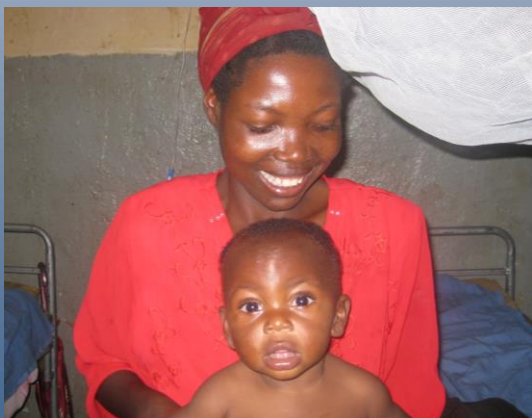


FUNDING LEVEL**\$283M • DFID • 2012 – 2018****Project Objectives**

- Increase delivery of quality primary health care (PHC) services
- Increase ownership and community participation in PHC activities
- Increase access to and coverage of PHC services (i.e. essential curative and preventive services, Water, Sanitation & Hygiene)

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Background

The Democratic Republic of the Congo (DRC) is the second most populous country in sub-Saharan Africa with estimated total population of 71 million people – 47% of which is under 15 years of age. The country has suffered enormously from war and political instability during the last two decades, and fatalities from malnutrition and disease continue due to a lack of access to health care. As of 2012, DRC ranked 186 of 187 in UNDP's human development index.

Building on our extensive work in helping to rebuilding the country's health system since 2002, IMA World Health (IMA) was awarded the Projet d'Accès aux Soins de Santé Primaire (ASSP) to manage a health systems strengthening project funded by the United Kingdom's Department for International Development from October 2012 to March 2018.

Project Activities

ASSP supports DRC's National Health Development Plan by improving primary health care activities in 56 selected health zones in five of the country's 11 provinces including Kasai Occidental, Maniema, Equateur, Oriental, and South Kivu. The total direct and indirect beneficiary population of the project is 8.3 million. ASSP is being implemented using the DRC's framework for accelerating the reduction of maternal and infant mortality through strengthening priority interventions such as the treatment of malaria, pneumonia and diarrhea, nutrition, obstetric and neonatal care, family planning, immunization, and water, hygiene and sanitation interventions. These intervention packages are aimed at improving the health of the mother, newborn and child, thus allowing the DRC to achieve significant progress towards the health-related Millennium Development Goals 4, 5 and 6.

Approach

IMA is the consortium lead for this project that is being implemented in collaboration with the Ministry of Health (MOH) and through its health pyramid, especially at the health zone, health facility and community levels. The project is implemented through assistance from four implementing partners – SANRU, World Vision, CARITAS and the International Rescue Committee (IRC). Four technical partners provide assistance in their respective area of expertise – Tulane University (research); Pathfinder (reproductive health



Anticipated End of the Project Results

- 1.1 million one year old children vaccinated against measles
- 1.2 million deliveries attended by skilled health personnel
- Contraceptive prevalence rates increased from 3.7 to 10%, resulting at least with 400,000 new family planning acceptors
- 1 million long-lasting insecticide-treated bednets (LLINs) distributed to pregnant women and children under five
- 500,000 pregnant women received two doses of IPTp to prevent Malaria
- 11,000 HIV positive pregnant women received prevention of mother-to-child transmission of HIV (PMTCT)
- 5,000 SGBV survivors received post-exposure prophylaxis (PEP) kits within 72 hours of attack
- 1,500 Fistula repaired
- 416 Healthy villages with at least 350,000 with access to improved sanitation and clean water

and family planning); HISP (health information system); and IntraHealth (human resource information systems). IMA and its partners ensure that more than 75% of the project resources are concentrated within the health zones for service delivery, empowerment, accountability and capacity building of local community service organizations partners and MOH representatives.

Reported achievements during 1st Quarter

- Number of births attended by trained health workers is 23,969, reaching 91% of quarterly target
- Number of one year old children vaccinated against measles is 20,305, reaching 88% of the quarterly target
- Number of pregnant women who received two doses of intermittent preventive treatment for malaria prevention is 18,068 reaching 68% of the target for the quarter
- Fast tracked implementation of MOH's priority activities including roll-out of the District Health Information System (DHIS) in the project's health zones. A standard list of indicators has been developed and the DHIS database is being aligned with the DRC's health structure and approved indicators. This system will facilitate timely and accurate reporting of health service delivery data through a computerized system.
- Initiation of the Community Health Endowment program pilot in 407 villages representing 138 different health catchment areas. This activity relies on community participation and is designed to reduce the cost of health care by March 31, 2018.
- Conducted a comprehensive needs assessment of 56 health zones and the related health facilities. This assessment will provide a baseline for tracking improved health outcomes over the five-year life of the project.

