



DRC - Researched and compiled by the Refugee Documentation Centre of Ireland on 5 and 6 October 2010

Treatment of those with HIV/AIDS including stigma, discrimination, availability and cost of medication

A publication by the *United States Agency for International Development* in September 2010 states:

“It is estimated 70 percent of the population has little or no access to health care, including HIV/AIDS services.” (United States Agency for International Development (September 2010) *Democratic Republic of the Congo, HIV/AIDS Health Profile*, p.1)

In May 2010 a report by *Medecins Sans Frontiers* states:

“In the Democratic Republic of Congo (DRC) 283,055 people are estimated to be in need of ART (as per the old WHO initiation criteria), but by the end of 2009, only 34,967 were reportedly on treatment - roughly 12% of the need.” (Medecins Sans Frontiers (May 2010) *No time to quit: HIV/AIDS treatment gap widening in Africa*, p.24)

A report issued by *Freedom House* in April 2010 states:

“In addition to physical and emotional trauma, victims of sexual violence often contract diseases including HIV and are rejected by family members and the local community.” (Freedom House (7 April 2010) *Countries at the Crossroads 2010 - Democratic Republic of the Congo*)

In April 2010 a report by *IRIN News* states:

“With large donor projects winding up and little bilateral support for HIV programmes in the Democratic Republic of Congo (DRC), the country is facing the possibility of ARV shortages and rising HIV mortality, say aid workers.” (IRIN News (7 April 2010) *DRC: Funding crunch threatens ARV rollout*)

This document also notes:

“Only 10 percent of people – 35,000 people – in the DRC who need ARVs have access to them, Corinne Benazech, coordinator of the HIV/AIDS project for the medical charity, Médecins Sans Frontières, told IRIN/PlusNews. ‘The main reason for the low numbers on treatment is lack of funding,’ she noted.” (ibid)

In a publication released in March 2010 the *United States Department of State* reviewing events of 2009 notes that:

“There were no reports of societal violence or discrimination based on HIV/AIDS status. In July 2008 President Kabila promulgated a new law passed by parliament that prohibits discrimination against persons with HIV/AIDS.” (United States Department of State (11 March 2010) *2009 Country Reports on Human Rights*)

Practices – Democratic Republic of Congo, Section 6 'Discrimination, Societal Abuses, and Trafficking in Persons /Other Societal Violence or Discrimination')

In November 2009 a report published by the *United Nations Programme on HIV/AIDS* states:

“A 2007 household survey found that HIV prevalence in the Democratic Republic of the Congo (1.3%) remains significantly lower than in several other neighbouring countries...” (United Nations Programme on HIV/AIDS (November 2009) *AIDS epidemic update*, p.29)

A paper released by the *International Organisation for Migration* in November 2009 states:

“HIV/AIDS has become a daily reality for everybody in the DRC. However, due to the traditionalist habits of society, discussion of the disease remains taboo.” (International Organisation for Migration (17 November 2009) *Returning to the Democratic Republic of Congo*, p.7)

This document also notes:

“The rate of HIV/AIDS in the DRC is increasing.” (*Ibid*, p.7)

It is also stated in this document that:

“An HIV blood test can be obtained at a low cost or free of charge since many medical institutions are sponsored by the AIDS National Programme and receive help from international aid. There are many hospitals and medical centres in the country where an HIV test can be carried out.” (*Ibid*, p.7).

This report also states:

“The follow-up to HIV/AIDS treatment can be divided into different types. A medical followup is carried out in 20% of all cases in the country and 80% of cases in Kinshasa. Treatment against opportunistic infections and anti-retroviral treatment may be available. Both are free of charge. The patient can also be treated with a prophylaxis, using Cotrimoxazol. This treatment can be initiated before the Anti-retroviral treatment is started, or be used as a complementary treatment during the anti-retroviral treatment.” (*Ibid*, p.8)

This report also notes:

“HIV/AIDS treatment is also generally available outside Kinshasa, including the provision of anti-retroviral medications. The treatment is free. However, some patients do pay for treatment when they can afford it. Often, they do so to avoid hospitals using free medicines.” (*Ibid*, p.8)

In July 2009 a publication by the *United Nations Programme on HIV/AIDS* states:

“DRC is experiencing a generalised HIV epidemic” (United Nations Programme on HIV/AIDS (July 2009) *Second Independent Evaluation 2002-2008, Country Visit to Democratic Republic of Congo, Summary Report*, p.2)

In June 2009 the *Country of Return Information Project* states:

“As far as AIDS/HIV is concerned, patients are effectively followed. But the lack of antiretroviral therapies is a major problem.” (Country of Return Information Project (June 2009) *Country Sheet Democratic Republic Of Congo (DRC)*, p.62)

References

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This response was prepared after researching publicly accessible information currently available to the Refugee Documentation Centre within time constraints. This response is not and does not purport to be conclusive as to the merit of any particular claim to refugee status or asylum. Please read in full all documents referred to.

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