

## Advocacy in action: Strengthening health in the Democratic Republic of the Congo



PATH/Felix Masi

After decades of conflict, the Democratic Republic of the Congo (DRC) has made strides toward rebuilding its health care system with programs and policies that reflect gold standard practices. However, the country's vast geography, limited infrastructure, and newly decentralized government pose daunting challenges to improving health for its 74 million citizens.<sup>1</sup> Despite a reduction in child deaths in recent years, basic health services are inaccessible for a vast majority of communities, and rates of preventable deaths remain at critical levels.

In partnership with Congolese policymakers and civil society organizations, PATH is working to improve health through advocacy at the national level and in key provinces. Efforts are focused on:

- Working with stakeholders to clarify and strengthen immunization policies to prevent child deaths.
- Fostering stronger civil society alliances that will better coordinate efforts and drive policy implementation.

- Advocating for a strategy to prioritize elimination of the fatal human African trypanosomiasis (HAT) disease, commonly known as African sleeping sickness.

### STRENGTHENING IMMUNIZATION POLICY AND COVERAGE

In the DRC, one out of every seven children dies before the age of five,<sup>2</sup> many from vaccine-preventable diseases. Vaccination coverage varies by province and in some communities is as low as 30 percent. Children living in the wealthiest areas are twice as likely to receive vaccinations as those in the poorest communities.<sup>3</sup>

In recent years, policymakers have increased political commitments for immunization by financing the purchase of new and traditional vaccines along with Gavi, the Vaccine Alliance, but funding must still be mobilized. In partnership with Congolese immunization officials, PATH is working to increase vaccination coverage and



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resources across the country, with a focus in the Haut Katanga and Tshopo provinces—two areas with high child morbidity and mortality.

Among the key challenges immunization programs are facing is a lack of clear responsibility for the funding, purchasing, and delivery of vaccines between provincial and national leaders under the newly decentralized Congolese government. As a result, a shortage of vaccines in some provinces has left children at risk of contracting preventable and potentially fatal diseases. PATH is working with key stakeholders to revise a national policy framework that will clearly define the roles and responsibilities of national, provincial, and local governments to ensure vaccines are available for every child—no matter where they live.

As a key founding member of the Expanded Program on Immunization Communications & Advocacy Taskforce, PATH has also helped strengthen coordination among immunization stakeholders, including UNICEF and the World Health Organization. The taskforce is working with members of Parliament to make sure immunization is fully funded in the national budget, and engaging stakeholders in Haut Katanga and Tshopo to ensure advocacy activities respond to local needs.

## FOSTERING STRONGER CIVIL SOCIETY ALLIANCES

The decentralization of the Congolese government has given unprecedented decision-making authority to newly appointed government officials. With 15 new provinces, PATH and key advocacy partners are using evidence-based research to ensure new leaders prioritize immunization in health policies and budgets.

PATH is working to enhance the ability of local civil society organizations to advocate for improved policies

and sustainable funding for quality immunization services. PATH is also fostering a network of informed immunization stakeholders who are equipped with a suite of advocacy materials to ensure vaccines are available across the country.

## WORKING TO ERADICATE SLEEPING SICKNESS

The DRC is home to 80 percent of the world's cases of HAT. A neglected tropical disease, sleeping sickness is transmitted by the bite of the tsetse fly and is usually fatal if not treated. Increased prioritization of this disease could put DRC on the path to eradication,<sup>4</sup> which is feasible with increased prevention, diagnosis, and treatment.

Working directly with the government's neglected tropical disease program, PATH is advocating for a new national strategy focused on sleeping sickness eradication. This includes advocating for the incorporation of new drugs, diagnostics, and vector control methods—which include insect screens and traps—into governing policy documents to ensure interventions are funded and prioritized at the national and provincial level. PATH is also working with the government to develop new educational materials to raise awareness of the risks of sleeping sickness and how communities can help prevent the disease.

## ADVOCACY FOR A BETTER FUTURE

PATH has been working closely with the Congolese government and local communities to tackle some of the country's toughest health challenges since 2009. Advocacy, partnership, and collaboration have laid a solid foundation for robust health impact.

## References

- 1 Democratic Republic of Congo, overview page. The World Bank website. Available at: <http://www.worldbank.org/en/country/drc/overview>.
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- 3 Ministère du Plan et Suivi de la Mise en œuvre de la Révolution de la Modernité (MPSMRM), Ministère de la Santé Publique (MSP), ICF International. Democratic Republic of Congo Demographic and Health Survey 2013-14: Key Findings. Rockville, MD: MPSMRM, MSP, ICF International; 2014. Available at: <https://dhsprogram.com/pubs/pdf/SR218/SR218.e.pdf>.
- 4 World Health Organization (WHO). Trypanosomiasis, Human African (sleeping sickness). Geneva: WHO; 2016. Available at: <http://www.who.int/>.



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