# THE INTEGRATED PROGRAM OF CELPA, Democratic Republic of Congo

# Evaluation of the Health and Education Components and CELPA's Administration



Final Evaluation Report

Oslo, June 17, 20007

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#### **ACRONYMS AND ABBREVIATIONS**

AIDS Acquired Immune Deficiency Syndrome

BN Bistandsnemnda (Norwegian Mission in Development, Missions

Norvégiennes de Développement

CAMPS Centre d'Assistance Médical et Pyscho-Social (Psychosocial and

medical treatment of victims of violence)

CEDAW Convention of the Elimination of all forms of Discrimination against

Women

CEPAF Centre de Promotion des Activités Féminines

CELPA Communauté des Eglises Libres de Pentecôte en Afrique (Pentecostal

Church in Africa, based in DRC

CFDS Centre de Formation pour le Développement Social

DRC Democratic Republic of Congo

HIV Human Immunodeficiency Virus

IPC Integrated Programme of CELPA (Programme Intégré de la CELPA)

MFA Ministry of Foreign Affairs

NGO Non-Governmental Organization

NORAD Norwegian Development Cooperation

PMURR Programme Multisectoriel d'Urgence de Réhabilitation et de

Reconstruction

PYM The Pentecostal Foreign Mission of Norway (De Norske

Pinsemenigheters YtreMisjon)

SAF Services des Activités Féminines (Department for women activities)

TOR Terms of Reference

#### TABLE OF CONTENT

I.	INTRO	DUCTION				
1.	Backgro	Background and Structure of the Report				
2.		on's TORs and Methodology				
3.		Country Context				
4.	Program Description					
	4.1. The	e Integrated Program of CELPA (IPC)	5			
	4.1.1.	Background				
	4.1.2.	The Integrated Program of CELPA	5			
	4.1.3.	T T				
	4.1.4.	IPC's new five year plan - 2007-2011	6			
	4.2. CE	LPA's organization	6			
	4.2.1.		6			
	4.2.2.	CELPA's administration	7			
II	. FINDIN	IGS				
5.	Relevan	ce	8			
		e relevance of the IPC's education and health components, their appro				
	5.1.1.	Education	8			
	5.1.2.	Health, including HIV/AIDS activities	10			
	5.2. Rel	evance of the organizational and administrative set-up	12			
		e consideration of gender and human rights in the CELPA's organizat				
		and health sector				
	5.3.1.	Human rights and gender - definitions	13			
	5.3.2.	The Feminisation of Poverty in DRC	14			
	5.3.3.	Women, Education and Health in CELPA	15			
	5.3.4.	Human Rights and CELPA	16			
6.	Celpa's	Capacities in Implementing the Integrated Program	17			
	6.1. CE	LPA's administrative, professional and financial capacities	17			
	6.1.1.	Administrative and organizational capacities	17			
	6.1.2.	Professional and technical capacities	17			
	6.1.3.	Financial capacities	18			
	6.2. Res	source use	20			
	6.3. Plan	nning, prioritization and monitoring	20			
7.	Sustaina	bility Issues	22			
II	I. CON	CLUSIONS AND RECOMMENDATIONS				
8.		ions	23			
9.		nandations	25			

#### **SUMMARY**

This evaluation has assessed the *Communauté des Eglises Libres de Pentecôte en Afrique* (CELPA) competencies and capacities to implement development activities in the current scale and sustainability related to CELPA's administrative, professional and financial capacities. The evaluation focused on the program's health and education sector and its central project administration. Gender and rights were cross cutting themes.

The Integrated Program of CELPA (IPC) is implemented by CELPA which is the Pentecostal Church in Africa based in the Democratic Republic of Congo (DRC). The program is supported financially by CELPA's Norwegian partner, *The Pentecostal Foreign Mission in Norway* (PYM). The annual budget for 2007 was NOK 7,1 millions.

The long term objective of the IPC is to contribute to the improvement of the socio-economic living conditions of the poor population in the areas where CELPA is active. The program include activities in the education and health sectors, community development, women activities, promotion of peace and democracy, organizational development, reintegration of child ex-combatants and psychosocial assistance to violated women and victims of psychosocial war traumas. Most of the activities are concentrated in the province of Sud-Kivu. There are scattered activities in the provinces of Nord-Kivu, Maniema, Province Orientale and Kinshasa.

The evaluation found that CELPA's health and education activities are very relevant and are in accordance with some of the most important needs of CELPA members, affiliates and the general public, in particular the needs of children and women. The quality of CELPA's health services are known to be good and the results of CELPA's activities in the education sector are recognized as some of the best nation-wide.

The education component addresses the important need to construct and to rehabilitate school infrastructure which in many areas where CELPA operates has been destroyed or looted. Most of CELPA's school infrastructure is well planned and developed and in durable materials. The teacher training program addresses the critical need to strengthen the teachers' pedagogical capacities. However, CELPA gives priority to secondary education in urban areas where children generally have more education opportunities than boys and girls living in rural areas. CELPA's strategy to improve girls' net enrollment is important but focuses on primary education and not the secondary schools where the drop out rate of girls is extremely high.

CELPA's efforts in constructing and rehabilitating health infrastructure are very relevant. Health facilities in CELPA's areas have often been destroyed, frequently looted and poorly maintained for a long period. CELPA's current investments and other activities prioritize secondary health care.

CELPA's organizational structure with two separate but complementary branches: the spiritual and evangelical wing and the diaconal and development wing, is very relevant for a church organization. It responds to both the spiritual needs of many people as well as the general population's, including CELPA members, affiliates and the general public in the areas covered by CELPA, need for social services.

CELPA's decentralized structure and its current 640 recognized community based parishes, has a significant outreach capacity for CELPA's many development activities. The church has a significant network which reaches far into remote rural areas and small townships. CELPA has also an ability to mobilize people and people often trust CELPA both as a vital church organization and as a committed development organization.

CELPA's capacity to organize its members (275.000) and other members of a community around the execution of social infrastructure projects such as schools and health facilities is praise-worthy: CELPA has adopted the commendable and cost-effective approach which focuses on community initiative and an important local contribution which is often higher than CELPA's support. Generally, the local communities take initiative for the construction or rehabilitation of school and health infrastructure, they produce the construction materials provide the necessary labor. CELPA's assistance is a very modest standard "package" of materials. CELPA's success in community mobilization in the education and the health sectors can be used as an important marketing tool vis-à-vis potential partners and donors.

Many of CELPA's more than 275.000 members are women. However, there are almost no women in CELPA's decision making bodies - from the local parish level to the Community Conference level. There is an urgent need for CELPA, with the support of PYM: (i) to build and promote female leadership within the church decision making bodies at all levels, (ii) to promote women in leadership positions and as professional staff within CELPA's administration and in CELPA's many health and education facilities and (iii) to women and girls are beneficiaries at the same level as men and boys in all of the ICP's activities.

CELPA and its integrated program have during the last 15 years experienced an important growth. Its individual members and member churches have increased considerably. The IPCs activity level is also impressive. Since its launching in 1992, the number of CELPA run schools has increased from 152 to 442 and the number of health facilities from initial 23 to 102. After the collapse of the public services in health and education, CELPA has been an important development actor in the provision of these services.

CELPA has ambitious plans to build and rehabilitate an important number of new schools and health facilities in its new five year program. This is reasonable as people's needs for school and health care are urgent. However, CELPA's activity level has reached a point where it is important to take into account aspects related to the consolidation and the sustainability of both CELPA as an organization and its activities and results in the health and education sectors. Aspects CELPA should consider in its health and education sectors include: the important and growing maintenance needs of its many schools and health facilities and the strengthening of the capacities of CELPA's education and health personnel, including its supervision resources.

Concerning the viability of CELPA's administration, CELPA has for long been very dependent on Norwegian donors, in particular PYM, NORAD and MFA. The church should try to increase its long term financial viability by exploring more of its own income sources and by establishing more long term partnerships with several other donors in the future. There is also great room to strengthen CELPA's administrative and financial procedures and to formalize its relationship with staff. With the aim of making the administration more lenient and some program activities more efficient and cost effective, CELPA should in the near future also reconsider the staff, program and activities of some of its program components.

#### I. INTRODUCTION

#### 1. BACKGROUND AND STRUCTURE OF THE REPORT

The Integrated Program of CELPA (IPC) is implemented by *Communauté des Eglises Libres de Pentecôte en Afrique* (CELPA) which is the Pentecostal Church in Africa based in the Democratic Republic of Congo (DRC). The program is under the church administration of CELPA and supported financially by CELPA's Norwegian partner, *The Pentecostal Foreign Mission in Norway* (PYM). The IPC is a framework agreement project financed by the *Norwegian Development Cooperation* (NORAD) via the *Norwegian Mission in Development* (BN). CELPA recently finalized its new five year program for the 2007-2011 period. The annual budget for 2007, approved by NORAD and BN is US\$ 1,127 millions (NOK 7,1 millions).

CELPA's integrated program was initiated in 1992 as an organizational development project targeting the central administration of CELPA in Bukavu, the provincial capital of Sud-Kivu in Eastern DRC. From 1993 to date, the program has integrated different development activities. Currently the IPC program activities funded by NORAD include activities in the education and health sectors, community development, activities targeting women, promotion of peace and democracy, and organizational development. Other activities such as humanitarian assistance, reintegration of child ex-combatants and psychosocial assistance to violated women and victims of psychosocial war traumas have been supported by the Norwegian Ministry of Foreign Affairs and other CELPA partners. Most of the program activities are concentrated in the province of Sud-Kivu. There are some scattered activities in the provinces of Nord-Kivu, Maniema, Province Orientale and Kinshasa.

The main purpose of this evaluation was to assess CELPAs' competencies and capacities to implement development activities in the current scale and to assess sustainability related to its administrative, professional and financial capacities. The evaluation should focus on the program's health and education and its central project administration, including the organisation's systems, competencies and capacities. Gender and rights should be cross cutting themes. The field evaluation was carried out in the province of Sud Kivu between April 17 and 28, in Kinshasa on May 10 and 11 and in Kindu, Maniema on June 5 and 6, 2007.

This document is divided into three parts. This first part includes the evaluation's TORs and methodology and brief descriptions of the country context, the CELPA program and its administrative set-up (chapters 1-4). The second part comprises the evaluation's findings which are mainly related to the relevance of the program and its administration (chapter 5), CELPA's capacities to implement the program (chapter 6), and aspects related to the sustainability of the program and its results (chapter 7). The final part provides the evaluation's conclusions and recommendations (chapters 8 and 9).

#### 2. EVALUATION'S TORS AND METHODOLOGY

The evaluation's main purpose was to assess CELPAs' competencies and capacities to implement development activities in the current scale and to assess sustainability related to its administrative, professional and financial capacities. The evaluation focused on the program's health and education and its central project administration, including the organisation's systems, competencies and capacities. Gender and rights were cross cutting themes. The evaluation addressed in particular the following issues:

- (i) Relevance, including:
  - a. The relevance of IPC's health and education components and their activities, including to assess if they are in accordance with national and local development plans and strategies of the DRC and with the development priorities of the Norwegian Development Cooperation
  - b. The relevance of the organization and administration of CELPA
  - c. The consideration of gender and rights issues in CELPA's organisation and its health and education components
- (ii) CELPA's capacities for implementing the IPC, including CELPA's:
  - a. Administrative, professional (human resources) and financial capacities, including decision making lines, local and national level participation in project management, and the work of the steering committee (Conseil d'Administration)
  - b. Use of resources (efficiency), including the proportion of salary and other administrative expenses versus the level of activities)
  - c. Capacities to monitor and evaluate, including the monitoring of goals and objectives and whether adjustments are made
- (iii) The sustainability aspects of the program, its management/organisation and program results
- (iv) Recommendations for the future

For more details, see the evaluation's Terms of Reference (TORs) in Annex 1 of this report.

The evaluation team included two Norwegian and one Congolese consultants. The methodology consisted of a review of relevant literature and a field evaluation which was carried out in Bukavu and in the province of Sud Kivu between April 17 and 28, 2007 and in Kinshasa on May 10 and 11 and in Kindu, Maniema on June 5 and 6, 2007. During the field evaluation the team met with different stakeholders, including;

- CELPA's church leaders and PYM's representative in Bukavu;
- Management and other technical and administrative staff of PIC, including the coordinators of the different project components;
- Members of the Steering Committee;
- Regional representative and Administrative Secretary (Kinshasa Office) and Assistant regional representative (Kindu office)
- Beneficiaries, managers and staff of sub-projects in the health and education sectors
- Representatives of the national educational and health services at provincial level (Inspection Provinciale de la Santé and Division Provinciale d'Enseignement Primaire et Secondaire); and
- NGOs

The evaluation team's preliminary findings were presented and discussed both with CELPA's church leaders, relevant PIC staff and with PYM's representative on April 27 and later with relevant staff of PYM in Oslo on May 4, 2007.

#### 3. COUNTRY CONTEXT

The Democratic Republic of Congo has the third largest population (57.5 million in 2005) and the second largest land area (of 2,3 million square kilometers) in Sub-Saharan Africa. It is rich in natural and human resources, including the second largest rain forest in the world, ample rainfall, fertile soils and considerable and varied mineral resources including copper, cobalt, gold, coltan and diamonds. DRC's formal economy has collapsed the last decades due to mismanagement and conflict. Moreover the recent wars, armed conflicts and lootings from 1991 and onwards have had a devastating impact on the Congolese population. During the second conflict from 1998 and 2003 an estimated 3.3 million people died. Many more had their lives dislocated. The World Bank estimates that GDP dropped from US\$ 380 in 1960 to US\$ 224 in 1990 to a bottom low US\$ 80 in 2000 to the current US\$ 120 (2006). In 2006, UNDP's Human Development Index UNDP listed DRC as number 167 out of 177 countries.

In spite of the recent positive developments such as the general and the presidential elections in 2006 and the relative normalization of some parts of the country, there are still enormous challenges ahead for the Congolese population which comprise:

- A profound deterioration of the population's social conditions, including a breakdown of
  public services, in particular basic social services and social infrastructure. For decades
  infrastructure has suffered from a lack of maintenance and considerable physical damage.
  The conflicts and lootings have further destroyed and degraded the country's social
  infrastructure such as schools and health facilities, in particular in rural areas and in the
  East and north East.
- The state's extremely low involvement in primary education and health services. In 2001, only an estimated 10 million US\$ or 3, 5 percent of the total public expenditures went to the education sector. In 2007, less than ten percent of the national budget is allocated to education. For about a decade and until around 2004 the state did not pay salaries to teachers, up to now the payments are minimal and still irregular, in particular in the East and Northeast.
- Parents and other family members shoulder the burden of financing schools and teachers' salaries or bonus. This shuts out the children from poor families, especially girls, suffer as their parents are least able to afford to send them to school (public school fees can be as high as US\$ 63 per child per year compared to an average income in DRC of US\$ 120 in 2007).
- In 2001, UNICEF (MICS 2) estimated that only one out of two children went to school. One third of people older than 15 years are illiterate. Of these 44 percent were women and 19 percent were men. In 2004, gross primary and secondary school enrollment were 61% and 22%, respectively compared with the averages for Sub-Saharan Africa of 93% and 29%, respectively¹. The illiteracy level is in particular high in conflict zones such as in Nord-Kivu (47%), Equateur (43%) and Sud-Kivu (38%) compared with e.g. Bas-Congo (30%) and Kinshasa (only 10%). Only about a fifth of children in rural areas and a third of children in urban areas entering school reach grade five.

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<sup>&</sup>lt;sup>1</sup> Source: International Standard Classification of Education

- Life expectancy is 44 years, at least one in five children die before the age of five and one in ten infants die before their first birthday.
- In 2004, the public health sector budget was about 7 percent of total budget.
- Limited access to health services, including an extreme concentration of the minimal number of both health facilities and health staff in urban areas. A large proportion of the population does not live within reach of health services. E.g. in some parts of the country, communities need to walk eight hours to a health facility. Affordability also limits the access to health services. The World Bank estimated that in 2003 only 30 percent of the population had access to basic medical care. In many parts of the country social services are minimal. Health staff often does not receive salaries from the state or they receive the minimal salaries irregularly. The health facilities have to be self-running (user fees) and/or depend on financial support from foreign donors. The most important health threats are malaria (which caused 80% of registered deaths in 2001), acute diarrhea, respiratory diseases, tuberculosis (annual TB incidence of 384 per 100.000) and HIV/AIDS. Malaria is estimated to account for one third or more of outpatient consultations at health facilities.
- Maternal mortality rate (of 1.289 deaths per 100.000 live births) is one of the highest in the world. Mothers die in child birth due to lack of access to emergency obstetric care, delays in seeking and obtaining such care, and often poor quality.
- Many girls and women (and some boys and men) are victims of sexual violence associated with the conflict, particularly in Eastern DRC. Medical consequences include HIV/AIDS transmission, reproductive health problems. Many suffer from serious psychological and social effects, in particular ostracism by women's family and community.
- Adult HIV/AIDS prevalence is estimated at 4-5% nationwide but the percentage much higher in the East and Northeastern part of the country. It is estimated that about 1.1. million people are living with the disease among which 60% are women. The economic disruption and isolation due to the war may have kept the epidemic from increasing at a faster rate in recent year. However, in some areas of the country the prevalence was increasing more rapidly due to the many large scale population movements, the collapse of the public health system, the presence of foreign troops from countries with high HIV-prevalence, and the sexual violence during the conflicts.
- As the public health and educational systems have largely collapsed, the population often relies on NGOs, most often faith-based organizations that still offer almost all the social services provided in the country and have up to now in many respects and replaced the state as social services provider to the Congolese population.

#### 4. PROGRAM DESCRIPTION

#### **4.1.** The Integrated Program of CELPA (IPC)

#### 4.1.1. Background

CELPA<sup>2</sup> is one of the oldest non-profit associations in DRC. The church was created in the early 1920s in Sud-Kivu by missionaries from the Norwegian Pentecostal Mission (PYM). It was recognized in 1929 by a Belgian Royal Decree as an official Congolese church. CELPA's involvement in diaconal and development activities started when CELPA during its early years established a hospital in Kaziba, Sud-Kivu. Later the church supported health and education facilities in many parts of Sud-Kivu. During the last decade its activities have spread to other provinces, particularly in Nord-Kivu, Province Orientale, Maniema (started in 1976) and Kinshasa (in 1997).

CELPA's administration and activities were for several decades mainly managed and run by the missionaries. The political unrest and the conflicts in the 1990s forced most missionaries to leave the country. Subsequently, nationals replaced the missionaries in CELPA's leadership and managerial positions.

In 2007, CELPA's membership was around 275 000 members and 640 parishes throughout the country. Many of its members are women. CELPA estimates that it reaches an additional 250 000 people who attend its church services or are involved or benefit from its diaconal and development activities. The church claims that the majority of its affiliates come from the lowest socio-economic categories of the Congolese population.

In the west area covering Kinshasa and the provinces of Bandudu and Bas Congo, CELPA has at present around 5000 members in 24 parishes. In the central provinces of Congo Maniema, Katanga and Kasaï Occidental and Kasaï Oriental where Kindu is CELPA's focal point CELPA has ten times more members or around 54000 members in 224 parishes.

#### 4.1.2. The Integrated Program of CELPA

The Integrated Program of CELPA (IPC) was initiated in 1992. At first it was a NORAD-funded organizational development project targeting CELPA's central administration in Bukavu. From 1993 to date, the program has included different development activities. During this period CELPA's development wing has also grown very rapidly. E.g. in 1992 the number of CELPA run schools were 152 schools, in 2000 the number had increased to 246 schools and currently (2007) CELPA manages a total of 442 schools (321 primary and 121 secondary schools) with more than 106.000 students (Evaluation report 2000, Plan Quinquinal 2007-2011). CELPA's involvement in the health sector has had the same development, before 1992 the number of CELPA-run health facilities was 24, in 2000 about 65 health facilities and in 2007 a total of 102.

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<sup>&</sup>lt;sup>2</sup> Its first name was The Association of the Free Churches of Norway (Association des Eglises Libres de Norvège - AELN). In 1969 it was renamed to the Association of Free Churches of Congo – and in 1981 the Association of Free Churches of Zaire.

#### 4.1.3. CELPA's development partners

Currently the NORAD funded activities of CELPA's integrated program include activities in the education and health sectors, community development, activities targeting women, promotion of peace and democracy and organizational development. The Norwegian Ministry of Foreign Affairs (MFA) has supported many of the program's activities related to humanitarian assistance, including reintegration of child ex-combatants and psychosocial assistance to violated women and victims of psychosocial war traumas have been mainly supported by. Other partners have also supported CELPA's various development activities. However, this has often been on a more short or medium term basis. E.g. in the health sector, CELPA has collaborated with the German NGO Maltheser. In the education sector it has collaborated with UNICEF, Save the Children, Norwegian Church Aid and the Tear Fund, and in community development with ACTED, a French NGOs. Some health and education activities are also funded by Norwegian individuals and schools. Most of the program activities are concentrated in the province of Sud-Kivu. The activities in the provinces of Nord-Kivu, Maniema, Province Orientale and Kinshasa are scattered but increasing.

CELPA's partner churches in DRC comprise Eglise du Christ au Congo, the Community of Baptist Churches (Communauté des Eglises Baptistes du Congo (CE)) and Chaîne de Solidarité that regroups the heads of all the faith-based organizations in DRC.

#### 4.1.4. IPC's new five year plan - 2007-2011

CELPA's recently finalized its new and ambitious five year plan (Plan Quinquinal) for the 2007-2011 period. The NORAD supports following components: education, health and HIV/AIDS, organizational development, community development, and promotion of women (SAF) and women activities (CEPAF). Peace and democratization, reintegration of ex-child combatants, medical and psychosocial assistance to violated women and other victims of psychological war traumas (CAMPS) are planned to be financed by other partners, including the Norwegian MFA. The IP for the new period is generally a continuation of the existing activities although some of the components cover new selected geographical areas. The long term objective of the program is to contribute to the improvement of the socio-economic living conditions of the poor population that is living in areas where CELPA is active. The annual budget for 2007, approved by NORAD and BN was 1,127 million US\$ or NOK 7, 1 millions. Annex 3 provides more details on CELPA's new five year program.

#### 4.2. CELPA's organization

#### 4.2.1. CELPA's organizational structure

CELPA's organizational structure has two separate but complementary branches: the spiritual and evangelical wing and the diaconal and development wing. CELPA's member churches (currently there are 640) are those who follow CELPA's faith based doctrine, have a legal status and abide to various obligations such as to pay for their pastor and have an internal organizational structure, a house in lasting material robust and 200 to 300 registered members. The member churches are reassembled into Districts, Sub-regions and ecclesiastical Regions. The highest level is the Community Conference (*Conférence Communautaire*) which comprises 100 delegates from the churches, districts, sub-regions and regions. Since 2004 the Conference meets once every second year (previously it was once a year). CELPA's internal rules and regulations define the composition and the duties of the all the different

organizational levels (from Conference down to district level) as well the different assemblies at the same levels (Regional and Sub-Regional Assembly, District Assembly and College (?) of Elders).

CELPA six ecclesiastical regions comprise the regions of east Sud-Kivu; west Sud-Kivu; Itombwe part of Sud Kivu; Central Congo, including Maniema, Kasaï Oriental and Kasaï Occidental and Maniema; North Congo, including Province Orientale and Equateur; and West Congo comprising Kinshasa, Bas-Congo and Bandundu. In recent years CELPA has also extended its geographical outreach to other African countries, including Kenya, Ethiopia, Niger and Madagascar.

#### 4.2.2. CELPA's administration

CELPA's Steering Committee (Conseil D'Administration) has a Permanent Office (Bureau Permanent). Currently the Permanent Office has two members, the Legal Representative (Représentant Légal) and his assistant (Représentant Légal Adjoint) who are both pastors and are nominated by the Community Conference. They are in direct contact with the managers of CELPA's two main departments, the evangelical and the diaconal and development departments.

The evangelization department is headed by coordinator who is normally a pastor. It covers various units involved with activities such as biblical schools and courses, a print shop and the Radio IBRA, alms collection and youth activities. The department is assisted by a cash registry and a revenue collection unit.

The diaconal and development department is under the responsibility of an Administrative Secretary (Sécretaire Administratif). The department has three administrative units, including the Finance unit (treasury, accounts and cash registry), Human resource and public relations and Secretariat and Logistics. The organizational chart also includes (directly under the Administrative Secretary and over the different technical units) a Coordination unit for programs and projects. There are a total of eight technical units (called coordination units) that cover their specific activities. The units comprise education, health, peace and democracy, community development, reintegration, centre for the promotion of women, women support, and CAMPs.

#### II. FINDINGS

#### 5. RELEVANCE

## 5.1. The relevance of the IPC's education and health components, their approaches and activities

#### 5.1.1. Education

CELPA's education activities are very relevant and are in accordance with some of the most important needs of CELPA members, affiliates and the general public, particularly boys and girls and their parents (ref. the country context in chapter 3). CELPA's education efforts contribute to the important challenge of educating DRC's many illiterate children. E.g. in 2001, the illiteracy levels in Nord and Sud Kivu were 47% and 38 %, respectively. In Maniema the gross enrollment rate were 59% for primary school and only 29% for secondary school (2004). The results of CELPA's activities in the education sector (scores, examination results etc.) are recognized as some of the best nation-wide.

The education component addresses the important need to construct and to rehabilitate DRC's school infrastructure. An important part of the existing schools in the country, in particular in current or previous conflict zones where CELPA operates (especially Province Orientale, Maniema and Nord and Sud Kivu), has been destroyed or looted during the last few decades. In addition, maintenance of buildings and equipment has generally been neglected since the Mobutu regime. Most of CELPA's school infrastructure is well planned and developed and in durable materials.

Generally, the local communities take initiative for the construction or rehabilitation of school infrastructure. They often produce the construction materials – or mobilize funds for some of this material - and provide the necessary labor. CELPA supports the communities who first have been able to mobilize the required contribution. CELPA's assistance is normally a very limited standard "package" which includes roof materials (sheet metal), nails, some cement and cast irons. In many cases the local contribution is much higher than CELPA's material support. This approach seems to be very cost-effective: more schools and classrooms can be constructed as the contribution from each beneficiary community is significant and CELPA's support to each individual sub-project is relatively limited. This approach is also highly commendable as it focuses on a strong mobilization of the community members around their local school which also builds community members' ownership to the school. The important number of CELPA schools – both in rural and urban areas – that have been constructed in this way illustrates the great importance local communities give to education. Many development projects supporting community development and social infrastructures face problems in mobilizing the local contribution to community projects. CELPA should appraise in detail the local contribution (physical labor and materials) and use its success in community mobilization in both the education and the health sectors as an important marketing tool vis-àvis potential partners and donors.

Concerning the actual investments in school infrastructure rehabilitation and construction, the 2007 budget illustrates a bias towards secondary "elite" schools in urban areas (e.g. such as Tohamini and Bwindi type schools). About US\$ 166.000 out of the total US\$ 219.000 for "buildings" ("bâtiments") is earmarked for construction or rehabilitation of school complexes or school halls in Kisangani, Bukavu and Goma. Less than 20% or only about US\$ 51.000 are earmarked to support local school initiatives (to construct or rehabilitate 80 classrooms) which are assumed to often be located in rural areas. These allocations demonstrate that priority is given to secondary education in urban areas. This favors the urban population who has generally more education opportunities and other resources (in relative terms) on the expense of boys and girls in rural areas with very limited access to school.

Its teacher training program is consistent with the critical need to strengthen its teachers' pedagogical capacities. This need was illustrated by the education authorities of Sud-Kivu that reported that only 53 % of the teachers in primary schools in the province are qualified. The percentage is much lower than 50 % in rural areas and much higher than 50% in the provincial capital of Bukavu. Currently CELPA looks into ways of reaching out to more teachers by decentralizing the training program. This is also very relevant and should be pursued. Given the important need of strengthening the teachers' capacities its current budget seems small. It was only US\$ 45.000 out of total US\$ 409.407 for education in 2007.

The existing national and provincial strategies and plans for education aims to purse universal primary education, in particular in rural areas, and to promote improved and more equitable access by reducing the financial burden of households. In accordance with the recently finalized National Strategy for Poverty Reduction the government plans to increase the budgetary allocation of 6,7 % in 2006 to 15 % in 2008 and to 25 % in 2015 with a special focus on primary education. The provincial education authorities for Sud-Kivu also reported that it gives priority to primary education in rural areas. Although the provincial education office stated that CELPA assisted the authorities in pursuing its objectives in the sector, the authorities suggested that CELPA in the future earmarks more of its investments and support to primary education and to rural areas. The education authorities also indicated that "elite" secondary schools in provincial capitals were generally not very accessible for the rural bright young women and men and that CELPA could consider locating such schools in rural areas in the future.

The provision of school equipment such as furniture and didactical material (US\$ 32.000 in 2007) is also very relevant and important. Unfortunately, the actual supplies far from meet the important needs of CELPA schools.

The efforts of the coordination unit in promoting its school staff so that they can receive their salaries are important. The many schools that have few teachers who are on the state's payroll have significant problems in being economically self-sufficient. Their only income source is the parents' meager school fee which provides for a small bonus to the teachers. Several of CELPA's schools in Maniema have no teachers that are on the state's payroll which discouraged the teachers.

CELPA's new five year program also plans to address gender issues in the education sector. In DRC there exist important discrepancies between girls and boys enrollment in primary and in particular in secondary schools. E.g. in 2005, in CELPA's primary and secondary schools there were a total of 61.566 boys and only 44.509 girls. The discrepancy was particularly pronounced in the secondary schools that have more than double so many boys as girls (in

2005, 12.607 boys compared with 6,129 girls). The gender bias in schools is common for most schools in the DRC. E.g. in Ituri in Province Orientale only 38 % of the students in primary schools are girls, in secondary school the percentage is as low as 35. In Maniema in 2004, only 40% of primary school students were girls and in secondary school there were only 21 percent girls.

CELPA's education component plans to develop a strategy for how to improve girls' net enrollment, in particular in primary schools in rural areas and to test out different approaches in three pilot areas. However, CELPA has not planned to look into how to counter-act the important drop-out of girls during secondary school. The work related to the Strategy has not yet started.

The education component also plans that at least 250 of its teachers and school managers benefiting from the CFDS training program will be women. This new approach is commendable, in particular in relation to the CELPA evaluation in 2000 that noted that no women teachers or managers had benefited from CELPA's training activities. Currently (2007) there are only 461 female teachers compared to 2.934 male teachers in the CELPA schools, the gender bias in school managers is even more challenging with only women school directors compared with 448 male managers. In the coordination unit, there are only two women. There are no women in management positions in the unit.

CELPA's education activities are in general in accordance with the priorities of the Norwegian Development Cooperation for the education sector <sup>3</sup> which prioritize the improvement of children's access to school, in particular primary and secondary education and the improvement of the quality of education, including the training of teachers and improved teaching methodologies and materials. The Norwegian Development Cooperation puts a particular focus on the need to improve girls' access to education, women's access to literacy and vocational skill training and the access to education for children living in conflict and post-conflict areas.

#### 5.1.2. Health, including HIV/AIDS activities

The health activities of CELPA are relevant and are in accordance with some of the most important needs of CELPA's members and the general public, in particular those of women and children (ref. the country context in chapter 3). However, CELPA's current investments and other activities prioritize secondary health care, in particular in provincial capitals and towns. These are areas that already benefit from most of the country's limited health services. It seems that CELPA does not adequately address the important needs of the rural population who often does not live within reach of even primary health services.

CELPA's efforts in constructing and rehabilitating health infrastructure is very relevant as health facilities have often – as Congo's many schools - been destroyed, frequently looted and poorly maintained for a long period. Also for its support to health facilities, CELPA has adopted the commendable approach (as the education component) which focuses on community initiative and an important local contribution (labor and materials). As in the

<sup>&</sup>lt;sup>3</sup> 15 percent of Norwegian Development assistance is allocated to the education sector.

education sector, most of CELPA's health infrastructure is well developed and have durable materials.

In the 2007 budget, the total investments for construction and rehabilitation of health facilities were about US\$ 95.000. Of this, around US\$ 80.000 were allocated to Sud Kivu and the remaining US\$15.000 to Maniema. Most investment is earmarked for secondary health centers (hospitals), including that of the Kikutu hospital which located in a rural area. E.g. in Sud-Kivu only about US\$ 14.000 target local health centers while US\$ 57.000 is earmarked for larger hospitals. Of the US\$ 36.400 allocated for equipment, the eye-clinic in Kisangani and CELPA's hospital center in Bukavu (radiology department) are the most important beneficiaries (US\$ 31.000) while equipment for only US\$ 5000 are allocated to primary health centers.

The need to strengthen the skills of its medical staff is important and has been addressed by the project. Most or US\$ 16.200 of the total of US\$ 20.200 (2007 budget) for the training of staff to are targeted to specialized training for medical doctors (in pediatrics, gynecology and obstetrics) and only US\$ 4.000 for training of other medical staff. This resource allocation is relevant as it addresses the important need for specializing training of e.g. young medical graduates working in rural areas.

Concerning gender issues, there is a better balance between men and women staff in CELPA's health facilities compared with the staff of CELPA's schools. On the other hand, no women have management positions or are medical doctors. There is no women staff in CELPA's health coordination unit. The health component has so far no plans to make a gender strategy to improve the gender balance among its health staff, inside and outside the coordination unit. This would have been very relevant although the limited number of women graduating from medical schools in DRC is a limiting factor for hiring female medical doctors.

Currently it is CELPA's CAMPS component that provides psychosocial and medical assistance to about 11.500 victims (mostly women and children) of violence through its CAMPS centers in Kinshasa, Kisangani, Bukavu and Kindu. There is some collaboration between CAMPs and the health component. Given the important number of violated and sexually abused girls and women it seems relevant that CELPA should address in the future the need to recruit female psychiatrists and psychologists and/or train relevant health staff in how to care for the victims of violence.

Concerning its HIV/AIDS activities, CELPA, with its decentralized structure and hundreds of community based parishes, has a significant outreach capacity for sensitizing local community members both on HIV/AIDS prevention and how to care for other HIV positive or their AIDS sick community members. CELPA has started on a small-scale to sensitize and mobilize its church leaders and pastors in HIV/AIDS work which is very relevant and is a great potential when CELPA has mobilized much more resources for its HIV/AIDS activities. CELPA focus a lot on targeting young women and girls in its HIV/AIDS awareness activities. This might be appropriate. However, lessons learned from many HIV/AIDS projects is that great efforts – and often more efforts - should be made in targeting men, young and old, and boys, both school and out-of school adolescents, in HIV/AIDS awareness campaigns. Men in terms of their decision making role in the home, is an important target group. Adolescents and out-of school children, in terms of their age and vulnerability are another crucial target. Elderly, given their importance in advising the young should also be targeted.

In many African countries there is a very high and growing number of HIV positive and AIDS sick patients. At the same time many health facilities have inadequate capacities to take care of the growing number of HIV/AIDS patients. To respond to this health challenge, ongoing health and HIV/AIDS projects often try to establish and support home-based care whereby volunteers, trained and supervised by professional health staff, supervise family members of AIDS patients and other local community members on how to take care of their HIV positive and AIDS sick patients in their own homes. Some projects also focus on home based care for other type of patients. Although the HIV prevalence is not as high in RDC as in many of its neighboring countries, CELPA should also investigate if, how and when a home based care program should be pursued.

The current national and provincial health authorities' strategies and priorities focus on improving the coverage of essential health services through decentralized support at the health zone level and close partnership with non-governmental actors and strengthening the capacities at different levels to improve in particular: malnutrition, child and maternal mortality, malaria, HIV/AIDS, tuberculosis and other priority diseases. The provincial authorities in Sud-Kivu reported that CELPA was a good health partner and that they collaborated closely in many health zones.

CELPA's health support is quite in line with the Norwegian Development Cooperation's priorities in the sector. The Norwegian support targets the following areas: the development of viable comprehensive health care systems (including the recruitment of qualified personnel), tuberculosis prevention, provision of vaccines for children, reproductive health and HIV/AIDS awareness and prevention. Under a *NUFU-research program* – established with the purpose of promoting collaboration between scholars in different countries – Norway aims to contribute to capacity building, specifically within the health and medical sector. CELPA - with PYM's support - should look for possibilities to apply for research funds under this program.

#### 5.2. Relevance of the organizational and administrative set-up

CELPA's organizational structure with two separate but complementary branches: the spiritual and evangelical wing and the diaconal and development wing, is very relevant for a church organization. It responds to both the spiritual needs of many people as well as the general population's (including CELPA members, affiliates and the general public in the areas covered by CELPA) need for social services.

CELPA, with its decentralized structure and its current 640 recognized community based parishes, has a significant outreach capacity for various development activities. The church has an important network which reaches far into remote rural areas (often insecure, even today) and small townships. CELPA has an ability to mobilize people and people often trust CELPA both as a vital church organization and as a committed development organization. CELPA's ability to mobilize its members and other parts of the population around the execution of social infrastructure projects such as schools and health facilities - and also to create local ownership to these facilities - is praise-worthy (see previous chapter 5.1).

A weakness in CELPA's organizational structure and administration is the split up of the province of Sud-Kivu in three separate ecclesiastical regions. This seems counterproductive to CELPA's objectives and should be an issue to be discussed and resolved during the next Community Conference.

Many of CELPA's more than 275.000 members are women. Yet, at present the Evangelical Department has no units that deal with women issues.

The decision making processes within and between different organisation levels can appear somehow unclear and at times even murky. It seems that CELPA's current Statutes provide a considerable concentration of decision-making power to the two members of the Permanent office. In the medium and long term this can be a risk for CELPA's internal organisation. According to the Statutes its Steering Committee (Conseil d'Administration) is the Community Conference's executing body. However, the decisions made by the Steering Committee are based on the reports from its Permanent Office and by reports from the Control Committee. In addition, the president of the Steering Committee is also the head of the Permanent Office who both manages daily the Permanent Office and who is the chairperson of the Community Conference's meetings. Moreover, during the meetings of the Steering Committee there are no permanent representatives from the evangelisation and the development departments. They are only invited when needed by the Steering Committee.

At provincial level there is also a significant concentration of power by the regional delegates vis-à-vis the decentralised structures. This concerns both the evangelisation and the diaconal and development activities. However, the actual decision-making power of the regional delegates vis-à-vis the headquarters is unclear, in particular those of Sud-Kivu, and those of Maniema vis-à-vis the Permanent Office who is under the influence of the Assistant Legal Representative who emanates from the province. Decision making and information flow within the Steering Committee are also unclear. E.g. most of the Committee members that the team met with were not aware that one of their members had recently carried out an official CELPA mission to Kinshasa.

Another example is the newly set-up data centre (internet-café) in Bukavu by CELPA's youth unit (supported by Norwegian missionaries and a Pentacostal youth group in Norway) where neither the coordinator of the evangelisation department nor the finance department of the development department has any management control or oversight.

The two regional offices visited consider that most of the decisions concerning resource allocation are taken in Bukavu, in particular by the Permanent Office, the Administrative Secretary and the coordination units for health and education.

## **5.3.** The consideration of gender and human rights in the CELPA's organization and its education and health sector

#### 5.3.1. Human rights and gender - definitions

Human Rights-based approaches to gender reflect internationally agreed human rights principles in development policy and practice. The human rights principles most relevant to gender issues are non-discrimination, participation and equality of opportunity. These are

underpinned by the Convention of the Elimination of all forms of Discrimination against Women (CEDAW)<sup>4</sup>

'Gender' refers to the socially constructed roles of women and men. These depend on social, economic, political and cultural contexts. E.g. in DRC, women's voices are stifled in the public and private sphere. This excludes them from power structures witch are dominated by men. In this way, women are denied the right to a voice, the right to a livelihood, to education and to freedom from violence. This in turn leads women to bear the brunt of poverty.

#### 5.3.2. The Feminisation of Poverty in DRC

The number of vulnerable groups in DRC – in which many vulnerable women and children are numerous –is particularly high for the time being due to five main reasons<sup>5</sup>:

- (i) Unjust and discriminatory habits
- (ii) Weak social integration mechanisms
- (iii) The deterioration of the socio-economic situation because of the war and a vulnerable economy
- (iv) The absence or lack of a coherent social policy.
- (v) The State's minimal capacity to create and maintain a social protection system.

Many women in DRC are visibly more vulnerable than men. In the study entitled "Poverty, Insecurity and Exclusion in RDC (UPPE-SRP) the *feminisation of poverty* is described as a structure in which the women are socially, economically and politically marginalised and excluded from vital decision making bodies on both local and national levels.

One of the obvious reasons for the discrimination or exploitation of women is the war. But this is not the only explanatory variable. The non-respect of women rights is also fundamentally linked to faith, traditional customs – including traditional law-structures – which in DRC is discretionary in nature. That is, the traditional culture consigns certain social groups, especially the women and the children to a lower status within the society. The violence of women rights is thus defined by UPPE-SRP as people's loyalty and social ties to a range of traditional customs, which generate inequality. These customs are established, and preserved in order to maintain the current *unjust* power structures between women and men. The most salient consequences of this situation are:

- (i) High percentage of illiteracy women
- (ii) Rapid increase in the transmission chains of the HIV/SIDA
- (iii) Destruction of the social relations between men and women on all levels in society family, community, and the State.

One of the indicators to target a woman's deprivation is trough an analyses of her economic marginalisation. Despite the fact that women are seen as the main agricultural providers, they have slightly, or no, control over the distribution of the produced food. Neither do they control the income from the products sold at the market place.

<sup>5</sup> Pauvreté, Insecurité et Exlision en RDC. Ministre du Plan. Unité de Pilotage du Processus d'élaboration et de mise en æuvre de la stratégie pour la Réduction de la Pauvrété. Kinshasa, Juin 2006

<sup>&</sup>lt;sup>4</sup> Lessons from Evaluations of Women and Gender Equality in Development Cooperation. Synthesis Report 2006/1. NORAD

Provincial and national analysts in Congo underline that because of women's lack of control over material recourses, and to ownership to the agricultural fields, their work and contributions to the family incomes, to local community and to the country are in praxis invisible. Another indicator of a women's deprivation is embedded in the traditional customs. Throughout a woman's lifecycle, traditional habits allow the men to expropriate a widow which means, that a woman sometimes is obliged to marry the brother of the previous husband with an aim to maintain her economic value. Women are as such also *culturally* devaluated.

#### 5.3.3. Women, Education and Health in CELPA

Our main impression is that the CELPA education and health system function as a buffer against female deprivation and to a certain extent empower the girls in order to resist culturally defined abuses, and allow them to fight for their rights. The main target groups within the health and to a certain extent the education sector are in fact children and women. CELPA have an *impressing* school rate attendance, both for girls and boys but the girls has a too high drop out rate. The reproductive health care within CELPA is also a major contribution to ensure women's rights during pregnancy and childbirth.

However, there are serious gender discrepancies within both the education and health components as well as within CELPA's administration. The causes behind them are partly due to the above-mentioned feminisation of poverty in DRC. The gender discrepancies found in CELPA is therefore not easy to cope with, because of the institutionalised gender prejudices in DRC that do not favour women as equal partners in decision-making bodies. The church structure reflects in this sense common attitudes in DRC. Hence, the gender discrepancies found in CELPA, are not asymmetric with what is the general situation for women in DRC. This should however not be used by CELPA as an excuse to conserve unjust habits, but rather used as an argument stimulating and encouraging change.

It is discouraging that the conclusion from the UPPE-SPR study also goes for the results found within CELPA education component. The most visible findings, which show that women's marginalization persists, are: firstly; a generally weak school attendance for the girls compared to the boys particularly in secondary school and at college level. Secondly, there is a high school drop out rate for the girls compared to boys. Thirdly; there is a very weak representation of the women in the decision making bodies within the CELPA education sector. Only 461 out of 3395 teachers are women, and there are only five women out of 453 that hold a chief position in the school system. With regard to the health component, the situation is slightly more promising. 155 women out of 517 are employed as nurses and childbirth assistants. However, there are no female doctors and no women that hold a management position in the health sector.

The gender discrepancies within the decision-making bodies in CELPA were highlighted as a major problem in the evaluation report done in 2000. However, any follow-up of these recommendations have not been carried out in the present administrative church hierarchy, neither in the education and health sector. Even though the need to recruit more women in central positions were clearly expressed by Lode and al (2000)<sup>6</sup>

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<sup>&</sup>lt;sup>6</sup> Kåre Lode, Satou, Marthe, Nono, Ntabugi, Birihanyuma Mavungo, Jean (2000), Projet de developpement de la CELPA DRC. Rapport d'evaluation. Centre for Intercultural Communications (SIK).

There exist no good explanations why CELPA has neglected these recommendations. CELPA has a huge organizational capacity and adequate human resources to promote women. CELPA also has a representative selection of skilled women that can ensure female participation in the decision-making bodies at all levels. Thus, one may ask if there exists a theological reason to explain the marginalization of women. Many Pentecostal churches do for example not allow women to be pastors, or to occupy leading positions within the clergy. This practice may reflects the general situation in DRC where women are systematically being marginalized, and where traditional customs are intertwined with Christian norms and values. As such, the church image of itself is a force insofar as it influences the judgment of the women's image of themselves, and insofar as each woman tries to make her behavior a reflection of this image. Consequently women contribute to their own marginalization trough self-exclusion mechanisms, because nobody tells them how, or want them, to be independent. Thus, women need training in building up a strong and healthy self-confidence. The church has a major responsibility to empower the women within their structures because they have authority, networks and the resources available to do it more effective and efficiently than most NGO's in DRC.

One of the main tasks for CELPA is to elaborate a comprehensive gender sensitive strategy which would demonstrate how CELPA would meet the challenge to integrate the women at all decision making levels in a just and equal way.

#### 5.3.4. Human Rights and CELPA

In DRC Christian churches, other faith-based organisations provide in some regions *the only available social services* for the last 20 years. They represent a significant and influential part of the population, and a comprehensive network. Many activities of CELPA's integrated program contribute with important material and human resources to ensure social protection for vulnerable groups in DRC. CELPA fulfills thus social services on the behalf of the State and which are in accordance with the 1325 resolution<sup>7</sup> on several matters. Nevertheless, equal participation for women is not fully attended with regard to the decision-making bodies within all the above mentioned development components.

International Humanitarian rights law (IHRL)<sup>8</sup> lays down rules binding governments in their relation with individuals. While there is a growing body of opinion according to which non-state actors – particularly if they exercise government-like functions – must also be expected to respect human rights norms, the issue remains unsettled. Because DRC is not yet a fully democratic and decentralized State, to which each individual can claim his/her rights, CELPA has a huge responsibility in order to assure that their work does not hamper the ongoing decentralization process in DRC. Thus, CELPA has a double task to fulfill: To be upwardly accountable vis-à-vis the State authorities and IHRL and secondly: to be downwardly accountable vis-à-vis the local population.

Resolution 1325: http://www.un.org/events/res\_1325e.pdf

<sup>&</sup>lt;sup>8</sup> IHRL main treaty sources are the International Covenants on Civil and Political Rights and on Social and Cultural Rights (1966) as well as Convention on Genocide (1948), Racial Discrimination (1965), Discrimination against Women (1979), Torture (1984) and Rights for the Child (1989).

### 6. CELPA'S CAPACITIES IN IMPLEMENTING THE INTEGRATED PROGRAM

#### 6.1. CELPA's administrative, professional and financial capacities

#### 6.1.1. Administrative and organizational capacities

CELPA's current administrative and organizational capacities can be improved to guarantee a good implementation of its integrated program, in particular in the medium and long run.

At the organisational level, each sector of the IPC has a small administration which helps in coordinating the different sector activities. On the other hand, the actual role and responsibilities of the coordinating unit for projects and programs (as mentioned earlier) are unclear in relation to those of the Administrative Secretary's office. The evaluation team was not able to meet with the head for this unit during the visit in Bukavu. Interestingly, nobody else in CELPA knew about his exact whereabouts and when he would eventually return to Bukavu.

The head of the diaconal and development branch of CELPA has the church's most important position and responsibilities in relation to the integrated program. Yet, the title as an Administrative Secretary (*Sécretaire Administratif*) signifies – in both French and English - a more subordinate position. Consequently, the use of the title can be both confusing – and maybe at times discouraging and not motivating for the person concerned. CELPA should consider changing the title to reflect the current position.

There exist several important weaknesses in the management of IPC's human, material and financial resources. E.g. CELPA does not have any staff rules and regulations providing guidelines for how to recruit staff, the obligations employer –employee and vice-versa, sanctions, social benefits, working hours etc. Several staff does not have contracts with CELPA. Consequently there is a risk for CELPA to be exposed to potential liabilities (from the work inspection (l'Inspection Provinciale de Travail)). Many of the weaknesses are related to the fact that the organization does not have comprehensive and universal guidelines for how to manage these resources at different levels. Sometimes CELPA produces administrative notes and circulars that can be modified at any time by the Bureau Permanent. CELPA has for a long time used PYM's manual for administrative and financial procedures. However, this is manual does not comprise rules and regulations related to the running of CELPA, including how to recruit staff (sanctions, social benefits, working hours etc) etc.

#### 6.1.2. Professional and technical capacities

CELPA's human resources are important and are characteristic for the social and cultural diversity of its members. Staff in both in the administration and in the technical units originates from various localities of DRC. This creates a sense of community feeling and reinforces collaboration between employees.

On the other hand, CELPA's way of recruiting its staff seems at times unclear and not transparent. This can reduce both the collegial atmosphere and the confidence staff and others have to CELPA and the integrated program. As already indicated in chapter 6.1.1., many program staff does not have a contract with CELPA. This concerns the great majority of staff,

including the staff in the regional offices visited, except for most personnel in CELPA's education and health sectors. This can generate important risks such as insecurity related to staff's professional careers and arbitrary motivations to work between staff. E.g. in the Kinshasa office there were important disparities in salaries between staff at the same level. In fact, the Administrative Secretary's salary (USD 600) is only half the salary (USD 1200) of the responsible for women activities (SAF) who is his subordinate. It can also have a significant negative impact on CELPA as a professional development organization. E.g. in some cases it is maybe not apparent that the best get the job. It can also be difficult to monitor work carried out by subordinates as some employees who feel protected by CELPA's managers may not have the same work morale as others. CELPA can also be exposed to potential liabilities.

The coordination units for health and education have qualified technically staff which has a contract with CELPA. Most of the staff are state employees, consequently they receive both a - at present relatively small – salary from the state as well as a complementary bonus from CELPA's integrated program. It is believed that these mechanisms strengthen the credibility of CELPA's actions in the health and education sector as well as the confidence of the integrated program's different stakeholders. On the other hand, many of the other staff in other sectors does not have a contract with CELPA which reduces motivation and can have negative impact for CELPA as a professional development organization.

#### 6.1.3. Financial capacities

The financial capacities of CELPA are at present quite fragile. For its diaconal and development activities, CELPA depends largely on one single donor which is PYM and for its evangelisation activities the church depends on contributions from missionaries and other mostly foreign - individuals. The collaboration with state authorities provides some additional funds, mostly in terms of small salaries to some staff in CELPA's health and education sectors. CELPA also collaborates with other partners such as some foreign NGOs (such as Maltheser, Norwegian Church Aid, Save the Children and the Tear Fund) and some UN agencies such as the World Food Program and UNICEF. Sometimes the regional offices have established new partnerships. E.g. the Kindu office has received support for the construction of schools and health facilities from the Belgian Technical Cooperation and the British NGO Christian Aid. Most of this collaboration is productive but it is mostly of a short or medium term character and does not provide the necessary additional resources to make CELPA more financially independent.

CELPA's own income sources should be explored more in the future. E.g. the Kindu office is able to generate a considerable amount by renting out some of its buildings to international organizations (UNICEF, WFP etc.). About 15 years ago, the same regional office established a savings and credit cooperative that generates enough funds to finance some infrastructure projects.

Currently the management of some of CELPA's internal income sources appears at times unclear. The church benefits from monthly contributions from some of the services, reportedly from 15 to 120 dollars per service. The "income making" units comprise the print shop, all CELPA's secondary schools (these funds come from a small percentage of the funds mobilized from the student's parents), its principal hospitals and eye clinic and the Technical Institute (workshop) of Burhuza. Concerning the management of these funds, the team found out that in the accountant of the development department does not register the funds coming

from secondary schools. These funds are only registered in the accounts of CELPA's education unit. In addition, during the team's visit in Bukavu no staff met with was able to asses the exact amount of the total contribution to CELPA of US\$ 0.2 from its individual church members but only reported that this amount varied.

CELPA's need to have more specific administrative and financial guidelines for its own internal management and procedures (see previous chapter 6.1.1), and not only those in PYM's Manual, is also evident when it comes to book keeping and accounts. E.g. although the registry for the budgetary allocations from PYM is kept by the chief accountant, he is not signing these. This same approach is used by cash registries of both the evangelization and the development departments where there were several irregularities concerning the recording of the withdrawal of funds. The review noted e.g. that: several dates of different vouchers ("pièces justificatifs ») were not indicated in the cash registries; some dates in the cash registries were not in accordance with the actual text (e.g. one voucher from December is registered for the month of November); the cash registries are not signed by neither the accountants, the cashiers, nor the coordinator for the Evangelization branch or the Administrative Secretary who would normally authorize the payments requested by the sector coordinators etc. Instead the cash registries are currently signed by PYM's representative who should not be involved in the management of CELPA's resources. In Kinshasa, the the PIC bank account was signed by the Regional Representative and a sector manager and not by the Regional Administrative Secretary. In fact the sector manager does not have a work contract with CELPA and is the Regional Administrative Secretary subordinate.

The different weaknesses identified above, raise the issue of the quality of CELPA's audit reports in particular concerning the analyses of the book keeping and registry of accounts, concerning the control and management of CELPA's resources, including its own income, et the procedures establishes for how to manage these. Consequently, there is a great need to establish several mechanisms, including to:

- elaboration and adopt an Administrative and Financial Procedures Manual to improve the management of IPC and CELPA's other activities
- develop a business plan (plan d'entreprise) that will take into account and further develop all the current and potential internal and external resources for CELPA in order to improve its financial and economical viability
- examine the need for a new external auditor on the basis of the important principles of independency and professionalism. The current auditor has worked as auditor for CELPA for more than five years and is also CELPA staff (the school director of Tomhani Secondary School), he is under the supervision of the coordinator for education and is beneficiary of important investments and subsidizes. This raises the issue of his dependency vis-à-vis CELPA and constraints with regard to both objectivity and the need to carry out comprehensive and detailed analyses of financial statements and book keeping. This evaluation is aware of PYM's so far satisfaction with the quality of these reports and the important detailed information that they sometimes include. However PYM should urgently consider if the change of auditor would be more appropriate and if the same detailed and valuable information currently provided by the auditor might be available from other sources. Moreover, CELPA and PYM should ensure that the main addressee of the audit reports is CELPA's management and not PYM.

#### **6.2.** Resource use

Each sector has a budget for its three main budget lines which are: investments, operating costs and punctual expenditures ("Depenses ponctuelles"). The first budget line corresponds to the actual investments made in the individual sector. The last budget line gives the impression that it comprises minor and unimportant expenditures given its name "punctual expenditures". Yet the budget line "conceals" important activities such as supervision, studies and training which are specifically related to CELPA's quality assurance of its activities and results in each sector. The use of the existing title reduces their importance and makes it relatively easy cut in this specific budget line. CELPA should try to find a more appropriate title for this budget line, such as e.g. "activities" or "expenditures related to activities".

The managers of some of IPC's technical units of the IPC, in particular those of the education and health units are familiar with their specific mandates and responsibilities and collaborate with other CELPA units. Most other units appear to often have overlapping objectives, activities and agendas. This seems to be the case of the SAF, SECAF, peace and democracy, community development and re-integration of child soldiers units. In addition, several of these units have extremely ambitious objectives and indicators and at the same time very limited budgetary resources which are thinly spread between numerous activities. To improve CELPA's resource use and to avoid having too many overlapping and competing units, a future task for CELPA would be to revise and reorganize some units, e.g. to transfer SAF to its previous location at the evangelization department.

As stated above (see previous chapter 6.1.3) CELPA has not adequately explored possibilities to establish partnerships that would mobilize funds to improve the financial viability of the organization and that would benefit CELPA's members and the general public. At present there are several important donors, such as the World Bank (through e.g. BCECO, UGP and the National Social Aids Program (PNLMS), the Social Fund Program - FSRDC and its two country wide programs in the education and health sectors), the European Union and others who finances important and often country-wide programs in the social sectors and that look for local NGO partners as local executing agencies or as intermediaries between the specific program and local beneficiary communities. CELPA should do more to take advantage of and market its good performance in the health and education sectors, particularly its success in mobilizing local communities around the construction and rehabilitation of schools and health facilities. This task requires skilled and experienced manpower. One suggestion would be to transfer and attach the current project and program coordination unit with the Administrative Secretary's unit (that position should be renamed principal coordinator as that one of the evangelization department). At this level its assignment should be revised and include the support to all technical units to prepare project documents, funding requests and proposals and to assist in the mobilization of partner funds and establishment of partnership with public and private actors, such as the government, UN agencies, the World Bank, bilateral donors and international NGOs.

#### 6.3. Planning, prioritization and monitoring

It is not very clear how and on which basis CELPA in its integrated program actually prioritizes between different types of activities and sub-projects as well as between the demands of its different ecclesiastic regions. This concerns both the program's annual

planning stage and later when CELPA reduces and modifies its program and activities subsequent to budget reductions made by the donor agencies (PYM, BN and/or NORAD). In fact, budget and program cuts seem to have become a regular annual exercise as the initial annual budgets are often too ambitious in relation to available donor funds.

As previously stated (in chapters 5.1.1. and 5.1.2.) the health and education sectors' investment budgets favour construction and rehabilitation of secondary schools and secondary health facilities in urban areas. This should be contrary to the needs of an important part of CELPA's members that are rural poor with limited access to primary school education and to primary health care. Given CELPA's community initiative approach for the selection of its sub-projects it is difficult to understand on which basis CELPA has decided to allocate more investments for so-called secondary elite schools and secondary health facilities in urban areas at the expense of investments in primary schools and primary health centres in rural areas. This might be a conscious priority that is not spelled out in CELPA's documents. Another reason might be that coverage of primary schools and health posts and centres in areas covered by CELPA are quite satisfactory which seems unlikely. Another reason might be that CELPA has for a long period concentrated on urban areas due to the important problems of insecurity in rural areas. If so, this should be reconsidered given the current relatively stable situation in most rural areas.

The province of Sud-Kivu continuously benefit from the lion's share of CELPA's investments in health and education. The basis for favouring Sud-Kivu at the expense of many other regions is unclear. It might have to do with CELPA's historic affiliation to Sud-Kivu and the fact that the great majority of CELPA's members and affiliates live in this province. Another reason might be that the members and pastors in Sud-Kivu have better access to CELPA's central administration, including the sectoral coordination units. In any case, there should be room for CELPA to develop sound and transparent principles and mechanisms for the selection of projects and activities. The objective should be to ensure that the selection and priorities are in accordance with the needs of CELPA's members and the general public in CELPA's areas and that the allocation of the program resources between CELPA's ecclesiastic regions is equitable and transparent.

The coordination units plan to carry out community level identification of the actual needs of proposed sub-projects have not yet materialized, mainly due to budgetary restrictions. This verification is very important. It is particularly urgent in the education sector where the coordination by the local authorities is weaker than that of the health authorities. The verification can help in avoiding the potential risk of building schools in areas which already have a good coverage of schools etc. The evaluation did not find any such cases but with the growing number of actors building schools it can be a potential risk in the future.

The annual programs and activity plans have very ambitious indicators and expected results, not only for the health and education sectors but more importantly for several of the other components. CELPA has a tendency of not adjusting the different sectors' expected outcomes, results and indicators at a level that would be more consistent with the actual budget for each specific year. E.g. as stated in chapter 6.2, some of the units with very limited financial resources have at the same time way too ambitious objectives and indicators.

The actual supervision budget and staff in the education and in particular in the health sector are inadequate. The health component has the second largest budget of the IPC but it has only two staff, including the coordinator who is also the manager of CELPA's eye clinic in

Bukavu. Although the coordination unit appears to be efficient (they work hard, cover many activities and have very good and timely reports) the unit is in urgent need for more staff and a more generous supervision budget to enable a better follow-up of activities and to ensure good quality of CELPA's health related investments and activities in all provinces. The education sector should also have more resources for supervision for all its activities.

The review of annual reports from the health sector and in particular from the education sectors found it difficult to identify the specific donors for some of the activities and investments. E.g. it was difficult to track the different donors, the amounts of the funds to which activities and the exact amount of materials provided to specific activities.

On the other hand, the regional offices visited informed that the follow-up and monitoring by the Central Administration was regular and systematic. In fact during the last five months the Kinshasa office had received a total of four visits from different CELPA units and branches in Bukayu.

#### 7. SUSTAINABILITY ISSUES

Sustainability of project activities, investments and the project organization is a crucial but very challenging aspect of all development projects, not at least in poor areas and in conflict zones.

During the last 15 years CELPA has experienced an important growth period. CELPA's individual members and affiliates as well as the number of member churches have increased considerably. The increase of the activity level of CELPA's integrated program is also impressive: Since the launching of the program in 1992, the number of CELPA run schools has increased from 152 to a tremendous 442, and the number of health facilities from initial 23 to 102. An important rationale for the expansion in the two sectors was the important need of the population for health and education services. These urgent needs were caused by the breakdown of the public social services as well as the destruction and degradation of social infrastructure due to the conflicts and lootings, particularly in "traditional" CELPA areas in the northern parts of DRC.

CELPA's is still ambitious and has plans to build and rehabilitate an important number of new schools and health facilities in its new five year program. This might still be reasonable as people's needs for school and health are still very urgent. On the other hand, it is believed that CELPA has now reached an activity level where it is important to also take into account aspects related to the consolidation and the sustainability of CELPA as an organization and its activities and results in the health and education sectors. The different aspects that CELPA should consider include:

(i) The maintenance need of many of its schools and health facilities. Although most of these infrastructures are well planned and developed and in durable material the general need for maintenance is sooner or later inevitable. There has been a tendency by CELPA and by the respective schools and health facilities and their management to neglect the importance of maintenance, partly because of acute poverty level of the beneficiary communities (parents and health clients) and due to more pressing needs. CELPA should consider developing a small program that sensitizes and trains school

and health management committees and relevant members of beneficiary communities about the importance of maintaining their infrastructure and how to go about it (how to carry out regular maintenance activities, mobilization of funds and man power, the set-up of small maintenance accounts etc.).

- (ii) The strengthening of the capacities of CELPA's education and health personnel. As already mentioned in chapter 5 there is a need to mobilize more funds to train more of CELPA's school teachers and general health staff. The activities should try to cover many beneficiaries (e.g. not be too specialized which has important cost implications) be decentralized, mobile (e.g. trainers being able to provide their services in remote rural areas) and promote women staff.
- (iii) The strengthening of CELPA's supervision resources (financial and human resources) for both the health and education unit to reflect their many responsibilities and high activity level. This is crucial to enable a better follow-up of activities and to ensure a good quality of CELPA's health related investments and activities in all provinces
- (iv) The strengthening of CELPA's administration and its viability. The different issues related to CELPA's administration and its viability are already stated in chapter 6 and include the needs to: strengthen its administrative and financial procedures, formalize the relationship with its staff, mobilize more internal income sources and establish more long-term partnerships and reconsider the staff, program and activities of some of its components.

#### III. CONCLUSIONS ET RECOMMANDATIONS

#### 8. CONCLUSIONS

CELPA and its integrated program have during the last 15 years experienced an important growth. Its individual members and member churches have increased considerably. The IPCs activity level is also impressive. Since its launching in 1992, the number of CELPA run schools has increased from 152 to 442 and the number of health facilities from initial 23 to 102. After the collapse of the public services in health and education, CELPA has been an important development actor in the provision of these services.

CELPA's health and education activities are relevant and are in accordance with some of the most important needs of CELPA members, affiliates and the general public. The quality of CELPA's health services are known to be good and the results of CELPA's activities in the education sector (scores, examination results etc.) are recognized as some of the best nationwide.

CELPA's decentralized structure and its current 640 recognized community based parishes, has a significant outreach capacity for CELPA's many development activities. The church has a significant network which reaches far into remote rural areas and small townships. CELPA has also an ability to mobilize people and people often trust CELPA both as a vital church organization and as a committed development organization. CELPA's capacity to organize its members and other members of a community around the execution of social infrastructure

projects such as schools and health facilities is praise-worthy. This should be marketed in CELPA's search for new development partners and donors.

CELPA's has ambitious plans to build and rehabilitate an important number of new schools and health facilities in its new five year program. This is reasonable as people's needs for school and health care are urgent. However, CELPA's activity level has reached a point where it is important to take into account aspects related to the consolidation and the sustainability of both CELPA as an organization and its activities and results in the health and education sectors. Aspects CELPA should consider in its health and education sectors include: the important and growing maintenance needs of its many schools and health facilities and the strengthening of the capacities of CELPA's education and health personnel, including its supervision resources.

Concerning the viability of CELPA's administration, CELPA has for long been very dependent on Norwegian donors, in particular PYM, NORAD and MFA. The church should try to increase its long term financial viability by exploring more of its own income sources and by establishing more long term partnerships with several other donors in the future. There is also great room to strengthen CELPA's administrative and financial procedures and to formalize its relationship with staff. With the aim of making the administration more lenient and some program activities more efficient and cost effective, CELPA should in the near future also reconsider the staff, program and activities of some of its program components.

#### 9. **RECOMMANDATIONS**

#### 1. Recommendations concerning CELPA's Structure:

#### a. For the Community Conference:

- (i) Carry out a systematic review of the follow-up of the recommendations made by the 2000 evaluation of CELPA's integrated program
- (ii) Redefine the roles and responsibilities of the Steering Committee by establishing and institutionalizing an independent Control Committee, comprising CELPA members with a high intellectual and ethical profile, which controls the management of CELPA and its program regularly
- (iii) Provide training to all members of the Steering Committee to strengthen their capacities and know-how of CELPA's administration, its integrated program, including management and sectoral aspects and challenges, as well as their own roles and responsibilities as Steering Committee members
- (iv) Merge CELPA's three ecclesiastic regions in the province of Sud-Kivu into one. Assure management autonomy to the merge ecclesiastic region and maintain the region's position in CELPA's organization and hierarchy as well as its relationship with CELPA's headquarters. Locate the region's (physical) head office outside that of the offices of CELPA's headquarters in order to demonstrate its management autonomy
- (v) Change the title of the Administrative Secretary to Principal Coordinator (*Coordinateur Principal*) to reflect its actual importance and many responsibilities within CELPA's administration. Change at the same time the title of the Coordinator for the Evangelisation Department to Principal Coordinator. Change also the managers/responsible of CELPA's administrative and support units (les responsables des services d'appoint) to heads of units (*Chefs de service*) and harmonize the titles of technical/sectoral coordination units by naming them technical coordinators (of health, education etc.)
- (vi) Make sure that the Principal Coordinators of CELPA's evangelisation and development departments become full members of the Steering Committee, but without voting rights, to allow and to facilitate the Steering Committee members' access to specific information and explanations regarding CELPA's management and resources, including those of the integrated program of CELPA

#### 2. Recommendations concerning CELPA's Administration

#### a. For PYM

- (i) Make sure that PYM's representative in Bukavu who is a representative in the Steering Committee without voting right is not involved in the daily management of CELPA's resources
- (ii) Renew systematically the external auditor and ensure of her/his genuine independency vis-à-vis IPC's management structures and technical units
- (iii) Include in the auditor's contract the sharing and summing up of the findings of the audit reports with CELPA's management, including CELPA's Permanent Office and Control Committee and the two Principal Coordinators, to not only promote a culture of transparency but also to make CELPA be aware of how to easily and quickly resolve administrative and financial management issues and problems.

#### b. For the Steering Committee

- (i) Clarify the roles and responsibilities of its Permanent Office in relation to the daily management of human, material and financial resources which are under the responsibility of the two Principal Coordinators who are CELPA's real executing pillars.
- (ii) Create a unit in the Evangelisation Department that promotes women in CELPA's church activities, including decision-making bodies. Subsequently remove the SAF unit from the Development Department as its activities overlap with those of CEPAF
- (iii) Make sure that the Principal Coordinator of the Development Department elaborates/proposes and adopts the following management tools:
  - A Administrative and Financial Procedures Manual for the management of the activities of IPC funded by PYM and other programs or activities funded by other donors
  - b. A business plan that will allow the integration of CELPA's current and potential internal resources/income in order to strengthen CELPA's future financial and economic viability
  - c. Staff Statutes (Statut du Personnel) together with the Principal Coordinator of the Evangelisation Department
- (iv) Start regulating the statutes of each of CELPA's staff who are not a state employee, by establishing and signing work contracts, to comply with the Work Code of RDC
- (v) Remove the Coordination unit for Projects and Programs and transform it to a Support Unit at the same level as the Staff and the Finance Units and call this "new" unit the Technical Coordination Support Unit (Service d'appui aux Coordinations Techniques). This unit should be responsible for the provision of methodological support to the elaboration, monitoring and evaluation of development projects as well as to establish partnerships and mobilize funds, in particular from public resources and agencies (such as PNLMS, PMURR, BCECO, FSRDC, UGP, PPTE) but also from private, bilateral and multilateral organizations.

#### c. For the Principal Coordinators and their Departments

- (i) Make sure that the book keeping and the cash management are up to date and in accordance with standard professional practices
- (ii) Organize regular staff meetings, both with the support units and with the technical units
- (iii) Strengthen the capacities of the managers of the support and the technical/sectoral units in: project planning, preparation, monitoring and evaluation, management of resources, leadership, marketing, social communication and IEC
- (iv) Strengthen activities that promotes CELPA's activities, success stories and their community level impact to potential partners and to the general public by using media and other channels and mechanisms

#### 3. Recommendations concerning the management of resources and social mobilisation

#### a. For the Permanent Office

Clarify, together with the Principal Coordinators, the management and the control of the data centre/internet café in Bukavu, to ensure that its income is registered and entered into CELPA's accounts

#### **b.** For the Principal and Technical Coordinators

- (i) Ensure that the local revenues, mobilized or subsidises, from CELPA's projects, workshops, print shops and other activities are systematically entered into CELPA's accounts; Make the local population be aware of the importance and significance of their local contribution to strengthen the local ownership and sustainability of the health, education and other facilities and products supported by CELPA
- (ii) The staff salaries of each of CELPA's two Departments (Development and Evangelisation) should only be financed by its respective Department. Currently some agents under the Evangelisation Department are financed under the Development Department.

#### 4. Recommendations concerning the education sector

- (i) Earmark more future investments and other support (equipment, materials etc.) in the education sector to primary education and to rural areas
- (ii) Appraise in detail the local contribution (physical labor, materials etc.) by community members to the rehabilitation and construction of education infrastructure
- (iii) Use its success in community mobilization in the education sector as marketing tool vis-à-vis potential partners and donors
- (iv) Increase the budgetary allocation to the teachers training program and find ways to make it more decentralized, mobile and more in accordance to the actual needs of CELPA's school teachers, including its women teachers
- (v) Elaborate and adopt a strategy for how to improve the gender balance among CELPA's education staff, inside and outside the coordination unit and how to regularly promote women as beneficiaries for training activities targeting school teachers and managers
- (vi) Pursue the elaboration of the strategy for how to improve girls' net enrollment, and include the issue of girl's enrollment and drop out not only in primary schools but also in secondary schools in rural areas. Collaborate with other more experienced actors in this field when elaborating and when testing out the strategy
- (vii) Ensure that the allocation between CELPA's ecclesiastic regions of program resources to the education sector is transparent and equitable
- (viii) Carry out regular verification missions at community level to identify the actual needs of proposed sub-projects in the education sector
- (ix) Take into account the maintenance needs of its school facilities by developing a program that sensitizes and trains school management committees and relevant members of beneficiary communities about the importance of maintaining their schools and how to go about it
- (x) Increase the supervision resources for the education unit to reflect its many responsibilities and high activity level.

#### 5. Recommendations concerning the health sector:

- (i) Earmark more of the future investments and other types of support in the health sector to primary health care and primary health centers and to rural areas<sup>9</sup>
- (ii) Appraise in detail the local contribution (physical labor, materials etc.) by community members to the rehabilitation and construction of health infrastructure
- (iii) Use its success in community mobilization in the health sector as marketing tool vis-à-vis potential partners and donors

 $<sup>^{9}</sup>$  or to secondary health centers in isolated rural areas where access to such secondary health care is minimal

- (iv) Investigate possibilities to recruit female psychiatrists and psychologists and/or train relevant health staff in how to care for victims of violence
- (v) Investigate if, how and when a home based care program, targeting HIV/AIDS patients and/or other patients, should be pursued
- (vi) Elaborate and adopt a strategy for how to improve the gender balance among CELPA's health staff, inside and outside the coordination unit and how to promote women in training activities for health staff
- (vii) Ensure that the allocation between CELPA's ecclesiastic regions of program resources to the health sector is transparent and equitable
- (viii) Carry out regular verification missions at community level to identify the actual needs of proposed sub-projects in the health sector
- (xi) Take into account the maintenance needs of many of its health facilities by developing a program that sensitizes and trains health management committees and relevant members of beneficiary communities about the importance of maintaining their health facility and how to go about it
- (xii) Increase the supervision resources for the health unit to reflect its many responsibilities and high activity level

#### 6. Recommendation concerning CELPA's HIV/AIDS activities

Not only have women and girls as main target groups but also include men, young and old, and boys, both school and out-of school adolescents as crucial target groups in CELPA's HIV/AIDS awareness campaigns

#### 7. Recommendations concerning specific gender and rights issues:

- (i) CELPA should establish a comprehensive Gender Strategy to:
  - a. build and promote female leadership within the church decision making bodies at all levels (from the local parish level to the Community Conference level)
  - b. promote women in leadership positions, as professional staff within CELPA's administration and in CELPA's many health and education facilities
  - c. assure that women and girls are beneficiaries at the same level as men and boys in all of the ICP's activities

The Gender Strategy should also:

- d. Identify quantifiable and feasible objectives for how to increase the participation of women in all of CELPA's decision making bodies
- e. Identify quantifiable objectives and indicators for how and the number of women CELPA intends to recruit in the short, medium and long term
- f. Identify quantifiable objectives for how to promote women and girls as beneficiaries in all activities of CELPA's integrated program, including its health, education, community development, reintegration, peace- and

- democratisation components. Identify and apply gender-disaggregated indicators to make sure that CELAP will regularly follow-up these objectives
- g. Establish and adopt a monitoring system to assure regular follow-up of the Strategy.
- h. Identify and apply incentives when objectives are achieved.
- (ii) PYM should assist CELPA in the elaboration of the Strategy and should closely and regularly monitor CELPA's performance in reaching its annual gender objectives
- (iii) The different components dealing with education both formal (schools) and informal (Reintegration of ex-child soldiers, Center for women with traumas CAMPS, Peace and democracy, and the Women programs for income generating activities SAF-CEPAF), targeting vulnerable groups, should *together* elaborate a uniform gender strategy and select one highly skilled person with the responsibility to coordinate the work.
- (iv) The CELPA clergy and administrative hierarchy should acknowledge the marginalised position of women and use their decentralised church system to systematically promote gender equality during Sunday services, and as such constitute a counterforce vis-à-vis unjust traditions and customs that deprive women their human dignity and independence.

Other gender related recommendations specific for health and education are included above under each specific sector

#### **Annexe 1: EVALUATION'S TOR**

#### ANNEXE: LISTE DES PERSONNES CONTACTEES

N°	LIEUX	NOMS	RESPONSABILITES
	Bukavu		
1.		Rév. Past. Lwamira Zacharie	Représentant - Légal
2.		Rév. Past. Kipindula Morisho	Représentant - Légal Adjoint
3.		Ingeborg Eikeland	Missionnaire/Représentante de PYM
4.		Rév. Past. Bulambo	Ancien Représentant - Légal
5.		Sadiki Byombuka	Membre du CA
6.		Délégué de l'UEA au CA	Membre de la Commission de Contrôle
7.		Mme	Membre du CA
8.		Rév. Past. Didas Basilwango	Coordinateur/Département Evangélisation, Vie de l'Eglise et Missions
9.		M. Atiamutu Henri - Armand	Secrétaire Administratif
10.		M. Zihindula Kabeza	Coordinateur des Ecoles
11.		M. Kyoku Bilebyane	Directeur Centre de Formation
12.		Dr Théodore Kadima	Coordinateur de la Santé
13.		M. Ntakwindja Mirango	Animateur/ Programme VIH-SIDA
14.		M. Augustin Abangwa Bulase	Superviseur médical
15.		M. Julien Chuma Kanombera	Superviseur/ Programme VIH-SIDA
17.		M. Chimanuka	Coordinateur/Service Développement Communautaire
18.		M. Elie Kalwanyi Kalalizi	Comptable
19.		M. Raymond Onoya	Chef du Personnel&Relations Publiques
20.		Mme Totoro	Responsable/Projet Paix et Démocratie
21.		Ir Bitomwa	Responsable/Projet Réinsertion
22.		M. Biringanine Rukomeza	Auditeur
23.		M. Ngama Musamba	Comptable/Coordination Evangélisation
24.		M. Daniel Zihalirwa	Caissier/Projets
25.		M. Joseph Akilimali Rusumba	Secrétaire&Animateur
26.		M. Jean-Pierre Mulangu	Secrétaire du Secrétaire Administratif
27.		Rév. Past. David Ntamako	Délégué Région Sud-Kivu Est
		Rév. Past. Wanamunake	
28.		Nyangi	Délégué Région Sud-Kivu Ouest
29.	1.7 11	Rév. Past. Makunzi	Délégué Région Itombwe
	Kaziba		
30.		Dr André Mubake	Directeur/Hôpital Général de Kaziba
31.		M. Lukobeka Muhekeni	Préfet de l'Institut de Kaziba
32.		M. Martin	Directeur - Adjoint/Ecole Primaire Kaziba
33.		M. Pascal Malikidogo	Préfet de l'Institut Technique Médical
34.		M. Bafulua Lukange	Proviseur de l'Institut Technique Médical
35.		Un groupe de 20 femmes	Entretien avec Kristin
	Kinshasa	<u> </u>	
36.		Rév. Past. Mboyo Monzemo	Délégué Région Congo - Ouest
37.	1.51	M. Marcel Mosunga	Secrétaire Administratif
	Kindu	<del> </del>	
38.		Rév. Past. Kanumba Lahe	Délégué Régional - Adjoint Région Congo - Centre

## Annexe 3: BRIEF DESCRIPTION OF THE FIVE YEAR PROGRAM (2007-2011) OF THE INTEGRATED PROGRAM OF CELPA

CELPA's recently finalized its new and ambitious five year plan (Plan Quinquinal) for the 2007-2011 period. The NORAD supports following components: education, health and HIV/AIDS, organizational development, community development, and promotion of women (SAF) and women activities (CEPAF). Peace and democratization, reintegration of ex-child combatants, medical and psychosocial assistance to violated women and other victims of psychological war traumas (CAMPS) are planned to be financed by other partners, including the Norwegian MFA. The IP for the new period is generally a continuation of the existing activities although some of the components cover new selected geographical areas. The long term objective of the program is to contribute to the improvement of the socio-economic living conditions of the poor population that is living in areas where CELPA is active.

CELPA aims through its activities in the education sector to provide good educational services to about 210.000 students by year 2011. This component is the IPC's largest with a 2007 budget of US\$ 409.407. The most important objectives comprise to: (i) support local initiatives to construct or rehabilitate school infrastructure (500 classrooms); (ii) provide some schools with some equipment (furniture and didactical material); (iii) improve the quality of teaching and school management by a continuation of the teachers training program, Centre de Formation pour le Développement Social (CFDS) that trains teachers in pedagogy and how to produce didactical materials. 250 teachers and school directors are expected to benefit from a formal school education supported by the project and the number of female staff (teachers, school directors and co-workers) are expected to increase significantly; (iv) improve the participation of women in educational services and the net enrollment of girls in primary schools, in particularly in rural areas where the disparity of girls to boys ratio in schools are particularly pronounced. This will be done by developing strategies for how to go about this issue (planned for 2007) and test these in three pilot areas, discuss and sensitize church leaders and parents on this issue and support a minimum of 20 new female teachers during the period; and (v) provide good educational services to vulnerable groups such as blind students in the "Centre Bartimée pour Aveugles".

Out of its total of US\$ 409.407 in its 2007 budget, about half or US\$ 218.000 is allocated for school infrastructure investments, US\$ 32.000 for equipment to schools, US\$ 45.000 for training of teachers and about 65.000 for operating costs related to the education coordination unit. The program does not support the schools' operating costs which are – although with great difficulties - mobilized by the contributions from the students' parents.

The purpose of the *health component* is to provide good quality health services to 940.000 people living in CELPA's health zones by year 2011. The health component is the IPC's second largest with US\$ 238.000 for 2007. The general public is the component's target group. With its health activities, CELPA aims that: (i) 80% of its primary health care activities in the assigned health zones are well functioning. This will be done by rehabilitating existing infrastructure (60%), constructing new infrastructure (60%) and equip with necessary medical equipment and supplies. These activities give preference to those communities where the local population takes the initiative and participate in the construction process; (ii) 80% of the patients are satisfied with the health services provided by CELPA. Health services improvement will be promoted by providing specialized training to medical doctors,

specialists and specialized nurses; and (iii) 60% of the health zones managed by CELPA will receive public funding (by 2011). This will be done by further strengthening the collaboration with the local health authorities. The *HIV/AIDS sub-component's* purpose is to prevent and reduce the infection rate of HIV/AIDS and sexually transmitted diseases (STD) by 33 % in the target group in the area covered by this component. CELPA has already started to sensitize church leaders and make HIV/AIDS an issue of discussion in local churches, youth and women groups. Its primary target group is youth and young adults between 13 and 24 years with a focus on girls and young women. Its secondary target group is women groups, men congregations, church based people, pastors etc. The estimated number of beneficiaries is expected to be about 100.000 people by 2011.In 2007 CELPA also plans to work out a strategy/plan for how to improve the quality of life for people living with HIV/AIDS and how to increase the social capacities of communities to take care of HIV positive and/or AIDS sick people.

Out of its total US\$ 238.000 for 2007, about US\$ 131.000 are allocated to investments in infrastructure and equipment, 20.000 to training and 71.000 to different support (medicine, support to health zones, supervision etc. about 15.000 are for operating costs. An additional US\$ 70.000 is earmarked for the HIV/AIDS sub-component.

The purpose of the *organizational development component* is to assure the well-functioning of the organization. CELPA aims to have improved financial management, human resources management and administrative routines by 2011.

The purpose and objectives of the *other components* comprise: The purpose of the *peace and* democratization component is to promote peace, democracy, justice, reconciliation, peaceful cohabitation and human and civic rights for its target group of an estimated 50.000 persons who are people involved in the IP activities including school teachers and students and CELPA's church affiliates, women and youth groups etc. The purpose of the reintegration component is to reintegrate about 2000 ex-child combatants through vocational training and psychosocial-treatment per year. The psychosocial and medical treatment of victims of violence, CAMPS, aims to provide psychosocial and medical assistance to about 11.500 victims (mostly women and children) of violence through its CAMPS centers in Kinshasa, Kisangani, Bukavu and Kindu. The community development component aims to promote socio-economic development for 150.000 people by providing training and sectors in the agricultural and rural development sectors. The component and departments that promote women and women activities namely Services des Activités Féminines (SAF) and Centre de Promotion des Activités Féminines (CEPAF) aims to strengthen the women's socio-economic status in the Congolese society and in the CELPA organization by providing informal training courses to 25.000 women and girls (literacy training) and 20.000 women and girls (primary school through informal primary teaching), to sensitize women to participate more actively I the Congolese society and to provide informal skill training for income generating activities. These other components have the following allocations: Organizational development: US\$ 55.000; Peace and democracy US\$ 33.000; Reintegration of ex-child combatants?, Community development US\$ 120.000; Promotion of women issues 167.000, and

The annual budget for 2007, approved by NORAD and BN was US\$ 1,127 million or NOK 7,1 millions.