

**PROJECT INFORMATION DOCUMENT (PID)  
APPRAISAL STAGE**

Report No.: PIDA4125

<b>Project Name</b>	Great Lakes Emergency Sexual and Gender Based Violence & Women's Health Project (P147489)
<b>Region</b>	AFRICA
<b>Country</b>	Africa
<b>Sector(s)</b>	Other social services (60%), Health (40%)
<b>Theme(s)</b>	Conflict prevention and post-conflict reconstruction (50%), Gender (40%), Health system performance (10%)
<b>Lending Instrument</b>	Investment Project Financing
<b>Project ID</b>	P147489
<b>Borrower(s)</b>	Ministry of Finance, Ministère des Finances, Ministry of Finance and Economic Planning, ICGLR
<b>Implementing Agency</b>	Miinistere de Sante, Ministry of National Solidarity, Human Right and Gender (Burundi), Ministère du Genre, Famille et Enfants (DRC), Cellule d'exécutions des Financements en faveur des Etats Fragiles (CFEF) (DRC), Fonds Social de la République Démocratique du Congo (DRC), Province du Sud-Kivu (DRC), Responsible Agency 1: Ministry of Gender and Family Protection (Rwanda), Responsible Agency 2: Ministry of Health (Rwanda)
<b>Environmental Category</b>	B-Partial Assessment
<b>Date PID Prepared/Updated</b>	12-May-2014
<b>Date PID Approved/Disclosed</b>	14-May-2014
<b>Estimated Date of Appraisal Completion</b>	13-May-2014
<b>Estimated Date of Board Approval</b>	26-Jun-2014
<b>Decision</b>	

## I. Project Context

### Country Context

The Great Lakes Women's Health and Empowerment Project is part of the broader World Bank Group (WBG) initiative for the Great Lakes. The regional project reflects the Bank's commitment to support governments of the Great Lakes region to reduce poverty and promote shared prosperity by targeting some of the most vulnerable groups in the Democratic Republic of Congo (DRC), Burundi and Rwanda. It also reflects the WBG's commitment to facilitate cross country learning and knowledge sharing and promote regional cooperation through supporting the International Conference of the Great Lakes Region (ICGLR).

In Eastern DRC the context is characterized by continuing conflict driven by challenges faced by the state to provide security and basic services, long-standing ethnic tensions and land disputes, exacerbated by the continued presence of armed groups and their involvement in illicit mining activities, and severe socioeconomic vulnerability of the population. In spite of vast mineral resources and tremendous potential DRC continues to be one of the poorest countries in the world with roughly 63 percent of the population below the poverty line. Poverty is gender biased: 28 percent of women have never gone to school, compared to 14 percent of men; women's participation in the workforce is 55 percent compared to 85 percent for men. The Republic of Burundi is gradually making the transition from a post-conflict to a developing economy but progress remains fragile. Burundi has made progress in consolidating peace and security, establishing a relatively stable macroeconomic environment, and rebuilding institutions but the country is still facing enormous challenges with over two-thirds of the population below the poverty line. The Republic of Rwanda has made dramatic progress since the mid-1990s by restoring peace and stability, ensuring robust economic growth, and reducing poverty. While the overall poverty count has dropped to 45 percent (2011) extreme poverty persists in some districts. Women are more affected by poverty than men, and inequality continues to be comparatively high.

### **Sectoral and institutional Context**

Women are among the most vulnerable groups in the Great Lakes Region. They face multiple and mutually reinforcing constraints, including: (i) high levels of violence, (ii) inadequate control over their health, (iii) limited economic opportunities, and (iv) lack of control over resources.

Violence against women and girls has become a major public health challenge and development issue. The pervasive conflict in Eastern DRC has taken its toll on Congolese women. A culture of impunity, where rape and assault go unpunished combined with the low status of women and the absence of a functioning judicial system, have created conditions where violence against women continues with alarming frequency. Moreover, there is growing concern that sexual violence, once associated primarily with fighting forces, has metastasized into a wider social phenomenon.

Gender based violence is also widespread in Burundi. Groups most at risk are girls under 18 years of age, female headed households, and marginalized populations. Of the total reported cases less than one-quarter are under investigation and a small fraction are prosecuted. A pervasive culture of impunity combined with traditional socio-cultural beliefs, and large gender inequalities exacerbate and perpetuate violence. In Rwanda gender based violence and violence against children also remain important problems in spite of progress made in promoting gender equality and strengthening health and social protection systems. Nearly half (48 percent) of all 15-49 year old Rwandan women report ever having experienced physical or sexual violence with domestic violence reported as the most common form of abuse.

Persistent inequities in access to basic health services also perpetuate the vulnerability of women in the Great Lakes Region. In spite of progress made to improve access to health care, large inequities in utilization of critical services and in health outcomes persist within and across the Great Lakes states. DRC, Burundi and Rwanda, share a common post-conflict history but a different trajectory in terms of overcoming constraints toward the attainment of the health related Millennium Development Goals, and therefore have much to learn from each other by sharing good practices and innovative approaches to reaching poor and vulnerable women, including those affected by violence.

Poor and vulnerable women in the Great Lakes region are also constrained by the lack of adequate economic opportunities and control over resources. While this issue affects all vulnerable females it is particularly critical for survivors of SGBV because of their reduced psychological and

economic functioning and potential isolation from family and community. A number of economic empowerment schemes have been successfully piloted in the region with promising initial results. For example, in DRC and Burundi, Village Savings and Loans Associations schemes have been successfully used to provide a system of community savings which foster trust and promote solidarity and social cohesion among participants. For survivors of SGBV these schemes are essential to support reintegration in society and to provide beneficiaries a sense of purpose and value as well as an environment for social connections.

## II. Proposed Development Objectives

20. The project will contribute to the broader goal of reducing vulnerability of women and girls in the Great Lakes region. More specifically, the project aims to: (i) expand the provision of services to mitigate the short and medium term impact of sexual and gender based violence; and (ii) expand utilization of a package of health interventions targeted to poor and vulnerable females.

## III. Project Description

### Component Name

Holistic Support for SGBV and Violence Prevention

### Comments (optional)

### Component Name

High Impact Basic Health Services

### Comments (optional)

### Component Name

Regional Networking, Knowledge Sharing, Capacity Building and Research

### Comments (optional)

## IV. Financing (in USD Million)

Total Project Cost:	107.10	Total Bank Financing:	107.10
Financing Gap:	0.00		
<b>For Loans/Credits/Others</b>			<b>Amount</b>
BORROWER/RECIPIENT			0.00
International Development Association (IDA)			15.00
IDA Grant			92.10
Total			107.10

## V. Implementation

The institutional and implementation arrangements differ by country. In DRC, the Ministry of Finance will provide overall oversight for the project through the Cellule d'Execution des Financements en faveur des Etats Fragiles (CFEF) while implementation of project activities will be the responsibility of the designated implementation agencies, which are the Ministry of Public Health, Ministry of Gender, Family and Children, the Social Fund of DRC (FSRDC) and selected

Centers of Excellence in the Kivus (i.e. Heal Africa and Panzi Foundation). The CFEF will be responsible for providing overall coordination, tracking and reporting results, and producing consolidated financial management reports. The unit would assume responsibility for consolidating annual work plans and budgets from key institutions at the national and provincial levels and organizing annual meetings of the Steering Committee which would approve the consolidated annual work plan and budget. The CFEF would channel funds to the Ministry of Health at the provincial level for health related activities while the FSRDC at the national level would channel funds for the SGBV community component through its well established channels to the Social Funds in the two Kivus.

In Burundi, technical coordination of the project will be handled jointly by the Ministry of National Solidarity, Human Rights and Gender (MSNDPHG) and of the Ministry of Public Health and Fight against HIV/AIDS (MOH) through the General Directorate for the Promotion of Women and Gender Equality and the General Directorate of Health Services and HIV/AIDS in each respective ministry under an inter-ministerial framework. Each ministry will be responsible for carrying out activities within its respective mandate. A Steering Committee will be established to be co-chaired by the Permanent Secretary of MSNDPHG and the Vice-Presidency through the Permanent Secretary of MOH to validate the annual work plan and budget. The MOH will be responsible for the overall fiduciary management with the project to be managed through a project coordination unit which oversees several other Bank-funded projects. The MSNDPHG will be supported to establish a small unit to strengthen its capacity to carry out specific activities under the project.

In Rwanda, the overall coordination of the project will be the responsibility of the Ministry of Gender and Family (MIGEPROF). A Steering Committee, chaired by MIGEPROF, and comprising other key ministries (i.e. Health, Justice and Local Development) as well as the Rwanda National Police and the Gender Monitoring Office will meet on a 6 monthly basis to assess progress and approve annual work plan and budget. A Technical Committee with similar representation will meet on a quarterly basis to discuss progress, identify challenges, and develop mitigation measures. The Single Project Implementation Unit (SPIU) of MIGEPROF will serve as the executing agency, coordinating day to day activities and implementing key activities within the mandate of the gender ministry. The SPIU within the Ministry of Health will be responsible for activities related to integrated support for survivors within health facilities.

In ICGLR, the Conference Secretariat (CS), based in Bujumbura, acts as the technical arm of the ICGLR and is in charge of coordinating, facilitating, promoting, and monitoring the implementation of the Pact and other initiatives to attain sustainable peace, security, stability and development in the GLR. Overall coordination of this project will be the responsibility of the CS. The Executive Secretary of the CS will (i) provide overall strategic direction; (ii) approve the Annual Work Plan and Budget (AWPB) before submitting to IDA for approval; and (iii) ensure consistency with the policies and strategies of the ICGLR. The ICGLR will set up a Project Implementation Unit (PIU) within the CS. The PIU will be responsible for the overall coordination, day-to day implementation, and supervision of the project. The PIU will report to the Deputy Executive Secretary of the ES.

## VI. Safeguard Policies (including public consultation)

<b>Safeguard Policies Triggered by the Project</b>	<b>Yes</b>	<b>No</b>
Environmental Assessment OP/BP 4.01	<b>x</b>	
Natural Habitats OP/BP 4.04		<b>x</b>

Forests OP/BP 4.36		x
Pest Management OP 4.09		x
Physical Cultural Resources OP/BP 4.11		x
Indigenous Peoples OP/BP 4.10	x	
Involuntary Resettlement OP/BP 4.12		x
Safety of Dams OP/BP 4.37		x
Projects on International Waterways OP/BP 7.50		x
Projects in Disputed Areas OP/BP 7.60		x

**Comments (optional)**

**VII. Contact point**

**World Bank**

Contact: Miriam Schneidman  
 Title: Lead Health Specialist  
 Tel: 473-9391  
 Email: mschneidman@worldbank.org

**Borrower/Client/Recipient**

Name: Ministry of Finance  
 Contact: H.E. Tabu Abdallah Manirakiza  
 Title: Minister of Finance  
 Tel: 25722249945  
 Email: ta.manirakiza@gmail.com

Name: Ministere des Finances  
 Contact: S.E.M. Patrice Kitebi Kibol Mvul  
 Title: Ministre Délégué auprès du Premier Ministre, Chargé des Fina  
 Tel: 243816511731  
 Email: Kitebikibolmvul@minfinrdc.com

Name: Ministry of Finance and Economic Planning  
 Contact: Amb. Claver Gatette  
 Title: Minister  
 Tel: 250252596002  
 Email: mfin@minecofin.gov.rw

Name: ICGLR  
 Contact: Ntumba Luaba  
 Title: Executive Secretary  
 Tel: 25722256824  
 Email: secretariat@icglr.org

**Implementing Agencies**

Name: Miinistere de Sante  
 Contact: Dr Liboire Ngirigi  
 Title: General Director of Health Services and Fight against AIDS  
 Tel: 25722242542  
 Email: ngirigi@yahoo.fr

Name: Ministry of National Solidarity, Human Right and Gender (Burundi)  
 Contact: Donatienne Girukwishaka  
 Title: General Director of Women Promotion and Gender Equality  
 Tel: 25722219395  
 Email: giradona1@yahoo.fr

Name: Ministère du Genre, Famille et Enfants (DRC)  
 Contact: S.E.M. me Genéviève Inagosi Bulu Ibambi  
 Title: Ministre du Genre, Famille et Enfants  
 Tel: 243999956864  
 Email: geneinagosi@yahoo.fr

Name: Cellule d'exécutions des Financements en faveur des Etats Fragiles (CFEF) (DRC)  
 Contact: Mr Alain Lungungu Kisoso  
 Title: Coordonnateur National  
 Tel: 243998163097  
 Email: lungungukisoso@minfinrdc.com

Name: Fonds Social de la République Démocratique du Congo (DRC)  
 Contact: Mr. Ruphin Bo-Elongo Kimuemue  
 Title: Coordonnateur National  
 Tel: 243998193585  
 Email: ruphinboel@yahoo.fr

Name: Province du Sud-Kivu (DRC)  
 Contact: Dr Manu Burhole  
 Title: Médecin Inspecteur Provincial  
 Tel: 243812979170  
 Email: baabodominique@yahoo.com

Name: Responsible Agency 1: Ministry of Gender and Family Protection (Rwanda)  
 Contact: Mrs. Henriette Umulisa  
 Title: Permanent Secretary  
 Tel: 250-252-587128  
 Email: humulisa@primature.gov.rw

Name: Responsible Agency 2: Ministry of Health (Rwanda)  
 Contact: Dr. Agnes Binagwaho  
 Title: Minister of Health  
 Tel: 250-252-577458  
 Email: agnes.binagwaho@moh.gov.rw

### **VIII. For more information contact:**

The InfoShop  
 The World Bank  
 1818 H Street, NW  
 Washington, D.C. 20433  
 Telephone: (202) 458-4500  
 Fax: (202) 522-1500  
 Web: <http://www.worldbank.org/infoshop>