DRC-IHPplus FACTS

Nutrition

The Integrated Health Project Plus (IHPplus)

was implemented in the Democratic Republic of Congo (DRC) from June 2015 to June 2018 by Management Sciences for Health (MSH) and Overseas Strategic Consulting, Ltd. (OSC), under a subcontract via Pathfinder/Evidence to Action. This USAID-funded project was designed to avoid a gap in services in USAIDsupported health zones upon completion of the USAID Health Office's five-year flagship Integrated Health Project (IHP) in 2015. The two major project components were direct support for service delivery and health systems strengthening activities. The service component included increased use of high impact family planning, maternal, newborn, and child health (FP/MNCH), nutrition, malaria, tuberculosis (TB), HIV and AIDS, water, sanitation, and hygiene services (WASH), and adoption of healthy practices in targeted health zones. The health systems strengthening component included improved implementation of selected policies, program advocacy, and decisionmaking, particularly at the provincial levels. Ultimately, the project was designed to create better conditions for, and increase the availability and use of, high-impact health services, products, and practices for more than 31 million people in nine provinces of the DRC with 168 target health zones (an increase from the 78 health zones supported by IHP).

Integrated Health Project Plus

in the Democratic Republic of Congo





This fact sheet describes the work of the Integrated Health Project Plus in the Democratic Republic of Congo, which was made possible by the generous support of the United States Agency for International Development (USAID), the United States President's Malaria Initiative (PMI), and the United States President's Emergency Program for AIDS Relief, under Subagreement Number OAA-AI-II-0024-OI-MSH under USAID Cooperative Agreement Number AID-OAA-AI-II-0024. The contents are the responsibility of the Integrated Health Project Plus and do not necessarily reflect the views of USAID or the United States Government.



Strategy

Malnutrition causes stunting in over 43% of Congolese children under five years, according to the DRC Demographic and Health Survey 2013–14. Assisting the Ministry of Health by providing **training** for health workers, promoting **breastfeeding**, and establishing infant and young **child feeding support groups** for parents, DRC-IHPplus made lasting changes in child health.

RESULTS

(baseline) to

128% (end of IHPplus) Number of women who received iron folate to prevent anemia 487,081 (baseline) to

2,393,793 (end of IHPplus)

Number of mothers of children 2 years of age or less who have received nutritional counseling for their children

1,500+ functional IYCF support groups in local communities

DRC–IHPplus Contact Management Sciences for Health E-mail: communications@msh.org



Nutrition

Challenge: Widespread malnutrition causes stunting in 43 percent of children under five years in the DRC

DRC-IHPplus response: DRC-IHPplus supported the DRC's Ministry of Health to reduce malnutrition through training for providers and nutrition education and services for families. The project particularly encouraged early and exclusive breastfeeding and infant and young child feeding (IYCF) support groups for parents. It also sponsored revision of protocols, data systems, vitamin A supplementation for children, and curricula for nutrition education at all levels.

Simple but effective approaches

Breastfeeding and other IYCF efforts

Breastfeeding provides many benefits—bonding, optimum nutrition, and immunity for newborns as well as health advantages and birth spacing for mothers. In DRC-IHPplussupported health zones, birth attendants helped women start breastfeeding within an hour of birth, and community health workers made sure they continued to learn about nutrition through home visits and IYCF support groups called ANJE groups, a French acronym that sounds like the French word for "angel."

Treatment of severe, acute malnutrition

In collaboration with the Ministry of Health, DRC-IHPplus facilitated the transport of therapeutic foods, including Plumpy'Nut and fortified milk. With the National Nutrition Program, IHPplus trained and provided follow-up coaching to health providers in their use.

IYCF Support Groups

Over the course of the project, IHPplus helped to establish over 1,500 functional IYCF support groups in local communities.

Outcomes and results

During the project, 2.3 million women received nutritional counseling for their children. More than 1,000 trained community health workers led 1,500 support groups in 69 health zones.

Growing Up Healthy

Mamie Itshika, a mother of eight who lives in the Dilala health zone in the DRC, followed community traditions when breastfeeding her first seven children. She was always told that when a child continuously cries, it means the mother's breastmilk alone is not enough. Babies should then be given other food, such as cassava flour porridge fortified with peanuts.

But more pregnant women have begun resisting tradition since the USAID-funded IHPplus established 23 IYCF support groups in Dilala. At monthly meetings, members of these groups provide breastfeeding advice and share their own experiences. IHPplus also supports the Ushindi champion community in Dilala, composed of self-motivated members who select health goals for their communities. To improve IYCF practices, Ushindi members carry out educational initiatives including doorto-door sensitization, mini-campaigns, and SMS messaging including information on breastfeeding.

During her eighth pregnancy, Mamie Itshika met with Ushindi champion community members during their door-to-door visits. They discussed the advantages of exclusive breastfeeding during the first six months, including its contribution to strengthening the baby's immune system. When her eighth child, Sungula, was born, Itshika decided to resist pressure from her husband and family and exclusively breastfeed Sungula. She also began attending her local IYCF support group to share what she had learned.

At three months, Sungula was growing well and was healthier than Itshika's other children at the same age. Itshika's husband was quickly convinced, and Itshika continued to breastfeed Sungula while also following her support group's advice to better nourish all of her children.



"I encourage mothers to recognize that exclusive breastfeeding is really good for their child and has a lot of benefits," Itshika said.

Between January-March 2017 and April-June 2017, among infants in Dilala whose mothers had received IYCF counseling, the proportion of infants exclusively breastfed increased from 59% to 71%; from July-September 2017, it increased to 73%.