also improved community access to clean water through the digging of boreholes.

International Medical Corps is currently working to support local authorities and affected communities to maintain Ebola response capacity and reinforce community trust and early case detection through community engagement and access to safe and quality health care. Shortly before the outbreak in eastern DRC was declared over, a new outbreak—the country's eleventh—was confirmed in Équateur Province in western DRC. As part of this response, International Medical Corps has deployed two rapid response teams to the hotspots of the outbreak in the provincial capital of Mbandaka, and the remote towns of Bikoro and Buburu. These RRTs trained local MoH staff on IPC, and WASH and set up two ETCs in Mbandaka and Bikoro and one Integrated Treatment Center in Bikoro for the isolation and treatment of suspect and confirmed cases.

Currently, International Medical Corps is responding to the latest outbreak of Ebola in the province of North Kivu where it is providing case management in the town of Katwa through an Ebola Treatment Center which was set up on the foundations of a rehabilitated Transit Center used in the tenth outbreak.

## REPRODUCTIVE HEALTH

International Medical Corps prioritizes reproductive health services and family planning in the DRC. Gynecological and obstetric care are 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 healthcare, 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, including education and counseling, for sexual assault survivors. In addition, International Medical Corps has constructed a reproductive health complex in Chambucha Hospital in North Kivu, where we have trained health professionals in advanced gynecological and obstetric care.

## NUTRITION

In partnership with UNICEF, the World Food Program and the U.S. Bureau for Humanitarian Assistance, International Medical Corps has provided nutrition services in several communities of North and South Kivu and Tanganyika to treat severely and moderately malnourished children and adults, particularly pregnant and lactating women. 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, South Kivu, and Tanganyika provinces.

## GENDER-BASED VIOLENCE (GBV)

Since 2002, International Medical Corps has helped lead the battle against GBV in war-ravaged eastern DRC. International Medical Corps is currently implementing protection and GBV activities including setting up Women and Girls Safe Spaces (WGSS), training paralegals and providing support to survivors of GBV including Psychological First Aid (PFA) and Post-Exposure Prophylaxis (PEP) kits to survivors of GBV. We also facilitate access to water at health facilities and communities through boreholes, water harvesting systems and community springs which is a critical component of IPC. To reinforce hygiene and sanitation at health facilities, International Medical Corps rehabilitates latrines and waste management zones. All these are done as part of International Medical Corp's BHA funded project to provide lifesaving healthcare, nutrition, and protection services to IDPs and vulnerable communities in South Kivu and Tanganyika provinces.



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

— Former Secretary of State Hillary Clinton, during a visit to International Medical Corps operations at Mungunga 1 IDP camp



## COVID-19 PANDEMIC RESPONSE

COVID-19 cases continue to rise in the DRC despite flight restrictions into and out of the country—as well as periodic isolation of cities with large caseloads, such as Kinshasa and Goma—rumors, community resistance and a lack of access to testing make undiagnosed cases a ticking time bomb. These could also hinder acceptance of the COVID-19 vaccine in the country. With funding from the Center of Disease Control and Prevention, International Medical Corps has been collecting and documenting community perceptions to inform the rollout of the COVID-19 vaccine and support demand generation. In June 2020, International Medical Corps began strengthening IPC measures and training health workers in 82 facilities across three of the 14 provinces where cases have been confirmed: North Kivu, South Kivu, and Tanganyika. Interventions to control the COVID-19 outbreak in the DRC remain critical, as an outbreak of similar complexity to Ebola would be another blow to a country with a health system weakened by years of protracted and complex humanitarian crises.

## RESEARCH

Thorough partnerships with the DRC government, donors and academic institutions, International Medical Corps works to generate knowledge while supporting local communities. Examples of this includes the participation of an International Medical Corps managed ETC in the PALM trial during the 10th Ebola outbreak which led to the identification of groundbreaking therapeutics, carrying out vaccine hesitancy studies on both Ebola and COVID-19 to support demand generation and participating in cohort study to examine the relation between nutritional status and COVID-19 outcomes together in partnership with Johns Hopkins University and funding from BHA.



[www.InternationalMedicalCorps.org](http://www.InternationalMedicalCorps.org)

A pre-eminent first responder since 1984, International Medical Corps delivers emergency medical and related services to those affected by conflict, disaster and disease, no matter where they are, no matter what the conditions. We also train people in their communities, providing them with the skills they need to recover, chart their own path to self-reliance and become effective first responders themselves.

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