



Dynamique des Jeunes Leaders pour la Paix et le Respect des Droits Humains

DYJEPREDHU asbl

Dynamics of Young Leaders for Peace and Respect for Humans Rights

CHANGEMENT | **TRANS**FORMATION | **IMPACT**

Thwart Ebola: DRC University Prevention

Junes 2026

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PROJECT TECHNICAL PROPOSALS

I. Project Summary

1. Title of the project: Thwart Ebola: DRC University Prevention

2. Contact details:

- Name of the organization: Dynamic of Young Leaders for Peace and Respect for Human Rights, “DYJEPREDHU asbl” in acronym

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Mr. RIZIKI BARAKA Isaac (Financial Administrator)

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3. Organization Mission Statement

Our Mission

"To advance regional health security and academic excellence in the eastern Democratic Republic of the Congo by training socially responsible medical professionals, producing impactful local scientific research, and pioneering trusted, community-led interventions to eliminate deadly viral outbreaks."

Project Beneficiaries

Given the hyper-local nature of the \$500 micro-budget allocation, the project targets a highly concentrated, high-risk area (such as a single informal Internally Displaced Persons (IDP) camp or a high-density community university) in an epidemic hotspot like throughout the country.

The target population is split into two distinct categories:

Project Beneficiaries

The project directly and indirectly protects vulnerable populations in the Ebola throughout the country of the Democratic Republic of the Congo.

Total cost of the project: US \$ 50,000

- **Bank account: Dynamique des Jeunes Leaders pour la Paix et le Respect des Droits Humains, DYJEPREDHU asbl**

Goma Agency -DRC

No. 1272-28000-23526760001-87

Following code: TRMSCD3L

Context and Justification of the Project

The project responds to a critical health emergency in the Democratic Republic of the Congo (DRC), specifically in the eastern provinces of Ituri, North Kivu and South Kivu throughout the country. These regions face regular resurgences of highly contagious viruses, such as **Ebola** (often complicated by strains lacking mass-approved vaccines) and, more recently, the surge.

We are leading a university-based community prevention campaign to contain the Ebola Bundibugyo epidemic throughout the country. To overcome public mistrust, these students are acting as trust-builders.

They are simplifying complex medical concepts by translating them into simple instructions, promoting handwashing, strict adherence to hygiene measures, and safe burial practices. This field-based approach adapts proven models to directly break the chains of transmission.

The justification for this initiative is based on three major factors:

1. Public Mistrust and Community Resistance

Sanitary interventions led exclusively by international or external national actors frequently face **deep-rooted community mistrust**. This cultural and political resistance leads residents to hide sick patients, reject response teams, and continue high-risk traditional burial practices. The failure of top-down approaches proves that an outbreak response cannot succeed without local ownership.

2. The Strategic Position

Located in DRC is deeply rooted in these vulnerable zones. Its medical and health sciences students offer a dual advantage:

- **Cultural Legitimacy:** As locals, they speak the native languages and understand regional customs, immediately breaking down barriers of mistrust.

- **Technical Expertise:** They possess the scientific knowledge required to simplify transmission facts and prevention measures without losing medical accuracy.

3. The Vital Need for Behavioral Prevention

When dealing with complex viral strains where medical tools like vaccines are limited or slow to deploy, **behavioral prevention remains the only definitive weapon.** Upgrading public hygiene, securing frontline community health posts, and tracking symptoms early are the only ways to break active transmission chains.

Project Objectives

General Objective

To interrupt the transmission chains of Ebola and contagious viruses in the eastern DRC by mobilizing local medical students to restore community trust and enforce strict sanitation protocols.

Specific Objectives

- **SO 1: Raise Community Awareness**
Deploy student-led teams to educate 10,000 households on virus transmission, symptoms, and prevention by month three.
- **SO 2: Dismantle Misinformation**
Conduct weekly radio broadcasts and town hall meetings to counter rumors and rebuild trust in medical interventions.
- **SO 3: Install Hygiene Infrastructure**
Set up and maintain 50 public handwashing stations in high-traffic hubs like markets, churches, and university campuses.
- **SO 4: Train Frontline Community Leaders**

Train 100 local leaders and religious figures in safe burial protocols and early detection reporting within the target zones.

Project Mission & Core Values

Project Mission

To safeguard vulnerable communities in the eastern DRC against deadly viral outbreaks by empowering local medical students as trusted health leaders. Through culturally respectful education, behavioral change, and grassroots sanitation, the project aims to replace public mistrust with life-saving health actions.

Core Values

- **Community-Led Ownership:** We believe the most effective epidemic response comes from within the community, utilizing local youth as the primary drivers of change.
- **Scientific Excellence & Accessibility:** We bridge the gap between academic medical knowledge and grassroots execution, translating complex science into simple, actionable safety rules.
- **Cultural Empathy & Respect:** We combat public resistance not through force, but by listening to local concerns and honoring traditional structures through safe adaptations.
- **Accountability & Integrity:** We commit to transparent field operations, ensuring health resources and sanitation infrastructure directly serve the populations most at risk.

Project Activity Timeline

This **6-month operational plan** outlines the implementation of the university-led prevention project:

Phase & Timeline	Key Activities	Expected Deliverables
Phase 1: Preparation <i>(Month 1)</i>	<ul style="list-style-type: none"> • Recruitment and training of 100 at the community of university. • Procurement of hygiene kits, megaphones, and radio slots. • Courtesy visits to local leaders and health authorities. 	<ul style="list-style-type: none"> • 100 students certified in epidemic risk communication. • All prevention equipment purchased. • Administrative approvals secured.
Phase 2: Deployment <i>(Months 2 - 3)</i>	<ul style="list-style-type: none"> • Launch of door-to-door household awareness campaigns. • Installation of 50 handwashing stations in public hubs. • Commencement of weekly interactive radio shows. 	<ul style="list-style-type: none"> • 5,000 households reached. • 50 functional hygiene stations installed. • 8 radio broadcasts aired.
Phase 3: Scaling <i>(Months 4 - 5)</i>	<ul style="list-style-type: none"> • Workshops for 100 religious and traditional leaders. • Continuous monitoring and refilling of hygiene stations. • Community town hall meetings to debunk rumors. 	<ul style="list-style-type: none"> • 100 local leaders trained on safe burials. • 100% operational uptime for hygiene hubs. • 10 public town halls completed.
Phase 4: Evaluation <i>(Month 6)</i>	<ul style="list-style-type: none"> • Post-intervention household survey and data collection. • Multi-stakeholder project review meeting at the community of university. • Compilation and submission of the final donor report. 	<ul style="list-style-type: none"> • Final impact evaluation report. • 10,000+ total households surveyed. • Project closure and asset handover.

Budget Summary

Category	Budget Allocation (USD)	Percentage (%)
Infection Prevention & Control	\$17,500	35.0%
Student Personnel & Field Ops	\$15,000	30.0%
Risk Communication & RCCE	\$8,500	17.0%
Logistics, Transit & Security	\$6,500	13.0%
Administration & Contingency	\$2,500	5.0%
Grand Total	\$50,000	100%

Done in Goma, Junes 03, 2026

For DYJEPREDHU asbl


Christian AHADI BEN MASONGA
EXECUTIF DIRECTOR, HUMAIN RIGHTS ACTIVISTI

