DEMOCRATIC REPUBLIC OF THE CONGO

DHAPP

DEPARTMENT OF DEFENSE HIV/AIDS PREVENTION PROGRAM

REDUCING THE INCIDENCE OF HIV/AIDS AMONG UNIFORMED PERSONNEL IN SELECTED AFRICAN NATIONS AND BEYOND

WINNING BATTLES IN THE WAR AGAINST HIV/AIDS

BACKGROUND

Country Statistics

The estimated population of the Democratic Republic of the Congo is 66.5 million people, with an average life expectancy of 54 years. French is the official language of the Democratic Republic of the Congo, which has an estimated literacy rate of 66%, with uneven distribution between men and women. The Democratic Republic of the Congo, a nation endowed with vast potential wealth, is slowly recovering from two decades of decline. Since August 1998, internal conflict has dramatically reduced national output and government revenue, increased external debt, and resulted in the deaths of more than 3.5 million people from violence, famine, and disease. The GDP per capita is $300. Conditions began to improve in late 2002 with the withdrawal of a large portion of invading foreign troops.

HIV/AIDS Statistics

The HIV prevalence rate in the general population is estimated to be between 1.2% and 1.5%. The primary identified risk factor in the population is unprotected heterosexual contact.

Military Statistics

The Armed Forces of the Democratic Republic of the Congo (AFDRC) include between 300,000 and 475,000 members. This military, still in the process of rebuilding after the end of the war in 2003, is one of the most unstable in the region. The Democratic Republic of the Congo allocates 2.5% of the GDP for military expenditures. DHAPP supported the first HIV seroprevalence study for the AFDRC, which was conducted in the capital city of Kinshasa from July to August 2007. Results from this study revealed an HIV rate of 3.8%.

PROGRAM RESPONSE

In-Country Ongoing Assistance

The network of partners involved in the AFDRC program have evolved to include an in-country program manager who works for the US DAO and is working closely with JHCP, PSI, and FHI. DHAPP staff provide oversight for the in-country program manager and technical assistance.

Foreign Military Financing Assistance

The Democratic Republic of the Congo was awarded Foreign Military Financing funding for the acquisition of laboratory equipment, and supporting reagents and supplies related to the diagnosis and treatment of HIV/AIDS. This award was appropriated for 2005, 2006, 2007, and 2008, but it has not yet been released for expenditure. Planning and negotiation for funding procurements are currently under way.

OUTCOMES & IMPACTS

Prevention

PSI reached 12,094 military personnel (377 women, 11,717 men) with interpersonal education sessions conducted by 147 trained peer educators. During these interpersonal education sessions, the adoption and maintenance of less risky sexual behaviors were discussed, such as abstinence and being faithful, condom use, and being tested for HIV. Peer educators were trained and retrained in behavior change communication techniques concerning STI/HIV/AIDS prevention and social marketing. During this fiscal year, 880,200 condoms were distributed to the military by peer educators at the military camps.

Also in FY08, PSI reached 53,152 military personnel, their families and surrounding civilian populations of the military camps in Kinshasa, Lubumbashi, and Mbuji-Mayi. They were reached through mobile video unit education sessions. Films on HIV/AIDS prevention were projected onto the mobile screens. Themes covered during the educational sessions included modes of transmission, how to prevent HIV, CT promotion, how to effectively adopt and maintain less risky sexual behaviors. The audience participated through an interactive question-and-answer session in which they were asked to give their points of view on what they viewed.

The JHCP trained 120 peer educators in HIV prevention and stigma/ discrimination, and 30 military medical personnel were trained in STI/OI management. A total of 27 peer sessions were held, with approximately 2,025 troops reached with comprehensive prevention messages. Thirty (30) troops were trained on blood safety. In addition, the JHCP trained 30 individuals on palliative care.

Other

The first seroprevalence study for the AFDRC was conducted in the capital city of Kinshasa from July to August 2007. JHCP provided technical assistance and oversight for this study. During FY08, the JHCP completed the HIV surveillance report and officially handed it to the MOD in Kinshasa. Results were released by the MOD and revealed a rate of 3.8%.

In FY08, 2 CT centers were renovated in Mbuji-Mayi and Lubumbashi. The centers will enable the military, family members, and civilians living near the centers to have access to quality CT services. A total of 6,469 individuals (4,048 troops and 2,421 troops' family members and civilians) were tested for HIV and received their results. There was a delay in starting CT activities in Kinshasa; therefore, fewer individuals were tested than targeted for FY08. FHI will be doing outreach for CT services at all sites to increase the uptake of individuals receiving services. Twelve (12) military counselors and laboratory technicians were trained in Kinshasa to provide CT services.

Proposed Future Activities

DHAPP received proposals from the Global Viral Forecasting Initiative (Dr. Nathan Wolfe, formerly of JHCP, is the founder and principal investigator), PSI, and FHI on behalf of the AFDRC and in conjunction with the in-country program manager for activities during FY09. Proposed activities include promoting CT and psychological support in military regions by training counselors in the military health centers, continuing prevention education for troops, training peer educators, and developing TV/radio promotional segments for the military.