

PD-ABS-362
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INTERNATIONAL RESCUE COMMITTEE

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May 12, 2000

Ms. Caroline Abl
Office of Foreign Disaster Assistance
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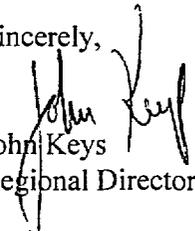
**Re: Final Narrative Report for Grant No AOT-G-00-98-00154-00
Emergency Care and Resettlement for Returnees in Congo-
Brazzaville**

Dear Ms. Abl:

Enclosed, please find the final narrative report on grant No. AOT-G-00-98-00154-00, Emergency Care and Resettlement for Returnees in Congo-Brazzaville. The report details, by objective, the program's activities during the period June 22, 1999 to January 21, 2000.

Should you have any questions or need additional clarification, please do not hesitate to contact me at (212) 551-3121. On behalf of IRC Congo-Brazzaville, thank you for your support.

Sincerely,


John Keys
Regional Director, Great Lakes

cc: Mr. Luis Marreiros, Country Director, IRC Congo-Brazzaville
Ms. Barbara Hicks, OFDA, Program Support Division
USAID/PPC/CDIE/DI

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FINAL REPORT:

I. EXECUTIVE SUMMARY

Organization: International Rescue Committee

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IRC-Congo-Brazzaville
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Brazzaville, Congo

Contact Person: Luis Marreiros
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Program Title:	Resettlement Project/Congo-Brazzaville
Grant No.:	AOT-G-00-98-00154-00
Country/Region:	Congo/Brazzaville
Disaster/Hazard:	Assist Returnee Populations
Time Period of Report:	June 22, 1999 to January 21, 2000

IRC implemented an emergency program in order to help the Brazzaville populations returning home after having been displaced for several months, some of these people had been crossing the border into the Democratic Republic of Congo (DRC). Others have been trucked from the displacement areas into Brazzaville city. Many of this people were returning from the Pool region, where they have been living in the forest without any assistance, arrived in very poor physical condition and needed emergency medical care and shelter.

To assist the return of this displaced populations in Bacongo and Makelekele, IRC implemented severeral activities, mainly:

Objective #1: Assist 400 families (estimated 2,000 people) whose houses were destroyed by provision of basic building materials to allow them to make their houses habitable

Indicator and current measure:

475 families (estimated 3,000 people) had their homes repaired mainly by re-roofing. They have subsequently re-inhabited these homes.

Objective #2: Re-open three health centers in Bakongo/Makelekele/Mifilou through physical repairs, re-stocking with basic medicines and equipment, and training for health center staff

IRC rehabilitated three priority health centers: CSI Indzouli (Mifilou Commune), CSI Charles Luanga (Makelekele Commune), and SMI Bacongo (Bakongo Commune). The three health centers became operational and are currently treating patients. SMI Bacongo restarted activities on September 15, 1999.

At each center, IRC conducted essential repairs, which included repairs to roofs as well as to doors, locks, windows, plumbing, and the electrical system.

Verifiable Indicator:

Charles Louanga, Bacongo and Inzouli health centres were repaired and re-stocked with medicines and equipment. Terinkyo and Bissita health centres were re-stocked with medicines and equipment and are now functioning to serve an average population of 15,000 each.

Objective #3: Provide refresher training to all Health Center personnel, who have not been working for many months due to the civil war

Verifiable indicator:

Primary health care staff at all health centres in Brazzaville South received refresher training on medical care, and emergency reproductive health, and have implemented a standard epidemiological data collection system for epidemiological surveillance.

Objective #4: Implement an IEC campaign in the southern zones of Brazzaville on vaccination, diarrhoea diseases, and nutrition

The campaign was carried out from October 13 - 18, 1999 throughout the Southern area of Brazzaville. The campaign addressed the following topics: the importance of routine vaccinations, malnutrition, and the prevention of diarrhea diseases. Up to 40 community educators conducted presentations throughout the communities, visiting 15,787, or 78% of the total inhabited lots. Additional public education announcements were broadcast on radio and television.

Verifiable indicator:

A total of 95,000 people were reached by door-to-door debates strategy during the IEC campaign.

Objective #5: Ensure proper medical care for cases of chronic diseases among the returnees

Verifiable indicator:

- 932 patients suffering chronic diseases received medical treatment fully up to standard, 348 patients were referred to hospitals for specialized treatment

Objective #6: Conduct a vaccination campaign for displaced children under 5

Verifiable indicator:

During two vaccination campaigns, during the periods October 28-30 and December 27-29, IRC vaccinated 12,323 children under the age of five (Table 9).

II. Program overview

The program goal was to assist the return of displaced populations to Brazzaville's southern zones through shelter rehabilitation for families who had their houses damaged during the fighting and looting of December 1998; and by improving short-term essential health care for IDPs and returnees to Brazzaville's southern zones.

To achieve this goal, several objectives were planned:

1. Assist 400 families (estimated 2,000 people) whose houses were destroyed by providing basic building materials to allow them to make their houses habitable.
2. Re-open three health centres in Bacongo, Makelekele and Mfilou through physical rehabilitation, re-stocking with basic medicines and equipment, and training of health centres staff.
3. Provide refresher training to all Health Center personnel, who have not been working for many months due to the civil war.
4. Implement an IEC campaign in the returnee zones on primary and public health care.
5. Ensure proper medical care for cases of chronic disease among IDPs and returnees.
6. Ensure vaccination of displaced children under 5.

Profile of beneficiaries:

The beneficiaries of the project are some 45,000 people who had been displaced within Republic of Congo, or had fled to the Democratic Republic of Congo (RDC), and had returned to the Southern part of Brazzaville.

Geographic Location:

All projects activities took place in the Southern part of Brazzaville, the capital city of the Republic of Congo. This area includes the neighborhoods of Bakongo and Makelekele.

III. Program Performance

The program was initiated on June 22, 1999. IRC planned to complete activities on September 21, 1999 but received a no-cost extension until January 21, 2000.

Objective1: Assist 400 families (estimated 2,000 peoples) whose houses were destroyed by providing basic building materials to allow them to make their houses habitable

Makelekele and Bacongo areas, the most affected by violent confrontations in December 1999, were emptied of their populations and hundreds of houses suffered enough physical damage to render them uninhabitable.

To assist the displaced to return to these areas, IRC organized a program to repair the roofs of more than 400 family homes.

Strategy :

Re-install roofing on 400 houses destroyed by either looting or bullet holes, where the need was not over 30 sheets, before December 15, 1999.

IRC/Brazzaville was able to accomplish the re-roofing of 475 houses, allowing the return of 475 homeless families or over 3,000 of the most vulnerable beneficiaries.

Table 1, below, details the number of rehabilitated houses by area :

TABLE 1

Ward	Quarter	Number of roofless houses	Number of roofing sheets used
Bacongo	La glacière	5	98
	Mpissa	3	46
	Other quarters	16	119
Makelekele	Before Djoué	70	847
	Cataractes	32	623
	Mafouta	44	717
	Songolo	20	223
	Massissia	53	754
	Madibou	51	334
	Kimpouomo	8	76
	Ngoko	37	189
	Kintsana	96	507
	Loua	36	201
	Kinsoudi	4	107
TOTAL		475	4578

Objective 2: Re-open three health centres in Bacongo, Makelekele and Mfilou through physical rehabilitation, re-stocking with basic medicines and equipment, and training of health centres staff

1. Physical Rehabilitation

The three health centers were rehabilitated differentially. The work ranged from simple to complex, and included repairs to doors and windows, plumbing, sealing, electrical installations, and water connections

Table 2 summarizes the main types of repairs to the three IHCs:

TABLE 2

HEALTH CENTER	AREA	WORK ACCOMPLISHED
CHARLES LOUANGA	MAKELEKELE	<ul style="list-style-type: none"> • Electrical installations; • Construction, repair and mounting of doors; • Mounting wood panels on the windows; • Placing ceiling panels; • Painting; • Connecting public water supply; • Plumbing; • Finishing toilet work; • Constructing buildings for preventive activities.
BACONGO IHC	BACONGO	<ul style="list-style-type: none"> • Repairing electrical circuitry ; • Repairs to doors and windows; • Installing locks • Painting; • Sealing; • Plumbing.
INDZOULI	MFILOU	<ul style="list-style-type: none"> • Repairs to the roofing and mounting the ceiling; • Installing and connecting electrical wiring; • Constructing and partitioning rooms; • Gate repairs; • Installing gates and burglar bars; • Painting; • Refurbishing toilets.

2. Supply of medicine and medical equipment

IRC placed international orders to UNICEF for medicine and equipment to allow the rehabilitated health centers to have sufficient stocks to initiate activities. These supplies did not arrive until the month of September. Care for the ill, therefore, started in October.

The supplies provided three months free medicine to destitute returnees. At the end of three months free care, the health centers initiated a cost-recovery system in agreement with the health authorities. Provided with initial supplies, these health centers are now able to function autonomously with regard to management and future re-supply needs of medicine and equipment.

The head of each health center is in charge of the center's daily management and is assisted by the health committee. The management team for the Health District supervises the entire operation.

Revenues generated by the centers' activities are automatically conserved in an existing account.

Appendix A, attached, provides the list of medicine and materials distributed in the Health Centers of Bacongo and Makelekele.

3. Epidemiological data collection report

Over the three first months of the project, the Tenrikyo Health Center cared for the patients at no cost, and referred patients to Makelekele reference hospitals and therapeutic nutritional centers, as appropriate.

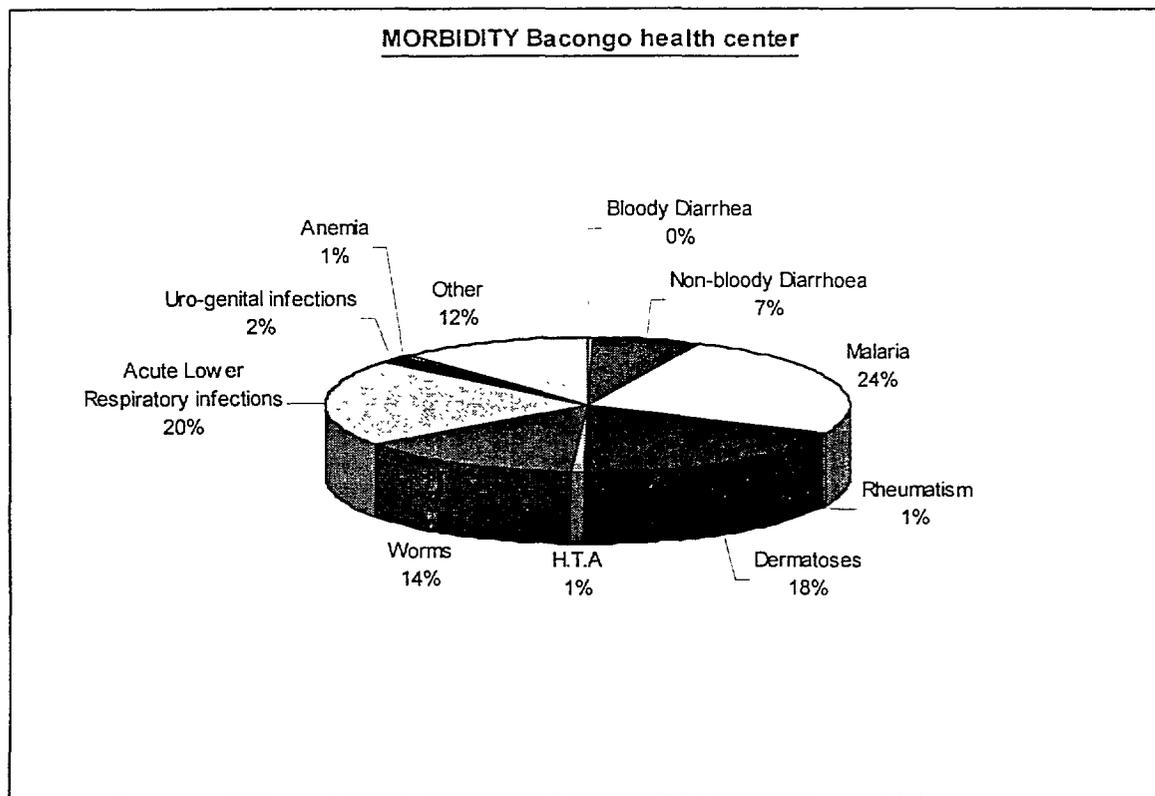
Tables 3-5 and charts 1-4 on the following pages provide the epidemiological reports for the three health centers in which IRC set up its medical-care facilities during the emergency period of July to January 2000: Bacongo, Tenrikyo and Indzouli.

The Tenrikyo Health Center was the main center for medical care from July 1999 until January 2000. The other centers did not initiate care until October due to a lack of staff and delays in the arrival of medicine and equipment ordered through UNICEF.

TABLE 3 Bacongo HC epidemiological report

	October				November				December				TOTAL				OVERALL
	< 5 yrs		Over 5 yrs		< 5 yrs		Over 5 yrs		< 5 yrs		Over 5 yrs		< 5 yrs		Over 5 yrs		
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
Bloody Diarrhoea	0	1	1	0	2	2	0	0	1	2	0	1	3	5	1	1	10
Non-bloody Diarrhoea	7	6	32	27	12	21	12	17	24	7	20	33	43	34	64	77	218
Malaria	48	53	106	87	65	33	43	79	60	45	103	123	173	131	252	289	845
Rheumatism	0	0	4	2	0	0	2	3	0	0	2	4	0	0	8	9	17
Dermatoses	84	67	76	80	65	34	12	76	13	19	22	43	162	120	110	199	591
H.T.A	0	0	3	6	0	0	8	3	0	0	1	8	0	0	12	17	29
Worms	52	76	12	37	68	71	7	11	43	54	13	17	163	201	32	65	461
Acute Lower Respiratory infections	59	87	20	51	88	71	34	65	76	33	76	45	223	191	130	161	705
Uro-genital infections	0	0	7	23	0	0	5	2	0	0	7	9	0	0	19	34	53
Anemia	3	4	0	0	1	1	0	0	5	7	0	0	9	12	0	0	21
Other	32	41	12	31	65	19	32	17	44	12	71	21	141	72	115	69	397
TOTAL	285	335	273	344	366	252	155	273	266	179	315	304	917	766	743	921	3347

CHART 1



During the three emergency months, the Bacongo Health Center treated 3,347 patients for an average of 1,100 per month or 35 medical consultations daily.

The most prevalent illness was malaria, representing over 24% of all treatment, followed by ALRI (Acute Lower respiratory Infections) and dermatoses. The most frequent dermatoses encountered was scabies, psoriasis and mycosis. The category "other" includes less frequent pathologies such as gastritis and epidemiological non-negligible surgical and traumatic diseases.

The Tenrikyo Integrated Health Center

Even though it was not among the centers that were physically repaired by this program, the Tenrikyo Health Center served as the focal point for medical care for the population throughout the emergency period from July 1999 to January 2000.

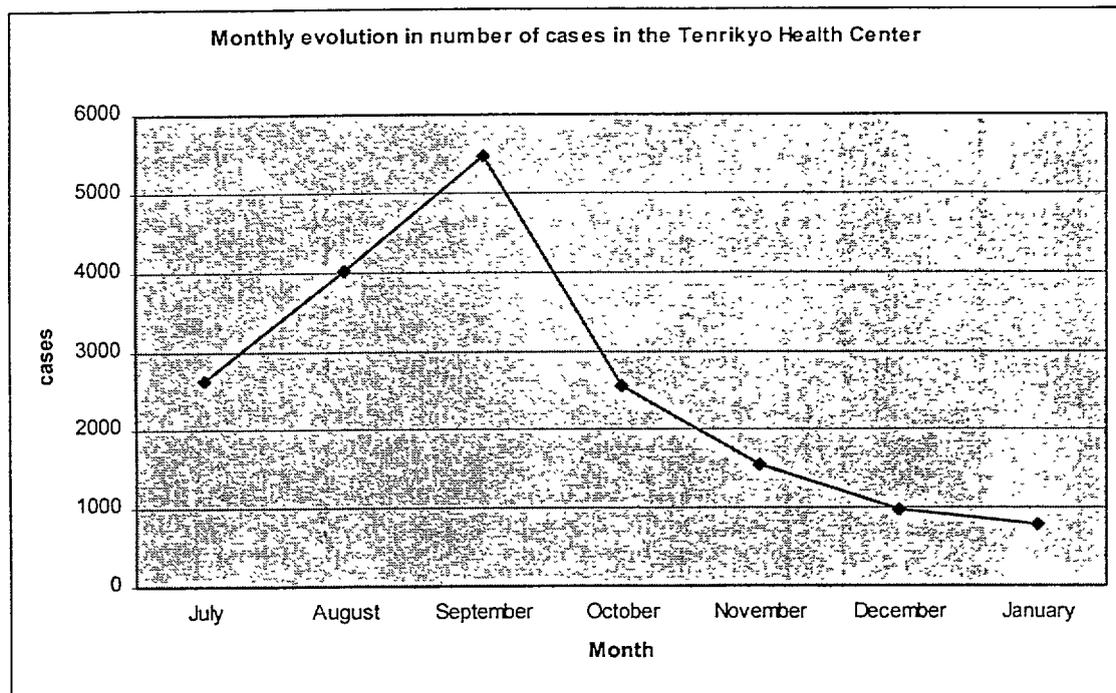
Considering its strategic position – near the reference hospital of Makelekele – and its easy access, this center relieved the reference hospital, which was completely flooded by the number of patients.

Through periodic endowments of medicine and material since July 1999, this center was able to respond to the needs of the population.

TABLE 4 Epidemiological report for the Tenrikyo Integrated Health Center

	July		August		September		October		November		D�cember		January		TOTAL		OVERALL
	< 5 yrs	> 5 yrs	< 5 yrs	> 5 yrs	< 5 yrs	> 5 yrs	< 5 yrs	>5 yrs	< 5 yrs	>5 yrs	< 5 yrs	>5 yrs	< 5 yrs	>5 yrs	< 5 yrs	>5 yrs	
Bloody diarrhoea	0	28	0	14	0	30	0	2	0	0	2	3	3	2	5	79	84
Non-bloody diarrhoea	48	109	76	160	218	867	30	86	11	21	10	14	18	5	411	1262	1673
Malaria	252	458	622	1197	253	1417	75	684	52	110	67	79	59	79	1380	4024	5404
Rheumatism	0	114	0	73	0	298	0	24	0	11	0	18	0	3	0	541	541
Dermatosis	68	133	83	254	132	336	27	73	14	33	28	45	20	27	372	901	1273
H.B.P.	0	58	0	44	0	166	0	1	0	4	0	42	0	2	0	317	317
Worms	112	110	83	254	69	170	89	195	174	117	53	132	116	32	696	1010	1706
ALRI	195	111	151	193	130	125	154	89	185	171	67	174	116	77	998	940	1938
Urogenital infections	25	234	14	117	0	323	1	17	0	0	0	13	0	5	40	709	749
Anemia	36	118	53	193	9	62	5	47	1	18	3	25	4	2	111	465	576
Suspicion of Tuberculosis	0	80	0	40	0	140	0	0	0	0	0	0	0	0	0	260	260
Other	82	254	74	318	227	512	164	786	83	540	17	195	72	148	719	2753	3472
TOTAL	818	1807	1156	2857	1038	4446	545	2004	520	1025	247	740	408	382	4732	13261	17993

CHART 2

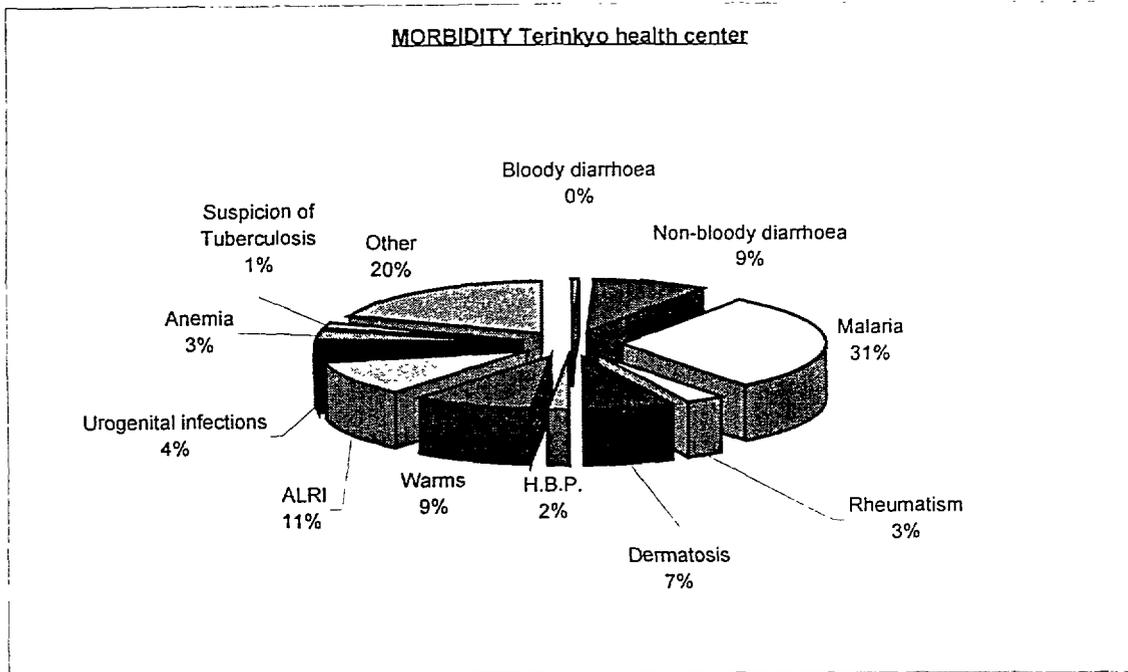


During this period, the Tenrikyo Health Center provided consultations to 17,993 patients, an average of 2,570 cases monthly, or 85 consultations per day.

The highest level of examinations was noted for September, corresponding to the month the southern areas received more returnees coming from the Pool region. The lowest number was for the month of January 2000 which paralleled the end of the mass of returnees coming from the Pool region and the setting up of cost-recovery systems in Bacongo and Makelekele Health Districts.

The most frequent cause of consultations was malaria, which accounted for over 31% of the total, followed by the heading 'Other' and ALRI which accounted for 11% of the total.

CHART 3



The INDZOULI Integrated Health Center

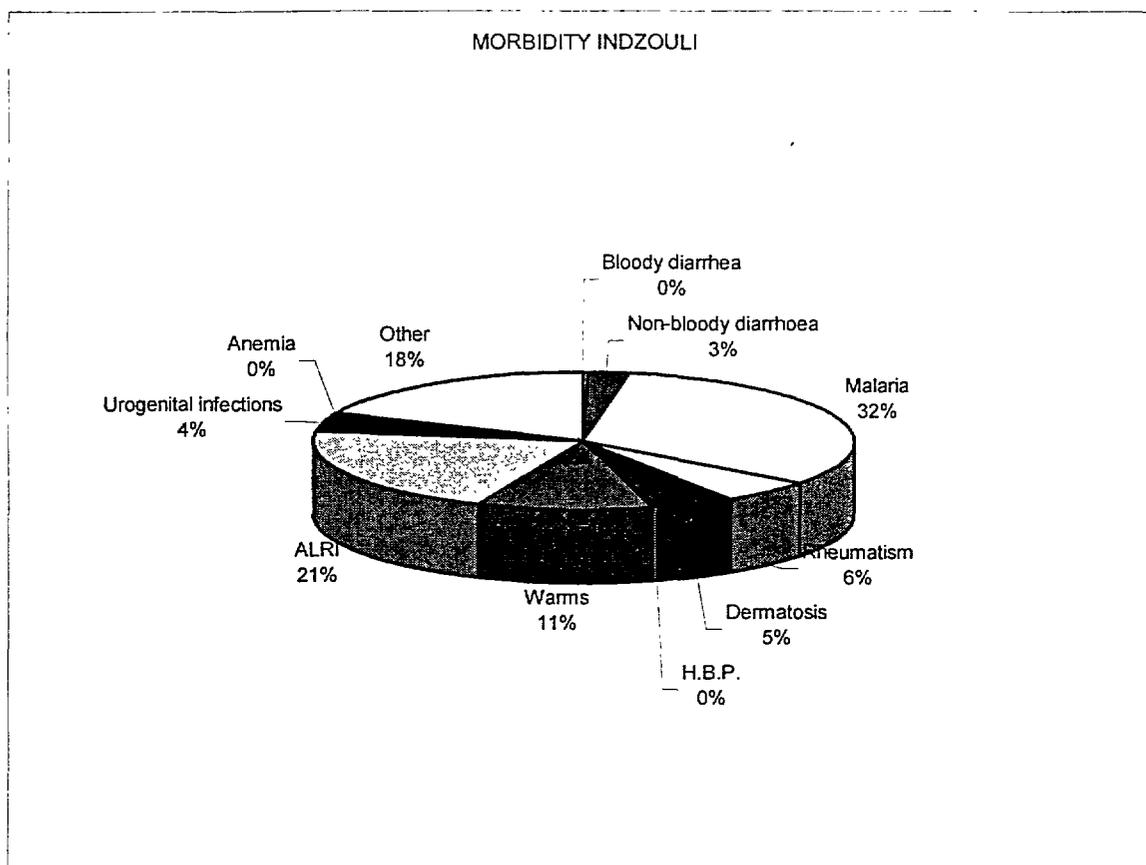
The Indzouli health centre, located in Mfilou, one of the areas most affected by the war, initiated care for patients in September 1999.

This center, which benefited from physical rehabilitation and supplies of medicine and equipment, serves a population estimated at over 15,000 inhabitants.

TABLE 5 Epidemiological report for the Indzouli Health Center

	October				November				December				TOTAL				OVERALL
	< 5 yrs		> 5 yrs		< 5 yrs		> 5 yrs		< 5 yrs		> 5 yrs		< 5 yrs		> 5 yrs		
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
Bloody diarrhoea	1	1	1	1	0	0	0	0	0	0	0	0	1	1	1	1	4
Non-bloody diarrhoea	15	14	4	13	5	9	1	1	5	3	2	0	25	26	7	14	72
Malaria	88	104	129	91	67	49	81	78	74	41	20	68	229	194	230	237	890
Rheumatism	12	7	18	26	9	23	3	19	7	4	7	19	28	34	28	64	154
Dermatosis	2	24	35	34	8	7	4	9	0	1	2	4	10	32	41	47	130
H.B.P.	0	0	1	1	0	0	3	1	0	0	2	1	0	0	6	3	9
Warms	34	27	41	37	19	23	16	31	21	3	9	31	74	53	66	99	292
ALRI	63	51	76	91	40	29	23	26	46	65	23	34	149	145	122	151	567
Urogenital infections	1	0	21	23	0	0	18	12	0	0	31	12	1	0	70	47	118
Anemia	3	1	1	0	1	1	0	1	0	1	0	0	4	3	1	1	9
Other	32	36	68	152	25	71	29	50	10	5	12	11	67	112	109	213	501
TOTAL	251	265	395	469	174	212	178	228	163	123	108	180	588	600	681	877	2746

CHART 4



Objective: 3 Provide refresher training to all health center personnel, who have not been working for many months due to the civil war

In collaboration with the Ministry of Health and Humanitarian Action, IRC organized three refresher trainings, of which two were contiguously scheduled from 18 October and from 15 to 20 November, 1999 aimed at the rationalization process and managing minimal activities for an IHC (Integrated Health Centre). The theme of the third seminar scheduled from 13 to 16 December 1999 was the co-management of and community participation within an IHC, bringing together members of health committees with the heads of all health centres in Bacongo and Makelekele Health Districts.

The intended outcome of these seminars was to enable participants to contribute to the rationalization of IHCs activities.

Pre- and post- test course evaluations indicated that, by the end of the seminar, all participants were able to:

- Use the management tools of an IHC's MAP
- Master the co-management techniques within an IHC with the health committee
- Manage the resources at their disposal to provide quality care to the population

EXPECTED RESULTS

- Strengthen the IHC personnel's management capacities
- More effective participation of the community in health activities

TABLE 6
SEMINAR PARTICIPANTS : 72

	Health staff	Health committee
IHC TENRIKYO	07 Agents	5
IHC Charles LOUANGA	07 Agents	5
IHC KISSOUNDI	07 Agents	5
IHC Q 24	07 Agents	5
SMI BACONGO	07 Agents	5
IHC BISSITA	07 Agents	5
Main Office for Health.	02 Agents	

FACILITATORS :

Public Health Specialists
Epidemiologist
Health Administrators
Public Health Technician

DURATION :

15 days to complete these three consecutive seminars – from 18 to 22 October 1999 and from 15 to 20 November 1999

TOPICS :

TABLE 7

DAYS	HOURS	TOPICS	FACILITATORS	MODERATORS
D 1	9:00 – 9:30	- Pre – test	DGS	Dr BIDOUNGA
	9:30 – 10:00	- Opening Ceremony		
	10:00 – 12:00	- <i>PNDS(National Health Program Plan) :</i> general principles, objectives, strategy	Dr LENGOUANGO	
	12:00 – 1:00	- Break	Dr BASSOUAMINA	
1:00 – 3:30	- The Health District : Administrative structure Operational structure Referral hospital – IHC			

		Health District Pharmacy Activities Planning Decentralization System		
D 2	9:00 – 10:30 10:30 – 12:00 12:00 – 1:00 1:00 – 3:30	- The Health center: measuring the critical mass - the responsibility of population - Target population The Integrated Health Centres(IHC): Concept and organisation Break IHC activities	Dr KITEMBO Dr MAOUNGOU Dr MAVOUNGOU	Dr LOUSSAMBOU
D 3	9:00 –10:30 10:30 – 12:00 12:00 – 1:00 1:00 – 3:30	IHC activities:PNC (Pre-Natal Consultation) Practical work: Filling out forms Family planning Consultation for under five children Nutritional surveillance Practical work: Filling out forms Break Rational prescription 'ordinogram'	MAVOUNGOU Dr DIMI Dr MAVOUNGOU Dr KITEMBO	Dr BASSOUAMINA Dr ISSOIBEKA
D 4	9:00 – 10:30 10:30 – 12:00 12:00 – 1:00 1:00 – 2:30 2:30 – 3 :30	Evaluation of activities - management of sanitary information. Management of finances and materials Break Management of medicines Community participation, principles of co-management	Dr MALLANDAH Dr MAOUNGOU Dr LOUSSAMBOU	Dr LOUSSABOU Dr LOUSSAMBOU
D 5	9:00 – 10:30 10:30 – 11:00 11:00 – 11:30 11:30 –12:00	Supervision Post – test (evaluation) Break Closing ceremony	Dr KITEMBO Dr MAVOUNGOU DGS	Mr BOLANDA

METHODOLOGY

- Presentations (concept clarification)
- Active participation

Objective 4: Implement an IEC campaign in the returnees' zones of primary and public health care

Confronted by a degrading socio-sanitary and environmental situation for the population in southern areas of Brazzaville, following the armed strife which occurred in 1998, an awareness campaign regarding priority health problems in the area was organized from 14 to 21 October 1999 by IRC with technical support from the Ministry of Health.

The campaign was carried out in Bacongo and Makelekele communes for seven days. A total of 40-community educators were used (18 for Bacongo, 22 for Makelekele) to make presentations throughout the communities. In total, 15,787, or 78% of inhabited lots were visited by the community educators, who reached approximately 95,000 people through their door-to-door campaign strategy. Banners and pamphlets were posted on the main roads in Bacongo and Makelekele, and leaflets were distributed. Public health messages were also broadcast on the radio and television. The topics for the campaign were tailored to the specific needs of each community, including: the importance of regular vaccination for children, malnutrition, and the prevention of diarrheal diseases.

The aim of this campaign was to reinforce knowledge, aptitudes and attitudes among the population in southern areas of Brazzaville in order to reduce priority public health problems there.

The following strategies were applied to reach this objective:

- Inform the population of the causes, consequences and prevention of priority diseases (watery diarrhoea, malnutrition, tuberculosis...)
- Sensitise the population to the importance of vaccinations
- Encourage the population to visit nutritional recuperation centres
- Encourage suspected tuberculosis cases to visit detection centres

At the conclusion of the campaign, the following results were expected:

- Populations are aware of the main public health problems, identified with community input, in the southern area of Brazzaville
- Populations change attitudes and health behaviours to reduce incidence of transmissible diseases.

Activities:

Training of Community Educators

A training course was held in the conference hall of the Makelekele S.S.C. on October 19, 1999.

40-Community Educators were trained on various selected topics and IEC techniques.

An active and participative training approach was adopted during this session.

The course was evaluated through a written test. The average score of the Educators was 16.85 / 20.

Following the training session, the Community Educators were sent out to different quarters and blocks.

Awareness training for the population

Social mobilization was undertaken from October 14 to 21, 1999 in the Bacongo and Makelekele administrative areas.

A door-to-door strategy was enhanced by a media campaign (reporting) and other means of communication such as:

- Banners posted on main streets
- T-shirts
- Pamphlets and leaflets
- Other (debates).

Campaign impact

It was not necessary to wait for the end of the campaign to observe its impact. Half-way through the campaign, the following could be recorded :

- Strong attendance at vaccination sessions, as noted in Tables 9-10
- Increased number of patients in health centers and nutritional recuperation centers
- Sanitation and cleanliness operations carried out by the populations of Bacongo and Makelekele.

Objective 5: Ensure proper medical care for cases of chronic disease among the returnees

A medical assistance program was set up by IRC for the most needy chronically ill individuals, who had lived in the bush without care facilities and returned to deplorable sanitary conditions, unable to care for themselves.

The most frequently considered chronic illnesses were: sickle cell anaemia, diabetes, high blood pressure, rheumatism and tuberculosis.

The following table contains statistics on illnesses recorded and cared for from September to December 1999 :

TABLE 8

Chronic illness	Ill cared for at Tenrikyo	Referred	TOTAL
High blood pressure	335	83	418
Rheumatism	219	92	311
SS anemia	20	39	59

Diabetes	10	67	77
Tuberculosis	0	67	67
TOTAL	584	348	932

Out of 932 chronic patients who were cared for, 348 were referred to specialized care facilities such as the National Tuberculosis Program, and University Hospital. 17 insulin-dependant diabetics were referred for care in a specialized services, three of them were requiring reanimation care.

Among the 83 cases referred with high blood pressure, 2 presented symptoms of a cerebral vascular accident (CVA).

Objective 6: Conduct a vaccination campaign for displaced children under 5

Prior to and during these days, IRC was involved in a vast awareness campaign for the National Intensive Polio Vaccination Day, from October 28 to October 30, 1999 and a second one from December 27 to December 29, 1999. As a result, a total of 12,323 children under 5 years of age were vaccinated by IRC.

Intensive National Vaccination Day

TABLE 9

Area	Target Population 0 – 59 months	Strategies	By IRC	By others (UNICEF, WHO...)	Children vaccinated	Subtotal	Coverage VPO (%)
Makélékélé	35941	Fix (HC)	3625	9477	13102	34082	94,82
		Door to Door	4427	16553	20980		
Bacongo	19372	Fix (HC)	1945	5504	7449	18406	93,04
		Door to Door	2326	8631	10957		
Subtotal	55313		12323	40165	52488	52488	

HC: Health centers

In addition, IRC set up two fixed vaccination sites within the Indzouli and Charles Louanga health centers by installing needed cool chain equipment such as cool boxes and refrigerators.

Tables 10-11 show the vaccination report for these two centers during the months of November and December:

TABLE 10

Antigen	0-11 months	12-23 months	24 months and over	TOTAL
BCG	1109	0	0	1109
POLIO 0	663	459	908	2030
POLIO 1	178	51	43	272
POLIO 2	51	12	27	90
POLIO 3	21	29	27	77
Rappel		14	7	21
DTCOQ 1	159	124	454	737
DTCOQ 2	196	6	119	321
DTCOQ 3	185	2	7	194
Rappel		91	2	93
<i>Rouvax</i>	565	431	989	1985
TOTAL	3127	1219	2583	6929

Pregnant women**TABLE 11**

Anti-tetanus Vaccine	Pregnant women	Women in reproductive age	TOTAL
VAT1	117	43	160
VAT2	63	41	104
VATr1	2	24	26
VATr2	6	9	15
VATr3	4	12	16
TOTAL	192	129	321

In conclusion, IRC was able to carry out its objectives by providing assistance to the returning populations of Bacongo and Makelekele, two of the areas most affected by war.

APPENDIX A

LISTE DES MEDICAMENTS DOTES DANS LES CENTRES DE SANTE
De Bacongo et de Makelekele de Juillet 1999-Janvier 2000

No	DESIGNATION	UNITE	charles Luanga	Inzouli	Bissita	Bacongo	Terinkyo	TOTAL
1	Abcess/suture set	SET	2	2	2	2	4	12
2	Acide ascorbique 250 mg	bte/1000	8	8	8	8	16	48
3	Adhesive tape (sparadrap)	Bte/12	12	12	10	10	20	64
4	Aiguille 19 1/2 G	pqt/100	5	5	5	5	10	30
5	Aiguille 21 G	Bte/100	12	12	12	12	24	72
6	Aminophylline 25 mg inj	bte/10 amp	27	27	27	27	54	162
7	Amoxicilline 250 mg	bte/1000	6	8	6	8	16	44
8	Amoxicilline 500 mg	bte/500 gel	2	2	4	2	4	14
9	Ampicilline 1 g inj	pqt/50	3	3	3	3	6	18
10	Ampicilline 500 mg	bte/25	4	4	4	1	2	15
11	Appareil a tension complete	Unite	1	1	1	2	4	9
12	Apresoline 20 mg	bte/10 amp	2	2	2	2	4	12
13	Atropine 1 mg	bte/10 amp	15	15	15	15	30	90
14	Autoclave	Unite	1	1	1	1	2	6
15	Autoclave tape	rouleau	1	1	1	2	4	9
16	Balance	unite	2	1	2	2	4	11
17	Balance adulte	Unite	2	2	2	2	4	12
18	Balance altere type 10kg + 3 cul	Unite	1	4	1	1	2	9
19	bande compresse	rouleau	0	0	1	3	6	10
20	Bande de gaz		0	0	0	3	6	9
21	Bande elastique	bte/10 cps	6	6	6	6	12	36
22	Bassin	Unite	2	4	2	2	4	14
23	Bassin P.M	Unite	2	0	2	2	4	10
24	Benzathine benzylpenicilli 2.4 iu	flacon	25	25	25	25	50	150
25	Benzathine penicillin 2.4 miu	50 vls	4	3	4	4	8	23
26	Benzoic salycilic acid 500 g	Bte/100	0	1	0	2	4	7
27	BENZYL 1 M	flacon	100	95	100	100	200	595
28	Bisacodyl	boite	2	2	2	2	4	12
29	Blade for surgical knives	Pces	100	100	100	100	200	600

30	Bloc note	Unite	1	1	1	1	2	6
31	Boite a instrument	Unite	2	2	2	2	4	12
32	Boite a instrument petit modele	Unite	1	1	1	1	2	6
33	Boite complete petite chirurgie	bte	2	8	2	4	8	24
34	Boitea instrument vide	Unite	2	2	2	2	4	12
35	Book" clinical guidelines"	Pces	1	1	1	1	2	6
36	Book"Guia clinica "	Pces	1	1	1	1	2	6
37	Book"Guide clinique et therapeut	Pces	1	1	1	1	2	6
38	Brosse	Unite	3	3	3	3	3	15
39	Brosse a ongle	Unite	5	5	5	5	10	30
40	Calcium gluconate 10% 10ml	bte/10 amp	2	2	2	2	4	12
41	Catheter 20 G	50 pieces	3	3	3	3	6	18
42	Catheter 22 G	Bte/50	1	1	1	1	2	6
43	Cellule de naubuer	Unite	1	1	1	1	2	6
44	Chloramphenicol	bte/ 5 amp	100	100	100	100	200	600
45	Chloremphenicol	bte/1000	2	2	2	4	8	18
46	Chlorexidine 1 l	flacon	13	13	13	22	44	105
47	Chlorexidine 500 ml	flacon	3	3	3	3	6	18
48	Chloroquine 150 mg	bte/1000	8	8	8	8	16	48
49	Chlorpromazine	bte/10 amp	4	4	4	6	12	30
50	Ciseau	Unite	4	4	4	4	8	24
51	Ciseau courbe	Unite	2	2	2	2	4	12
52	Ciseau pointu	Unite	2	2	2	2	4	12
53	Ciseau pointu P.M	Unite	2	2	2	2	4	12
54	Ciseau bl/bl	Pces	2	2	2	2	4	12
55	Ciseau droit	Unite	4	4	4	4	8	24
56	Ciseau pointu Moyen	Unite	4	4	4	4	8	24
57	Compresse 10x10 sterile	pqt/45	4	4	4	0	0	12
58	Compresse sterile	bte/100	6	6	6	6	12	36
59	Condom	bte/144	30	30	30	30	60	180
60	Contraceptive oral	cycle	1125	1125	1125	1125	2250	6750
61	Coton hydrophile 100g	rouleau	3	3	3	3	6	18
62	Cotrimoxazole 480 mg	Bte/500	8	8	8	8	16	48
63	Cotton wool 200g	rouleau	6	6	6	6	12	36
64	Depo provera	vls	300	300	300	300	600	1800
65	Dexamethasone	flacon	25	25	25	25	50	150
66	Diazepan 5 mg	bte /10 amp	20	20	20	20	40	120
67	Diazepan 5 mg	bte / 100	12	12	10	12	24	70
68	Doxicycline 100 mg	bte/1000	4	4	4	4	8	24
69	Drap	piece	2	2	2	2	4	12
70	Dressing set	set	5	5	5	5	10	30
71	Epinephrine (adrenaline) 1 mg	bte /10 amp	12	12	12	12	24	72
72	Epinephrine emg/ml, 1ml (adrenaline)	bte/50 amp	1	0	1	1	2	5
73	Erythromicine 250 mg	bte/100 cp	20	20	20	20	40	120
74	Fer sulphate + acide folique 200mg	bte/1000	5	5	5	5	10	30

75	Ficelle ombilic	rouleau	2	2	2	2	4	12
76	Fil de suture 2/0	pqt/12	5	5	5	5	10	30
77	Filtre a eau	Unite	2	2	2	2	4	12
78	Folic acid 1 mg	bte/1000 cp	3	3	3	3	6	18
79	Forceps artery	2pces	2	2	2	2	4	12
80	Furosemide 2ml inj	bte /10 amp	7	7	7	7	14	42
81	Furosemide 40 mg	bte/1000	8	8	8	8	16	48
82	Furosemide 40 mg	bte/100	4	4	4	4	8	24
83	Gant chirurgical no 7 (sterile)	bte/50 paires	6	6	6	6	12	36
84	Gant chirurgical 7 1/2 (sterile)	bte/50	8	8	8	8	16	48
85	Gant non sterile	1 pqt/50 pcs	5	5	5	5	10	30
86	Gant non sterile	pqt/20	32	32	32	32	64	192
87	Gant sterile 8 1/2	pqt/50	2	3	2	2	4	13
88	Gants sterile 6 1/2	pqt /50	2	2	2	2	4	12
89	Gentamicine 80ml	pqt/100	3	3	3	3	6	18
90	Gentamicine 80ml	bte/50 amp	8	8	8	2	4	30
91	Gentamycin 40 mg	bte /100 amp	4	4	4	4	8	24
92	Glibenclamide 5 mg	bte/1000	1	1	1	1	2	6
93	Glucose 5 % + perfuseurs	cart /10	3	10	3	3	6	25
94	Glucose 50%	flacon	10	10	10	10	20	60
95	Glucose urine test	Unite	2	2	2	2	4	12
96	Grisoefulvine 500 mg	bte/1000	3	1	3	3	6	16
97	Haricot	Unite	2	2	1	2	4	11
98	Hartmann's sol (ringer lactate) 500ml + set	20 BAG	5	3	5	5	10	28
99	Hemoglobunometre	Unite	1	1	1	1	2	6
100	Hydralazine	bte/10 amp	2	2	2	2	4	12
101	Hydrochlorthiaside 250 mg	bte/1000	2	2	2	2	4	12
102	Hydrocortisone 100 mg	bte/10 fl	15	8	15	15	30	83
103	Hydrocortisone 100 mg	bte/10 fl	5	15	5	5	10	40
104	Hydroxide d'aluminium 500 mg	bte/1000	10	10	10	10	20	60
105	Ketamine 50mg/ml, 10ml	bte /25	1	3	1	3	6	14
106	Lames bistourie	pqt/100	1	1	1	2	4	9
107	Lidocaine HCl 1%	Bte / 5 amp	10	5	10	4	8	37
108	Masque pediatrique	Unite	2	2	2	2	4	12
109	Maternite pads	cart/30	1	0	1	1	2	5
110	Mebendazole 100 mg	bte/100 cp	120	150	100	120	240	730
111	Mebendazole 500mg	bte/100 cp	30	30	30	30	60	180
112	Methyldopa 250 mg	bte/100	6	6	6	6	12	36
113	Methylergometrine (inj)	bte/ 10 amp	10	10	10	10	20	60
114	Metre ruban	Unite	2	2	2	2	4	12
115	Metronidazole 250 mg	bte/1000 cp	7	7	7	7	14	42
116	Microperfuseur 25G	bte/100	5	5	5	5	10	30
117	Microscope binoculaire	Unite	1	1	1	1	2	6
118	Microscope monoculaire	Unite	1	1	1	1	2	6
119	Midwife kit	1kit	4	4	4	4	8	24

120	MUAC	Unite	5	4	1	2	4	16
121	Multi purpose	bte/200	3	9	3	3	6	24
122	Multivitamine	bte/5000	4	3	4	4	8	23
123	Nystatine 100.000 ui	bte/1000	5	5	5	5	10	30
124	Otoscope	unite	1	1	1	1	2	6
125	Oxyde de zinc (creme 10 %)	bte	8	8	8	8	16	48
126	Oxytocin 10 iu/ml, 1ml	bte/100 amp	6	6	6	6	12	36
127	Papier filter	Unite	1	1	1	1	2	6
128	Penicilline procaine 3 mui	bte/50	5	5	5	5	10	30
129	Pentazocine inj	bte/10 amp	5	5	5	5	10	30
130	Phenibarbital	bte/100	10	10	10	12	24	66
131	Phenobarbitone 50 mg	bte	4	15	4	4	8	35
132	Phenoxyethylpenicillin 250 mg	bte/1000 cp	5	5	5	5	10	30
133	Battery for otoscope	Unite	12	12	12	12	24	72
134	Pince	Unite	5	5	5	5	10	30
135	Pince a coeur	Unite	2	2	2	2	4	12
136	Pince a dissequer	Unite	6	6	6	6	12	36
137	Pince anatomique PM.	Unite	1	1	1	1	2	6
138	Pince fixe champ	Unite	2	2	2	2	4	12
139	Pince hemostatique	Unite	3	3	3	3	6	18
140	Pince porte coton	Unite	3	3	3	3	6	18
141	Pipette numeration globule rouge	Unite	3	3	3	3	6	18
142	Pipette pasteur	bte/250	3	3	3	3	6	18
143	Plateau a instrument	Unite	5	2	5	5	10	27
144	Poubelle a jeter	Unite	5	5	5	5	10	30
145	Povidone iodine 10%	flacon	14	14	14	14	28	84
146	Prestige double-rack	Pces	5	5	5	5	10	30
147	Procaine Benzyl penicillin 3Mui	bte/50	4	4	4	4	4	20
148	Procaine peni 4 M	bte /50	5	5	5	5	10	30
149	Promethazine 25 mg	bte/100	15	15	15	15	30	90
150	Promethazine Hydrochloride	bte/10 amp	5	5	5	5	10	30
151	Quinine 300mg	bte/100	50	50	45	25	50	220
152	Quinine 600 mg inj	bte/10	80	80	80	80	160	480
153	Quinine 600mg inj	bte/100	7	7	7	7	14	42
154	Quinine dihydrochloride 6 mg 2ml	bte /10 amp	10	10	10	10	20	60
155	Quinine inj 200mg	bte/100	10	10	10	10	20	60
156	Ringer 500 ml (lactate)	cart /10	12	12	12	12	24	72
157	Sac a urine	10 unites	2	2	2	2	4	12
158	Sac prestige medical	Unite	1	1	1	2	4	9
159	Kit instruments pinces et ciseaux	kit	2	2	2	2	4	12
160	Salbutamol 4 mg	bte/1000	25	25	25	25	50	150
161	Scalp vein 23 G	Bte/100	4	4	4	4	8	24
162	Sciseau	Unite	4	4	4	4	8	24
163	Scoth a papier	Unite	2	2	2	2	4	12
164	Seringue 2 cc	bte/100	5	5	5	3	6	24

165	Seringue 10 cc	bte /100	3	3	3	3	6	18
166	Seringue 5 cc	bte/100	5	5	5	5	10	30
167	Seringue 5 ml sans aiguille	pqt/100	5	5	5	5	10	30
168	Serum sale 0,9 1000ml	10/flacon	7	7	7	7	14	42
169	Silver sulphadiazine 1 %cream 50g	tube	30	0	30	30	60	150
170	Sonde urinaire	unite	0	1	2	2	4	9
171	Sparadrap	pqt/10 rol	5	5	5	5	10	30
172	Speculum	Unite	5	5	5	5	10	30
173	Speculum G.M	Unite	1	2	1	1	2	7
174	Speculum P.M	Unite	1	3	1	1	2	8
175	Speculum vaginal (moyen)	Unite	2	2	2	2	4	12
176	Stetoscope	Unite	3	3	3	3	6	18
177	Stove kerosene for sterilizer Hipolito	Pces	2	2	2	2	4	12
178	Suction Catheter	bte	4	4	4	4	8	24
179	Sulfadoxine pyrimethamine	bte/100	7	7	7	7	14	42
180	Tableau poids / taille	Unite	6	6	6	6	12	36
181	Tambour	unite	3	3	3	3	6	18
182	Tensiometre	Unite	2	2	2	3	6	15
183	Tensiometre (couverture bleue)	Unite	2	2	2	2	4	12
184	Tetracycline Hcl 250mg	bte/1000 cp	2	2	2	2	4	12
185	Thermometre	Unite	15	15	15	15	30	90
186	Tourniquet	Pces	2	2	2	2	4	12
187	Towel,huck	Pces	2	3	2	2	4	13
188	Tramadol hcl 50mg/ml 2ml inj.	bte/5 amp	2	4	3	4	8	21
189	Vicryl 1, 0, 0	bte/36	3	3	3	3	6	18
190	Violet de gentiane	boite	4	4	4	4	8	24
191	Vitamine c (acide ascorbique) 250 mg	bte/1000	6	6	6	8	16	42
192	Vitamine A (retinol)	bte/500	4	4	4	4	8	24
193	Vitamine B complexe	bte/1000	4	4	4	4	8	24
194	Vitamine B complexe 20ml	bte/100	5	5	5	5	10	30
195	Water filter	Unite	2	2	2	2	4	12
196	Water for inj 10ml	bte/100 amp	20	20	20	20	40	120
197	Water for injection	bte/10 amp	5	5	5	5	10	30
198	Water for injection	bte/50 amp	62	62	62	62	124	372
199	Zinc oxyde	bte	3	3	3	3	6	18
200	xylocaine 1% 50 ml	bte/25	1	1	1	1	2	6
201	xylocaine 2% 20 ml	bte/25	2	2	2	2	4	12