



The Damien Foundation in the Democratic Republic of Congo

The country in context

The Democratic Republic of Congo is a large country, covering 2,380,000 square kilometres in Central Africa with an estimated population of 54,557,731 inhabitants in 2004. A complex crisis lasting several years and extensive dilapidation of basic infrastructure such as roads, schools and health care centres have kept the population's living standards from increasing beyond the bare minimum for survival.

Fortunately, since 2003, peace has returned, auguring a better future and renewed contacts with international financial institutions such as the World Bank, the International Monetary Fund and even the African Development Bank. This should in time give a welcome boost to this economy which has been much harassed over the years.

Out of 22 countries in the world with endemic tuberculosis, the eleventh is the Democratic Republic of Congo. It ranks ninth among the most endemic countries with leprosy.

The Damien Foundation in Congo

We have been in Congo helping to combat leprosy since 1964. Our battle against tuberculosis began in 1972. Since then, the Ministry of Health has included both diseases in its national programmes scheme.

The Damien Foundation coordinates and carries out activities for 12 of the country's 22 projects or joint leprosy/tuberculosis projects. Our activities are spread over 6 of the country's 11 provinces - the city/province of Kinshasa has two joint projects since 2006, the province of Bandundu has three projects, Equateur one project, Province Orientale two projects, North Kivu one project and Katanga three projects.

Our Foundation also directly supports the central units of National Tuberculosis Control Programmes and National Leprosy Control Programmes.

Since 1994, we have been providing primary health care in the health designated areas Kayna and Lubero in North Kivu. Lastly, since 1996, we have been running a project on health care data management, in partnership with the Ministry of Health and Belgian NGOs – Medical Mission Action Belgium (MEMISA) and the Medical and Scientific Centre of the Free University of Brussels in Central Africa (Cemubac).

The Damien Foundation's National Coordination Office is run by an agent cum medical officer, two national medical supervisors, a financial affairs manager and a logistics manager. This group is responsible for organising, coordinating and doing the follow up and assessment of all projects in this country.

The managing posts are held by Congolese doctors and personnel, except for the financial affairs manager and logistics manager who are both Belgian expatriates.

The Damien Foundation's activities in the Democratic Republic of Congo

Activities to combat both diseases have been incorporated and implemented into the existing health care structure (HGR, CSDT, CST) in each province. These activities have been placed under the technical management of provincial leprosy and tuberculosis coordinating doctors (MCP).

The L/TBC provincial office is a government body linked to provincial medical supervision. The L/TB office receives its support from external non-governmental partners.

The Damien Foundation's anti-tuberculosis support forms part of a five-year plan to control tuberculosis. This five-year plan runs from 2005 to 2010. It was set up under the National Tuberculosis Control Programme of the Ministry of Public Health, (BNT with all partners).

The Damien Foundation's anti-leprosy support forms part of a national leprosy eradication programme, set up under the National Leprosy Control Programme of the Ministry of Public Health (BNL with all partners).

The Damien Foundation's leprosy and tuberculosis-related interventions are concerned with the following:

- training doctors, nurses, laboratory assistants and other proficient co-workers
- supplying the equipment needed for detection, treatment and follow-up of patients suffering from leprosy and tuberculosis
- supplying means of transport for trips inside districts and health-designated areas in order to facilitate supervision (cars, motorcycles and bicycles)
- sending free supplies to health-designated areas, giving medical training concerning anti-tuberculosis, anti-leprosy and other medicines and laboratory products such as reagents, microscopes and other medical material
- providing support, follow-up, supervision, assessment of projects at provincial and national level
- awakening interest of proficient co-workers on the ground through different incentives
- directly supporting national committees on leprosy and tuberculosis

The Damien Foundation developed its activities in Congo thanks to various funding sources – own financial resources from the Belgian public, cofinancing from the Directorate-General for Development Cooperation, funds from the Coopération Technique Belge and from the European Union.

The Damien Foundation officiates in the Democratic Republic of Congo on behalf of the International Federation of Anti-Leprosy Associations which consists of fifteen or so NGOs based in northern countries which work towards combating leprosy in the world

Major successes and challenges

Our cooperation with the national anti-AIDS programme is now being tightened. Indeed, the percentage of patients suffering from tuberculosis and co-infected with HIV-AIDS is currently 30-50%. It appears to be constantly increasing. In 2003 in Kinshasa, we launched a pilot project now

being assessed to deal with co-infected patients suffering from tuberculosis and HIV-AIDS. This project was to be financed by USAID via the WHO. An extension plan running from 2005 to 2009 was set up under UNAIDS/WHO. Its implementation is to be funded by the Global Fund with support coming from the World Bank's Multi-Country AIDS Programme, the Coopération Technique Belge and even USAID.

The National Programme of Tuberculosis has assembled all the tools to take charge of patients suffering from multi-drug resistant tuberculosis. It is now only waiting to be given the go-ahead by the Green Light Committee to buy medicines financed by the Global Fund and to install laboratories. As for the anti-leprosy struggle, our greatest challenge now will be to improve our ability to detect and take in charge patients, aided by the community. An additional challenge will be to start programmes to prevent patients becoming disabled and to rehabilitate disabled patients.

Summary

| | |
|---------------------------------------|---|
| Start of the project | 1979 |
| Local Partners | National Tuberculosis Control Programme National Leprosy Control Programme |
| Project type | Leprosy and tuberculosis, 12 Primary health care assistance, 1 National Programme assistance, 2 Managing health care data, 1 |
| Population covered in 2006 | 36,010.946 |
| Patients detected and treated in 2006 | 61,593 tuberculosis patients 5,814 leprosy patients |
| Expenditure in 2006 | € 3,367.105 |