

# Democratic Republic of Congo

## Community, Rights and Gender Country Profile

WORKING DOCUMENT



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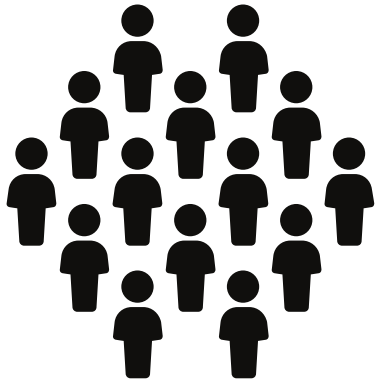


**CRG Interventions**



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# Quick Facts



**89.56 million people**

**WORKING DOCUMENT**



**High TB, TB/HIV and  
MDR/RR TB Country**

# UNHLM Targets



## Resource Needs (2021)

57.19 million (USD)

## Available TB Funding 2020 (USD)

Domestic: 1.1 million

International (Excluding Global Fund): 2.2 million

Global Fund: 18.5million

Funding Needs: 25.4 million

## Diagnosis and Treatment Targets (2020)

TB Target: 263,100

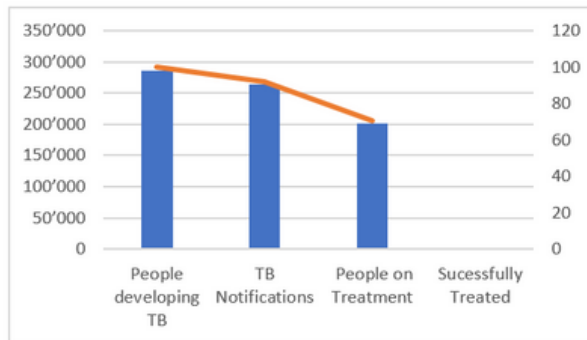
% Target Achieved: 77

# National Strategic Plan and Funding Opportunities

- Next National Strategic Plan Development: **2024**
- Next Global Fund funding request (proposal development): **2023**

# TB Situation

## Epidemiological Data (2020)



Source: Stop TB Country Dashboard  
[https://www.stoptb.org/static\\_pages/COD\\_Dashboard.html](https://www.stoptb.org/static_pages/COD_Dashboard.html)

### Major Gaps in TB Prevention and Care

- 85,045 Missing people with TB (15,660 were children)
- 41,000 people died because of TB
- 1059 Laboratory confirmed people with MDR/RR-TB (WHO data, 2020)

**Acceptability issues** include restrictive use of DOT especially in rural areas, lack of respect for confidentiality of TB test results and status, stigmatizing and discriminatory treatment in clinics, lack of specific support for elderly and poor organization of TB services for children.

**Quality issues** include restrictive use of DOT especially in rural areas, stigma & discrimination in clinics, untrained healthcare workers (HCWs) in some clinics and long wait times for test results.

**Discrimination:** people with TB experience stigma and discrimination from family members, at the health facilities and in the community. There is no legal prohibition of TB discrimination.

**Freedoms:** HCWs violate privacy and confidentiality of people with TB by disclosing their test results and status. Also criminalization of drug use and the narcotics law enforcement causes barriers for PWID and hemp smokers. There is no law on isolation or guidelines for hospitalization or confinement of people with TB. There is no legal protection for right to privacy or confidentiality of people with TB.

**Gender:** there is a lack of sex disaggregated data for TB prevalence and mortality. Women have limited say in health decision-making in families while stigma is a major barrier to healthcare for men. Trans persons with TB are not addressed by law. Also, the national gender policy has not been updated for about 10 years. Tribal, customary laws and norms are discriminatory towards women including the laws on marriage and sexual relations.

**Key and Vulnerable Populations** prioritized: PLHIV, TB contacts, PWID and smokers. TB contacts experience poor ventilated and overcrowded living conditions, unhealthy environments, food insecurity and lack of TB prevention information. PWID and smokers experience access barriers due to criminalization of drug use, stigmatizing and discriminatory treatment by HCWs, lack of nutritional support during treatment, lack of mapping and specific national health policies and guidelines for key population. TB screening of PLHIV is not systematic often PLHIV have to pay for x-ray and TB-LAM tests.

## Community, Rights and Gender Data

The CRG assessment conducted in 2018 revealed the following

**Accessibility Barriers:** there are fees for consultations, x-rays and sputum tests at clinics despite that TB services being free. The cost of transport to clinics, lack of information about TB services and legal rights, lack of nutritional support, distance to clinics in remote areas and criminalization of drug use for PWUD impedes access to TB services.

**Availability Barriers** include drug stock-outs, lack of quality diagnosis technologies including rapid molecular tests, lack of integrated TB/HIV services and lack of preventive treatment in clinics

# Community Engagement and Representation

Active National Stop TB Partnership

- Yes

National Network of People Affected by TB

- Club des Amis Damien

TB Network/Community represented on CCM

- N/A

National High-Level Engagement with Parliamentarians

- N/A

Celebrities Engagement in TB response

- N/A

Challenge Facility for Civil Society Round 10

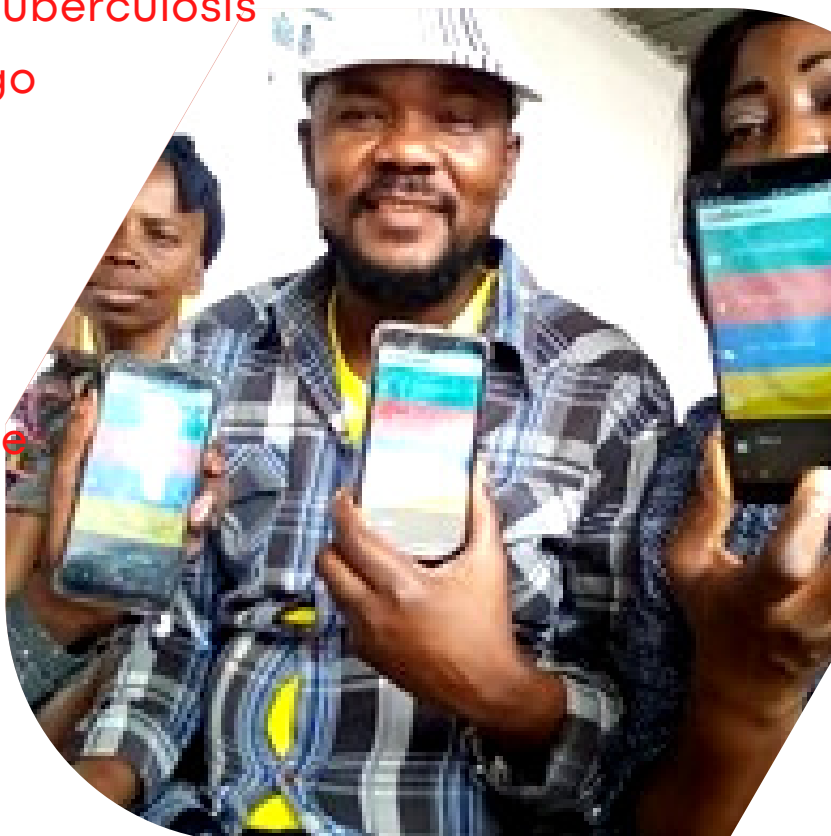
- Club des Amis Damien
- National League Against Tuberculosis and Antileprosy of DR Congo (NLAC)

CFCS Round 10 Regional Level Partners

• Dynamique de la réponse d'Afrique francophone sur la tuberculosis (DRAF TB)






- TB People
- Lean on Me Foundation/

TB Women



# Community Rights and Gender



- CRG Assessment Complete 
- Costed CRG Action Plan Available 
- TB Stigma Assessment Conducted
  - In progress, to be funded by TGF grant and STP TA. 
- TB Stigma Elimination Plan Available
  - In progress, to be funded by TGF grant and STP TA 
- Community-led Monitoring Mechanism in place 



# CFCS Round 10 Grantees

## Club des Amis Damien

- **Global Fund Sub-sub recipient**
- Project Location: Kinshasa, Kongo Central, Tshopo
- Timeline: November 2021 - November 2022
- Objectives
  - To strengthen the engagement of key and vulnerable Populations in the TB response in DRC.
  - To strengthen strategic partnerships to support and strengthen a human rights-based to TB in the context of COVID-19 in DRC.
  - To deploy OneImpact CLM for community-led evidence-based advocacy and social accountability in 3 provinces (Kongo Central, Kinshasa and Tshopo) in DRC.
  - To participate and engage in TB advocacy and accountability initiatives at national, regional and global levels.

# CFCS Round 10 Grantees

## National League Against Tuberculosis and Antileprosy of DR Congo (NLAC)

- **Global Fund Sub recipient**
- Project Location: Kinshasa, Kongo Central, Kasai Oriental, Haut Katanga
- Timeline: January 2022 - January 2023
- Objectives
  - To raise awareness among TB stakeholders about the impact of C19 on the TB response in the Democratic Republic of Congo.
  - To monitor the impact of C19 on the TB response, from the perspective of affected communities in the Democratic Republic of Congo.
  - To develop a Plan of Action to respond to the survey findings for the Democratic Republic of Congo
  - To participate and engage in TB advocacy and accountability initiatives at national, regional, and global levels.

# Questions? Contact us.

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