



Pig For Peace in the DRC.

Pigs for Peace: Animal Microfinance
Intervention to Improve Health of Rape
Survivors in the Democratic Republic of
Congo (DRC))

Partners

- PAIDEK Microfinance – Director, Mitima Mpanano, Congolese led microfinance organization founded in 1996 to respond to economic needs of rural and urban Congolese in South and North Kivu Provinces – serving 13,000 households/groups with \$2 million in loans in Eastern DRC.
- Great Lakes Restoration (GLR)- US based Congolese-led NGO focused on building the peace in Great Lakes Region of Africa
- Johns Hopkins University School of Nursing
- Kaiser Center for Health Research, Dr. Nancy Perrin

Principles of Partnership

- Strengths-based approach- expertise, capacity and volunteerism exists within Congolese led organizations
- Interdisciplinary team (microfinance program directors, health professionals, agriculture technicians, researchers) approach with respect for diverse perspectives
- Sustainability of programs requires partnerships with Congolese community leaders and members
- Participatory action research – research must be linked to services - microfinance
- Integration of health, economics and social programs to provide a holistic and comprehensive approach to individual, family and community need
- Transparency and equity among partners in distribution of financial resources
 - **Glass, N, Ramazani, P, Tosha, M, Mpanano, M, Cinyabuguma, M (2011). A Congolese-US Participatory Action Research Partnership to Rebuild the Lives of Rape Survivors and Their Families in Eastern Democratic Republic of Congo. *Global Public Health*. 1-12.**

Armed conflict in Eastern DRC

- Limited infrastructure (health care, education, employment, roads, government)
- No accurate number of those affected, estimated 6 million have died;
- Forced Displacement
- Rape and other forms GBV as weapon of war
- Economic insecurity: Rebels and soldiers have looted essential tools, animals, materials of value



Survivor, family, and community driven solutions

“Stigma is less when
you have money to
care for your
children and family”

- Congolese Survivor



Economic Security

- Animal Husbandry -the breeding of animals helps by:
 - Providing household income for basic necessities:
 - Pays for food for family and animals
 - Pays for school fees
 - Provides manure for crops
 - Women are productive part of the family and community – regain her status in family and community
 - Gives women/men a start to getting their life back – raise their family and control their future
 - Normal (raising animals and agriculture), productive life reduces the impact of trauma

Economic Security: Pigs for Peace

- Pilot program started December 2008 with 8 piglets (\$400) for 8 families in Ciriri Village
- All volunteer program
- Why Pigs?
 - No cultural taboos
 - Women ownership
 - Prolific – 2x year (6-12 piglets)
 - Reinforce agriculture (compost)
 - Do not need a lot of space
 - Eat local resources (banana, sweet potato, manioc leaves)



Pigs for Peace: Pilot

- Village-led association developed with “investment” by members and mentorship by PAIDEK agents
 - Build own pig pen
 - Attend and participate in association meetings and decision making
- Woman/man given pig by the village association – sustainability
- Woman/man gives back 2 piglets when pig gives birth
 - One to repay pig loan
 - One to pay interest on pig loan
- Piglets given to other association members in same village – build community relationships

Pigs for Peace: Pilot

- As of October 2011, approximately \$20,000 has provided pigs to 318 families in 14 villages
- Approximately, 700 families are on our waiting list for a pig
- “I will care for this pig like my child, as it is my future”
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Pilot Evaluation (N=100)

- Interviewed 100 members (women/men) with average household size of 10 (SD=4.65); 6 children
- 40 participants reported that their pig delivered at least once, having on average 6 piglets
- The majority had sold at least one of the piglets (average \$30), and used funds for household needs:
 - 39% Food for family
 - 36% School fees for children
 - 8% Purchase more pigs
 - 7% Medical care/medication
 - 5% Clothing
 - 5% Other (pay to get son out of jail)
- 92% of participants said the project had improved their relationship with neighbors/others in village
 - “You can only love someone who gave you a pig”

Pigs for Peace: Scaling up

- Contribute to the evidence needed for large scale implementation and transferability to other conflict and post-conflict settings - and beyond
- Determine the effectiveness of a village-led animal husbandry microfinance program, Pigs for Peace, on survivor and household:
 - Health (physical and mental health)
 - Contraceptive use
 - Household economic stability (food security, health care access, wealth)
 - Household decision-making
 - Gender attitudes (schooling for girls)
 - Intimate partner violence
 - Reintegration of survivors (and their children) into family and community
- Funding: US National Institute of Health (NIH), National Institute of Minority Health and Disparities (R01MD006075-01, PI N.Glass, 12/2010-11/2015)

Study Design

- Randomized community trial
- 10 villages in the Walungu Territory – determined through village assessments and meetings with village members and leaders
- 60 participants (80% female) per village randomized
 - Intervention: 30 receive 1st pig loan
 - Delayed control: 30 receive repayment pig
- Baseline interviews with total of 600 participants in intervention and delayed control groups and followed for lifecycle of pig:
 - Receive pig loan
 - Pig is pregnant
 - Piglets weaned/loan repaid (3 months post-birth)
 - Pig pregnant again
 - Pig weaned
- Process evaluation (organization/function of village association, pig health and care, use of pig waste, etc)

Study Progress

- Built “Pigs for Peace Depot and Training Center”
 - Need 600 pigs over next couple years
 - Supply and demand – pilot participants (supply pigs) want to make sure the market stays vibrant – study project has demand for pigs
 - Control quality of pigs for project participants (vet services and vaccine)
 - Applied learning – building pens, gardens, compost, local resources for food and medicine



Study Progress

- Village Assessment completed – 10 villages for study chosen
- Meeting with village leaders and members to discuss study
 - All village members invited to hear about the project
 - Interested and Eligibility criteria - vulnerable women and men (80% women), agree to principles of project (investment, loan, repayment)
 - Randomization – done at meeting with eligible participants
 - Wait-list (second control group)
- Participant Interview developed/pilot tested
 - Translation – English- French- Swahili-Mashi
 - Assessing mental health - “I was sleeping....after I got the pig, I woke up”
 - Final revisions and translation – one more round of pilot testing
- Pig Distribution – January 2012

Village Assessment

- Multiple sources:
 - Interviews - village chief, health care center director, school director, village associations, territory administrators
 - Record reviews – health care centers and territory administration
 - Data quality challenges
 - Many Unknowns, # of sexual assault survivors, # orphans
- 10 villages in the Walungu Territory selected: Kamisimbi, Ludaha, Lurhala, Kahembarhi, Cahu, Kaniola, Izege, Mubumano, Cagombe,
- Range 347-3,348 individuals in selected villages:
 - On average more women than men living in villages
 - 100% of homes are made of non-durable materials (mud, bamboo)
 - 3 villages have some electricity (near commercial centers)
 - All have potable water
- Income sources
 - Agriculture (manioc, sweet potatoes, beans, corn)
 - Animal husbandry (pigs common)
 - Small business (market)

Village Assessment: Findings

- Three villages reported that insecurity persists in the area
- Seven villages reported that all or almost all of the residents were impacted by armed conflict
 - Looting
 - Displacement
 - Violence
 - Murder of village members
- Six villages reported that women rejected by their husbands because of rape lived in the village
- Nine villages reported that homes were destroyed
- Three villages reported that they had a health center or school destroyed

Village Assessment: Findings

- Majority had local and international NGOs working or had worked in villages (no international NGOs currently working in selected villages)
 - Health (80%)
 - Agriculture (80%)
 - Water (60%)
 - Microfinance (40%)
- Major health concerns: Malaria, Malnutrition, STIs, HIV
- Limited services for survivors of sexual assault and other forms of GBV
 - Partnering with local mobile health NGO – Foundation RamaLevina
 - 508 rape survivors treated in 9 months (Oct. 2010-June 2011) in territory, 46% reported that they never accessed care (raped occurred 1-3 years previously)

