



**"FISTULA 2020" CAMPAIGN
CONCLUDES ITS MISSION
IN LODJA AND KOLE**



**WOMEN AT THE MAISON
DORCAS CREATE MASKS TO
FIGHT COVID-19**



**TRIBUTE TO THE SLAIN
PARK RANGERS IN VIRUNGA
PARK AND THE VICTIMS OF
THE UVIRA FLOODS**



**SUCCESS STORY:
MWEMA, A TEENAGE
SURVIVOR WHO LEFT THE
MINES AND BECAME A
SEAMSTRESS**

PANZI NEWS



*Albert Agisha in full assembly of the
"anti-projection visor" produced in
Bukavu.*

© Photo Arsène LWANBANJI

Protective face shields produced in DRC via 3D printing

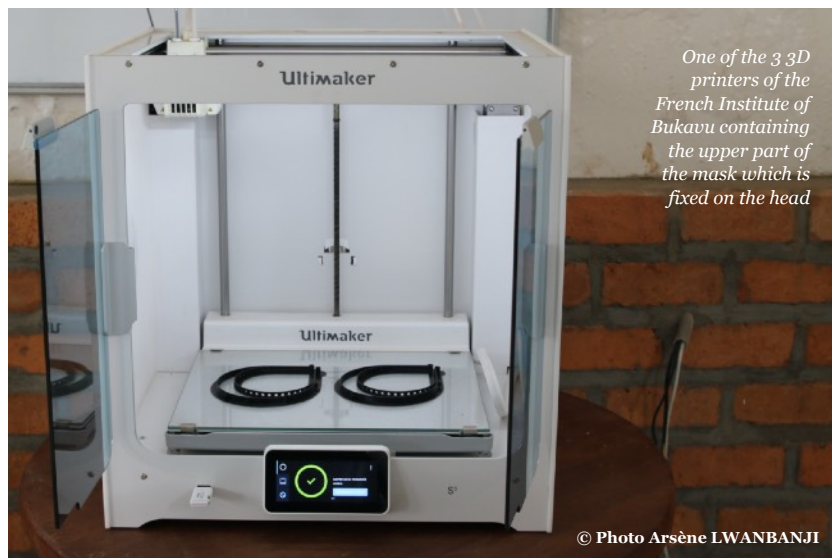
Professor Jonathan Mboyi Esole, Congolese researcher and professor at Northeastern University in the United States, teams up with a network of scientists in the DRC to fight the coronavirus pandemic. One of their first initiatives is the "anti-splash visor." He explains this project to Panzi News.

Since the start of the COVID-19 pandemic, researchers, engineers and inventors have been working tirelessly and creatively to defeat this invisible enemy. Certain initiatives taken by Congolese compatriots in the midst of a health crisis are particularly worth highlighting, including the efforts of Professor Jonathan Mboyo Esole. Made from a transparent plastic, his "anti-projection visor" is a mask which protects the wearer from contamination by covering his or her entire face. This is an essential tool for all trades who are forced to be close to contaminated people, in particular nursing staff.

Professor Esole explains this initiative, which aims to be 100% Congolese from design, to financing, and to production:

"When the crisis started, it quickly became clear that this was a pandemic that depended on a lot of data and information. From the moment there are numbers, we can do mathematical analysis, we can predict how the numbers will increase or decrease.

With scientific compatriots, we formed a team that we called "COVID-19 DRC" as well as a website (www.covid19drc.com) on which we try to present the statistics of the pandemic for Congo. This resource is scientifically rigorous, but also accessible to the greatest number of people and easy to navigate. We make estimates and try to predict what will happen. But that's not enough, so we've also decided to start producing equipment to protect the medical teams that are the first line of defense against a pandemic. In Congo, medical staff are not always well-equipped, and it is currently difficult to make certain international purchases, due to great global demand. Our strategy is to carry out local production, so we started with the idea of 3-Dimensional (3D) printing and laser-cutting which is often faster.



We wanted to start with this mask, because it is the basic protection to prevent droplets that contain the virus from reaching the face. This is also suitable for police officers who are always on the ground in delicate intersections — we also want to give them this protection.

We are now producing these visors in different parts of the country. Our team is made up of different organizations that we work with. In Kinshasa, Investing In People, the NGO of Raïssa Malu (former ambassador of the Next Einstein Forum and creator of Science Week in the DRC), also a member of our team, is responsible for production in the capital.

We are therefore going to offer some to the response at the level of Kinshasa where we are leaving on the basis of 1000 visors. We have no production costs thanks to crowdfunding.

In Goma, we got in touch with Professor Baraka's team who had also started to make an impression of masks on his side. Our collaboration consists in helping its team to improve its models and also to finance the production.

Jonathan Mboyo Esole

Innovator behind "made in the DRC"

Jonathan Esole is a Congolese mathematician working on the geometry of String Theory. Trained all over the world (Kinshasa, Brussels, Cambridge, Leiden, Stanford, Louvain, and Harvard), he is currently a professor at Northeastern University in Boston. Jonathan Mboyo Esole has solved important problems in mathematical physics. In 2018, he was named Next Einstein Fellow, an award that celebrates the best African scientists and technologists. An ardent defender of African excellence in science and of women's access to education, he is a member of the advisory board of the NGO "Malaika" and a member of the jury for the L'Oréal-UNESCO "For Women" award. In 2018, he received the Dunia International Prize for his awareness activities.



Generally speaking, the idea for us is really to help where there are capacities. Anyone who has a production capacity, we will come with our technology, our know-how and our connections, to transform their capacities into a reality and finance their production.

In Bukavu, we didn't know anyone except our friends from Doctor Mukwege's Panzi Foundation. They put us in touch with the French Institute in Bukavu which owns 3D printers and we were able to quickly start production.

We also contacted a Congolese mathematician student, Albert Agisha, who after Alfajiri College studied at one of our AIMS (African Institute for Mathematical Science) institutes. He was the first of the AIMS 2019 class in Kigali, he was the best student. Being from Bukavu, he is clearly competent to jump on any technology, digest information quickly and put it to use. Today, he is the representative of our "COVID-19 DRC" team in Bukavu and he works hand-in-hand with the French Institute of Bukavu directed by Nicolas Fargues.

One of the aspects of our mission is that we are very focused on defending the rights of women and valuing the work that women do. I work with an organization called L'Oreal UNESCO for Women in Science, which gives scientific prizes to women scientists—exceptional women in Africa and in the world in general. At the end of 2019, DRC participated for the first time in the awarding of this prize. Our objective was to have as many Congolese women scientists participate in this program as possible. With the NGO "Malaika" by Noella Munsuka, we also want to show that the education of young girls is crucial. So, even after winning international prizes, the first people who will be the focus of our action will be young girls from a small, almost unknown village in Katanga.

Now that we are in Bukavu with this production of masks, we have made a point of involving survivors of sexual violence who are beneficiaries of Panzi Foundation projects. Thus, during the assembly of the various parts of the visor, these women will have a primordial role. The aim is also to send a message to the rest of the country, to show that we need everyone, even when it comes to technically sophisticated things. It also allows us not to present these women only as victims, but as agents of change and active in the face of major problems in society such as COVID-19. This shows that they are ready to go straight into action to try to save lives.

To conclude, I would like to point out that we have launched our fundraising, which is an important point of our approach because we had the option of collecting funds from international organizations, but our goal is to attract the attention of the diaspora and donors in the country so that our initiatives remain truly 100% Congolese."

The COVID-19 DRC anti-splash visors will be distributed free of charge to hospitals in Bukavu and the region. The technology, hailed by Dr. Mukwege, is expected to produce several thousand pieces by May 20.

"One of the aspects of our mission is that we are very focused on defending women's rights and valuing the work that women do."

Prof. Jonathan
Mboyu Esole



© Photo Arsène LWANBANJII

Other artisanal initiatives are multiplying everywhere, including at the Panzi Hospital. Prior to the production of the 3D anti-splash visor, Mr. Asher Ngabo, head of the technical service of the Hospital of Panzi, had the idea to make an artisan mask with foam, a PVC pipe and a transparent sheet.



Panzi Hospital continues "Fistula 2020" campaign

Four doctors from Panzi Hospital have just completed the first stage of a mission to repair urogenital and rectovaginal fistulas in the towns of Lodja and Kole, in Sankuru province.

Fistulas are serious gynecological injury which occur following rape with extreme violence or following childbirth (obstructed labors or instances in which the delivering mother is too young to give birth without sustaining trauma). Fistulas cause patients to become incontinent, and this dramatic and extremely debilitating situation often results in the stigmatization of these women. Some women have been suffering from fistulas for more than 60 years after giving birth at an early age.

For three weeks, the Panzi Hospital's "Fistula 2020" specialist team operated on more than 100 fistula patients. Dr Pamandjelo, focal point at Panzi Hospital in Lodja, explains that only 50 operations were initially planned for this mission, which ended with 52 operations in Lodja and 49 in Kole.

In order to ensure that no women in the region wishing to seek medical treatment were left behind, patients from several villages were welcomed and accommodated in the hospitals of Kole and Lodja for more than two weeks while waiting for their surgeries.

The "Fistula 2020 » campaign, a success since the start of 2020.

Dr. Pamandjelo is pleased with the results of the Lodja and Kale mission: "Most of the women who have had the operation today have all the signs of healing," he said. Marie, a nurse at Lodja Hospital, is also optimistic about the physical health of the operated patients: "I thank the team of surgeons at Panzi Hospital. They participated in restoring the dignity of a hundred women thanks to the Fistula 2020 campaign, which turned out to be a real success. "

On discharge from hospital, patients received a hygiene kit containing soap, moisturizer and loincloths.

Cases of persistent urinary incontinence will be transferred to Bukavu in order to be taken care of by Dr. Cadière's team, which since 2012 has carried out missions to Panzi Hospital 4 times a year in order to operate by minimally-invasive surgery of particularly complicated cases, including recto, uretero and vesico-vaginal fistulas.

The "Fistulas 2020" campaign continues in the territory of Yakoma, in the province of Nord-Ubangi with the support of the Fistula Foundation through the Panzi Foundation.

Success story

Mwema

Young seamstress leaving a mining community in Luhwindja

It is estimated that more than a thousand women, adolescent girls, and child prostitutes work in the mining plots of Luhwindja to survive and help their families. Several of Panzi's initiatives and projects are trying to help them rebuild their lives outside the mines, particularly in Mwenga territory. Mwema tells us about her journey.

"I used to work in the artisanal mines, but today I have another experience of life. After having followed a training in cutting and sewing provided by the PIAH * project initiated by the Panzi Foundation, I now work in a tailoring workshop with my friends. I must say that at the beginning, it was difficult for us to find clients and we had difficulty paying the rent for the workshop. But we worked hard and it made enough money for us to buy another sewing machine.

We understood that training was the starting point for taking off in life, and that gave us a taste for business. Besides, we did not hesitate to jump on several opportunities that presented themselves and today the community trusts us. Currently, while the COVID-19 pandemic is raging, we have just found a market for making nose pads. This activity allows us to make a profit. We are working hard and I earn 15,000FC (\$9 USD) per day. This money allows me to save to pay the rent, to support myself and to provide for my family. I am proud of what I have accomplished."

In these times of health crisis, Mwema is not the only one to concentrate her efforts on the response against the COVID-19, initiatives strongly encouraged by Mwami Naluhwindja Chibwire V Tony, the Chief of the Village of Luhwindja.

Interviewed by Panzi News, he tells us about the situation in Luhwindja: "Thanks to the sanitary measures taken in the town of Bukavu which has been completely closed for more than the past month, the road to Luhwindja is highly controlled and we do not have recorded any cases of COVID-19. I have implemented hand-washing stations in all public places and we have launched awareness campaigns. People do not seem to understand the situation yet and obviously we cannot ask them to stay at home because they have to work for food, but we make sure that everyone has and wears a mask, even if it is not always easy. The work of young girls like Mwema is essential for us. Her journey requires exceptional courage and we are proud to have such examples in Luhwindja. Today, she is a model of success and perseverance for our community."

* Integrated Holistic Support Program for Survivors of Sexual Violence and Women Suffering from Gynecological Pathologies at Panzi Hospital and Other Vulnerable



Mwema and one of her colleagues outside her workshop in Luhwindja



The Mwami Naluhwindja Chibwire V Tony

© Photo Jean-Pierre Muhamiriza



Launch of the "Prevention and Responses to Gender-Based Sexual Violence in South Kivu" Project in Kaniola

© Photo Bernardin SEBAHIRE

The Kaniola health zone is now benefiting from a new prevention project to combat sexual and gender-based violence. Named Prevention-Response VSBG ("Prevention and Responses to Sexual and Gender-Based Violence"), it is implemented by a consortium made up of three organizations: the Panzi Foundation, Héritiers de la Justice, and SARCAF.

On March 31, a meeting to present and explain the project to the beneficiaries and the local authorities took place in the office of the Kaniola health zone. The project coordinator, Pascal Musaraza, insists on the prevention-response relationship: "Prevention is better than a cure. We dream of a community living in peace and stability, in which brotherhood and partnership will reign."

Of course, the VSBG Prevention-Response project will not exclude people who do not wish to participate in the prevention part, the program being, according to Panzi's vision, person-centered.

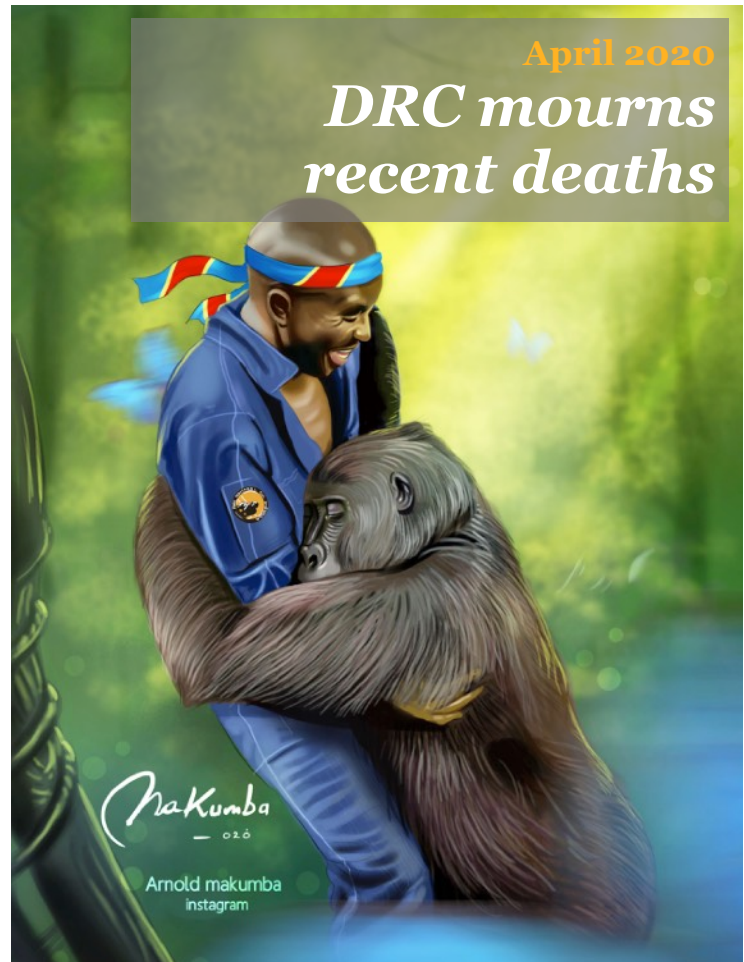
The project relies on community participation. For example, women's organizations in the Kaniola health zone made valuable contributions during a session devoted to analyzing the status of women in the Kaniola community. They then shared their experiences in the field and a hundred women from 15 health areas targeted by the project in the Kaniola health zone gave their point of view in the face of the violence they experience on a daily basis.

The consortium team then went to health areas to identify ten community-based organizations (CBOs) to work with. Within each CBO, three social workers (called "focal points") were selected on the basis of pre-defined criteria. They are now responsible for managing cases of gender-based violence. The selected women's organizations are supported by community mobilizers and paralegals. After the opening of its offices on site, the VSBG Prevention-Response project selected 150 community actors who were responsible for implementing the project.

The VSBG Prevention-Response project, which is to last 24 months, covers seven health zones in South Kivu and is financed by the World Bank through the Social Fund of the Democratic Republic of Congo.



© Photo Bernardin SEBAHIRE



Massacre at Virunga National Park

19 people, including 12 rangers, were massacred on April 27 at Virunga National Park. It is estimated that around 200 rangers in Virunga have been killed since the 2000s.

Floods in Uvira

Heavy rains destroyed approximately 3,500 houses and killed nearly 40 people, mostly children in Uvira, South Kivu Province, on April 16.



© Photo Justin Ngoma



The women of Maison Dorcas take up the fight against COVID-19

Maison Dorcas is a transit house in which survivors of sexual violence rebuild their lives after receiving medical treatment at Panzi Hospital. After having survived the horror of their rape, these young women and girls enter a holistic healing program created by Dr. Mukwege, which focuses on four pillars of assistance. One of these four pillars is support for socio-economic reintegration, which includes job-skills training. One such trade that they learn is sewing and tailoring.

Last March, Panzi Hospital and Bukavu General Hospital were named the two centers of reference for combating coronavirus in South Kivu Province. In addition, Dr. Mukwege was appointed chairman of the COVID-19 response committee in South Kivu by the provincial governor, Theo Kasi. Thus, in his latest press release, the Nobel Peace Prize winner made a clear appeal: "In the province of South Kivu, everyone must wear a mask when traveling outside the home."

After the announcement, the survivors of Maison Dorcas began to produce cloth face masks, which will be used for beneficiaries of Panzi's programs, and also for as many inhabitants of the province as possible.

When everyone is doing their part, we are stronger!



© Photo Daniel MUSAKA

THE MODEL DE PANZI

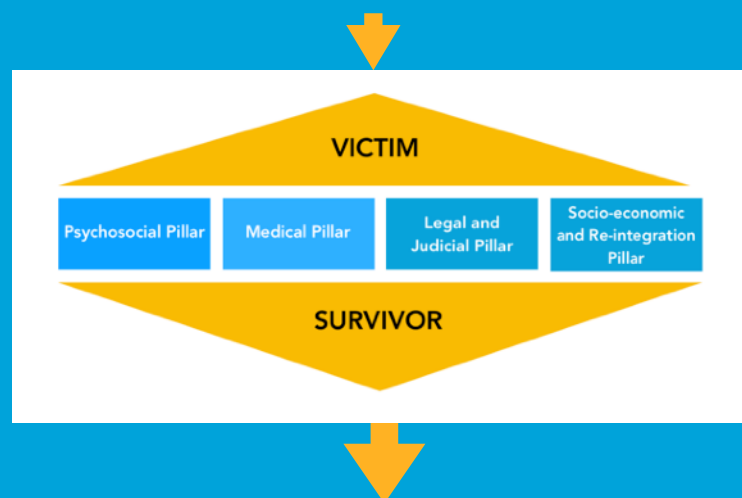
Developed by Dr. Mukwege, the Panzi Model organizes comprehensive care for survivors of sexual violence organized around four pillars that allow survivors to rebuild their lives, to be independent, and to reintegrate into the society in a sustainable way, in particular through our One Stop Centers.



© Photo Josh ESTEY

Arrival at the One Stop Center

Panzi Hospital, Mulamba Hospital Center, Bulenga Hospital Center or
Panzi Clinic in Kinshasa



Departure from the One Stop Center

Activities carried out in each pillar within the various Panzi Foundation projects, at Panzi Hospital, in our hospitals and in all the areas in which our projects are active

From March 25 to April 25, 2020

MEDICAL PILLAR

During this month of March, the Medical Pillar carried out several activities, with a significant slowdown in activities following the preventative measures adopted due to coronavirus, in particular at Panzi Hospital, as well as in health facilities in Luhwinja, Kamituga and those partners of AMADE due to the closure of schools and training centers.

In summary:

- **126** survivors of sexual violence treated (73 at Panzi Hospital, 6 at Bulenga Hospital, 27 in Tushinde-PEP structures, 1 at Mulamba Hospital, 11 in the Tushinde project in Bunyakiri, 2 at the Panzi Clinic in Kinshasa, 6 in Fizi). 43 of them were eligible for post-exposure prophylaxis. All patients received psychosocial support and 32 sought legal assistance.
- **19** patients were operated on for genital prolapse (18 at Panzi Hospital and 1 at Bulenga Hospital Center)
- **24** patients with urogenital fistulas underwent reconstructive surgery: 12 in outreach, including 8 in Tandala and 4 in Libenge, and 12 repairs at Panzi Hospital.
- **94** deliveries were carried out (69 at Mulamba Hospital and 25 at Bulenga Hospital) with 47 caesarean sections performed in emergency, of which 39 (83%) were referred cases.
- **158** patients were treated on an outpatient basis (123 at Bulenga Hospital, 29 at Mulamba Hospital Center, 3 in Luhwindja and 3 in Bunyakiri by AMADE), for various pathologies including malaria (65% of cases). Acute pulmonary infections, traumatic wounds, and intestinal parasites constitute the majority of cases.
- **113** patients admitted to hospital (53 at the Bulenga Hospital, 59 at the Mulamba Hospital and 1 child in Kavumu for severe malnutrition).
- **2** victims of physical assault were received in Bunyakiri for traumatic wounds and treatment of contusion
- **2** patients were referred from Nyangezi to Panzi Hospital for surgical management of genital prolapse complicated by urogenital infection.

Awareness sessions are being organized for patients and visitors at Panzi Hospital about the coronavirus pandemic, on the mode of transmission, signs and prevention measures, as well as through radio broadcasts led by provincial response management and prevention teams.

PSYCHOSOCIAL PILLAR

- **216** new cases were managed by the Psychosocial Pillar in the 3 One Stop Centers.
- **77** former cases benefited from psychosocial care/
- **85** cases are survivors of sexual violence, of which **33** are minors.
- **14** prolapse patients and 4 fistula patients also received psychosocial care.
- **36** survivors were discharged after their mental health was restored.
- **23** active listening sessions and 12 home visits were made by psychologists and psychosocial assistants to the children of 2 School Recovery Centers in Luhwindja and Kamituga.
- **33** children were visited in their homes by psychosocial assistance from the Children of Panzi and Elsewhere project.
- **6** awareness sessions for staff, patients and family members of children benefiting from the Children of Panzi and Elsewhere project on coronavirus and on the hygiene rules to be observed to avoid contagion,
- Implementation of an interview session with professors Adelaïde and Mormon from the University of Liège (academic partner of the Panzi Foundation), in order to improve the quality of psychological care offered to the different patients supported by the Psychosocial Pillar.

LEGAL AND JUDICIAL PILLAR

- **393** cases of requests for assistance were received by the Legal Pillar, including 86 cases of sexual violence, 258 cases of gender-based violence and 49 land dispute cases. Thus, the sexual violence files were assigned to lawyers for study, constitution of the elements of the file, drafting of the complaints and judicial follow-up. As for the reconciled files, 94 files were closed by conciliation of the parties in dispute, including 86 cases of gender-based violence and 8 cases of land disputes.
- Judicial follow-up has been the subject of **78** files regularly followed up before the competent judicial bodies, both civil and military (Police, Prosecutors' Offices, Courts, Courts and Courts) among which 6 judgments convicting the perpetrators have been obtained.
- In Bukavu, **7** files of sexual violence were followed up on, including 6 files referred to a later date for further processing and 1 file judged by conviction of the perpetrator for 5 years of PPS.
- In Uvira, **7** cases were regularly followed up in court.
- In Shabunda, **3** cases have been brought to justice.
- In Kamituga, **6** cases were followed, 2 of which were brought before the public prosecutor's office and 4 judgments rendered by conviction of the authors.

- In northern Idjwi, **1** case of sexual violence was brought to the Idjwi prosecution.
- For the DFID project funded by the British Embassy, **32** cases were followed up, including 18 cases of sexual violence investigated at the level of the TGI Kamituga registry as a prelude to the fairground hearing; 11 other files were followed up at the level of the courts.
- For the GIZ-funded project, **19** files were followed up, 10 of which were brought to court by way of complaint; 2 files for which the prosecution has awarded the warrant; 1 file was transferred to the prosecution at the TGI Kamituga for further investigation; 1 file was pleaded and taken under advisement.

- **15** radio awareness programs were produced, broadcast and / or rebroadcast in the northern Idjwi area on radio Obuguma; in the Uvira area on the radio The People's Messenger; in the Shabunda area on radio Mutula and in the Kamituga axis on radio Salama under the themes: the law on sexual violence; early and forced marriage; violence against women, the COVID-19 pandemic and protective measures, gender-based violence and the registration of children in civil status.

SOCIO-ECONOMIC REINTEGRATION

Socio-economic reintegration reflects the activities of entry into the development phase for these women who have suffered violence of all kinds and who have been followed in the emergency phase within the other 3 pillars.

Transit Support

The transitional accommodation care activities consist of social activities, psychosocial activities with different approaches, medical services and protective services (accommodation, granting of the hygiene kit, food, etc.).

During this period we took care of **38** beneficiaries in two transit centers, including 20 adults, 6 dependent and 12 unaccompanied children, (these are beneficiaries in confinement at the Maison Dorcas transit center including 2 of the Save the Girls project and 9 who are women who went through the Legal Clinic for Panzi Hospital).

They all benefited from a balanced and healthy diet, social supervision by the supervisors and hygiene kits.

Learning

As stated in the previous report, the activities of the apprenticeship department are still suspended on the basis of the communication made public by the chairman of the board of directors of the Panzi Foundation, Dr. Denis Mukwege, within the framework of the implementation of the COVID 19 disease prevention measures, as decreed by the President of the Democratic Republic of Congo, Felix Antoine Thisekedi.

Production and promotion

Solidarity mutual (MUSO)

We organized follow-ups for **64** MUSOs, including 2 in Kaziba, 18 in the Ruzizi Plain, 25 in Bulenga, 22 in Kavumu;

The observation is that the activities of MUSOs (contributions, granting of mutual credits, reimbursement, joint and several assistance, etc.) have been affected by the situation of the COVID-19 pandemic. Contributions and refunds do not work properly.

The situation is as follows: in total the green box presented an amount of 2,719,700 FC, the red box: 79,750 FC. They granted a credit of 1 882 000FC.

Village Savings and Credit Association (AVEC)

We noticed during our monitoring missions that there was no creation of new VSLAs, but the contributions of the members of the old associations continued:

3581 shares were purchased for a value of \$ 2139 USD, less the redemptions for the period. They granted themselves 59 Credits for a value of \$ 2,478 USD, an average of \$ 52.5 USD.

Income Generating Activity (IGA)

The 5 production and sales points, commonly known as "Nobela Centers," have launched into the production of masks for the prevention of the transmission of COVID-19 in Bukavu, and the Kamituga workshops also produce masks for a local organization.

Beneficiaries are very affected by the pandemic which slows down all activities.

Agro-pastoral production

North Axis: Katana - Kalehe

Weeding over an area of 2,500 m2, tutea fixation on the maracujas, coffee harvest, i.e. 430 kg of cherries.

South axis: Ruzizi plain

Treatment or spraying as part of phytosanitary control on the 50 hectare farm for 250 beneficiaries. These are Kamanyola, Katogota, Luvungi and Bwegera sites.

Note that the torrential rains on this axis have caused enormous damage, loss of human life and material goods. Crops have been flooded. This has a negative impact on reintegration activities, especially with the cut in the road that links the Ruzizi and Uvira health zones.

Kaziba axis:

April was devoted to bean sowing, transplanting and distribution of plum, cabbage and onion plants to beneficiaries. The weeding continued with spraying as part of the phytosanitary control for the different plants on 4 ares in the school field and in the fields of the beneficiaries. 600 cabbage plants and 150 plum plants were distributed to 6 beneficiaries.

Child protection

Child protection activities continue, but in a specific way. The children at Maison Dorcas are confined to the center and access the places prepared for them for therapeutic games.

For more informations about

PANZI NEWS

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