

Democratic Republic of Congo

DEMOCRATIC REPUBLIC OF CONGO

Country Focus Areas

- **The Investment case corresponds to the updated national health development plan 2019-2022** which is a prioritized version of the previous National Health Development Plan (NHDP).
- **Align the government's health budget with the new NHDP**, in order to monitor increases in domestic and external spending on priority areas, such as including RMNCAH.
- **Provide technical support on public financial management**, in order to address the low budget execution rate (below 60 percent nationally and below 20 percent in several provinces).
- **Reduce the fragmentation of donor support** through single contracts.
- **Provide a package of RMNCAH services** through result-based financing.
- **Undertake a comprehensive assessment of civil registration and vital statistics (CRVS)**, develop a costed national CRVS strategy and implementation plan, and support catch-up registration campaigns through schools.
- **Conduct discussions with the private sector** on developing capacity and public-private dialogue platforms.

RMNCAH-N Core Indicators

Maternal mortality ratio: **846 per 100,000 live births**

Neonatal mortality ratio: **28 per 1,000 live births**

Under-five mortality ratio: **104 per 1,000 live births**

Adolescent birth rate: **138.1 per 1,000 women**

Percent of births <24 months after the preceding birth: **27.1%**

Stunting among children under 5 years of age: **43%**

Moderate to severe wasting among children under 5 years of age: **8%**

Health Financing Core Indicators

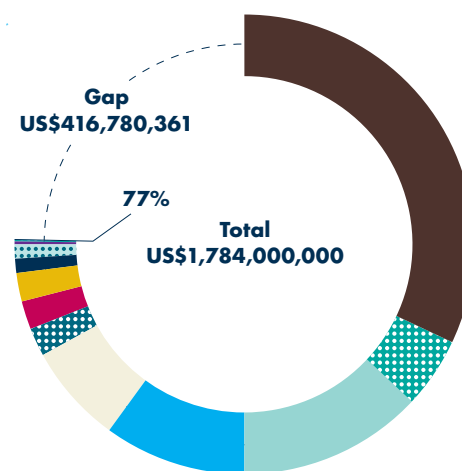
Health expenditure per capita financed from domestic sources: **US\$2.51**

Ratio of government health expenditure to total government expenditures: **3.73%**

Percent of current health expenditures on primary/outpatient health care: **65.39%**

Incidence of catastrophic and impoverishing health expenditures: **4.82%** catastrophic **0.87%** impoverishing

Resource Mapping



The resource mapping shown here is for FY 2019. Presently there are more than 10 external partners aligned with and committed to financing the IC. The government only accounts for 32% of total needs for the IC. There is a funding gap of 23% for FY 2019. The resource mapping has been completed for the Plan National de Développement de la Santé (PNDS), which serves as DRC's prioritized national health strategy and its IC. Data for this assessment was provided by the health donors coordination group, also known as Groupe Inter-Bailleurs de la Santé (GIBS). These estimates are still in the process of being updated by the GIBS.

Monitoring the Country-Led Process

Area	Score 1	Score 2	Score 3	Score 4	Score 5	Score 6	Score 7
INVESTMENT CASE	Investment case for RMNCAH-N or equivalent (e.g., national health plan)	Investment Case in development	Investment Case complete	Investment Case being implemented	6		
	Set of evidence based priorities financed	Not prioritized within available funding	Priorities determined, but financial gap remains	Priorities fully funded**	4		
	Results monitoring strategy and framework in support of IC*	Not developed	Developed and initial assessment of results monitoring capacity available	Country platform (or other country led entity) uses results framework to review progress on a regular basis	3		
COUNTRY PLATFORM	Country-led multi-stakeholder platform (e.g., new or established from an existing platform)	Not yet established	Established and initial meeting held	Country platform holds regular country meetings to discuss results arising from implementing the IC and corrective action	5		
	Government focal point	Government focal point not yet identified	Government focal point identified	Government focal point identified with contact available online (GFF website)	7		
	An inclusive country platform process with CSO engagement	CSOs not included in the process	CSO representative identified	Civil society represented at routine country platform meetings to discuss IC implementation and results	5		
HEALTH FINANCING	Health financing reforms identified	Not considered at this time	Developed but not integrated in IC	Health financing in progress	7		
	World Bank-funded project in support of the IC	Project under preparation	Project approved and available online	Project disbursing	7		
	Private sector engagement	Private sector engagement not identified at this time	Country has either included or identified a private sector intervention	Country has started implementing a private sector intervention	4		
OTHER AREAS OF INTEREST	Civil registration and vital statistics (CRVS) made a priority	CRVS not identified as priority	CRVS identified as a priority in the investment case	CRVS priority funded (for example GFF Trust Fund, IDA, other)	7		
	Management of medicines and supplies / supply chain interventions	Supply chain / commodity management not identified as a priority	Supply chain / commodity management identified as a priority	Supply chain / commodity management interventions funded	6		

* Both included in the IC document or a separate document
 ** Meaning that funding was allocated, disbursed and released – payment done
 *** ANC4 = four antenatal care visits
 ART = antiretroviral therapy; ARV = antiretroviral; DTP3 = vaccination for Diphtheria, Tetanus, and Pertussis; ORS = oral rehydration solution; PMTCT = prevention of mother-to-child transmission; PNC = postnatal care.