

IMPACT

REPORT



Stories & Statistics from the CARE Learning Tour to Zambia, February 17-23, 2018

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OVERVIEW

In February, a bipartisan and bicameral delegation of Congressional staffers, technical experts and the media traveled with CARE to see how U.S. investments and partnerships in Zambia are saving lives and improving maternal and child health outcomes for families and communities. While Zambia has experienced years of unprecedented economic growth and recently reached lower-middle income status, the country failed to meet the 2015 Millennium Development Goal (MDG) for maternal health. Maternal mortality rates in Zambia remain incredibly high. Additionally, 4 in every 5 children are too short for their age, a symptom of chronic malnutrition and poor dietary diversity. Although Zambia has made significant strides in combating HIV/AIDS, the prevalence rate of HIV has remained around 12.4 percent and there is still tremendous need for additional outreach to vulnerable populations, especially young women and adolescents. On this trip, the delegation explored the three common delays that often contribute to maternal and child mortality, preventable birth complications and poor health, namely: (1) deciding to seek appropriate medical care; (2) reaching an appropriate health facility and (3) receiving adequate, comprehensive care when a facility is finally reached.



→ DAY 1

Why Zambia? Setting the Scene

The Learning Tour began in Lusaka, Zambia's capital city, with an introductory briefing on the state of health and gender in Zambia. The group was briefed by representatives from CARE Zambia, Catholic Relief Services and UNFPA about the history and impact of U.S. investments, such as the U.S. President's Emergency Plan for AIDS Relief (PEPFAR). They also heard about the progress being made through U.S. foreign assistance, implemented in collaboration with the Zambian government and local partners to respond to the urgent health needs of mothers, children and families and build a safer, more prosperous world for us all.

→ DAY 2

Understanding the First Delay in Deciding to Seek Care

The delegation began their second day in-country with a discussion featuring representatives from USAID and the U.S. Centers for Disease Control (CDC) in Zambia. The delegates learned about how the U.S.' leadership and investments around maternal and child health and prevention of HIV/AIDS in Zambia has resulted in healthier and more economically empowered families and communities.

This discussion was further contextualized as they had their first look at programming on the ground. The delegation traveled an hour outside of Lusaka to a city called Chongwe to examine how community-based outreach programs are helping to provide critical and timely health information. The group also learned how this intervention is helping to generate and increase demand for health services among expectant mothers and at-risk youth, tackling that first delay in deciding to seek care. See below for more information on the programs visited on this day, the impact of these interventions and stories from program participants who have benefited from this assistance:

Rural Health Clinic and Safe Motherhood Action Groups (SMAGs) Home Visits

LOCATION: Chongwe, Zambia

BACKGROUND: The Government of Zambia, with technical assistance from World Vision, is working to improve maternal and neonatal outcomes through Safe Motherhood Action Groups (SMAGs). SMAGs are community-based volunteer groups that aim to reduce critical delays in decision-making at the household level about seeking lifesaving maternal care at health facilities. SMAG members meet patients in their homes to deliver essential information on safe motherhood to both men and women; encourage pregnant women to go for antenatal care, delivery and postnatal care in a health facility; identify maternal and newborn complications during pregnancy, delivery and the postnatal period; offer first aid care and HIV screening and refer cases with maternal and newborn problems for management at health facilities.

IMPACT: The program aims to establish and train SMAGs in 17 districts, covering 139 health facilities throughout Zambia's Southern province.

DONOR: Government of Zambia, World Vision

IMPLEMENTING PARTNER: Government of Zambia, World Vision

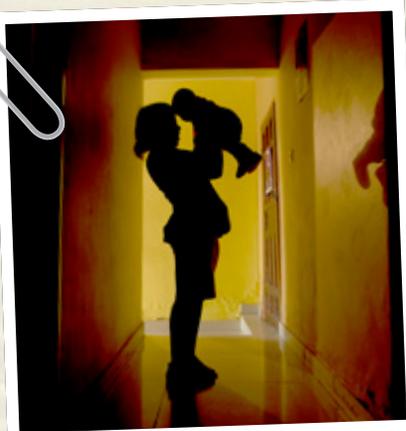
A Story from the field

Hope and her husband David have a three-year-old daughter and are expecting their second child. Hope is eight months pregnant and has been seeing a volunteer from a Safe Motherhood Action Group (SMAG) throughout her entire second pregnancy. The SMAG helps monitor Hope's pregnancy, provide growth monitoring to her young daughter, promote good hygiene and provides community distribution of family planning for women and families who wish to safely time and space their pregnancies. Before the SMAG

program, Hope was not aware of the danger signs to look out for in her first pregnancy; fortunately she did not experience any birth complications like other women in the community who delivered pre-term or suffered other preventable birth complications. With help from the SMAG program during her current pregnancy, Hope is much better informed and prepared to deliver and care for her child.



A Story from the field



Alice* is a nineteen-year-old participant of an urban DREAMS center in Lusaka. She first visited the clinic to obtain a routine health screening and HIV testing during the first trimester of her pregnancy. When she tested positive for HIV, Alice became very depressed by the news and resisted treatment. A few weeks later, Alice returned to the DREAMS center with a friend and was convinced to get on antiretroviral

(ARV) treatment. Alice further received counseling on how to stay healthy and keep her viral loads low during her pregnancy and after giving birth. Alice was paired with a mentor who spoke with her on the importance of prevention of mother-to-child transmission of HIV and what steps she could take during her pregnancy to ensure her child did not contract the virus. After giving birth, Alice consented to having her daughter tested for HIV – the baby's test was nonreactive and she is currently a healthy and happy five-month-old. Alice has been telling her friends and peers to come in and learn about the services the DREAMS center provides and has so managed to convince a friend in a similar situation to obtain the same services.

*Alice's real name was changed for confidentiality purposes.

Kalingalinga DREAMS Center

LOCATION: Lusaka, Zambia

BACKGROUND: The \$385 million global DREAMS partnership delivers a core package of evidence-informed approaches that go beyond the health sector by addressing the structural drivers that directly or indirectly increase girls' HIV risk, such as gender inequality, lack of education, poverty and sexual violence. A collaboration between PEPFAR, the Bill & Melinda Gates Foundation, Girl Effect, Johnson & Johnson, Gilead Sciences and ViiV Healthcare, DREAMS is being implemented in Zambia by various partners through linkages for HIV testing and counseling, VMMC (voluntary medical male circumcision), antiretroviral therapy and adherence support.

IMPACT: Since 2015, the program has reached nearly 82,000 adolescent girls through the creation of centers that provide safe spaces for girls and young women to access health information and services. This program has also helped to test nearly 20,000 adolescent girls and youth for HIV. In Zambia, there are currently 21 DREAMS centers providing daily services to clients. These DREAMS centres have helped train nearly 500 mentors (female volunteers aged 20-35 years) to lead the 13-week safe space curriculum tailored to the needs of adolescent girls vulnerable to contracting HIV. In addition, the DREAMS initiative has provided 4,491 scholarships to adolescent girls and youth to attend school and engaged 35,605 parents and caregivers.

DONORS: USAID, PEPFAR

IMPLEMENTING PARTNERS: Pact Zambia

The group closed the day with an evening reception, hosted by Daniel L. Foote, the new U.S. Ambassador to Zambia. At the event, the delegation heard from local NGO representatives, private sector partners and representatives from the U.S. Mission on the current health and development challenges in Zambia and how the U.S. government, in partnership with the Zambian government and other key stakeholders, are working to improve maternal and child health outcomes and women's empowerment in the country.

→ DAY 3

Addressing the Second Delay by Improving Accessibility of Health Services

The delegation met with the Zambian minister of health Chitalu Chilufya who provided an overview of the government's health priorities and the importance of their close working relationship with the U.S. Mission in pursuing these priorities. Next, the group traveled to Livingstone, a city located in Zambia's southern province, to see how CARE and other partners are working to reduce the barriers many women and families face in accessing health services, such as high transportation costs and a lack of integrated services. Here are some of the program highlights from the day:

One-Stop Gender-Based Violence Center

LOCATION: Livingstone, Zambia

BACKGROUND: Almost half of all women in Zambia have experienced some form of physical violence. The USAID Gender-based Violence Survivor Support project increases the availability of and access to essential services for survivors of abuse. This includes working with various government and civil society organizations to staff One-Stop Centers. In these One-Stop Centers, survivors can access medical help (collecting criminal evidence and receiving medical assistance), legal support (reporting a crime to police and obtaining legal advice) and psychosocial support (counseling and survivor support groups) all in one location.

IMPACT: This program operates in 24 districts in eight of Zambia's 10 provinces and aims to reach more than 575,000 community members through community dialogues and conversations, train nearly 300 community volunteers and 120 traditional leaders and provide counseling and support services to nearly 54,000 individuals via the Lifeline or Helpline.

DONORS: Government of Zambia, USAID, PEPFAR

IMPLEMENTING PARTNER: Government of Zambia, World Vision

Village Savings and Loan Association (VSLA) Group

LOCATION: Livingstone, Zambia

BACKGROUND: CARE's Village Savings and Loan Association (VSLA) model seeks to reduce poverty by empowering vulnerable communities to be financially self-sufficient through savings-led approaches. A key aspect of the VSLA program is its focus on creating economic self-reliance and empowering and enabling women to become more involved in the decision-making processes at all levels. The program strives to increase the community's capacity in business skills and productivity. This is achieved by supporting different village savings and loan associations (VSLAs) with knowledge, materials and skills that will ensure increased engagement in viable economic activities. In the savings groups, participants also contribute to a social fund, which provides funds to community members who need to access medical services or transportation.

IMPACT: While CARE phased out its direct support to the VSLA groups in Zambia's southern provinces in 2017, many of these groups have continued savings activities and have grown in size, demonstrating the impact and sustainability of the model in rural Zambia.

PREVIOUS DONOR: Mastercard

PREVIOUS IMPLEMENTING PARTNER: CARE

A Story from the Field

Chuma has been a member of the VSLA since 2013. When she was six months pregnant, Chuma was rushed to a nearby health post after realizing she was experiencing birth complications and potentially early labor. She was referred directly to the district hospital to receive emergency obstetric care. Once she arrived at the hospital, the doctor advised she stay at the hospital to be monitored in the last trimester of her pregnancy. A month into her hospital stay, she also underwent a C-section to deliver her daughter. Chuma used funds from her VSLA group's social savings for transportation to the district hospital, located more than 15 kilometers from her home, in order to seek more comprehensive medical care and to cover the cost of food and medication during her extended hospital stay. Now that she has safely delivered her baby, Chuma continues to work with the VSLA group to save money and contribute to her group's social fund. She uses the profits from the savings group to support her small handicrafts business, which helps generate additional income for her to support her family.



→ DAY 4

Tackling the Third Delay through Improved Quality of Health Services

On the fourth day of the trip, the delegation observed the impact of programs that improve the quality of health care once women and families reach health facilities. The group saw how organizations like CARE and Jhpiego are working to equip health workers through mentorship programs, health drills and education to prevent childhood stunting and malnutrition and prevent birth complications, such as pre-eclampsia, post-partum hemorrhaging and birth asphyxia.

Scaling Up Nutrition Intervention Program

LOCATION: Kalomo, Zambia

BACKGROUND: CARE works to respond to the high malnutrition prevalence rates in Zambia through the Scaling Up Nutrition Intervention (SUNI) program. The goals of the program include: increasing access to affordable nutritious food, clean water, sanitation, healthcare and social protection; promoting optimal growth of children, demonstrated as reduced levels of stunting (low height for age) and wasting (low weight for height); improving micro-nutrient status, especially in women and children, demonstrated as reduced levels of micro-nutrient deficiency; and increasing adoption of practices that contribute to good nutrition (such as exclusive breastfeeding in the first six months of life).

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► **IMPACT:** This program aims to target 7,000 children and infants under two years of age, 4,000 pregnant and lactating mothers and 400 community volunteers to reduce child malnutrition and stunting in the Kalomo and Choma districts of Zambia's southern province. The project has helped to introduce new sources of protein to diversify diets for pregnant women and children, promote improved growth monitoring and consumption of more micronutrient-rich foods and produce and has increased community and household awareness on some of the common drivers of chronic malnutrition.

DONOR: European Union

IMPLEMENTING PARTNER: CARE



A Story from the Field

Peter Mudenda is a four-year-old living in Siachitema Village in Zambia's southern province. Since he was a toddler, Peter has suffered from chronic malnutrition and has been affected by stunting, which is characterized by his height and weight being too low for his age. Through the monthly growth monitoring supported by CARE's Scaling Up Nutrition Intervention implemented through local health clinics, health workers have been closely tracking Peter's growth and weight patterns and have been working with his mother, Doreen Moonga, to improve Peter and his sibling's

dietary diversity, improve household food preparation and ensure proper sanitation and hygiene in order to help Peter get the nutrients necessary to continue to grow and lead healthy life. After just one year with the program, Peter's mid-upper arm circumference – which is used to identify malnutrition and monitor the nutritional status of infants and children through age five – has improved from being in the severe acute malnutrition range to today being well on his way to reaching a nearly well-nourished status for his height and age.

Saving Mothers, Giving Life (Safe Motherhood 360+) Training and Capacity-Building Program

LOCATION: Choma, Zambia

BACKGROUND: The Safe Motherhood 360+ program implemented by Jphiego in partnership with the Churches Health Association of Zambia (CHAZ) focuses on delivering high-impact programs around the 48-hour period of labor and delivery that address the three delays. The training and capacity building aspect of Safe Motherhood 360+ specifically tackles the third delay, ensuring that clinics and service providers are equipped to deliver comprehensive, quality health services.

IMPACT: The goal of USAID's Safe Motherhood 360+ program is to contribute to the reduction of maternal and newborn deaths by 35 percent in the 16 targeted Saving Mothers, Giving Life districts. The program aims to reach approximately 140,000 pregnant women in 400 facilities across 16 districts in Zambia. To date, the program has seen a 38 percent increase in women giving birth in health facilities and a 44 percent decrease in stillbirths and newborn deaths at facilities and in target districts where the training was implemented.

DONOR: Government of Zambia, USAID, PEPFAR

IMPLEMENTING PARTNER: Jphiego, Churches Health Association of Zambia (CHAZ)

→ DAY 5

Taking Action Back Home

Before returning home, the group visited an urban youth safe-space center where they learned, about interventions that focus on empowering adolescents, changing community norms and expectations for girls and building self-esteem and leadership skills among the youth. See below for additional details on this program:

Youth Safe-Space Center

LOCATION: Lusaka, Zambia

BACKGROUND: Through the safe spaces model, the Young Women's Christian Association of Zambia (YWCA), with technical and financial support from the United Nations Population Fund (UNFPA), is creating a safe space for young women and girls to discuss taboo subjects without fear or judgment. These spaces are also designed to close the gap between policies and commitments at national, regional and international level and realities facing young women in accessing services and making personal decisions. Within these safe spaces, young women serve as peer educators and mentors for other young women and girls providing positive role models and examples of young female leadership, alongside mentors of other ages.

IMPACT: Implemented as part of the UNFPA-UNICEF Global Program to End Child Marriage supported by UK Aid, EU, Canada, and Netherlands, the safe spaces have reached more than 15,000 adolescent girls since 2015 through 557 safe spaces in Zambia's Lusaka, Eastern, Luapula, Western and Northwestern Provinces.

DONOR: UNFPA

IMPLEMENTING PARTNER: Young Women Christian Association Council of Zambia (YWCA)



On this five-day trip, the delegation saw firsthand the role that U.S. investments and partnerships play in empowering women and girls to lift themselves out of poverty and be catalysts for change in their families and communities. The highlight of the trip included field visits to programs in Lusaka and throughout the southern province. The delegation sat down with women and girls in their communities to see how U.S. investments are transforming their lives and promoting improved health, better access to nutritious food and expanded economic opportunities. Through these program visits and visits to communities, meetings with change-makers, representatives from non-government organizations (NGOs), technical experts and the U.S. mission, the delegation learned about the positive reach and scope of U.S. foreign assistance in health and development in Zambia.

→ POLICY RECOMMENDATIONS

CARE advocates for increased **investments in women and girls** and for the U.S. government to integrate gender equality and women's and girls' empowerment throughout its foreign assistance programs. By placing an emphasis on empowering women and girls to exercise agency and influence through educational tools and economic opportunity, we can provide communities with the tools needed to sustainably lift themselves out of poverty. This, in turn, creates more stability and self-sufficiency at a national level and can help promote America's prosperity and security around the world. This can be done by creating strong policies and robust resources to promote women and girls' education and leadership, prevent child marriage, combat gender-based violence, access voluntary family planning services and foster food and nutrition security.

CARE also strongly urges Congress and the Administration to **reconsider the misguided decision to halt funds to the United Nations Population Fund (UNFPA)**. In 2016, UNFPA received over \$69 million in funding from the U.S. Government; this funding supported a wide variety of programming from providing safe delivery services and family planning counseling to new mothers, to combatting child marriage and gender-based violence. Cutting off funding to UNFPA represents a major setback in efforts to

ensure the United States meets the needs of the world's most vulnerable populations.

In addition, **CARE supports the bipartisan International Violence Against Women Act (IVAWA)**, which makes ending violence against women and girls a top diplomatic, development and foreign assistance priority. IVAWA focuses on preventing violence by transforming social norms; promoting political, legal and institutional reforms that recognize such violence as a crime; and training police and the judiciary to respond and hold violators accountable. Such reforms also include responding to the needs of survivors and reducing women and girls' vulnerability to violence by improving their economic status and educational opportunities.

The International Affairs budget is the U.S. government's primary funding source for international programs for emergency response and long-term development. Although the international affairs budget remains roughly 1 percent of the overall U.S. budget, it is routinely targeted in budget cuts. Proposed cuts to the FY18 international affairs budget raise serious concerns about the future of American leadership and how we will achieve the benefits of addressing poverty. The FY18 deal appears to substantially cut the Overseas Contingency



Operations account for foreign assistance, resulting in an \$8.8 billion reduction in foreign assistance funding. The Trump Administration has signaled that they will seek further reductions in these accounts in FY19 as well. Any cuts to foreign assistance weaken U.S. engagement and political influence abroad and could place lives at risk.



As seen on this trip, **U.S. funding for international family planning and reproductive health services plays an indispensable role in reducing maternal and child deaths**. These accounts are critical to our global efforts to reduce maternal and child mortality. CARE believes that there should be no cuts to the International Affairs budget. U.S. foreign assistance programs save millions of lives every year, address the root causes of poverty, decrease dependency and build stronger, more resilient societies. CARE also advocates for greater accountability and transparency of these funds. Reducing funding for foreign assistance is against our national interest for a peaceful and more prosperous world.

Photos: All Images: Sarah Grile/CARE

We are deeply grateful to the many people who generously gave of their time to make this visit to Zambia a success. CARE specifically thanks the Bill and Melinda Gates Foundation for its generous financial support of the Learning Tours.



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