GENERAL OVERVIEW

The Democratic Republic of the Congo (DRC) gained independence from Belgium in 1960 and plunged almost immediately into sectarian conflict. Secessionist movements plagued the country until Joseph Desire Mobutu seized power in a coup in 1965. In 1997, he was toppled by a coalition of Congolese exiles headed by Laurent-Desire Kabila, operating in conjunction with the Rwandan and Ugandan armed forces. Kabila seized power, but quickly entered into conflict with his former allies when he attempted to expel foreign troops from the DRC. This conflict escalated into the Second Congo War, which involved eight African nations and lasted from 1998 until 2003. The war claimed millions of lives, primarily as a result of disease and famine. Since the conclusion of the war, the government of the DRC has worked to establish a functioning representative democracy.

The DRC is home to over 200 ethnic groups, a majority of which are Bantu. The four largest tribes are the Mongo, Luba, Kongo, and Mangbetu-Azande. French is the official language and Lingala, Kingwana, Kikongo, and Tshilbua are the most prevalent local dialects. At least 70 percent of the population adheres to Christianity.

The DRC is bordered by Angola, Zambia, Burundi, Rwanda, Uganda, South Sudan, Central African Republic, and the Republic of the Congo. Its climate is mainly tropical. Areas south of the equator have a dry season from April to October and a wet season from November to March. Areas north of the equator have a dry season from December to February and a wet season from April to October.
Security Risk Rating
High

Security Risk Overview
The security situation in parts of the Democratic Republic of the Congo (DRC) is unstable, particularly the eastern areas. The country is affected by political instability and high rates of crime. In recent months, the DRC has been experiencing considerable unrest related to uncertainty over presidential elections and President Joseph Kabila's decision to stay in office beyond the end of his term in December 2016. DRC has never experienced a peaceful transition of power.

Violent militias control areas in the eastern region. The police and armed forces are often unpaid, which limits their effectiveness, and has been known to cause officers to threaten or make arrests to solicit bribes.

The DRC’s northeastern provinces experience sporadic volcanic eruptions, which may cause disruptions or devastation.

Terrorism
The threat of international terrorism in the DRC is low. There have been no known terrorist attacks reported in the country within the past five years.

Civil Unrest
Several local and foreign rebel groups, including the March 23 Movement (M23), the Allied Democratic Forces (ADF), the Lord’s Resistance Army (LRA), the Democratic Forces for the Liberation of Rwanda (FDLR), the Front for Patriotic Resistance of Ituri (FRPI), and Mai-Mai groups, are active in eastern provinces of the DRC—namely, Bas-Uele, Haut-Uele, Ituri, North Kivu, South Kivu, Maniema, Tanganyika, and Haut-Lomami. Such groups frequently clash with government forces and UN peacekeepers, and carry out assaults, abductions, and lootings against civilians. On 7 December, 15 peacekeepers were killed and 53 others were injured after ADF militants raided the United Nations (UN) base in the town of Semuliki in North Kivu. In June 2015, clashes between rebels and soldiers occurred in the vicinity of Goma International Airport (GOM), serving North Kivu’s provincial capital, Goma.

Incidents of civil unrest and violence generally increase around elections, particularly in and around Kinshasa and Goma. During unrest, traffic disruptions and looting often occur. Security forces often use force to disperse crowds. Towards the end of 2016, several demonstrations took place across the country to demand that President Kalila step down in December 2016 at the end of his mandate without seeking a third term. Dozens of people were reportedly killed by security forces during these protests. Although the election commission had set the date for presidential and legislative elections as 27 November 2016, local and provincial elections, which were supposed to start in late 2015 and take place before the presidential poll, were not held—thereby delaying the presidential vote and allowing President Kabila to stay in office. However, opposition leaders and the government reached an agreement in late December 2016 in which President Kabila would step down and elections would be held prior to the end of 2017. Further demonstrations in the lead-up to the elections and a potential transfer of power are expected.
Personal Security

Flight suspensions and border closures can occur with short notice in response to outbreaks of rebel-related violence in eastern DRC.

Crime rates in the DRC are high. Individuals walking alone often become targets for criminals. Petty crime and pick pocketing, especially by groups of children, are common in the country. Foreign nationals are often targeted due to their perceived wealth, particularly in North and South Kivu. Robberies frequently occur near hotels and supermarkets. Some criminal groups pose as security forces or use women to deceive victims.

Rates of violent crimes, including robberies and armed assaults, have been increasing. Victims of muggings and armed robberies who refuse to cooperate are often harmed by assailants. The threat of kidnaping is present in eastern DRC. Some foreign nationals have been abducted, but the majority of the victims have been locals.

Although an extensive de-mining campaign has been undertaken throughout the country since the Congo wars, landmines and unexploded ordnance continue to pose a problem. Not all areas will be clearly marked, and devices or markings may shift over time.

Taking photographs of the presidential motorcade, tourist areas (game parks, etc), and near military or government installations can lead to arrest or confrontation by security forces. Additionally, taking pictures of the Congo River and the Congolese people may be met with hostility.

Public displays of affection between same-sex couples can result in prosecution. Harassment and violence against lesbian, gay, bisexual, and transgender (LGBT) individuals remains a problem.

Sexual violence against females—and increasingly against males—is widespread, under-reported, and under-prosecuted due to societal stigmas. Sexual harassment is illegal in the DRC but this law is rarely enforced. Law enforcement authorities are generally unwilling or unable to investigate and prosecute such crimes.

The DRC’s northeastern provinces experience sporadic volcanic eruptions. Mount Nyiragongo erupted in January 2002 and a lava flow swept through Goma, killing 45 people and leaving 120,000 homeless. Mount Nyamulagira, also near Goma, erupted in 2006 and 2010.

Earthquakes occur occasionally in the DRC. Most recently, a 5.6-magnitude earthquake struck South Kivu near the border with Rwanda in August 2015, killing at least three people and wounding dozens of others near Kavumu Airport (BKYM), serving the town of Bukavu.

Lake Kivu, along the DRC’s eastern border with Rwanda, is one of three known "exploding lakes." These are bodies of water that, for a variety of reasons, accumulate an extremely high concentration of carbon dioxide (CO2) in their deepest points. Seismic activity or avalanches can release this CO2, starting a chain reaction in which all of the trapped gas is released, creating a layer of suffocating air for miles around the lake. Beware of seismic activity when in the Lake Kivu area, as an eruption of the lake could be deadly to anyone within miles of its shore.
Law Enforcement

Poor training, a lack of resources, and other factors limit the security forces’ ability to effectively prevent, respond to, and investigate crimes. Many crimes go uninvestigated. This problem is compounded by corruption among police officers, who may expect, request, or demand illegitimate payments from foreigners for real or imaginary violations of local law or for providing routine services. Police have made arbitrary arrests and killings in the past, including those of individuals who refuse to pay bribes. There have also been reports of extrajudicial punishment and execution.

Prisons in the DRC do not meet international standards and most have life-threatening conditions. Prison breaks are relatively common as facilities are often understaffed. Overcrowding, poor sanitation, and the mistreatment and torture of detainees by security forces to extract confessions or to control disobedient prisoners are concerns. Most detainees have no access to health care, as medications and equipment are in short supply. Pretrial detention and trial periods tend to be lengthy. A corrupt and inefficient judiciary also hinders the justice system. Travelers should make every attempt to notify their embassy or consulate in the event of arrest, as authorities may fail to report arrests.

Transportation

Air: The DRC has not been rated by the International Aviation Safety Assessment Program (IASA). All airlines certified by DRC aviation authorities are subject to a ban within the EU. Travelers are advised to avoid most airlines flying domestic routes in the DRC due to safety and maintenance concerns.

Bus: Public transportation in the DRC is limited, consisting of mini buses that are often overcrowded. If transport is necessary, consider hiring a private car through a respected service.

Car: Road travel in the DRC is hazardous due to improperly maintained infrastructure and reckless local driving practices. Roads are primarily dirt, consistently in poor condition, and often impassable during the rainy season. A four-wheel drive vehicle is necessary outside urban areas.

Security forces occasionally erect random roadblocks and may expect, request, or demand illegitimate payments from foreigners for real or imaginary violations of local law. Individuals may be arrested and detained until such a payment is made. When stopped at a checkpoint, keep doors and windows locked. Documents should be shown through closed windows or passed through the smallest possible opening in the window. All travelers should be in possession of certified copies of their passport, a visa, driver’s license, and vehicle registration.

Drivers and pedestrians are expected to stop when passing a government installation in the act of raising or lowering the Congolese flag, which usually occurs at 07:30 and 18:00, respectively. During official motorcades, drivers should not attempt to move until signaled by security forces, as such action can result in arrest, vehicle damage, or personal injury.

Vehicle theft and carjackings are common. In the event of an accident involving bodily harm to a third party, do not exit the vehicle or attempt to offer assistance under any circumstances. Such occurrences may be a ruse used by bandits, or may result in a mob reprisal. Should such an accident occur, proceed immediately to the nearest gendarme or police station.

Taxi: Private and shared taxis are available in the DRC, but only those from major hotels in Kinshasa are considered reliable. Taxis tend to be poorly maintained and are often fronts for scams or robbery.
Train: Passenger rail services are very limited and of poor safety standards. Accidents are common, and have led to mass casualties in the past.

Water: Travel by boat to some areas is common but hazardous due to a lack of maintenance and safety standards. Boat crashes and accidents are common.

Scams, Fraud, Corruption, and Extortion
Scams are not prevalent in the Democratic Republic of the Congo. Common scams against foreigners, irrespective of destination, include dating and marriage scams, false employment opportunities, and virtual kidnapping for ransom. Avoid giving out personal information at all costs, especially bank or credit card numbers.

Corruption of government officials is rife and most officials act with impunity. Some of these corrupt officials remain in their post despite being accused of human rights abuses, extortion, and other crimes. It has been reported that these officials may expect, request, or demand illegitimate payments from foreigners for real or imaginary violations of local law or for providing routine services.

Security Advice
Be prepared. Make an effort to understand your destination environment before you travel: identify the possible threats and prevailing situation, understand your own vulnerabilities and take action to mitigate the risks.

Maintain a low profile and good situational awareness. Ensure you travel with reliable communications equipment, test your mobile (cellular) telephone upon arrival at your destination and keep it fully charged. Make note of emergency telephone numbers, including the police, fire department, ambulance, and embassy or consulate.

Avoid all protests and demonstrations to minimize the risk of exposure to incidental violence. Travelers should walk away or wait inside a shop or restaurant if it is not possible to leave the area. Plan alternate routes to circumvent potential protest locations. Seek the assistance of a local host, or travel with a local driver, where possible.

To minimize the risk of becoming a victim of petty theft, travelers should maintain caution and exercise situational awareness at all times. Avoid overt displays of wealth. If confronted by a criminal, do nothing to antagonize the situation. Carry a "dummy" wallet if possible, and carry a passport photocopy at all times.

Carry handbags on the opposite side from passing traffic to reduce the risk of thieves on motorcycles trying to snatch them.

Avoid walking unless you are confident of the security situation. Do not walk by yourself at night in secluded or troublesome areas of the city. Do not take shortcuts away from main roads.

National holidays and public festivals tend to attract large crowds in some countries. Such public gatherings, despite a typically enhanced security presence, create a potential venue for disorder or violence. In addition, large crowds may well impede local transportation systems.

Do not buy counterfeit or any goods in violation of copyright laws. Doing so may be a violation of local laws and can carry hefty fines or even prison time.

Reduce risk of injury from car crashes by always wearing a seatbelt. Some countries have heavy
fines for not wearing a seatbelt. Avoid drinking and driving. Be sure to travel with all appropriate
documentation, including passport and visa photocopies. Individuals who intend on driving should
be in possession of their International Driving Permit (IDP), vehicle registration, and proof of
insurance at all times.

Travelers are subject to the laws of the Democratic Republic of the Congo, even if they are not a
citizen of the DRC. Individuals can also be prosecuted for violating their home country’s laws while
in a foreign country. Travelers should be aware of the laws and customs of the country they are
traveling to in order to avoid prosecution.
HEALTH ASSESSMENT

Health Risk Rating
Extreme

Travel Health Advice
Routine vaccines for preventable diseases, such as measles/mumps/rubella (MMR) vaccine, diphtheria/pertussis/tetanus (DPT) vaccine, chickenpox (or varicella), poliovirus vaccine, etc. are recommended for all travelers.

Protect against insect bites and insect-borne diseases, such as tick-borne encephalitis or malaria, by using insect repellant and wearing long pants, long-sleeved shirts, boots, and hats if possible.

Prevent foodborne illnesses by avoiding undercooked food and unpasteurized dairy products and washing hands, especially before eating.

Immunizations - Required for Entry

<table>
<thead>
<tr>
<th>Immunization</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yellow Fever</td>
<td>There is a risk of yellow fever transmission in the DRC. All travelers over the age of one year are required to be vaccinated, although it is recommended that all travelers over the age of nine months should be vaccinated. The yellow fever vaccine should be administered at least 10 days before travel. <strong>NOTE:</strong> Be aware that one’s onward/return destination may require proof of vaccination when arriving from the DRC, as it is a country at risk of yellow fever transmission. <strong>NOTE 2:</strong> The World Health Organization (WHO) has announced that as of 11 July 2016, existing and new yellow fever vaccination certificates are valid for life. Therefore, countries can no longer require travelers to produce a certificate dated within the last 10 years as a condition of entry. However, the new regulation may not be implemented by all border officials during the transition phase.</td>
</tr>
</tbody>
</table>

Immunizations - General
The following immunizations are recommended for travel to all destinations.

<table>
<thead>
<tr>
<th>Immunization</th>
<th>Recommendations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Routine</td>
<td>Includes measles/mumps/rubella (MMR) vaccine, diphtheria/pertussis/tetanus (DPT) vaccine, chickenpox (or varicella), poliovirus vaccine, etc.</td>
</tr>
<tr>
<td>Hepatitis B</td>
<td>Hepatitis B is spread through contact with blood, sexual relations, and contact with contaminated needles. There are several pre-exposure vaccination options available: PEDIARIX (pediatric formulation containing DTaP, HepA/B, and polio vaccines), TWINRIX (three-dose HepA/HepB combination series), ENGERIX-B, and RECOMBIVAX HB. The full course of three injections is recommended prior to travel.</td>
</tr>
</tbody>
</table>
Influenza

Influenza is transmitted between humans in droplets spread by sneezing and coughing, and by touching objects contaminated with the virus. There are two types of pre-exposure vaccine available: Trivalent Inactivated Influenza Vaccine (TIV) and Live Intranasal Influenza Vaccine (LAIV). TIV is injected into the upper arm or thigh, and LAIV is administered as a nasal spray. Common TIV vaccines include Afluria, Agriflu, FluLaval, Fluarix, Fluvirin, and Fluzone. Common LAIV vaccines include FluMist.

Vaccine-Preventable Diseases Specific to the Democratic Republic of the Congo

The following are vaccine-preventable diseases that are prevalent in the DRC.

<table>
<thead>
<tr>
<th>Immunization</th>
<th>Recommendations</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Hepatitis A</strong></td>
<td>Hepatitis A is found in areas with poor sanitation and poor food and water safety, and can also be spread through sexual relations, blood transfusions, and needles. Several pre-exposure options are available: PEDIARIX (pediatric formulation containing DTaP, HepB, and polio vaccines), HAVRIX, VAQTA, TWINRIX (three-dose HepA/HepB combination series), AVAXIM, and Epaxal. The first injection should be administered before departure and a booster after six months.</td>
</tr>
<tr>
<td><strong>Meningococcal Disease (Meningitis)</strong></td>
<td>Meningococcal disease is spread through the inhalation of respiratory droplets, as well as by sharing food and drinks, and kissing. Rates are usually higher during the dry season, from around December to February (north of equator) and April to October (south of equator). The meningococcal conjugate vaccine (MCV4) is the preferred vaccination option for those aged 2-55. The meningococcal polysaccharide vaccine (MPSV4) is the only vaccine licensed for those over 55 years of age, and is used when MCV4 is unavailable.</td>
</tr>
<tr>
<td><strong>Rabies</strong></td>
<td>Rabies is spread through the bite or scratch of an infected animal. Vaccination against rabies does not make a person immune to rabies. Those who have been potentially exposed should still seek treatment. Left untreated, rabies can be fatal. A three-dose pre-exposure rabies vaccine is recommended for long-term travelers and those in direct contact with animals. The first dose of the vaccine should be administered at least 21 days before travel.</td>
</tr>
<tr>
<td><strong>Typhoid</strong></td>
<td>Typhoid is contracted through the ingestion of contaminated food or water. Persons traveling to areas in which typhoid is common should undergo vaccination at least one week before travel. Booster shots are necessary, as the vaccination loses effectiveness over the course of several years. Two forms of the vaccine are available: an inactivated shot and a live weakened oral vaccine.</td>
</tr>
</tbody>
</table>
# Health Risks in the Democratic Republic of the Congo

<table>
<thead>
<tr>
<th>Health Risks</th>
<th>Details</th>
<th>Recommendations</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>African Tick-Bite Fever (South African Spotted Fever)</strong></td>
<td>African tick-bite fever is transmitted through bites from ticks infected with <em>Rickettsia africae</em>. Fever and rash may be present three to seven days following the bite.</td>
<td>There is no vaccine to prevent African tick-bite fever. To avoid bites, apply a repellent containing DEET to skin and clothing when outdoors, particularly in rural areas. If sleeping outdoors, use a bed net treated with permethrin. If infected, individuals can be treated with 100 mg doxycycline twice daily for three to five days, or 500 mg chloramphenicol four times daily for three to five days.</td>
</tr>
<tr>
<td><strong>Chikungunya</strong></td>
<td>Chikungunya is spread during the rainy season through the bite of an infected mosquito. Symptoms can include sudden-onset joint pain and fever, headache, rash, and vomiting, though not all infected persons exhibit symptoms.</td>
<td>There is no vaccine to prevent chikungunya, but taking precautions against mosquito bites, such as by applying insect repellant and using mosquito nets, may help to prevent transmission.</td>
</tr>
<tr>
<td><strong>Cholera</strong></td>
<td>Cholera is most prevalent in areas with poor sanitation or overcrowding, and is contracted through the ingestion of contaminated food or water. Cholera cases have been documented in South Kivu. Cholera can become rapidly fatal. Cholera vaccines are recommended only for health care or relief workers or long-term travelers with unreliable access to health care.</td>
<td>Travelers who opt for vaccination should be aware that there are two oral cholera vaccine options: Dukoral, and Shanchol and mORCVAX (made by different manufacturers). Two oral doses are provided at least seven days apart (but less than six weeks apart) with protection beginning approximately one week after the second dose. Booster doses are recommended after two years. Vaccination against cholera is not a substitute for basic precautions such as boiling drinking water, thoroughly cooking food, and washing and peeling fruits and vegetables. A one gram dose of azithromycin also can effectively treat cholera.</td>
</tr>
<tr>
<td><strong>Dengue</strong></td>
<td>Dengue fever is spread through the bite of an infected <em>Aedes</em> mosquito. Symptoms include headache, sudden-onset fever, rash, and joint pain.</td>
<td>There is no vaccine to prevent dengue fever. Protect against bites by using insect repellant (with 30-50% DEET, or 7-15% Picaridin) and wearing long pants, long-sleeved shirts, boots, and hats. Stay indoors in areas with screens and air conditioning, if possible. The risk of being bitten by a mosquito is highest in the early morning, several hours after daybreak, and in the late afternoon before sunset. The <em>Aedes</em> mosquito, which carries dengue fever, typically lives indoors in dark, cool places such as closets, under beds, in bathrooms, and behind curtains, and prefers to lay its eggs on standing water.</td>
</tr>
<tr>
<td><strong>East African Trypanosomiasis (Sleeping Sickness)</strong></td>
<td>East African trypanosomiasis is spread through the bite of an infected tsetse fly. Risk of transmission exists across the DRC, though a majority of cases are reported in Equateur and the former Bandundu province. Symptoms include headache, fever, joint pain, swelling of the lymph nodes on the back of the neck. Advanced symptoms include sleep disturbances, kidney dysfunction, confusion, weakness, and irreversible neurological damage. Sleeping sickness can be fatal if untreated.</td>
<td>Insect repellants are not effective against tsetse flies. Wear long pants, long sleeve shirts, boots, and hats if possible. Stay indoors in areas with screens and air conditioning, if possible. The tsetse fly is most active during the early morning and late afternoon.</td>
</tr>
<tr>
<td><strong>Ebola</strong></td>
<td>Ebola hemorrhagic fever causes internal bleeding and symptoms include fever, vomiting, and kidney problems. There is no vaccine for the Ebola virus. Ebola is highly communicable. Transmission may occur even through contact with deceased humans or animals. The DRC experienced an Ebola outbreak in 2014, but the country was later declared free of the virus.</td>
<td>Avoid eating primate meat. Avoid contact with infected individuals and their households. Wash hands thoroughly.</td>
</tr>
<tr>
<td>Disease</td>
<td>Description</td>
<td>Prevention/Precautions</td>
</tr>
<tr>
<td>--------------------</td>
<td>-----------------------------------------------------------------------------</td>
<td>----------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Lymphatic Filariasis</td>
<td>Lymphatic filariasis is spread through the bite of an infected mosquito or blackfly. The infection targets the lymphatic system, causing the extreme swelling of the limbs, known as elephantiasis.</td>
<td>There is no vaccine to prevent filariasis. Travelers should take precautions against mosquito bites. Protect against bites by using insect repellant and wearing long pants, long-sleeved shirts, boots, and hats if possible. Adult worms can live for many years inside the body; therefore, doses of the preferred treatment (Ivermectin combined with albendazole) for filariasis may be required annually or semi-annually over the course of several years to kill adult worms and break the cycle of transmission.</td>
</tr>
<tr>
<td>Hepatitis C</td>
<td>Hepatitis C is highly endemic in the DRC. It is spread through IV drug use, contaminated needles for tattoos and body piercings, or medical procedures such as unscreened blood transfusions. Hepatitis C can also be transferred sexually.</td>
<td>There is no vaccine to prevent hepatitis C. Travelers are advised to avoid IV drug use and sexual contact with high-risk individuals. Avoid receiving blood transfusions and other procedures that may bring you in contact with contaminated needles, such as tattoos and body piercings.</td>
</tr>
<tr>
<td>Hepatitis E</td>
<td>Hepatitis E is typically contracted through exposure to raw or uncooked shellfish, or contaminated drinking water.</td>
<td>Hepatitis E can be avoided through overall care in sanitation, particularly regarding drinking water.</td>
</tr>
<tr>
<td>Leishmaniasis</td>
<td>Leishmaniasis is spread through the bite of an infected sandfly. In rural forests, risk is year-round, with a higher incidence from May through December. In the DRC, cases have been reported in the northwest, on the fringe of the equatorial forest, and in the southeast, in the savanna belt.</td>
<td>There is no vaccine to prevent leishmaniasis. Take the same precautions as for mosquitoes. Be aware that the mesh on any protective netting must be of a finer weave than the norm for prevention of mosquito bites. For netting to be effective against sandflies, it must have at least 18 holes per linear inch (2.54 cm).</td>
</tr>
<tr>
<td>Malaria</td>
<td>Malaria is found in areas throughout the DRC under 1,800 meters (5,900 feet) elevation, including urban areas. Malaria is spread through the bite of an infected mosquito. Chloroquine has been proven ineffective against malaria in the DRC due to developing resistance in the area.</td>
<td>There is no vaccine to prevent malaria, but taking a prescription anti-malarial drug and precautions against mosquito bites may help to prevent against transmission. Malaria prophylaxis is recommended if traveling to endemic areas outside major cities.</td>
</tr>
<tr>
<td><strong>Onchocerciasis (River Blindness)</strong></td>
<td>Onchocerciasis is a parasitic disease spread through the bite of an infected blackfly. The parasite causes a variety of skin problems that can spread to the eyes and cause blindness.</td>
<td>Adult worms can live for many years inside the body; therefore, doses of the preferred treatment (Ivermectin) may be required annually or semi-annually over the course of several years. Protect against bites by using insect repellent (with 30-50% DEET, or 7-15% Picaridin) and wearing long pants, long-sleeved shirts, boots and hats if possible. Blackflies tend to bite during the day and are found near fast moving bodies of water such as rivers and streams.</td>
</tr>
<tr>
<td><strong>Plague</strong></td>
<td>Plague is typically spread through the bite of infected rodent fleas. It is sometimes contracted through the inhalation of infected animal secretions, or by handling infected animal tissue. Risk of plague is present in the northeastern (Ituri) region of the DRC.</td>
<td>There is no vaccine to prevent plague. Measures should be taken to prevent contact with rodents and other potentially infected animals. Those who may have had contact with an infected person, rodent, or other animal should receive antibiotic prophylactic treatment. Infected persons need immediate treatment due to high risk of death.</td>
</tr>
<tr>
<td><strong>Schistosomiasis</strong></td>
<td>Schistosomiasis is spread via larvae that swim in fresh water and through sexual contact with infected individuals. Symptoms include a rash, weakness, fever, bloody urine and diarrhea. Infected individuals may not exhibit symptoms for four to six weeks after contracting schistosomiasis. In the DRC, there is a high risk of transmission in the northern border along the Kibali-Uele Rivers, the eastern border from Lake Mobuto to Lake Tanganyika, the Lualaba basin of Shaba region, the area between Kinshasa and the Atlantic coast, and the extreme southeast tip of the country.</td>
<td>There is no vaccine to prevent schistosomiasis. Do not swim in bodies of freshwater. Schistosomiasis cannot be contracted in chlorinated swimming pools or in bodies of salt water. Travelers who come into contact with fresh water should clean their skin with rubbing alcohol and a clean, dry towel.</td>
</tr>
</tbody>
</table>
**Tuberculosis (TB)**

Tuberculosis is highly endemic in the DRC and is spread through contact with the respiratory secretions of an infected person. Vaccination is available but only recommended for health care workers and those with prolonged exposure to infected populations.

The Bacillus Calmette-Guérin (BCG) vaccine has historically been used at birth in most developing countries to prevent TB. The effectiveness of the vaccine in adults has varied between 0 and 80 percent. The BCG vaccine also reportedly interferes with TB testing in some cases. Individuals who anticipate prolonged exposure to TB areas should undergo the tuberculin skin test (TST) or interferon-y release assay (IGRA) before travel and eight to 10 weeks after returning from travel.

**Food and Water Safety**

Water in the DRC is not potable. Stick to bottled or boiled water and avoid ice cubes. Thoroughly wash and peel fruit and vegetables, and avoid undercooked or raw meat and seafood as these are often sources of foodborne illnesses. Avoid the consumption of unpasteurized dairy products.

**Medical Facilities and Services**

Medical facilities and services are extremely limited or non-existent throughout the DRC, and when present, do not meet international standards. Severe illness or injury may require evacuation to the nearest qualified medical facility. Bring enough medication for the intended stay, as most Western over-the-counter or prescription drugs are not available in the country.
DESTINATION DETAILS

Time Zones

**Kinshasa:**
From 1 January to 31 December, West Africa Time (WAT): GMT +1 hour

**Lubumbashi:**
From 1 January to 31 December, Central African Time (CAT): GMT +2 hours

The Democratic Republic of the Congo does not observe Daylight Saving Time.

Currency

Congolese franc (CDF)

Credit Cards

Credit cards are only accepted in major hotels in the capital. The majority of transactions require hard currency of CDF or USD. Travelers should always notify their bank of their travel plans to avoid having their account frozen.

ATMs

There are some international ATMs in Kinshasa that dispense USD. Due to the low value of individual CDF, it is often easier to use USD in transactions. Bills must have been minted within the past 10 years and denominations of at least USD 20 are accepted. Travelers should check with their bank before their trip regarding any fees associated with ATM use.

Banking Hours

From Monday to Friday 08:00-11:30. Hours may vary by bank and location.

Major Holidays

Services and transportation may be affected on/around the following holidays:

<table>
<thead>
<tr>
<th>Date</th>
<th>Holiday</th>
</tr>
</thead>
<tbody>
<tr>
<td>01 January 2018</td>
<td>New Year’s Day</td>
</tr>
<tr>
<td>04 January 2018</td>
<td>Commemoration of the Martyrs of Independence</td>
</tr>
<tr>
<td>16 January 2018</td>
<td>Anniversary of President Laurent Kabila’s Assassination</td>
</tr>
<tr>
<td>17 January 2018</td>
<td>Anniversary of Prime Minister Patrice Emery Lumumba’s Assassination</td>
</tr>
<tr>
<td>30 April 2018</td>
<td>Education Day (observed)</td>
</tr>
<tr>
<td>01 May 2018</td>
<td>Labor Day</td>
</tr>
<tr>
<td>17 May 2018</td>
<td>Liberation Day</td>
</tr>
<tr>
<td>30 June 2018</td>
<td>Independence Day</td>
</tr>
</tbody>
</table>
01 August 2018  Parents' Day
25 December 2018  Christmas Day

NOTE: President, legislative, and provincial elections will be held on 23 December 2018.

Voltage Information
220 V, 50 Hz - Plug type: C, D

International Airports

<table>
<thead>
<tr>
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<th>Airport Code</th>
<th>Airport Location</th>
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<td>FBM</td>
<td>Lubumbashi, Haut-Katanga</td>
</tr>
<tr>
<td>N'Djili International Airport</td>
<td>FIH</td>
<td>Kinshasha, Kinshasha</td>
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ENTRY & EXIT REQUIREMENTS

The following information is for citizens of the United States. If you are a citizen of a country other than the United States, contact an embassy or consulate for up-to-date requirements. For additional questions regarding entry/exit requirements, contact Global Rescue at (+1) (617) 459-4200.

Entrance into the Democratic Republic of the Congo (DRC) requires a passport valid for at least six months beyond the length of the intended trip and a visa. Visas must be obtained before travel at the DRC's Consulate in the United States. An invitation letter/letter of support notarized by an assigned public notary in the DRC and an International Certificate of Vaccination certifying vaccination against yellow fever dated within the last 10 years are required for visa application. Travelers who are unable to provide the required documents may be refused entry.

A valid visa for all destination countries, the correct entry stamp, and an airport fee of USD 50 in cash are required for departure.

Those who wish to visit mining installations must obtain permission from the appropriate government agencies or ministries.

IMPORT RESTRICTIONS

The following items are permitted:

- 100 cigarettes; or
- 50 cigars; or
- 227 grams of tobacco,
- one bottle of alcohol,
- a camera for tourist uses only, and
- perfume for personal use.

The following restrictions apply:

- Pets must have a veterinarian health certificate and proof of inoculations.
- The import of arms and ammunition requires a license.
- Radios and electrical goods are subject to duty tax.
- Satellite telephones, GPS receivers, and
- currency exceeding USD 10,000 must be declared.

The following items are prohibited:

- Weapons, explosives, ammunition and other deadly weapons,
- Pornographic materials,
- illegal drugs, and
- counterfeit items.

EXPORT RESTRICTIONS

The following items are prohibited:

- Illegal drugs,
- firearms, explosives, ammunition and other deadly weapons
- local currency.
The following restrictions apply:

Only polished ivory items, as opposed to raw ivory, may be exported, and are subject to a duty tax.
**IMPORTANT NUMBERS**

<table>
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<th>Service</th>
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<tbody>
<tr>
<td>Intl. Country Code</td>
<td>+243</td>
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<tr>
<td>Fire</td>
<td>N/A</td>
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<tr>
<td>Police</td>
<td>N/A</td>
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<tr>
<td>Ambulance</td>
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</table>

**Contact Information for Select Embassies**

**US Embassy in Kinshasa**
310 Avenue des Aviateurs  
Gombe Commune, Kinshasa  
Telephone: (+243) 8155-60-151

**British Embassy in Kinshasa**
83 Avenue Roi Baudoin  
Gombe Commune, Kinshasa  
Telephone: (+243) 8155-66-200

**Canadian Embassy in Kinshasa (for Canadian and Australian citizens)**
*NOTE: There is no Australian diplomatic mission in the DRC. The Canadian Embassy in Kinshasa provides consular assistance to Australian citizens in the DRC.*
17 Pumbu Avenue  
Gombe Commune, Kinshasa  
Telephone: (+243) 9960-21-500

For other embassies, contact Global Rescue at (+1) (617) 459-4200.