**HIV/AIDS**

As a key partner in the US President’s Emergency Fund for AIDS Relief (PEPFAR), CDC works closely with the MoH national HIV/AIDS and blood safety programs and the Kinshasa School of Public Health. Other key partners include international nongovernmental organizations and the United Nations agencies. CDC supports direct service provision in over 400 facilities in three provinces by providing guidance, training, and support to national stakeholders, by providing expertise in the development of HIV laboratory systems, and by training health workers. Areas of focus include the following:

**Prevention**

The prevention of mother-to-child transmission (MTCT) of HIV is CDC’s primary prevention activity. CDC assists with HIV testing and counseling programs and with a toll-free hotline telephone service that provides information and referrals on youth outreach, blood and injection safety, and gender-based violence.

**Care and Treatment**

CDC supports the MoH in implementing a continuum of care for persons living with HIV/AIDS and their families. Health care facilities in three provinces provide direct care and support including antiretroviral (ART) treatment. In tuberculosis (TB) clinics, CDC supports training healthcare workers and integrating HIV and TB services, which include HIV testing and counseling and care and treatment for HIV-positive TB patients. CDC trains healthcare workers to identify and respond to incidences of sexual and gender-based violence and incorporates screening for these into HIV services.

**Laboratory, Capacity Building, and Strategic Information**

CDC provides technical expertise to strengthen the national laboratory capacity to implement laboratory quality assurance and control systems for HIV/AIDS and to perform early diagnosis of HIV in infants born to HIV-positive mothers. CDC provides technical assistance to the MoH in implementing HIV population-based surveys, developing monitoring and evaluation tools, and supports implementing a national electronic reporting system for collecting and managing HIV/AIDS program data.
**Influenza**

CDC provides financial and technical assistance to the MoH through the Kinshasa School of Public Health. The strategy is to develop an efficient and sustainable surveillance system which will be eventually funded and maintained by the national government of DRC. An enhanced routine surveillance system currently collects information used to estimate the national influenza burden for DRC. The system reports regular surveillance findings to the WHO Global Influenza Surveillance Network. In 2011, the surveillance system expanded to the neighboring country, Republic of Congo, and will expand to two additional provinces in DRC by 2013.

**Monkeypox**

CDC supports the MoH in strengthening the surveillance system in Equator province for monkeypox, a rare viral disease that occurs primarily in central and western Africa. The primary focus is gaining understanding of the risks associated with human monkeypox infection and the dynamics of transmission of the monkeypox virus from animals to humans. CDC is working on tools and approaches that promote early identification of human monkeypox illnesses, to minimize the spread of the disease among people during outbreaks.

**Rabies**

As a part of the continuing effort to prevent and control rabies in DRC, CDC collaborates with the MoH and the Ministry of Agriculture to improve laboratory capacity and to expand epidemiological monitoring of rabies. CDC transferred technology and provided training for local staff from both ministries to implement a CDC-developed field laboratory test to detect rabies virus antigens. CDC also developed predictive models of disease occurrence; surveyed community members about their knowledge, attitudes, and practices related to animal bites and medical care availability; and conducted pathogen detection among wildlife including bats.

**Polio and Immunization Systems Strengthening**

CDC collaborates with WHO to provide technical support to strengthen surveillance for polio and other vaccine-preventable diseases. CDC assigns staff to the WHO country office to work on polio eradication activities and places technical consultants in Stop Transmission of Polio teams that assist with polio eradication activities for six-month periods in districts at high risk for polio. CDC provides financial support for social mobilization to promote polio vaccination and for the purchase of polio vaccines. For immunization system strengthening CDC collaborates with USAID to provide technical and financial support for activities including reviewing and evaluating the routine immunization program, evaluating the introduction of new vaccines such as pneumococcal vaccine, and training experts to assess and improve the quality of data used to manage the program. CDC will continue to provide assistance to the MoH to improve data quality and routine immunization service delivery in two provinces.

**Malaria**

Under the US President’s Malaria Initiative (PMI), CDC assigned a Resident Advisor to DRC as part of an interagency team with USAID to support the MoH in implementing malaria control interventions including providing long-lasting insecticide mosquito nets, indoor residual spraying, case management, preventing malaria in pregnancy, and improving diagnostics, surveillance, monitoring, and evaluation of PMI related activities.

**Democratic Republic of Congo at a Glance**

<table>
<thead>
<tr>
<th>Population:</th>
<th>67,823,000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Per capita income:</td>
<td>$300</td>
</tr>
<tr>
<td>Life expectancy at birth women/men:</td>
<td>50/47 yrs</td>
</tr>
<tr>
<td>Infant mortality rate:</td>
<td>111/1000 live births</td>
</tr>
</tbody>
</table>

Population Reference Bureau World Population Data Sheet, 2011

For more information please contact the Centers for Disease Control and Prevention:

**CDC-Atlanta**
1600 Clifton Road NE, D69, Atlanta, GA 30333
Email: cg@cdc.gov
Web: www.cdc.gov/global

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