



Child survival in DRC

Despite a significant progress, the Democratic Republic of Congo (DRC) is still characterized by excessive infant, neonatal and child mortality (58, 28 and 104 per thousand live births) and maternal mortality (846 deaths per 100,000 live births) due to diseases that could be prevented with simple or inexpensive measures, including fever/malaria, acute respiratory infections, diarrhea, measles, malnutrition and neonatal infections.

According to the *Demographic and Health Survey (DHS) 2014*, diarrhea affects 17% of children under five years of age. 42% of affected children have access to the recommended treatment (rehydration salts). Measles outbreaks still persist particularly in the southern and eastern parts of the country.

Malaria incidence rate has dropped from 41% in 2001 to 31% in 2013. Since 2006 over 10 million nets were distributed. As a result, the proportion of children under five years of age who sleep today under insecticide-treated nets has increased from 1 to 56% between 2001 and 2013.

Besides the fragmented health systems, major bottlenecks of health service delivery are frequent stock-outs of essential commodities, numerous but inadequately trained and paid medical staffs, poor quality of health care and limited financial access.

In 2013, the Government of the DRC has launched the strategy to reduce maternal, newborn and child mortalities with four key priority areas: (i) supply of essential drugs and family kits in households; (ii) community mobilization and C4D; (iii) health financing (flat fee, subsidies, Performance Based Financing) and (iv) Improved monitoring for action to ensure the quality care.



Key figures

- Neonatal mortality : **28%**
- Infant mortality : **58%**
- Child mortality : **104%**
- Maternal mortality : **846/100,000**



Realizations in 2017

- **Cold chain coverage** for effective immunisation increased from 23% (2014) to 51.2% with renewable energy
- **1.4 million children** under-5 improved access to essential care for diarrhoea and fever with **2.2 millions of family kits**
- **143,000 pregnant women** delivered in safer and cleaner environment with family kits
- **484,163 children** under-5 and **101,929 pregnant women** received long lasting insecticidal nets in Kasai Central Province
- **8,703,913 children** under-5 were immunized against measles
- **3.1 million children** were vaccinated against yellow fever
- **15,413 HIV+ women** and **14,333 infants** received ARVs treatment (2016)



UNICEF's action

Child survival programme aims at reducing maternal, newborn and child mortalities by improving the delivery and newborn care and fighting preventable diseases that are accountable for child deaths such as pneumonia (13.4%), malaria (14.9%), diarrhoea (10.3%) HIV/AIDS (1.4%) and neonatal causes (31.4%). It also contributed to global initiatives, including the eradication of poliomyelitis, the elimination of maternal and neonatal tetanus, control of measles, the elimination of new HIV infections through the mother-to-child transmission and the *All-in ! to end adolescent Aids* initiative.

Key highlights to ensure effective coverage of high impact interventions (HII) include :

1. A systemic approach for gradual scale-up of HII through strategic partnerships to address major health system bottlenecks ;
2. An innovative *Reaching every district* strategy to strengthen routine immunization in high risk provinces with equity issues ;
3. Building child friendly communities by increasing their engagement for integrated health related activities, including immunizations, nutrition, long lasting insecticidal nets and family kits distribution, etc. ;
4. Improving quality of maternal and new-born care by piloting a clinical mentoring project ;
5. Capacity building on preparedness and timely response to health and nutrition epidemics such as Ebola, cholera and measles in humanitarian crisis.

For more information contact :

Guy Clarysse
Chief Survival and Development
UNICEF DRC
gclarysse@unicef.org

Tajudeen Oyewale
Deputy Representative
UNICEF DRC
toyewale@unicef.org

Donors

- Sweden
- GAVI
- USAID
- Bill and Melinda Gates Foundation
- European Union
- South Korean Cooperation

Budget

US\$ 74,493,010
for 2018

US\$ 28,519,632
gap to be filled