ROTARY FAMILY HEALTH DAYS (RFHD)

2024 Program Report

Democratic Republic of Congo

2024 October 25th -27th

Rotary Family Health Days

Rotary rfha

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Rotary Family Health Days

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Rotary Action Group for Family Health & AIDS Prevention, Inc.

A. Highlights

Organization of the first edition of RFHD in the DRC in 8 sites of the city of Kinshasa, including 5 located in the periphery in hard-to-reach areas.
Achievement of 57% of the pursued objective (s) for a first edition.
Considerable involvement of Rotarians and Rotaractors from the city of Kinshasa.
Involvement of health authorities from the city of Kinshasa, including the provincial Minister of Health , the head of the provincial health division, various programs of the national Ministry of Health , and the 8 health zones hosting the 8 RFHD sites.

More than **6,000** people visited the different sites.

A total of **16,946** healthcare services provided to the population, including:

- **115 HIV screening tests**
- **373 malnutrition screenings**
- **3,455 malaria screenings and treatments**
- **2,571 blood pressure checks**
- **391 tuberculosis screenings**
- **1,514 diabetes screenings**
- **772 eye health screenings**
- **192 family planning consultations**
- **17 polio vaccinations**
- **540 male condoms distributed**
- **30 female condoms distributed**

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B. Acronyms

CDC	Centers for Disease Control and Prevention
DPS	Provincial Health Division
PEV	Expanded Program of Vaccination
PNLT	National Tuberculosis Control Program
PNLP	National Malaria Control Program
HIV	Human Immunodeficiency Virus
M&E	Monitoring and Evaluation
STIs	Sexually Transmitted Infections
TB	Tuberculosis
USAID	United States Agency for International Development
WHO	World Health Organization
RECO	Community Health Workers
SANRU	Health for All in Rural Areas
RAC	Rotaract Club
RC	Rotary Club
RFHA	Rotarians for Family Health and AIDS Prevention
RFHD	Rotary Family Health Days
AIDS	acquired immunodeficiency syndrome
UG-PDSS	Program Development and Health Services Management Unit
UNICEF	United Nations Children's Fund
UNFPA	United Nations Population Fund
ZS	Health Zone

C. Summary

The Rotary Family Health Days (RFHD) in October 2024 marked the first edition organized in the Democratic Republic of Congo (DRC). This inaugural event was made possible through financial support from the Bill and Melinda Gates Foundation and contributions from several locally mobilized partners. The program took place in the four administrative districts of Kinshasa: Tshangu, Funa, Mont Amba, and Lukunga. Two sites were established in each of these districts.

Historical Context

Following RFHA Inc.'s decision to extend the program to the DRC, Rotary and Rotaract clubs in Kinshasa mobilized to organize the RFHD from October 25th to 27th, 2024. This initiative aimed to gain experience to share with clubs in other provinces, with the goal of covering the entire country.

The health authorities were involved through introductory meetings, information sessions, and workshops for reflection and planning. The program was readily embraced by administrative and health authorities in Kinshasa due to the Rotary's positive reputation and its prior contributions to public health, including efforts against polio through its collaboration with national expanded vaccination program.

The first edition delivered promising results relative to its objectives and underscored significant public health needs, particularly for conditions affecting the elderly, such as eye diseases, diabetes, and hypertension, alongside childhood illnesses like malaria.

The October 2024 program was financed by the Bill and Melinda Gates Foundation. Additional support came from locally mobilized entities, including UNFPA, SANRU, the Diocesan Office of Medical Works (BDOM) in Kinshasa's Archdiocese, the Program Development and Health Services Management Unit (UG-PDSS), the provincial coordination team of the Expanded Program of vaccination (PEV) in Kinshasa, and the National Malaria and Tuberculosis Control Programs. The Centers for Disease Control and Prevention (CDC) encouraged its implementing partners to collaborate with RFHA/DRC at RFHD sites.

Human resource support for patient care and site security was provided by the health and administrative authorities of Kinshasa. RFHA Africa provided substantial assistance to RFHA/DRC in preparing for the successful organization of this first RFHD edition in the DRC.

D. Context

Rotary Action Group for Family Health and AIDS Prevention Inc. (RFHA)

The Rotary Action Group for Family Health and AIDS Prevention (RFHA) is a global Rotary Action Group and a mobilizing partner of Rotary International. RFHA develops concepts, secures resources, and manages global disease prevention and treatment programs implemented by Rotary, such as the Rotary Family Health Days (RFHD). RFHA's vision is to save and improve the lives of children and families who lack access to preventive healthcare and education. RFHA's strategic mission is to facilitate expanded access to quality, community based healthcare services, including the prevention and treatment of HIV/AIDS.

RFHA's role in the RFHD program is to act as a pivotal organization in initiating the program, securing the commitment of partner organizations and funding sources, and coordinating efforts with all implementing partners before and during the three-day event. RFHA also provides mechanisms, tools, platforms, and training to assist Rotarians and Rotaractors in deploying RFHD activities. Additionally, RFHA develops a comprehensive media and communication strategy implemented by a dedicated media team.

Impact:

Strengthening health care delivery systems worldwide.

Rotary Family Health Days (RFHD): A Public-Private Partnership

Historical Background

The Rotary Family Health Days (RFHD) program is the flagship initiative of the Rotarians for Family Health and AIDS Prevention (RFHA). It is a unique public-private partnership program that has been in existence for 13 years. This annual three-day event provides holistic, comprehensive, and preventive health screenings for both communicable and non-communicable diseases. It leverages and inspires a massive force of Rotarians, Rotaractors, and motivated partners with a humanitarian focus. Through this program, thousands of people in underserved communities across East Africa, Southern Africa, West Africa, Central Africa, and India are served.

The services offered include free lifelong vaccinations for children, such as polio and measles vaccines, as well as annual screenings, counseling, testing, and referrals for diseases like HIV/AIDS, tuberculosis, diabetes, hypertension, malaria, and certain cancers. Other services include deworming, vitamin A supplementation, and eye and dental exams. In nearly all centers, health education, counseling, and referrals for follow-up care are also provided. In addition, beneficiaries receive insecticide-treated mosquito nets, male and female condoms, hygiene kits, dental cleaning products, and other essential materials, depending on local needs and availability.

Since the program's inception in 2011, more than 3.0 million health seekers have been served, with over 13 million free health services provided.

In the Democratic Republic of Congo (DRC), the RFHD program is led by Rotary in collaboration with valuable partners such as the Ministry of Public Health, United Nations agencies, international and local NGOs, media partners, and others.

Rotary Action Group for Family Health and AIDS Prevention (RFHA) - A Rotary International Action Group

Main Funders

Rotary Action Group for Family Health and Aids Prevention (RFHA) - une Amicale d'action du Rotary International

Bill and Melinda Gates Foundation

Ministry of Health and its various programs

Provincial Health Division (DPS), along with its health zones and general reference hospitals

United Nations Population Fund (UNFPA)

The Catholic Church through its Office of Medical Development Works (BDOM) in Kinshasa

SANRU ASBL, a local NGO

Centers for Disease Control and Prevention (CDC)

DENK PHARMA

Neuropsychopathological Center/University of Kinshasa

Collaborating Municipalities
Bandalungwa, Kalamu, Kingabwa, Lemba, Limete, Mont Ngafula, Ndjili, and Nsele

Media Support Partner

The newspapers Forum des AS, La Prospérité

The national television networks: B One and Télé 50 broadcast in the Canal+ satellite bouquet

F. Planning and implementation of Rotary days for family health in the city of Kinshasa

1. Date Setting

The dates for the 2024 campaign were initially proposed by the RFHA/DRC committee. The final date setting was made in consultation with the health authorities of the city of Kinshasa, taking into account climatic parameters and the planning of the provincial health division in order to avoid overlaps with already planned health activities, and thus facilitate the involvement of the Ministry of Health services.

It was noted that, for the next editions, the month of October is not suitable for the organization of this activity in the city of Kinshasa due to the raining season and the deterioration of the road network related to it.

2. Site Selection

The sites were chosen following a meeting between the provincial health division of Kinshasa and the RFHA/DRC committee. This consultation with the provincial health division allowed RFHA to align itself with the vision of the Ministry of Public Health in the city by targeting sites with populations that are most in need. Due to budget limitations, only eight sites were selected for this first edition. In order to have an experience covering all the administrative districts of the city at the end of this first experience, two health zones were selected to host one RFHD site each in each administrative district of the city.

The criteria identified for site selection are as follows :

- Underserved zones in health care services
- Alignment with national health objectives

3. Distribution of RFHD Sites

Province	Administrative District	Health Zone	Number of Real Sites
Kinshasa	Tshangu	Ndjili	1
		Nsele	1
	Funa	Bandalungwa	1
		Kalamu 2	1
	Mont Amba	Kingabwa	1
		Lemba	1
	Lukunga	Mont Ngafula 1	1
		Mont Ngafula 2	1
TOTAL	**4**	**8**	**8**

4. Team Training

Training of members of the RFHA/DRC committee by RFHA/Africa experts, organized on 09/02/2024 at the Saint Pierre Claver House in Kinshasa.

Online training was given by an expert from RFHA/Africa on monitoring and evaluation. This training was taken by the person in charge of M&E in the RFHA/DRC committee and other volunteer Rotarians.

All members of the RFHA/DRC coordination committee received training from RFHA/Africa experts on budget management and the justification of expenses.

Data managers and Rotaractors received training on data collection and the use of Kobocollect software, an open-source cloud-based solution used in the humanitarian space for digital data collection. In-depth discussions in the field during the campaign days between the person in charge of monitoring and evaluation of the RFHA/DRC committee and the data managers/Rotaractors made it possible to optimize the use of this software during the campaign days.

Community Relays (RECO)/community health workers were trained on methods of raising awareness among the population and the specificities of the Rotary Days for Family Health.

Doctors and nurses received training on the organization of services on the site and the care of beneficiaries.

security officers were trained on the protection of people and property on the site.

Rotarians responsible for the sites received training on the organization of activities on the site, what is expected of volunteers on the site itself, what the clubs should provide to complement the action of the RFHA/DRC committee, and collaboration with partners in the field.

These training sessions were given by Rotarian members of the RFHA coordination committee and experts from the provincial health division.

G. Engagement with Key Partners and Funders

1. On November 24th, 2023, the General secretary of the National Ministry of Health of the DRC signed a letter of support for the Rotary Days for Family Health program in the DRC. This document paved the way for collaboration between the various services of the Ministry of Health of the DRC and RFHA Inc. for the organization of the days in the country.

2. On April 2nd, 2024, a workshop was organized under the leadership of the General Secretary of Health, with the participation of 8 directors of different specialized programs of the Ministry of Health. This workshop made it possible to inform all participants about this opportunity, to determine together the objectives of the Rotary Days for Family Health in the DRC for the year 2024, and to obtain their full involvement in the success of this initiative, in particular for the mobilization of various financial and implementation partners.

3. On July 12, 2024, an operational planning workshop was held in close collaboration with the Provincial Health Division (DPS) of Kinshasa. The workshop brought together representatives from various specialized programs and eight health zones, with each administrative district of the city represented by two zones. These zones were selected by the DPS due to the significant challenges faced by their populations in accessing healthcare services. This workshop provided an opportunity to assess the specific situation of each represented health zone and to develop an operational action plan for organizing the three-day campaign of free services and care for the benefit of the population. A consolidated operational action plan for the city of Kinshasa was established based on the individual action plans proposed by each of the 8 health zones.

4. In August 2024, a list of potential partners and sponsors was established by the RFH/RDC committee. The latter were officially contacted by mail. Meetings were organized with partners who responded positively to the request of RFHA/RDC, and the types of various support agreed upon by each of them were defined.

5. Meetings were organized with all the Rotary and Rotaract clubs of the city of Kinshasa in person and remotely, before, during and after the campaign for a better organization of this first edition of the Rotary Days for Family Health and HIV/AIDS prevention.

6. To support awareness and greater publicity, leaflets, posters and various communication materials were provided to community relays and managers of the various sites.

7. The press was involved in the coverage of workshops and the campaign launch ceremony.

H. Media Strategy and Plan

We developed a media plan in collaboration with local traditional media, but also with those broadcasting on digital platforms. These partners covered the launch ceremony of our Rotary Days for Family Health and HIV/AIDS prevention, as well as the progress of activities in the field by conducting interviews with medical personnel and beneficiaries.

The launch event took place in the presence of the Provincial Minister of Public Health, the General Manager of RFHA Inc., representatives of RFHA/Africa and our various partners. Media coverage of this event was ensured by two local television channels broadcast on satellite in the Canal+ International bouquet, namely B One and Tele 50, as well as by three major newspapers, one of which is distributed on digital platforms.

Other publicity and awareness-raising activities were organized :

- Awareness campaigns in public places before and during the three days of activities, particularly in the eight targeted Health Zones.
- Press and television interviews before and after the event.
- Distribution of leaflets, posters and banners.
- Notifications and announcements in Rotary newsletters, WhatsApp groups and interventions during Rotarian events such as the installation of the club president club events etc.

I. Monitoring and Evaluation

General Synthesis

Relevant data was collected on the sites by Rotaractors supported by health workers from the intervention Health Zones who had been previously trained. Kobotools software was used for data entry with the support of the M&E officer of the RFHA/DRC committee. The data entered was directly transferred to the server managed by RFHA/Africa. The results of the data analysis are shared in this report, which will be transmitted to all stakeholders. An evaluation meeting was organized on November 14th 2024by the RFHA/DRC committee, during which the strengths and weaknesses were highlighted in order to take them into account for better performance during future campaigns in the country.

2. RFHD DRC Summary

Global View

Sites	**8 sites covered for three days**
Volunteers who participated	**582**
Registration	**4639 registered (but 6012 people received services)**
Consent form	**533 consent forms completed, i.e. 11% of participants**
Interview at the exit	**1186 interviews were carried out at the exit**

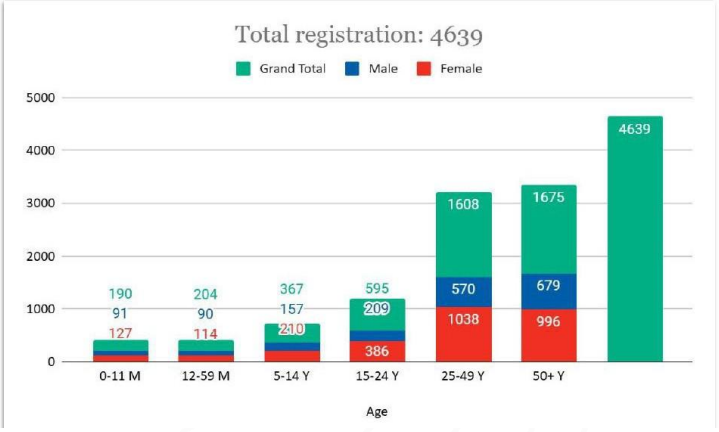
Distribution of Beneficiaries by Age

Sites	Total of registration	Male	Female	Consent form	Total services
8	4639	1796	2843	533	16.946

Analysis:

The objective was to reach 8000 beneficiaries. This was achieved at 57%. As regards the number of people registered, the number of beneficiaries amounts to 6012, which is higher than the total number of 4639 registered people.

The majority of patients were elderly over 50 years of age, or 36% of the total patients.
Individuals received an average of 3.65 services



Distribution by Sex

61% of participants were women and 39% were men.

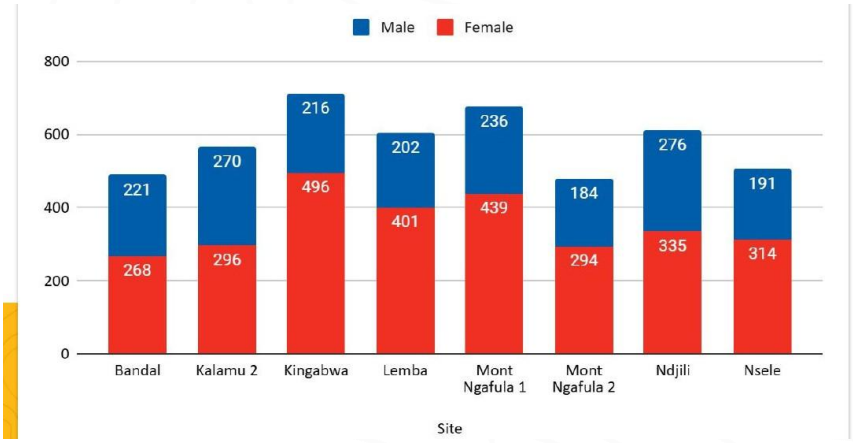
Distribution of Beneficiaries by Site

Analysis:

On average, each site registered 579 participants.

The first day of implementation was marked by some difficulties, which was expected since it was the first time the country implemented RFHD.

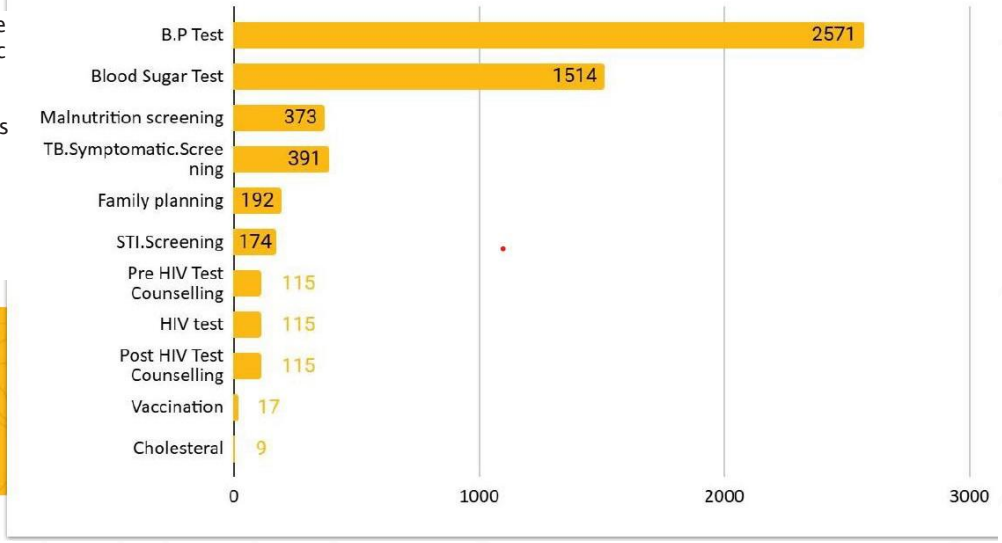
The number of registrations could have been higher if some data had not been omitted.



a) Basic Services Provided by RFHD

Vital signs screening services received the majority of the numbers for is for the basic services provided.

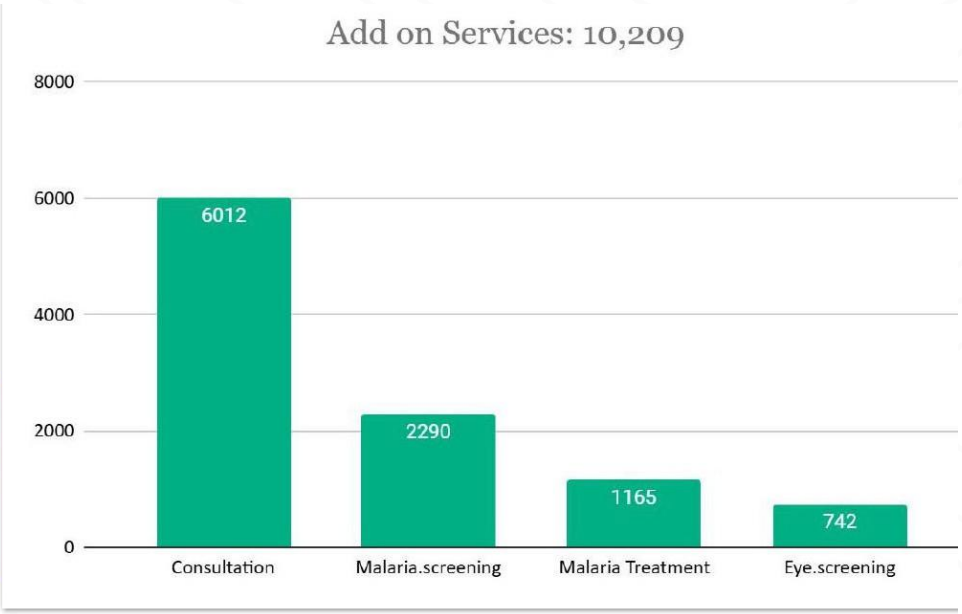
However, registered immunization services do not correspond to the number of registered children aged 0 to 59 years.



Additional Services Provided

Each site had doctors who offered consultation sessions to the participants. In addition, malaria screening and treatment were offered, as well as malaria screening.

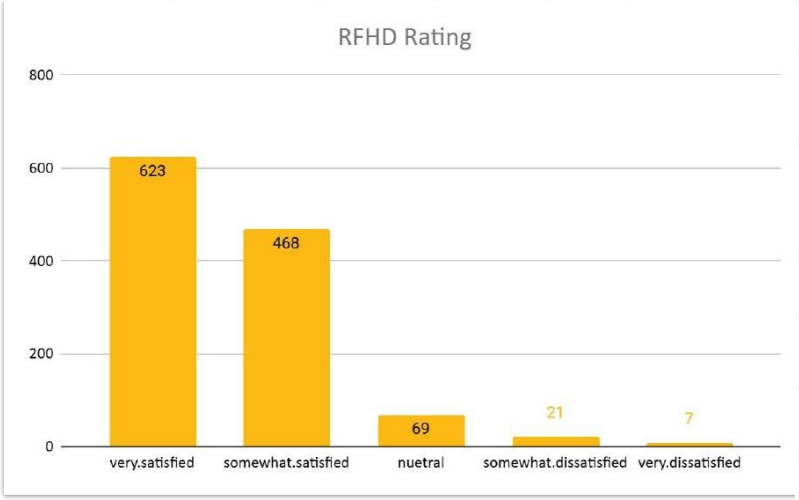
vision disorders.



Beneficiary Satisfaction Score

91% of respondents rated a high score on their experience at the RFHD, which is a positive outcome for the sites.

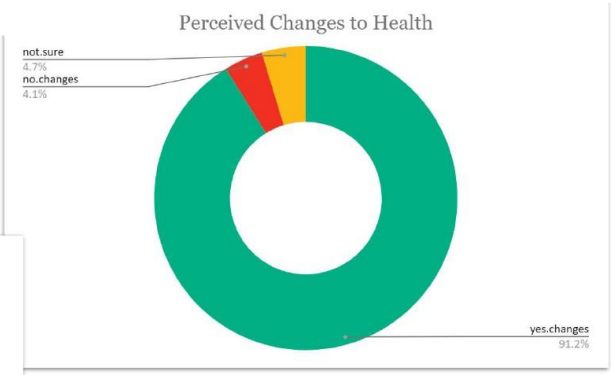
However, attention should be paid to the recommendations made at the end of this report, which addresses the concerns expressed by people who are not satisfied with the services provided.

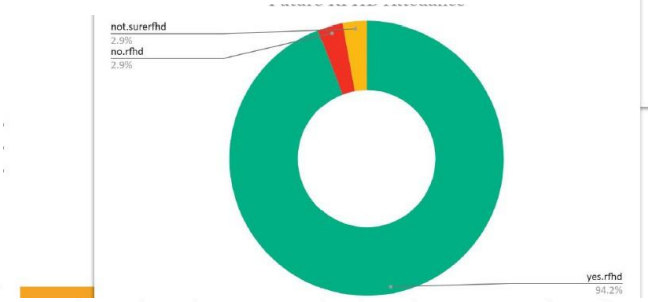


Changes in the health status and future use of the RFHD

91% of respondents believe that their health will improve after participating in the RFHD.

94% of respondents indicated that they would participate in future interventions, which is a positive result of the RFHD.





Safety and gender-based violence (GBV)

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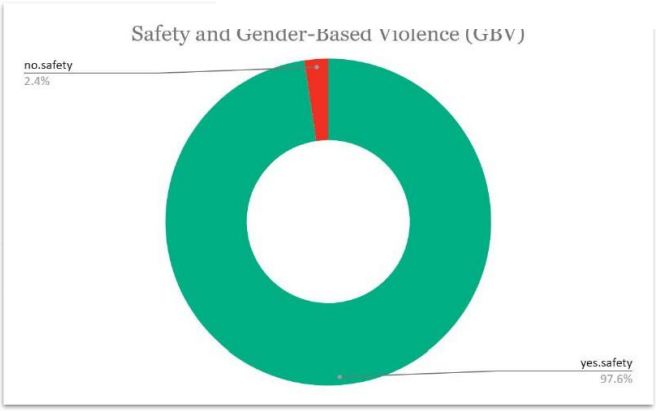
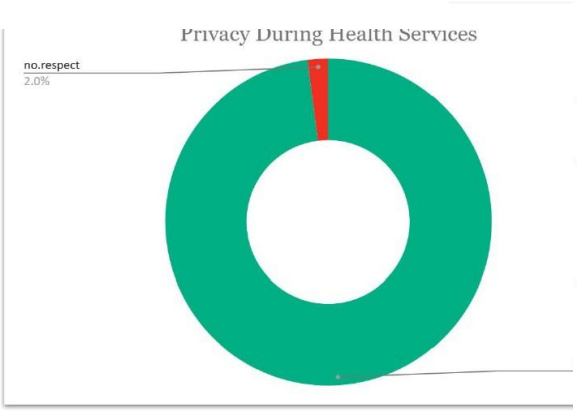
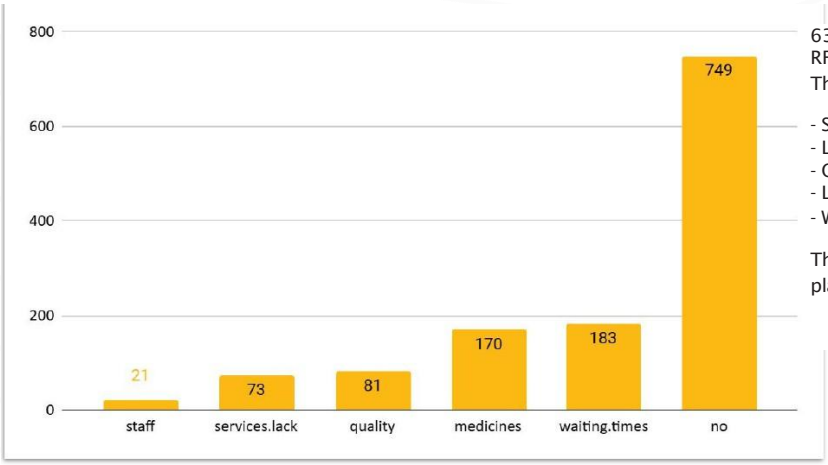




Challenges Encountered



63% of those questioned did not encounter any problems with the RFHD.
The issues identified by the remaining 37% were related to:

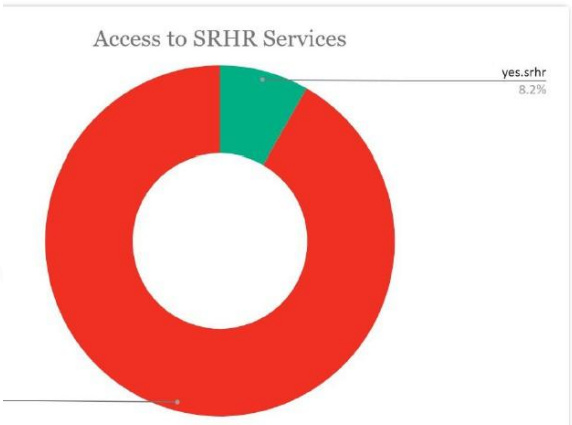
- Staff attitude
- Lack of services
- Quality of services
- Lack of medication
- Waiting time

These elements must be considered when planning for the next intervention.

Results of Interviews with Beneficiaries at the Exit of the Site

· Most respondents did not have access to sexual and reproductive health services.

· Lack of financial resources is the main reason given by respondents for explaining the lack of access to SRHR health services



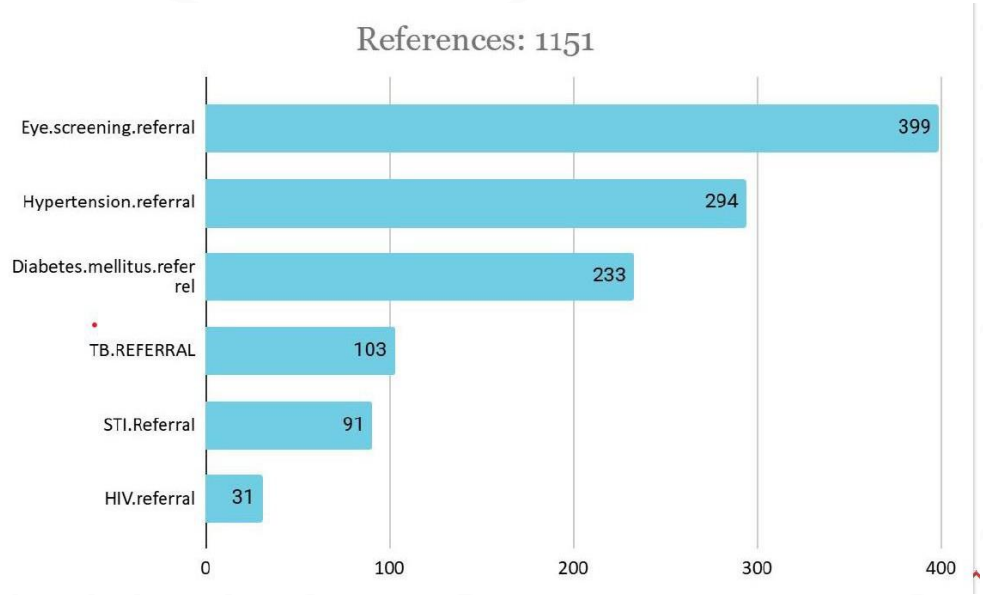
Reasons given for not having access to sexual and reproductive health services:

Financial constraints
Transportation Barriers
Lack of information
Reluctance to commit
No intention to get pregnant and have children

Referral of Patients to Appropriate Services for Continuity of Care

Referrals provide a link to appropriate care services once assessments have been completed.

1151 orientations were proposed to community.



Recommendations Formulated by the Beneficiaries

Participants who made recommendations first praised the efforts of the initiative and appreciated the free services and medicines received. However, they noted the following points that need to be improved to increase the effectiveness and final experience of the community:

Extension of Services

- Increase the types of services to meet the needs of the community
- Provide health products
- Provide adequate medicines at RFHD
- Increase the number of doctors and specialists

Programming of RFHD Events

- Extend the duration of the campaign to ensure that interventions reach the majority of the community.
- Increase awareness
- Extend the frequency of RFHD

Site Management

- Avoid delays in registration
- Provide water for accompanying persons
- Improve logistics on the site
- Provide tents to accommodate patients
- Queue management needs to be improved
- Time management is necessary
- Improve waiting times

J. Challenges and Recommendations

Within the framework of this first edition of the Rotary Days for Family Health, RFHA/ DRC solicited certain NGOs and public institutions. Partner NGOs and public institutions responded positively and were very active in providing advice, screening services, supplies, and materials for the eight targeted sites:

- The National Ministry of Health supported the program through: i) the Expanded Program of vaccination , which provided the necessary supplies for vaccines against polio and other childhood diseases, ii) the National Tuberculosis Control Program, which deployed its mobile laboratory trucks and its staff for tuberculosis screening and initial care, and iii) the National Malaria Control Program, which intervened in the screening and treatment of malaria.

- The Provincial Ministry of Health of the city of Kinshasa provided logistical and personnel support through its provincial health division and its primary healthcare facilities.

- The municipal authorities of Bandalungwa, Kalamu, Lemba, Limete, Mont Ngafula, Ndjili, and Nsele. Their support generally focused on the allocation of sites and the appointment of officers for security.

- The Denk Pharma Company supported the screening for blood pressure.

- The CDC intervened in the screening for HIV/AIDS.

- SANRU ASBL provided supplies for the screening and treatment of malaria.

- UNFPA provided support in supplies related to reproductive health.

- BDOM/Kinshasa intervened logistically with material for diabetes screening and a batch of medicines for the treatment of this disease.

- The Management Unit of the Health Services Development Program (UG-PDSS) supported the campaign with medical equipment.

- The University of Kinshasa, through its faculty of medicine, provided six volunteer doctors.

- For monitoring and evaluation, the support of RFHA Inc. should be mentioned. The team participated in the design of the training tools and in data entry.

- Former governors of Rotary International District 9150 provided generous support to RFHD and were present on the ground to encourage Rotarians and Rotaractors.

1. Challenges

- The total funding mobilized for this RFHA/DRC 2024 program was significantly lower than the basic needs for three days of planned activities at eight sites, and some logistical support from certain partners arrived late. This situation significantly put all key actors and some members of the beneficiary communities on edge. Nevertheless, thanks to the willingness and commitment of Rotarians, Rotaractors, and healthcare staff, the situation was managed appropriately until the last day by adjusting the initial planning on a case-by-case basis at the different sites.

- Access to certain peripheral zones remains challenging due to poorly maintained roads, compounded by worsening traffic congestion in recent years across the city of Kinshasa. These factors have somewhat hindered our performance in these areas.

- The Rotaractors had limited time to familiarize themselves with the data collection tool, and the poor internet connectivity in the peripheral areas of the city further complicated their efforts. These two factors negatively influenced our data collection and therefore our statistics on the people served and the services provided.

- The number of providers per site proved to be significantly lower than needed due to very limited financial means. Instead of operating from 9:00 am to 4:00 pm as initially planned, some sites extended service time until 6:00 pm in order to be able to serve the population after long waiting hours.

- The delay in the delivery of supplies caused a significant dysfunction in the dispensing of services.

- Service providers were often overwhelmed at all sites, and some people went home disappointed without having accessed the expected services.

2. Recommendations

Based on this first experience, we make the following recommendations, some of which come from the beneficiary population and the partner healthcare providers:

1. Schedule the next RFHD editions during the dry season and avoid the month of October, which is devoted to activities related to poliomyelitis. April would be a more suitable time, as it falls during the school holidays.

2. Establish an RFHA operational team in advance with a clear allocation of responsibilities (e.g., field coordinator, data collection lead, financial focal points, logistics personnel) and a mode of operation tailored to the local context.

3. Organize training on data collection in time and conduct simulation exercises for better preparation.

4. The budget per site in the city of Kinshasa should be increased by about 40% to cover the necessary needs for optimal implementation of activities and to avoid the shortcomings that have affected all project expenditure items, from medical supplies to administrative costs, including the per diem of the providers.

5. Ensure that supplies are fully available before the event and better adapt the number of healthcare providers to the number of patients expected.

6. Provide an effective supervision mechanism for the community awareness campaigns by community relays (RECO).

7. Involve more community leaders (Priests, Pastors, teachers, etc.) to strengthen awareness campaigns.

8. Produce a radio-television ad that should be broadcast for at least 3 weeks before the activity.

9. Provide a unique pre-recorded message to be broadcast by RECO via megaphones for all targeted Health Zones.

10. Implement a strategy to allow for greater involvement of the head doctors of the Health Zones.

11. Decentralize the management of logistics by Health Zone to avoid overloading a single person during the movement of materials.

12. Develop the budget for activities through a process that should start from the bottom up by involving the Health Zones in order to better take into account the local reality.

13. Take into account the inaccessibility of certain sites in the planning of the logistical means to reach them.

14. Set a deadline of at least 30 days before the event for the receipt of contributions from different partners to determine the budget and the final planning to avoid any inconvenience related to logistics or financing.

15. Provide one ambulance per Health Zone for possible at-risk patients.

K. Conclusion

Despite the difficulties encountered, the October 2024 program was a success. The managers of RFHA Inc. at the level of the general management and at the level of Africa were pleased to note that the first edition of the Rotary Days for Family Health in the DRC went well in the city of Kinshasa.

As usual, the program proved to be a great experience for both the Rotarians and Rotaractors and for the population we served. Regardless of the time and other resources invested, the RFHA/DRC team was determined to make it an excellent program.

Specifically,

- We have achieved most of the program's objectives.
- Some program beneficiaries were able to be referred for medical follow-up, treatment, and care.
- Public awareness of RFHD was low for this first edition. We need to change our awareness strategy for the next edition by organizing a more important radio-television advertising campaign.
- The populations of various communes and localities in the DRC have a significant need for our services, which help them understand their health status. This not only alleviates their concerns and reduces healthcare-related costs but also encourages positive lifestyle changes.
- This initiative has helped raise awareness of Rotary in certain communities of Kinshasa while enhancing its visibility and reputation in others.
- The participating Rotarians found the program deeply fulfilling and expressed a strong desire to continue serving.

Appreciation

We would particularly like to acknowledge the efforts of the Senior Program Specialist (Polio), Gates Foundation - Andrea Thompson for her support and her trust in our activities. We are also grateful for the insight of the RFHA Inc CEO - Sue Paget, and the RFHA Africa Operations Chairman - Eric Kimani. All the participating Congolese and the beneficiaries are very grateful to the board of directors of RFHA Inc. for giving us the opportunity to serve the different people of our communities through the Rotary Days for Family Health program.

L. Summary of Partnership

Thanks to the successes of this first edition, the action group has gained in notoriety, and a number of NGOs and agencies of the United Nations have formally expressed their willingness to work with us in the next campaign. During the campaign this year 2024, the following partners collaborated with us:

1. National Ministry of Health
2. Provincial Ministry of Health of Kinshasa
3. American Center for Disease Control (CDC)
4. Health in Rural Areas (SANRU) Local NGO
5. Catholic Church through its office for the development of medical works (BDOM) in the city of Kinshasa
6. Program for the development of health services (PDSS)
7. National program for the fight against tuberculosis (PNLT)
8. Expanded vaccination program (EPI/Kinshasa)
9. Communes of Bandalungwa, Kalamu, Lemba, Limete, Mont Ngafula, Ndjili and Nsele.
10. Denk Pharma Company.
11. United Nations Population Fund (UNFPA)
12. University of Kinshasa/Faculty of Medicine

Participation des Clubs

	Rotary Club Name	Supporting Rotaract Club	Number of Volunteers	Site Name
1	RC Gombe	RAC Gombe	12	Terrain municipal de Bandalungwa
2	RC Bolingo	RAC Bolingo	11	Centre hospitalier CNMMAS/ ZS Kalamu 2
3	RC Kingabwa	RAC Kingabwa	11	Terrain ya Sango/ ZS Kingabwa
4	RC Etoile	RAC Mwinda	10	Clinique PAX/ZS Lemba
5	RC Binza	RAC Binza	6	Terrain Copela Tchad/ ZS Mont Ngafula 1
6	RC ESPOIR	RAC ESPOIR	4	
7	RC Kinshasa	RAC KINSHASA	12	Centre Maman Koko/ ZS Mont Ngafula 2
8	RC Matonge		9	Site Vodacom / ZS Ndjili
9	RC Pool Malebo	RAC Malebo	6	
10	RC Limete	RAC Limete	8	HGR KINKOLE/ ZS Nsele

TOTAL	81

M. Contacts Information

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