## Sustaining DKT Bees to ensure healthier communities in DRC



Sexual and Reproductive Health (SRH) is a fundamental aspect of overall well-being, playing a pivotal role in individual and community development.

Throughout the years, we have seen how Community Healthcare Workers (CHWs) are frontline soldiers in the battle to improve SRH outcomes and how the sustainability of their efforts is crucial for long-term success and palpable social impact.



Furah - wife and mother of two from Goma, Nord Kivu joined the DKT Bees network in 2022 after graduating from nursing school in order to participate in her household's finances

With support from the Swedish International Development Agency (SIDA), DKT DRC developed in 2021, an innovative supply-side solution leveraging on trained traveling nurses, referred to as "Bees", who provide SRH products and consultations, including on gender-based violence, directly to patients' homes. The Bees are integral to the delivery of sexual and reproductive services, particularly in resource-constrained settings. They bridge the gap between healthcare facilities and communities, offering essential information, support, and services. The Bees network is comprised of community health workers (nurses and midwives) who travel throughout low-income communities to offer SRH services and products.

The purpose of the network is to:

- Increase access to contraception in communities
- Mitigate financial barriers to contraception use by providing affordable solutions/products
- Address social barriers to break misconceptions and myths around contraception that inhibit family planning use by reaching those whose mobility is constrained by social norms

### THE BEES ECONOMIC MODEL

With over 450 Bees working in across the country, the Bees economic model began in the province of North Kivu, where there are 75 Bees working either directly with DKT by themselves or in cooperatives. The Bees are equipped to help individuals and couples in low-income communities benefit from affordable and quality SRH solutions and become more autonomous in the process.

By 2022, the Bees economic model proved to have substantial success and was thus extended across the country. This extension included the formation of cooperatives, ranging from 5 to 8 Bees, where members organize themselves to purchase products from DKT, sell them within their communities, and benefit from bonuses all while producing CYPs.

## **TRAINING**

To increase the number of distribution channels within the country, the DRC government, through the National Program of Reproductive Health (PNSR), has authorized the distribution of specific short-acting contraceptive methods by community health workers. Since the Inception of this project, DKT recruited and trained 453 Bees across the country on Family Planning (theory + practice), Gender Based Violence; and has initiated them in the selling of SRH products. In addition, DKT provides training and organizes field activities with the aim of bringing products to the last mile.

## **SOCIAL IMPACT**

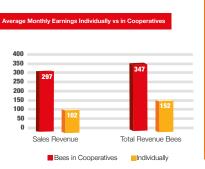
The Bees community-based distribution and economic model is proving to be successful in not only addressing SRH needs, but also in helping these traveling nurses make a living for themselves. Currently, DKT DRC contributes to the Bees' autonomy by providing them with a 50% bonus on the purchase of products and \$50 reimbursement for transport. On average a Bee is able to make \$150/month alone and if in a cooperative \$200/month. Our efforts together have allowed us to reach 9 million people in the DRC.

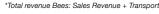
With increased funding, the Bees model will achieve greater social impact, promote education, empower society (women and youth) and positive behavioral change within communities in the DRC. The lasting effect will improve sexual and reproductive health in a country where as recently as 2019, youth (aged 10-24) faced serious SRH challenges such as high rates of early childbearing and lack of comprehensive knowledge and where the reproduction rate remains one the highest in the world at 5.7 with a low contraceptive prevalence across all methods (28%).

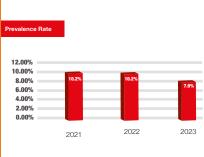
### **Focus North Kivu**







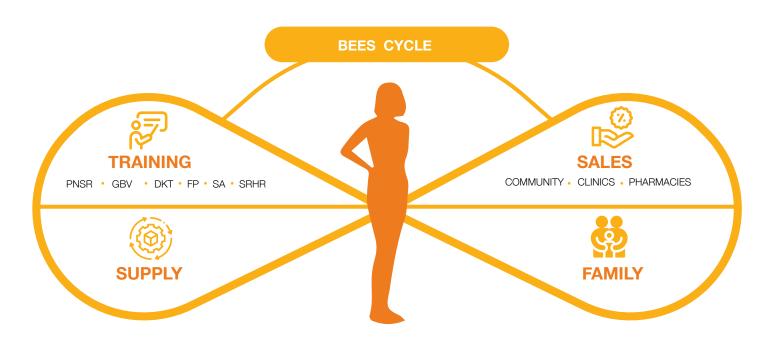




\*2023: A large part of the population has not been served due to displacement caused by the war and the elections.

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