

Operation  Smile

OPERATION SMILE DRC



ROAMING COMPREHENSIVE CARE PROGRAM



In the DRC, many patients live in remote, roadless areas, which makes reaching health services challenging. To address this, Operation Smile DRC's Roaming Comprehensive Care Program brings vital services such as nutrition support, speech therapy and pediatric care directly to communities.



By traveling village to village, the team also educates the public about cleft conditions and identifies patients who might otherwise never receive care.



Click [here](#) to learn more about Operation Smile's Roaming Comprehensive Care Program.





OUR FORMULA FOR TRANSFORMATION

At Operation Smile, we believe safe, essential surgery is a human right. For over 40 years, we've transformed lives, strengthened health systems and built sustainable solutions.



We partner with local volunteers, medical leaders, health ministries, universities and non-governmental organizations to bring essential surgical care closer to patients' homes, starting with cleft surgery and comprehensive care. Together, we transform health systems by training and equipping local professionals, strengthening infrastructure and building capacity for sustainable care.



Operation 100 is our bold strategy to bring essential surgical care closer to patients' homes by investing in frontline health workers and strengthening district hospitals.



By focusing on district hospitals, we're bringing care closer to patients, creating access to surgical care, building local capacity and fostering stronger health systems and communities.



Education is a force multiplier. We equip frontline health workers with the skills and resources to deliver sustainable, high-quality care independently for their communities.



Operation 100 is just the start.

We're breaking down barriers to surgical care and advancing health equity, so no one is left behind.

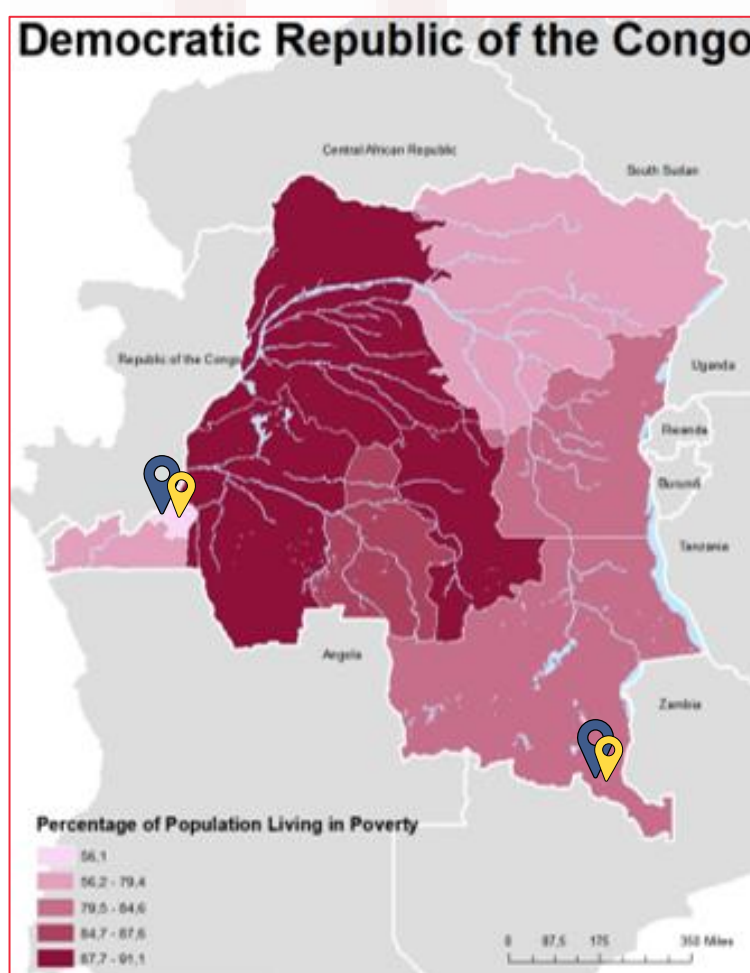


BRINGING CARE CLOSER TO HOME

To ensure that every child has access to care close to home, we equip local healthcare providers with the skills and resources to deliver high-quality care. Through our hub-and-spoke model, hubs provide direct patient care while training and supporting providers in under-resourced communities, the spokes. This approach strengthens local healthcare systems and builds the expertise needed to sustain care for generations to come.

Our hubs are **Cliniques Universitaires de Kinshasa** and **Clinique Ngaliema** in **Kinshasa**, and **Cliniques Universitaires de Lubumbashi** in **Lubumbashi**. All three hospitals serve as Operation 100 sites.

In Fiscal Year 2027, **Clinique Ngaliema**, **Cliniques Universitaires de Kinshasa** in Kinshasa and **Cliniques Universitaires de Lubumbashi** in Lubumbashi will begin delivering surgical care as Operation 100 sites.



90% of patients who arrive at Operation Smile programs travel more than 12 hours to receive care due to the country's poor road systems. To address this, Operation Smile has established a roaming comprehensive care program to bring care to patients unable to reach it otherwise.

THE NEED



1 in 1,260 children

In the DRC, it is estimated that for every 1,258 births, one child is born with a cleft condition.

Out-of- pocket expenses

74% of the population in the DRC faces the risk of catastrophic expenditure for surgery, meaning they must make out-of-pocket payments exceeding the average household income. In comparison, only 2% of the population in high-income countries encounters this risk.

Shortfall of health workers

Compared to high-income countries, which have an average of 11.4 nurses and midwives per 1,000 people, the DRC faces a shortage with just 1.1 nurses and midwives per 1,000 individuals. The DRC has fewer than one specialized surgical worker per 100,000 people, while in high-income countries the rate stands at 71 specialized workers per 100,000 people. This is also far below the target of 20 specialized surgical workers per 100,000 people set by the Lancet Commission on Global Surgery.



OUR IMPACT IN THE DRC

Operation Smile has been working in the DRC since 2009, providing access to safe surgical and comprehensive care for children born with cleft conditions. Since then, we have delivered life-changing surgeries to more than **3,000 patients**.

But there is more to do.

In July 2026-June 2027, Operation Smile will invest \$1,812,036 in surgical care, comprehensive cleft care, medical education and health system strengthening, helping more children access life-changing care closer to home while building the skilled local teams needed to deliver it for generations to come.



Program Pillar	Budget
Direct Patient Care	\$1,013,145
Education & Training	\$221,614
Health Infrastructure & Equipment	\$44,734
Health Policy & Advocacy	\$4,700
Student Programs	\$25,540
Local Program Operations	\$456,998
Emergency Relief	\$45,305
Total July 2026 - June 2027	\$1,812,036

Outputs: July 2026 – June 2027	
Cleft Surgical Patients	385
Nutrition Patients	360
Patients Recruited	420
Community Health Worker Trainees	1,800
Total Training Spots	413
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*Estimated costs in USD based on current knowledge and subject to change in response to an evolving healthcare landscape

*Table reflects country-level budget. Operation Smile's global office makes additional centralized investments to support country-level programming



JULY 2026 – JUNE 2027 PROGRAMS



Surgical Care

Operation Smile will continue expanding access to safe, high-quality cleft surgery across the DRC, helping more patients receive specialized treatment and reducing the need to travel long distances to access care.

Ongoing hospital-based programs at Cliniques Universitaires de Lubumbashi and Clinique Ngaliema in Kinshasa will provide year-round surgical services, giving patients more consistent access to cleft treatment in their communities. A short-term surgical program at Clinique Ngaliema will expand access to life-changing surgical care for patients in need. By leveraging the hospital's five operating tables, the program can treat more patients efficiently, helping reduce unmet surgical needs and improve patient health outcomes.



Comprehensive Care

Comprehensive cleft care extends far beyond surgery, ensuring patients receive the nutritional support needed to safely undergo treatment and achieve the best possible outcomes. In a country where 90% of patients travel more than 12 hours to reach an Operation Smile program due to poor road infrastructure, access to ongoing care remains a significant barrier. To bridge this gap, Operation Smile has established a roaming comprehensive care program that brings essential services closer to patients and families. Through biweekly nutrition clinics at hub hospitals, quarterly outreach visits to spoke sites across Eastern and Western regions, and monthly nutrition consultations at spoke facilities, patients will receive the nutritional support needed to improve surgical readiness, promote recovery and strengthen long-term health.



Medical Education

Training the next generation of local medical providers is essential to building sustainable cleft care capacity. Operation Smile will support pediatric residency training at the University of Kinshasa, equipping future specialists with the knowledge and clinical experience needed to diagnose and treat children with surgical conditions and strengthening the pipeline of providers who can deliver care locally. Specialized training for pre- and post-operative, operating room, and post-anesthesia care unit nurses will help strengthen the quality and safety of surgical care, supporting better patient outcomes throughout treatment and recovery. Nutritionists at hub and spoke sites in Kinshasa and Lubumbashi will also receive training to strengthen nutritional care, helping patients achieve better health and be better prepared for cleft treatment.



JULY 2026 – JUNE 2027

PROGRAMS

(CONTINUED)



Infrastructure and Equipment

Strategic investments in operating room infrastructure will strengthen the capacity hospitals to deliver safe surgery. At Clinique Ngaliema in Kinshasa, operating room renovations will enable a fully credentialed local team to provide increasingly independent surgical care, expanding access to treatment for patients and strengthening the long-term sustainability of cleft services. At the University of Lubumbashi (Cliniques Universitaires de Lubumbashi), operating room renovations will further strengthen a key training site in southern DRC, supporting year-round surgical care and the continued education of future cleft surgeons and multidisciplinary specialists.



Policy & Advocacy, Student Programs and Patient Management

Operation Smile will strengthen the environment for sustainable cleft care by advancing surgical leadership, developing future advocates and expanding pathways to care. In Kinshasa, support for the National Surgical Society and broader National Surgical, Obstetric and Anesthesia Plan (NSOAP) efforts to strengthen the prioritization of surgical care within the health system. Through the U-Lead Student Conference, high school and university students will build leadership skills and become advocates for equitable access to care in their communities. Nationwide, patient outreach, awareness campaigns and community partnerships will help identify more patients in need of treatment and connect them to care through stronger referral networks.





FIVE-YEAR VISION

By 2030, children born with cleft conditions across the Democratic Republic of the Congo will be able to access surgical and comprehensive cleft care closer to home through a growing network of locally trained providers and hospitals. Care will be increasingly available year-round, with stronger referral pathways connecting patients to the services they need and local teams equipped to provide care independently.



Existing hubs will increase their surgical capacity, while Jason Sendwe Hospital in Lubumbashi will become a new hub supporting care across the region alongside four new spoke sites, creating a stronger network of care that can identify, refer and treat more patients



Jason Sendwe Hospital in Lubumbashi, Hôpital Provincial du Nord-Kivu in Goma (Nord-Kivu Province), Hôpital Général de Référence de Kikwit in Kikwit (Kwilu Province), Hôpital Général de Référence de l'Institut Médical Évangélique (HGR IME) in Kimpese (Kongo-Central Province) and Hôpital Général de Référence Mwangeji in Kolwezi (Lualaba Province) will go live as Operation 100 sites after local teams complete training to provide surgery independently. These sites will expand year-round access to surgical care for patients across the DRC.



Comprehensive care will become increasingly available across spoke sites, bringing nutrition, speech therapy, dental care and psychosocial support closer to patients and families. By integrating these services with surgery, patients can receive support for their health, development and well-being throughout their treatment journey.



By 2030, a growing cadre of Congolese specialists will help lead this care. Newly trained residents from the College of Surgeons of East, Central and Southern Africa (COSECSA), College of Anaesthesiologists of East, Central and Southern Africa (CANECSA) and Master of Medicine (MMed) will bring additional expertise to spoke sites, with mentorship from teaching hubs at the University of Kinshasa and the University of Lubumbashi. Training priorities will include post-anesthesia care unit (PACU) physicians, pediatric anesthesia providers, craniofacial surgeons and dentists, strengthening the multidisciplinary teams needed to deliver cleft care locally and sustainably.



At the national level, stronger partnerships with the Ministry of Health, support for a national surgical society and contributions to a roadmap toward the National Surgical, Obstetric and Anesthesia Plan (NSOAP) will help strengthen the role of surgical care within the country's health system. At the community level, engagement with leaders, religious and traditional organizations, radio stations and local focal points will help identify patients earlier and connect them to appropriate care. Student clubs at high schools and universities, including medical faculties at the University of Kinshasa and University of Lubumbashi, will build awareness of surgical care and help inspire the next generation of health professionals.



Together, these investments will help shift cleft care in the DRC from care that patients must travel long distances to find toward a more accessible, locally led system: one where trained teams, connected hospitals and stronger referral pathways enable more children and families to receive the care they need closer to home.



OUR PARTNERS



Operation Smile works closely with the Ministry of Health and the National Program of Nutrition, PRONANUT.



PRONANUT is Operation Smile's nutrition partner in the DRC. CELORE (Centre de Logopédie la Rencontre) is Operation Smile's partner in speech care delivery.



We partner with leading academic institutions in the DRC, including the University of Kinshasa and the University of Lubumbashi. Operation Smile partners with the University of Cape Town to provide educational exchanges between students in the DRC and South Africa.



REFERENCES



Carlson L.C., Stewart B.T, Hatcher K.W., et al. (2016). A model of the unmet need for cleft lip and palate surgery in low- and middle-income countries. *World Journal of Surgery*, 40 (12).

Mbuyi-Musanzayi S. et al (2018) Non-syndromic cleft lip and/or cleft palate: Epidemiology and risk factors in Lubumbashi (DR Congo). Last accessed February 28, 2023. Retrieved from: <https://pubmed.ncbi.nlm.nih.gov/29802056/>

The World Bank (2022). Poverty and Equity Brief. Africa Eastern and Southern. Democratic Republic of Congo. Last accessed February 13, 2023. Retrieved from: https://databankfiles.worldbank.org/public/ddpext_download/poverty/987B9C90-CB9F-4D93-AE8C-750588BF00QA/current/Global_POVEQ_COD.pdf

The World Bank, World Development Indicators (2020). Congo, Democratic Republic. Risk of catastrophic expenditure for surgical care (% of people at risk). Last accessed February 13, 2023. Retrieved from: <https://data.worldbank.org/indicator/SH.SGR.CRSK.ZS?locations=CD>

The World Bank, World Development Indicators (2018). Nurses and Midwives (per 1,000 people) – Congo, Democratic Republic. Last accessed February 15, 2023. Retrieved from: <https://data.worldbank.org/indicator/SH.MED.NUMW.P3?locations=CD>

The World Bank, World Development Indicators (2018). Specialist surgical workforce (per 100,000 population) – Congo, Democratic Republic. Last accessed February 15, 2023. Retrieved from: <https://data.worldbank.org/indicator/SH.MED.SAOP.P5?locations=CD>