# HEAL AFRICA

# Annual Report

2024







Level 3 Hospital

Community Projects

Training & Research

#### WORD FROM THE CEO

# Dear partners,

The year 2024 ends with a blend of resilience and deep concern. The security situation in North Kivu province has drastically worsened, causing the mass displacement of thousands of families. The city of Goma and its surroundings have seen the rise of IDP camps overflowing with urgent needs. Amid this ongoing crisis, HEAL Africa has stood firm, persistently pursuing its mission to serve the most vulnerable populations.



This year also marked a significant institutional milestone for our organization. After an attempt to partially transform our activities into a

limited liability company, we officially regained our non-profit association statute (ASBL) following formal recognition by the provincial authorities of North Kivu. This return to our original legal form reflects our deep commitment to remain an organization focused on public interest, rooted in the values of care, engagement, mercy, dignity, and quality in community service.

Despite a difficult context, HEAL Africa continued its essential interventions for women suffering from severe complications such as fistulas, children born with congenital deformities such as clubfoot, those affected by malnutrition, survivors of sexual and gender-based violence, and other vulnerable groups. Our medical, psychosocial, and community teams mobilized with courage and compassion to provide care, psychosocial support, and guidance to the beneficiaries of our programs.

Dear partners, none of this would have been possible without your unwavering support! Your trust, resources, and continued engagement allowed us to take concrete actions that brought hope and restored dignity. Your determination makes you true actors in our humanitarian mission, and we are deeply grateful.

The challenges ahead remain numerous and complex. Yet, we continue to believe in the power of commitment and the will to serve others — and most of all, in the resilience of the communities we serve. Together, we can keep changing the course of broken lives, building bridges of reconciliation, and sowing seeds of hope in a context too often marked by emergency and suffering.



# ACRONYMS AND ABBREVIATIONS

ANC : Antenatal care

ART : Antiretroviral Therapy

BPC : Building Peaceful Communities

CAP : Children Aid Program
CAU : Community Animation Unit

CECT : Clinical Emergency Care Training

CH : Health Committee
CI : Infrastructure Cell

CISM : Integrated Multi-Sector Service Center

CN : Nehemiah Committee

COSECSA: College of Surgeons of East, Central and Southern Africa

CPS : Preschool Consultation

CUTCM : University Consortium for post graduate Medical education

DC : Community Dialogue
DISC : SOTA Care Diploma
EBA : Beloved Children
ECODIM : Sunday School

EHC: Healthcare Establishments EOV (OEV): Vulnerable Orphan Child

FHRDC : Humanitarian Fund of the Democratic Republic of Congo

FP : Family Planning

FVC : Fully Vaccinated Child GRH : General Reference Hospital

GSF : Goma Student Fund

HC : Health Center

HEAL : Health, Education, Action and Leadership

IGA : Income Generating ActivityIM : International MinistriesMAS : Severe Acute Malnutrition

NC : New Case

NGO : Non-governmental organization NSU : Nutritional Supplementation Unit

OC : Old Case

ONTU : Outpatient Nutritional Unit

OSC : One Stop Center

PCIMA : Integrated Management of Acute Malnutrition

PEP KIT : Post-exposure Prophylaxis Kit

PFCGL : Trade Facilitation Project in the Great Lakes Region

PMTCT : Prevention of Mother-to-Child Transmission

PNC : Postnatal care

PPE : Personal Protective Equipment

PRVB : Prevention and Response to Gender-Based Violence

PSA : Psychosocial Assistant

RHC : Reference Health Center

S-3G : Stability Gender Guarantee Community Single Window and Supply Chain

Management of Essential Medicines

SASA : Start, Awareness, Support, ActionSDG : Sustainable Development GoalsSEA : Sexual Exploitation and Abuse

SHF : Sonic Health Foundation

SOTA : Surgery, Obstetrics, Traumatology and Anesthesia

STI : Sexually Transmitted Infection SVS : Survivor of Sexual Violence

THP : Total Hip ProsthesisTKP : Total Knee Prosthesis

TPIC : Testing and provider-initiated counseling

UNTI : Internal Nutritional Unit VBG : Gender-Based Violence

VSBG : Gender-Based Sexual Violence

VSLA : Village Savings and Loan AssociationWASI : Women Stand Up (Wamama Simameni)

ZH : Health Zone

# INTRODUCTION

HEAL Africa is a Congolese national organization committed to promoting healthy communities in the Democratic Republic of Congo (DRC). To achieve this, the organization is active in several provinces across the country, offering a wide range of interventions. In 2024, activities were carried out in the provinces of North Kivu, South Kivu, Tanganyika, Kasaï Central, North Ubangi, Ituri, and Tshopo.

The precarious security situation hindered our humanitarian mission and was the underlying cause for the many challenges that continue to weigh on local communities. North Kivu province was particularly affected by armed clashes between government forces and the AFC-M23 rebels in the *Petit Nord* region. Meanwhile, in the northernmost part of the province (*Grand Nord*), the activism of the Ugandan ADF (Allied Democratic Forces) continue to exact a heavy toll on the population.

According to OCHA's December 2024 report, more than 290,000 people were displaced as a result of armed conflicts in North Kivu. Despite these security challenges, HEAL Africa maintained its activities across all territories of the province. The bases established by the organization in these areas served as hubs of operational energy and resilience.

On the medical front, both preventive and curative activities were carried out as usual, not only in North Kivu but also in other provinces. The epidemiological landscape was marked by a resurgence of epidemics such as Monkeypox, measles, and cholera; a rise in cases of malnutrition among children aged 0–5; and an increase in instances of sexual and gender-based violence.

From a community perspective, the presence of IDP camps around Goma continued to shape the core of our interventions in North Kivu. However, the vulnerability observed in other provinces such as Tanganyika and South Kivu motivated HEAL Africa to extend its expertise and respond to the needs encountered there. Activities targeting vulnerable populations were implemented through projects organized in three main sectors: Wamama, Watoto, and Wababa. The Watoto sector, in particular, saw a well-structured expansion of its interventions for the *Enfants Bien Aimés* (EBA – Beloved Children).

In the area of training and research, the organization saw encouraging progress. The training team was strengthened by new expertise, including awarding of two doctoral degrees. Another positive development was growing interest in the program that builds the capacities of rural doctors in surgical, obstetric, trauma, and anesthesia care. All other training programs continued with the support of multidisciplinary medical teams from overseas (USA and Australia).

#### A. MAJOR ACHIEVEMENTS OF 2024

#### I. HEAL AFRICA HOSPITAL AND HEALTH CENTER

- 1. Acquisition of essential new equipment for specialized patient care: a cardiac monitor, a pneumatic mattress, an intensive phototherapy machine, two defibrillators, two microscopes with cameras, an embalming machine, two dental chairs, and sound equipment for the conference room.
- 2. Renovation of the dental department with 7 apartments, and 8 inpatient rooms.
- 3. Launch of curative care within the HEAL Africa Health Center, including maternity.

#### II. COMMUNITY PROJECTS

#### Wababa Sector: Nehemiah, Men and Church

 Organization of two conferences on the SALT and CPT approaches at the University of LUKANGA and ULPGL-BUTEMBO.

#### Wamama Sector:

• Holistic management of issues related to sexual and reproductive health for women, girls, men, and boys, using the One Stop Center and Case Management approaches.

#### **Watoto Sector:**

Successful care of two sets of triplets in the Neonatology Unit.

#### III. TRAINING AND RESEARCH

- 1. Two doctoral theses defended by HEAL Africa researchers.
- 2. A total of 55 chaplains from the Congolese Army and Police trained in the SALT approach.
- 3. The 4 morning medical meeting rooms and the medical imaging department were equipped with modern projection and training material.

#### **CHALLENGES FACED IN 2024**

- Inaccessibility in several intervention areas due to insecurity.
- Increased vulnerability and scarcity of financial resources to provide the necessary humanitarian response.

#### PRAYER REQUESTS

- Pray for peace and stability in the eastern DRC;
- Pray for the acquisition of patient management software at HEAL Africa Hospital;
- Pray for the continuity of HEAL Africa's activities across all areas of intervention.

# I. HEALTH CENTER AND HEAL AFRICA HOSPITAL

#### A. HEALTH CENTER ACTIVITIES

The Health Center provided the following preventive and curative services:

- 5,635 pregnant women attended Antenatal Care (ANC) and 23 deliveries were conducted;
- 1,236 women attended Postnatal Care (PNC) after giving birth at HEAL Africa Hospital;
- **8,300** children were seen for Preschool Consultations (CPS);
- 1,556 children were fully vaccinated (FVC);
- 1,105 patients were followed in the nutritional supplementation unit (NSU: 1,007 patients) and in the outpatient nutritional treatment unit (ONTU: 98 patients);
- **1,097** women adopted Family Planning (FP) methods, representing an increase of 25.8% compared to the year 2023 (814 women);
- Of the 2,152 samples collected in the laboratory, 1,823 (100%) were tested for malaria, among which 622 (34.1%) were positive;
- 151 patients were diagnosed with tuberculosis among which 69 (45.7%) had pulmonary tuberculosis and 82 (54.3%) had extrapulmonary tuberculosis;
- 72 diabetic patients (including 27 new and 45 old cases) received education about their health status;
- 2,333 outpatient consultations were conducted as part of curative care;
- 3 patients were admitted for observation at the Health Center (HC);
- 560 patients were referred to HEAL Africa Hospital for better management.

Table 1: Utilization of the Health Center services from 2020 to 2024

PREVENTIVE CARE					
	2020	2021	2022	2023	2024
Antenatal care (ANC)	5,799	6,330	6,302	6,172	5,635
Preschool consultation (PSC)	21,241	28,777	23,415	1,313	8,300
Family planning (FP)	437	569	617	814	1,097
Nutrition	402	500	382	169	1,105
Post-Natal Care (PNC)	1,696	1,288	2,272	906	1,236
Fully vaccinated child (FVC)	963	940	2,546	973	1,556
Total	30,505	38,404	35,534	10,347	18,952
CURATIVE CARE					
Childbirth	-	-	-	-	23
Outpatient consultations	-	-	-	-	2,333
Observations	-	-	-	-	3
Transfers to the Hospital	-	-	-	-	560
TOTAL	-	-	-	-	2,919

#### **B. HEAL AFRICA HOSPITAL**

#### **B.1. CONSULTATIONS**

A total of 48,187 patients were seen in consultation, including 39,946 (82.9%) outpatients and 8,241 (17.1%) emergency patients. Among those patients received at the hospital, 28,389 (58.9%)

were female (including 5,279 (12%) pregnant women) and 19,798 (41.1%) were male. Additionally, out of the total patients, 24,924 (52%) were new patients and 23,263 (48%) were returning patients. Of all the patients seen, 5,279 (11%) were children under 5 years old.

#### **B.2. SURGERY**

#### **B.2.1. SURGERIES PERFORMED IN GOMA AND OUTREACH**

In 2024, a total of **3,014** surgical procedures: General surgery, Obstetrics and gynecology, Orthopedics and traumatology were performed by HEAL Africa teams in Goma and Outreach locations, among which **1,395** (46.3%) were special procedures.

Table 2. Total number of surgeries performed in 2024

	2024	
Goma	2,403	
Outreach	611	
TOTAL	3,014	

Table 3: Special surgical procedures performed in 2024 in Goma and Outreach

Services	Procedures	Total		
		Goma	Outreach	Total
General Surgery	Thyroidectomy	8	0	8
	Cleft lip repair	45	201	246
	Spina bifida repair	2	0	2
	Craniotomy	24	0	24
	Hypospadias Repair	8	0	8
	Mastectomy	2	0	2
	Abdominal catastrophe	4	0	4
Total		93	201	294
Gynecology/	Vaginal hysterectomy	14	0	14
Obstetrics	Uro/digesto-genital fistula repair	236	200	436
	Uretero-vaginal re-implantation	8	0	8
	Perineal repair	99	200	299
Total		357	400	757
Orthopedics	Osteosynthesis / SIGN	101	0	101
	Osteosynthesis / Others	213	0	213
	Total Hip Prothesis (THP)	11	0	11
	Total Knee Prothesis (TKP)	3	0	3
	Tenotomy	16	0	16
Total		344	0	344
TOTAL INTERVE	NTION	794(57%)	601(43%)	1,395

#### **B.2.2. MOBILE CLINIC (OUTREACH CLINIC)**

In 2024, a total of **7 mobile clinic missions** were organized: **3** missions in uro-gynecology and **4** for general surgery (plastic surgery). Out of a total of **611 patients** treated:

- 201 (32.9%) had cleft lip and palate, among whom 26 received nutritional care and 1 received orthodontic treatment.
- 200 (32.7%) had uro/digestive-genital fistulas, 200 (32.7%) had perineal tears, and 10 (1.7%) had other pathologies including urinary incontinence, bladder stones, and vaginal stenosis.

Regarding clubfoot treatment, a total of **1,097** patients under 2 years old were treated using the **PONSETTI method** in the 16 clinics supervised by HEAL Africa.

Table 4: Pathologies treated in urogynecology in Goma and Outreach

Pathology	Outreach	Goma	Total	Success rate
Uro/digesto-genital fistulas	200	236	436	99%
Genital prolapse	0	14	14	100%
Others (urinary incontinence, bladder stones,				
vaginal stenosis)	10	107	117	ND
Perineal tear	200	99	299	
Total	410	456	866	

Table 5. Surgical intervention sites in 2024

Province	Hospital (HGR)	EARLY	Funder
Kasai Central	Masuika	156	Fistula Foundation
North Ubangi	Karawa	121	Fistula Foundation
North Kivu	HEAL Africa	133	Fistula Foundation
TOTAL		410	

#### **B.3. GYNECOLOGY- OBSTETRICS**

#### **B.3.1 MATERNITY SERVICE**

**Table 6: Performed deliveries** 

Indicator	Number	%
Normal vaginal delivery	511	41.3%
Dystocic/difficult vaginal delivery	34	2.8%
Vaginal delivery on a scarred uterus	30	2.4%
Cesarean delivery	661	53.5%
TOTAL deliveries	1,236	100%

**Comment:** More than half of the clients delivered by cesarean section.

#### **B.3.2. SURVIVORS OF SEXUAL VIOLENCE.**

A total of **446** rape cases (429 women and 17 men) were recorded at the hospital, among which **243** (54%) were received within 72 hours post-assault and were given PEP kits. All survivors received holistic care. Out of the 446 survivors, **286** (64%) were under 18 years old.

#### **B.4. PARAMEDICAL SERVICES**

#### **B.4.1. LABORATORY**

A total of 114,135 samples were analyzed at the HEAL Africa hospital laboratory, with hematological tests accounting for the majority (40%).

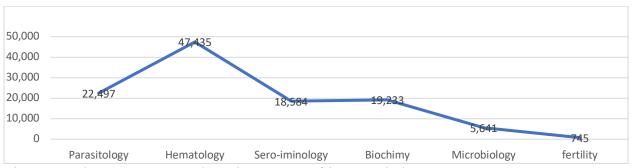


Figure 1: Laboratory tests conducted at HEAL Africa Hospital

# **B.4.2. MEDICAL IMAGING EXAMINATIONS**

In 2024, a total of **18,712 medical imaging examinations** were performed.

Table 7: Medical imaging examinations conducted from 2020 to 2024

	2020	2021	2022	2023	2024
Radiology	7,005 (47.4%)	6,926 (46%)	8,845 (49.1%)	9,081 (47.9 %)	9,044 (48.3%)
Ultrasound	7,043 (47.6%)	7565 (50.2%)	8,210 (45.6%)	8,024 (43.99 %)	8,359 (44.7 %)
ECG	728 (5%)	570 (3.8%)	802 (4.5%)	662 (3.63 %)	884 (4.7 %)
Cardiac ultrasound	-	-	142 (0.8%)	283 (1.56 %)	132 (0.7 %)
CT scanner	0 (0%)	0 (0%)	0 (0%)	187 (1.03 %)	293(1.6 %)
TOTAL	14,776 (100%)	15,061(100%)	17,999 (100%)	18,237 (100%)	18,712 (100 %)

#### **B.5. SPECIALIZED HOSPITAL SERVICES**

#### a. Endoscopy

Table 8: Endoscopy examinations performed from 2020 to 2024

Endoscopy	2020	2021	2022	2023	2024
Esophagogastroduodenoscopy	92	54	174	210	156
Colorectoscopy	5	12	56	46	40
TOTAL	97	66	230	256	196

# b. Other specialized units:

Table 9: Number of patients treated in the hospital's specialized units from 2020 to 2024.

UNIT	2020	2021	2022	2023	2024
Ophthalmology	1,717	1,473	1,671	1,567	942
Dentistry	1,089	869	1,128	1,197	1,480
Cascade	5,852	6,656	7,319	7,330	5,977
Physiotherapy	1,447	1,303	1,737	1,640	1,667

#### **B.6. SOME ELEMENTS ON THE QUALITY OF CARE**

Table 10: Hospital bed occupancy

	2020	2021	2022	2023	2024	
Number of beds	220	220	200	220	220	
Bed occupancy rate	57%	55%	65%	64%	65%	
Total number	of 6,956	7,781	7,735	7,266	5,874	
hospitalized cases						

**Comment:** In 2024, the average bed occupancy rate at HEAL Africa hospital was 65%.

# II. <u>COMMUNITY PROJECTS</u>

#### II.1. WATOTO SECTOR

#### II.1.1. HEALTH FIELD

#### A. Newborn care

The neonatal unit monitored 371 newborns, including 67 premature infants. Of the 67 premature infants, 8 were very preterm (< 27 weeks of gestation). With an experienced team and modern equipment, 5 (62%) survived, yielding a survival rate above the WHO standard of 20-50% for developing countries.

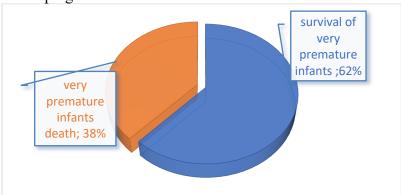


Figure 2: Survival rate of very preterm infants in the neonatal unit

#### B. Pediatric HIV care in the Children Aid Program (CAP):

The CAP program supported **570** children, adolescents, and young people, among whom **491** were HIV positive, all on antiretroviral therapy (100%). Of the 491 patients, **136** underwent viral load monitoring (27.7%) and 119 (87%) achieved viral suppression. A total of **375** (**98.7%**) out of 380 adolescents and young people, aged over 12 years, know their serological status.

Table 11: CAP activities in relation to the WHO 95/95/95 target

Indicators	Staff	Rate	95/95/95	GAP
Patients followed	570			
HIV-Positive Patients	491			
Patients on ART	491	100%	100%	0%
Patients on ART with viral load test done	136	27.7%		
Patients on ART with suppressed viral load	119	87.5%	87.5%	7.5%
Patients on ART with unsuppressed viral load	17	12.5%		
Patients on ART without viral load test	355	72.3%		
Patients on ART aged > 12 years	380	77.4%		
ART patients > 12 years and over knowing their HIV status	375	98.7%	98.7%	0%

**Comment**: 100% of patients receive antiretroviral therapy (ART), 87.5% have achieved viral suppression, and 98.7% of patients aged over 12 years know their serological status.

#### C. Prevention of mother-to-child transmission of HIV (PMTCT):

HEAL Africa followed **308** exposed children (132 new and 176 former cases). A total of 56 infants reached 18 months of age, and among them, 52 returned for testing (**92.8%**). All had negative HIV serology (0% transmission). PCR testing was negative in 20 infants (0% transmission at birth).

#### Note on Testing and Provider-Initiated Counseling (TPIC):

Among the 30 children aged 0-9 years received in the pediatric department via TPIC, 4 (13.3%) tested positive. In the same program, among 18 adolescents aged 10-19 years tested, 5 (27.8%) were positive.

#### D. Integrated Management of Acute Malnutrition (IMAM):

In the 3 nutritional care units, 1,290 malnourished children were monitored: 98 in ONTU, 1,007 in NSU and 185 in UNTI.

**Table 12: Distribution of Severe Acute Malnutrition Cases (SAM)** 

	NSU		ONTU U		UNT	[	TOTAL			
Sex	F	M	FE	FA	F	M	F	M	F	M
# of MAS cases identified and										
screened (NSU)	518	489	0	0	0	0	0	0	518	489
# MAS followed in outpatient										
clinics (ONTU)	0	0	0	0	53	45	0	0	53	45
# of cases monitored in hospital										
(UNTI)	0	0	0	0	0	0	111	74	111	74
# of cases discharged	463	367	0	0	41	32	135	85	639	484
# of cured cases	463	367	0	0	36	27	11	5	510	399
# of admitted cases tested HIV+	0	0	0	0	0	0	118	74	118	74
# of admitted cases tested for HIV -	0	0	0	0	0	0	6	6	6	6
# abandonments	0	0	0	0	5	5	0	0	5	5

# HIV+	0	0	0	0	0	0	3	2	3	2
# HIV-	0	0	0	0	0	0	108	83	108	83
# death	0	0	0	0	0	0	6	6	6	6
Cure rate									80.9%	
Death rate	1.07%									
Dropout rate									0.89%	

**Comments**: A recovery rate of 80.9% was noted, which is higher than the acceptable average of PRONUT (75%), and a death rate of 1.07%, lower than the acceptable standard of 5%.

#### II.1.2. AREA OF PROTECTION AND RESPONSE TO GENDER-BASED VIOLENCE

#### A. Medical management of GBV cases

HEAL Africa, in protection and response to GBV, supported **3,121** children and adolescents through 6 projects in 17 health zones in North Kivu, South Kivu, and Tanganyika provinces.

Table 13: Management of GBV cases among minors.

Sex	G	F	Total	
Identified cases	36	3,085	3,121	
# cases identified within 72 hours	22	2,125	2,147	68.8%
# cases having received the PEP KIT	18	2,122	2,140	99.67%
Pregnancy from rape	0	325	325	10.4%
Psychological support	36	3,085	3,121	100%
Legal support	36	274	310	9.9%

Comment: A total of 2,140 (99.67%) survivors received PEP Kits.

# B. Support in child and adolescent friendly spaces

A total of **1,471 child** survivors of SGBV, orphans and other children in difficult situations were supported by clinical psychologists using various approaches (Capoeira, NET and dance).

Table 14: Distribution of children supported in children's friendly spaces.

Changes in attitudes among children accompanied in space							
Age group	0 to 5	years	6 to 12 years o	ld	13 to years		Total
Sex	Girl	Boy	Girl	Boy	Girl	Boy	
Children with >90% positive change	96	101	147	173	76	81	674
Significant change (75–90%)	33	47	33	42	48	82	285
Moderate change (50–75%)	53	49	31	51	42	50	276
Slight change (25–50%)	26	37	51	93	14	15	236
TOTAL CHILDREN	208	234	262	359	180	228	1,471

**Comments:** A number of children achieved a positive change > 90%.

#### II.1.3. FIELD OF EDUCATION

In the field of education, in 2024, 426 children and adolescents of all categories benefited from education through various approaches:

#### a. Reintegration of children dropped out of school (Tuungane School)

This program recorded **62** children who had dropped out of school, among whom:

- 30 children (19 girls and 11 boys) were enrolled following the normal curriculum. Among them, 4 (13.3%) dropped out during the year. Of the 26 children who completed the year, 3 had grades below average while 23 succeeded with an average success rate of 79.5%.
- 32 children (23 boys and 9 girls) whose parents were hospitalized did not finish the year. They rejoined their original schools after their parents were discharged from the hospital.

# b. Schooling of children in disadvantaged situations

Goma Student Fund (GSF): 322 students, including 165 girls (51.24%) and 157 boys (48.76%), completed the 2023-2024 school year. Their average success rate was 90.06% (290 successes out of 322 students). All 37 (100%) final-year students obtained their primary school leaving certificates.

#### c. Support for schooling of orphans affected and infected by HIV

A total of **42** vulnerable children and orphans affected by HIV/AIDS living with foster families and/or grandparents received support for schooling through the Sponsorship program. Among them, 5 (11.9%) sponsored children obtained their **state diplomas** during the 2023-2024 school year. Two (2) other children are pursuing vocational training as they had difficulties continuing with primary studies.

### **Success Story:**

#### Milka and her premature baby survive thanks to proper holistic care.

At only 17 years old, Kavira Kubayaya Milka went through trials no expectant mother should experience. Her testimony is a moving story that proves the importance of mutual help.

It all started in the Katindo 2 neighborhood of Goma, where Milka, 7 months pregnant, was peacefully living. One evening, the calm was broken by gunfire from an armed bandit raid, which is common in Goma. Fear overwhelmed her, and her body reacted. It started with intense pain, accompanied by a leakage of fluid and worrying genital bleeding.

Faced with the emergency, her family urgently took her to a neighborhood hospital. There, doctors diagnosed a serious complication threatening both her life and that of her baby. The only option was to induce premature labor.





On August 21, 2024, Milka gave birth to a fragile

baby. This moment, which she describes as a mix of joy and fear, marked the beginning of another battle: the survival of her child. The medical team then made a crucial decision to transfer the baby to the neonatology department of HEAL Africa hospital, where specialized care is available.

Milka stayed under medical observation at the hospital where she had just given birth, worried but confident. The next day, she joined HEAL Africa to reunite with her baby. What she found was both comforting and challenging; her child, so small and vulnerable, was surrounded by machines and cared for by attentive professionals.

For a month and a half, her baby remained under intensive observation and treatment in HEAL Africa's neonatology department. Coming from a poor family, she could not afford to pay the medical bills. "I even refused to think about it because it took away all the happiness I had as I saw my baby gradually recover," she testified. Every moment was a mix of hope and fear. The medical care required for a premature baby is costly, and Milka, young and without financial resources, could not bear the cost.

But where she expected an insurmountable obstacle, a miracle happened. Thanks to **WorldShare's** support, HEAL Africa hospital covered all medical expenses, allowing Milka to focus on what mattered most, being there for her child.

On December 2, 2024, after weeks of intensive care, Milka and her baby were finally declared fit to leave the hospital. Her child's recovery was complete, and they both were able to return home. Thanks to the solidarity of HEAL Africa and its partners, what could have been a tragedy turned into a story of victory.

#### **Success Story:**

"My daughter's cleft lip repair healed my heart" (Kahindo Kahiri Jeanine)





At just three months old, little Kahindo Mweru Ushindi has already faced more challenges than many will in a lifetime. Born with a cleft lip amid armed conflicts and forced displacement, her story is one of hope, courage, and resilience.

Kahindo's mother, Mrs. Kahiri Jeanine, recalls the difficult circumstances around her daughter's birth. In June 2023, their village of Masau in Cantine was attacked by rebels. She and her family fled to Beni and took refuge with relatives. Then the birth of her daughter with a cleft lip added even more hardship to their lives.

"I was surprised and stressed to see my daughter with this malformation. My five other children were born without any issues," she confided. Superstitions and false beliefs in her community only increased her distress. Some blamed her eating habits; others mentioned imaginary quarrels during pregnancy.

# A painful rejection

The hardest moment for this brave mother was the rejection by her husband. Influenced by neighbors' gossip, he refused to fully accept their daughter, even suggesting she might not be his child. Despite this emotional isolation, Kahindo Kahiri Jeanine found the strength to fight for her daughter's future.

When she heard about a free cleft lip and palate repair campaign organized by HEAL Africa Hospital in Beni, she decided to take the chance, even without her husband's support. Determined, she walked to La Famille Medical Clinic where they were warmly welcomed. When she learned her daughter's cleft would be repaired for free, she was greatly relieved. After surgery, Kahindo Mweru Ushindi was transformed. Her mother describes that moment as a true rebirth: "I saw her smile for the first time since birth, and it healed my heart."

#### A future full of promise

Today, Kahindo is a radiant little girl. Full of gratitude, her mother believes this operation opens a promising future for her daughter. "She will be able to go to school, make friends, get married, and live life fully without being limited by stigma. You didn't just fix my daughter's cleft; you healed my heart and eased my fears for her future," she said to HEAL Africa and Smile Train, her benefactors.

Thanks to HEAL Africa's commitment and partners like Smile Train, families facing similar challenges can find hope even in the toughest situations.

#### II.2. WAMAMA SECTOR

#### A. PREVENTION OF GENDER-BASED VIOLENCE

As part of GBV prevention efforts, HEAL Africa, in collaboration with the health divisions of provinces North Kivu, South Kivu, and Tanganyika, worked closely with community structures (CODESA, CAC, RECO, RECOPE, NC, WAMAMA SIMAMENI) to disseminate awareness messages within the community through multiple channels (media, mass sensitization and door-to-door campaigns, leaflets, posters, etc.) using the SASA approach (Start, Awareness, Support and Action) and Narrative Theatre.

**Table 15: Results of community mobilization** 

COMMUNITY MOBILIZATION				
Individuals reached through awareness	NORTH	SOUTH	TANGANYIK	
messages	KIVU	KIVU	A	Total
Men	22,274	1,214	1,464	24,952
Women	35,059	4,337	2,842	42,238
Boys	18,932	2,970	907	22,809
Girls	28,696	3,667	2,046	34,409
Persons with disabilities	37,772			37,772
TOTAL				162, 180

**Comment**: A total of **162,180** people were reached by awareness messages aimed at promoting behavior change.

# B. HOLISTIC RESPONSE TO SEXUAL AND GENDER-BASED VIOLENCE (SGBV).

In the holistic management of SGBV, the OSC/IMSC approaches (Integrated Multisector Service Centers) and case management were implemented in 19 general hospitals, 9 referral health centers, and 81 health centers.

A total of 10,148 cases of sexual and gender-based violence accessed holistic care services according to their expressed needs, including 63 men, 6,964 women, 36 boys under 18 years old, and 3,085 girls under 18 years old.

Table 16: Distribution of SGBV cases treated in 2024

Indicators	NORTH KIVU	SOUTH KIVU	TANGANYIKA	Total	%
# VSBG cases	8,218	1,513	417	10,148	, ,
Girls	2,367	631	87	3,085	30%
Boys	34	2	0	36	0.4%
Women	5,770	864	330	6,964	69%
Men	47	16	0	63	0.6%
Rape	6,944	832	26	7,802	77%
Forced Marriage	128	54	9	191	2%
Sexual Assault	201	54	16	271	3%
Physical Assault	312	345	154	811	8%
Denial of resources	261	99	96	456	4%
Psychological violence	298	129	116	543	5%
Psychosocial assistance	5,106	1,513	417	7,036	69%

# Cases supported by clinical					
psychologists	905	181	17	1,103	16%
# of survivors admitted within 72					
hours	6,220	411	26	6,657	85%
# of survivors who received PEP Kit	6,270	339	26	6,635	99.7%
# of rape cases identified for STIs	5,253	1,192	79	6,524	84%
# of STI cases treated	2,413	1,192	53	3,658	56%
# of pregnancies resulting from rape	779	226	4	1,009	13%
# of childbirths resulting from rape	721	169	0	890	88%
# Complaints received at the legal					
clinic	888	66	10	964	9%
# Lawsuits initiated	713	28	10	751	<b>78%</b>
# Judgments rendered	149	21	7	177	24%
# Intimate partners	2,154	517	3	2,674	25%
# Uniformed personnel (police,					
military)	1,360	183	0	1,543	14%
Civilian authors/ Other unidentified					
individuals	4,320	439	16	4,775	44%
Weapon bearer	1,407	375	0	1,782	17%

# **Comments:**

- A total of 10,148 SGBV survivors benefited from quality services according to their expressed needs, with 99.7% of beneficiaries receiving the PEP Kit within 72 hours following the rape.
- In total, 751 survivors (78%) initiated complaints, of which 177 (24%) resulted in judgments.

Table 17: Management of sexual exploitation and abuse (SEA) cases in 2024

Indicators	Number	
Number of SEA victims assisted by HEAL Africa	178	
Number of girls —under 18 years old	100	
Number of women – over 18 years old	78	
Number of allegations made	2	
Number of complaints processed and concluded	2	
Number of children born from EAS	2	
Number of investigators trained at HEAL Africa	8	

# C. PREVENTION AND RESPONSE TO MOTHER-TO-CHILD TRANSMISSION OF HIV (PMTCT)

Out of a total of 5,635 women seen in antenatal care (ANC), 5,426 (96.2%) were tested for HIV, among whom 4 (0.25%) tested positive.

Table 18: HEAL Africa's PMTCT intervention parameters in 2024

Indicators	Number	%
Number of pregnant women seen at the ANC	5,635	
Number of pregnant women tested for HIV during ANC visit (ANC 1)	5,426	96.2%
Pregnant women newly diagnosed HIV+ (NC)	4	0.25%
Male partners tested for HIV	34	0.6%
HIV+ male partners	0	0%
Number of HIV+ pregnant women (NC) on ART	4	100%
HIV+ male partners on ART	168	
Women followed up under ART (Option B+) – previously diagnosed	310	
Women under ART (Option B+) – total (new and ongoing)	314	
Number of women who have had their viral load tested	153	48.72%
Women with suppressed viral load	67	43.79%

**Comment**: 96% of pregnant women were tested during their first antenatal care (ANC) visit. All 4 pregnant women who tested HIV positive were put on antiretroviral treatment (100%).

# D. MANAGEMENT OF FISTULA AND OTHER GYNECOLOGICAL COMPLICATIONS IN GOMA AND OUTREACH.

HEAL Africa conducted 3 mobile clinic outreach missions with the support of its financial partners (Fistula Foundation, Engender Health) in the provinces of NORD-UBANGI, KASAÏ CENTRAL, and NORD-KIVU at HEAL Africa Hospital. (See Table No. 03)

#### **Success Story:**

# Rebirth after misfortune: Zawadi Cisco shares her healing journey

Mrs. Zawadi Cisco, mother of 11 children, embodies hope and strength in the face of adversity. At 42 years old, she shares her incredible story of survival and healing. After suffering severe complications following childbirth, Zawadi faced isolation and emotional distress caused by a vesicovaginal fistula. Her path to recovery was long and challenging, but thanks to her unwavering courage and the crucial support from Fistula Foundation and HEAL Africa Hospital, she regained her dignity and health. In her own words, she recounts how she was able to be reborn from her misfortune:





"I am ZAWADI Cisco, mother of 11 children, of whom 7 are alive and 4 have passed away. At 42 years old, I want to share my story of resilience.

In January 2024, while giving birth at Rubare Hospital, located about 35 kilometers from Goma, my life changed drastically. I had difficulties delivering vaginally, which required a surgical intervention. Unfortunately, this procedure caused severe complications and damaged my bladder, leaving me with a vesicovaginal fistula. For seven months, I suffered from urinary incontinence.

At first, I was not aware of the severity of my condition. I thought the urinary leakage during my eleventh pregnancy was a normal consequence of childbirth. However, as the situation did not improve, I returned to the hospital where I had delivered. The diagnosis of vesicovaginal fistula, characterized by uncontrolled urine loss, was a devastating blow for me. I was overwhelmed by fear and uncertainty about my future.

Due to their limitations in treating my fistula, the Rubare medical staff transferred me to Rutshuru General Hospital. There, for over three months, I underwent three surgical interventions aimed at closing my fistula. None succeeded.

Burdened by emotional distress and unable to work in my fields, or participate in my religious community activities, I found myself isolated and desperate. Sometimes I faced discrimination from other women in my village because of the repulsive smell caused by urine leakage. However, the doctors at Rutshuru continued to give me hope; they advised me to go to HEAL Africa Hospital in Goma for specialized care.

On July 9th, 2024, with unwavering determination and the steadfast support of my husband, I embarked on the journey to Goma. Upon arrival at HEAL Africa, I was welcomed with warmth and compassion. The warm reception and beauty of the hospital immediately restored my hope.

On July 24th, 2024, I finally underwent a successful surgical procedure. During my weeks of care at HEAL Africa, I received special attention and invaluable support. It felt like living a dream surrounded by an exceptional medical team dedicated to my well-being. I knew I would come out healed.

On August 21st, 2024, I left the hospital with my fistula healed. From shame to rebirth, this decisive transformation in my life was made possible thanks to the invaluable support of Fistula Foundation. With this help, HEAL Africa has been able to restore health and continues every year to give dignity and hope back to hundreds of women in the Democratic Republic of Congo."

### E. PROGRAM FOR THE EMPOWERMENT OF CONGOLESE WOMEN

#### **Village Savings and Loan Association (VSLA):**

As part of women's empowerment, HEAL Africa has established 27 VSLAs and **supported 1,024 resilient women and girls** in the community with income-generating activities (IGAs) to strengthen savings within the VSLAs. Additionally, 196 beneficiaries have accessed loans.

In total, **3,720 beneficiaries received socio-economic reintegration kits** after completing vocational training in various fields (tailoring, pastry, culinary arts, charcoal briquette production, knitting, hairdressing, and beauty care), as well as training in commercial skills and microenterprise management.

Table 19: Number of apprentices by vocational field organized

Risk Mitigation for GBV and SEA/Trade Training				
Job	Total			
Brickyard work	1,381			
Tailoring	676			
Knitting	542			
Basketwork	2			
Pastry making	26			
Hairdressing	2			
Basket weaving	1,091			
Grand total	3,720			

Table 20: Parameters relating to VSLAs at HEAL Africa-supported sites in 2024

Table of VSLAs in sites in North and South Kivu					
Indicators	Total in CDF	Value in USD			
Total number of VSLAs	27				
Average share value	1,500	0.54			
Total Number of Members	1,024				
Total number of shares purchased	11,964				
Total Value of Shares Purchased	12,791,200	4,568.2,857			
Number of Credits granted to Members	196				
Values of loans granted	5,977,500	2,134.8 214			
Number of people assisted 84					
Solidarity Fund	672,000	240			
Average value of shares purchased per member	11,200	4			

**Comment**: This table shows that each VSLA member purchased an average share value of 1500 CDF (\$0.54).

#### II.3. WABABA SECTOR: NEHEMIAH, MEN AND CHURCH

#### II.3.1. NEHEMIAH PROGRAM

Within the framework of the two approaches, NEHEMIAH and SALT, our interventions targeted the territories of Idjwi and Nyiragongo to strengthen the capacities of the 7 Nehemiah Committees.

In the community mobilization mission, the messages reached 2,028 people on various themes: conflict management techniques, peacebuilding, prevention of SGBV/SEA (Sexual and Gender-Based Violence / Sexual Exploitation and Abuse), forms of violence, peaceful coexistence, and financial education.

Thanks to the trained Nehemiah Committees, 338 conflicts were identified, of which 204 were resolved through mediation, arbitration, and confrontation techniques implemented.

Table 21: Major achievements in conflict management and transformation.

Nehemiah Committees	Identified conflicts	Resolved conflicts	Mediation in progress	Referred conflicts	Mediation failure
BUNYAKIRI	48	30	10	5	3
SHUVE	36	20	5	5	6
CN Umoja Kashara 1	94	51	30	5	8
CN Baraka Kashara 2	33	27	4	1	1
CN Kashara 3	77	37	18	8	14
CN Kashara 4	42	35	5	0	2
CN Bugarula	8	4	2	2	0
TOTAL	338	204	74	26	34

#### **II.3.2. SPIRITUAL MINISTRY**

#### Year 2024:

- **5,600** patients, including 1,944 men, 2,358 women, and 1,298 children, were supported by counselors using the CPT approach at the hospital and within the community. Additionally, 3,996 individuals testified to having received comfort and hope for healing;
- 22 people accepted Jesus Christ as Lord and Savior and were baptized: 6 during the Easter season and 16 during the Christmas season;
- 1,010 children regularly attended their classes at Sunday School (ECODIM). However, during holiday periods (African Children's Day, Easter, and Christmas), average attendance was around 1398 children;
- 38 children (boys) in difficult situations joined the "Beloved Children" program. This program focuses on family reunification, socio-economic reintegration, and psychological support. In counseling, each child received an average of 5 sessions per month, totaling 2,425 sessions organized. Thirty-eight children were reintegrated into their parental homes;
- **235** parents of ECODIM children participated in training on good child-rearing practices (*malezi bora*) and entrepreneurship;

- **64** ECODIM instructors were trained in the use of pedagogical tools for teaching the Bible to children
- As part of support for idle youth (UAMSHO), 68 young people were trained in various trades and acquired skills for autonomy: 10 worked in music therapy, 14 received training in art and painting, 13 gained English language skills, 21 became literate, 5 learned tanning, and 5 learned driving.

# III. TRAINING AND RESEARCH (HEAL Africa Training Services)

#### 1. COSECSA PROGRAM:

In 2024, 2 new resident doctors were recruited. Out of 4 former residents, one successfully completed the MCS (Member of College of Surgery) training level, while one dropped out of the program.

#### 2. SOTA PROGRAM:

The DISC program (Diploma in SOTA Care) trained 20 doctors, all of whom showed significant improvement in their knowledge and skills.

#### 3. FAMILY MEDICINE:

The Family Medicine training ran with a total of 9 residents, all having completed their second year. Among them, 3 passed the competency exams and the remaining 6 were admitted to the second session scheduled for March 2025.

# 4. UNIVERSITY CONSORTIUM FOR POSTGRADUATE MEDICAL EDUCATION (CUTCM):

HEAL Africa, in collaboration with UNIGOM (*Université de Goma*), continued training 34 specializing doctors: 15 in their first year, 6 in their second year, 9 in their third year, and 4 in their fourth year. In 2024, two doctoral days were organized – one at HEAL Africa and another at UCG (*Université Catholique du Graben*) Butembo. Thirteen theses were successfully defended (8 at UNIGOM, 4 at UOB – *Université Officielle de Bukavu*, and 1 at UCG).

#### 5. ORTHOPEDIC NURSING TRAINING:

A total of 67 students were supervised in orthopedics: 16 in L1 (Licence level 1), 18 in L2, 19 in L3, and 14 are awaiting the defense of their tutored projects.

#### 6. EMERGENCY CARE TRAINING:

In 2024, 23 health workers (doctors and nurses) were trained in emergency care across three cohorts (7 participants, 8 participants, and 8 participants).

#### 7. CHAPLAINCY TRAINING (CHAPLAINCY SCHOOL):

Two activities were organized: a sensitization mission carried out at Lukanga University and ULPGL Butembo University addressing the situation of chaplains in crisis, limited literacy among chaplains, and needs within academic institutions; and a CPT session held in Goma gathering 16 development agents from Beni, Butembo, Goma, and Idjwi.

#### 8. SUPERVISION OF MEDICAL INTERNS:

A total of 32 medical interns were supervised across various hospital departments –20 from UNIGOM and 12 from ULPGL.

#### 9. MEDICAL IMAGING:

A total of 125 participants were empowered in medical imaging including 34 medical interns, 87 students, and 4 specializing interns.

#### 10. TRAINING OF HOSPITAL STAFF

During the year 2024, several HEAL Africa staff members were trained:

#### a. Training of Nurses:

A nurse was sent to Tanzania for a one-month training on emergency management and pediatric emergency care.

A morgue attendant spent 21 days in Tanzania for refresher training on body reception, formalin preservation, coffin preparation, and preparation of bodies for autopsy.

# b. Training of Doctors:

## > Those currently in training:

Dr. Albin Serugendo continues his cardiology fellowship at Karen Hospital in Nairobi, Kenya, meanwhile Dr. Cédric Tsongo continues work towards his master's degree in Anesthesiology and Intensive Care at Muhimbili University in Dar es Salaam, Tanzania. Dr. Meschack Musubao pursues his specialization in urology (Fellowship) at Mulago Hospital in Kampala, Uganda, and Dr. Bienvenu Hangi Mbida continues his specialization in pediatric surgery (Fellowship) at Queen Elizabeth Central Hospital (QECH) and Mercy James Centre in Malawi.

#### > Those who have completed their theses:

Dr. Kabuyaya Kakule Médard defended his thesis successfully with "great distinction," and was awarded Doctorate in Pediatric Surgery at the University of Goma.

Dr. Paluku Lussy Justin also defended his thesis successfully with "highest distinction," and was awarded Doctorate in Gynecology-Obstetrics at the University of Goma.

#### c. Clinical mentorship in neonatology:

Neonatology trained 8 healthcare providers from 4 health zones (Karisimbi, Kamango, Goma, and Beni). Each provider received a newborn resuscitation kit after 3 months of training (Ambu bag, oxygen nasal cannula, thermometer, hat, booties).

#### d. Training in anesthesia and resuscitation

**During 2024:** 

- Six paramedical staff underwent anesthesia-resuscitation training, including 4 anesthetists in training and 2 nurses from General Referral Hospital of Kitatumba in Butembo;
- One physician from the General Referral Hospital of Beni was supervised and trained in intensive care for two weeks;

• A scientific day was organized at HEAL Africa to commemorate World Anesthesia Day with about 100 participants (anesthetists, anesthesiologists, students).

#### 11. RESEARCH, CONFERENCES AND PUBLICATIONS

#### 11.1. Research:

- Collaboration between HEAL Africa and Brown University (Rhode Island, USA): The research project on artemisinin resistance in collaboration with Brown University (USA) is currently in the sample collection phase, with 5,705 samples collected thus far from 10 sites.
- **Research Project**: A research project on measles, in collaboration with Gabonese partners and the University of Massachusetts, is in the submission phase to the United States research department, scheduled for February 2025.

#### 11.2. Participation in International and National Conferences

#### a. Scientific Presentations at Conferences:

- Artemisinin resistance in Eastern DRC, presented by **Dr. MUMBERE HANGI Stan** at the Multilateral Malaria Initiative (MIM Africa) conference in Kigali in April 2024;
- Therapeutic failures of ACT in treating simple malaria in the Bulengo displaced persons camp in Goma, presented by **Dr. MUMBERE HANGI Stan** at the American Society of Tropical Medicine and Hygiene (ASTMH) conference at Brown University, Rhode Island, USA, in November 2024;
- Gunshot long bones open fractures treated with Sign nail in a conflict East DRC HEAL
  Africa hospital Goma, presented by Dr. John MUSUBAO KATSUVA at the SIGN
  International Orthopedics conference in the United States in October 2024.

#### **b.** Staff Participation in International Conferences:

- COSECSA Conference in December 2024: Professor Kabuyaya KM, Dr. Jacques FB, Dr. Justin T, and Dr. Neil W;
- SOTA Symposium (Surgery / Obstetrics / Traumatology / Anesthesia) in August 2024: Professor Kabuyaya KM, Professor Justin Lussy, Dr. Barthelemy Aksanti, Dr. Kigayi, Dr. Jacques FB, Dr. Justin T, and Dr. Neil W;
- TEAM CLEFT in November 2024: Professor Kabuyaya KM, Dr. Kasereka Kihemba, Dr. Mumbere Kigayi, Poteau Katsuva, and Sylvain Kwiratuwe;
- World Congress of Anesthesiologists in Singapore in March 2024: Dr. Mumbere Kigayi;
- Research on Intensive Care and Critical Care organized by WFICC in 2024: Dr. Mumbere Kigayi;
- Simulation Training in August 2024: Dr. Mumbere Kigayi, Dr. Mundenga Mutendi Muller, and Mr. Cito.

#### 11.3. Scientific publications:

- Jacques Fadhili Bake, Mechak Barianga Musubao, Sarah Cairo. Neonatal surgical mortality in a low-resource context, tertiary hospital HEAL Africa, Eastern Democratic Republic of Congo. Pediatr Surg Int. 2024 Aug 27;40(1):243.
- Jacques Fadhili Bake, Claude Kasereka Masumbuko, Zacharie Tsongo Kibendelwa, Dan Poenaru. Enhancing Surgical Safety in Conflict Zones: Implementing the WHO Checklist in North Kivu. Vol. 2 No. 2 (2024): July 2024.
- Paluku JL, Sikakulya FK, Furaha CM, Kamabu EM, Aksanti BK, Tsongo ZK, et al. Epidemiological, anatomoclinical, and therapeutic profile of obstetric fistula in the Democratic Republic of the Congo: About 1267 patients. Trop Med Int Health. 2024.
- Paluku JL, Bartels SA, Kasereka JM et al. HEAL Africa score to predict failure of surgical repair of obstetric urethro-vaginal fistula in the Democratic Republic of the Congo. BMC Women's Health 24, 111 (2024).
- Paluku JL, Aksanti BK, Clemmer WC, Furaha CM, Kamabu EM, Kasereka JML et al. Determinants and predictive model of failure of surgical repair of obstetric vesico-vaginal fistula in the Democratic Republic of the Congo. Reprod Health 21, 42 (2024).
- Paluku JL, Bartels SA, Kataliko BK et al. Access to High Quality Surgical Repair Services is a Fundamental Right of Patients with Obstetric Fistulas: A Study on Quality of Life Data in the Democratic Republic of the Congo. Int J Womens Health. 2024;16:645-653.
- Paluku JL, Mufungizi CF, Kasereka KB, Mukekulu KE, Kasi AB, Musubao LC, Jonathan MLK, Kihemba K, Kigayi MJP, Mwatsi IC, Masudi MS, Kalole KB, Muteke JK, Kyembwa MM, Kabuyanga RK, Tsongo KZ, Wembonyama SO, Wembonyama MC, Juakali SKV., Knowledge about obstetric fistula among women of reproductive age in North Kivu province, Democratic Republic of Congo. Kivu Medical Journal. 2024;2(1):1-10.
- Sikakulya FK, Muhumuza J, Vivalya BMN, Mambo SB, Kamabu LK, Muteke JK, **Lussy JP**, Ilumbulumbu MK, Emmanuel T, Kiyaka SM, Kavuyiro A, Mukandirwa C, Lekuya HM, Vahwere BM, Okedi XF, Masumbuko CK. Psychosocial impact of surgical complications and coping mechanisms among surgeons in Uganda and Eastern Democratic Republic of the Congo. PLOS Glob Public Health. 2024;4(4): e0003180.
- Paluku JL, Furaha CM, Bartels SA, Aksanti BK, Kataliko BK, Kasereka JML, Kamabu EM, Kalole BK, Muteke JK, Kyembwa MM, Kabuyanga RK, Tsongo ZK, Wembonyama SO, Mpoy CW, Juakali JS. Obstetric vesico-uterine fistula in nine reference hospitals in the Democratic Republic of the Congo: epidemiological, clinical, and therapeutic aspects. BMC Women's Health. 2024;24(309). doi.org/10.1186/s12905-024-03124-w.
- Kabuyaya MK, Ahuka OL, Mekonen E, Van Ye TM, Millican P, Wembonyama OS, Uwonda AS. Epidemiological, clinical and therapeutic aspects of cleft lip and palate in the Democratic Republic of Congo: about 1666 cases. BMC Oral Health 2024; 24:590.
- Kabuyaya MK, Mukuku O, Kasereka JM, Ahuka OL, Mekonen E, Van Ye TM, Millican P, Wembonyama OS, Uwonda AS. Exploring quality of life disparities among 177 families with children affected by cleft lip and/or palate: A comprehensive analysis using the Impact on Family Scale. Theory and Clinical Practice in Pediatrics 2024; 5: 114-120.
- Kabuyaya MK, Mukuku O, Ahuka OL, Mekonen E, Van Ye TM, Millican P, Wembonyama OS, Uwonda AS. Impact of surgical repair on the patients' quality of life

- with cleft lip and palate in the Democratic Republic of the Congo: A longitudinal study using the CLEFT-Q scale. Advances in Health and Behavior 2024; 6: 275.
- Kabuyaya MK, Kasereka JML, Ahuka OL, Mekonen E, Van Ye TM, Millican P, Wembonyama OS, Uwonda SA. Cleft lip and palate in sub-Saharan Africa. Literature review. Journal of Medicine, Public Health and Policy Research. 2024;4(1):55-78.
- Kigayi JPM, Kavira CM, Kyakimwa HA, Alfred Murhula AC, Sivihwa AK, Masehi TB, Kasomo JK, Tsongo CK, Ngaruye J, Shabani CK, Katsuva P, Vagheni CK, Trallagan P, Kabesha AT, Wembonyama SO, Rae B, Tsongo ZK. Cardiopulmonary resuscitation of inhospital cardiac arrests in North Kivu: evaluation of healthcare providers' knowledge level and perception and their determinants. Kivu Medical Journal 2024; 2(2),1-10.
- Ajayakumar J., Curtio AJ., Maisha FM et al. Using special videos and deep learning for automated mapping of ground level context of health relief camps. International Journal of Health Geographics 2024; 23(1),23.
- Wernsman Young N., Gashema P., Giesbrecht D., Munyaneza T., Maisha F., Mwebembezi F., Budodo R., Leonetti A., Crudale R., Iradukunda V., Jean Bosco N., Kirby RI., Boyce RM., Mandara CI., Kanyankole GK., Ntaro M., Okell LC., Watson OJ., Mulogo E., Ishengoma DS., Hangi S., Karema C., Mazarati JB., Juliano JJ., Bailey JA. High frequency of artemisinin partial resistance mutations in the Great Lakes region revealed through rapid pooled deep sequencing. J Infect Dis. 2024 Oct 5: jiae475.
- Katsuva KP. Anesthetic management of premature newborns in under-equipped settings: Case study and recommendations for safe and effective care. Africanism Interdisciplinary Review RAID 2024; 60-Issue.

#### IV. <u>RESOURCES</u>

#### **IV.1. HUMAN RESOURCES:**

Globally, HEAL Africa operated with a total of 483 staff members: 241 men (49.9%) and 242 women (50.1%).

## Specifically:

- HEAL Africa level three hospital has 265 employees under work contracts or consultancy agreements, including 127 men (47.92%) and 138 women (52.07%). This workforce is composed as follows: 31 physicians (22 specialists and 9 general practitioners), 27 administrative staff, 130 nurses, 23 technicians (laboratory and imaging), 54 paramedical and support technicians.
- The community projects operated with a total of 218 staff members, comprising 103 women (47.24%) and 115 men (52.75%).

The HEAL Africa Training Service (HATS) department is included within the hospital's overall staffing.

# IV.2. RECEIVED DONATIONS, MATERIAL RESOURCES AND EQUIPMENT

The table below details the donations received by HEAL Africa from various partners:

**Table 22. Various Donations** 

N o	DATE	ITEMS	DONORS OR PROVENANCE
01	10/01/2024	DENTISTRY CHAIR	CAREMEAD
02	01/22/2024	VARIOUS MEDICINES	ZENUFFA
03	01/26/2024	ANTI-MALARIAL DRUGS	GOMA HEALTH ZONE
	05/20/2024		
	06/11/2024		
04	01/17/2024	PEP KIT	UNICEF
05	01/02/2024	RAPID/MALARIA TESTS	GOMA HEALTH ZONE
	07/03/2024		
	09/26/2024		
06	05/03/2024	OPERATING THEATRE SUPPLY	AMERICAN VISITORS
07	03/29/2024	VARIOUS MEDICINES	GOMA HEALTH ZONE
	11/07/2024		
	08/28/2024		
	12/26/2024		
08	03/05/2024	PCI AND PPE MATERIALS	GOMA HEALTH ZONE
	10/31/2024		
09	07/01/2024	MOSQUITO NETS	GOMA HEALTH ZONE
	03/12/2024		
10	07/29/2024	ORTHOPEDIC MATERIALS	SIGN FRACTURE CARE
	12/16/2024		INTERNATIONAL
11	07/31/2024	OFFICE MATERIALS	GOMA HEALTH ZONE
12	03/08/2024	ANTI-RETROVIRAL MEDICINES	GOMA HEALTH ZONE
	10/16/2024	AND PEP KITS	
13	11/22/2024	PPE	WHO GOMA
14	07/29/2024	SURGERY MATERIALS FOR CLEFT LIP	SMILL TRAIN
15	10/22/2024	THERAPEUTIC MILK F100	DOCTORS WITHOUT
			BORDERS
16	11/27/2024	VARIOUS MEDICINES	MONUSCO/BANGLADESHI
			CONTINGENTS
17	09/23/2024	SUCTION CUPS	AusHEAL
18	12/12/2024	DELIVERY KITS	Direct Relief
19	JAN-DEC	LABORATORY REAGENTS	SONICHEALTHCARE
17	2024	Zabolation infohitib	FOUNDATION

#### IV 3. FINANCIAL RESOURCES



Figure 3: Distribution of HEAL Africa's financial resources in 2024

#### V. **ACHIEVEMENTS OF SOME SPECIFIC PROJECTS**

#### A. PROJECTS FUNDED BY WORLDSHARE

The major achievements of the projects funded by WorldShare for the year 2024 are summarized as follows:

# 1. Equiping Church leaders for Counseling Outreach (ECCO) Project:

- 40 leaders (community and religious) from 12 different communities and churches were trained in SALT and MARC approaches through the ECCO (Equiping Church leaders for Counseling Outreach) project, aimed at peaceful conflict resolution and transformation through mediation within the Buhene communities.
- Over 500 families were involved in SALT visits in Buhene conducted by the trained leaders.



Capacity building of community leaders in Buhene

#### 2. MERCY FUND Project:

60 vulnerable patients received free medical treatment at HEAL Africa hospital with support from the Mercy Fund WorldShare project in 2024.

#### 3. "UAMUSHO" Project:

80 vulnerable young people were followed up, among whom 68 received support for social reintegration, including:

- > 17 members trained in tailoring and socially reintegrated for financial autonomy.
- ➤ 14 youths learning painting and drawing at Uamusho Arts School.
- > 24 members supported for primary and secondary education during 2024, with 5 obtaining their state diplomas in the 2024 school year.

➤ 13 others supported jointly by WorldShare and Paul Bakes for university studies, among whom 2 obtained their university degrees during the 2024 academic year.







Uamusho Arts School for young Uamusho members

# 4. "MUGUNGA PRIMARY SCHOOL" Project:

- 360 school kits (Back-to-School) were distributed to vulnerable pupils enrolled at GSF Mugunga for the 2024–2025 school year.
- 37 vulnerable pupils successfully completed their primary education and obtained their primary school completion certificates at Mugunga School for the 2024 academic year.
- 348 vulnerable enrolled pupils receive food at school: one solid meal (buffet) per month and porridge once a week, thanks to the school canteen financially supported by WorldShare Australia.



Providing food to the students of the Mugunga School

## 5. SPONSORSHIP

- 42 families of sponsored vulnerable children each received funds to strengthen their income-generating activities to meet the basic and educational needs of the sponsored children.
- 5 sponsored children obtained their state diplomas during the 2024 school year.

Details on all other achievements of these projects are available in various project reports at the HEAL Africa Program Department and at the Coordination Office of these projects within HEAL Africa.

# B. "BUILDING PEACEFUL COMMUNITIES" project funded by ENTRUST FOUNDATION

The second year of the "Building Peaceful Communities" (BPC) project, implemented by HEAL Africa with funding from Entrust Foundation, was carried out in the island territory of Idjwi. The Masisi (Karuba) territory was not reached due to the ongoing M23 war.

During 2024, the BPC project achieved the following results:

- 126 community and religious leaders' members of 7 Nehemiah Committees were trained as community paralegals by the "Building Peaceful Communities" (BPC) project on various project themes including basic legal concepts, SALT and MARC approaches, community development, as well as entrepreneurship and financial management, etc.;
- 338 conflicts were identified, managed, and transformed by the trained leaders, including: 204 successful mediations conducted by these leaders, 74 conflicts currently under mediation, 34 mediation failures, and 26 conflicts referred to competent authorities;
- 418 SALT visits conducted by trained leaders reached 495 families in 88 villages;
- 143 microloans were granted to members of the Nehemiah Committees to restart economic activities through their respective income-generating activities (IGAs).

# C. "FOLLOW-UP TRAINED CHAPLAINS" PROJECT: SALT PHASE 5.

During this phase, the project achieved the following results:

- 55 Chaplains from the Congolese Army and Police (FARDC and PNC) and from the ECC in the Beni-Lubero operational zone 30 chaplains from Beni and its surroundings and 25 from Butembo were trained on the new SALT and MARC approaches by the SALT project in its phase 5. They returned to their regions to practice SALT and MARC within their respective communities.
- 37 vulnerable patients were treated free of charge at HEAL Africa Hospital with support from the WorldShare UK project in 2024.







SALT training with the Chaplains of Butembo

#### D. PROJECTS FUNDED BY AMERICAN BAPTIST CHURCHES (ABIM)

- 1. **EcoDim**: ABIM supports training and provides learning materials for all Sunday school teachers (64) and learning materials for 900 children (study guides, brochures, educational films, etc.);
- 2. **EcoDim and Youth Events**: ABIM funds the following annual events: Easter Celebration, International Day of the African Child, Vacation Bible School, Christmas Program, Parent Training: "Me and My House" (400 participants). The computer learning lab was updated with 15 Lenovo laptops and equipment.
- 3. **Tuungane School**: ABIM provides the following support for the school serving vulnerable children: daily bread for all students, as well as annually providing uniforms, backpacks, and school supplies for all students, field outings (airport, beach, museum, etc.), a transportation subsidy for teachers, and teaching supplies.

# 4. EBA (Enfants Bien Aimés – Beloved Children)

- a. Full-time day program for 30 street children;
- b. Activities including daily lessons and counseling;
- c. Daily hot meals, showers, and laundry service (also providing clothing)
- d. All healthcare costs;
- e. Evening shelter for at-risk children (under 6 years old, all girls, and isolation for sick children);
- f. Integration into homes (44 children placed in 2024).
- 5. **Dance and Music Team: ABIM** provided uniforms, equipment, practice space as well as instruments (guitar, trombones, and trumpets).
- 6. **WAGI Labs (through ABIM contact):** A US-based film company (with roots tracing back to Disney World) provided videography training and funded and supported 5 youth mutual aid projects.

#### 7. Infrastructure:

- **a.** Thanks to an ABIM grant, the Jubilee Center, Tuungane School, and the two-story EcoDim building were rehabilitated;
- **b.** Installation of a second 5000-liter water tank with water intake system
- c. Purchase of whiteboards for classrooms, mattresses and blankets for shelters

#### 8. Various Supports:

**a.** Widows: Support of the "goat program" (replacement of lost goats and purchase of vaccines);

- **b.** Gardens: Provided hundreds of seed packets and tools for cooperative gardens;
- c. Literacy: Classroom materials provided for the women's literacy program;
- **d.** Displaced Persons Camps: Funding provided for youth teams doing sensitization in displaced persons camps;
- e. Spiritual Ministries: Translated, formatted (in collaboration with ChapaServe) and printed the books Hospital Chaplaincy & ABCs of Chaplaincy Ministry (210 copies) and Prison Chaplaincy (190 copies) with permission from the author Nzunga Mabudiga
- **f.** Care for over 25 indigent patients at HEAL Africa hospital.

# VI. <u>ACTIVITIES FUNDED BY AusHEAL</u>

The AusHEAL Congo project has continued its five strategic initiatives:

- 1. EDUCATION AND TRAINING (AusHEAL's main objective)
- a. Diploma Course in SOTA Care (DISC):

Launched in April 2023, this key AusHEAL initiative is a successful strategic partnership between AusHEAL, which provides funding and course content; HEAL Africa, which supplies 10 specialized trainers (including 6 AusHEAL scholarship beneficiaries); and ECC (*Eglise du Christ au Congo*), which delivers 60% of healthcare through its hospitals and health centers. The course aims to improve rural doctors' skills in **surgery**, **obstetrics**, **trauma**, **and anesthesia** (**SOTA**) in their own language. Additionally, government doctors from other provinces have participated.

In 2024, five cohorts of four participants each attended the course (a total of 37 since the course's inception). Data collected from pre- and post-tests consistently showed significant improvements in knowledge, skills, and self-confidence among the doctors. A WhatsApp group created for DISC alumni allows them to request specific assistance for difficult cases from HEAL Africa specialists and is regularly used, thus developing a "community of practice." Anecdotal reports indicate that rural doctors return to their villages after training not only with improved clinical skills but also with better quality of life, greater resilience, and enhanced ability to counteract the harmful effects of care provided by traditional healers.

#### b. SOTA Symposium:

A second two-day symposium was held in August 2024 at ULPGL, funded by AusHEAL and the Gateway Baptist Church of Brisbane. It allowed Goma-based doctors to learn the theory and techniques of SOTA care, with nearly 100 physician participants sharing knowledge.

#### c. COSECSA Program (College of Surgeons of East, Central and Southern Africa):

Funded by AusHEAL, HEAL Africa USA, and another Australian group "Twice the Doctor," this program continued under the supervision of Dr. Neil Wetzig as program director, assisted by Dr. Jacques Bake as deputy director; Dr. Medard and Dr. Justin Tsandiraki passed the COSECSA exam in December 2023. Teaching sessions were held twice weekly for four COSECSA trainees

and some MM surgery trainees from UNIGOM (*Université de Goma*). Dr. Benjamin Amani Unamosi passed the MCS exam in November and will continue his training in Madagascar. Two new trainees were recruited in October after comprehensive knowledge and English proficiency testing.

d. Ten intensive 3-day courses – five on "Basic Surgical Skills" and five on "Principles and Practice of Trauma Care" – were delivered to trainees from COSECSA, DISC, MMed-Surg UNIGOM, and Family Medicine.

#### 2. ANNUAL MULTIDISCIPLINARY MEDICAL TEAM from AusHEAL

This has been a key element of the partnership between AusHEAL and HEAL Africa since the first team visit in 2006. In 2024, four doctors, four nurses, and one dietitian spent 2 to 3 weeks at HEAL Africa Hospital, training clinical staff. Nursing training was particularly well attended.

#### 3. SCHOLARSHIPS FOR SPECIALIZED TRAINING

- Dr. Albin SERUGENDO is continuing his cardiology scholarship in Nairobi for 2 to 3 years;
- Dr. Meshack BARIANGA has begun specialized training in urology with COSECSA in Kampala;
- Dr. Cédric started his specialized anesthesia training in October at Muhimbili University in Tanzania.

#### 4. SHORT-TERM DEVELOPMENT GRANTS:

- Two (2) grants were awarded to nurses for professional development. These grants, valued at USD 2,000 each, enable a member of Congolese staff to travel to a neighboring African country to specialize in a particular area of medicine or nursing care.
- Mr. Moses BITAKUYA participated in a 3-month cardiac ultrasound training in Nairobi as part of AusHEAL's commitment to help HEAL Africa develop a cardiology service.

#### 5. LOGISTICAL SUPPORT

- Paul Bakes continued to improve the hospital's IT infrastructure by installing more optic fiber cables and audiovisual support for training sessions;
- The AusHEAL Hospital Patient Fund provided over USD 11,000 for the treatment of openly poor patients. Sadly, a large portion of this amount was spent on a 5-year-old boy with a rare endocrine tumor who sadly passed away.

#### 6. OTHER:

- AusHEAL continues to advocate for HEAL Africa and Congo in Australia and internationally through conferences, presentations, social media, and more;
- Dr. Neil Wetzig represents HEAL Africa at the Global Alliance for Surgery, Obstetrics, Trauma and Anesthesia (The G4 Alliance) and was elected president of the G4 Alliance in November 2024. He continues to advocate for HEAL Africa and the challenging clinical issues it faces with limited resources:
- In the framework of his role, Dr Neil met with the DRC Secretary-General of Health in Geneva and informed him about the DISC course. AusHEAL activities at HEAL Africa

Hospital in 2024 were supported by longer-term volunteers: Dr Neil and Gwen Wetzig (approximately 9 months) and Paul Bakes (approximately 4 months).

# VII. ACTIVITIES FUNDED BY SONIC HEALTHCARE FOUNDATION

Sonic Healthcare Foundation supports training initiatives, including scholarships to enable local Congolese staff members to take courses in neighboring countries such as Uganda, Kenya, and Tanzania.

Senior Australian staff have contributed their expertise in laboratory techniques, infection control, and other areas of pathology and radiology.

#### Partnership with Sonic Healthcare

The Sonic Healthcare Foundation has a long-standing partnership with HEAL Africa Hospital. Sonic Healthcare helped establish a reliable pathology and radiology service at the hospital in 2008. Ongoing support includes providing equipment, essential supplies, as well as training and expertise in laboratory techniques. Sonic Healthcare has also co-funded the training of specialized pathologists and radiologists.

Sonic Healthcare Foundation (SHF) has also facilitated donations to the two schools run by HEAL Africa and supported some of HEAL Africa's community sensitization programs.

#### **Impact**

The modernization of laboratory and radiology services has improved diagnostic and patient management capabilities at the hospital. The pathology laboratory is one of the best in eastern Congo and has enabled and facilitated the development of specialized services within the hospital, many of which would not be viable without a modern and efficient laboratory service.

Improved access to essential imaging services benefits both the hospital and the wider community.

SHF sends a shipping container to HEAL Africa every two to three years, providing equipment and materials that are not easily available in the DRC, while allowing other charitable groups to donate directly to HEAL Africa by offering fill space in the containers.

In 2024, Sonic Healthcare Foundation, in collaboration with RAB, enabled Dr. Sosthene Tsongo (radiologist at HEAL Africa) and Dr. Mundenga Muller (CMO at HEAL Africa) to attend the ICRF course offered by RAB. Both doctors were extremely enthusiastic about increasing their knowledge and skills through this internationally recognized one-year course.

# VIII. KEY VISITS FOR THE YEAR 2024

The year 2024 was marked by visits from government and humanitarian actors.



February 1, 2024, visit of a USAID team



Multidisciplinary medical team from AusHEAL



Visit of Ms. Anne BJEUDE of the World Bank, October 15, 2024



On October 29, 2024, visit of Swedish Ambassador Elize.S to the DRC, partner of UNICEF





Gwen and Neil Wetzig's daughters visiting HEAL Africa for the first time, together with their families



December 12,2024, visit of the Ambassador if the United Kingdom , Mme Nyson Link.

# **CONCLUSION**

The ongoing war in eastern DRC and its substantial impact on the population marked the year 2024.

Despite this war situation, HEAL Africa continued to provide services to vulnerable populations in geographically accessible areas and in internally displaced persons camps scattered around the city of Goma.

We glorify the Lord for allowing us to accomplish everything outlined in this report. To our financial partners who lent us their support and made all that was done possible, we express our deepest gratitude.

The North Kivu province remains unstable, and the challenges to overcome are still enormous. HEAL Africa remains committed to providing the best possible Health, Education, Community Action and Leadership development within available means. We have faith that the Lord will continue to accompany us and enable us to do better. Our commitments to vulnerable communities remain intact, with a spirit of accountability and sustainability.

# **APPENDICES**

#### **HEAL Africa's PARTNERS in 2024**

#### **HIV/AIDS:**

- 1. Global Strategies
- 2. UNICEF

#### **SGBV**

- 1. UNICEF
- 2. UNFPA
- 3. Cordaid
- 4. Save the Children International
- 5. Banque Mondiale /Cellule Infrastructures (CI)
- 6. IMA World Health / USAID
- 7. Physicians for Human Rights (PHR)

# Reproductive Health

- 1. EgenderHealth
- 2. Fistula Foundation
- 3. Direct Relief

# Social reintegration, community recovery, and community-based rehabilitation

- 1. Entrust Foundation
- 2. UNICEF
- 3. WorldShare Australia
- 4. WorldShare UK
- 5. Cordaid
- 6. Save the Children International

#### **Spiritual Ministry:**

- 1. International Ministries/ABIM (USA)
- 2. WorldShare UK
- 3. WorldShare Australia

#### **Administration and Finance:**

1. HEAL Africa USA

#### Hospital

- 1. HEAL Africa USA
- 2. SONIC Healthcare Foundation
- 3. AusHEAL
- 4. HOPE Walks
- 5. Birth Link/Global Strategies
- 6. Smile Train
- 7. Physicians for Human Rights (PHR)
- 8. The Johanniter
- 9. MONUSCO
- 10. Zone de Santé de Goma

# **Training and Research:**

- 1. AusHEAL
- 2. WorldShare UK
- 3. HEAL Africa USA
- 4. WorldShare Australia
- 5. KidsOR/Smile Train
- 6. University of Florida (UF)
- 7. Queen's University of Canada
- 8. Brown University
- 9. University of Goma (UNIGOM)

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