



Maternal, Neonatal, Child Health & Nutrition

World Vision Zambia's 2021 - 2022 National Impact

Between 2017 - 2021



Situation in Zambia

32% of births were not delivered in a health facility resulting in an increased risk of child mortality.

High levels of deaths among newborns within 28 days

- **24** deaths per **1,000** live births
- **45** deaths per **1,000** live births (under one)
- **75** deaths per **1,000** live births (under five)

35% of children under-5 are stunted, **4%** are wasted, **12%** are underweight and **5%** are overweight.

HIV, Malaria, Acute Respiratory Infections and diarrhea are the leading causes of death and illnesses among children under five in Zambia.

Source: 2018 Zambia demographic and Health Survey

Our Programming Approach

The World Vision Zambia Health programme focuses on Maternal, Neonatal, Child Health and Nutrition (MNCHN). The aim of the programme is to improve the health status of pregnant women, lactating mothers and children under the age of five. Our strategic objective for health is to contribute to the reduction of maternal and child mortality through improved health and nutrition practices. The heart of World Vision's Global Health and Nutrition Strategy is a package of preventative interventions for mothers and children under two, targeting the first 1,000-days. We strive to strengthen community based health systems to implement interventions by building the technical and supervisory capacity of health care professionals, and in addition, the training and mentoring of community health workers (CHW) in technical areas, which include data collection and reporting.

Donors and Partners



To achieve our objectives, we use the following four core models:

1. Timed and Targeted Counselling (TTC): A family inclusive behavior change model that targets pregnant women, caregivers, and parents of children up to two years of age through appropriately timed household visits. TTC trains community health workers in accurate, preventive, care-seeking information and support to create demand for services and empower families to improve health outcomes and practices. Since 2017, 87,180 pregnant women were enrolled in TTC interventions against a target of 79,000. In addition, 74,473 children under the age of 2 have completed the TTC programme at 24 months since 2017.

In 2013, TTC was first piloted in Magoye and Luampa Area Programmes. These areas experienced greater than 82% and 90% improved delivery by skilled birth attendants, respectively. Institutional deliveries were greater than 85% for both Area Programmes. In 2017, TTC was rolled out to 23 Area Programmes. These include:- Buyantanshi, Mudanyama, Mwamba, Bwacha, Twikatane, Mbala, Luswepo, Chikomeni, Nyimba Chongwe South, Kapululwe, Chongwe East, Katete, Kawaza and Makungwa, Kaindu, Mumbwa, Nkeyema, Moyo, Twachiyanda, Mbeza, Muchila and Sinazongwe.



TTC targets pregnant and lactating women, including children under the age of 2. It aims to increase the number of women delivering at health facilities and children receiving immunizations.

2. PD Hearth +: This is a behaviour change model used to rehabilitate underweight and wasted children without medical complications. Using locally available food, that is nutrient dense, children are fed over a period of 12 days. During this period, caregivers are also given messages derived from the “ positive deviant inquiry” to improve the feeding, caring and health seeking practices for their children by trained volunteers. This model is integrated with additional interventions that include Growth Monitoring and Promotion; Savings Groups; and Maternal Adolescent Infant and Young Child Nutrition.

3. Community Health Committees (COMMS): Also known as Neighborhood Health Committees (NHC), are community based health management structures comprised of local residents in a defined catchment area and linked to their nearest health facility. Members of this structure are elected from the community through the guidance of clinic staff and traditional leaders. They are tasked with the identification and periodization of community health problems, collecting and reporting community health related data to the health facilities, and community resource mobilization.



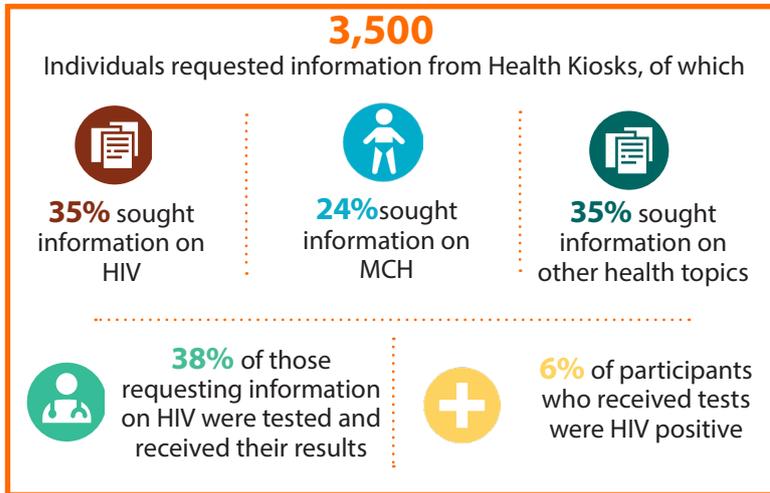
Mothers with underweight children attend cooking demonstration supported by World Vision.

4. Channels of Hope (COH): World Vision Zambia’s evidence-based Channels of Hope methodology aims to leverage on the importance of religious leaders in influencing communities on issues around HIV prevention, gender and child wellbeing. COH equips faith leaders with Biblical information and insight guiding them to become influential change agents. Faith leaders and community members are equipped to take practical actions in prevention, care and advocacy in order to promote community wellbeing for the most vulnerable in their communities.

2017- 2021 MNCHN Programme Progress

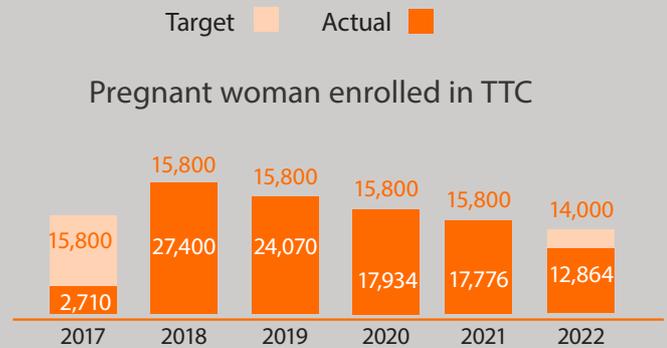
	2017 Base-line	2021 End-line	
Respondents able to identify at least 3 neonatal danger signs	37%	41%	↑
Woman who had four or more ANC visits while pregnant	70%	81%	↑
Woman attended to at birth by skilled birth attendants	88%	94%	↑
Infants exclusively breast fed for first 6 months	34%	53%	↑
Under 5 children who are underweight	14%	12%	↓
Under 5 children that are wasted	4%	3%	↓

5. Health Kiosk Model: World Vision Zambia mobilizes faith groups and builds capacity of faith leaders to share information with congregants on HIV/AIDS, Family Planning, Reproductive Health and MNCH as well as create a safe and stigma free space to seek HIV prevention, testing and treatment services.



World Vision Zambia staff deliver GIK pharmaceuticals to Mwandansengo Rural Health Post in Luampa District

Our Achievements



Malnourished children rehabilitated in PD Hearth



6. Comprehensive Sexuality Education (CSE): This model addresses key sexual and reproductive health (SRH) issues that affect young people. The World Vision Zambia Global Fund project reached 24,374 adolescents with HIV testing and results. World Vision has delivered CSE sessions to 13,271 individuals through support from 317 principals, 952 teachers and 330 CSE facilitators who were trained in the CSE approach. The sessions have contributed to an increase in knowledge in CSE, Sexual and Reproductive Health and Rights (SRHR) and GBV subsequently empowering children and youth to make informed decisions. Trained chiefs and village headmen continue supporting the action with community mobilization for SASA! dialogues, Young Men as Equal Partners (YMEP), out of school CSE sessions and other community-based awareness raising activities.

Through Gifts in Kind, World Vision Zambia acquires and distributes drugs and supplies. Between 2017-2019, 4.5 million Vitamin A capsules and 13.4 million Malbendazole deworming tablets were distributed during Child Health Weeks to meet the Government gap in 2012. In the past, we have received and distributed 37,125 malaria rapid diagnostic test kits; 8,055 first line malaria treatment regimens for children and youth; tablets for intermittent presumptive treatment for 22,175 pregnant women; and over 300,000 Insecticide Treated Nets in six districts - Kafue, Chilanga, Chongwe, Rufunsa, Kalulushi and Lufwanyama.



Funding Management and portfolio

PROJECT	BUDGET/PARTNERS	DURATION	DESCRIPTION
MALARIA-FREE ZAMBIA	US\$ 6 million Rotary, Bill and Melinda Gates Foundation	2021 - 2024	Train and equip 2,500 community health workers for the national health system to diagnosis and treat malaria for more than 1.3 million people.
ELO	US\$ 4 million World Vision	2016-2020	Improve the health status of 19,663 pregnant and lactating women, 18,069 newborns and 42,229 children under 5. Trained 268 Health Workers and 5,801 community-based volunteers as SMAGs
SUN 2	US\$ 2.2 million UNICEF	2021 - 2023	Reach 46,415 children under the age of 2; 31,272 pregnant women; 46,415 lactating women and 27,814 adolescent girls (15- 19 yrs) with nutrition sensitive activities to help reduce stunting by 25%.
STOP GBVSS	US\$ 16.2 million USAID/PEPFAR, UKAID/DFID	2012 - 2018	70,000 GBV survivors. Provide quality services for GBV survivors. Medical care, counselling and testing for HIV.
EMERGENCY RELIEF PROGRAMME	US\$ 1.9 million UNICEF/WV Taiwan	2020-2021	3,131 severe acute malnourished and 18,842 moderate acute malnourished children < 5 provided with nutrition support.
STEPS OVC	US\$ 98 million USAID	2010 - 2016	410,379 orphans, 179,414 adults and children living with HIV. Strengthen capacity of Zambian communities to provide HIV prevention, care, and support services.
RAGWA NUT	€11 million European Union	2016 - 2019	452,094 men, women and children. Contribute to the reduction of maternal and child under five nutrition. Focuses on WASH, health, nutrition, food security and economic development.
SUN	\$900,000 UKAID/DFID	2014 - 2016	7,334 pregnant and lactating mothers, 9,394 children under the age of two. Increased access to quality nutrition, maternal, and child health services. Promoted the adoption of positive nutrition practices.
RAPIDS	\$171,347,527 USAID/PEPFAR	2004 - 2009	819,574 people reached through prevention interventions. Benefiting directly 349, 590 orphans and vulnerable children , 150,000 people living with HIV and AIDS and 17,520 youth.

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