For the past 38 years, UNFPA in Zambia has proudly championed the health and development of women and young people across Zambia. During this time, we have not only expanded our strategic partners and resources, but also advanced the International Conference on Population and Development (ICPD) Agenda in Zambia.

The year 2016 was particularly exciting for UNFPA in Zambia. Following the adoption of the Global Sustainable Development Goals, UNFPA signed its 8th Country Programme of Cooperation with the Government of the Republic of Zambia.


In line with UNFPA’s Global Strategic Plan, UNFPA’s support towards the health and development of women and young people in 2016 was centered on:

- Prioritization of integrated sexual reproductive health, to improve linkages between sexual reproductive health, HIV and gender based violence interventions;
- Increased focus on adolescents and young people’s health and development needs;
- Repositioning of family planning as a key pillar for improved maternal health outcomes;
- Levering human rights and gender dimensions; as well as population dynamics for integrated sexual reproductive health as identified in the country context.

Our vision is that every woman of reproductive age, regardless of class, education, or geographic location is able to plan the number and spacing of her pregnancies as well as give birth without the fear of losing her life or that of her baby. Where there is a facility, we want to see that there will be a skilled health service provider present, with the requisite equipment and expertise to handle any complication. We envision a society where every young person will not only be able to dream, but also become whatever she or he wants.

At UNFPA in Zambia, we are proud of the results that we have recorded in the past year, even as we acknowledge just how much more work needs to be done, particularly in maternal health and adolescent girls’ health and development.

This report documents our rights-based results in 2016, a period that covers both the tail-end achievements of the 7th Country Programme and initial stages of the 8th Country Programme.

In 2017, we look forward to sustaining our collaboration with the Government and people of the Republic of Zambia, as well as cooperating partners, towards the achievement of the Sustainable Development Goals as well as Zambia’s Vision 2030.

Dr Mary Otieno
UNFPA Representative
# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Page</th>
<th>Section</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>From the Representative</td>
</tr>
<tr>
<td>4</td>
<td>Sexual Reproductive Health in Zambia: Snapshot from a Human Rights Lens</td>
</tr>
<tr>
<td>5</td>
<td>Pregnancy by Choice, Not by Chance</td>
</tr>
<tr>
<td>7</td>
<td>Saving Mothers’ Lives</td>
</tr>
<tr>
<td>9</td>
<td>Empowering the Next Generation</td>
</tr>
<tr>
<td>11</td>
<td>Data for Development</td>
</tr>
<tr>
<td>14</td>
<td>Advocacy and Strategic Partnerships</td>
</tr>
</tbody>
</table>
SEXUAL REPRODUCTIVE HEALTH IN ZAMBIA
Snapshot from a Human Rights Lens

The overarching need to protect the human rights of women and young people guides UNFPA’s work in Zambia – to ensure “every pregnancy is wanted, every child-birth is safe, and every young person’s potential is fulfilled” as well as to ensure Zambia “leaves no one behind” in the implementation of the Sustainable Development Goals.

1 in every 5 sexually active women (21%) would like to use contraceptives but their needs are not met

398 women per 100,000 live births still die from preventable pregnancy and child birth related causes

Almost 1 in every 2 women (43%) have experienced physical violence, while about 1 in every 6 (17%) have experienced sexual violence

There are 60,000 new HIV infections per year; and 21,000 new HIV infections among young people aged 15-24

1 in every 3 girls (31%) becomes a bride by age 18; and similarly 1 in every 3 girls (29%) becomes pregnant by age 18

1 in every 2 young people (66%) drop out of school by 12th grade
PREGNANCY BY CHOICE, NOT BY CHANCE

31%  
Increase in number of additional users of modern methods of contraception

352,000  
Unintended pregnancies averted

105,000  
Unsafe abortions averted

1,117,341  
Couple-years of protection (CYP)
Over the past 15 years, Zambia has recorded positive strides towards increasing the number of women who are able to decide if, when and how often to have children. Between 2001/2002 and 2013/2014, contraceptive prevalence rate increased by a remarkable 98%; from 23% to 45%. For UNFPA in Zambia, this progress is significant for the unfinished business of the Millennium Development Goals (MDGs), the International Conference on Population and Development (ICPD) beyond 2014 Programme of Action, as well as the Sustainable Development Goals.

Results at a Glance

As one of the 46 countries supported by the global “UNFPA Supplies”, UNFPA in Zambia continued to support strategic approaches to ensure that all individuals access and use quality reproductive health commodities and medicines of their choice whenever they need them.

In 2016, UNFPA provided 45.5% of the national family planning commodity needs for the public sector, which facilitated the following results recorded in Zambia:

- Between 2015 and 2016, there was a **31% increase** in the number of additional users of modern methods of contraception - from 228,000 in 2015 to 300,000 in 2016.
- 19,000 additional unintended pregnancies were averted due to use of modern methods of contraception, from 333,000 in 2015 to **352,000 in 2016**.
- 6,000 additional unsafe abortions were averted due to use of modern methods of contraception, from 99,000 in 2015 to **105,000 in 2016**.
- Zambia achieved **1,117,341 couple-years of protection (CYP)** due to availability of modern methods of contraception.
- **245 health care providers** and managers acquired technical skills and capacities in supply chain management and Long Acting Reversible Contraception to improve method mix in the country. An additional 80 community volunteers also acquired skills in the provision of injectable contraceptives.
- **32,061,600** male and female condoms were procured and distributed – thus improving availability of condoms for the triple protection against HIV, STIs and unintended pregnancies.

Meet 40 year old Judith from Ilenga village in the far north of Zambia. During her first pregnancy, Judith was bitten by a snake, and by the time she got to the hospital, infection had set in and her leg had to be amputated.

With no access to contraception, Judith was unable to plan the number and spacing of subsequent pregnancies, which was a struggle in her physically challenged state. After hearing that Marie Stopes Zambia (MSZ) was going to visit her village to run a family planning clinic, Judith decided she’d like to hear more about how she could plan the number and spacing of her children.

Together with her husband, Judith met the MSZ outreach team to find out more about the different methods of family planning, including short term methods like pills and injectables, long term reversible methods like implants and intra-uterine devices (IUDs), and permanent methods such as tubal ligations (female) and vasectomy (males).

After settling for a family planning method that best suited her needs, Judith says: "since I started using family planning, my sex life has improved. I don’t worry about getting pregnant when I am not ready. Access to family planning has given me and my husband a chance to take care of our children, to give them the better life we never had'.

Judith is one of the 26,000 women in Muchinga Province, who by 2016, were using a modern contraceptive method as part of Zambia’s FP2020 initiatives by stakeholders such as MSZ, including UNFPA’s procurement of an estimated 50% of the national family planning commodity needs.
SAVING MOTHERS’ LIVES

1,000
Maternal deaths were averted

208
Women with Obstetric Fistula were repaired, thus restoring their dignity.

39
Health facilities with improved capacities to provide emergency health services to mothers and their new-borns.
In spite of significant positive advances in the status of women and girls’ health, maternal health indicators in Zambia still lag behind. Maternal mortality and morbidity rates remain high: access to Emergency Obstetric and Neonatal Care (EmONC) is still limited especially in remote rural areas; and obstetric fistula among women persists. UNFPA in Zambia continues to support sub-national level programmes aimed at improving emergency obstetric and neonatal care, midwifery services, as well as prevention and repair of fistula, among other crucial needs to ensure “no woman dies giving life”.

Results at a Glance

- As a result of improved enabling environment through the development and launch of the integrated sexual reproductive health, HIV and gender-based-violence (SRH/HIV/GBV) guidelines; as well as the Maternal Death Surveillance and Response (MDSR) guidelines:
  - 519 medical officers, nurses and midwives acquired improved technical capacities to deliver quality, gender sensitive and integrated sexual reproductive health services in 6 supported Provinces.
  - 70,885 women and girls accessed routine screening, counseling and integrated SRH/HIV/GBV services in supported outreach and static sites.
  - All districts are now providing weekly reports on occurrences of maternal deaths directly to the Ministry of Health.
- 39 health facilities recorded improved capacities to provide emergency health services to mothers and their new-born’s i.e. Emergency Obstetric and Neonatal Care (EmONC) through infrastructure improvement and provision of medical equipment. In addition, 5 maternity waiting homes were constructed, thus improving women’s access to quality maternal health services in underserved areas.
- 208 women with obstetric fistula were repaired through static and outreach sites, thus restoring their dignity; while fistula tracking was undertaken at sub-national levels to ascertain post-operative outcomes.
- 1,000 maternal deaths were averted due to use of modern methods of contraception.

Improving Reproductive, Maternal, Neonatal and Child Health (RMNCH) in Rural Central Province

In 2016, UNFPA Zambia was pleased to facilitate a high level field visit to the Reproductive, Maternal, Neonatal and Child Health (RMNCH) Project in Central Province by the UNFPA Regional Director for East and Southern Africa (ESAR) Dr. Julitta Onabanjo; UN Zambia Resident Coordinator Ms. Janet Rogan; FAO Regional Representative for Africa Mr. Bukar Tijani; FAO Senior Economist Mr. Suffyan Koroma; UNFPA Zambia Representative Dr. Mary Otieno and FAO Zambia Representative Mr. George Okech.

The visit showcased key improvements in provision of quality and timely RMNCH services to rural and underserved populations, with support from the United Nations in Zambia.

A visit to Lukomba health center, a rural facility located 30 Km from the nearest town, confirmed this progress. “With the extensive integrated support through the RMNCH project, the facility is eager to record reduction in preventable maternal, neonatal and child deaths; as well as scale up similar interventions in the district” said the health facility staff in-charge.

By the end of 2016, the project had facilitated the rehabilitation and construction of 13 health facilities; procurement of essential maternal health commodities and supplies for 39 facilities; as well as training of 63 health care providers in forecasting and quantification, among others.

Speaking to community volunteers linked to the facility, UNFPA Regional Director for East and Southern Africa Dr. Julitta Onabanjo commended the group for their commitment towards ensuring women in remote and underserved areas have access to information and services. “You are our heroes on the ground in our collective efforts to reduce preventable maternal deaths,” Dr. Onabanjo said.
EMPOWERING THE NEXT GENERATION

12,800
Teachers, peer educators, health workers and civil society representatives acquired skills to effectively deliver in and out of school Comprehensive Sexuality Education

7,298
Girls and boys acquired health, social and economic knowledge and skills to reduce vulnerability to child marriage, adolescent pregnancy, HIV transmission and school drop-out

171,020
Young people accessed integrated youth friendly health services
With 82% of its population aged below 35 years, Zambia’s youthful population presents an opportunity to transform Zambia into a prosperous middle income country, if simultaneous and long term investments are made in family planning, health, education, economic reforms and governance. This will empower young people to be the driving force for accelerating social and economic development.

Results at a Glance

- As a result of improved enabaling environment through the launch of the National Strategy to End Child Marriage and the Comprehensive Sexuality Education Curriculum for in and out of school youth:
  - 7,298 adolescents (6,555 girls and 743 boys) were enrolled into safe spaces, which improved health, social and economic assets to reduce vulnerabilities to child marriage, adolescent pregnancy, HIV transmission and school drop-out.
  - 12,800 teachers, peer educators, health workers and civil society representatives acquired skills to effectively deliver Comprehensive Sexuality Education to in and out of school youth.

- 171,024 young people accessed integrated youth friendly health services.

- 132,839 young people accessed key health and development messages through social media platforms including TuneME mobisite.

How Comprehensive Sexuality Education (CSE) is Changing Young Peoples’ Lives in Zambia

“For a long time, learners have been hungry for information that is now being delivered through comprehensive sexuality education in school” says Mr. Emade Sakala, head teacher at Kabulonga Basic School in Lusaka, Zambia’s capital.

One of his students, Lydia, aged 13, couldn’t agree more.

“I have seen girls become pregnant, become victims of violence and become HIV-positive… and I don’t want to become one of those girls,” says Lydia. “I’m happy they have taught us in school how we girls can protect ourselves.”

Zambia’s CSE curriculum covers six thematic areas: relationships; values, attitudes and skills; culture, society and human rights; human development; sexual behaviors and sexual reproductive health. Teachers are trained in interactive and participatory methods, thus guiding learners through dialogue, discussion, team work and role plays.

“We have seen a significant shift in gender norms among the students,” says Chipo, a teacher at Twalumba Primary School in Lusaka. “We see improved analytical thinking, confidence, assertiveness, communication, respect for others, and responsible sexual behaviors,” she says.

UNFPA in collaboration with UNESCO continues to strengthen Government capacity to deliver CSE at classroom level through face-to-face and online training of teachers.
Harnessing Zambia’s Demographic Dividend

In pursuit of its Vision 2030 aspirations of becoming a prosperous, middle income country, Zambia has effectively engaged in evidence-based identification and prioritization of key policy actions and investment areas to harness its Demographic Dividend within the country context.
Results at a Glance

UNFPA facilitated improved availability of disaggregated data and diagnostics to policy and practice - including the 7th National Development Plan - resulting from 8 studies, assessments and analysis conducted in 2016.

These included, among others, the Presidential launch of the Demographic Dividend Study Report by H.E. President Edgar Lungu in December 2016; as well as support towards the in-depth analysis of the Zambia Demographic and Health Survey (DHS) and Census data to guide national and sub-national investments in women and young peoples’ health and development.

The Government of the Republic of Zambia, in pursuit of its Vision 2030 aspirations of becoming a prosperous, middle income country, has effectively engaged in evidence-based identification and prioritization of key policy actions and investment areas within the country context.

To share Zambia’s trajectory within the context of the Sustainable Development Goals (SDGs) and Africa Agenda 2063, the Government of Zambia in collaboration with UNFPA hosted a Demographic Dividend Investment Consultation from 14-15 December 2016, with over 150 delegates from Zambia and various countries across the African continent, including 3 UNFPA regional offices and headquarters.

Building on previous high level Demographic Dividend events, the two-day discourse put the spotlight on the consensus secured among African leaders on the need to make simultaneous and prioritized investments that leverage the potential of the continent’s biggest asset – its young people.

During the opening of the consultation, key note addresses by the Zambian Minister of National Development Planning, Mr. Lucky Mulusa, and UN Zambia Resident Coordinator, Ms. Janet Rogan, underscored that investing in the health and development of young people in Zambia and Africa at large presents an opportunity to accelerate inclusive social and economic development – including ending poverty and vulnerability.

In ending the consultation, UNFPA Zambia Representative Dr. Mary Otieno highlighted the three key areas (the 3 E’s) in which Africa (and Zambia) needs to invest to reap the Demographic Dividend.

“To realize the Demographic Dividend, African countries, including Zambia, must invest in the Empowerment, Education and Employment of their young people. Africa currently has the largest number of young people in its history – the next chapter for Africa depends on them. The more young people are given opportunities to grow into well-educated adults with fewer dependents and new opportunities to acquire wealth, savings and purchasing power, the more they will be able to accelerate economic growth and development,” Dr. Otieno said.

She also underscored the critical need to (1) strengthen private-public partnerships; (2) use available data (including sub-analysis of census and DHS) to identify and support populations most in need - especially adolescents; (3) ensure that District plans address issues to accelerating the Demographic Dividend within the context of National Development Plans and SDGs; and (3) encourage young people to be innovative and proactive in identifying solutions to challenges they are confronted with.
I wish to reaffirm the Zambian Government’s commitment to the 2030 Agenda for Sustainable Development, including through the signing of Zambia’s Demographic Dividend Study Report by His Excellency, President Edgar Lungu.

Hon. Lucky Mulusa, MP, Minister of National Development Planning

Zambia’s youthful population presents an opportunity to accelerate inclusive socio-economic development if simultaneous and long term investments are made now.

Dr Auxilia Ponga
Permanent Secretary – Monitoring and Evaluation, Ministry of National Development Planning

We must move from policy to targeted investments; and facilitate monitoring of commitments by public and private sector entities and development partners.

Dr Simon Miti, Permanent Secretary – Development Planning and Administration, Ministry of National Development Planning

Africa currently has the largest number of young people in its history. The next chapter for Africa depends on them.

Ms. Kula Fofana
Liberian Deputy Minister of Youth and Development

We will not reduce poverty and realize the inclusive economic and social development we strive for in Africa, unless and until we make the right investments in our youthful population. It is therefore not only a matter of rights and choice but also a matter of ‘SMART’ economics.

Ms. Janet Rogan, Resident Coordinator, UN Zambia

To realize the Demographic Dividend, African member states, including Zambia must invest in the 3 E’s - Empowerment, Education and Employment of young people.

Dr Mary Otieno
Representative, UNFPA Zambia

UNFPA remains committed to advancing the Demographic Dividend! The Demographic Dividend furthers the broad and integrated development approach of the ICPD within the context of the SDGs.

Ms. Rachel Snow, Chief, Population and Development Branch, UNFPA HQ

Generation and use of population data will ensure effective planning and implementation of policy actions to further the Demographic Dividend.

Mr. Richmond Tiemoko
Policy Advisor, UNFPA ESAR
ADVOCACY & STRATEGIC PARTNERSHIPS

10
Donor countries, trust and thematic funds sustained collaboration with UNFPA; while new partnerships with the private sector emerged

140
Print and electronic features with messages on women and young people’s sexual and reproductive health in Zambia’s mainstream media
In 2016, UNFPA used targeted resources to support national and sub-national level interventions aimed at advancing the health and development of women and young people in Zambia, 73% of which stemmed from non-core resources and 27% from core resources. In addition, UNFPA built strong relationships with a wide range of new strategic partners in Zambia. We sincerely thank all donors, trust and thematic funds who contributed to our overall resource envelope (see chart below), which allowed us to advance the agenda of the International Conference on Population and Development (ICPD), Zambia’s Vision 2030, and the Sustainable Development Goals in Zambia.

Results at a Glance

- **10 donor countries, trust and thematic funds** sustained collaboration with UNFPA; while new partnerships with the private sector emerged.
- Acknowledging the pivotal role of media in advocacy and public information dissemination, UNFPA sustained collaborations with national media entities - to fulfill women and young peoples’ right to access sexual reproductive health information and services.

This included increased documentation and dissemination of **140 feature articles and news items** on sexual reproductive health in Zambia’s mainstream media.

**UNFPA Zambia sincerely thanks the donors, trust and thematic funds listed below, who contributed to our overall resource envelope in 2016, estimated at USD 8.7 million**

<table>
<thead>
<tr>
<th>DONOR COUNTRIES</th>
<th>AREA OF COLLABORATION WITH UNFPA</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Canada</td>
<td>Maternal and neonatal health</td>
</tr>
<tr>
<td></td>
<td>Adolescent sexual reproductive health</td>
</tr>
<tr>
<td>2 Sweden</td>
<td>Midwifery</td>
</tr>
<tr>
<td></td>
<td>Gender-based violence</td>
</tr>
<tr>
<td></td>
<td>Sexual reproductive health, HIV and gender-based violence linkages (SRH-HIV-GBV linkages)</td>
</tr>
<tr>
<td></td>
<td>Adolescent sexual reproductive health</td>
</tr>
<tr>
<td>3 European Union</td>
<td>Family planning</td>
</tr>
<tr>
<td></td>
<td>Emergency, obstetric and neonatal care (EmONC)</td>
</tr>
<tr>
<td></td>
<td>Maternal death surveillance and response (MDSR)</td>
</tr>
<tr>
<td></td>
<td>Sexual reproductive health, HIV and gender-based violence linkages (SRH-HIV-GBV linkages)</td>
</tr>
<tr>
<td></td>
<td>Adolescent sexual reproductive health</td>
</tr>
<tr>
<td>4 Switzerland</td>
<td>Adolescent sexual reproductive health</td>
</tr>
<tr>
<td>5 United Kingdom</td>
<td>Child marriage</td>
</tr>
<tr>
<td></td>
<td>Family planning, including reproductive health commodity security (RHCS)</td>
</tr>
<tr>
<td>6 Ireland</td>
<td>Gender-based violence</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>THEMATIC AND TRUST FUNDS</th>
<th>AREA OF COLLABORATION WITH UNFPA</th>
</tr>
</thead>
<tbody>
<tr>
<td>7 Reproductive, Maternal, Neonatal and Child Health Trust Fund</td>
<td>Reproductive, Maternal, Neonatal and Child Health</td>
</tr>
<tr>
<td>8 Maternal Health Thematic Fund</td>
<td>Emergency, obstetric and neonatal care (EmONC)</td>
</tr>
<tr>
<td>9 UNFPA Supplies</td>
<td>Maternal death surveillance and response (MDSR)</td>
</tr>
<tr>
<td></td>
<td>Obstetric fistula</td>
</tr>
<tr>
<td></td>
<td>Midwifery</td>
</tr>
<tr>
<td>10 Unified Budget, Results &amp; Accountability Framework (UBRAF)</td>
<td>Family planning, including reproductive health commodity security (RHCS)</td>
</tr>
<tr>
<td></td>
<td>HIV prevention</td>
</tr>
</tbody>
</table>

**TOTAL 2016 CONTRIBUTION**

**USD 8.7 MILLION**