

SUMMARY OF REPORT

Address: Institut Panafricain de Santé Communautaire, (IPASC) Territoire d'Aru, District de l'Ituri, Province Orientale, République Démocratique du Congo.

Postal Address : INSTITIUT PANAFRICAIN DE SANTE COMMUNAUTAIRE, P.O. Box, 623 ARUA (UGANDA).

E-mail address: ipasrcdc@yahoo.co.uk

Web site: www.ipasc.net

Project Number: 201110287

Period of Project: 1 July 2011 – 30 June 2014

Period of Report: 1 July – 31 December 2012

Author of Report: AMUDA BABA Dieu – Merci, Executive Director

We appreciate the close cooperation between our partners and funders and us. They accompany us greatly in achieving the mission of the IPASC serving vulnerable communities. We are deeply grateful for all their support.

This report describes the activities performed by IPASC 1st July to 31 December 2012.

The aim of the project is to improve the health status of the vulnerable population and contribute to sustainable development in the DRC and to contribute to the Millennium Development Goals by 2015. Health issues are at the heart of development issues. Therefore, public health, through its community health component, is essential to deal with major challenges in our communities. The use of health services by the population continues to pose problems in many places in the Democratic Republic of Congo, including Ituri. IPASC is justified in its work because of the continued difficulties in relation to health indicators.

This report summarizes the accomplishments of IPASC through its three-pronged intervention programs covering secondary and university education in community health programmes and combining operational services against HIV / AIDS, safe motherhood (prevention and treatment of problems related to reproductive health) and health promotion (prevention and the fight against local epidemics and endemics).

Various achievements made by IPASC throughout the semester from 1st July to 31 December are summarized as follows:

Training

- Increased number of student placements – 511 – 548
- Continuing education courses for 78 teachers
- Placement of 32 former students in Health Care programmes.

ISPASC

- 40 first year students enrolled
- 5 Scientific papers published
- 5 meetings to monitor and evaluate were held

Students major in one of the following: Community Health; Nutrition and Dietetics Community-Based; Information, Education and Communication; Management of Primary Health Care; Maternal and Child Health; Health Promotion and Education; Managing Health Programs; Reproductive Health.

In the academic year 2011 – 2012, 105 of 129 students achieved 96.7%

ITPASC

- 28 First year students enrolled
- 100 recent study books purchased from UK

Students major in one of the following: Community Health; midwifery; physiotherapy

Operational Programmes

HIV/AIDS: Awareness

- 33 radio broadcasts to raise awareness and educate the population
- 42 radio club members trained
- 135 peer educators trained
- 5416 people reached through community awareness campaigns
- Talks with 54 community leaders and 15 training sessions
- Promotional material for the fight against HIV/AIDS – 50 Tee shirts, 2 banners and 1 panel

HIV/AIDS: Voluntary testing

- Increase in volunteers for testing and receiving counselling (2250 – 2800)
- 134 cases were referred

HIV/AIDS: Psychosocial support

- Training for 193 members of the People Living with Aids (PLWA)
- 163 Home visits made to PLWA
- 18 support meetings for PLWA club and 100 solidarity and credit meetings

HIV/AIDS: Sexually transmitted disease from mother to child

- 3 sessions educational talks for 117 women and 7 men
- 55 pregnant women screened

Safe Motherhood: Awareness

- 767 women received instruction
- 1279 adolescents educated and clubs were formed
- Large increase in numbers of people informed directly or by radio

Safe Motherhood: Equipping

- 7 health centres were equipped with birth kits and mattresses

Safe motherhood: Fistula

- 88 women had fistula repaired
- 10 women supported in income generating activities
- 250 posters and 100 tee shirts produced
- 12 women counselled following sexual violence – decrease from 92

Safe motherhood: Training

- 45 midwives and birth attendants trained

Health promotion Service: Awareness

- A system of community relay teams has been set up to inform and educate: 86 peer educators trained
- 41 Community leaders trained
- 1900 school children were educated in the use of ant malaria nets
- 99 people were trained for radio clubs
- 82 members of water source management committees trained

Health promotion: water sources

- 9 water sources built and local committees formed for maintenance
- 3 latrines built

Health promotion: raising awareness

- 6 radio broadcasts on water, sanitation, hygiene, and malaria
- 130 posters, 50 Tee shirts and 8 educational panels were produced

The work of IPASC has contributed to lowering death rates: Maternal and new born death; acute respiratory disease; diarrhoea; malaria; HIV/AIDS.

IPASC plans its work through weekly staff meetings, bi-monthly executive meetings; evaluation and monitoring of student training and operational projects. It has a policy of equal rights and employs women as far as cultural and family constraints allow. It organises staff training to ensure a high standard in teaching and operating the health programmes. When it is possible, staff members go for advanced training at other Universities.

Mrs. Lily NYAMUNGU and Mr. Jacques BYUCINDA are still at the Free University of the Great Lakes Country (ULPGL / Goma). Mrs. Lily continued her training in diploma(DEA) in public health while Mr. Jacques BYUCINDA, is in the last year of its Licensing Program Health & Development. A refresher course was organised at Aru for the staff of IPASC on interpersonal communication skills.

Infrastructure is maintained and improved. This year includes a new teaching block, (Bunia), a boy's dormitory, (Aru) and a well (Bunia).



The well on the Bunia Campus ensures safe drinking water for students, staff and the local community

TESTIMONIES: HIV



Mr NDULO very desperate, with wounds on the base of his feet



Mr NDULO receives a home visit from his peers and is encouraged by them



Mr NDULO healed and with a bicycle given by CARM he is, in turn, visiting others



Educating pupils to have voluntary testing at the village of BIRINGI



Voluntary testing after education



The pupils receive the results of the tests

Women healed of fistula are reintegrated into their communities after years of rejection

Mrs PARITSIA is a 38-year-old woman, the victim of fistula for 16 years. She lives in the village Health Zone of Kambala on the border with Uganda.

At the age of 22, she had her first pregnancy. Appropriate health structures do not exist in the area surrounding Ms. PARITSIA. She went to Uganda for delivery though the cost was high there. Contrary to all expectations, the situation turned into tragedy and Mrs PARITSIA miscarried and was unable to hold her urine. All this time she lived with it and was repelled by her people and lived a life full of sadness.

The fistula was repaired after an awareness campaign organised by IPASC in collaboration with Dr. Christina. Since then she testifies thus: "I took my place back with my family all thanks to IPASC. A thousand times thank you to IPASC otherwise I would already be dead from depression following the isolation which I was subjected to for 16 years

Mrs Monokuma Acaye, 49 years old, has experienced a tragedy. Married too young, she made her first obstructed labour and consequently it was after surgery, she noticed that she simply could not hold her urine or stool, which further aggravated her troubles. In fact she could no longer live with her husband, who had taken the option of taking another wife.

Thus, she lived this nightmare for almost 23 years. Divorced from her husband, hated by her community, she decided to simply isolate herself from the common man by building a house outside the village. She was to find salvation with the arrival of IPASC passing through communities to raise awareness and identification of women with Fistula for repair. After repairs, she returned to thank the IPASC and has been reinstated in her home and her family after a long period of rejection; this is what she said with much emotion: Thank you and thank you again to IPASC for giving me an unforgettable service – I am literally reborn.

Typical characteristics of water sources used by the communities



Typical characteristics of water used before building safe source



Source used by community after building safe source



Official hand over of source by IPASC to the community