

Annex D1

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Annex D.1 Descriptive Overview of Institutions and Services in Ituri

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MEDICAL SERVICES

Generally speaking in the DRC, access to health care still continues to be problematic, despite the fact that the armed conflicts have ceased in most regions.

In Ituri, most medical facilities are subject to management by church or private management even though the medical sector is supervised by the Government via the *Inspection Provinciale de la Santé* [Provincial Health Inspectorate]. Given the State's minor presence in the medical sector, specialist medical services require a long journey from the local area to the different centres where hospitals providing specialist medical services are based. Moreover, for other types of specialist medical intervention, such as fistula repair, or orthopaedic surgery and devices for lower limbs, patients must be referred to Bunia or the neighbouring provinces of North Kivu (Butembo, Goma), Tshopo (Kisangani) and South Kivu (Bukavu).

Some of the major hospitals in the province of Ituri are listed below:

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|-----------------------------|---------------------|
| - Bunia General Hospital | - Mambasa Hospital |
| - Mungwalu General Hospital | - Aru Hospital |
| - Bambu General Hospital | - Rwampara Hospital |
| - Drodoro General Hospital | - Rethy Hospital |
| - Fataki General Hospital | - Nyakunde Hospital |
| - Mahagi General Hospital | - Nizi Hospital |
| - Tchomia General Hospital | - LITA Hospital |
| - Rwankole Hospital | |

In addition to these hospitals, there are also private hospitals and clinics in Bunia, such as:

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|--------------------|---|
| - Salama Clinic | - Shalom Clinic |
| - Bomoi Clinic | - Other health centres for general medicine |
| - Bénédicté Clinic | |
| - Pabenda Clinic, | |

In general, all simple medical treatments can be handled locally.

- Medical evaluation by an expert doctor to identify the victims and physical harm. Local skills are available to support medical evaluations aimed at identifying victims who are living with physical trauma and require medical treatment. [REDACTED]
[REDACTED]
[REDACTED]
- Treatments for sexually transmitted infections (Orchitis, syphilis, gonorrhoea, etc.) and psycho-medical treatment of victims infected with HIV-AIDS can be provided by all local hospitals. Other treatments for bone and bone marrow infections (osteomyelitis), sight disorders (ophthalmology);
- [REDACTED] is unique in Ituri and treats problems requiring physiotherapy (kinesiotherapy, dressings, retractable scars, etc.);
- Simple surgical procedures to extract bullets within the body can be performed locally unless the bullet is lodged in sensitive areas such as the lungs;
- Surgery to repair fistula/prolapse can be carried out in certain hospitals in Bunia such as Rwankole, Bunia General Hospital, or in Drodo Hospital.

Appropriate medical services can be obtained only in major centres where hospitals with doctors can also be found. Although this is local treatment, the victim and his/her caregiver may have to travel over 100 kilometres to receive medical treatment.

With regard to specialist medical services, it is rare to find appropriate care available locally, except for certain services which are available at the Nyakunde village hospital. Orthopaedic surgical procedures and Maxillo-facial plastic surgery must be referred either to Goma (Heal Africa) or Uganda (Mulago Hospital). The workshops for orthopaedic devices at local hospitals have been destroyed and require restoration. Orthopaedic devices for the lower limbs can be provided at the Heri Kwetu centre in Bukavu and the Ushirika centre in Goma.

The organisations with the most experience of referring victims are:

[REDACTED]

PHSYCHOLOGICAL SERVICES

Young people who were used in the militias are demonstrating serious mental disorders and are often left to fend for themselves despite occasional psycho-medical interventions by certain charitable organisations. The tendency towards isolation forces the young child soldiers to migrate towards mining careers, and delinquency with excessive drug consumption and abusive use of alcohol. This exacerbates their vulnerable situations and, above all, their stigmatisation in their communities. Although the Government has drawn up a national psychological care plan, its full implementation remains hypothetical until the Government develops sustainable means for implementation.

Development NGOs and various medical organisations are working together to try and respond, by means of simple counselling, to certain presented mental health cases in the absence of private or state-run specialist psychiatry facilities.

It is rare for former child soldiers to approach medical personnel regarding a psychological problem. In case this happens, doctors and other healthcare personnel may not have received the appropriate training to respond to the fairly specific psychological problems of these young people. The frequently observed psychological disorders are: convulsive attacks/epilepsy, mental slowness/intellectual disability, alcoholism and disorders linked to drug abuse, psychotic disorders and severe emotional disorders or other somatic disorders with no medical explanation.

Throughout the entire province of Ituri, there are no hospitals, or private or state-run psychiatric centres, to which the psychological disorders observed in these young persons can be referred for treatment.

Nevertheless, there are psychosocial workers and community leaders linked to development organisations who have benefited from skills and capacity building provided by means of occasional training and who are familiar with the basic concepts of psychological care. Development organisations which directly or indirectly obtain primary psychological services are mostly based in Bunia. These include, by way of example, [REDACTED]
[REDACTED]
[REDACTED] has trained several psychologists in the area who can be available although the majority are linked to the NGO project.

VOCATIONAL TRAINING AND ECONOMIC ACTIVITIES

Most of the young people from armed groups who are potentially eligible for reparations in *Lubanga* have lost the opportunities for normal education and employment in the formal sector. As employment in the formal sector is very limited or non-existent, the best option for a professional occupation lies in entrepreneurship or self-employment.

There is, potentially, a range of opportunities for offers of services in various fields such as in construction, fitting among others. Currently, many entrepreneurs use foreign labour, exclusively, Ugandan for certain trades owing to a shortage of local skills.

The shortage of skills may be due to factors such as the non-existence of public or private training centres, and those which do exist do not adapt their service to the requirements of the local market. Of the existing training centres, the National Vocational Preparedness Institute (*Institut National de Préparation Professionnel, INPP*) is the only State institution that offers a limited number of professional training programmes such as simple cutting and sewing, carpentry, automobile mechanic, automobile driving, computers and office equipment, internet maintenance and networks, etc.

The INPP training centre is an institution which provides training in office and information technology skills. There are other private centres which provide short training courses in information technology and office skills, and apprenticeships. However, such centres can be found only in large cities.

The areas of individual training that are best adapted to Ituri on the basis of current markets are the following:

- Cutting and sewing with the option of embroidery and knitting;
- Introduction to welding and metal forging;
- Joinery with the option of furniture upholstery and carpentry;
- Automobile mechanic with the option of automobile electrics, automobile driving;
- Mixed beauty salon;
- Masonry: construction and painting;
- Plumbing and hydraulics;
- Small trade/ culinary art and restaurant running;
- Milling: grain mill;
- Information technology and secretarial.

Certain overarching areas of apprenticeship may require a collective orientation that includes several activities in order to contemplate success. This includes:

- Agriculture, where developing an inputs store constitutes much more of a major problem than access to quality inputs in terms of improving agricultural revenues;
- The transformation of agricultural products, which remains a problem in certain rural areas in terms of creating added value to agricultural products;
- Rearing small livestock and veterinary pharmacy to guarantee the supply of essential veterinary products to improve animal production;
- Cooperatives/savings and credit schemes.

Vocational apprenticeships remain a sector that is dominated by informal initiatives. Apart from the INPP, all other organisations providing vocational training are informal and exclusively ‘on the job’ and others are in the form of apprenticeship training.

In the field of cutting and sewing, there are plenty of cutting and sewing workshops but embroidery and embroidery techniques are rare or even non-existent. This training requires the learners to be equipped with the own training tools. Certain NGOs have vocational trainers or coaches with proven experience in the field of cutting and sewing but which is limited to simple techniques. Such is the case for [REDACTED] which has a training centre for cutting and sewing in Bunia, which is run by two trainers. At other sites, there are cutting and sewing workshops but with limited expertise and low innovation.

In the introduction to welding sector, the high demand for metal doors, gates, and windows, is more apparent in Bunia than in other localities. The sector is maintained by private Ugandan initiatives (deemed to be more experienced) or Congolese workshops ([REDACTED] and others.) which are introducing on-the-job apprenticeships in the form of “Learning by doing”. Those wishing to be trained in this sector need to be based in the major centres such as the city of Bunia. In other centres such as the cities of Mahagi, Tchomia, Kasenyi, Mungwalu, Aru, Ariwara, Kpandroma, Komanda, Mambasa, and others the services exist but the city of Bunia is brimming with the greatest expertise in welding training.

Timber handling is one of the oldest and most developed sectors in the province of Ituri and, in particular, in the city of Bunia. There are several workshops for handling timber and producing furniture that are capable of providing joinery training. In the city of Bunia, the most renowned remain the modern joinery of [REDACTED] Other training programmes are carried out on the job by joinery or carpentry coaches, who are most commonly the owners of joinery workshops. Furniture upholstery remains an under-

mastered skill, even though there are some joiners who try. To obtain good upholstery training, it is necessary to approach trainers in other provinces (Kisangani, Beni, Goma) or Kampala (Uganda).

Training to become an automobile mechanic takes place in the automobile garages of Bunia in the form of vocational training. The possible training options remain tyre repair, vehicle repair, car electrics, engine repair, and car driving. Except for the INPP-Bunia garage, most of the training garages are private and dotted around the large cities such as Bunia, Mungwalu, and Mahagi.

Training in men's or women's hairdressing is also conducted on the job, in the form of vocational training courses in the hairdressing salons that can be found in the large cities. Nevertheless, in terms of customer demand, there may be new hairdressing skills which may call for external expertise, from neighbouring towns (Kampala, Kisangani, and Goma).

There is an ever growing demand for skills in the construction of dwelling houses. Owing to a lack of apprenticeship schemes covering skills in masonry, painting, plumbing, and hydraulics corresponding to constructor demand, there is an obvious need for external labour from Uganda and neighbouring provinces. For finishing works, plumbing or painting, the constructors are using Ugandan labour while Congolese young people are unemployed owing to a lack of vocational apprenticeship schemes that are suited to demand and current requirements. Training of young people in joinery, plumbing or painting is also carried out on the job, according to the principle of "*Learning by doing*". Ad hoc training can be organised privately on the basis of a specific request from a company or NGO, according to its demands and requirements, in favour of its employees or beneficiaries.

To guarantee regular income in households, many potentially eligible victims suggest diversifying sources of income by developing small businesses. Training in running a small business remains underdeveloped, especially when dealing with people who are insufficiently literate. Their development and success depends on the environment of the victim and their personal abilities. Guidance and advice on developing a small business will largely depend on the results of a market analysis, which are not usually available from State institutions. In the small business sector, girl mothers are suggesting culinary art and gastronomy which enable them to set up restaurants.

With income diversification ever in mind, mention has been made potentially eligible victims of purchasing a mill and its accessories to enable grinding grains and cassava pods. In certain areas where access to these types of services is rare, this would seem to be an appropriate

income generating activity but one which requires additional training in management and maintenance skills provided by specialist mechanics, a type of expertise which is generally available locally.

Training in one of the above-mentioned business sectors enables beneficiaries to develop entrepreneurship and skills to respond to supply and demand according to local requirements. Once trained, they can sell their services and goods but savings and loans schemes are non-existent and are not well organised even where they do exist. The development of savings and loans initiatives is one way to enable young entrepreneurs to make investments and benefit from loans in return. The development of village-based savings and loans associations or mutual solidarity funds (*Mutuelles de solidarité, MUSOs*) is one of the options which can enable savings and provide access to micro loans and, above all, to seal social reintegration and alleviate stigmatisation.

Most Iturian households based in rural areas live exclusively off farming and animal rearing. Improving income from farming and animal rearing means improving agricultural production and management systems. Developing the capabilities of farmers to integrate new farming or animal rearing techniques falls within the prerogative of the Agriculture, Fishing and Animal Rearing Inspectorate (*Inspection de l'Agriculture, Pêche et Elevage*). However, owing to this state body's lack of resources, the organisations which are involved in food safety, sometimes in collaboration with the FAO, are strengthening the productive and organisational capacities of agricultural producers and animal-rearers. Examples include the [REDACTED]. To guarantee an improvement in agricultural revenues, it is imperative to consider the supply of agricultural inputs and veterinary products which remain problematic. The integration of input stores and veterinary pharmacies which are meant to be collective activities, are an important option in addition to training to build capabilities in agricultural and animal-rearing techniques and innovations.