

HEAL AFRICA

2021 ANNUAL REPORT

care ● community ● commitment



HEAL Africa compassionately serves vulnerable people and communities in the Democratic Republic of the Congo through a holistic approach to
Healthcare,
Education,
community **Action,**
and **Leadership** development in response to changing needs.

LETTER FROM THE CEO



Dear HEAL Africa Partners,

It is a privilege for me to thank our Lord, and all of you, our partners, for granting us another year to serve.

For some time, the whole world has been going through a tumultuous time due to the Covid- 19 pandemic. This pandemic has affected us in a variety of ways, both professionally and in our respective families. We continue to face the various challenges and constraints that this pandemic imposes on us.

Very recently in May 2021, we faced the eruption of the Nyiragongo Volcano in Goma. As a result of this eruption, we were forced to leave our homes and evacuate our offices and the hospital. This situation accentuated the difficulties we were already experiencing, following the Covid-19 pandemic. Yet you remained committed to supporting HEAL Africa and determined to continue serving the most vulnerable.

We give thanks to the Lord, the Master of times and circumstances who has sustained us and shown us His greatness by keeping us healthy and blessing you in various ways. With the help of the Lord and from you, our partners, we have achieved what is to be considered as a miracle during particularly difficult times: new construction in the hospital; training and research activities; the strengthening of the spiritual accompaniment for our beneficiaries, and (new) community projects covering new areas. It is for this that I am grateful to each of you for your unwavering commitment to the work of HEAL Africa, and that our God has placed us as a light in the midst of darkness.

We remain committed to the growth of HEAL Africa on all fronts. The improvement of infrastructure, the empowerment of people and the service to be rendered to the most disadvantaged people, will remain at the center of our actions, for the year 2022. By faith and with your support, we remain confident that our dreams will materialize.

Alone we can only do very little, but united, we will do more and please the Most High! Thank you very much.



LIST OF ABBREVIATIONS

HEAL: Health, Education, community Action, Leadership development
NC: Nehemiah Committee
NC: New Case
OC: Old Case
CD: Community Dialogue
WASI: Wamama Simameni (Women Stand Up)
IGA: Income Generating Activity
VSLA: Village Savings and Loan Association
PMTCT: Prevention of Mother-to-Child Transmission
PCIMA: Integrated Management of Acute Malnutrition
CAP: Children Aid Program
NEONAT: Neonatology
GBV: Gender-Based Violence
SAE: Sexual Abuse and Exploitation
ARV: Antiretroviral
UNTA: Ambulatory Nutritional Unit **UNTI:**
Internal Nutritional Unit
MAS: Severe Acute Malnutrition
SGBV: Sexual Gender-Based Violence
S-3G: Stability –Gender, Community Guarantee, One-Stop Center and Supply Chain Management of
Essential Medicines
FHRDC: Humanitarian Fund in the Democratic Republic of Congo
PFCGL: Projet de Facilitation du commerce dans la Région des Grands Lacs (Trade Facilitation Project
in the Great Lakes Region)
PRVBG: Prévention et Réponse aux Violences Basées sur le Genre (Prevention and Response to Gender-Based
Violence)
FSRDC: Fonds Social de la République Démocratique du Congo (Social Funds of the Democratic
Republic of Congo)
SVV: Sexual Violence Victim
PEP KIT: Post-Exposure Prophylaxis Kit
OVC: Orphan Vulnerable Child **GSF:**
Goma Student Fund
CBM: Christian Blind Mission
SDG: Sustainable Development Goals
HZ: Health Zone
OSC: One Stop Center
STIs: Sexually Transmitted Infection
ANC: Antenatal Consultation
ECODIM: Sunday School (Ecole de Dimanche)
IM: International Ministries
NG: Number of Groups
NP: Number of participants
NS: Number of Sessions **PROPAIX:**
Peace Project
LPI: Living Peace International
LIA: Love In Action
NE: Notre Espoir (Our Hope)
HA: HEAL Africa

INTRODUCTION

As the COVID-19 pandemic continued its second year, North Kivu province, DRC, faced an additional challenge, dealing with the 12th epidemic of Ebola virus disease. And almost halfway through 2021, Mt. Nyiragongo erupted for the second time since HEAL Africa began its operations. It was a terrifying period characterized by earthquakes that followed the eruption and consequently a government mandated evacuation in the city of Goma.

These unfortunate events have had disastrous consequences on the daily life of the North Kivu population in general and that of Goma city, in particular. Already facing multiple problems related to insecurity, health and socio-economic instability, the population of this part of DR Congo got drawn into a galloping vulnerability.

To the extent of its means and that of its partners, HEAL Africa conducted activities aiming to bring solution where the need appeared the most appealing.

This report highlights the achievements that HEAL Africa has achieved during the year 2021 through its three departments, which are set as follows:

- The HEAL Africa Tertiary Hospital located in Goma.
- Community Projects implemented in different provinces of DRC.
- Training and Research conducted in the hospital and in community projects.

CHALLENGES ENCOUNTERED

1. COVID-19 pandemic and its consequences

The Covid-19 pandemic raging around the world since December 2019 continued to make victims and its negative consequences on all sectors of life in Goma city multiplied. The third variant, Delta, hit Goma between July and October 2021. Numerous people were admitted to intensive care, and deaths were registered at HEAL Africa Hospital. Our Covid Patient Isolation and Treatment Centre, which was established at the beginning of the pandemic in 2020, played a key role in the response to the pandemic.

HEAL Africa's Oxygen Plant was utilized past capacity to meet the needs of patients at the hospital and the demands from other health facilities in the city of Goma. The work has been demanding on the HA medical staff. Several nurses, doctors and administrative staff contracted the coronavirus. Fortunately, HA did not register any deaths among personnel.

2. Nyiragongo volcano eruption

The Nyiragongo volcano, situated 12 miles/19 km north of Goma, erupted on the night of May 22, 2021. Powerful earthquakes followed the catastrophe, displacing the population of Goma to the outskirts of the city and to neighboring countries.

Much of the hospital's materials, equipment and medicines were moved to the western part of the city (Mawe Hai), and patients were evacuated to other hospitals. During the evacuation, HEAL Africa hospital experienced huge damage.

3. Care to vulnerable patients

The majority of the population living in Goma is poor. Covid-19 pandemic and the volcano eruption in May 2021 have increased their vulnerability, and thus affected the environment around Goma.

Donations and contributions through the Mercy Fund received by HEAL Africa during the year 2021 helped to take care of those in absolute poverty, free of charge. However, care bills, treating mostly women and children, rated at **USD 78,887.89**, remains unpaid as of 31 December 2021.

MAIN ACHIEVEMENTS OF 2021

A. Hospital

1. Rehabilitation and inauguration of HEAL Africa hospital's Emergency and ICU departments.
2. Installation of an electric incinerator and two industrial washing machines placed in the hospital laundry room.
3. Installation and functioning of a new digital X-ray machine.
4. Purchase of a new endoscopy device.

B. WABABA Sector, Men and Churches

1. Training and supervision of faith and community leaders grouped into 262 Nehemiah committees on the transformation of masculinities. Of them, 2340 participants testified important transformations in social relations between men and women.
2. After the volcanic eruption and earthquakes that followed, HEAL Africa assisted 100 affected households with food and non-food items.

C. WAMAMA Sector

1. Holistic care for survivors of sexual and gender-based violence.
2. Raising awareness on HIV prevention, SGBV and SAE.
3. Repairing gynecological and uro-genital pathologies (obstetric fistula, prolapse, etc.) during outreach missions and at HEAL Africa hospital.
4. Providing support to SGBV survivors in IGA, support to VSLAs.
5. Training of healthcare providers in different themes regarding holistic care to SGBV survivors.

D. WATOTO Sector

1. Significant progress in the management of severe acute malnutrition, with a healing rate of 98.1% of malnourished children under our care.
2. Coordination of outreach missions in the Nyiragongo Health Zone after the volcanic eruption, where HEAL Africa saved the lives of seven newborns, whose mothers were in extreme obstetric emergency.

PRAYER REQUESTS

1. Continue to improve the leadership of HEAL Africa.
2. Good health for the HEAL Africa staff.
3. More means and opportunities for HEAL Africa partners.
4. Restoration of peace and stability in DRC. May the country leaders live in fear of the Lord.

I. HEAL AFRICA TERTIARY HOSPITAL

I.1. OUTREACH (MOBILE SURGERY)

In 2021, HEAL Africa organized 10 mobile surgery missions. Four concerned uro-gynecology, and six were general surgery (plastic surgery).

In rural areas, 779 patients were successfully operated on:

- 366 lips and palate clefts repaired.
- 413 uro and recto genital fistulas, genital prolapse and other childbirth-related complications repaired.

NB: Correction of club feet in clinics out of HEAL Africa:

With support from the HOPE WALKS project, a total of **838 club feet** were corrected applying the **PONSETI method**, with **135 in Goma** and **703 in other clinics** supported by HEAL Africa.

Table 1: Outreach missions carried out by HEAL Africa from 2013-2021

Year	2017	2018	2019	2020	2021
Missions accomplished	14	12	9	13	10
Beneficiaries in Orthopaedics	244	77	158	253	0
Beneficiaries in Uro-gynecology	390	530	241	305	413
Beneficiaries in general surgery	465	284	277	133	366
TOTAL (Beneficiaries)	1,099	891	676	691	779

Note: Out of 10 mobile surgery outreach missions held in 2021, HEAL Africa's medical teams treated **779 patients** (cleft lip, fistula, etc.).

I.2. EXTERNAL CONSULTATIONS

During the year 2021, **48,204** cases consulted as outpatients. Among them, 21,045 (**44%**) men and 27,159 (**56%**) women. **38,618** (80%) of these were new cases and **9,586** (19.9%) old cases.

Among the cases consulted, there are **13,993** (29%) children under 5 years of age and **9,409** (19.5%) pregnant women.

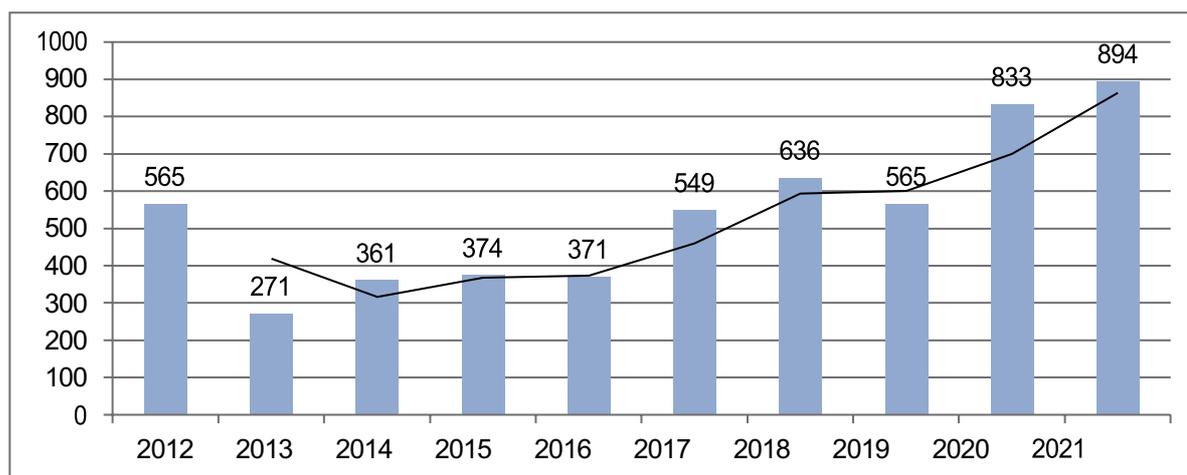
During the year 2020, **43,315** cases were seen in outpatient consultation. This is an increase of more than 10% (11.3%) compared to the year 2020.

I.3. SEXUAL AND GENDER-BASED VIOLENCE (SGBV)

894 new cases of sexual violence survivors were recorded at HEAL Africa Hospital in 2021.

- 409 (46%) cases recorded within 72 hours after the rape benefited from free PEP kits.
- 894 (100%) benefited from psychological care.
- 611 (64%) received legal support (legal advice).

Figure I: SGBV cases treated at HEAL Africa Hospital from 2013 to 2021



Note: The increase in the number of SVS cases can be interpreted as the appropriation of services by the community and the effectiveness of actions in the field by HEAL Africa staff.

I.4. PREVENTIVE CONSULTATIONS

The HEAL Africa Health Centre offered the following preventive services:

- **6,330** Antenatal Care (ANC)
- **28,777** Preschool Care (PSC)
- **907** Post-Natal Consultation (PNC)
- **500** cases of malnutrition
- **569** cases registered for Family Planning (FP), an increase of 23% of adherence to the family planning method comparatively to the previous year (437 in 2020).

38,023 old and new cases in total were served at the HEAL Africa Health Centre:

Table 2: Clients Served at the Health Centre in 2021

	New cases	Old cases	TOTAL
Antenatal Care (ANC)	1,396	4,934	6,330
Preschool Care (PSC)	2,584	26,193	28,777
Family Planing (FP)	287	282	569
Post-Natal Consultation (PNC)	0	907	907
Fully Vaccinated Child (FVC)	934	6	940
Nutrition	257	243	500
TOTAL	5,458	32,565	38,023

Table 3: Achievements of preventive activities at the Health Centre from 2017 to 2021

	2017	2018	2019	2020	2021
ANC	6,091	6,595	5,699	5,799	6,330
PSC	13,304	20,270	15,152	21,241	28,777
Family Planning	1,273	967	538	437	569
Nutrition	609	586	788	402	500
PNC	2,179	2,521	2,304	1,696	1,288
ECV	1,259	1,472	931	963	940
Total	24,715	32,411	25,412	30,505	38,023

Note: This chart notes the following achievements:

- An increase of 631 (10%) cases compared to the year 2020, of women who come to follow their antenatal consultations at HEAL Africa Hospital.
- An increase of 7,536 children followed in preschool consultation (26%) compared to the year 2020
- An increase of 132 (23%) in the number of women joining family planning and 98 (20%) in the malnourished child care unit.
- An increase of 1% (9) children fully vaccinated.

I.5. OPERATING THEATER ACTIVITIES

Surgical procedures performed in Goma

For the year 2021, HEAL Africa hospital's operating room in Goma performed **2,485 surgical procedures** among of which were 824 (33%) major acts, 885 (36%) medium acts and 776 (31%) minor acts.

Specialized surgical interventions performed in outreach

In 2021, HEAL Africa surgical teams performed **779 specialized interventions** in isolated rural areas (Outreach), and **878 in Goma**.

Table 4: Pathologies requiring specialized surgical interventions in and outside Goma in 2021

Pathologies	Outreach	Goma
Hydrocephalus	0	7
Harelip	366	33
Spina bifida	0	6
Total hip and knee prostheses (Osteonecrosis of the Hip)	0	19
Varum knee and Valgum knee	0	59
Operated clubfoot	0	4
SIGN	0	85
Osteosynthesis	0	245
Fistula	254	77
Prolapse	124	240
Other gynecological complications	35	89
A nal imperforation	0	5
Sub/extradural hematoma	0	6
Hypospadias	0	3
TOTAL	779	878

Table 5: Specialized surgeries conducted from 2017 to 2021

	2017	2018	2019	2020	2021
Goma	3,450	4,130	3,895	518	550
Outreach	1,153	891	841	643	787
TOTAL	4,603	5,021	4,736	1,161	1,337

Note: Compared to the year 2020, there has been a significant increase of 25% of specialized surgical interventions in Goma in 2021, and an increase of 60% in Outreach.

1.6. CHILDBIRTH

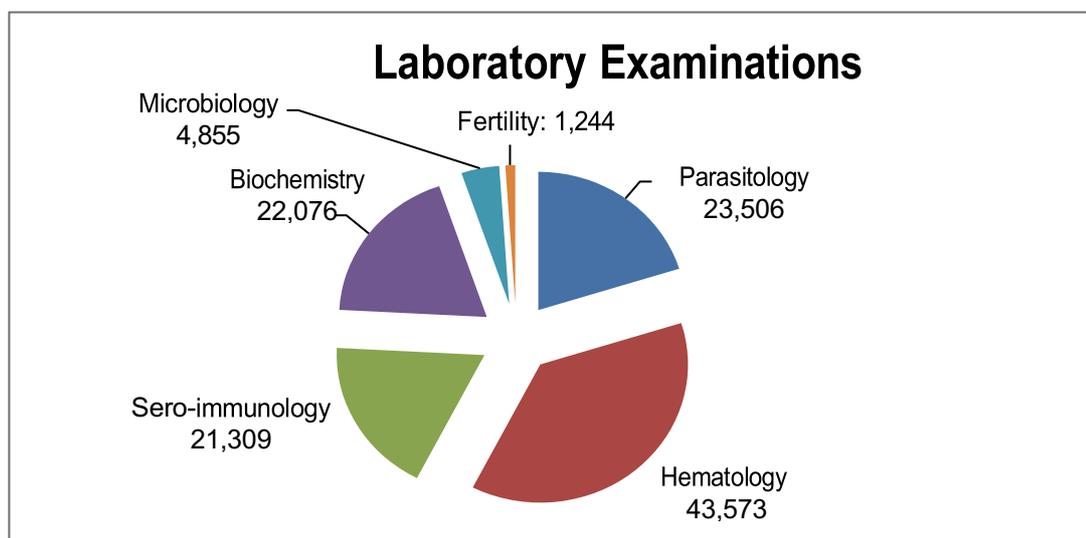
The Obstetrics-Gynecology Department carried out 1,416 deliveries during the year 2021, among which 743 were vaginal and 673 by caesarean section, including 130 (19%) cases of scheduled caesarean section and 543 (81%) cases of emergency caesarean sections. There were four (4) cases of maternal deaths throughout 2021.

Table 6: Types of deliveries performed at HEAL Africa Hospital from 2017 to 2021

	2017	2018	2019	2020	2021
Normal (vaginal) deliveries	957	1,105	781	706	562
Difficult Vaginal birth	252	71	186	197	181
Cesarean section deliveries	679	654	758	795	673
TOTAL	1,888	1,830	1,725	1,698	1,416

1.7. LABORATORY EXAMINATIONS

Figure 2: Laboratory tests conducted in 2021



Note: 116,563 examinations in total were requested for ambulant and hospitalized patients.

Hematological investigations were the most requested with a rate of 37% followed by sero-immunology and parasitology with 20% of cases (including examinations such as malaria test, microscopic examination of stool, urines and other samples for the search for parasites).

I.8. MEDICAL IMAGING

In 2021, the medical imaging department conducted **13,820 examinations**.

Table 7: Medical Imaging examinations from 2017 to 2021

	2017	2018	2019	2020	2021
Radiology	5,544	6,272	6,772 (50.4%)	7,005	6,926 (46%)
Ultrasound	3,498	5,383	5,993 (44.7%)	7,043	7,565 (50%)
ECG	422	467	579 (4.3%)	728	570 (4%)
Scanner		145	81 (0.6%)	0	0 (0%)
TOTAL	9,464	12,267	13,425 (100%)	14,776	15,061

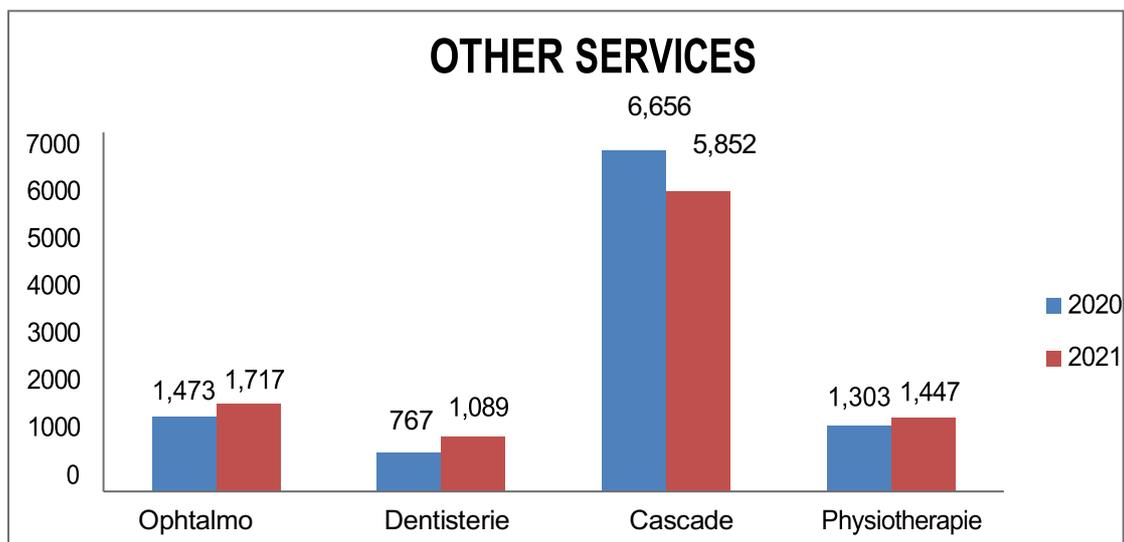
I.9. OTHER HOSPITAL SERVICES

Endoscopy

Table 8: Number of endoscopic examinations performed from 2015 to 2021

	2017	2019	2020	2021
Esophago-gastro-duodenoscopy	97	131	95	54
Colo-rectoscopy	18	46	5	12
TOTAL	115	177	97	66

Figure 3. Other hospital services



Note: There was a slight decrease in the attendance of the year 2021 compared to the year 2020.

I.1. OTHER QUALITY CARE INDICATORS

Table 9: Other Quality Care Indicators in 2021

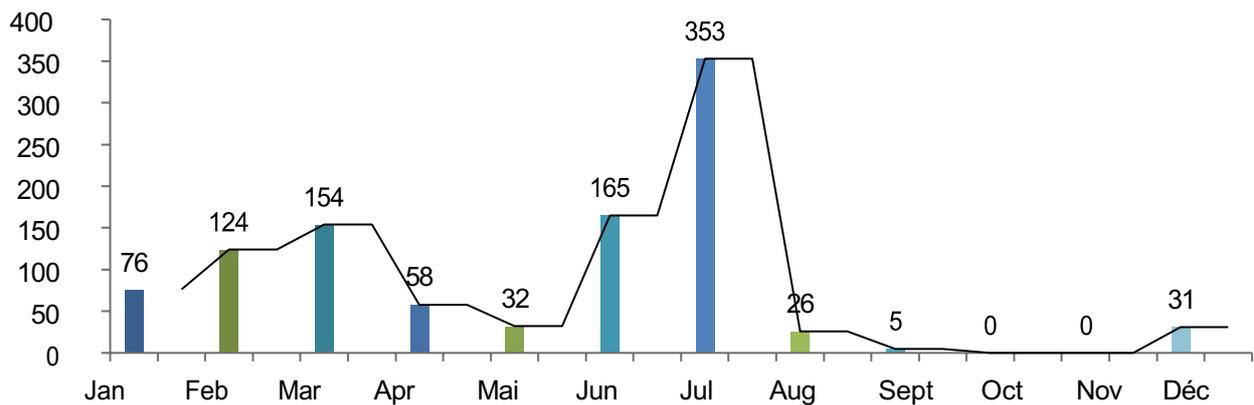
	2017	2018	2019	2020	2021
Total number of beds	200	200	200	220	220
Mortality rate	2.18	2.08	2.02%	3.3%	3%
Bed occupancy rate	67%	80%	72%	57%	55%
Total hospitalized cases	6,045	7,384	6,986	6,956	7,781

Note: HEAL Africa Hospital has a total of 220 beds. There was a decrease of 2% in bed occupancy rate due to the Covid-19 disease, due to fear of patients in the community to attending hospitals to avoid contamination. Additionally, compared to the year 2021, there was a decrease of 0.3% in the mortality rate.

I.2. COVID-19 CASE STATISTICS

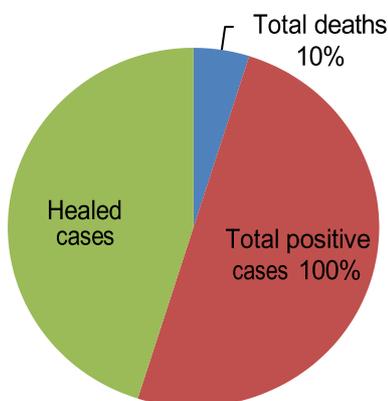
In 2021, the HEAL Africa Covid-19 Treatment Center (CTC) tested **1,024** patients including **484** (47.2%) positive cases and **540** (52.8%) suspect cases (negative). Among the patients treated at the Covid-19 treatment center of HEAL Africa Hospital, there were **494** men and **530** women. See the diagram below.

Figure 4: Description of COVID-19 cases treated at HEAL Africa Treatment Center



The largest number of tested cases was recorded in July (34%). Women (52%) attended test more than men (48%) did.

Figure 5: Outcome of positive cases treated at HEAL Africa's CTC



Note: Among the tested positive Covid-19 cases treated at the Isolation and Treatment Center (CTC) of HEAL Africa (484 people in total), there was a recovery rate of 90% (437) and a mortality rate of 10% (47 deaths). Of these, 7% reached the CTC already deceased (lifeless body) or died within 48 hours after admission. The samples taken from them were positive to Covid-19 test. These cases came from the community and other health facilities in the city. Only 3% of the registered deaths occurred at least 48 hours after admission to the ward.

II. COMMUNITY PROJECTS

In line with its mission and vision, HEAL Africa implements projects that aim to serve the most vulnerable men, women, and children in the community, and organized accordingly.

1. WATOTO SECTOR: all projects dealing with children.
2. WAMAMA SECTOR: for projects that intervene in favor of women.
3. WABABA SECTOR (Nehemiah Committee, Men and Churches): projects aimed at engaging men, community leaders and grassroots churches in all sectors of community life.

For a good appropriation of the projects achievements, HEAL Africa has developed two community approaches including the Nehemiah approach and the WAMAMA SIMAMENI approach (WASI).

II.1. WATOTO SECTOR

II.1.1. Introduction

Two major achievements marked the care of the child:

- a) HEAL Africa achieved significant progress in the management of severe acute malnutrition by curing more than 98.1% of children with funding from several partners including: UNICEF (ZS Birambizo and Masisi), Humanitarian Funds (ZS Bambo and Kibirizi), AMADE (ZS Nyiragongo) and Global Strategies (ZS Goma and Karisimbi).
- b) Through the Global Strategies program, HEAL Africa organized outreaches after the volcanic eruption in the Nyiragongo health zone, where the life of 7 newborns whose mothers were in extreme obstetric emergency was saved.

II.1.2. Area of Health

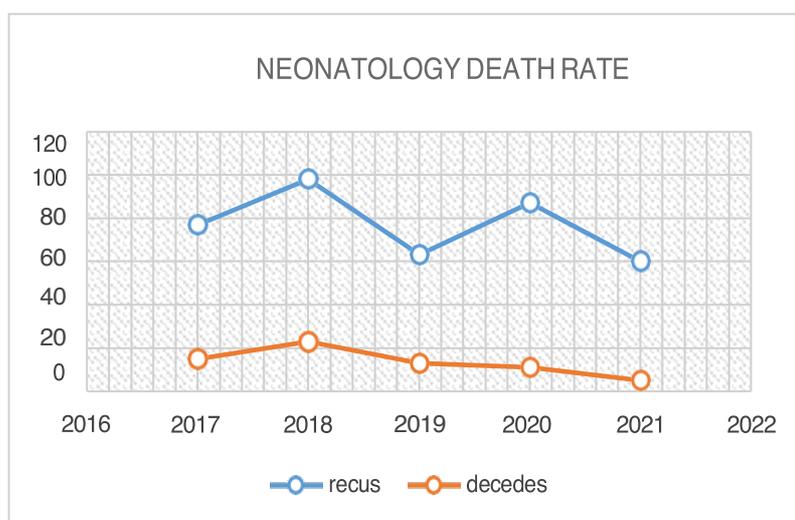
In collaboration with community projects (CAP, Neonat, PMTCT and PCIMA), the pediatrics department of HEAL Africa Hospital has taken care of 2,890 children divided into the following program:

A. Newborn Care

Known as being the center of excellence for newborn care, HEAL Africa has trained 9 care providers from 5 health zones (Goma, Karisimbi, Karawa, Katwa and Minova), who cared for 379 newborns.

According to the data curve, the mortality rate decreased during the year 2021. The proportion of deaths on cases from the community was reduced to 8.3% (5/60), while it was of 12.64% in 2020.

Figure 6. Newborn mortality control level



Note: thanks to the training of care providers from health facilities surrounding HEAL Africa, and modern equipment HEAL Africa we have reduced the mortality rate from 12.6 % to 8.3%.

B. Management of Pediatric HIV: Children Aid Program (CAP)

CAP is currently the leading program for training of care providers and is also responsible for supervising other sites related to pediatric management of HIV. To date, CCLK fully plays the role of the second PECP clinic in the health zone of Goma.

For the year 2021, the clinic followed 614 children including 514 HIV positive. Among them, 513 (99.8%) are under ARV treatment. Of the 513 under ARV, 482 made their viral load and 457 (94.81%) suppressed their viral load.

According to the WHO, each management program should be evaluated according to the level of achievement of the 95/95/95 target: 95% of patients screened should know their HIV status, 95% of patients knowing their status should be put under ARV treatment, and 95% under ARV should suppress their viral load 6 months after the start of ARV.

Table 10: Evaluation of CAP activities in relation to the 95/95/95 objective

Indicators	Number	Rate	95/95/95	GAP
Total patients follow-up	614			
Total HIV Positive Patients	514			
Patients under ARV	513	99.8%	99.8%	
Patients under ARV with viral load made	482	93.8%	9..8%	
Patients under ARV who suppressed their viral load	457	94.8% ⁰	94%	0.2%
Patients on ARV with viral load not suppressed	25	4.9%		
Patients on ARV who did not have a viral load	32	6,2%		
Patients under ARV aged > 12 years	303			
Patients under ARV > 12 years knowing their status	270	89.1%	89.1%	5.9%

Note: 99.8% (513) of our patients are under ARV treatment, including 270 girls and 243 boys. Among them, 303 are over 12 years old. Of these, 270 (89.1%) know their serologic status. 482 out of 513 patients have made their viral load, and 457 (94.8%) have had their viral load suppressed. To reach the 95/95/95 target as defined by the WHO, we have minimal deviations. (5.9)

Prevention of mother-to-child transmission of HIV (PMTCT)

With our interventions in eight (8) PMTCT sites, we identified 119 new cases (NC) and conducted follow up on 189 old cases. Out of 94 infants who reached 18 months, 94 (100%) presented for screening and all came out HIV negative (100%).

- PMTCT HA: 87 exposed newborns were followed and, after the transmission PCR, 73 (83.9%) were negative and 3(3.44%) positive.
- CAP: 107 children were followed, 58 of whom reached 18 months and 41 were screened, all came out negative (100%). Among the children received from the pediatric department via DCIP, 36 did their PCR and 2 were positive (or 5.5%).

C. Integrated Management of Acute Malnutrition (PCIMA)

For the year 2021, HA has taken care of 12,536 children under 5 years of age identified and monitored through 5 projects: CAP nutrition (Global Strategies), Nutrition Masisi (UNICEF), Nutrition Birambizo (UNICEF), Nutrition Kibirizi and Bambo (FHRDC) and Nutrition Nyiragongo (AMADE). The average cure rate is above the average required standard of 75%.

Table 11: Management of malnutrition

Integrated Management of Acute Malnutrition (PCIMA)											
	Masisi		Birambizo		Kibiri & Bambo		Goma & Karisimbi		Nyiragongo		Total
Sex	G	F	G	F	G	F	G	F	G	F	
# identified and screened acute malnutrition cases	2,075	2,816	352	401	2,401	2,635	585	772	299	200	12,536
# severe acute malnutrition follow-up in outpatient (UNTA)	368	409	352	401	2,401	2,635	585	772	299	200	8,422
# of discharged cases	96	137	253	324	1,517	2,276	434	602	221	148	6,008
# of healed cases	96	137	248	319	1,502	2,254	423	594	193	129	5,895
# cases followed in hospitalization (UNTI)	0	0	0	0	81	89	96	119	10	4	399
# of admitted HIV+tested cases	0	0	0	0	1	2	2	2	0	0	7
# of admitted HIV-tested cases	0	0	0	0	80	87	89	115	10	4	385
# abandonments	0	0	3	5	14	20	9	4	24	27	106
# deaths	0	0	0	0	1	2	5	6	1	0	15
Cure rate	100%		98,20%		99.02%		98.20%		87.26%		98.1%
Dropout rate	NA		1,40%		0.89%		1,19%		13.82%		1.8%
Death rate	NA		NA		1.76%		5,29%		7.14%		0.2%

Note: HEAL Africa's interventions in the integrated management of acute malnutrition show a cure rate of 98.1%, which is above the standards of 75%; the average dropout rate is 1.8% < to 15% according to the standards, and an average death rate of 0.2% < to the Standard of 5%.

Rachel NYIRAKIZA – Healed from Malnutrition



“I had just separated from my husband when my daughter started to have blisters on her skin. Her condition worsened the day her weight dropped by almost half after intense diarrhea.

In July 2021, I did not have any activity that could generate enough resources to allow me to take good care of my eight children, malnutrition did not takelong to affect my small family. Rachel was seriously affected by this situation, as she was the youngest.

I first resorted to traditional treatments, which unfortunately only worsened my daughter's health. One day, at the end of a morning service, a community activist from HEAL Africa offered to take Rachel to the Nyanzale Health Center, where she was taken care of. Her recovery seemed miraculous to me because I no longer hoped for it.

With her health restored, Rachel brought a smile back to our family circle as we had just exhausted all possible options for her treatment. My happiness is great, God alone will be able to reward the effort of all those who contribute to this great work to help many children in.”

Mrs. Sifa MAHORO is the mother of the little girl, Rachel, who almost lost her life at the age of three, due to acute malnutrition. Her care was made possible thanks to the support from the FHRDC.

II.1.3. Area of Protection and Response

3,063 children were cared for through eight (8) projects funded by the HFDRC (Bambo, Birambizo and Kibirizi health zones), FSRDC / PRVBG (Lubero, Mabalako and Goma), UNICEF (Notre Espoir), the Kingdom of the Netherlands (S-3G), Cellule des Infrastructures (PFCGL) and USAID (TUSHINDE UJEURI). These projects helped support 3063 children in the holistic care of SGBV. 104,001 people under the age of 18 have been reached by messages related to fighting against sexual and gender-based violence through different channels (door- to-door awareness, media, Church, posters, etc. ...) in North Kivu, South Kivu, Tshopo and Maniema provinces.

Table 12: Management of GBV cases

Indicators	North Kivu	Maniema	Tshopo	South Kivu	Total	In %
Total SGBV	2,571	212	111	168	3,063	68%
Sexual Violence with or without penetration	1,703	203	108	65	2,079	32%
Other GBVs	868	9	4	86	966	59%
SVV Identified within 72 hours	1,066	47	47	60	1,220	98%
SVV that received PEP Kit	1,039	46	45	60	1,190	60%
Rape cases identified having STIs	926	120	48	156	1,251	96%
Supported IST cases	887	120	33	156	1,197	9%
Pregnancies resulting from rape	147	22	8	11	187	85%
Psychosocial assistance	2,192	188	61	168	2,609	49%
Cases accompanied by clinical psychologists	1,157	23	25	65	1,269	24%
Cases who completed NET therapy	238	7	21	33	299	16%
Complaints received at the legal clinic	338	73	33	40	484	63%
Initiated cases in courts	228	44	14	20	306	28%
Passed sentences	72	7	2	6	87	72%
Civil Authors	1,669	190	45	170	2,074	20%
Persons in uniform (police, military/armed groups)	511	20	15	44	590	8%
Unidentified authors	194	19	0	22	235	

Note: 98% of survivors identified before 72 hours had access to the PEP kit. In psychological care, HA applies two (2) approaches (dance, Children's space and APS).

- **Psychosocial support for sexual violence survivors:** in total, 2,609 survivors of gender-based violence were assisted. Among them, 2,374 girls (90%) and 235 boys.
- **Treatment of traumatized children in the children's space:** 330 children were accompanied by the clinical psychologist and acquired a positive change. The Children's Space also functions as a space for capoeira, one of the methodologies for the de-traumatization of children.

Table 13: Result of the psychological support to children in the Children's Space

Change of attitudes among children accompanied in the Children's Space							
Age range	0 to 5 years		6 to 12 years		13 to 17 years		
Sex	F	G	F	G	F	G	Total
Total children who have gotten a positive change	26	74	66	51	56	57	330
Remarkable change, at 75-90%	22	53	29	32	14	37	187
Moderately remarkable, between 50 and 75%	2	1	6	3	8	2	22
Less remarkable change, between 25-50%	2	20	31	16	34	18	121

Note: There was a remarkable positive change of 75-90% and a good psychological evolution for children.

II.1.1. Area of Education

Through the community projects, HEAL Africa integrates the education of vulnerable children. For the year 2021, **345** children were educated according to the following models:

- **Supervision of children out of school within HEAL Africa hospital through TUUNGANE School:** 91 children (52 girls and 39 boys) were supervised, 32 children integrated into formal schools with a success rate of 88%.
- **GSF (Goma Student Fund)** assists a community school of vulnerable children. This year 234 children finished the year with an average success rate of 89% (234 out of 264); among them 33 finished their primary school, leaving with certificates (100% success).
- **Support for the schooling of orphans affected and/or infected by HIV:** 20 children orphaned by HIV/AIDS under the responsibility of their grandparents benefited from the schooling program, with a 100% success rate.

Table 14 : Distribution of Children in GSF, TUUNGANE School and Sponsorship

Distribution of school children (OVC/HIV)				
Schooling	Number	Girls	Boys	Success rate
Schooled	375	175	187	
Abandonment	38	8	30	
Having participated fully	337	167	157	
Marks obtained + 50%	365	194	171	89%
Point Obtained- 50%	38	8	30	

Note: *There were good results for students who actively participated in the class (89%).*

II.2. WAMAMA SECTOR

Under the WAMAMA Sector, three (3) themes were developed through 12 projects implemented in the provinces of North Kivu, South Kivu, Tshopo and Maniema. We implemented the PRVBG project in Maniema and another (PRVBG) in North Kivu provinces with funds from the World Bank through the FSRDC, the S-3G project with Cordaid – The Embassy of Netherlands, PFCGL project –with funds from the World Bank, TUSHINDE UJEURI project with support from USAID -IMA, Fistula Care, Notre Espoir (UNICEF), Love in Action (HEAL Africa USA), CBM, FHDRC.

II.1.2. Fistula and Other Gynaecological Complications Management at HEAL Africa Hospital and Outreach

In its intervention policy, HEAL Africa contributes to the Sustainable Development Goal 3 (SDG3) which is to ensure a healthy life and promote the well-being to all ages. HEAL Africa has carried out 4 mobile clinic missions (outreach) with support from its financial partners (FSRDC, Fistula Foundation) in the Provinces of North Kivu (HGR Beni), Kasai Central (HGR Lukonga and HGR Lwiza), and Maniema (HGR Kibombo).

In total 685 cases were surgically repaired, including 269 fistulas, 267 uterine prolapses and 149 other obstetric complications.

Table 15: Distribution of Repaired Cases by Diagnosis

	Outreach	Goma	Total
Fistula	254	77	331
Prolapse	124	240	364
Other gynecological complications	35	89	124
Total number of beneficiaries	413	406	819

Note: Most of the fistula cases were repaired in Outreach (254, with only 77 in Goma).

At the age of 16, MUDEI MUDJAKA had her first fistula repair.



"I wasn't ready to have a second operation, because the first one was done without anesthesia, and I didn't want to go through the same experience again. I came to the hospital to take only pills to relieve my pain, but I did not really expect surgery," said MUDEI MUDJAKA, cured from a large rectovaginal fistula that she had suffered for 4 years.

It was at the age of 16 that she had her fistula repaired during the free fistula repair campaign carried out at the Lwiza General Reference Hospital, Kasai Central province, by the urogynecology mobile clinic of HEAL Africa hospital, in October 2021. Her fistula was caused by difficult childbirth, when she was only 12 years old.

"There was neither anesthetist nor anesthesia in the hospital; we tried to help her, but the help was clumsy," recalls a nurse who attended to MUDEI's first operation.

MUDEI was forcibly married to a man who later abandoned her when she contracted fistula. *"He was angry with me for having lost the baby during childbirth, and then told me that he would never live with a woman who smells urines and then left,"* she said bitterly when discharged from the hospital.

"After the failure of the first repair attempt, I did not expect anything conclusive from this second operation that, fortunately, brought me recovery. God acted through the HEAL Africa team. Having my fistula repaired is an invaluable gift that I have received," she concluded, gleaming with happiness when she left the hospital.

II.2.1. Sexual and Gender-Based Violence

The creation of the **One-Stop Center (OSC)** offers comprehensive case management (medical, psychosocial, legal and judicial support, and socio-economic reintegration). This multi-sectoral response to SGVB achieves the following priorities:

SDG5: Achieve gender equality and empower all women and girls.

SDG16: Promote peaceful and inclusive societies for sustainable development, ensure access to justice for all and build effective, accountable and inclusive institutions at all levels.

In its vision of a safe and non-violent society, HEAL Africa focuses its interventions in the fight against sexual and gender-based violence using the following strategies:

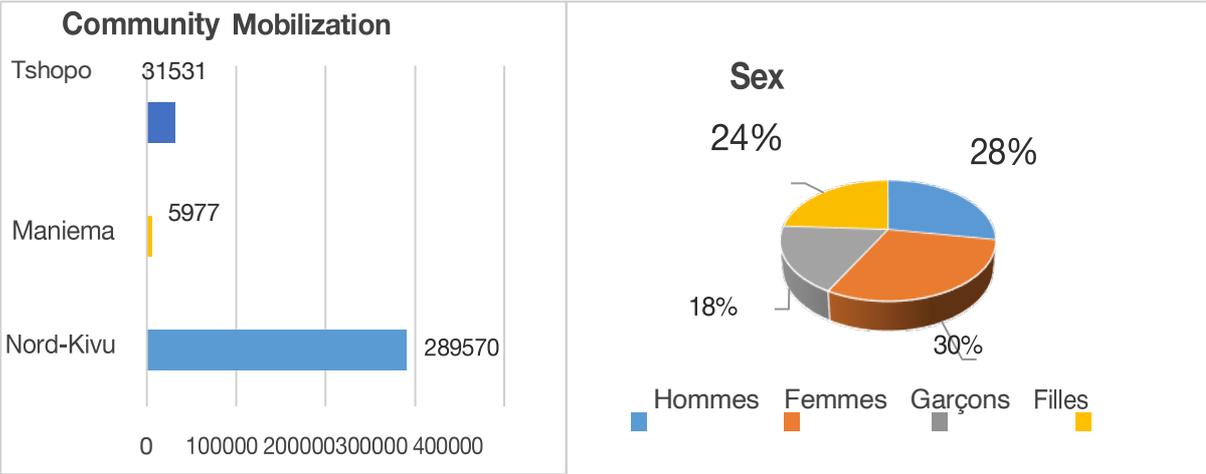
A. Community Mobilization

Through nine projects, HEAL Africa has integrated the aspects of prevention with the help of civil society organizations, protective communities (Nehemiah Committee and WAMAMA SIMAMENI, division of HEAL Africa’s community program, the health committee and other community leaders) who are conducting community mobilization to contribute to the reduction of sexual and gender-based violence. They are equipped in different awareness-raising themes to touch the awareness of the community together with the aim of communicating to achieve a transformative evolution in behavior change.

At the community level, HEAL Africa has initiated the WAMAMA SIMAMENI bases with safe and secure spaces for the security of survivors in need of holistic care services. They also learn the trades in these bases (occupational therapy.)

A total of **327,078 people have been reached** by messages related to the fight against sexual and gender-based violence through different channels (door-to-door awareness, media and Church, posters, etc.) in North Kivu, South Kivu, Tshopo and Maniema districts.

Figure 7 and 8: Distribution of people sensitized by province and age bracket



Note: Awareness reached more the adult population than young people and adolescents with more females i.e., 54% compared to 46% for the males.

B. Holistic Response to Gender-Based Violence (SGBV)

Based on the expertise acquired by HEAL Africa Hospital in the management of OSC (Center of Excellence), it pleased to other partners of HEAL Africa to make extensions in other hospitals: 7 in North Kivu; 4 in South Kivu and 4 in Maniema. The same approach applies with a minimum package in 24 health centers through safe spaces.

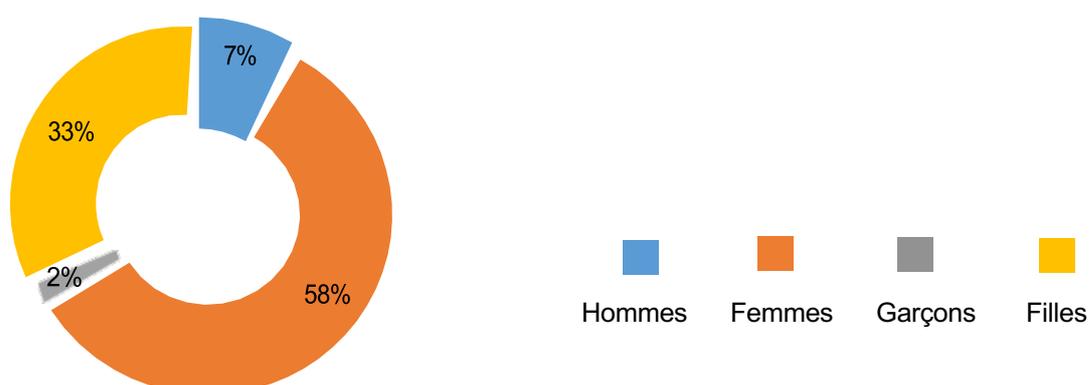
In total 6,112 (550 men and 5,562 women) cases of sexual and gender-based violence accessed services in different OSCs and health centers.

Table 16: Distribution of SGBV cases managed by HEAL Africa in 2020

Indicators	North Kivu	Maniema	Tshopo	South Kivu	Total	%
Total SGBV	4,775	818	207	312	6,112	
Sexual Violence with or without Penetration	3,164	376	200	120	3,860	63%
Other GBVs	1,611	18	7	159	1,795	46%
SVV Identified within 72 hours	1,979	88	87	111	2,265	59%
SVV that received PEP Kit	1,930	86	83	111	2,210	98%
Rape cases identified with STIs	1,720	224	88	291	2,322	60%
Supported STI cases	1,646	224	62	291	2,222	96%
Pregnancies resulting from rape	273	40	14	20	347	9%
Psychosocial assistance	4,071	350	112	312	4,845	79%
Cases accompanied by clinical psychologists	2,148	43	46	120	2,358	49%
Cases that completed NET therapy	442	13	38	62	555	24%
Complaints received at the legal clinic level	629	136	60	73	898	15%
Initiated complaints	424	83	26	36	569	63%
Passed sentences	135	13	5	11	164	29%
Civil Authors	3,100	353	84	315	3,852	71%
Persons in uniform (police, military/armed groups)	950	36	28	83	1,097	20%
Unidentified authors	360	36	5	41	442	8%

Note: This table shows that 63% of GBV cases are sexual violence with or without penetration. Out of 2,265 cases identified in 72 hours post-rape, 98% had access to PEP kits. 2,358 survivors of SGBV were accompanied by clinical psychologists and at least 555 (24%) completed psychological therapy (NET at the PSA level with good psychological progress).

Figure 9: Distribution of cases /sex



C. Fight against HIV/AIDS: Goal 95-95-95

Through its PMTCT program, HA screened a total of 7937 pregnant women out of 7999 (or 90.9%) of pregnant women seen in ANC during the year 2021.

Table17: Results for PMTCT Interventions

Indicators	2021	%
Pregnant women seen in ANC	7,999	-
Pregnant women tested for HIV	7,937	90.9%
Pregnant women tested HIV+ (NC)	51	0.6%
Male partners tested for HIV	15	100%
HIV+ male partners	15	0.1%
HIV+ (NC) pregnant women on ARVs	51	100%
Male HIV+ partners on ARVs	15	100%
Women followed on ARV (Option B+) OC	1,084	
Women followed on ARV (option B+) OC and NC	1,186	
Number of women who have measured their viral load	834	70%
Women who have suppressed their viral load	782	93%

Note: HIV testing is almost systematic at the ANC (7837 tested out of 7999 cases, 90.9%). Of the 51 HIV positive women tested, 15 had their male partners tested and all were HIV+ (29.4%). It is also observed that the comparative prevalence among men is slightly higher (0.2%) than among women (0.7%).

II.2.4. Congolese Women Empowerment Programme

A. Village Savings and Loan Association

Five (5) HEAL Africa projects through the WAMAMA SIMAMENI (WASI) bases organized 477 Village Savings and Loan Associations (VSLA), with a total of 12,090 participants. In addition, 486 other members were reintegrated economically, 1893 beneficiaries were supported in IGA. 75 people have been trained in different trades (sewing, pastry, culinary art, pottery, banana leaf art, hairdressing and aesthetics).

Table 18: VSLA results summary table

Table of VSLAs in sites	
Indicators	Total
Total VSLA	477
Number of parts purchased	939,027
Number of parts granted	123,117,853
Number of members assisted with cash	5,706
Number of beneficiaries supported by IGAs	2,691
Number of SVV economically reintegrated	486

Table 19: Total in currency

Indicators	Total FC	Value in USD
Average value of parts	1,000	0.5
Average value of parts purchased	190,095,365	95,047.68
Value of loans granted	134,981,475	72,340.04

Note: Each member of VSLA saves for a part on average 1000 Fc (\$ 0.5) except the TUSHINDE UJEURI project where some members save 1000Fc, 1600 Fc, 2000 Fc according to their income, and an average amount of \$20, \$50 is granted as credit loan to members who have saved during 3 months.

B. HEALING Arts Program

Healing Arts exists to help sexual and gender-based violence survivors by through vocational training (occupational therapy) in Safe Houses/transit houses at HEAL Africa in collaboration with the WAMAMA SIMAMENI program.

The Ministry of Social Affairs accompanies the program and provides certificates to the laureates at the closing session of the trainings. This multidisciplinary learning center trained 75 people (50 in Goma, 25 in Mabalako), among them 73 women and 2 men.

Table 20: Number of Persons Trained

HEALING ARTS	
Indicators	Total
Pastry and Culinary Art	15
Hairdressing and Aesthetics	20
Sewing	40
Grand total	75

ZUBEDA NZARUBARA



“I am once again able to respond to the needs of my children, thanks to my training.”

ZUBEDA NZARUBARA

Ms. ZUBEDA initially came to HEAL Africa in 2019 for legal help. When her husband died, her in-laws tried to take all the property left to her by her late husband. To prevent her from ending up on the street with her four children, HEAL Africa assisted ZUBEDA in the process of restoring her rights.

“As part of our program support ZUBEDA chose pastry making for her vocation training. She was very talented and she did not take long to show her aptitude, even after obtaining her patent. Her courage and determination to ensure a better future for her children, has earned ZUBEDA a place in the governorate of South Kivu,” said Darlène Kahambu, manager of the HEAL Africa Legal Clinic.

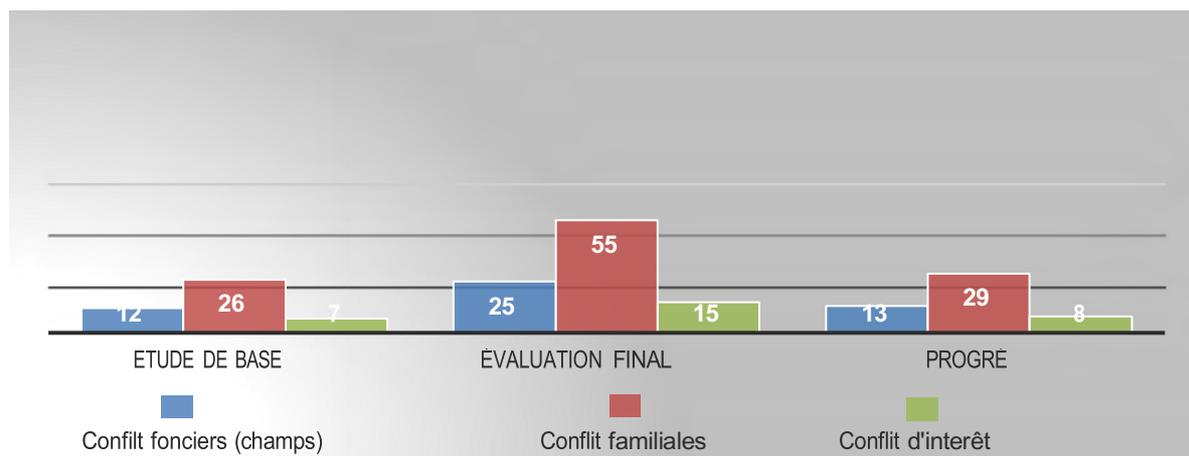
“As I had just finished my training, I was granted with equipment and a start-up fee from HEAL Africa, which allowed me to start my own income-generating activity. This is what I lived on until the moment when I had the ultimate chance to be hired as a cook in the governorate of South Kivu province”, she recalls. *“What I received in terms of knowledge and means for my launch made me useful to my children. May abundance flood the daily lives of all those involve in the well-being of orphans and widows because, through their action, I feel revived.”*

II.3. WABABA SECTOR, NEHEMIAH, MEN AND CHURCHES

The WABABA Sector supported 278 Nehemiah Committees (NC) with the support from various partners (Engaging Faith Leaders in the Community, Love in Action, Entrust Foundation, Cornerstone III, PFCGL, Notre Espoir 7, and Living Peace). Through these NCs we identified 241 gender champions who led 241 community dialogue groups with the participation of 2,340 people (1170 men and 1170 women) for the transformation of masculinities.

We also updated the mapping of all the Nehemiah Committees in 6 provinces: North Kivu, South Kivu, Maniema, Ituri, Tshopo and Bas-Uélé. Field data showed that out of 258 existing committees, **20 new NCs were created to have 278 NCs, of which 215 were active and 63 were not active.** Of the 278 NCs, 215 (77.3%) were followed and supervised and 63 NCs (22%) are to be revitalized. Having become models in conflict management and advocacy, the other two NCs (NC Kiwanja and NC Karuba) have been supported in seed and brood stock to strengthen their economic empowerment.

Figure 10 : Conflict categories in the community



Note: This graph shows us that family conflicts are the most frequent in the community (61.1%) followed by land conflicts which represent 27.7%, an increase of 29% in conflict resolution by category.

Out of 90 conflicts identified, at least 69 (76.6%) conflicts were resolved. Only 15 (33.3%) conflicts were resolved before the project, due to a low knowledge in conflicts resolution. It shows a progress of 43.3% after project intervention.

II.3.1.Transforming Masculinities

HEAL Africa worked in North Kivu, South Kivu, and Tshopo provinces to transform perceptions of masculinity. The sessions built on the themes of: violence to peace; from male superiority to gender equality; from victimization to resilience; from stigma to help to survivors; from silent witnesses to outspoken witnesses; community justice and self-care.

Table 21: Repartition of groups in community dialogue.

Themes: Community Dialogue, Gender Transformation and VSLA																		
Areas of intervention: North Kivu, South Kivu and Tshopo																		
LP		Cornerst		LIA		PROPAIX		EntrustF		HFDRC		PFCGL		NE		TUSHINDE		
NG = 22		GN=36		NG=36		NG=4		NG=8		NG=8		NG=4		NG=15		NG=108		
NS	NP	NS	NP	NS	NP	NS	NP	NS	NP	NS	NP	NS	NP	NS	NP	NS	NP	Total
24	660	12	720	6	432	6	48	6	144	6	96	6	60	6	180	12	1,623	2,340

Note: NS (Number of Sessions), NP (Number of Participants), NG (Number of Groups)

In total, 241 community dialogue groups were formed with 2,340 participants (1,170 men and 1,170 women). For six (6) projects, each group followed 6 socio-therapy sessions for the transformation of masculinity (GBV prevention, conflict management, VSLA and family mediation) and for the rest each group followed an average of 12 sessions.

MIRIAM & PASCAL'S STORY



*Mixed community dialogue
Muja, June 13, /2021*



*Community dialogue celebration at Shasha,
April 20, 2021*

“My name is Miriam, Pascal's wife, and together we live in Buhimba. I want to say thank you to the organizers of these therapy groups because they allowed me to restore my home.

One day I was coming back from the field when men in uniforms raped me in front of my husband who was tied up. Since that day, I experienced a lot of hostility from my husband, that I could not bear. So I separated from my husband. He started drinking too much alcohol, and developed suicidal thoughts. He also had ideas of wanting to kill our children and me.

Before my plan to leave the city, I confided in one of the pastors of my church about my husband's situation. The pastor then brought my husband into the Living Peace therapy groups. As the sessions went on, I received a call from my husband who asked me to come and meet him because, he said he was no longer the one I used to know.

At my arrival, he begged me to stay and proposed that together we participate in the sessions, because they asked him to bring his wife too. Since then my husband has changed, he is no longer brutal. We currently live peace in a climate of love.”

II.3.2. Community Mobilization

To prevent the spread of the COVID-19 pandemic (3rd and 4th waves), awareness raising has been oriented in compliance with barrier measures in the Nehemiah committees.

Table 22: Sunday School (ECODIM) Activities and its Impact on Family Life

ECODIM Activities	Expected result by indicators	Results achieved	Level of achievement	Challenges	Recommendations	
Visit to families	Sensitization and evangelization 137 households	103 households sensitized out of the 137 planned	75%	Transport of 50 Monitors to reach households for the visit	Financial support to cover the transportation of instructors	IM /USA
VBS	Evangelization and discovery of the greatness of God's love by 50 children.	Acquisition of knowledge about the greatness of God's love by 50 children.	100%	Insufficient means for the travel to the intended place and security.	Increase in budget	IM /USA
				Feeding problem for 50 children, 11 Monitors and 2 Managers		
International Day of the African Child	900 children will know their rights and discover their identity in Christ	840 children knew their rights and discovered their identity in Christ	90%	There was not enough breads and juice for 900 children	Involve the local authority of the gender, family/child State department in the celebration	IM /USA
Parent training	Familiarization of 150 parents at ECODIM and the HEAL Africa Tabernacle	Growth of 100 new faithful to the Tabernacle thanks to this activity	95%	Children are abandoned on the streets	Strengthening parental education in child protection	IM /USA
					Advocate with local government	
Instructor training	Capacity building and upgrade for 50 Monitors	50 Instructors have been trained and upgraded. 7 young instructors have been integrated	100%	The number of instructors is not enough	Supervise instructors	IM /USA
Post-Eruption Support	Psychological, material assistance and capacity building for 100 ECODIM mothers and 50 children	100 households of victims were provided with material assistance	88%	54 of our moms did not benefit from the assistance	Covering the remaining 54 women/moms in the future	IM /USA
Special Children's Program	Teaching focusing on social life and positive transformation	Teaching focusing on social life and positive transformation	55%	Lack of an appropriate strategic plan to care for so-called special children	Develop a strategic plan to support special children	IM /USA
	Introduction to personal hygiene for 120 special children	Introduction to personal hygiene for 120 special children				

Note: Compared to the previous year, the growth went from 900 to 1200 children with whom HEAL Africa celebrated Christmas on December 25, 2021. This growth and the children's testimony have brought many parents to hear the gospel.



NB: HEAL Africa celebrated 2021 Christmas with 1200 children

2. Youth in the TABERNACLE

Inside the HEAL Africa chaplaincy department, the youth is grouped into 3 categories: (a) the UAMSHO and DANCING TEAM choirs, (b) the football team (c) other surrounding young people.



The approach of praise and worship for trauma healing brought together 350 young people each end of the month at the HEAL Africa Tabernacle. This approach has allowed young people in the city of Goma to get closer in terms of exchanging experiences on the danger of taking drugs, heavy alcohol drinks and sexual abuse.

III. TRAINING AND RESEARCH

Activities improved during the year 2021 compared to 2020 in the HEAL Africa Training Services department.

III.1. COSECSA Program

Since the beginning of this program in 2016, twelve (12) physicians have been enrolled in the program and five (5) have already passed the exams.

Program activities over the past year include:

- Two Zoom seminar sessions per week with Dr. Neil Wetzig until his return to Goma in September 2021.
- One resident doctor unexpectedly dropped out of the program in March 2021.
- Three (3) eligible resident doctors took the multiple-choice exam (MCQ) in September. One passed and 2 did not.
- Two Residents (one who had passed the MCQ in 2020 and was not required to retake it) took the MCS oral exam by Zoom in November and both passed.
- One of those who failed withdrew quite suddenly from the program in September 2021. The other candidate is preparing to redo the MCQ in September 2022.
- The program registered low participation of surgeons in training sessions (2-57%) but resident doctors' participation was of 90%. However, the presence of supervisors Drs. Kigayi and Muller, who are neither recognized COSECSA trainers, nor surgeons, marked the program.

III.2. FAMILY MEDICINE Program

The current cohort of Family Medicine residents is made up of 10 specialists. They began attending the program in 2018 and are scheduled to complete the training in June 2022. Courses are organized simultaneously at HEAL Africa and at the Université Protestante du Congo (UPC –Protestant University of Congo) in Kinshasa. Of the 10 specialists, six (6) are financially supported by the Christian Church in Congo/DRC, 3 by HEAL Africa USA and one (1) by Worldshare UK. All have passed the aptitude exam and, in March 2022, will take the final exam and proceed to the defense of their memoirs.

The recruitment process for the new cohort will begin in March 2022 and those selected will begin training in July 2022.

The wish is to see HEAL Africa USA and England continue to commit to the financing of the same number (3 and 1) for this new cohort.

Dr. MASODA Maurice is enrolled in the PhD program in the UNIGOM - UOB - UCG Consortium for this year. His research protocol has been approved, and the defense is scheduled for the end of 2022. His subject is entitled: "The determinants of the use of family planning methods in a rural environment, case of Idjwi Island".

III.3. Training Program in the University Consortium for the THIRD CYCLE in MEDICINE (CUTCM)

In collaboration with UNIGOM (Université de Goma), HEAL Africa organized the Third Cycle of Training in Medicine from June 2021 within the framework of the Consortium Universitaire pour le Troisième Cycle en Medecine (University Consortium for Postgraduate in Medicine – CUTCM), which brings together three universities of Kivu namely the UNIGOM (Université de Goma), U.C.G (Université Catholique du Graben) of Butembo, and U.O.B (Université Officielle de Bukavu). This was done in accordance with the **Academic Instruction No 022/MINESU/CAB.MIN/MNB/BLB/2021 du 19 MAI 2021** and the **DECREE No 0147/MINESU/CAB.MIN/MNB/RMM/JMB/2021**.

HEAL Africa was honored by the visit of His Excellency NZANGI BUTONDO, Minister of Education of the DRC and his Honorable Secretary Mr KIVUSA in December 2021 to see the situation of the Third Cycle of Medicine. The CUTCM mission is to train specialists and PhDs in medical thesis in the following fields:

- Internal Medicine
- Pediatrics
- Surgery
- Gynecology-Obstetrics
- Family Medicine
- Ophthalmology

Student recruitment is based on each specialization subject.

III.4. CHAPLAINCY SCHOOL Program (Chaplains Training)

Thirteen (13) pastors and 4 chaplains (4 women and 13 men) benefitted from the training on active listening and accompaniment of patients and caregivers. Four (4) facilitators were involved during 35 days of training.

The evaluation showed that participants at 95% mastered the topics taught. They were attentive during the training sessions because they asserted being able to provide listening and communication-based support. 77.6 % would like to be trainer-supervisors in pastoral clinic and 75% intend to provide psychological help to patients.

One of the 5 facilitators was from Zambia (Elvis) and another from Kenya (Onesmus).

In 2021, 2 SALT supervisions were conducted to follow up on 45 chaplains trained, in Rutshuru, Butembo and Beni.

III.5. SUPERVISION FOR TRAINEE DOCTORS Program

The situation of trainee doctors at HEAL Africa is as follows:

- UNIGOM: 12 trainee doctors currently in their fourth and last rotation service.
- ULPGL: 12 trainee doctors in their fourth and final rotation service.

III.6. MEDICAL IMAGING Program

HEAL Africa organized the following activities for the Medical Imaging program:

- A basic obstetric ultrasound training of 7 hospital nurses and 2 nurses from HEAL Africa Health Center (total: 9 people).
- Training in obstetrical and gynecological ultrasound of a general practitioner assigned to the imaging department.
- Interpretation sessions of scanner and chest X-ray images: 10 general practitioners specializing in family medicine and UNIGOM specialists from different departments.
- Training in ultrasound of two radiologist technicians assigned to the department.

III.7. TRAINING FOR NURSES, DOCTORS AND OTHER STAFF Program

III.7.1. Nurse training program

- Two HEAL Africa nurses have been trained abroad, including 1 learning nursing in Hepato-gastroenterology: Endoscopy (disinfection, washing, maintenance and manipulation of scopes) and another in Nursing of cardiovascular and hypertensive diseases: prevention, education, nursing, ECG.
- Four nurses from KINDU have been trained locally in the prevention of vesico-vaginal obstetric fistula and other gynecological complications, post-operative monitoring of patients, management of a newborn, and on control of infections.
- Other nurses have been trained locally in:
 - a) Prevention and Control of Infections
 - b) Resuscitation of the newborn
 - c) Nursing care of a patient with Covid-19
 - d) Use of oxygen and handling of oxygen cylinders and accessories thereof
 - e) Administration and rational use of drugs

III.7.2. Training program for doctors and other staff

Those who have completed their studies:

- **Pastor KAMBERE BOLINGO** finished his doctoral studies in theology in South Africa. The subject of his thesis was "*Tyranny and Restoration in Nehemiah 5: Towards Rebuilding Society in the DRC Mineral Conflict Context*".
- **Dr Barthélie AKSANTI KASI** has completed his specialization (Masters) in Gynecology-Obstetrics in Kenya.

Those who are undergoing studies:

- **Dr Jacques FAZILI** is on his last year of training in General Surgery in Ethiopia (PAACS Program Soddo Christian Hospital).
- **Dr Justin TSANDIRAKI** is completing the last year of his training in General Surgery in Tanzania (Kilimanjaro Christian Medical Center).
- **Dr Eugénie KAMABU** is attending her second year of training in Internal Medicine in Tanzania.
- **Dr Bienvenu MBIDA** has done a year in General Surgery training at KCMC.

III.8. Training Program on Caesarean Section and Management of Simple Fistula

As the gradual reopening of activities during the Covid-19 period resumed, the gynecology department of HEAL Africa Hospital received 4 teams of medical staff from 4 health zones of the province of Maniema in mid-November 2021.

These teams came for training on "the practice of a good caesarean section, prevention and treatment of a simple fistula and the management process of a survivor of SGBV", under the framework of the project "Prevention and Response to Gender-Based Violence - Maniema (PRVBG-Maniema)", with funds from the World Bank through the Social Funds of the Democratic Republic of Congo (FSRDC).

This training covered a period of 3 months that would end mid-February 2022. Each team of four (4) included:

- a general practitioner
- a nurse acting as an anesthetist
- an operating and post-operative room nurse

III.9. NEONATOLOGY NURSES Training Program

Out of 13 (initially planned), 12 nurses from partner facilities in neonatal care received training to improve their competences. These providers came from Katwa (1), Karawa (1), Nyiragongo (2), Minova (5), Bunyakiri (3) and Goma (1) health zones. This was due to the reduction of the budget by the backer for the year 2021.

III.10. ANESTHESIOLOGY Training Program

The following activities were carried out:

- World Anesthesia Day: International Conference with 60 Participants.
- Training of 2 technicians in anesthesia and resuscitation, level A0, one of which is in progress. The duration of the training is 6 months.
- Training of 4 nurses (including a woman) and 4 doctors from Maniema province on the anesthesia of fistula patients, rectoceles/varicoceles, and caesarean sections for 3 months which ended on 12/02/2022.
- Training of staff from ISETM Virunga and ISTM Goma in anesthesia and resuscitation.
- Participation in the training of COSECSA, Family Medicine and MMED UNIGOM.
- Contribution of the HEAL Africa Head of Anesthesia Department as a facilitator in the training on the management of COVID-19, organized by the WHO, in collaboration with the DPS NK Goma (Provincial Division of Health of North Kivu).
- Online training of the HEAL Africa Head of Anesthesia Department on the BLS and another online training is in progress on PALS, established by SMILE TRAIN and facilitated by HEAL Africa. He has also enrolled in an AACLP Labio-Palatine Cleft Anesthesia online training program.
- Participation by an anesthetist technician from HEAL Africa in two national level trainings in KINSHASA for six days on BLS and PALS organized by SMILE TRAIN.

III.11. RESEARCH AND PUBLICATION

III.11.1. Scientific Research Carried Out at HEAL Africa Hospital

- **ALERRT International** conducted research on "the clinical characterization of Covid-19 in DR Congo".
- Research on cholera, which is in its third year of execution. This research is carried out through the collaboration between HEAL Africa and the University of Florida. 214 households consisting of 1,658 household members have already been recruited. The latter provided 1,053 stool samples and 1,470 water samples were collected. Lake Kivu is home to other pathogenic vibrio besides *V. cholerae* such as *V. parahemolyticus*, *V. vulnificus* and *V. algineticus*, that have been isolated from the stool of household members and in water collected from various parts of the lake and other places where households resupply with water. This result raised another research question: do the fish found in Lake Kivu play the role of intermediate hosts for these vibrios to reach humans?

III.11.2. Publications

1. Justin Paluku^{1,2}, Phoebe Bruce³, Eugénie Kamabu⁴, Benjamin Kataliko¹, Jonathan Kasereka⁵, Annie Dube. *Childbirth-Associated Fistula and Perineal Tears Repaired on Outreach Campaigns in Remote Democratic Republic of Congo*. International Journal of Women's Health 2021;13:1025–1031.
2. Médard Kabuyaya Kakule, Fabrice Lele Mutombo, Francine Mbonga Moseka, Kasereka Kihemba, Neil Wetzig, Justin Paluku Lussy. *A giant fibroadenoma in a mature woman: diagnosis and treatment in a limited resource environment: A case report*. PAMJ - 38(19). 08 Jan 2021.
3. Justin Paluku Lussy, Annie Dube, Jonathan Kasereka M. Lusi, Aurélien Mahamba Kikoli¹, Eugénie Kamabu Mukekulu¹, and Susan A. Bartels. *Trends in sexual violence patterns and case management: a sex disaggregated analysis in Goma, Democratic Republic of Congo*. Conflict and Health (2021) 15:59.
4. Fabrice Lele Mutombo, Jason Nzanzu Kikuhe, Noé Kasereka Mwanamolo, Marc H. Erickson, Neil Wetzig¹, and Médard Kabuyaya Kakule. *Congenital epignathus associated with a cleft palate: a case report: Case Report*. (2021) 15:422.
5. Mumbere Hangi Stan, Megan Andrea Singh, Sejal Paresh Doshi, Susan Andrea Bartels. *Malaria amongst febrile children: call for a pediatric malaria assessment tool*. Pan African Medical Journal. 2021; 40(84). 10.11604/pamj.2021.40.84.21165.
6. John Musubao Katsuva, Simplicie Kighoma Vuhaka, and Sosthene Tsongo Vululi. *Pseudoaneurism of the brachial artery mimicking a soft tissue sarcoma: Case report*. Open J Trauma 5(1): 006- 009. DOI: <https://dx.doi.org/10.17352/ojt.000036>.

IV. RESOURCES

IV.1. HUMAN RESOURCES

The HEAL Africa personnel for the year 2021 were 565 for the Community Projects and the hospital, of which 310 Men (54.8%) and 255 Women (45.2%).

A. Hospital

The HEAL Africa tertiary level hospital has 251 agents under employment contract and consultancy contract, of which 123 men (49%) and 128 women (51%) who are distributed as follows:

- 36 doctors including 17 specialists and 19 general practitioners
- 17 administrative agents
- 130 nurses
- 20 technicians (laboratory and medical imaging)
- 48 paramedics and support technicians

B. Community Projects

In total, 314 agents distributed in different projects including 187 men (59.5%) and 127 women (40.5%).

C. HEAL Africa Training Service (HATS)

The Department of Training and Research has always operated with staff who are considered among the hospital's personnel.

IV.2. MATERIAL RESOURCES AND EQUIPMENT

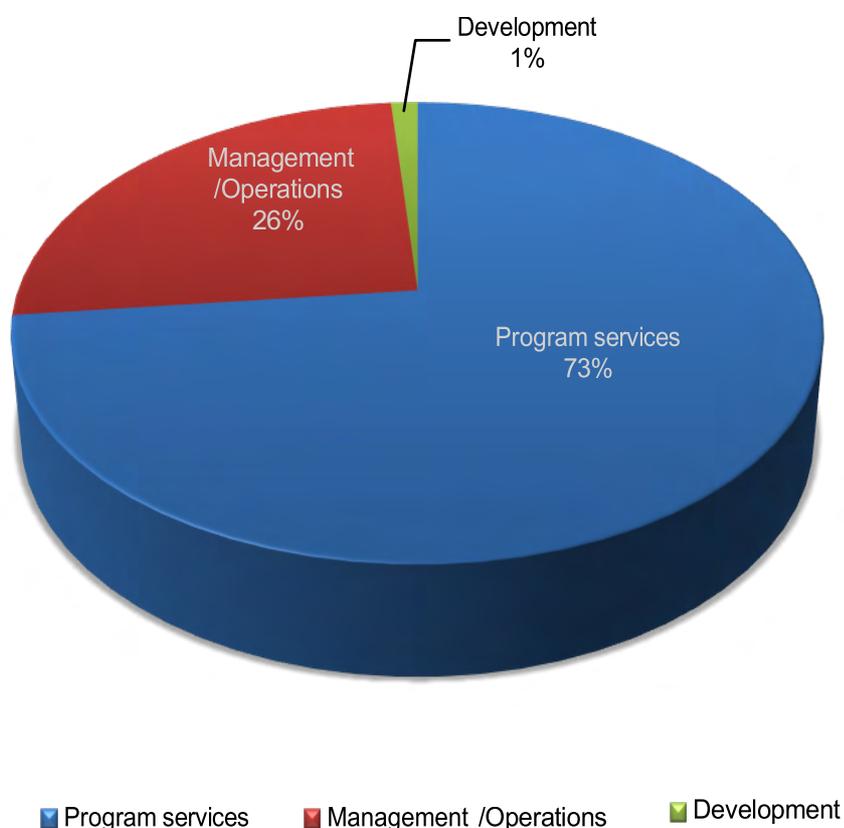
During the year 2021, HEAL Africa was granted with materials, equipment and inputs of various kinds from partners. These donations consisted essentially of:

1. A container from Sonic Healthcare in Australia with materials such as a mammography machine, portable ultrasound, various surgical and laboratory equipment, etc.
2. Two cargo packages from Direct Relief, the first freighter containing delivery kits for midwives and the second contained inputs for fistula repair.
3. Personal protective equipment (PPE) against COVID-19 and EBOLA.

SUMMARY OF DONATIONS RECEIVED

No.	DATE	ARTICLES	DONORS
01	January 2021	PPE - COVID-19	FSRDC
02	February 2021	Resuscitation equipment in case of Covid-19	FSRDC
03	June 2021	Container with materials for the hospital	SONIC Healthcare –Australia
04	July 2021	Childbirth kit for Midwives	Direct Relief - USA
05	July 2021	PPE - Covid-19	PPSSP
06	July 2021	PPE -Covid -19	Fistula Foundation
07	August 2021	Resuscitation device and PPE - Covid-19	WHO
08	August 2021	Shunts for the treatment of Hydrocephalus	Child Help International
09	September 2021	Inputs for the treatment of fistulas	Direct Relief - USA
10	October 2021	PPE - COVID-19	WHO – Goma
11	November 2021	PPE - COVID-19	Urban Health Zone of Goma

IV.1. FINANCIAL RESOURCES



Mission

The AusHEAL Congo project inspires hope in eastern DR Congo by enabling HEAL Africa to provide the best holistic health care possible.

Introduction

In 2021, AusHEAL celebrated 15 years since its first team visit to HEAL Africa in 2006.

From that year, AusHEAL has sent 90 members of the Australian team to provide teaching/training to hospital staff/invest in 10 specialist training scholarships and 17 short-term development grants/facilitate the construction of a specially designed training center that is used regularly/establish with HEAL Africa the basic essential and emergency surgery course under COSECSA with a total of 12 participants and 5 having passed/organize annual workshops with AusHEAL team members/organize and fund English courses for staff/deliver basic surgical skills courses and advanced trauma resuscitation courses/fund and install an oxygen plant/provide logistical support with medical equipment and IT infrastructure/sent 2 containers of donated medical equipment from Australia to Congo/successfully received 2 Direct Aid Program Grants from the Embassy of Australia, financing equipment worth a total of AUD\$120,602.69/introduce the "AusHEAL Hospital Patient Fund" to support the medical care of some patients living in poverty, save lives and give hope.

Summary of activities carried out in 2021

1. Education/Training

- January-September: via zoom, Dr Neil was leading from Australia 2 hours per week training for COSECSA trainees, as well as preparation for the test exams in September.
- September-December: Dr. Neil supervised the training between doctors twice a week; and prepared two (2) candidates for the oral exams in November. Both candidates passed. Additional training of COSECSA and MMed-Surgery trainees during service rounds, operating rooms and outpatient consultations. The Basic Skills in Surgery course was organized for 1 COSECSA and 4 MMed trainees on November 10 and 11.

2. HEAL Africa Training Centre (HATC) continues to be used for training by various clinical groups with at least 160 staff members per week involving anesthesia, surgery, internal medicine, medical students and nurses.

3. COSECSA Basic Training in Essential and Emergency Surgery

- Two (2) interns passed an oral exam via Zoom in November (both were accepted to train at a specialized level in Tanzania from 2022 but are still looking for funding for this).
- Two (2) new interns were selected in October after a comprehensive selection process.
- Two (2) previously selected trainees continue to train at specialist level (the first in Ethiopia and the second in Tanzania, with funds from AusHEAL). Both starting their third year of training in 2022.

Another trainee who succeeded has completed a year of general surgery training in Tanzania. He will begin pediatric surgery training in Malawi in 2022 (with a scholarship from another organization). This process continues to increase the number of fully trained surgeons who will eventually work in DR Congo, creating lasting change with improved surgical care in the long term.

4. AusHEAL Scholarships

Dr. Barthelemy Aksanti completed his specialized training in ObGyn in Nairobi. It is planned that he rejoins the HEAL Africa staff in January 2022.

Dr Justin Tsandiraki continues his FCS (Fully Qualified Surgeon) training at Kilimanjaro Christian Medical Center (KCMC) in Moshi, Tanzania, and will take his final exams at the end of 2022.

Mr. Jonas Ngaruye, the principal intensive care nurse received a new scholarship in 2021 to complete a 2-year Master's degree in Critical Nursing in Tanzania.

Dr. Jacques Fadhili Bake was the first HA COSECSA trainee to pass his exams and train as a surgical specialist in Soddo, Ethiopia. Dr. Jacques' training is not funded by AusHEAL for this additional training but is employed/funded by PAACS (Pan-African Academy of Christian Surgeons). Due to insecurity in Ethiopia, he was allowed to evacuate to Goma to spend 2 months working at HEAL Africa Hospital under the supervision of Dr Neil Wetzig, and this is a good thing for Dr Jacques to continue his training safely. HEAL Africa Hospital trainees will profit from his presence to experience the level of surgical care that is needed and expected in other African countries.

5. Short-term development grants

At the end of 2021, two grants were awarded to nurses to improve endoscope management and the establishment of a medical clinic for hypertension in Tanzania. These grants are valued at US\$ 1,500 each.

6. AusHEAL Inpatient Fund

About \$13,000 allowed 3 patients to receive treatment – 2 underwent a major life-changing surgery and was performed by Dr Neil Wetzig for a narrowed esophagus (swallowing tube), allowing them to take food orally again.

7. AusHEAL Advocacy and Logistics

Opportunities were seized in Australia to highlight medical needs in Congo through AusHEAL's Annual General Meeting in February, AusHEAL dinner in June and other speeches.

VI. SYNTHESIS ON THE REALIZATION WORLDSHARE PROJECTS, AND UNTRUST FOUNDATION 2021

VI.1. World Share Projects

In 2021, WorldShare Australia stood by HEAL Africa to assist the most vulnerable through the following projects:

Support for Separated Children: This psychosocial support project for the children affected by the eruption of Nyiragongo in Kibati district accompanied, through the activities of social capoeira, 134 children living in the Camp of the victims of Mujoga during the months of October, and 232 children in November 2021.



Given the enthusiasm shown by children from all over the Kibati community, their participation in the capoeira activities through the Support for Separated Children project has been massive and the number of children has increased significantly during the month of December 2021. They reached the number of 251 whose age varies between 6 and 18 years, including 132 boys and 119 girls.



Sponsor A Child: This project assisted 100 host families with an IGA start-up fund to enable them to ensure the schooling and psychosocial care of vulnerable and orphaned children sponsored by the project and living with these families in Goma. These IGAs funds have greatly helped these families to meet the needs of these children during the difficult period of repetitive confinement and especially during the eruption of the Nyiragongo volcano on May 22, 2021.

Mugunga School: WorldShare helped support teachers at Mugunga School (Goma Students Funds). With the support of WorldShare, Mugunga School (GSF) was able to provide good quality teaching for good school care to 299 vulnerable children (158 boys and 141 girls) who were enrolled for the 2020 - 2021 school year from the community of Mugunga and its surroundings. This competence reinforcement has allowed Mugunga School to expect good results, with a success rate of 100% for the finalists of The primary cycle who presented their primary school leaving exams (TENAFEP). The success rate for other classes of the primary level was of 89%, during a school year that has experienced many interruptions due to lockdown, but also to the disaster of the Nyiragongo volcano eruption of May 22, 2021.

Mercy Fund: With support from the Mercy Fund WorldShare project, HEAL Africa Hospital cared for 60 admitted vulnerable patients free of charge during 2021. The latter received quality specialized care and were released after their recovery.





UMUSHO: For this project which supervises vulnerable young people who have left the streets, 28 young people have been registered to follow various vocational and normal training courses for their social reintegration. Of these, 4 were enrolled in universities, 4 others for high school level and the others in vocational training centers. During the year 2021, one UAMUSHO member obtained his state diploma, and another got his bachelor's degree. Everyone who was in college and high school succeeded. For those undergoing vocational trainings, two (2) have successfully finished and nine (9) others continue with their training.

Chaplaincy Training: WorldShare contributed to the 2021 Chaplain Training Session. During this 2021 clinical pastoral training session, 17 chaplains and pastors from various communities including four (4) women successfully completed the training session organized from October 26 to November 25, 2021. The CPT session 2021 session had the privilege of welcoming two (2) chaplains from Ndjamena, Chad, to follow the Clinical Pastoral Training.



VI.2. Village Justice & Empowerment funded by Entrust Foundation Australia in 2020

The **Village Justice and Empowerment** project, funded by Entrust Foundation Australia, capacitated, and trained 36 new community, religious, ecclesiastical and opinion leaders who are members of the Nehemiah Committees, and strengthened the capacities of 108 other leaders who are members of 6 supported Nehemiah Committees. These leaders assist vulnerable and marginalized people in rural areas through mediation and peaceful conflict resolution (conflict management and transformation), as well as advocacy.

VII. PARTNERSHIP WITH AMERICAN BAPTIST INTERNATIONAL MINISTRIES (ABIM)

American Baptist International Ministries (ABIM) Support Jan-Dec 2021			
No.	Category	Description	Amount
1	Tuungane School	Food, School Kits, Uniforms	\$ 3 017,95
2	EcoDim	Training, Supplies, Uniforms, Vacation Bible School	\$ 5 947,99
3	Soins Medicales	HEAL Africa/ Handicap Centre	\$ 5 648,34
4	Frais Scolaire	School Fees/Scholarships (ABIM/STEP Funds)	\$ 9 573,00
5	Volcano Relief (ABIM)	NFI/Food Supplies/Shelter/Trauma Counseling	\$ 21 259,56
6	Volcano Relief (OGHS)	HEAL Africa Hospital and Chaplaincy	\$ 15 000,00
7	Computer/Literacy/Classes	Computer Lab/Literacy/English/Music Classes	\$ 3 361,98
8	HEAL Africa Centre de Sante	Ultrasound/Printer/Chairs	\$ 3 493,90
9	Women's Projects	Goat Project/AVEC/Fungua Maisha	\$ 8 095,00
10	Mugunga School	Playground Equipment	\$ 1 150,00
11	Social/Indigent Needs	Referrals from Chaplaincy and Others	\$ 2 097,32
12	Celebrations	Christmas/Easter/Intl Woman Day/Intl Day of the African Child	\$ 6 338,00
13	Street Children	Monitor Training, Supplies, Food	\$ 2 847,75
14	Rehabilitation/Repair	Repairs/Furniture/Maintenance	\$ 1 470,00
Total			\$ 89 300,79

VIII. KEY VISITS OF THE YEAR 2021

The year 2021 was marked by a renewal of visits after the 2020 cessation downstream from the COVID 19 pandemic related restrictions. HEAL Africa was honored to welcome important personalities, particularly:



Emily Maltman visiting HEAL Africa
(11/03/2021)



Trystan Peckar, Australian Ambassador in
Central Africa

A United Nations delegation that was accompanied by the Deputy Head of UNICEF, ambassadors of various countries including Australia, and other partners like UNAIDS team composed of PNLs officials from the different provinces of the DRC.

An important quote from the Australian Ambassador to Central Africa TRISTAN PECKAR residing in HARARE:

"Dear Hospital, Doctors, Nurses and all who support the operationalization of HEAL Africa Hospital, I was really delighted to visit the hospital and have the opportunity to meet you. Your contribution to patient care is well rated and you are really doing an important work for your community. We are happy to be able to work with you. We look forward to continuing our collaboration between the Australian Government (via the Australian Embassy in Harare) and you, HEAL Africa ».

OTHER VISITS RECEIVED DURING THE YEAR 2021

No	Days	Names	Duties
01	05/02/2021	Ally Cameron	USAID DRC Deputy Director
02	11/03/2021	Emily Maltman	British Ambassador
03	31/03/2021	Margaret Bjorgulfsdohir	US Embassy
04	22/04/2021	Ansan Kasedde	UNAIDS DRC Country Director
05	22/05/2021	Cion Sjebnan	Operations For the World Bank
06	17/11/2021	Trystan Peckar	Australian Ambassador for Central Africa
07	30/11/2021	Hannan Sulieman	UNICEF Regional Director
08	30/11/2021	Dr. Gaya Ganhwage	WHO Geneva
09	03/12/2021	United Nations Delegation	
10	16/12/2021	Dr. Sumehe M. R.	FONASI

On October 27, 2021, HEAL Africa was honored by the visit of H.E. MUHINDO NZANGI BUTONDO, DRC National Minister of Higher Education. His visit aimed to realize the effectiveness of the recently launched specialization training program. This training program is organized under a Consortium of 3 universities located in eastern DRC: University of Goma (UNIGOM), Official University of Bukavu (UOB) and Catholic University of Graben (UCG). HEAL Africa Hospital was appointed as the training center for master's degree candidates from the University of Goma



VIII. CONCLUSION

Admittedly, HEAL Africa had a singular year with multiple challenges, particularly those related to the Coronavirus pandemic and the recent eruption of the Nyiragongo volcano. But the greatness of the Lord transcended these troubled times.

All the projects, both at the hospital and at the community level, have been carried out. HEAL Africa hospital has a new Emergency and Intensive Care Unit that meets defined standards, and the socio-economic situation of the staff has remained stable.

Thanks to the support of its partners, HEAL Africa was able to contribute substantially to the response to the Covid-19 pandemic and Ebola Virus Disease. Glory be to God!

May all our partners find here the expression of our gratitude and, above all, the renewal of our commitment to keep giving the best of ourselves for the benefit of the community.

We believe in a better future and, together, we intend to do better in 2022.

IX. ANNEXES

HEAL AFRICA PARTNERS IN 2021

HIV/AIDS

1. Global Strategies
2. UNICEF
3. Stephen Lewis Foundation (Canada)
4. Tearfund

SGBV

1. World Bank/FS-RDC
2. World Bank/Cellule des Infrastructures, MinFin/DRC
3. UNICEF
4. DRC Humanitarian Fund
5. TEARFUND
6. Worldshare Australia
7. IMA World Health/USAID
8. LIVING PEACE
9. CORDAID
10. PHR (Physicians for Human Rights)

REPRODUCTIVE HEALTH

1. Fistula Foundation
2. Direc Relief
3. World Bank/FS-DRC
4. HEAL Africa USA
5. Preik Family Foundation

REINTEGRATION, COMMUNITY RECOVERY AND COMMUNITY-BASED REHABILITATION

1. CBM International
2. Entrust Foundation
3. HOPE Walks
4. HEAL Africa USA
5. JIM GALLOP Family

SPIRITUAL MINISTRY

1. ABIM-International International Ministries, USA
2. WorldShare UK
3. WorldShare Australia
4. HEAL Africa USA

ADMINISTRATION AND FINANCE

HEAL Africa USA

HOSPITAL

1. HEAL Africa USA
2. SONIC Healthcare
3. AusHEAL
4. HOPE Walks
5. PREIK Family Foundation
6. AMADE Mondial
7. Birth Link / Global Strategies
8. Smile Train

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