



IMA WORLD HEALTH

GBV Response Through Post-Exposure Prophylaxis Kit Procurement and Distribution IV

in the Democratic Republic of Congo



THEORY OF CHANGE: If health facilities have access to and maintain appropriate levels of MoH-approved PEP Kit stock and are staffed by providers trained in and following the national protocol for PEP Kit administration, then the proportion of eligible survivors who are administered a PEP Kit will increase, thereby reducing the risk of HIV and STI transmission among survivors of sexual violence.



GOAL: The project aims to bring PEP Kit coverage up to 100% in health facilities across 5 provinces affected by humanitarian crises and with high prevalence of gender-based violence (GBV). Kits will be provided to an estimated 40,942 eligible patients (survivors who arrive at a health facility within 72 hours of an incident).



BACKGROUND: The Democratic Republic of Congo (DRC) continues to face acute and complex humanitarian crises characterized by internal displacement and widespread insecurity. In 2020, protracted conflicts in the eastern part of the country and the COVID-19 pandemic further exacerbated the already dire economic situation and further limited household access to basic services. GBV remains a significant problem in DRC, intensified by conflict in the central and eastern provinces. The increase in reported cases of GBV over the past two years is confirmed by routine health data. In the 5 provinces targeted by the current PEP Kit project, there was an increase of 34% in reported GBV cases between January 2020 and December 2022. Based on data from District Health Information Software 2 (DHIS2), 40,615 GBV cases were reported in 2022 compared to 30,313 cases in 2020 and 33,015 in 2021.



KEY TARGETS: 2022-2024

IMA works closely with Tier 1 and Tier 2 partners (USG partners with GBV and health activities and other international and local NGOs implementing health or GBV prevention activities) to ensure maximum PEP Kit coverage of health facilities in the target provinces while coordinating with local state health actors to meet the needs of the target population.



660

Number of health care providers that will be trained in GBV survivor care or CMR and waste management in selected health zones.



40,942

Number of survivors estimated to receive a PEP Kit within 72 hours of assault.

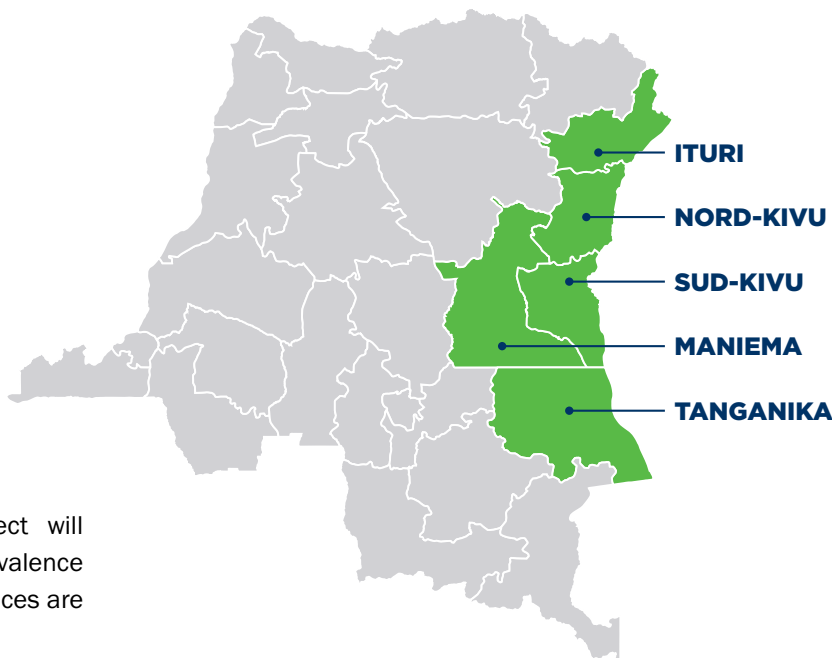


50,927

Number of PEP Kits that will be distributed to health facilities from IMA World Health, Tier 1 and Tier 2 partners.



It is estimated that approximately **10% of the GBV survivors (or 4,094 individuals)** could be Internally Displaced Persons (IDPs).



TARGET PROVINCES: The project will target 5 provinces with the highest prevalence of GBV cases in the country. These provinces are indicated on the map to the right.

In addition, IMA uses a quasi-real-time inventory tracking software to improve PEP Kit tracking and ultimately help prevent and avoid stock outs and overstock. IMA has extensive experience deploying analog-based open source platforms for managing low-resource supply chains globally. In DRC, IMA has used analog-based mobile phone technology (ODK) for monitoring and data collection in various projects including the distribution of more than 1.3 million long-lasting insecticide-treated nets in 456,000 households,

identification of food security beneficiary households, as well as agricultural input distributions. IMA's PEP Kit tracking strategy tracked individual PEP Kits from kitting, through the supply chain, to the health zone level. This low-cost approach to tracking PEP Kits leveraged the largest technology sector in DRC, cellular networks, to provide quality data while building in a reporting structure through the health zones and Provincial Health Division (DPS) to the IMA team.

KEY ACHIEVEMENTS: 2018-2022



1,754

Number of people trained in medical commodity supply chain management and/or survivor care.



94,941

Number of survivors who received PEP Kits within 72 hours of rape.



107,836

Number of pre-packaged PEP Kits distributed to health facilities in coordination with Tier 1 & 2 partners, with support from the Ministry of Health, National AIDS Control Program, and the National Program for Reproductive Health.