

# ZAMBIA, NIGER

>>> PROGRESS REPORT: October 2019 through March 2020
Prepared July 2020

# MOTHER AND CHILD HEALTH

## **GLOBAL SUMMARY**

Your support is helping World Vision put a stop to the needless deaths of pregnant women, newborns, and young children in Zambia's Luwingu district, and soon, we will expand into Niger's Dosso and Maradi regions.

Since 2016, we've been helping to provide healthcare education and services for pregnant women, newborns, and young children through specially designed projects in Somalia, Uganda, and Zambia. Our community-based prevention and treatment interventions are saving lives and helping to ensure children thrive.

We recently ended our first phase of this work, successfully closing projects in Somalia and Uganda. A second phase has been launched in Zambia, based on a redesign focusing on the successes of the first phase. A foundation partner is helping us expand our work in Uganda as well.

So far in the recently launched Phase II in Zambia, we have made great strides in laying the groundwork to provide education that empowers families with the information they need to help ensure a healthy pregnancy for women and a safe delivery for their babies, despite COVID-19 challenges that impacted the project near the end of this reporting period.

Community health workers (CHWs) have been trained to share health and nutrition information, and clinic staff members have received additional training to help them provide a higher quality of care for families in their service areas and support health volunteers.



A toddler is measured for progress of growth and development.

And importantly, faith leaders have learned how to share information about good mother and child healthcare with their congregations and communities. Pastors and imams provide a vital and trusted voice in their communities and are valuable partners.

We are planning to introduce this work in Niger—hopefully in the coming year—where we can expect to see improved well-being in one of the most challenging regions we serve.

## **GLOBAL UPDATE**

896,017

WOMEN AND YOUNG CHILDREN\* have gained access to maternal and child health and nutrition services, which includes 475,269 children younger than 5 since fiscal year 2016. So far in FY20, 2,511 women and young children benefited from your support, 503 of whom were under 5.

\*The beneficiary numbers on this page include projects that have closed and those that are ongoing. They also reflect some people who might have received more than one service. For example, women who delivered their babies in a health facility often also received prenatal care services.



90,538 children have attended community events that monitor their growth and development.

**SINCE** 2016:



54,339 pregnant women attended prenatal care clinics, most for the prescribed four times.



90,505 women delivered babies in a health facility with trained medical staff.

# ZAMBIA

Work in the first half of fiscal year 2020 primarily focused on recruiting project staff, purchasing supplies for training and activities, and conducting a baseline survey to create a benchmark against which we will measure progress. We also began educating and training Luwingu district's community health workers, health facility employees, and local leaders on the models being used in this project.

Over three years, we will reach 20,257 children younger than 5 and 24,704 women of child-bearing age with health and nutrition education, treatment, and care. This project is designed to create lasting improvements by changing the way communities think about maternal and young child health issues.

We have trained nearly 50 health facility employees, so they can provide

improved care and also monitor and mentor CHWs. Enlisting and training community leaders also is expected to make a powerful impact.

Daka Chikoyi, who runs a health clinic, was impressed by project training sessions.

"This workshop has awakened sections of society neglected by the Ministry of Health," he said. "Sitting in the training made me realize how important church leaders are in community interventions. They have a lot of influence and more following ... they are charismatic and are better placed to help the vulnerable, as it is in line with their calling."

We thank you for following your calling to reach out as the hands of Jesus, bringing health and hope to children and families in Luwingu.



A health volunteer practices what she has learned about sharing mother and child health information with families in her community.

1,868 people heard messages on nutrition and treatment of malaria, pneumonia, and diarrhea.

5% Life of project target: 35,394

166 health volunteers were trained on core models for education and care of their patients.

Life of project target: 570

71 faith leaders were trained to share information about important mother and child healthcare.

Life of project target: 162

### Project highlights to date

The following are some of the achievements and activities of note during the first half of FY20:

- 106 volunteers were trained to share vital, timely messages on good maternal and infant health.
- 60 volunteer hygiene promoters were trained to explain the
- benefits of building hand-washing stations and family latrines, and how to keep a clean, safe home.
- 10 community meetings were held to share information on preventing

diarrhea, pneumonia, and malaria, and the importance of sleeping under insecticide-treated mosquito nets and safely spraying homes with insecticide.

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Annie Kaseketi leads two participants through an exercise during Channels of Hope training for faith leaders in Luwingu. Faith leaders play a vital role in sharing information on mother and child health issues. (Photo taken before COVID-19 safety measures were implemented.)

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- Project-trained faith leaders reached 141 adults (including 14 pregnant women) with information on dangerous traditional practices that can harm a pregnant woman's health and that of her unborn child (see story on last page).
- As a result of community outreach activities for sanitation and hygiene, 1,477 households constructed latrines and hand-washing stations.

- 503 boys and girls learned how and when to properly wash their hands, and how good hygiene and sanitation practices can improve their health.
- 21 employees from health facilities were trained to supervise facility staffers and community volunteers on community case management of illness. Community case management includes identifying health problems in sick children, and treating diarrhea and malaria with the appropriate medications.
- Safe Motherhood Action Group members are volunteers who also share health and nutrition information with their neighbors. They reached 385 people with information on good nutrition and its importance for pregnant women and children under 5. This included 199 pregnant women and 117 men. It is vital that men hear these messages as well, because they typically make the decisions on how household income is used.
- Safe Motherhood Action Groups also received training on building good relationships with the families they visit, data collection and monitoring, and fully understanding the messaging they share to promote healthy behavior changes.
- 12 Community Hope Action Teams were formed to act as "champions of hope." Each team works with a health facility in its area to share messages on the effects of early marriage for girls, traditional and cultural beliefs that harm women and children, and other health information.

#### COVID-19 and Mother and Child Health

The COVID-19 crisis is impacting every country where World Vision operates, including Zambia, and especially communities in Luwingu district, which are highly vulnerable to economic and social shocks.

Since the very beginning of the outbreak, World Vision has leveraged our 70-year history of emergency response to help children and families by scaling up prevention and relief efforts across the globe. Equally important, World Vision is combating secondary impacts of the crisis that are putting millions of children at risk—from heightened food insecurity and shuttered schools to increased violence or neglect.

In Zambia, Mother and Child Health activities have included training volunteers to safely distribute COVID-19 resources and supplying midwives with personal protective equipment. We have adapted how activities are carried out to ensure safety and continuity. For instance, no community educational sessions are being held; instead, health volunteers are visiting homes to provide education and care, ensuring proper distancing and safety guidelines are followed. Training sessions have been similarly adapted.



Health facility employees from Shimumbi Rural Health Center take part in a COVID-19 safety training session.

While disruptions and necessary restrictions related to the spread of COVID-19 will delay some aspects of our work in Zambia, we remain committed to ensuring vital community health and nutrition services continue to help children and their families not only survive this pandemic, but emerge resilient, with hope for the future.

Thank you for partnering with World Vision and responding to God's call to care for our neighbors, near and far. We are truly grateful for your choice to stand with us as we face this unprecedented challenge.

### Donated supplies and equipment fill vital gaps for health facilities and CHWs

Donated gifts-in-kind (GIK) have been improving care for families since the beginning of the project. World Vision has been coordinating with the Ministry of Health to identify areas of need, while our U.S. GIK team has been working closely with corporate partners to meet those needs.

COVID-19 restrictions on domestic travel in Zambia and the strain on health system resources further exacerbated supply challenges for rural health clinics, Prior to COVID-19's impact, World Vision's GIK team ordered more than \$80,000 worth of medication for malaria, pneumonia, and diarrhea, and it soon will be on its way. At the time of the order, it was expected these medicines would enable CHWs to treat children in their homes, but now the shipment—scheduled for arrival later this year—will fill gaps caused by serious shortages of medicine being experienced in health facilities across Luwingu.

Other supplies include:

• Seven hospital beds

- Three medical carts
- One gurney
- Two blood pressure monitors
- Two exam tables
- 13 over-bed tables
- One otoscope (for examining ears)
- One scale

Equipment for administrative use includes chairs, desks, trash cans, shelves, tables, file cabinets, and more.

### Upcoming activities for Q3 and Q4

In response to evolving COVID-19 conditions and government policies, the project is being adapted to serve families in a safe manner, including:

- Providing CHWs and health facility employees with personal protective equipment
- Adjusting the size of group training sessions to align with government policies and ensuring World Vision staff members, health facility employees, and CHWs are practicing safe distancing, wearing masks, and following hand-washing protocols

These adaptations have limited disruptions in serving the most vulnerable households in Luwingu.

Other planned activities include:

- Training CHWs on a model called integrated community case management, which helps them recognize and know whether to provide treatment or refer a child to a clinic for care of malaria, diarrheal illnesses, or pneumonia
- Conducting an assessment of the 12 health clinics and district hospital located in the footprint of this project, to determine what improvements and services are needed at each facility, and which types of training would benefit staff members and enable them to provide improved levels of care to mothers, infants, and young children

## Baseline survey gives project staff a benchmark against which to measure success

The baseline survey completed in January is a valuable tool used to measure progress. Key findings included:

- The prevalence of underweight children is 16%.
- Only 25% of households use an improved drinking water source.
- Only 32% of mothers and caregivers of young children know at least

- three of the five critical times to wash hands.
- 83% of babies were delivered by skilled medical personnel.
- Just 50% of parents with children under 5 have a good understanding of preferred feeding practices for infants and young children.
- The percentages of young children receiving timely and appropriate

- treatment for illnesses were: malaria, 61%; pneumonia, 55%; and diarrhea, 77%.
- 79% of mothers and caregivers know two or more signs of childhood illnesses that require immediate assessment and/or treatment.

This and other data will help us track important elements tied to good child health and well-being.

## **PROJECT SPENDING**

\$1,371,345 Project-to-Date Funding

Funding spent: \$396,860\*

\* Through March 31, 2020

# PASTOR HELPS COUPLE MAKE SOUND CHOICES

Training pastors on mother and young child health issues is spreading good information more broadly in communities.

Before she met Pastor Simukoko Njilanji, everything Doreen, 22, had learned about pregnancy and giving birth came from her grandmother and other older women in her village—women with no medical training. The information they shared was steeped in tradition and taboos, and some was downright dangerous.

Doreen and her husband, Japhet, are expecting their first child, and say they were given lots of advice regarding prenatal care and how to deliver a baby. They didn't realize that advice was bad until they met Pastor Simukoko.

The pastor, who had been trained on maternal and child health by this project, visited the couple's home, explaining he was a mother and child health champion, or someone trained to share proper healthcare information on pregnancy, nutrition, and safe deliveries.

Pastor Simukoko talked about the importance of getting prenatal care early in the pregnancy and good nutrition for Doreen. He debunked





Doreen and her husband,
Japhet, at left, learned about
prenatal care from a faith
leader in their community who
was trained by this project.
Pastor Simukoko Njilanji,
above, debunked some
dangerous cultural beliefs for
the couple, and shared good
information about proper care
for pregnant women.

some old taboos in doing so, by telling Doreen that she needed lots of protein, and a good local source was found in eggs, which are considered dangerous for pregnant women and children in some cultures.

"He also taught us many other things that we did not know ... because this is my first pregnancy," Doreen said.

Another important and timely lesson was to avoid traditional medicines made from herbs and other ingredients that aim to speed the delivery process. These often are dangerous to mother and baby.

"It actually was a relief to talk to someone at my home about my pregnancy," Doreen said.

If the pastor did not come to my home to talk to us about safe motherhood, I would have continued drinking the traditional medicine that I was given, and probably it would have harmed my baby instead of actually helping me."

—Doreen, a young mother from Kamanika in Luwingu district

Never again will there be ... an infant who lives but a few days.

—Isaiah 65:20 (NIV)



World Vision is a Christian humanitarian organization dedicated to working with children, families, and their communities worldwide to reach their full potential by tackling the causes of poverty and injustice. Motivated by our faith in Jesus Christ, we serve alongside the poor and oppressed as a demonstration of God's unconditional love for all people. World Vision serves all people, regardless of religion, race, ethnicity, or gender.







