

DEMOCRATIC

REPUBLIC OF THE CONGO

HEALTH SECTOR NEEDS ASSESSMENT

Following the 2002 peace agreement, the installation of a transitional national government in July 2003 formally ended seven years of conflict. However, armed violence and cross-border tensions continue in the East. Nationwide, access to health care is very poor, even in regions unaffected by conflict and the health of the population is threatened by epidemics, endemic diseases and natural hazards. More than 2.3 million people are estimated to be internally displaced as a result of conflict.



HEALTH INFRASTRUCTURE: Prevailing diseases are malaria, tuberculosis and diarrhoeal infections such as cholera. Malaria is responsible for 45% of all deaths among children, followed by acute respiratory infections and measles. In 2005, the country was affected by outbreaks of plague in province Orientale, cholera in the East, typhoid and measles in Kinshasa. Inadequate sanitation and potable water supplies present high risks for ill health.

GENDER-BASED VIOLENCE: Violence against women and children is a significant consequence of the conflict. It is estimated that there are at least 40,000 survivors of sexual violence in the DRC. Mental health care services, social rehabilitation, and – in some cases – gynaecological care are needed for this group.

HEALTH SECTOR PRIORITIES FOR 2006

- Ensure equitable access to basic health services and coordinate health interventions, especially in conflict affected areas

- Reduce morbidity and mortality by early detection and control of communicable diseases such as malaria
- HIV/AIDS prevention and control
- Provision of care for victims of Sexual and Gender-based Violence

WHO Proposed Projects in the Humanitarian Action Plan 2006	Funds Requested *	Implementing Partners
Central level projects		
Malaria control in the conflict-affected areas in eastern DRC	5,946,600	MoH, NGOs, UN agencies, local communities
Minimum health care package in the provinces of Maniema, Ituri, North and South Kivu and Orientale	21,335,468	
Strengthening of epidemiological surveillance in eastern DRC	3,100,210	
Enhancement of WHO's presence at local level	1,691,866	
Medical care for victims of Sexual and Gender-Based Violence	1,413,200	
Kasai Oriental Province		
Minimum health care package in the province of Kasai Oriental	5,263,239	MoH, NGOs, UN agencies, local communities
HIV/AIDS control and prevention in the province of Kasai Oriental	864,950	
Rehabilitation of health facilities in newly accessible 'zones de santé' in Kasai Oriental	1,403,000	MSP, UNFPA, SANRU, BDOM, FOMI (MIBA), MDM-B
Support to the fight against onchocerosis in Kasai Oriental	343,611	PNLO
Support to the fight against trypanosomiasis in Kasai Oriental	455,500	MSP (IPSP), NGOs, UN agencies
Support to vaccination campaigns in newly accessible 'zones de santé' in Kasai Oriental	2,980,000	UNICEF, NGOs
Maniema Province		
Provision of insecticide-treated mosquito nets in the province of Maniema	369,946	MoH, NGOs, UN agencies, local communities
Enhancement of the immunization coverage among children and pregnant women	310,905	
Reinforcement of the disease surveillance system in Maniema	1,409,339	
Provision of essential medicines to Maniema Province	6,238,100	CTB, Merlin, Care, Kindu Santé, GTZ

WHO Proposed Projects in the Humanitarian Action Plan 2006	Funds Requested *	Implementing Partners
Bunia/Ituri		
HIV/AIDS control and prevention in the district of Ituri	510,700	MoH, NGOs, UN agencies, local communities
Malaria prevention and control in the district of Ituri	288,800	
Support to laboratories to enhance diagnosis capacity in the district of Ituri	29,000	
Rehabilitation of the operating theatre of the Reference Maternal Hospital in Bunia	67,038	
Implementation blood safety programmes focusing on safe blood transfusions in Ituri	120,766	

* Amounts given in US dollars.

Total Funds Requested: USD 54,142,238

2005 Donors: Belgium, Finland, Norway, United Kingdom