#### **Democratic Republic of the Congo**

The Development Challenge: The Democratic Republic of the Congo (DRC) is moving, slowly and haltingly, towards reunification of the country, national elections, and the end of conflicts involving both external and internal parties. However, the depth of poverty and the scale of need in the DRC remain enormous, with roughly two-thirds of the population living in rural areas and ensnared by desperate poverty. This poverty manifests itself in extremely low incomes and purchasing power, abysmal access to and availability of fundamental health services, and a near total lack of basic education. The capital, Kinshasa, with an estimated eight million people, already is dangerously overcrowded, with most people lacking access to basic services. A U.N. human development report in 2002 ranks DRC, with a population of 55 million, as 155 out of 173 countries. The per capita gross domestic product is \$107. Congo's external debt in 2001 was \$12 billion, and there is massive internal debt resulting in a sequestration of capital inhibiting economic growth. Infant mortality is 126 per 1,000 live births, and under five mortality is 213 per 1,000. Congo's maternal mortality rate is 1,289 per 100,000 live births, the highest in Africa. Life expectancy is 51 for men and 47 for women. The gross primary school enrollment rate is 55%. Only 25% of students attending school complete five years of primary school. In 1999, only 47% of the population had access to safe water.

U.S. national interests in the DRC are to: promote democratic systems and practices; resolve regional conflicts; assist refugees and victims; promote economic growth in developing and transitional economies; and promote international health. The reduction of poverty, conflict and despair will lessen the likelihood of the region serving as a breeding ground for recruits into terrorist activities. Improved regional stability and economic growth will facilitate progress in the global war on terrorism. Reducing the rate of transmission of HIV/AIDS and other infectious diseases and improving health status in the region will diminish the risk of further economic disruption, political disintegration, impoverishment and conflict.

The USAID Program: At present, the USAID program in DRC has only one objective, which focuses on assisting the Congolese people to solve their problems across all sectors through participation in public, private and civil society institutions and organizations. Through several activities, the program works to enhance child and maternal health in targeted health zones, improve food security and livelihoods, strengthen civil society and promote justice. FY 2003 funds will be used to implement ongoing programs in health (e.g., strengthen key health facilities, support national health campaigns, strengthen HIV/AIDs education and referral services), economic growth (e.g., seed multiplication, microfinance, farmer extension services), and environment. FY 2004 funds as requested will support a new USAID strategy for the period FY 2004-2008. This new strategy will more explicitly focus on health, livelihoods, democracy and governance, and education as well as on the reintegration of ex-combatants by articulating separate objectives for each. USAID does not work directly with the government of DRC (GDRC) in most program areas. The private sector in the DRC is extremely limited, and mostly confined to the extractive industries. The Mission is exploring opportunities to collaborate directly with the private sector in development of public private alliances.

Other Program Elements: In addition to the resources requested, humanitarian assistance will support key programs in the DRC, particularly in providing emergency assistance to the most vulnerable populations with emergency feeding programs, seeds and tools distribution, small-scale infrastructure rehabilitation, and logistical support to areas outside government control. P.L. 480 food assistance in FY 2003 will continue to support the World Food Program's Protracted Relief and Recovery Operation which provides Title II emergency food assistance. USAID/Washington funds for transition initiatives will continue to support the country's transition from war to peace and lay the groundwork for an eventual transition to democracy and reunification. To alleviate isolation of key population centers, transition funding will also support a national, multi-faceted communication strategy that fosters exchanges across the country focusing on dialogue, conflict prevention, and engaging Congolese in debates of national importance. DRC also benefits from USAID/Washington funds earmarked to support gorillas through grants to the International Gorilla Conservation Program and the Diane Fossey Gorilla Foundation International.

Other Donors: USAID's strategy in the DRC is designed to mesh with plans of other donors, including the World Bank and the International Monetary Fund, and takes into account plans prepared by the GDRC. With the exception of large infrastructure projects (addressed by the World Bank and the European Commission), the sectors in which other donors are engaged roughly mirror USAID's current portfolio: health, democracy and governance, agriculture/livelihoods, environment, and education. Health is one of the largest sectors for donors, with activities ranging from basic support to health zones, to vaccinations, HIV/AIDS, tuberculosis, malaria, and family planning programs. The largest donors in the health sector are the European Commission (EC), Belgium, and the World Bank. Canada, Italy, Germany, UNICEF and other donors also have programs. Democracy and governance activities fall into two categories: government capacity building (EC, World Bank, France, and Canada) and support to civil society (Belgium, Canada, Sweden and the United Kingdom). Programs directed at income generation are often linked to agriculture/food security; this is a field of engagement for many donors, including the Food and Agriculture Organization (FAO), Belgium, Canada, the EC, France, and Germany. A limited number of donors (including France, the EC, Germany, the IBRD and UNESCO) are involved in work related to the environment, including development of government capacity and direct protection of natural resources. Relatively few donors (World Bank, UNICEF, and Belgium) are working in education.

# Democratic Republic of the Congo PROGRAM SUMMARY

(in thousands of dollars)

(in measure)									
Accounts	FY 2001 Actual	FY 2002 Actual	FY 2003 Prior Request	FY 2004 Request					
Child Survival and Health Programs Fund	15,337	21,178	13,476	18,086					
Development Assistance	4,788	4,773	10,024	6,082					
Economic Support Fund	4,978	2,050	0	4,250					
PL 480 Title II	14,244	11,555	0	0					
Total Program Funds	39,347	39,556	23,500	28,418					

STRATEGIC OBJECTIVE SUMMARY								
660-001 Health, Agriculture and Conflict Mitigation								
CSH	15,337	21,178	13,476	18,086				
DA	4,788	4,773	10,024	6,082				
ESF	4,978	2,050	0	4,250				

#### **Data Sheet**

USAID Mission:Democratic Republic of the CongoProgram Title:Health, Agriculture and Conflict MitigationPillar:Global Health

Strategic Objective: 660-001
Status: Continuing

Proposed FY 2003 Obligation: \$13,476,000 CSH; \$10,024,000 DA

Prior Year Unobligated: \$1,673,000 CSH; \$2,087,000 DA; \$500,000 ESF

**Proposed FY 2004 Obligation:** \$18,086,000 CSH; \$6,082,000 DA; \$4,250,000 ESF **Year of Initial Obligation:** 1998

Estimated Completion Date: 2003

**Summary:** USAID's program encourages people to be involved in the solutions to the country's many problems by: improving health status and the health care delivery system; promoting stability, strengthening the rule of law and respect for human rights, promoting the development of a politically active civil society, and protecting vulnerable and war affected children and orphans; and supporting seed multiplication, training for extension services, improving market access, and providing micro-credit to rural producers and marketers.

### Inputs, Outputs, Activities:

#### FY 2003 Program:

Health (\$13,476,000 CSH). Health facilities in 81 health zones will receive technical assistance, training, and commodities to support a minimum package of services, including malaria, tuberculosis (TB), immunizations, obstetric and family planning care, and polio activities. Technical support will be given to immunization campaigns and an integrated infectious disease surveillance and response system. Quality of health services will be supported through technical assistance for improved supervision and training, enhanced management systems, and improved policy-making. Outreach and social marketing will increase awareness of available health services. Training and technical assistance will support HIV/AIDS education and referral services and encourage behavior change for individuals at high risk of HIV/AIDS through voluntary counseling and testing, peer education, social marketing, and mass media campaigns. Principal contractors/grantees are: Interchurch Medical Assistance, UNICEF, WHO, Catholic Relief Services, Centers for Disease Control and Prevention, Tulane University, Christian AID, Family Health International, Population Services International, Tuberculosis Coalition and the Malaria Action Coalition (all prime).

Economic Growth (\$10,024,000 DA). USAID will support seed multiplication for soybeans, beans, peanuts, corn, and rice in six provinces. Communities will be trained in improved farming systems, soil fertility maintenance and resource conservation. Rural credit institutions will provide expanded access to credit. The principal contractors and grantees are: the International Institute of Tropical Agriculture (subgrantee Southeastern Consortium for International Development), Associates in Rural Development, the Innovative Resources Management, the Zoological Society of Milwaukee and FINCA.

Humanitarian Assistance. USAID will continue to provide emergency assistance to the most vulnerable populations. Activities will include small-scale infrastructure rehabilitation, seed multiplication, and distribution of agriculture tools and fishing equipment to war-affected, vulnerable and internally displaced persons, as well as emergency feeding programs.

#### FY 2004 Program:

USAID expects approval of a new strategy for DRC for the period FY 2004 - 2008 during FY 2003. USAID will officially notify these new objectives once they are approved.

Health (\$18,086,000 CSH). Technical assistance, training, transportation and commodities will be used to expand coverage of child and maternal health services, including vaccinations and appropriate disease treatment. Emphasis will be placed on community involvement in the management of health services, support to health providers in client-centered services and designing communication strategies appropriate for health zones. Technical assistance and other support will be provided to the Ministry of Health to improve management of service delivery in immunizations (including polio), infectious diseases, obstetrics and family planning, and nutrition. Principal contractors/grantees are to be determined.

Democracy and Governance (\$2,000,000 ESF, \$800,000 DA). Training and technical assistance will encourage a solid base for democratic and participatory governance, provide anti-corruption interventions, improve and increase the use of communications media, and empower women for leadership roles. USAID will support the preparation for credible elections (tentatively scheduled for 2005), and government and non-governmental organization groups - nationally, regionally and locally - to build a solid base for democratic and participatory governance. Specific assistance to the elections will include support to the development of viable structures, such as the national electoral commissions and civil society and other private structures central to successful preparations for an effective election. Principal contractors/grantees are to be determined.

Livelihoods (\$3,522,000 DA). USAID will continue technical assistance for seed multiplication and farmer extension services. Funding and technical assistance will help rehabilitate feeder roads and other basic infrastructure and improve financial services for small and medium sized farm firms. Women will be supported in all aspects of agricultural production and marketing by providing in-kind and cash credits for income-generating opportunities and technical training. Principal contractors/grantees are to be determined.

Education (\$1,760,000 DA). USAID will provide teacher training as well as community learning centers and interactive radio programs. To maximize girls' entry and retention, schools will be made more girl-friendly, such as building separate latrines for girls and increasing the number of female teachers. Principal contractors/grantees are to be determined.

Demobilization and reintegration (\$2,250,000 ESF). ESF funds will be used to help with the reintegration of ex-combatants into targeted rural areas, specifically by providing temporary income generating opportunities for communities receiving demobilized ex-combatants. USAID also plans to support the sensitization of Congolese armed groups on the nature and benefits of demobilization and return to civilian life through media campaigns. Principal contractors/grantees are to be determined.

Humanitarian Assistance. Emergency food and non-food assistance will be provided, if/as necessary, depending on the circumstances in DRC.

All family planning agreements will incorporate clauses that implement the President's directive reinstating the Mexico City policy.

**Performance and Results:** In 2002, nationwide vaccination coverage increased from 20% to 40.1%, and overall health service utilization increased from less than 15% to an average of 26% in 63 of the 81 USAID-supported health zones. The campaign to administer vitamin A attained over 50% national coverage. The infectious disease surveillance system identified zero cases of wild poliovirus and over 90% of children under five were vaccinated during the National Immunization Days for Polio. In FY 2002, USAID supported civil society representation at the Inter-Congolese Dialogue. An average of 150 people per week accessed information on governance and human rights on 100 USAID-supported Internet sites in six cities throughout the country, and over 1,000 human rights activists across the country were trained. Eleven schools were built, educating over 9,000 students, and 1,350 primary school age girls received scholarships. Support to the U.N. national radio provided reliable and accurate information about the peace process and helped to bring communities throughout the country closer together.

As the current, five year transitional program comes to an end, USAID involvement has ensured that health activities are available throughout the country and provide a solid base for additional activities. In

addition, participation in civil society has increased and local governance has improved at the same time political dialogue and reconciliation efforts have been advanced. While some achievements have been realized in agriculture and natural resource management, USAID investments to date have not been sufficient to make a significant difference in food security in a country the size of DRC.

# **US Financing in Thousands of Dollars**

## **Democratic Republic of the Congo**

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660-001 Health, Agriculture and Conflict Mitigation	СЅН	DA	DFA	ESF	
Through September 30, 2001	<u>l</u>				
Obligations	15,723	5,110	6,813	5,970	
Expenditures	1,827	860	6,584	1,736	
Unliquidated	13,896	4,250	229	4,234	
Fiscal Year 2002					
Obligations	19,505	3,182	0	6,478	
Expenditures	10,763	3,977	229	3,342	
Through September 30, 2002					
Obligations	35,228	8,292	6,813	12,448	
Expenditures	12,590	4,837	6,813	5,078	
Unliquidated	22,638	3,455	0	7,370	
Prior Year Unobligated Funds					
Obligations	1,673	2,087	0	500	
Planned Fiscal Year 2003 NOA					
Obligations	13,476	10,024	0	(	
Total Planned Fiscal Year 2003					
Obligations	15,149	12,111	0	500	
Proposed Fiscal Year 2004 NOA	,				
Obligations	18,086	6,082	0	4,250	
Future Obligations	0	0	0	(	
Est. Total Cost	68,463	26,485	6,813	17,198	