



PATH in the

Democratic Republic of the Congo

Partnering with communities to
improve health and save lives
through innovation

The Democratic Republic of the Congo (DRC) is rebuilding after decades of conflict collapsed the health care system. Despite some progress, the country remains one of the world's least developed, ranking near the bottom of the Human Development Index.

Working closely with Congolese communities and government leaders, PATH addresses some of the DRC's toughest health challenges. We apply our on-the-ground expertise to HIV, tuberculosis, malaria, and neglected tropical diseases as well as reproductive, maternal, and child health. Our work includes advocating at the national level to strengthen funding for essential health interventions, such as immunization; providing targeted technical assistance; leveraging our relationships with funders, private industry, community-based organizations, and others for sustainable results; and adapting and introducing innovative, low-cost technologies and evidence-based best practices. Our operational presence in the DRC has grown steadily since 2009.

PROJECT AND OFFICE LOCATIONS IN THE DRC



WIDE-RANGING EFFORTS ENSURE SUSTAINABLE HEALTH IMPACT

PATH's work in the DRC covers a variety of health areas and includes the introduction and scale-up of sustainable innovations in technologies, systems, and services. Our impact hinges on achieving four goals:

- Improving the quality of care.
- Increasing the supply of lifesaving technologies and interventions.
- Increasing the demand for lifesaving technologies and interventions.
- Strengthening the enabling environment for improvements in health care.

Effective collaboration with the DRC government, communities, and other groups has been key to PATH's success in achieving these goals.

EMPOWERING COMMUNITIES AND ENHANCING CARE FOR HIV/AIDS

HIV prevalence in the DRC is affected by many factors, including poverty, stigma, gender norms, geography, and population mobility. Addressing these complex determinants requires diverse approaches built on scientific evidence and customized for different populations and settings.

In alignment with DRC government efforts, the US Agency for International Development (USAID) created ProVIC (based on the name of the project in French) as its flagship, integrated HIV/AIDS project in the DRC. Led by PATH, ProVIC has been extended as ProVIC*plus*. The project works in five provinces—Kinshasa, Haut-Lomami, Haut-Katanga, Tshopo, and Ituri—offering comprehensive HIV/AIDS clinical services in more than 100 health facilities, plus innovative and high-impact maternal and neonatal services in 15 pilot health facilities, including some of the DRC's highest-volume maternities.

Since its inception, the project has focused on delivering the most effective HIV/AIDS services available. Our work improves health outcomes for individuals and families and contributes to the global efforts of the US President's Emergency Plan for AIDS Relief. In addition to our involvement in health facilities, ProVIC has supported nearly 50 "champion communities" to organize and plan their own responses to the epidemic. Through coordinated effort, these communities are empowered to improve the health of their most vulnerable members, such as orphans and people living with HIV/AIDS.

To reach populations at highest risk, ProVIC introduced to the DRC mobile "moonlight" HIV counseling and testing directly to urban "hot spots"—gathering places for sex workers and men who have sex with men. Peer educators provide information about testing times and locations and assure target populations that they will be welcome at the mobile clinics. Onsite, trained providers offer rapid, finger-prick HIV testing so clients can receive their results quickly. This work was recognized at the International AIDS Conferences in 2012 and 2014.

At the facility level, PATH-trained clinicians administer a complete package of HIV services, including prevention of mother-to-child transmission; early infant diagnosis, care, and treatment; and the engagement of men in these services. The project's comprehensive support has included "Mentor Mothers" to help HIV-positive pregnant women adhere to a cascade of services along



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the continuum of care. To further serve the community, the project enables access to treatment through multiple entry points, such as inpatient and outpatient care for tuberculosis (TB) as well as treatment for sexually transmitted infections and other health conditions.

FIGHTING TUBERCULOSIS FROM EVERY ANGLE

For nearly 20 years, PATH has applied our global health expertise to the fight against TB, with work in the DRC since 2010. In this vast country, the rugged and often inaccessible geography and limited infrastructure pose particular challenges to control of the disease, while

KEY PROVIC ACHIEVEMENTS OVER FIVE YEARS

- HIV counseling and testing—More than 663,800 people in 28 health zones counseled and tested for HIV through mobile, community-based, and facility-based services; 4,209 put on antiretroviral therapy; and 1,585 infants tested and diagnosed early for HIV.
- Community mobilization—More than 1.6 million people in 49 “champion communities” reached with HIV prevention messages, including 215,921 in key populations (e.g., female sex workers, men who have sex with men, truckers, and miners).
- Prevention of mother-to-child transmission (PMTCT)—193,685 pregnant women reached with PMTCT counseling and testing at 112 health facilities offering antenatal care services that included HIV testing and onsite provision of antiretroviral medications.
- Care and support—13,351 people living with HIV and orphans and vulnerable children provided with clinical services, and 22,653 reached with care services, including psychosocial services, nutritional support, and vocational training.
- Gender-based violence (GBV)—66,063 people reached with GBV counseling and 63,202 reached with GBV services.
- Tuberculosis (TB)—14,105 individuals presumed to have TB referred for diagnosis and 9,278 TB patients placed on treatment.
- Health worker training—8,648 service providers trained on PMTCT; HIV testing, counseling, and treatment; care for TB-HIV co-infection; laboratory techniques; and commodities management.

multidrug-resistant TB (MDR-TB) and TB-HIV co-infection are increasing concerns.

Through the USAID-funded TB2015 project, PATH has strengthened the DRC's national TB policy, data quality, and management and trained more than 8,000 health workers in key skills. Working closely with seven provincial-level coordinating bodies, we introduced cutting-edge technology—such as GeneXpert® equipment—resulting in measurable improvements in case notification, diagnosis of MDR-TB, and treatment.

Recognizing that local ownership is essential for long-term solutions, the project trained and supported community-based organizations (whose members are often former TB patients) as well as traditional healers, private drug sellers, sputum fixers, and others to deliver novel TB interventions. These efforts were so successful in improving treatment outcomes that people who participated in our project continue to visit new and ongoing patients' homes, supervise treatment, and distribute treatment adherence packages.

To address TB-HIV co-infection, PATH trained community volunteers to screen for both. As a result, nearly 90 percent of TB patients at project-supported sites have received HIV testing, a dramatic increase from the national average of 24 percent. Now, ProVICplus is continuing PATH's successful work in TB-HIV co-infection.

SCALING UP HIGH-QUALITY CARE FOR MALARIA

Malaria is a major health threat in the DRC, with tragic consequences for young children. The MalariaCare partnership, led by PATH and funded by USAID under the US President's Malaria Initiative, is scaling up high-quality diagnostic and treatment services for malaria and other febrile illnesses. Working across 14 provinces and in Kinshasa, the project follows World Health Organization guidelines for performing universal diagnostic testing of malaria in the presence of fever and ensuring that antimalarial treatment is administered only when a test is positive.

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MalariaCare's key activities include frequent onsite training accompanied by supportive supervision mentoring for laboratory staff and clinicians. The project focuses on enhancing the quality of malaria diagnosis via microscopy at the reference and provincial levels and rapid diagnostic testing at the health zone level. To provide critical services closer to where people live, teams are working closely with the DRC's National Malaria Control Program to train community health workers at sites in nine health zones.

MalariaCare is also supporting the DRC's National Institute for Biomedical Research and a provincial reference laboratory to achieve World Health Organization accreditation and to develop a national archive of malaria slides for training and proficiency testing nationwide.

IMPROVING MATERNAL AND CHILD HEALTH WITH A MULTISECTORAL APPROACH

The DRC suffers from high rates of maternal, newborn, and child mortality. PATH is one of the lead partners in USAID's Maternal and Child Survival Program, which aligns with DRC government efforts to increase coverage of critical health interventions for mothers and children, improve health outcomes in high-burden and vulnerable populations, and establish better health policies.

Further contributing to government efforts to reduce maternal and child mortality is USAID's Evidence to Action project. PATH's role in



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this project is to test models for community distribution of contraceptive services and supplies to stimulate demand and increase access in the provinces of Kasai, Lomami, and Lualaba. Building on the “champion community” approach used so successfully for HIV action under ProVIC, PATH is training a variety of stakeholders, such as local leaders, traditional healers, and teachers. Each volunteer is raising awareness, including educating young men on their role in family planning. Our training also targets nurses from community health centers. Activities occur in conjunction with ongoing project work in HIV, TB, and other health areas.

Understanding the importance of family planning to the well-being of mothers and children, the DRC government has elevated family planning to a national priority and is supporting a total market approach (TMA). A TMA works across the economic spectrum, connecting public and private entities with the population segment each is designed to serve. In a TMA, the public sector typically provides contraceptive products and services to the poor, nonprofits reach other vulnerable populations,

and the private sector serves those who are able to pay commercial prices. Government stewardship, with its coordinating, normative, and regulatory authority, is essential to the success of this approach.

PATH, with support from the David and Lucile Packard Foundation, is working closely with government partners and other TMA “champions” in the DRC. Ongoing activities include fostering and supporting a government-led multisectoral coordinating committee, conducting market research, and implementing a targeted advocacy and communications plan.

SUPPORTING HEALTH POLICIES THROUGH ADVOCACY

PATH leads two immunization advocacy projects in the DRC: one supported by the Bill & Melinda Gates Foundation; the other by Gavi, the Vaccine Alliance. These two mutually reinforcing projects promote expanded coverage, equitable access, and sustainable financing for lifesaving immunization programs. They also benefit from the full range of our technical expertise in immunization—from developing new vaccines



to implementing immunization programs and taking them to scale. Both projects are aligned with DRC government plans and strategies as well as current data and proven solutions.

By presenting research and evidence to national-level policymakers, we support informed decision-making and help the country to prioritize the most effective solutions for maximum health impact. For example, PATH played a key role in supporting the establishment of the DRC's Expanded Program on Immunization Communications and Advocacy Taskforce. As the leading, recognized mechanism for collaboration on immunization advocacy at the national level, the taskforce has helped strengthen linkages and coordination among immunization stakeholders, including UNICEF and the World Health Organization. Members meet regularly to share information and experiences, plan activities, and monitor and evaluate progress toward a joint work plan.

We are also introducing a growing and well-recognized suite of PATH advocacy materials to create a network of informed immunization stakeholders in the DRC. Through advocacy

capacity-strengthening workshops, we expand the ability of civil-society organizations across the country to advocate for and operationalize improved policies and high-quality health services.

Another area of our advocacy work is in human African trypanosomiasis (HAT, or sleeping sickness). A neglected tropical disease, HAT is transmitted by the bite of the tsetse fly and is usually fatal if not treated. The DRC carries the highest global disease burden, with approximately 87 percent of the world's cases, and PATH, with funding from the Bill & Melinda Gates Foundation, is working to ensure the DRC government is well prepared to address the disease. We support not only the continued and expanded prioritization of HAT elimination in the country but also the government's readiness to incorporate potential new drugs, diagnostics, and vector control methods that will accelerate progress.

While our initial work is largely aimed at HAT elimination, what we learn could ultimately help in broader efforts against other neglected tropical diseases in the DRC.

FOCUS ON IMPACT

PATH's innovative approaches empower communities and individuals to manage their health, while our technical expertise enhances services and policies. Our work improves the quality of care for those we reach, increases the supply of and demand for lifesaving technologies and interventions, and strengthens the overall health care environment.

Improving the quality of care

Key achievements:

- Rapid, finger-prick testing for HIV offered in all ProVIC-supported health facilities, including mobile clinics. HIV viral load diagnostics offered to all patients on treatment.
- ProVIC*plus* rolling out new Ministry of Health maternal, newborn, and child health competency-based training-of-trainers with a focus on essential newborn care.
- ProVIC*plus* offering a complete and integrated package of services for HIV and maternal and child health.
- Dramatic increase in the detection and care of tuberculosis (TB)-HIV co-infection and multidrug-resistant TB (MDR-TB).
- MalariaCare supporting the scale-up of high-quality diagnostic and treatment services for malaria and other febrile illnesses in 14 provinces and Kinshasa.
- Family planning efforts ensure that high-quality services reach communities.

Increasing the supply of lifesaving technologies and interventions

Key achievements:

- Transformative role of ProVIC in expanding antiretroviral coverage in more than 100 facilities across multiple health zones and supporting transition to Option B+ (lifelong antiretroviral treatment for all pregnant and breastfeeding women living with HIV) for prevention of mother-to-child transmission (PMTCT).

- Large-scale introduction of GeneXpert® machines achieved throughout the DRC for rapid diagnosis of MDR-TB.
- Community-based distribution of family planning commodities enhanced through "champion communities."
- Availability of family planning products poised to improve women's health through a total market approach.

Increasing the demand for lifesaving technologies and interventions

Key achievements:

- PATH-led approaches, including the Mentor Mother approach, now adopted by Ministry of Health to increase user-driven reach and uptake of PMTCT services.
- Community volunteers trained by PATH are increasing demand for family planning products and services.
- Advocacy capacity-strengthening workshops creating an informed group of immunization stakeholders with the tools to work toward expanded immunization coverage.

Strengthening the enabling environment

Key achievements:

- Comprehensive data analysis and evidence used for program planning and influencing policymakers.
- PATH's robust monitoring and evaluation system adapted to the rigorous standards of the US President's Emergency Plan for AIDS Relief, the Ministry of Health's system, and on-the-ground challenges.
- Maternal and child health project engaging government partners, policymakers, private-sector leaders, health care providers, civil-society and faith-based organizations, and communities in adopting and accelerating proven approaches.
- Funding for immunization programs and elimination of human African trypanosomiasis targeted by PATH advocacy efforts.



LOOKING AHEAD

PATH is committed to improving the health of women, children, and other vulnerable populations in the DRC. With our global expertise, we bring effective, integrated services to the Congolese people.

Collaborating across sectors and building local capacity, we ensure the long-term sustainability of our efforts. And working with government leaders, communities, and other stakeholders in the DRC, we are helping the country to achieve the health targets of the Sustainable Development Goals. Our work to date has laid a solid foundation for even greater health impact tomorrow.

Funders

PATH's work in the DRC has been supported by the Bill & Melinda Gates Foundation; David and Lucile Packard Foundation; Gavi, the Vaccine Alliance; USAID Agency for International Development; US President's Emergency Plan for AIDS Relief; US President's Malaria Initiative; William and Flora Hewlett Foundation; and others.



PATH is the leader in global health innovation. An international nonprofit organization, we save lives and improve health, especially among women and children. We accelerate innovation across five platforms—vaccines, drugs, diagnostics, devices, and system and service innovations—that harness our entrepreneurial insight, scientific and public health expertise, and passion for health equity. By mobilizing partners around the world, we take innovation to scale, working alongside countries primarily in Africa and Asia to tackle their greatest health needs. Together, we deliver measurable results that disrupt the cycle of poor health.

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