

Progress Report - DEMOCRATIC REPUBLIC OF THE CONGO

01/12/2022 - 30/12/2023

ILO GLOBAL FLAGSHIP PROGRAMME ON BUILDING SOCIAL PROTECTION FLOORS FOR ALL - PHASE II

Project code : GLO/21/34/MUL



A training session for officials of UHC bodies on social health protection and UHC governance in Kinshasa, 4-7 December 2023 ©ILO

22 January 2024



Donor:Belgium and LuxembourgAdministrative unit:ILO Country Office for the Democratic Republic of the Congo, Angola, Central
African Republic, Chad, Congo and Gabon (CO-Kinshasa)

Project title:	ILO GLOBAL FLAGSHIP PROGRAMME ON BUILDING SOCIAL PROTECTION FLOORS FOR ALL PHASE 2 -
Type of report:	Annual
Period considered:	December 2022 to December 2023

<u>Linkages:</u>

Strategic Policy Outcome:	Outcome 8: Comprehensive and sustainable social protection for all.
Country Programme Outcome:	Priority 2: Improved labour productivity through the promotion of social dialogue, social protection and fundamental rights at work, Outcome 2.4: By 2024, people living in the DRC benefit from inclusive social protection and a demographic dividend driven by population control and the empowerment of youth and women.
Sustainable Development Goal:	SDGs 1, 3 and 8: (i) reducing disparities; (ii) improving people's access to social benefits, including health; and (iii) promoting sustained, shared and sustainable economic growth, full and productive employment and decent work.

Preparation and Review	
Report prepared by :	Jean-Lambert MANDJO AHOLOMA, 22/01/2024
Report reviewed by :	DRAMANE BATCHABI, 18/04/2024
Report approved by :	NTEBA SOUMANOU, 19/04/2024

1. Country context

The Democratic Republic of the Congo (DRC), a vast country (2,345,409 km²) with a population of almost 100 million, is known for the low quality of its health services. It has only 25 hospital beds per 10,000 inhabitants and some of the highest mortality rates in the world: an infant mortality rate of 70 per 1,000 births and a maternal mortality rate of 473 deaths per 100,000 live births.

Faced with this difficult situation, the Government of the DRC is working to translate into reality its vision of guaranteeing all sections of the population effective social protection coverage by 2030, in accordance with SDGs 1 and 3, by reducing disparities and improving the population's access to social services, including health services. The Government's Action Programme for 2021-23, in its pillar 11, priority 47, "Implementation of Universal Health Coverage", is thus translating the vision contained in pillar 1 of the National Strategic Development Plan (PNSD): "Enhancement of human capital and social and cultural development".

Two of the Government's priority programmes, namely the Decent Work Country Programme and the National Strategic Plan for Universal Health Coverage (UHC), bear witness to its commitment and to its vision, shared by all stakeholders, of placing people and employment at the centre of macroeconomic policy in order to reduce poverty, unemployment and underemployment and with a view to achieving the Sustainable Development Goals, in particular SDG 8. As part of his commitment to universal health coverage, the President of the Republic has given a strong signal by appointing a special adviser to steer the process and by setting up, under his own leadership, the National Council for Universal Health Coverage (CNUHC).

In addition to the traditional stakeholders, notably the Ministry of Employment, Labour and Social Security (METPS), Health and Social Affairs, the process of implementing the UHC has been accompanied by the creation of several facilitation bodies, including the Health Solidarity Fund (*Fonds de Solidarité de Santé -* FSS). There is need to strengthen the capacities of these new institutions and to put in place mechanisms to ensure their effective coordination, a task which is currently under way.

It is in this context that the ILO, at the request of the Government, has been implementing the Building Social Protection Floors for All project in the RDC since 2022 (GLO/21/34/MUL). The main outcome of this project is to extend social protection coverage, particularly through social health protection. Three outputs are expected: (1) Consensus on the architecture of the UHC system is reached and the level of coordination is implemented; (2) The Health Solidarity Fund is operational; and (3) National social protection actors have the necessary capacity and relevant information to effectively implement social protection schemes and advocate for their sustainable financing.

In consultation with the Government and the social partners, the project team draws up and implements an annual work plan. Progress is monitored every six months and any necessary adjustments are made in consultation with the national stakeholders.

2. Progress report

Outcome 1. In the Democratic Republic of the Congo: Guaranteeing the extension of coverage of social protection, particularly through social health protection

The extension of social protection coverage, particularly social health protection, is progressing in the DRC through the implementation of the UHC. The effective implementation of the UHC began in September 2023 with the start of the free maternity scheme in Kinshasa province.

With the technical support of the ILO, the country has established a legal framework and institutional arrangements for implementing the UHC. The ILO supported the setting up of a subcommittee on employment under the Parliament's Socio-cultural Committee. This made it possible to speed up the revision of the Public Health Act by including provisions relating to the UHC (Ordonnance-Loi n° 23/006 du 03 mars 2023 modifiant et complétant la Loi n°18/035 du 15 décembre 2018 fixant les principes généraux de la sante publique). The President of the Republic promulgated this law in March 2023. A strategic plan for implementing the UHC for 2020 to 2030 has also been drawn up and adopted by the Government. The new institutions established include the National Council for Universal Health Coverage (CNUHC), the UHC Coordination Board and six facilitation bodies: the Health Solidarity Fund (FSS), the Health Promotion Fund (FPS), the UHC Regulatory Agency (AR-UHC), the National Institute for Public Health (INSP), the National Agency for Clinical Engineering and Digital Health Technology (ANICNS), and the Congolese Pharmaceutical Regulation Authority (ACOREP).

With regard to the operationalisation of the UHC health insurance schemes, in 2023 the project supported the Ministry of Employment, Labour and Social Security (METPS) and the SSF with a preliminary study on UHF financing, which provided recommendations on the insurance architecture and management principles, a development plan and a baseline scenario. To ensure proper implementation of the new scheme, the project has also strengthened the capacity of the METPS and the new bodies created to manage the social health protection system, and has also contributed to set up coordination and governance mechanisms.

Output 1. The consensus of the architecture of the Universal Health Coverage system is achieved and the coordination level is implemented

Output status: Delay : Behind schedule



Activity 1.1 Capacity-building in health and social health protection for all actors at the coordination level

Participants in the training session in social health protection and UHC, 4-7 December 2023, Kinshasa ©ILO

In collaboration with the ILO International Training Centre (ITCILO), the project has supported capacity building for 29 senior officials, including eight women, from the General Secretariat for Social Security and the six UHC facilitation bodies, in the areas of social health protection and UHC governance. Held from 4 to 7 December 2023 in Kinshasa, the activity enabled participants to acquire the skills to implement social health protection policies.

The training provided an opportunity to have a closer look at the legal, strategic and institutional framework for social protection in the health sector in the DRC; to gain a conceptual understanding of the principles of decent work and universal social protection, including in the health sector; to know the different governance models for social protection systems in the health sector; to deepen their understanding of the management and financing of social health protection and the link with care provision; and to better understand the need to adapt mechanisms in order to extend coverage to workers in the informal economy and define a coordination mechanism between agencies within the framework of the UHC. A roadmap for setting up a UHC coordination mechanism, with concrete actions for each institution, was proposed and approved at the end of the training session.

In addition, the project supported the participation of two high-level officials from the Ministry of Employment, Labour and Social Security and the Health Solidarity Fund in two other training courses run by ITCILO in Turin (Italy):

- Two officials from the Ministry of Employment, Labour and Social Security, all women, at the Social Security Academy training course organized from 11-22 September 2023.
- Four officials, including one woman (Director General and Deputy Director General of the FSS, Director of Studies and a Head of Division at the General Secretariat for Social Welfare), will take part in an online training course on social protection in the health sector from 20 February to 7 April 2023.



Activity 1.2 Conducting actuarial studies to envisage the financing options for UHC from the demand-side perspective, based on the established health package and the financing possibilities identified previously.

Two technical studies have been scheduled for 2023 to help prepare for the implementation of public health insurance schemes (UHC) in terms of policy options and financing. One has been completed and the other is in the process of implementation.

Preliminary study on UHC financing

The project has provided technical support to the METPS and the FSS to examine the architecture and management principles of the public health insurance schemes, the development plan and the baseline scenario, while also verifying the financial sustainability of the insurance.

The study was carried out by an international consultant supported by a national technical committee that includes representatives of the FSS, the METPS and other ministries including social affairs, finance, budget, health, the civil service and national defence. Two technical support missions were carried out from 24 to 29 July and from 30 October to 4 November 2023 in Kinshasa. The missions enabled data to be collected, and the national counterpart to be consulted in order to adjust the policy options and projection parameters of the baseline scenario, as well as to be familiarized with the projection tool developed.

This study has enabled the Government to move forward with a medium-term approach, focusing initially on determining a healthcare benefit package and assessing its financial sustainability for a 5-year start-up period. A robust actuarial valuation will be done later when accurate and comprehensive data will be available to adjust the insurance parameters and measure its sustainability in the longer term. A projection tool was developed to carry out this initial projection of financial feasibility.

The main obstacle encountered during this exercise was the lack of the data needed to produce the projections. With the support of the national technical committee, data was identified and collected. The projection tool had to be adapted to data available in order to produce a sufficiently accurate estimate of the benefits package covered by the insurance scheme. The projections presented in this report are based on the first budgeting exercises by the FSS and the statistical data received from mutual health insurance companies and the Ministry of Health's National Health Information System (DHIS2).

A baseline scenario was established using the data collected and the operational plan for implementing the UHC drawn up by the FSS. This scenario considered the free scheme for pregnant women, women who have recently given birth, and newborn babies (RGFE), and the basic scheme. A complementary scheme for the households of workers in the formal sector was not included in these projections, as its basic healthcare package has not yet been defined.

Two variants of the initial scenario were tested. The first applied the contribution envisaged by the FSS. It proved to be financially unsustainable, with a permanent and growing deficit. The second variant applied a flat-rate contribution for each individual, as calculated by the simulation tool. Under this scenario, the insurance is viable and generates surpluses that enable producing some reserves funds for the scheme. This scenario thus provides a working basis for the METPS and the FSS to be used in the context of a national dialogue with all the stakeholders. Other scenarios should be explored in the future to find the one that best suits the UHC's objectives and the needs and contributory capacity of the various target groups.

The final report of the study and the (electronic) simulation tool were validated by the technical committee.

A study to categorize the population potentially eligible for health insurance was launched in 2023 and should enable a classification of workers in the informal economy to be drawn up according to their socioeconomic characteristics and their ability and willingness to contribute. The survey for the study will be carried out in the province of Kongo Central (defined jointly by the METPS and the FSS). The results and methodology of this study will serve the Government as a model to be used in other provinces. A consultancy firm has been contracted and the results of the study are expected by the end of May 2024.

Activity 1.3 Support the design and elaboration of the legal framework envisaged for of establishing a set of institutional instruments and arrangements to enable implementation of the UHC (demandside perspective)

In 2023, the project provided technical and legal support to the Socio-Cultural Commission of the National Assembly to finalize the Law establishing the legal framework for the UHC. This activity began in 2022 and ended in March 2023 with the promulgation of Ordinance-Law No. 23/006 of 3 March 2023, amending and supplementing Law No. 18/035 of 15 December 2018 establishing the fundamental principles relating to public health and the universal health coverage system in the Democratic Republic of the Congo.

The Government is preparing an update of the National Social Protection Policy (2017-2022), which should incorporate the new legal and institutional framework of the UHC. In this context, in 2023 the project supported the General Secretariat for Social Security to carry out a review of the National Social Protection Policy (2017-2022). The objectives of this activity were: (i) to carry out an overall review of national policy and a country diagnosis; (ii) to assess sectoral performance in implementing national policy while noting the

results/achievements obtained for each aspect; and (iii) to carry out an in-depth diagnosis of the sector from an institutional, organizational and functional perspective with a view to improving the governance of social protection. A four-day technical workshop attended by 68 participants from the various organizations involved in social protection was held on 30 October and on 3, 4 and 17 November 2023 in order to supplement the data collected by the consultant and validate the results reviewed to date. The final version of the policy review report was completed in December 2023 and will be approved in 2024 at a tripartite consultation workshop with the national stakeholders in the social protection sector. This activity was cofinanced by resources from the Regular Budget Supplementary Account of the ILO Country Office for the Democratic Republic of the Congo, Angola, Central African Republic, Congo, Gabon and Chad.

The project also provided technical support to the Ministry of Social Affairs and Solidarity during preparation of the national dialogue on social protection. However, owing to changes of priority, the ministry concerned decided to postpone the national dialogue event beyond the project's implementation period.

Activity 1.4 - Promoting Ordinance-Law no. 23/006 of 3 March 2023 on the UHC (replaces activity 1.4. of the Project Document: Support the design of M&E tools that can supply the information needed to consolidate governance within the UHC)

Two activities intended to promote Ordinance-Law No. 23/006 of 3 March 2023 on the UHC had been scheduled for 2023, in order to present the new law to the general public and the groups of workers concerned. This activity was to be organized in close collaboration with the FSS. It involved the following sub-activities:

- 1. Raising awareness of the obligation to join a health insurance scheme in accordance with the legal and regulatory texts concerning the UHC (visibility).
- 2. Raising awareness among civil servants, through the public administration's inter-union organization, in order to increase liable persons' awareness of the need for the UHC.

At the request of the FSS, both activities were postponed until 2024 owing to a change in planning.

Output 2: Implementation of the Solidarity Health Fund

Output status: On schedule

ACTIVITY 2.1: Capacity building in UHC and social health protection, with particular focus on social insurance mechanisms and administrative and organizational policies and instruments (general and specific training for the various actors that will intervene in the process)

This activity was completed in 2022.

Activity 2.2 Support the design and operationalization of the Solidarity Health Fund: organizational details; preparation of tools/ instruments needed; legal framework.

The Ministry of Employment, Labour and Social Security, in collaboration with the UHC Coordination Board and the Health Solidarity Fund, has laid plans to draw up implementing measures for the UHC law and the other legal texts needed to make the UHC operational. The UHC Legal Commission, chaired by an expert from the Prime Minister's Office, is responsible for drafting these implementing measures. Seven draft texts have been drawn up:

1. Ordinance establishing measures for compulsory affiliation to health insurance for all persons residing on the territory of the Democratic Republic of the Congo (Art.42 of the O-L).

- 2. Decree establishing the conditions and procedures for acquiring, maintaining, suspending and ending entitlement to medical assistance benefits (Art. 43 sexdecies of the O-L).
- 3. Interministerial decree establishing the terms and conditions for contributions by liable persons and for recovery or collection under compulsory health insurance schemes (Arts 5 and 6, Decree No. 22/13, Art.43 sexdecies of the O-L).
- 4. Interministerial decree establishing the benefits in the basic healthcare package affected by reimbursement (Art.43bis).
- 5. Ministerial order setting out the procedures for the initial registration and biometric identification of members of all health insurance schemes (Art. 43 novodecies of the O-L).
- 6. Ministerial order on the procedures for medical checks prior to receipt of health and pharmacy benefits.
- 7. Ministerial order on the establishment, organization and functioning of a technical committee to monitor the collection of contributions due to the FSS.

The operationalization of Universal Health Coverage began in September 2023 with the implementation of Free Maternity-related Care in the city of Kinshasa.



An educational session held during a prenatal consultation, Kinshasa, September 2023.

The Health Solidarity Fund covered 54,082 deliveries from September to December 2023 through the free Maternity-related Care Programme. In 2024, the project will provide technical support to the Health Solidarity Fund for finalizing and approving the implementing provision of the UHC law.

Activity 2.3 Conducting specific studies on innovative mechanisms to improve the collection of financial contributions from the different categories of workers and individuals

This activity could not be carried out owing to delays by the FSS and the General Secretariat for Social Security in implementing prerequisites such as the data regarding the categorization of the contributory capacity of workers in the informal economy and the definition of the basic healthcare package adapted to each population category. The resources foreseen to this activity have been allocated to Activity 2.2

Output 3. The relevant national social protection stakeholders have the necessary capacities and relevant information to implement social protection schemes effectively and advocate for their sustainable financing

Output status: On schedule

Activity 3.1 Training on the minimum set of social protection indicators and pilot the online version of the ILO Social Security Inquiry, with a view to strengthening social protection data collection.

In 2023, the project contributed to enhance the skills of three METPS officials in the collection and processing of social protection data, in order to improve the monitoring of social protection programmes and of progress under SDG 1.3. The three officials took part in a course on "Monitoring SDG 1.3 and other social protection indicators through the social security survey" held by ITCILO in hybrid format from 17 April to 19 May 2023. The course enabled participants to complete the Social Security Survey questionnaire developed by the ILO and to update the data for the DRC in the ILO's global social protection database.

Activity 3.2 Supporting the elaboration of a statistical bulletin/ factsheet on social protection in the DRC.

In 2023, the project also supported the Government in drawing up a factsheet on social protection statistics to equip the country with a tool that provides an overview of the national social protection system and facilitates evidence-based decision making.

A technical mission by an ILO international expert in social protection statistics was carried out in Kinshasa from 10 to 19 November 2023. The mission made it possible to validate the mapping of social protection schemes in the DRC, to identify the benefits provided by each social protection scheme, to collect data complementing that collected for the FSS and to determine the gap in the data still needed to draw up the factsheet.

During this mission, a technical workshop was held for 40 participants from several institutions, including the National Institute of Statistics, the National Social Security Fund, the National Social Security Fund for State Employees, the Social Security Fund, mutual health organisations, the METPS, the ministries for social affairs, primary and secondary education and health, and other public institutions.

A first draft of the factsheet was produced. The next stages, due to be completed in 2024, will involve finalizing the collection of data and technically validating the factsheet with the national institutions responsible for social protection, then formatting it and submitting it to the relevant national authorities.

Activity 3.3 Training on online actuarial models (Pensions and Health) - promoting financial governance and sustainability.

In consultation with the national counterpart, this activity has been reformulated and incorporated into activity 1.1.

ουτ	OUTPUTS: Overall delivery assessment ¹					
	Highly satisfactory Implementation of almost all (>80%) outputs is on schedule as envisaged in the implementation plan and almost all (>80%) indicator milestones have been met.		Satisfactory Implementation of the majority (60-80%) of outputs is on schedule as envisaged in the implementation plan and the majority (60-80%) of indicator milestones have been met.			
	Unsatisfactory Some (40-60%) outputs are being implemented on schedule as envisaged in the implementation plan and/or only some (40- 60%) indicator milestones have been met.		Very unsatisfactory Few (<40%) outputs are being implemented on schedule as envisaged in the implementation plan and/or only a few (<40%) indicator milestones have been met.			

¹ This is a self-assessment.

Summary of outcome(s)

OUTCOME ACHIEVEMENT ²						
Indicator	Baseline (before project start)	Indicator Milestone (compare planned against actual)	Target (end-of- project goal)	Immediate Outcome Summary		
Outcome 1. In the Democratic Republic of the Congo: Guaranteeing the extension of coverage of social protection, particularly through social health protection						
Output 1. The consensus of the architecture	of the Universal Health Cov	verage system is achieved	d and the coordinat	tion level is implemented		
The UHC Act is passed by Parliament and promulgated by the President of the Republic.	0	1	1			
Number of parliamentarians who enjoy strengthened capacity in the field of social protection, health and UHC	0	45	45	On track: most milestones met		
The national social protection policy is reviewed and validated by the Tripartite Stakeholder Committee	0	1	1			
The population potentially eligible for universal health care is well categorized	0	0	1			
Output 2: Implementation of the Health Solid	darity Fund					
Essential tools for managing the Health Solidarity Fund are available	0	0	1			
Number of officials from the General Secretariat for Social Welfare trained in monitoring and feasibility studies for mutual health insurance schemes	0	54	20	On track: most milestones met		
The benefits package for the self-employed is available	0	0	1			

² On the basis of a monitoring and evaluation plan.

Output 3: National social protection stakeholders have the necessary capacity and relevant information to effectively implement social protection schemes and advocate for their sustainable financing				
Number of experts from the General Secretariat for Social Security trained in monitoring and evaluation for measuring basic UHC indicators	0	11	15	On track: most milestones met
Tools for monitoring and evaluating the UHC are available	0	0	1	

Gender and non-discrimination

The project has made every effort to promote non-discrimination and gender equality, which have been central concerns of the ILO since its inception. When organizing activities, the project has ensured that both sexes were represented, while taking into account the demographic configuration of the departments concerned. The attendance lists for all the activities have specified the gender of each participant.

3. Collaboration and partnerships

The ILO is an active member of the Inter-Donor Group on Health and the Inter-Donor Group on Social Protection in the DRC. The United Nations agencies working in this sector have set up an H6+ platform where the various experts meet to exchange ideas and create synergies between the current and future programmes in order to avoid overlapping. The ILO Office in Kinshasa is participating in these platforms through the project. The ILO is also in permanent consultation with Enabel (Belgian Development Agency) to harmonize activities in support of the UHC process.

The project has ensured that the tripartite ILO constituents take part in organized activities such as the technical workshops of the national technical committee supporting the study on UHC financing and those held to review the national social protection policy.

4. Main challenges and corrective measures

Challenge 1: Absence of the Administrative and Financial Assistant. Since the project's administrative and financial assistant left in mid-2023, the lengthy recruitment process and the imminent closure of the project didn't facilitate the replacement. All the tasks devolved to the administrative assistant were then carried out by the project manager and the national expert, making their workload too heavy.

Action taken: The project manager and the national expert carried out the tasks of the administrative and financial assistant.

Challenge 2: The budget for activities approved at the launch of the project proved insufficient to cover the costs of services in the country and prevented two activities from being carried out, namely Activity 2.3, "Carrying out specific studies on innovative mechanisms to improve the collection of financial contributions from different categories of workers and individuals" and Activity 3.3, "Supporting the design of monitoring and evaluation tools that can provide the necessary information to enable the consolidation of governance within the UHC framework".

Action taken: Revision of the work plan, reallocation of the funds for project staffing budget lines to activity lines, as well as allocation of the funds intended for these activities to other feasible activities.

Challenge 3: The short duration of the project and the delay in its first year, particularly in recruiting staff, has created pressure to carry out activities in the final year. The scheduled end of the project, in May 2024, will not allow the ILO to respond to new requests from national institutions to support the process of reformulating the national social protection policy, or from new institutions, including the FSS, to design health insurance schemes that are not yet operational, and so on....

Action taken: An effort has been made to mobilize new resources at national level in order to consolidate the results achieved by this project, but this has not yet borne fruit.

5. Summary and outlook

The ILO is supporting the Congolese Government to implement the decent work agenda in order to meet the challenge of combating poverty and achieving harmonious economic and social development for the benefit of all its people, and is supporting the DRC in its quest for economic emergence. In line with its mandate, the ILO was one of the first partners to believe in the process of implementing universal health coverage in the DRC.

The main achievements registered in the DRC in 2023 thanks to the technical assistance provided by the ILO under this project include:

- a) The establishment of a legal, institutional and strategic arsenal for operationalization of the UHC, in particular Ordinance-Law No. 23/006 of 3 March 2023 amending and supplementing Law No. 18/035 of 15 December 2018 establishing the fundamental principles relating to public health and the universal health coverage system in the Democratic Republic of the Congo, the national strategic plan for the UHC, the National Council for the UHC and the facilitation bodies.
- b) Building the capacity of UHC stakeholders in social protection and UHC governance.
- c) Conducting a preliminary study on the financing of the UHC, making it possible to draw up different coverage scenarios and to estimate their cost and the possible levels of contributions, etc.

At the current stage of UHC implementation, one might say that the train has started up, but there is still a lot of work to be done. The Government has expressed to the ILO the need for technical support to ensure the continued operationalization of the various UHC structures and mobilize the various population categories to join and take ownership of the UHC.

The ILO in the DRC is keen to mobilize more partners and resources to support the National Coordination Council for Universal Health Coverage, the Ministry of Social Security, the Health Solidarity Fund and all the other national institutions in successfully implementing the UHC. The support provided so far by the ILO through this project clearly shows that it is possible to make progress if the work is done hand in hand with all the stakeholders. An eventual new social protection cooperation programme supporting the DRC to extend social health protection coverage should focus its efforts more on implementing all UHC schemes, in particular on:

- Effective operationalization of the Health Solidarity Fund and its deployment in the provinces as a matter of urgency, but also of other UHC facilitation agencies.
- Building the capacity of social protection actors and UHC institutions at all levels, enabling them to gain a common understanding of their responsibilities and tasks.
- Raising awareness among the various socio-occupational categories to ensure their involvement in and ownership of the UHC.
- Drawing up a national strategy and putting in place the mechanisms needed to make the insurance scheme effective for workers in the informal economy. These workers are diverse and require strategies tailored to each category.