

# Country Office Annual Report 2019

## Democratic Republic of Congo



### Update on the context and situation of children

#### Situation Update in the Country

The Democratic Republic of the Congo (DRC) has an estimated population of 85 million. Spread over 2.34 million square kilometres, 70 per cent of the population live in rural areas. Fifty-two million are children under the age of 18, including 18.7 million adolescents between ten and 18 years old. With an annual growth rate of 3.1 per cent, DRC's population doubles every 23 years, resulting in rapid urbanization and increasing pressure on limited social systems.

Despite its wealth in natural resources and potential for economic development, the DRC faces significant development challenges, ranking 176 out of 189 countries in the 2018 Human Development Index (UNDP 2018). National income per capita is at US\$ 432, and 61 per cent of the population live below the poverty line (World Bank 2018). The weak diversification of the primarily agriculture-based economy and the under-development of the secondary and tertiary sectors lead to a significant lack of employment opportunities, particularly affecting young people and women, with youth unemployment at 37.8 per cent and women's unemployment at 19.6 per cent.

With its decentralized governance structure composed of 26 provinces, the DRC ranked 47 out of 54 African countries on the 2018 Ibrahim Index of African Governance. It is among the 18 lowest-scoring countries, with increasing deterioration over the past ten years. This performance can be partially explained by structural causes, especially weakened rule of law, inadequate accountability, and a lack of technical and human capacities for efficient institutions that provide services to citizens.

Consequently, security and humanitarian challenges have intensified, particularly with the conflicts that inflamed the regions of Grand Kasai and Ituri. These conflicts exacerbated socio-economic vulnerability, with an estimated 12.8 million people, more than 15 per cent of the population, in need of humanitarian assistance and protection in 2019, including 7.5 million children.

Mass population displacements persisted following continuous inter-community clashes and armed group activities, causing the internal displacement of five million persons, in addition to 2.1 million returnees, as registered in 2019 by OCHA. More than 500,000 returnees from Angola in Kasai and Kwango provinces were also identified between October 2018 and May 2019.

DRC is also prone to natural catastrophes. Towards the end of 2019, heavy rain and flooding affected the western part of the country. In South and North Ubangi provinces, around 380,000 people were at risk of water-borne disease outbreaks, particularly cholera, due to overflowing latrines and poor hygiene conditions following the rains and flooding.

Within this context of population movements, natural catastrophes, conflicts, and epidemics, combined with low access to quality basic services, children remain the most vulnerable. The UNICEF-supported multiple-indicator cluster survey (MICS) for 2018 showed that only 35 per cent of children are fully vaccinated, 42 per cent of children are stunted, and nearly six million children aged six to seventeen are out of school. The child protection working group, co-lead by UNICEF and Save the Children, confirmed that as of October 2019, more than 3.3 million children were in need of protection due to conflict, gender-based violence, and recruitment in militia groups, with Ituri, South Kivu, and Kasai provinces being the most affected. Gender-based discrimination remains widespread in education, health, economics activities and land issues to cite some of the major areas where women and girls are even more vulnerable.

In 2019, severe acute malnutrition afflicted 1.4 million children and multiple disease outbreaks disproportionately affected children. With 222,939 measles cases and 4,455 deaths, the number of children affected by measles in 2019 was over triple than in 2018 (Health Cluster 2019). Nationwide, 24,391 cholera cases and 438 deaths were reported by the cholera national program. Although this shows a slight decrease in cases compared to previous years, 13 provinces were still affected by outbreaks, with North and South Kivu being the most affected. The DRC also faces a circulating vaccine-derived poliovirus type 2 (cVDPV2) outbreak, with 42 cases in eight provinces (GPEI 2019). Last but not least, the country continues to face the world's second largest Ebola outbreak, with 3,147 confirmed cases, including 2,064 deaths, in 29 health zones in North Kivu and Ituri provinces (UNICEF 2019). Women and children have been disproportionately affected, respectively at 56 and 28 per cent of confirmed and probable cases.

Despite the challenges, that children and women in the DRC faced, the peaceful political transition in January 2019 offers a genuine opportunity to work towards the achievement of the Sustainable Development Goals with the President's Programme (*Programme du Président de la République*) prioritizing investments in social development, the protection of civilians, good governance, regional and global partnerships, and respect for human rights.

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Within this context, between challenges and opportunities, UNICEF has continued to support access to basic social services, especially for the most vulnerable children, and has provided assistance to more than three million people affected by humanitarian crises in the DRC.

### Major contributions and drivers of results

#### Achievements per Goal Area

##### 1. Every child survives and thrives:

The Child Survival and Development Programme, aims to increase the effective coverage of evidence-based, high impact interventions to reduce maternal, newborn, and child mortalities while promoting the growth and development of children. Key areas of focus include (i) immunization, (ii) management of the main killer diseases of children under-five, (iii) reduction of stunting, (iv) health system strengthening, and (v) response to health and nutrition emergencies.

In 2019, UNICEF supported the national acceleration plan to improve vaccination in low performing health zones, known as the Mashako Plan. The percentage of health centres equipped with solar refrigerators increased to 81 per cent, from 51.7 per cent in 2017. Over 4.6 million children under five years of age were vaccinated in 92 targeted health zones in response to the polio outbreak, exceeding the target of 4.3 million children.

The National Forum on Immunization and Polio Eradication was held in July 2019 under the leadership of the President of the Republic, renewing political commitment and accountability for vaccination, in line with the roadmap for the universal health coverage agenda. However, frequent stock ruptures caused by delays in the disbursement of the state budget for vaccine procurement led to a decrease in routine immunization coverage, from 96.6 per cent in 2018 to 85 per cent in 2019 and based on administrative data. While, according to the 2018 MICS data (released in 2019) the immunisation coverage stands to 47.6 per cent only. This data would reflect the recurrent outbreaks in the Country.

The 2018 MICS showed, also, a decline in under-five and neo-natal mortality rates between 2010 and 2017, from 116 to 91 deaths per 1,000 live births and from 41 to 29 deaths per 1,000 live births, respectively. (WHO, WB, UNICEF estimates).

These results can be partially attributed to the high coverage treatment of the main killer diseases, with a 95 per cent treatment rate for diarrhoea (640,810 cases) and pneumonia (721,817 cases) among children under five.

UNICEF had also invested in community-based interventions, including the provision of more than 2.3 million medical kits for the treatment of diarrhoea and fever, benefitting 1,520,000 children. The UNICEF-supported clinical mentorship programme also resulted in 177,572 pregnant women receiving safer delivery kits in 48 health zones and contributed to increasing deliveries assisted by skilled health providers, from 75 per cent in 2016 to 85 per cent in 2019 in the target areas.

In 2019, the nutrition situation remained worrisome in at least seven provinces with nutrition and mortality surveys conducted in nine provinces<sup>[1]</sup> showing critical levels of global acute malnutrition that are two times higher than the established threshold (5 per cent).

To detect and respond to nutritional crises, UNICEF supported the National Nutrition Program (Pronanut) to strengthen the nutritional surveillance and early warning, in 785 sites, through which 30 per cent of nutritional crises were identified. As a response, nutrition interventions for 436,013 severely malnourish children were scaled up in 145 health zones with a cure rate of 84.5 per cent.

Another important factor supporting the reduction of malnutrition among young children is the diet diversity. This includes receiving vitamin A supplements and deworming as well as providing counseling, cooking demonstrations and home visits to mothers and caregivers. As such 1,287,937 caregivers were reached, 10,674,236 children received vitamin A supplements and 8,760,079 children were dewormed.

UNICEF continued hosting the Secretariat of the Inter-Donor Group on Health, provides technical expertise for the universal health coverage roadmap and the post-Ebola strategic plan. Within the Nutrition Donor Group, UNICEF kept on playing a key role in leveraging resources and capacities for scaling up nutrition services and practices.

##### 2. Every child learns

The Quality Primary Education for All programme contributes towards universal access to education and increase in the

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completion of quality education supported by the life cycle approach to children. Key areas of focus include (i) access and quality of education, (ii) governance of the education sector, and (iii) education in emergencies.

DRC made significant progress towards universal access to primary education, with a primary net rate of admission that increased from 50 per cent in 2010 to 75 per cent in 2019. In June 2019, an exceptional influx of children (between three and four million) was observed in schools when the newly elected President effectively implemented school fee abolition to all grades. To accompany this dynamic, UNICEF provided 375,839 children (192,228 girls) with individual education and early learning materials, while advocating for the implementation of the necessary follow-up measures to sustain the decision. These measures include an increased national budget allocation for education, only at 10.6 per cent since 2016, fast-tracked classroom construction to accommodate the surplus of children, and improved quality and inclusive education for all.

Despite remarkable progress, 3.5 million children in the compulsory school age (six to eleven years) are still out of school and, according to the MICS data, 33% do not complete the primary cycle. These children are amongst the most vulnerable and invisible: they are working, they live on the streets, they have disabilities, they are victims of violence.

To reintegrate out of school children and adolescents into learning, UNICEF has supported the Ministry of Social Affairs (DIVAS) to improve the overall quality of education delivered in their catch-up centers. Three main interventions have resulted in more tailored and meaningful learning for children and adolescents. These include the integration of life skills into the catch-up curriculum administered by the DIVAS, the alignment of this same curriculum with the national primary education curriculum, and the capacities of 38 master trainers on this revised programme.

In areas affected by conflict, 257,313 students (133,827 girls) were provided with emergency education, including the establishment of semi-permanent learning spaces, peace-building activities and psychological support for children and teachers in need.

UNICEF as the coordinating agency of the Global Partnership for Education, brought forward significant technical assistance to the Ministry of Education for the joint review of the 2016-2025 National Education and Training Strategy. While, through the partnership and advocacy with Education Cannot Wait, emergency education and psychosocial assistance was delivered to children as part of the humanitarian response.

### **3. Every child is protected from violence and exploitation**

The Child Protection Programme aims to significantly and equitably reinforce the prevention and protection against all forms of violence, abuse and exploitation, as well as access to state civil services and legal protection for children. Key areas of focus include (i) access to child protection services, (ii) birth registration, (iii) child justice administration, and (iv) child protection in emergencies.

According to the 2018 MICS, the DRC achieved an increase of 15 per cent in birth registration, from 25 per cent in 2013 to 40 per cent in 2018. In 2019, with UNICEF support, a total of 1,253,392 births were registered by the civil registration system, representing an increase of 258,664 from 2018. UNICEF contributed to this performance through sustained efforts and investments in the inter-operability with the health sector, capitalizing on the 81.5 per cent of births in the DRC occurring in health facilities. As result of UNICEF advocacy with the Ministries of Interior and Health, children after their birth can now be directly registered in the health facility.

UNICEF also assisted the most vulnerable children, including Children Associated with Armed Groups (CAAFAG) to obtain birth certificates. As such, 39,948 vulnerable children (including 4,565 CAAFAG) have now a legal identity.

In DRC, children in contact with the law do not have access to a specialized juvenile justice system that considers their needs and rights as per the Child Protection Code. UNICEF and partners' support focused on expanding the number of peace tribunals, rendering them more performant to properly handle juvenile cases. These efforts have increased by 107 per cent children's access to juvenile justice services benefitting 40,793 children (15,140 girls, 25,653 boys).

Communities remain at the core when it comes to protect children. In 2019, 296,282 vulnerable children were identified and referred to basic social and protection services and a total of 809 social workers (329 women) and 2,922 community actors (1,161 women) were trained on child protection tools, concepts, and/or case management.

In response to the various humanitarian crises that have affected children, UNICEF through its partners, have provided mental health and psychosocial services and safe spaces to 171,560 children. This includes support to 2,822 children released from armed groups, for individualized socio-economic reintegration, and family reunification. While, 4,345 unaccompanied children were provided with comprehensive and individual care/assistance, temporary care, and/or family tracing.

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MONUSCO, and UNICEF continued to support the government in preventing and addressing grave child rights violations through the Monitoring and Reporting Mechanism (MRM) and the Monitoring, Analysis, and Reporting Arrangements on conflict-related sexual violence. In 2019, 3,831 grave violations against children were documented, notably the recruitment and use of children, sexual violence and attacks on schools and hospitals.

#### **4. Every child lives in a safe and clean environment**

The WASH program seeks to increase sustainable access of communities to drinking water, use of hygienic sanitation systems, and maintain a cleaner environment. Key areas of focus include (i) governance of the WASH sector, (ii) healthy environment, and (iii) to deliver WASH services in emergency response.

UNICEF's support the operationalization the 2018-2022 Healthy School and Villages Plan, in line with the Sustainable Development Goals and the National Health Sector Development Plan. The National Roadmap for Water and the National Roadmap for the Eradication of Open Defecation supported by the National WASH Sector Coordination body and the Ministry of environment will help the country to invest in quality water services and eradicate open defecation in communities, therefore supporting children wellbeing and development.

Within the framework of the Healthy School and Villages in 2019 alone, UNICEF expanded coverage to 275,247 people (134,871 women) and 18,264 school-aged children (8,949 girls) in 300 villages and 54 schools. In addition to schools and villages, wash activities were expanded also to healthcare facilities. This should improve the quality of health services by making available safe drinking water, latrines, showers and incinerators.

In terms of WASH emergency responses, 336,787 people were served in the conflict-affected provinces of Tanganyika, Ituri, Kasai, Kwilu, and Kwango. Life-saving WASH interventions were also provided in cholera-prone areas, and 213,454 people benefited from inclusive WASH response to natural disasters, in particular floods.

UNICEF also contributed to evidence generation, and the results of the 2018 menstrual hygiene study commissioned to improve girls' attendance in primary schools led to the launch of a pilot in three provinces, with an aim to integrate menstrual hygiene into school curricula by 2020.

#### **5. Every child has an equitable chance in life**

The Enabling Environment for the Rights of Children Programme undertakes analysis of the situation of children to inform laws, social policies, planning, budgets, public opinion and social norms. Key areas of focus include (i) data analysis and evaluation, (ii) social protection, (iii) communication for development, and (iv) the promotion of children's rights (participation).

One of the major household surveys allowing to measure the situation of children and providing DRC with updated social and demographic indicators in DRC "the 2018 MICS" was completed and officially released by the Ministry of Planning and UNICEF in July 2019. Most importantly, in 2020 the analysis will be further sharpened and disaggregated for each of the 26 provinces to inform decentralized and contextualized interventions for children and support planning of public policies at subnational level.

In 2019, UNICEF continued to invest in knowledge generation as an important means to keep the children's agenda on the table of major donors and stakeholders, to improve programming, and to inform policies and programmes. Several studies and evaluations were completed and informed more efficient programming. The evaluation of the Rapid Response to Movements of Population (RRMP) programme provided evidence on its limitations in the DRC's current context and informed the design of new humanitarian rapid response programme. Two evaluations of the Ebola outbreak response provided recommendations that led to the timely adjustment of the response.

In 2019, UNICEF provided an overall volume of humanitarian cash transfers of US\$ 5,130,160 to 79,749 households, benefitting 230,065 children; contributing to increase the resilience of households and their ability to cope with shocks from recurrent crises in the eastern part of the DRC.

In 2019, the gains of 2017 and 2018 were consolidated in the areas of promoting community-based participatory approaches and essential family practices, as well as building government capacity, which played a key role in the Ebola response by improving community trust. At least 3,266 community animation units (CAUs) in 27 health zones in North Kivu and Ituri were established for the response to the Ebola outbreak, bringing the total number of community structure to 56,890 in 22 out of the DRC's 26 provinces. Through these structures', health workers, community radios, religious groups, and other community entities, around 36 million people were reached by information on key family practices, including Ebola prevention measures. In response to the polio outbreak, the contribution of community workers was crucial in

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reducing the number of children not reached by vaccination teams.

In line with the Child Participation and Engagement Strategy, UNICEF DRC, in support to the government, focused on children's participation in communication and public advocacy, mainly through the Youth Reporters Project. In 2019, UNICEF enrolled 110 additional young reporters so that to reach 940 reporters. UNICEF worked directly with these young people to increase their engagement and participation at community level. Some worth mentioning results include the decision of the director of national television to dedicate a TV show to young reporters discussing child-related issues and an order from the Minister of Defense to stop the use of children by armed groups, among others.

Communication and advocacy work resulted in the dissemination of more than 6,707 communication media products about the situation of children in the DRC, especially the most vulnerable, reaching more than 95,000,000 people through diverse social media platforms.

### 6. Humanitarian response

2019 was a crucial year for fighting the Ebola epidemic. The current Ebola strategic response plan, which will end in June 2020, aims to interrupt the transmission of Ebola Virus Disease (EVD) in North Kivu and Ituri provinces and prevent its spread in DRC and neighbouring countries. UNICEF's work revolves around the following key areas i) risk communication and community engagement ii) infection, prevention, and control iii) psychosocial care and iv) support to affected communities. UNICEF also supports the response in the areas of health, nutrition, education, and social sciences analyses.

When the new Ebola vaccine was introduced, pregnant women and children below one year of age were found not eligible to receive the vaccine, even though they were the most affected by the disease. UNICEF strongly advocated for the inclusion of these groups among those targeted for vaccination and in June 2019, the DRC Ethics Committee finally accepted the vaccination of all pregnant women and children under one year. To date, 1,402 of children and 1,189 of pregnant women have been vaccinated against Ebola.

A key approach of the Ebola response and a crucial factor to containing and fighting the epidemic is community engagement. UNICEF was tasked to lead the risk communication and community engagement interventions. The approach focused on the reinforcement and operationalization of the existent community animation units (CAUs). These units served as a crucial entry point for reaching 25 million people at risk of contracting Ebola. This represents the 96.6 per cent of the target population. In addition, the involvement and mobilization of 62,974 influential community leaders from affected communities has also fostered community support to the response.

When it comes to infection, prevention, and control, UNICEF provided support to 2,972 health facilities in 28 health zones through improved access to water and sanitation facilities, construction of incinerators, ash and placenta pits, latrines and showers.

In targeted communities, 2,120,348 people gained access to safe drinking water and 124,488 people in were briefed on best hygiene practices to prevent Ebola and other communicable diseases.

But also, to keep ebola's infected parents close to their children, UNICEF set up nurseries to provide psychological support and adequate care to 797 children while their infected parents received treatment in the Ebola Treatment Centres (ETCs). This has allowed an increased acceptance of mothers to consult and receive treatment. A total of 5,459 separated and 2,352 orphaned children benefited from psychological counselling in nurseries and in the community.

Basic Social services for children did not only targeted Ebola-affected but also surrounding communities; this has been crucial to equitably respond to children's needs.

The humanitarian surveillance system has played a critical role in the data collection and dissemination of alerts, making it possible to provide a rapid response for the survival of women and children. A total of 686 humanitarian alerts were collected and shared with the humanitarian coordination through OCHA and other humanitarian actors. UNICEF supported the extension of the early warning and humanitarian surveillance system from 12[2] provinces in 2018 to 17[3] provinces in 2019, thereby covering all targeted provinces.

From January to August 2019, through the rapid response movement of population programme (RRMP) 1,098,291 beneficiaries were provided with life-saving interventions. The affected populations have received Non-Food Items, multipurpose cash and vouchers, health, WASH, nutrition, education and child protection emergency interventions.

Beyond humanitarian assistance, 256,000 people were reached by investments in community-based resilience and protective environments for children through improved access to social services[4] and the promotion of reconciliation between communities in conflict. Since 2015, 1,138,000 people were reached through the Participatory Empowering

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Approaches for Resilience programme, funded by the Swedish Cooperation.

[1] Kasai Central, Kasai, Kasai Oriental, Sud Kivu, Lomami, Kwango, Tanganyika, Sankuru and Equateur

[2] 12 provinces in 2018: Equateur, Mongala, Sud Ubangi, North Ubangi, Tshuapa, Kasai, Kasai Central, Kasai Oriental, Lomami, Sankuru, Tanganyika, Kwilu

[3] Additional five provinces in 2019: Haut Katanga, Haut Lomami, Lualaba, Kwango, and Ituri

[4] Health/nutrition, education, water, sanitation and hygiene

### Lessons Learned and Innovations

**DRC's nexus approach:** The nexus implementation approach of the 2020-2024 Country Programme promotes synergy across programmes and addresses overlapping deprivations faced by children at sub-national level.

To ensure a successful evidence-based roll-out, the country office tested the mentioned approach in three pilot zones of convergence, Nsele in Kinshasa province, Kipushi in Katanga province, and Kabalo in Tanganyika province. Lessons learned from these pilot zones, combined with an in-depth analysis of the stakeholders' perspectives, led to the development of the theory of change of the UNICEF DRC country programme. Through the pilot, the National Institute of Statistics and UNICEF have also been able to strengthen the capacity of local partners at institutional level. A set of ready-to-use assets and standardized, innovative tools (for example, Android devices used for data collection, surveys, and analysis) were also produced and will be used for undertaking additional baseline surveys and data collection, facilitating the gradual extension of the approach to the 29 targeted health zones and the systematic monitoring of the situation of women and children in DRC.

**Mobile payment in the Ebola response:** To financially support Ebola-affected families in North Kivu and Ituri provinces, UNICEF partnered with one of the main mobile operators in DRC, Vodacom. This collaboration enabled the utilization of an e-mobile cash platform, Vodacash, allowing UNICEF's teams to directly implement some interventions. This approach has been instrumental to allowing the mobile teams to provide a rapid response when a new area is affected.

Following this experience, mobile cash will be further extended to other areas of UNICEF's work in support of the most disadvantaged children and families; for example, in humanitarian settings and response, or in regular cash transfer programmes. The biggest advantage of using mobile cash is the direct reach to targeted families, that also serves as a mitigation measure against fraud or the potential misuse of funds.

**Donor engagement:** The country office advanced the implementation of its 2019 Resource Mobilization Strategy focusing on its top three public sector donors (USA, UK, Sweden), engagement with potential donors (Norway and Germany), and deepening partnerships with International Financial Institutions (World Bank). In total, these efforts resulted in the mobilization of a total budget of US\$ 249,674,980. Donors received timely and substantial communication around their investments for children. Out of the 105 donor reports, 99 per cent were submitted on time.

The country office also continued its efforts to harness the power of the private sector for vulnerable mining communities through advocating via multi-stakeholder platforms such as the Organization for Economic Cooperation and Development, appealing to potential donors (nine major car companies and electronics producers), and engaging with four mining companies to understand their social investment strategies in the country.

UNICEF DRC remains very grateful to its donors for their continued interest and their valuable support that have contributed to the fulfilment of children's rights in the DRC.