



Democratic Republic of Congo

Air pollution was the 2nd leading risk factor for premature death in DRC in 2019, accounting for around 12% of all deaths (nearly 70,000). Considered separately, ambient particulate matter (PM_{2.5}) ranked as the 16th leading risk factor, and household air pollution (HAP) ranked 2nd. Ozone was not in the top 20 risk factors.

Key Statistics at a Glance

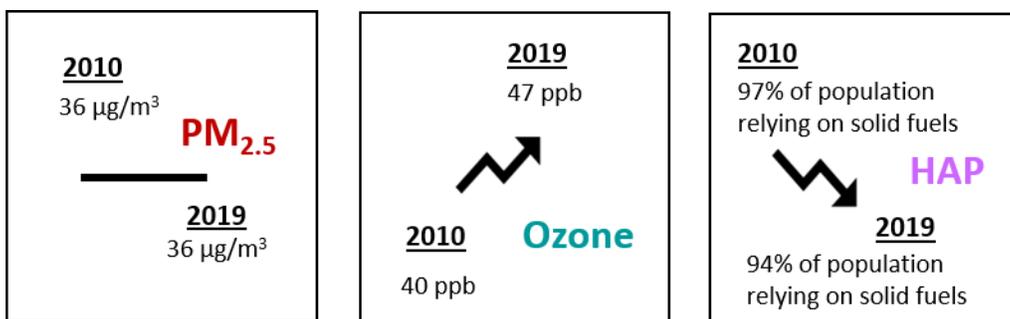
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| <p>Nearly 70,000 deaths due to air pollution in 2019.</p> <p>Nearly 20% of infant deaths attributable to air pollution.</p> |  <p>36 µg/m³ population-weighted annual average PM_{2.5} concentration.*</p> <p>More than 11,000 deaths attributable to exposure to outdoor PM_{2.5}.</p> |  <p>93% of the population used solid fuels for cooking.</p> <p>More than 58,000 deaths attributable to exposure to household air pollution.</p> |
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Key Exposure Facts

100% of DRC's population lives in areas where PM_{2.5} levels are above the WHO guideline for healthy air (10 µg/m³). **

- Between 2010 and 2019, exposure to PM_{2.5} remained the same while exposure to ozone increased and exposure to household air pollution declined.
- Among the 47 countries in the sub-Saharan Africa region, DRC ranks 26th in PM_{2.5} exposure.

How Have Pollutant Exposures Changed Between 2010 and 2019?



* Please note that PM_{2.5} concentrations reported here are estimated using a combination of satellite data, ground air quality monitoring data, and chemical transport models. These estimates can be more uncertain in regions where ground monitoring data are limited or not available. In DRC, the best estimate of the annual average exposure is 36 µg/m³, but it may range from 21 µg/m³ to 58 µg/m³.

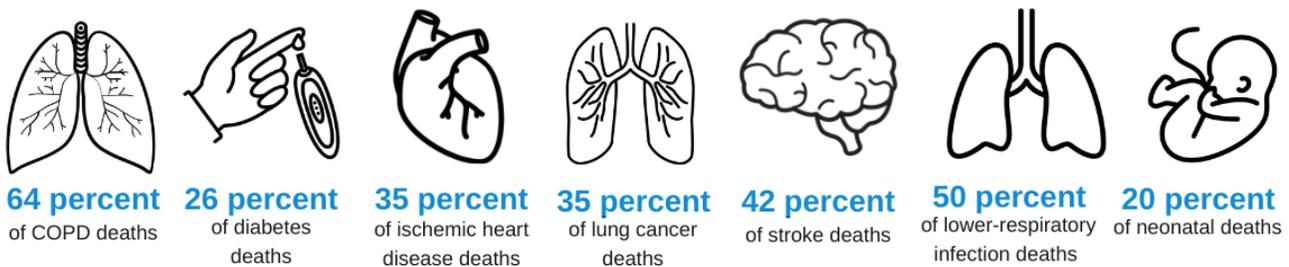
** WHO provides an Air Quality Guideline of 10 µg/m³ for PM_{2.5} to minimize health risks to populations, as well as three interim targets (15 µg/m³, 25 µg/m³, and 35 µg/m³) as incremental steps toward the progressive reduction of air pollution.

STATE OF GLOBAL AIR /2020

Air Pollution Accounts for a Substantial Percentage of Global Deaths from Specific Causes.

Air pollution exposures, including exposure to outdoor PM_{2.5} and HAP, have been linked to increased hospitalizations, disability, and early death from respiratory diseases, heart disease, stroke, lung cancer, and diabetes, as well as communicable diseases like pneumonia. Exposure to ozone is linked to chronic obstructive pulmonary disease (COPD), and in children, especially those under the age of 5, increases susceptibility to lower-respiratory tract infections. Exposure to PM_{2.5} also puts mothers at risk of delivering babies too early and smaller than normal, and such babies are more susceptible to dying from a range of diseases.

Percentage of Deaths (by Cause) Attributed to Air Pollution in DRC in 2019



Key Health Facts

- Air pollution is the 2nd leading risk factor for premature death in DRC. Leading causes of death in DRC include malaria, lower-respiratory infection, tuberculosis, diarrheal diseases, and ischemic heart disease, while leading risk factors include malnutrition, high blood pressure, unsafe water, sanitation and hygiene, and high blood sugar.
- There are 189 deaths per 100,000 people attributable to air pollution in DRC compared with 86 deaths globally, adjusted for differences in age.
- 10% of total air-pollution-attributable deaths in DRC are in children under 5, and 19% are in people over 70.

FOR MORE INFORMATION:

For the full report and additional data, please visit www.stateofglobalair.org.

ADDITIONAL RESOURCES:

For open-access, real-time air quality data, visit OpenAQ



For more details, please visit
www.stateofglobalair.org
Contact us
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The State of Global Air website is a collaboration between the Health Effects Institute and the Institute for Health Metrics and Evaluation, with expert input from the University of British Columbia.