Development aid in fragile states

Investigating the effectiveness of COVID-19 aid in the Democratic Republic of the Congo

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**Abstract:** Drawing from a growing body of literature on development aid in fragile contexts, this paper investigates the effectiveness of COVID-19 aid in the Democratic Republic of the Congo (DRC). The paper uses the OECD’s Principles for Good International Engagement in Fragile States and Situations to critically evaluate the effectiveness of several types of health and non-health COVID-19 aid that donor agencies provided to the DRC and their impact on the country’s socio-economic stability. Beyond identifying the gaps and strength of the COVID-19 aid to the DRC, this paper also leverages the OECD Principles to present recommendations to improve the effectiveness of development aid to the country and other fragile contexts.

**Key words:** COVID-19, OECD, development aid, fragile states, the Democratic Republic of the Congo

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Introduction

Along with other drivers, events surrounding the September 11 attack in 2001 have shown the fragile nature of several states, revealing the vulnerability of the international community. Data from the Organisation for Economic Co-operation and Development (OECD) showed that 1.8 billion people lived in fragile states in 2018 and projected a 2.3 billion increase by 2030 (OECD 2018). This worrying figure underscores the growing spate of fragility in several parts of the world, including sub-Saharan Africa. In line with the OECD and World Bank definition, a fragile state or region has weak institutions and lacks the political will and capacity to perform the basic government functions of securing and safeguarding citizens’ lives and property, reducing poverty, and, above all, driving development (Klausen and Humphry 2015; OECD 2008a). While fragility is usually associated with violent conflict, academic literature and recent events have shown that fragility encompasses a wide range of unstable situations such as outbreaks of disease, climate change, food shortages, environmental disasters, and economic downturns (Vallings and Moreno-Torres 2005). In this light, a growing body of literature has conceptualized fragility around five dimensions: economic, environmental, political, social, and security dimensions (OECD 2008a).

The increasing number of fragile states calls for an urgent need for the international community to act quickly and decisively in addressing the challenges identified. Some efforts to date include the setting of the Millennium Development Goals and, more recently, the Sustainable Development Goals. But, more importantly, the New Deal for Engagement in Fragile States represents a significant move in policy efforts to address the challenges in fragile and conflict-affected states (IDPS 2011). Additionally, the OEDC/DAC Principles for Good International Engagement in Fragile States and Situations provides a useful set of guidelines for development agencies to effectively engage in fragile states (OECD 2007). These global initiatives present leading frameworks for state and non-state actors in the international community for supporting development programmes in fragile states (Austrian Development Cooperation 2014).

The outbreak of the COVID-19 pandemic and its devastating effects on the socio-economic and political situations of countries is a significant case to study. The pandemic exposed the fragile nature of many African countries’ economies, weak institutions, poor healthcare systems, and their unstable security landscape. This is evidenced, for example, in the increasing level of human rights abuses, corruption, job losses, gender-based violence, and extreme poverty (Haer and Demarest 2020). As well as driving economic downturn, the pandemic further exposed and escalated existing armed conflicts and human security challenges on the continent. For instance, the International Labour Organization (ILO) reports that sub-Saharan Africa recorded 13.5 million job losses and that nearly 5 million workers have been pushed into extreme poverty due to the pandemic (ILO 2021). Additionally, statistics from the Food and Agriculture Organization (FAO) (FAO, IFAD, UNICEF, WFP, and WHO 2022) suggest that Africa experienced a significant increase in extreme hunger during the pandemic, with about 278 million people affected by extreme hunger since its outbreak.

\[1\] As highlighted by IDPS (2011), the New Deal for Engagement in Fragile States is an agreement by the g7+ group of 19 fragile and conflict-affected countries, development partners, and international organizations which believe ‘that a new development architecture and new ways of working, better tailored to the situation and challenges of fragile contexts, are necessary to build peaceful states and societies’.

\[2\] Presented by OECD (2007), the Principles for Good International Engagement in Fragile States and Situations provides a set of principles to guide international engagement in fragile states, detailing the key actions that need to be taken when driving development programmes and initiatives in fragile contexts.
In an effort to facilitate the recovery processes of fragile countries, developed countries and donor agencies have provided massive health and non-health aid to the continent. The European Union, World Bank, United Nations agencies, France, and China are some of the foreign donors that have made enormous contributions to the recovery process of many fragile African countries and the entire region. In a bid to help southern countries overcome the negative impacts of COVID-19, China, for instance, under the auspices of the G20, granted debt relief worth over US$2 billion to developing countries, including to the Democratic Republic of Congo (DRC) (Al-Jazeera 2021). More specifically, Beijing donated 400,000 doses of the SINOVAC vaccine to the DRC (UNICEF 2021a). Despite all the aid from the global community, the country’s fragile index still ranked 108.4 and 107.3 in 2021 and 2022 respectively, revealing the increasingly fragile nature of the resource-rich state (Global Economy 2020; Knoema 2021).

To this end this study investigates the effectiveness of COVID-19-related development aid to Africa, specifically focusing on the DRC. Furthermore, it explores the possible policy frameworks that could improve the effectiveness of development aid in the post-COVID era in fragile countries on the continent.

The study is divided into six sections. Following this introduction, Section 2 presents the methodology. Section 3 then gives a general overview of the socio-economic and political situation in DRC, with a deep dive into the human development index in the country, and provides a holistic understanding of the country’s fragile state. It also presents a brief analysis of the impact of COVID-19 pandemic on the socio-economic situation in the DRC. Section 4 explores the aid responses from donor states and agencies to the COVID-19 outbreak in the DRC, including both health and non-health-related COVID-19 aid. Section 5 further evaluates the effectiveness of this COVID-19-related aid in the country’s health and socio-economic situation. In doing so, we use the OECD’s Principles for Good International Engagement in Fragile States and Situations as a tool for measuring the effectiveness of COVID-19 aid in the country. Leveraging these OECD/DAC Principles, Section 6 presents some recommendations for effectively engaging fragile states like the DRC.

2 Methodology

We consulted both primary and secondary sources in investigating the effectiveness of COVID-19-related development aid in the DRC. For secondary sources of data, we conducted desk research and reviewed existing literature in the areas of fragility, state-building, development aid, and cooperation in Africa, specifically in the DRC. These secondary sources included journal articles, news reports, white papers, and donor reports, etc. We also consulted quantitative sources of data, including the OECD database, World Bank database, and the database of DRC’s National Institute of Statistics. It is worth noting that this study adopted a content analysis model to present the data gathered, presenting the dominant arguments from the data in various themes. Furthermore, it adopts the OECD/DAC Principles for Good International Engagement in Fragile States and Situations as a framework for evaluating and analysing the effectiveness of COVID-19-related aid on the continent.

To put it in context the operational definition of ‘fragile’ in this study goes beyond instability caused by violent conflicts; it explores other issues such as economic downturn, food insecurity, health crisis, and political crisis. This definition gives a holistic perspective of fragility and facilitates adequate understanding of the case-study country. It is also important to stress that our operational definition of COVID-19-related development aid goes beyond health aid and encompasses other types of non-health aid that are aimed at helping fragile countries to recover from the devastating
effects of the pandemic. Such aid includes loans, financial grants, technical support, educational scholarships, humanitarian assistance, and emergency supplies (World Bank 2021). We decided to focus on the DRC mainly because the country fits the definition of a fragile state. Beyond being afflicted by incessant armed conflicts, the Fragile States Index ranked DRC as the fifth most-fragile country in the world, affirming the level of underdevelopment and instability in the country (Fund for Peace 2022; Klausen and Humphry 2015; OECD 2008a).

3 Understanding DRC and COVID-19

The DRC is the largest country in sub-Saharan Africa, with a total landmass of 2,344,858 km² and a population of about 96 million people (Statista 2020; Worldometer 2023). Located in the central part of sub-Saharan Africa, DRC is greatly endowed with huge reserves of natural and mineral resources such as cobalt, copper, gold, arable land, the world’s second largest rainforest, and immense biodiversity (World Bank 2022). Indeed, the country hosts more than 70 per cent of the world’s cobalt reserves and over 60 per cent of global coltan reserves, and it is the fourth biggest producer of copper (Mitchell 2022). These exceptional natural and mineral resources have made the DRC a major focus of many development players.

Despite these exceptional resources, DRC continues to experience a cycle of violent conflict and is an epicentre of humanitarian crisis. The country largely depends on foreign aid for survival, receiving a total of US$3,025.53 million in 2019, with the USA and the World Bank being the largest donors and providing 35 per cent of official development assistance to the country (Global Economy 2020; Kaiser and Wolters 2012). The DRC falls into the category of least-developed countries, with a gross domestic product (GDP) of US$49.87 billion and a gross national income per capita of US$506 in 2021 (World Bank 2022). But, more sadly, DRC is among the five poorest countries in the world, with about 64 per cent of the country’s population living in extreme poverty, representing 60 million people living below the US$2.15 per day poverty line (World Bank 2022).

With a long history of authoritarian rule and political upheaval, DRC has experienced a huge number of violent conflicts, leaving scores of people dead and hindering the country’s development. Since 1994 DRC has experienced massive ethnic strife and civil war, putting the country on the brink of collapse. Its domestic political strife between 1998 and 2003 led to one of the worst humanitarian crises since World War II, with about 6 million people recorded as having died and over 2 million displaced (Nations Online n.d.). In response to this cycle of conflict, the UN Security Council instituted the United Nations Organization Stabilization Mission (MONUSCO) in the DRC in 1999. As at June 2022, MONUSCO had deployed 18,278 UN personnel in the country (UN Peacekeeping 2022).

In the same vein the DRC’s human development index is extremely poor, ranking 164th out of 174 countries in 2020, further highlighting the poor human capital indices in the country (World Bank 2022). Key development challenges, such as education, quality healthcare, malnutrition, and human rights, are in a dire state. For instance, primary education completion is ‘only about 67 per cent, while 86 per cent of 10-year-olds are deprived of access, making them unable to read and understand simple text’ (World Bank 2022). Additionally, the country’s healthcare system has suffered severe setbacks over the years, with increasing infant mortality at a rate of 81.2 per 1,000 live births recorded in 2020 (UNICEF 2020a).
Based on these realities the Fragile State Index ranks DRC as the sixth most-fragile nation out of 179 countries in the world, firmly placing the country on the global map of unstable countries (Fund for Peace 2022).

3.1 COVID-19 in the DRC

Since announcing its first COVID case on 10 March 2020, the DRC recorded a total of 95,585 cases and 1,463 deaths as of 9 February 2023 (Worldometer 2023). The outbreak of the COVID-19 pandemic undoubtedly exacerbated the DRC’s existing developmental and humanitarian challenges. Like other countries in Africa the pandemic outbreak has had a devastating effect on its healthcare system and the economy.

With the country having a great deal of experience in dealing with previous outbreaks of diseases, such as the Ebola virus, cholera, and measles, experts expected a more rapid and effective response to the COVID-19 outbreak in DRC. However, its healthcare system was handicapped by the COVID-19 outbreak, putting the lives of many citizens in danger. The pandemic led to a significant drop in the number of citizens that were able to access the country’s healthcare facilities, with a 16 per cent reduction of hypertensive patients and a 39 per cent reduction of diabetes patients visiting the health centres (Hategeka et al. 2021). Not only has the country’s healthcare system failed to manage the pandemic but there is also a lack of adequate healthcare facilities to withstand the rigor of the pandemic. Basic personal protective equipment, such as gloves, surgical gowns, handwashing kits, protective clothes, and infrared thermometers, were largely unavailable in many healthcare facilities, especially in the eastern part of the country where violent conflict is prevalent (ICRC 2020). This is largely due to the country’s existing poor and overstretched healthcare system, which has faced a series of dangerous diseases such as Ebola over the years. Additionally, most medical practitioners in DRC lack the required skills to address the pandemic, creating a human resource gap in the country’s healthcare system. All these issues made it extremely difficult for the DRC government to single-handedly combat the unseen enemy of the state.

As in other African countries, in DRC, the COVID-19 pandemic has been more of an economic crisis than a health crisis. This is due to the overwhelming impact of the pandemic on the country’s economy. The DRC experienced a 6.2 per cent and 0.2 per cent GDP contraction in 2020 and 2021 respectively, largely due to the disruption of economic activities during the peak of the pandemic. An official unemployment rate of 10.3 per cent and a 46.1 per cent poverty rate were recorded in DRC in 2020 (AfDB 2021). The pandemic also slowed down the country’s economy by 1.7 per cent and created a 15.2 per cent slump in cobalt exports in the first quarter of 2020 due to the shut-down of mines (Reid and Holland 2020). This informed the reason why Batana et al. (2021) noted that ‘we have found that COVID-19 pandemic-related shocks have adverse social and economic impacts, such as declined labour and non-labour income and the resulting harmful coping strategies, as well as disruptions in goods and services markets and health and education services’. In the country’s capital, for instance, more than 10 per cent of households experienced job losses due to the pandemic and the country experienced a cumulative 16 per cent inflation rate in 2020 against 4.6 per cent in 2019 (Batana, et al. 2021).

In response to the outbreak of the pandemic, the government took some decisive measures to mitigate its negative effects on the socio-economic stability of the country. On 26 March 2020 it

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3 While there are estimates of huge fatalities in DRC, it is difficult to ascertain whether the officially reported cases are true. There may be some unreported cases due to poor testing rates, focus on other dangerous diseases like Ebola, and, more importantly, civil unrest within the country.
announced a nationwide lockdown, ordering total closure of the country’s borders (France24 2020). The government also took other measures, such as supporting household demand for basic necessities and providing fiscal and monetary measures to support citizens’ socio-economic activities (KPMG 2020). It provided economic stimulus packages, including creating funds to support spending measures relating to the pandemic crisis; supporting the revival of companies’ activities through financing from the Fund for the Promotion of Industry at zero rates; providing credit to the food and pharmaceutical sectors; and prohibiting mass dismissal based on lockdown measures (KPMG 2020). All these responses played a key role in helping the country’s economy to rebound in the aftermath of the COVID-19 pandemic.

It is evident that the DRC received a significant amount of health and non-health-related COVID-19 aid from various actors in the global community. This aid played a significant role in the country’s socio-economic rebound process in the post-COVID period. The next section explores the different types of COVID-19 aid that were donated to DRC by various state and non-state actors in the international system.

4 Major COVID-19 aid donors to DRC

In 2011 the DRC was the second highest recipient of international aid, receiving US$5.53 billion from donors around the world (World Bank n.d.). Despite its innumerable mineral and natural resources, this resource-rich country still ranks as the second highest recipient of developmental aid in the 21st century. Hence it is not out of place to give DRC the nickname ‘the aid orphan’. However, we cannot make immediate assumptions based on COVID-19-related issues because even the strongest healthcare systems were unable to stand the pressure and the aftermath of COVID-19 pandemic.

It is no longer news that the COVID-19 pandemic wave swept through the world, leaving casualties and exposing the fragility of even the most celebrated healthcare sectors in the world. While countries had different experiences with COVID-19 based on the strength of their health sector, many states would have been unable to survive without development assistance. In this section, we identify the key donors who contributed to and supported the government of the DRC during the peak of the COVID-19 surge (see Table 1).

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<tr>
<th>State donors</th>
<th>International financial institutions</th>
<th>Donors/Intergovernmental organizations</th>
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<td>China</td>
<td>International Monetary Fund</td>
<td>United Nations High Commission for Refugees</td>
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<td>United Kingdom</td>
<td>World Bank</td>
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<td>United States of America</td>
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Source: compiled by the authors.
4.1 Donor partners and COVID-19 aid to DRC

The DRC received support in the form of development assistance from different stakeholders in the international community, largely in the form of vaccines, food supplies, debt relief, cash, and health experts/personnel. As well as helping to ease the impact of COVID-19 in the country, these development assistance instruments helped to address some of the underlying and structural challenges that the government faced prior to the COVID-19 outbreak. These instruments were donated by state and non-state actors in their different capacities. Many of the state actors saw the need to make commitments to fellow member states that had bilateral or multilateral socio-economic relations with them and to potential allies in the international system.

*China*

On 6 January 2021, China granted debt relief worth over US$2 billion to southern countries including the DRC to help them to manage their existing problems and the economic effects of the coronavirus outbreak. Beijing provided debt relief amounting to US$28 million to Kinshasa to enable it to effectively combat the virus (The East African 2021). At a joint press conference held in Kinshasa, China's Foreign Minister Wang Yi noted that ‘as Congo’s most reliable friend, China wishes to continue to make its contribution to Congo’s development’ (Al-Jazeera 2021). The Chinese government had given the DRC no less than 53 loans totalling US$2.4 billion between 2000 and 2018 (Reuters 2021). As a result, the DRC was not required to pay back the interest-free loans it had received from China and that were due to expire at the end of 2020. Additionally, China provided 400,000 doses of SINOVAC vaccines to DRC in the later part of 2021, with the aim of helping the country combat the virus effectively (UNICEF 2021a). This donation is an integral part of the bilateral agreement between both countries to ensure equitable access to the vaccines.

*United States of America (USA)*

In September 2021 the USA gave the people of the DRC 4,257,950 doses of COVID-19 vaccines at no cost. These included 1,177,400 Johnson & Johnson doses, 250,320 Moderna doses, and 2,830,230 Pfizer doses. Approximately 28 per cent of the 3,947,900 doses of vaccination were donated through the African Vaccine Acquisition Trust (AVAT), and 72 per cent were given in collaboration with COVAX (US Department of State n.d.).

President Joe Biden declared that the USA would lead a worldwide, coordinated vaccination effort to serve as the world’s vaccine arsenal, and he pledged to supply 1.2 billion doses of cost-free, safe, and effective vaccines to satisfy immediate needs around the world (US Department of State 2022). The USA also collaborated with many international organizations, including COVAX and AVAT. This was a total shift from President Trump’s ‘America First’ policy, where the USA played little or no role in supporting global efforts to mitigate the impacts of the pandemic (Banco 2021).

*United Kingdom (UK)*

On 13 August 2021 more than 51,000 doses of the AstraZeneca vaccine were delivered to the DRC, largely thanks to a bilateral gift from the UK and COVAX, a collaboration between the Coalition for Innovations in Epidemic Preparedness (CEPI), Gavi, UNICEF, and WHO (UNICEF 2021b). At the G7 Summit in June 2021, the UK committed to sharing 100 million doses of vaccine by 2022, including 30 million by the end of that year. The donation to the DRC was part of that commitment (Loft 2022).
Prior to the outbreak of the COVID-19 pandemic, the UK had maintained a cordial and stable relationship with DRC, had legitimate and functional governmental institutions that served its people, and had experienced sustained economic growth that improved everyone’s access to healthcare, quality of life, and education. The UK Ambassador to the DRC, Emily Maltman, further reiterated the UK government’s readiness to support the DRC during the pandemic, noting that ‘the UK is proud to be able to ensure access to a second dose of AstraZeneca vaccine for Congolese people who have already received their first dose’ (UNICEF 2021b).

France

The DRC was also covered by the COVID-19 Health in Common response initiative launched by French President Emmanuel Macron under the auspices of the Agence Française de Développement (AFD 2020). This EUR1.2 billion project was spearheaded by the French government to support its African partners in combating the pandemic (AFD 2020).

The initiative’s primary goals were to support the major French COVID-19 actors, such as non-governmental organizations, foundations, networks, and research bodies, and to provide financial support for strengthening healthcare systems and contributing to national COVID-19 reaction plans in African nations. This was designed to help capacity building and to ensure that priority nations have better access to the resources made available at the multilateral level.

Like other initiatives this was intended to support DRC in managing the health crisis and its immediate economic and social implications. The initiative was adopted by the AFD Board on 20 April 2020, with the plan’s actions including ‘€150 million in the form of donations; €1 billion in the form of loans to address short-term challenges facing partner countries and development banks’ (AFD 2020). In 2021, AFD and the African Export-Import Bank (Afreximbank) signed a EUR150 million worth framework to support AVAT (Afreximbank 2022).

International Monetary Fund (IMF)

Gita Gopinath, the IMF’s Deputy Director, highlighted the efforts of the international agency in assisting nations to manage and deal with the COVID-19 pandemic, noting that ‘last year a global target was set to vaccinate 70 per cent of each country by mid-2022. As of today, about 61 per cent of the world received 2+ doses, but about 130 countries missed the target. We need stronger health systems and in-country delivery to fight this pandemic and prepare for future ones’ (IMF 2022).

The IMF fact sheet showed that the organization reached a compromise between the requirement for quick COVID-19 finance and the proper accountability and transparency to ensure that financial assistance reached those who needed it the most. At the peak of the pandemic, IMF emergency loans were given in the form of upfront cash payments. To achieve this the IMF partnered with other intergovernmental organizations to increase efficiency and measure the impact of their aid. They launched the IMF–WHO COVID-19 Vaccine Tracker, WTO–IMF COVID-19 Vaccine Trade Tracker, COVID-19 Global Targets and Progress Tracker, and ACT-A/MLT Global COVID-19 Access Tracker (IMF 2022).

4 COVID-19 Health in Common is an initiative launched by the French Government to support its African partners in fighting the health and socio-economic impacts of the pandemic. The EUR1.2 billion initiative provides funding to African countries to strengthen their healthcare systems. For the purpose of effective policy development, future studies could dig deeper into the impacts of this initiative in African countries, especially in fragile states like DRC.
On 16 December 2019 the IMF’s Executive Board approved a disbursement to the DRC under the Rapid Credit Facility (RCF) in the amount of SDR266.5 million (roughly US$368.4 million) to assist the government in meeting its urgent balance of payment needs (IMF 2019). The IMF also disbursed US$363.27 million under the RCF on 22 April 2020 to help the DRC meet its immediate balance of payments due to the COVID-19 outbreak (IMF 2020).

About a year later, on 15 July 2021, the IMF Board approved an SDR1,066 million (about US$1.52 billion) extended credit facility (ECF) arrangement for DRC (IMF 2021). Approval of the ECF arrangement enabled the immediate disbursement of about US$216.9 million to reinforce the country’s international reserves (IMF 2021).

UNICEF and the European Union (EU)

On 8 June 2020, the EU conveyed essential humanitarian supplies to support the COVID-19 response, while UNICEF provided 3.7 cubic metres of essential health supplies to Goma and an additional 183 cubic metres of supplies were also delivered to Kinshasa, DRC (UNICEF 2020b).

UNICEF categorized the COVID-19 pandemic under the umbrella of other ongoing humanitarian and epidemic support. UNICEF DRC rolled out humanitarian activities to meet the critical needs of children, women, and vulnerable host communities, particularly for nutrition, child protection, education, wash, sanitation and hygiene (WASH) and communication for development (C4D).

In 2021 UNICEF in partnership with COVAX provided 1.7 million doses of AstraZeneca COVID-19 vaccines to Kinshasa (UNICEF 2021c). Being among the first batch of COVID-19 vaccines that arrived in DRC, this represented a historic moment in the country’s fight against the pandemic. Additionally, UNICEF continued to support the Ebola Preparedness and COVID-19 activities. In 2022, 101,476 packages of infection prevention and control (IPC)/WASH kits (handwashing devices and soap) were provided to the North Kivu, South Kivu, Ituri, and Tanganyika areas of DRC (UNICEF 2022).

5 Assessing the effectiveness of COVID-19 aid in DRC

This section presents a critical assessment of the health and non-health COVID-19-related aid to DRC from three key foreign actors: China, the EU, and the IMF. We decided to focus on these three donors because of their significant contributions to the global effort in combating the COVID-19 pandemic. It is worth noting that their COVID-19 aid played a huge role in DRC’s response to both the health and socio-economic impacts of the pandemic in the country. Having noted the significant amount of COVID-19 aid to the DRC, it is important to critically assess its effectiveness to identify its impact on the state (Gavas et al 2013). Doing so will also expose gaps in the COVID-19 development assistance programming and provide opportunities for future improvement. Another significant reason for critically assessing these COVID-19 development assistance instruments is that it will bridge the academic–policy and scholar–practitioner divides (Baranyi and Desrosiers 2012).

Various international principles and frameworks guide effective aid to fragile states. These principles include the Paris Declaration on Aid Effectiveness of 2005, the Accra Agenda for Action of 2008, the New Deal for Engagement in Fragile States, and the Ten Principles for Good International Engagement in Fragile States and Situations (IDPS 2011; OECD 2005, 2007, 2008a, 2008b). A primary, common argument for all these international frameworks is to improve development aid to fragile states and effectively engage recipient nations.
In this context, this paper focuses on some of the OEDC/DAC Principles for Good International Engagement in Fragile States and Situations, using them as the basis for evaluating the health and non-health-related COVID-19 aid to DRC (Austrian Development Cooperation 2014; OECD 2007). Confirming the need for international donors to constructively engage fragile nations, the preamble to these Principles notes that:

International engagement will not by itself put an end to state fragility, but the adoption of the following shared Principles can help maximise the positive impact of engagement and minimise unintentional harm. The Principles are intended to help international actors foster constructive engagement between national and international stakeholders in countries with problems of weak governance and conflict, and during episodes of temporary fragility in the stronger performing countries. They are designed to support existing dialogue and coordination processes, not to generate new ones. In particular, they aim to complement the partnership commitments set out in the Paris Declaration on Aid Effectiveness. As experience deepens, the Principles will be reviewed periodically and adjusted as necessary. (OECD 2007)

5.1 Exploring the Principles and COVID aid in DRC

With the long-term vision of assisting recipient nations to build resilient, effective, and legitimate institutions, international engagement in fragile states or situations is expected to abide by these Principles and to engage local stakeholders with a sense of sincerity (Moreira da Silva 2021). In the case of DRC—a traditional aid-recipient nation and a famous fragile state—these Principles are expected to serve as the guiding template for international donors, especially during unprecedented situations like the COVID-19 outbreak. We discuss some of the Principles below.

Take context as a starting point

Understanding contextual differences is extremely important for providing effective aid to fragile states and situations. Deeply rooted in scientific and thorough baseline study and research, donor partners must understand the realities of the recipient countries (Swiss Agency for Development n.d.). This will help them to design a specific aid programme that fits the realities of the recipient country. This informed the reason why UNICEF (2018) in its ‘Programme Framework for Fragile Context’ outlined contextual analysis as the leading priority for donor agencies operating in fragile areas. It is also worth mentioning that donor partners must avoid the one-size-fits-all approach as different fragile states have their own specific peculiarities, and generalizing aid programmes will likely fail to help the fragile state to transition to a stable state. As the Principles highlight, ‘it is particularly important to recognise the different constraints of capacity, political will and legitimacy, and the differences between: (i) post-conflict/crisis or political transition situations; (ii) deteriorating governance environments; (iii) gradual improvement; and (iv) prolonged crisis or impasse’ (OECD 2007). These factors are extremely important for the success and effectiveness of aid to fragile states.

In the case of the donor partners we focus on—China in particular—there is evidence that they considered the state context and peculiarities for the majority of their COVID-19 aid programmes.

\[\textit{We chose the OECD Principles for Good International Engagement in Fragile States and Situations for this study because they provide a unique and better representation of a wide range of developmental issues driving fragility beyond violent conflicts. Unlike the New Deal, which is largely focused on violent conflicts, the Principles are well suited to analysing and evaluating other human security challenges in fragile states, such as health crises posed by the COVID-19 outbreak.}\]
to DRC. For instance, under the auspices of the G20, China cancelled debt of US$28 million to help DRC fight the COVID-19 virus (The East African 2021). While other donor agencies were providing COVID-19 grants and vaccines to fragile states, China took specific aid action that addressed the particular needs of DRC. In the same vein DRC was among the various fragile states that received 400,000 doses of SINOVAC vaccine from China (UNICEF 2021a). These efforts prepared Kinshasa for opening up its economy to global trade and commerce. Again, this aid effort speaks to the specific need of DRC—a country that was yearning to open its mining industry after several months of closure.

**Ensure all activities do no harm**

International interventions are undoubtedly susceptible to causing unintended harm and socio-economic division in recipient states, especially in fragile states where corruption and human rights abuse are predominant. This is exactly the case with COVID-19 aid to DRC, which suffered massive embezzlement. In 2021 DRC’s former Minister of Health, Eteni Longondo, was arrested for misappropriating US$7 million intended to combat the virus (News24 2021). Unfortunately, this is not in any way new to DRC, as ‘Longondo’s predecessor Oly Ilunga was sentenced to five years of forced labour for embezzling more than $400,000 from Ebola response funds’ (Bujakera and Holland 2020). It is a common phenomenon in the country. Perhaps, if the donor agencies had been more rigorous in their assessments, they would have been more thorough in monitoring funds donated to DRC as the country has a history of chronic corruption. This is why Transparency International (2021) ranks the country 169 out of 180 countries in its Corruption Perception Index. This is a major gap identified in the COVID-19 aid to DR Congo, as it paved the way for corrupt public officeholders to misappropriate funds without hesitation.

**Prioritize prevention**

As with other drivers of fragility, it is extremely important to put in place preventive measures for avoiding disease outbreaks. It is more worrisome that a country like DRC, which has experienced several disease outbreaks—cholera, Ebola, and measles—over the years, has failed to build a resilient healthcare system that can withstand future disease outbreaks. Specifically, the DRC should have built the capacity of its healthcare workers and constructed formidable healthcare centres to accommodate the rigour of COVID-19 outbreaks. Despite these realities, donor partners failed to prioritize prevention in support against COVID-19 in the country. For instance, the majority of donations to DRC have been in the form of vaccines, loans, grants, and technical support. However, there has been little focus on creating a resilient healthcare system in the country. This informed the reason why the Principles note that ‘action today can reduce fragility, lower the risk of future conflict and other types of crises, and contribute to long-term global development and security. International actors must be prepared to take rapid action where the risk of conflict and instability is highest’ (OECD 2007).

**Align with local priorities in different ways in different contexts**

This is perhaps the most important Principle that foreign donors should adhere to when providing aid to fragile states. It is extremely important that international donor agencies align their aid programmes with local priorities. Doing so will create the necessary synergy to drive stability in fragile situations through their development aid. Indeed, international actors should align their programmes with local strategies, providing the necessary technical support. With the exception of failed states, development aid should always serve as an instrument for achieving local development goals. It is the only way to drive effective development intervention in fragile situations.
In the COVID-19 situation, for instance, content analysis of several reports about aid to DRC revealed that the aid provided by donor partners aligned with local priorities. Beijing’s debt relief of US$28 million for DRC significantly helped the country to utilize available funds to help its economy to rebound and to combat the virus. Additionally, the IMF disbursed US$363.27 million of RCF to the DRC government to meet its balance of payments needs during the height of the pandemic (IMF 2020). These efforts matched the DRC government’s priorities of combating the virus and maintaining socio-economic stability in the country.

Act fast—but stay engaged long enough to give success a chance

Sustainable and broad-based development takes time and perseverance. International donors should commit adequate human, capital, and financial resources to support the transitioning process of fragile nations. Interestingly, we have seen UN Peacekeeping missions staying for years in fragile nations, facilitating socio-economic and political stability and an effective transitioning process. For instance, MONUSCO has had a presence in DRC since 1999, where it plays a strategic role in driving reunification and preventing a recurrence of violent conflict (Relief Web 2019). However, the length of a foreign presence is not as important as its effective engagement with local partners and gradually working with them to drive stability.

However, this is not the case for COVID-19 aid donations to DRC. Apart from the IMF, most foreign donors gave the country grants and loans without any form of monitoring or proper engagement to ensure that the funds reached the right people. Additionally, there was little effort by donor agencies to properly build a resilient healthcare system in the state.

5.2 Caveat

It may be wrong to have expected more from foreign donors and development partners regarding their action or inaction during the unprecedented situation that COVID-19 presented to the world. It is fair to understand that these states and non-state donor actors responded to these challenges out of shared responsibility to drive global stability and that it may have been unrealistic for them to follow all the stated Principles. Furthermore, it would be overwhelming to put the primary responsibility of the local national government onto donor agencies, who are merely in these fragile areas to support local efforts in driving a smooth transition process and stability.

6 Way forward and conclusion

6.1 Way forward?

From the above assessment it is evident that there are successes and gaps in the COVID-19 aid from various donor partners to DRC. From China’s debt relief to IMF’s credit facility, from US vaccine doses to France’s COVID-19 Health in Common initiative, the DRC benefitted from a wide range of aid aimed at helping the state to combat the virus and overcome its socio-economic impacts. However, the reality in DRC revealed that there is a need for foreign donors to abide by the OECD/DAC Principles for Good International Engagement in Fragile States and Situations, especially during unprecedented times like the COVID-19 outbreak. To this end this study presents some recommendations for achieving an effective aid system in fragile situations, specifically for disease outbreaks like the COVID-19 virus. These are set out below.
Effective monitoring and evaluation

This is perhaps one of the most important efforts that should be made. Development aid donors should take scientific monitoring and evaluation (M&E) very seriously. A proper M&E system needs to be instituted to identify the outcomes and impacts of development programmes. A thorough and scientific M&E exercise will not only expose the successes of and gaps in a development programme but will equally reveal the quality of the programme.

Interestingly, the Network of Southern Think-Tanks (NeST) designed a detailed M&E framework which presents a new set of 20 indicators arranged into five dimensions (Besharati et al. 2017). For a development aid programme to effectively drive the desired impacts, the framework stresses that there must be a focus on five major areas. These are: ‘inclusive national ownership’; ‘self-reliance and sustainability’; ‘horizontality’; ‘accountability and transparency’; and ‘development efficiency’ (see Besharati et al. (2017: 11) for more details on the indicators associated with each dimension). While these dimensions may not be exhaustive, donor partners should strive to use them as a gauge to evaluate the success of their development aid programmes in fragile states and situations.

Preventive measures rather than reactionary responses

Donor agencies should understand that the world is becoming increasingly interconnected and global players need to act decisively and efficiently in addressing local and common challenges. In the case of COVID-19 it is imperative that donors pay much attention to creating strong political institutions and a resilient healthcare system that can withstand future disease outbreaks. International donor partners need to commit resources that would help national institutions in fragile states to achieve political and economic stability as well as a resilient healthcare system. Donor agencies should provide technical and financial support that would help fragile nations to prepare for any future outbreak. By doing this fragile states like DRC would be able to fend off future health crises.

6.2 Conclusion

Development aid is an integral part of international relations with state and non-state actors instituting aid programmes to support fragile states. However, a growing body of literature has highlighted the need for local actors to significantly increase their efforts while international players provide support and complement existing strategies and priorities. To this end, international aid will only have effective and meaningful impacts if they align with local priorities and actions. In light of the foregoing, this study contributes to the growing body of literature in the area of development aid in fragile and conflict-affected African states more broadly and in the DRC more specifically, while stimulating further debate in this subject area.

Significantly, this study further uncovers the effectiveness of COVID-19-related aid in DRC, detailing the identified successes of and gaps in the aid in the fragile state. As a result of its findings, the study provides some useful recommendations that would assist donor agencies to provide effective aid in fragile states, helping them to successfully navigate the recovery and transition stage. It is also worth highlighting that this study attempts to bridge the academic–policy and scholar–practitioner divides, noting the effective models that could help both parties to collaborate in promoting resilience in fragile states.
References


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