Memisa’s flexible approach to a changing context in Ituri (DRC, 2002 – 2012)

Health System strengthening and conflict transformation in fragile states

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Context

- DRC has important governance and security issues since its independence
- Armed conflict in East Congo 1999 – 2006
- Important population displacements
- Multiple international interventions, often chaotic
Memisa’s interventions

- Emergency interventions when the conflict was most heavy (2003 – 2006)
- Structural interventions to keep facilities functioning
- Re-integration of ex-militia
- Rehabilitation and reconstruction of health facilities
Logic of interventions:

- **Sustainability** thinking despite the conflict
- Assure **continuity** of existing health facilities
- Right to healthcare as a key-principle
- Opportunity of strategic **partnerships & inter-sector collaboration**
- Engaging the population and local actors in activities and decision making (health committees, community participation)
Conceptual framework

Wim Van Damme et al. “Primary Health Care vs. emergency medical assistance: a conceptual framework”
Conceptual framework

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Conceptual framework: approaches

Wim Van Damme et al. “Primary Health Care vs. emergency medical assistance: a conceptual framework”
Conclusion

- Not emergency Aid OR Structural Aid but **how to get the most out of the “structural potential” of any situation**
- Keeping health facilities open generates **hope, trust and a dynamic of reconstruction**

- The certainty of access to medical care contributes to the feeling of **social and personal security** (directly influencing conflict transformation)
- **Impact?** → qualitative data more than quantitative; how to bring evidence into practice!
References
