A world – and a Zambia – in which every pregnancy is wanted, every child-birth is safe, and every young person’s potential is fulfilled.

This is the world we envision for women and young people – every year. And in 2015, UNFPA in Zambia continued to work with Government at all levels and partners towards progressively closing the gap between the targeted development results for women and young people and what we are able to achieve together.

The year 2015 saw the historical launch of the Sustainable Development Goals – focused on leaving no one behind – as well as the celebration of the 70th anniversary of the United Nations at global level. Zambia was a part of these historic moments.

However, the same year recorded continued health and development challenges faced by the largest group of people in Zambia – the women and youth. Thousands of women and girls continued to face legal and policy barriers in access to information, services and opportunities they need to develop to their fullest potentials.

The UNFPA Zambia 2015 annual report highlights continued efforts to break the cycle of unfulfilled sexual and reproductive rights for women and young people, thus making a difference in their lives in the course of the year.

It documents advancements in national discourse on inequalities - including a sharpened focus on the most marginalized and vulnerable women and young people including adolescent girls; the poorest households; those living in remote and underserved areas; and those facing one form of discrimination or the other.

It also highlights UNFPA’s work to foster strategic partnerships that leveraged synergies and harnessed innovations to reach increased numbers of women and young people with information and services required to ensure improved health and development outcomes.

Moving forward in 2016 and beyond, the United Nations system in Zambia, UNFPA inclusive, has committed to sustain its collaboration with the Government of the Republic of Zambia under the UN Sustainable Development Partnership Framework (UNSDPF) - to focus on priority investments that will reduce disparities between those with unfulfilled and greatest needs and those whose needs are met, in every community. This is UNFPA Zambia’s commitment for its new 8th Country Programme of Cooperation (2016-2020) with the Government of Zambia.

Dr. Mary Otieno
UNFPA Representative
Delivering a world where every pregnancy is wanted, every childbirth is safe and every young person’s potential is fulfilled.
UNFPA, the United Nations Population Fund, works to deliver a world where every pregnancy is wanted, every childbirth is safe and every young person’s potential is fulfilled.

UNFPA expands the possibilities for women and young people to lead healthy and productive lives.

Our work in Zambia ensures that every pregnancy is wanted by providing information and choice of contraceptives to women and men; that every childbirth is safe through training of midwives, provision of essential medicines and equipment to avert maternal morbidity and deaths; and that every young person’s potential is fulfilled by equipping them with knowledge, skills and values that will enable them to develop a positive view of their sexuality and linking them to services, as well as building their capacity to participate in national development processes.

In December 2015, UNFPA Zambia concluded implementation of its 7th Country Programme of Cooperation with the Government of Zambia (2011 to 2015), which focused on “contributing to poverty eradication by strengthening reproductive health services and enhancing Governments capacity to implement a multi-sectoral population programme”. The 7th Country Programme supported policy and programme interventions at national level as well as in 14 districts across 6 Provinces - including Luapula, North-Western and Western as UNFPA focus Provinces.

From 2016 to 2020, UNFPA will continue its support to the Government of Zambia through its 8th Country Programme, which is focused on inclusive social development and ensuring that “no one is left behind”.

Supported with an estimated $36.8 million, and aligned with Zambia’s revised 6th National Development Plan; Zambia’s Vision 2030; and the United Nations Sustainable Development Partnership Framework (UNSDPF) 2016 – 2021, the 8th Country Programme will be focused on 3 Outcomes:

(a) Sexual and reproductive health
(b) Adolescents and youth
(c) Population dynamics.
Like many young people in developing countries, Zambian young people continue to face challenges that limit their future potentials, including high unemployment rates, poor quality of education and educational opportunities, limited access to sexual and reproductive health services; high HIV, teenage pregnancy and child marriage prevalence rates; limited civic engagement, participation and inclusion opportunities.

**Youth Bulge**: Zambia’s population is predominantly young, with 52.5% of the population aged below 18. [29% aged 15-24 and 16% aged 25-35]. The youth cohort has continued to grow, as Zambia’s fertility rates remain high at 5.3. Evidence-based projections indicate Zambia will have a population of 26 million by 2030. Key drivers of this youth bulge includes high adolescent fertility rates at 141 per 1,000 girls aged 15-19 years; as well as high child marriage prevalence rates where 31.4% of women currently aged 20-24 years and 45% of women aged 25-49 were married by age 18 years – thus making them vulnerable to a lifetime risk of high fertility and high risk of dying from a pregnancy related death. The presence of young mothers are more common in rural areas than in urban areas, as well as in the three lowest wealth quintiles, reflecting the contributing factors of geographic location and poverty.

**Poor Sexual and Reproductive Health Outcomes**: Current data indicates continued limited access to sexual and reproductive health information and services among young people – thus contributing to low condom use where only 40% of girls and 49% of boys aged 15-24 used a condom at last high risk sex; high rates of teenage pregnancy at 29%; high HIV prevalence rates where 8% of girls aged 15-19 are infected compared to 5% of boys; low contraceptive use with only 28% of married adolescent girls using contraception despite their need to space births; and low school retention where 58% and 44% of girls drop out of school by 9th and 12th grades respectively – mainly due to pregnancy and child marriage.

**Child Marriage and Gender-Based Violence**: Zambia has one of the highest child marriage prevalence rates globally, with 31.4% of girls aged 20-24 married by age 18. An in-depth analysis of the 2013-2014 Zambia Demographic and Health Survey indicates that girl’s most vulnerable to teenage pregnancy and child marriage have low levels of education and belong to households in the lowest wealth quintile. Data also indicates that almost 30% of girls aged 15-19 have experienced physical or sexual violence from a husband or partner.

**Maternal Mortality**: Fewer women are dying in pregnancy and childbirth as we have seen maternal mortality rates drop from 729 in 2002 to 398 in 2014; though this decline has not been sufficient to meet the 2015 Millennium Development Goal (MDG) targets for MDG number 5. More mothers have access to maternal health services as reflected by an increase in births assisted by a skilled provider from 43% in 2002 to 64% in 2014. More women with Obstetric Fistula have access to treatment and reintegration services, as reflected by an increase in the total number of fistula survivors successfully treated – from an estimated 160 in 2005 to 1,786 by 2015.

However, significant inequalities remain by gender, wealth quintile rural-urban divide and age groups; all of which limit universal access to sexual reproductive health information and services to women and young people in Zambia.

**HIV Prevalence**: Despite an increase in percentage of women who have ever tested for HIV and received results from 19% in 2007 to 78% in 2014, HIV prevalence rate has marginally reduced from 15.6% in 2001 to 13.3% in 2014. Among women aged 15-49, prevalence rates dropped from 17.8% in 2001 to 15.1% in 2014. This marginal reduction is mainly due to new infections, which calls for more targeted investments especially among marginalized women and girls. Key drivers of HIV in Zambia include low comprehensive knowledge about HIV (42% of women and 49% of men aged 15-49 have limited knowledge of HIV); low and inconsistent use of condoms especially among young people (only 40% of girls and 49% of boys aged 15-24 used a condom at last sexual encounter); multiple and concurrent partnerships; and low HIV testing among young people.

**Violence Against Women**: The 2014 Zambia and Demographic and Health Survey indicates that 43% of women have experienced physical violence since age 15 and that the most commonly reported perpetrators of physical violence among ever married women are current partners (63%) followed by former partners (29%).

**Family Planning**: More women are able to decide if, when and how often to have children as contraceptive use among currently married women aged 15-49 has increased from 43% in 2002 to 45% in 2014. However, in spite of this increase, unmet need for family planning among this cohort of women remains relatively high at 21%. For adolescents, only 18% of sexually active unmarried girls and 36% of married girl’s aged 15-19 are currently using modern contraception. The table below indicates large disparities by Province and wealth quintiles in terms of current use of contraception, which calls for intensified efforts.

### Use of Any Morden Method of Contraception (%) by Province and Wealth Quaintile

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<tr>
<th>Province</th>
<th>Lowest Wealth Quintile</th>
<th>Second Wealth Quintile</th>
<th>Middle Wealth Quintile</th>
<th>Fourth Wealth Quintile</th>
<th>Highest Wealth Quintile</th>
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<tbody>
<tr>
<td>Central</td>
<td>8%</td>
<td>12%</td>
<td>18%</td>
<td>24%</td>
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<td>Copperbelt</td>
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<td>Eastern</td>
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<td>Northern</td>
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<td>North Western</td>
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<td>Southern</td>
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</table>

**Use of any modern method of contraception (%)**
SNAPSHOT OF 2015 RESULTS
**Improving Access to Sexual and Reproductive Health and Rights**

- **$6.6 Million**
  - Was mobilized through UNFPA to support national efforts for reducing unmet need for family planning and improve equitable coverage of family planning services.

- **312,000**
  - Unintended pregnancies were averted due to use of modern methods of contraception - to which UNFPA contributed.

- **60,000**
  - Unsafe abortions were averted due to use of modern methods of contraception - to which UNFPA contributed.

- **1,253,388**
  - Couple Years of Protection attained through UNFPA’s procurement of 45% of public sector family planning commodity needs

- **1,000**
  - Maternal deaths were averted due to use of modern methods of contraception - to which UNFPA contributed.

- **131**
  - Fistula survivors were repaired, thus restoring their dignity.

- **1,635**
  - Survivors of gender based violence were provided with routine counselling as well as sexual and reproductive health information and services in 2 UNFPA target districts.

- **298**
  - Health workers equipped with specialized knowledge and skills in the clinical management of gender-based violence; maternal death surveillance and response; midwifery; fistula treatment and management.

- **35 Million**
  - Male condoms procured and distributed – thus improving availability of condoms for prevention of HIV, STIs and unintended pregnancy.

- **1 Million**
  - Female condoms procured and distributed – thus improving availability of condoms for prevention of HIV, STIs and unintended pregnancy.

- **98%**
  - Of UNFPA supported service delivery points offered at least 3 types of modern contraceptives; while

- **86%**
  - Of hospitals offered at least 5 methods.

Working together with Government and civil society organizations, UNFPA in 2015 continued to assist women to enjoy the right to give birth safely, to decide freely the number and spacing of their children, and to protect themselves from sexually transmitted infections including HIV.
SECURING YOUNG PEOPLE’S PLACE AT THE HEART OF DEVELOPMENT

1,900
Girls affected and at risk of child marriage equipped with health, social and economic assets required to prevent child marriages.

over 1,000,000
Young people accessed information on sexual and reproductive health and HIV.

38,000
In-service teachers were equipped with basic knowledge and skills necessary to deliver effective comprehensive sexuality education in the classroom.

over 8,000
Young people accessed information about their sexual and reproductive health rights on “TUNEME” online youth engagement platform.

To ensure young peoples’ potential is fulfilled - as they transition from childhood to adulthood, UNFPA worked with young people and partners to deliver comprehensive policies and programs that address young people’s challenges in line with both the context in which young people live and with relevant international standards that protect the rights of adolescents and youth.
IMPROVING ACCESS TO SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS
In 2015, UNFPA continued to support women to enjoy the right to decide freely the number and spacing of their children, to protect themselves from sexually transmitted infections including HIV, to go through pregnancy successfully and give birth safely to healthy babies.

Key focus areas included Emergency Obstetric and Newborn Care (EmONC); HIV prevention; Maternal Death Surveillance and Response; Midwifery; Fistula Prevention and Treatment; Family Planning and Reproductive Health Commodity Security. UNFPA also supported prevention of gender based violence in communities as well as enabled survivors to access health and counselling services.

**Safe Motherhood with a Focus on Midwifery**

With direct support from UNFPA and in partnership with the General Nursing Council, four Midwifery curricula were revised to meet the International Confederation of Midwives (ICM) defined standards and competencies for midwifery. These included the Enrolled Midwifery Curriculum, Registered Midwifery Curriculum, Direct Entry Midwifery Curriculum and BSc Midwifery Curriculum. This is expected to improve quality of trainings and competency of in-service midwives.

Linked to this result, UNFPA also supported the development of a draft Midwifery Mentorship Training package; as well as training of 67 nurses in midwifery - which is expected to improve availability of Emergency Obstetric and Newborn Care particularly in underserved health facilities.

Two midwifery schools in North Western and Luapula Provinces also received teaching aids and teaching models, complemented by strategic engagement of stakeholders on midwifery production, deployment and retention through global commemoration days and targeted multi-stakeholder audiences.

**Engaging Retired Midwives: An Innovative Approach to Increase Skilled Deliveries in Rural Zambia**

In Zambia, current data shows that less than 50% of established posts for midwives have been filled for the past 4 years - thus creating a critical and persistent shortage of midwives.

Acknowledging the challenges in availability of midwifery personnel, UNFPA in collaboration with Ministry of Community Development Mother and Child Health identified the need to recruit able retired midwives, as an immediate measure to bridge the gap in skilled deliveries whilst new nurses are being trained. As a result of this innovation, the average number of pregnant women delivering in targeted facilities increased by 50% compared to the 2011 baseline.

Photo: Marjory, a 57 year old retired midwife examining an expecting mother at Luvuzi Rural Health Centre in Lukulu District

**Emergency Obstetric and Newborn Care (EmONC)**

On average, the number of pregnant women delivering in UNFPA target facilities increased by 50% from the baseline in H4+ target facilities.

In addition, 60,000 unsafe abortions were averted due to use of modern methods of contraception - to which UNFPA contributed.

These results are attributed to key investments in midwifery training, deployment and retention; infrastructure improvements in remote health facilities by refurbishing 13 delivery rooms and 12 maternity waiting shelters; as well as installation of solar power in the earmarked 15 rural facilities. This was complemented by the orientation of 64 senior nurses in “Respectful Maternity Care” for improved interpersonal relationships between providers and recipients of maternity care services.
Maternal Death Surveillance and Response (MDSR)

In an effort to support the reduction of maternal deaths, UNFPA supported government in setting up a mechanism to systematically track report, review, analyze and use information from maternal death surveillance and response mechanisms to improve targeted interventions aimed at preventing occurrences of maternal and neonatal deaths.

In addition, 150 health care providers, health facility managers from 10 provinces, and representatives from 7 key line Ministries were oriented on MDSR to ensure active engagement and commitment to reducing preventable maternal and neonatal mortality. This was complemented by improved capacity of 55 health care providers in the analysis and interpretation of data on maternal and perinatal deaths.

As a result, over 50% of districts in Zambia systematically notify occurrences of maternal deaths on a weekly basis which reflects patterns and specific causes of maternal deaths by province, as well as the corrective measures implemented.

Fistula Prevention and Treatment

In 2015, UNFPA’s work on prevention and treatment of fistula resulted in the successful repair of 131 fistula survivors during fistula repair camps conducted across 4 Provinces. The critical mass of fistula clinical teams was also expanded following the training of 10 additional doctors and 10 midwives on fistula treatment and clinical management, and on post-operative care for the management of newly treated fistula survivors. This strengthened the capacity of the health system for fistula prevention, treatment and rehabilitation in Zambia.

Fistula prevention, treatment, rehabilitation and social re-integration gained additional focus as a national public health priority at the commemoration of the International Day to End Obstetric Fistula and the Safe Motherhood Week in 2015. The events also advanced the national discourse on the causes and consequences of fistula, including socio-economic development losses.

A Fistula Tracking Study provided information on the situation and prevalence of fistula; and will be used to inform the development of a National Strategy for Ending Fistula in Zambia which will guide the institutionalization of Fistula management.

Political Commitment to Ending Preventable Maternal Deaths

In October 2015, a pledge of support to the global strategy for women, children and adolescents health was signed by H.E Mr. Edgar Chagwa Lungu, President of the Republic Zambia. This commitment highlights the progressive commitment of the Government of Zambia to ending preventable maternal and newborn deaths in line with Zambia’s Vision 2030 as well as the Sustainable Development Goals.

Zambia: Making Fitsula History

Bridget is one of the 1,846 fistula cases that have regained their lives and dignity after successful surgical repairs in Zambia, enabled by support from UNFPA in the form of trained doctors, surgical repair equipment, and “fistula repair camps” held quarterly each year.

Married and pregnant with her first child at a young age, Bridget experienced a 3-day prolonged labor in a small village with no medical support. After visiting 2 local clinics with no assistance, Bridget traveled over 50km to the nearest Mansa General Hospital, where she was finally assisted and under-went caesarian operation.

After losing her baby, Bridget returned to her village and began leaking urine uncontrollably (fistula). The smell disgusted her husband, so he abandoned her. She returned to her parents’ home, but they couldn’t find any support for her either. Left alone without any medical assistance, Bridget begged for survival for 4 long years.

In an effort to assist his sister, Bridget’s’ brother made an over 700 Km trip with her to Lusaka’s University Teaching Hospital, where she finally underwent a fistula surgery with assistance from a UNFPA trained medical doctor. After a successful surgery, Bridget is now fully repaired and dry. She has remained in Lusaka and eager to fulfill her dreams of becoming a nurse and later get married and have healthy children.

“I would like to go back to secondary school and become a nurse one day. Having suffered for 4 long years, I would also like to use every opportunity I have to enlighten women and girls in rural areas about how to prevent fistula, and also advocate for increased number of clinics where women can access timely medical services when they face complications during childbirth” says Bridget.

Acknowledging that timely and accessible Emergency Obstetric Care (EmONC) is critical for fistula prevention, the United Nations Population Fund (UNFPA) in Zambia is committed to sustaining its partnership with the Government of Zambia at all levels, as well as national and international partners to address challenges related to timely and adequate access to focused ante-natal care, skilled delivery at birth, and post-natal care for pregnant women. UNFPA’s support has included the design of a catalytic intervention model that will improve the capacity of the national health system to routinely deliver a comprehensive package of fistula prevention and repair services in Zambia – including conducting a national assessment that will guide interventions to strengthen capacities at health facility levels. In addition, UNFPA has continued to support Government to conduct ‘fistula camps’ across Zambia which has currently resulted in the successful treatment of 1,846 fistula patients between 2006 and 2014. UNFPA is also supporting capacity development to improve the capacity of doctors and nurses to undertake quality fistula surgeries.
Fostering Integration of Sexual and Reproductive Health; HIV; and Gender Based Violence Programmes (SRH/ HIV/GBV Linkages)

As part of the SRH-HIV-GBV Linkages Project and the UN-GRZ Joint Programme on Gender Based Violence (funded by Government of Sweden), UNFPA continued to increase national capacity to deliver integrated sexual and reproductive health, HIV and gender-based violence services. Key milestones for the year included the following:

- Strengthened the national capacity to deliver integrated SRH and HIV services to sex workers and their clients. The context of SRHR and HIV through needs capacity assessment Civil Society Organizations (CSOs) and network that work with or led by sex workers; and equipping of 25 Civil Society Organizations (CSOs) with skills, knowledge and tools in peer led approaches for delivery of integrated SRH and HIV services to sex workers and their clients.

- Provided 1,635 survivors of gender based violence with routine counselling as well as sexual and reproductive health and HIV information and services, in drop-in centres and centres of excellence located in Mongu and Solwezi.

- Finalized the SRH/HIV/GBV guidelines that provide standards and quality of care protocols. This has provided critical guidance in strengthening delivery of integrated services to poor and marginalized population groups including women and young people.

- Improved capacity for programming for sex workers and their clients in the context of SRHR and HIV through needs capacity assessment Civil Society Organizations (CSOs) and network that work with or led by sex workers; and equipping of 25 Civil Society Organizations (CSOs) with skills, knowledge and tools in peer led approaches for delivery of integrated SRH and HIV services to sex workers and their clients.

Commodity Security

- Strengthened capacity and systems for supply chain management:
  - Increased demand for reproductive health commodities by poor & marginalized women & girls.
  - Sustained enabling environment for RHCS, including:
    - Increased condom use among populations in target districts, through distribution of 15,000,000 male condoms and 300,000 female condoms - reaching a total of 45 million young people with messages on condom use and HIV prevention.
    - A total of 260 clients aged between 15-30 years successfully accessed toll-free call services on family planning provided by trained call center operators in North Western and Luapula provinces. The call center is designed to respond to questions and link women, including adolescents, to services at the closest health facility.
    - 312,000 Unintended pregnancies were averted due to use of modern methods of contraception – to which UNFPA contributed
    - Improved efficiency for procurement and supply of reproductive health commodities, evidenced by the following milestones:
      - Provided 45% of public sector family planning commodities which contributed to 1, 253,388 Couple Years of protection, while also reducing occurrences of national stock outs of family planning commodities.
      - Strengthened capacity of National Regulatory Authorities (Zambia Medicines Regulatory Authority and Zambia Bureau of standards) on quality assurance and assessment modalities for condom manufacturers required for WHO/UNFPA prequalification.
      - Improved mechanisms for quality assurance by systematically undertaking Quality Assurance/Quality Improvement (QA/QI) supervisory visits in 180 facilities within UNFPA supported districts.

- Strengthened capacity and systems for supply chain management:
  - A total of 60 health care providers were trained in demand forecasting, quantification and supply chain management in 8 UNFPA supported districts.
  - Last mile distribution of family planning commodities from districts to service delivery points ensured a total of 377 facilities accessed commodities in a timely manner.
  - Equipping 300 Safe Motherhood Action Groups (SMAGS) and 100 community based distributors with information on sexual and reproductive health to support increased demand at community level.

As one of the countries supported by the Global Programme on Reproductive Health Commodity Security, UNFPA in Zambia continued to support strategic approaches to ensure that all individuals obtain and use quality and free reproductive health commodities of their choice and medicines whenever they need them. In 2015, Zambia recorded the following milestones:

- Provided 1,635 survivors of gender based violence with routine counselling as well as sexual and reproductive health and HIV information and services, in drop-in centres and centres of excellence located in Mongu and Solwezi.

- Finalized the SRH/HIV/GBV guidelines that provide standards and quality of care protocols. This has provided critical guidance in strengthening delivery of integrated services to poor and marginalized population groups including women and young people.

- Improved capacity for programming for sex workers and their clients in the context of SRHR and HIV through needs capacity assessment Civil Society Organizations (CSOs) and network that work with or led by sex workers; and equipping of 25 Civil Society Organizations (CSOs) with skills, knowledge and tools in peer led approaches for delivery of integrated SRH and HIV services to sex workers and their clients.
SECURING YOUNG PEOPLE’S PLACE AT THE HEART OF DEVELOPMENT
UNFPA contributes to the advancement of adolescents and youth through five strategic prongs:

- Enabling evidence-based advocacy for comprehensive policy and program development, investment and implementation
- Promoting comprehensive sexuality education
- Building national capacity for sexual and reproductive health service delivery (including HIV prevention)
- Taking bold initiatives to reach marginalized and disadvantaged adolescents – particularly girls
- Promoting youth leadership and participation

Enabling Policy and Legal Environment for Youth Health and Development

Acknowledging that meaningful and sustainable development can only be attained when national legal and policy frameworks avail young people with opportunities to develop to their full potential, UNFPA continued to collaborate with the Government of Zambia and various youth-led organizations to enhance policy and legal environment for youth health and development. Guided by evidence, the key achievements of these strategic partnerships included the following:

- Finalization of the National Strategy to End Child Marriage, including consultations with individual Government Ministries. The Strategy is expected to be launched in early 2016.
- Finalization, Presidential launch and dissemination of the revised National Youth Policy and Action Plan.
- Active participation of the Zambian Parliament in the development of the SADC Regional Model Law on Child marriage, aimed at addressing legal and policy barriers to ending child marriage in the SADC region.
- In collaboration with UNESCO and UNICEF, more than 38,000 in-service teachers were equipped with basic knowledge and skills necessary to deliver effective comprehensive sexuality education in the classroom. In addition, UNFPA supported the development of an out-of-school comprehensive sexuality education curriculum that aims to equip out of school young people with knowledge and skills, attitudes and values that will enable them to develop a positive view of their sexuality in the context of their emotional and social development.
- Finalization of the National Standards and Guidelines for Adolescents Friendly Health Services. In addition, guidelines for adolescent and youth friendly health service provision were integrated in the nurses and midwives curriculum as part of efforts to improve the provision of youth friendly health services.

Innovations to Increase Young People’s Knowledge and Skills

- In collaboration with Ministry if Youth UNFPA supported the design and launch of “TUNEME” - an electronic interactive site accessible by all types of mobile phones. TUNEME was designed as a safe space where young people can access gender-sensitive information on adolescent sexual and reproductive health.
- Immediately after the launch, more than 8,000 young people in Zambia accessed evidence based information about their sexual and reproductive health rights. UNFPA also unveiled the “We Will” music album, aimed at harnessing the power of music as a channel to increase knowledge of Sexual Reproductive Health among young people.
- 2,582 parents and youths, and 36 community based mentors were equipped with knowledge on preventing teenage pregnancy and improving adolescent sexual and reproductive health.

Using Music to Reach Young People with Sexual and Reproductive Health Information

Natasha Mwanza, aged 14, speaks during the first ever Africa Girl Summit held in Lusaka in November 2015. Among the key issues she highlighted was the need to foster the participation of media in youth advocacy efforts – including through the Junior Reporters Magazine, a magazine that aims to provide a platform where young people can express themselves on issues that affect their health and development.

Empowering Youth, Especially Adolescent Girls

As part of the “safeguard young people programme” (SYP) in Zambia, a group of young and popular music artists have been engaged by UNFPA to support dissemination of key messages that promote positive sexual and reproductive health behaviors among young people, as well as sharing information to increase young people’s access to services.

In October 2015, the SYP music artists played a key role in ensuring that 8,936 young people accessed Tuneme - an online youth engagement platform or mobisite designed to enhance young people’s access to health information.
Youth Participation

The Sustainable Development Goals underscore the global commitment of “leaving no one behind” in development. Considering young people’s participation is an integral part of implementation of Agenda 2030, UNFPA is fostering effective youth participation and inclusion to ensure young people play an important role in their development as well as that of their communities. Key achievements in 2015 included the following:

- As Co-chair of the UN System Wide Action Plan on Youth (Youth SWAP), UNFPA supported the setting up of the UN Youth Partnership Platform-Zambia (Youth Platform). The Youth Platform comprises of a group of young people who partner with the United Nations System in Zambia, the Government of the Republic of Zambia and other relevant partner organizations on how to address issues surrounding young people’s development and encourage youth participation in decision-making processes at the national, regional, and international levels.

- Targeted capacity building of 30 members of the National Youth Network on Population and Development (the AfriYAN Chapter in Zambia) which enabled them to effectively participate in the 7th National Development Planning process. This ensured that youth needs and aspirations are prioritized.

Taking Bold Initiatives to Reach Marginalized Adolescents

As part of UNFPA’s global Action for Adolescent Girls, and in line with Zambia’s Campaign “Let Girls be Girls not Brides”, UNFPA continued to collaborate with the Ministry of Chiefs and Traditional Affairs and civil society partners to achieve the following milestones:

- 3,040 adolescents (1,899 girls and 1,141 boys) were enrolled in 62 safe spaces in 2 districts. The safe spaces were equipped to offer health, social and economic assets to reduce girls vulnerability to child marriage.

- Successful community dialogues reached 1,273 parents, guardians, and community leaders with information on dangers of child marriage and its alternatives. In addition, 61 community mentors were trained and recruited to facilitate the safe space programme.

- In-depth analysis of the 2014 Zambia Demographic and Health Survey data on child marriage and adolescent pregnancy, as well as a diagnostic study in hotspot areas provided additional insights and information on prevalence, incidence and underlying causes of child marriages in Zambia.

“Safe Space in My School Enabled Me Claim My Rights”

Maria, a 15 year old grade 9 pupil is currently enrolled in one of the UNFPA supported safe-spaces located in Simulima Village of Mongu District.

In December 2015, Maria’s parents had secretly enrolled her in traditional initiation [to prepare her for marriage after receiving 1 cow as bride price] and forbade her from going to school. This hurt Maria so much that she lost all the hope that she had of completing school and advancing her university career. With tears in her eyes, Maria sneaked out of her parents’ house to meet her guidance teacher [who was also trained as a safe space mentor] and informed her of the situation, including that the wedding was to take place in 2 days’ time.

With support from the District Education Board, Maria was rescued from being married off against her will, just a day before her planned wedding day. As the programme is also focused on changing negative social norms and supporting families overcome barriers to preventing child marriage, the groom and Maria’s family were invited for a group counselling session at YWCA, highlighting the negative impact of child marriage and ensuring that girls like Maria are given opportunities to develop to their full potential by completing school, among others.

To assist Maria complete her education in a safe and supportive environment, YWCA facilitated her stay at a girls’ only safe house for the entire duration of her education, including bursary support at a new school that hosts weekly safe-space sessions for girls. Maria says “I am very happy here [at the new school and safe house] because I have access to all the education support I need, as well as information on girls health issues such as teenage pregnancy, child marriage, HIV and other lessons that can help girls like me grow into responsible and successful adults.”
HARNESSING DATA FOR DEVELOPMENT
The UNFPA “Big Data” revolution, which started in 2014, aims at using modern and innovative technologies to collect, make available and use information, including practical applications for development, human rights and global health. Working with the Ministry of Finance, Central Statistics Office, and Population Council, UNFPA contributed to improved national capacity to generate, analyze and utilize statistical data and evidence to inform national policy, planning and programming. Specific results for the year included:

- Improved institutional and planning frameworks for integrated and inclusive national development through the finalization and Presidential signing of the Demographic Dividend (DD) Study report. The DD report is informing multi-stakeholder consultations, national position papers and statements, as well as priority setting and domestic resource allocation for the Seventh National Development Plan (2017 - 2021) and domestication of the SDGs.
- Increased availability of policy-relevant disaggregated data through the dissemination of the 2013/14 Zambia Demographic and Health Survey, including in-depth analysis of data, which is informing policy formulation and programming for adolescent and women’s reproductive health needs.
- Improved access to evidence based information and data for public decision making through the development and launch of an on-line national Data Portal by the Central Statistical Office supported by UNFPA.
- Building on the extensive work undertaken by the Office of the High Commissioner for Human Rights (OHCHR) and UNFPA in advancing Sexual and Reproductive Health and Rights for women and young people, UNFPA, in collaboration with the National Human Rights Commission (NHRC), Population Council, Women and Law in Southern Africa (WLSA); and the United Nations Human Rights Adviser in Zambia - identified the need to catalogue the manifestations of unfulfilled sexual and reproductive rights for excluded and marginalized Zambian women, young people and adolescent girls.
- The process included an independent assessment of the status of SRHR in Zambia from a human rights perspective; which generated programme and policy relevant evidence to set the basis for addressing barriers and constrains limiting improved SRHR outcomes. The findings will also be used in the Universal Periodic Review (UPR) process, among human rights based mechanisms.

Zambia’s Demographic Dividend study assessed the economic and human development potentials of our country in the short, medium and long-term using a comprehensive approach. It generated relevant policy and programme information to guide a well-blended policy-mix required to propel Zambia towards achieving its Vision 2030 aspiration of becoming a prosperous middle income country.

Government acknowledges that targeted and strategic actions are required to unlock the potential of the next generation of technocrats, innovators, entrepreneurs, change agents and leaders, considering the youthful population of Zambia aged 15-35 and children aged 0-14 accounts for 36.7% and 45% of our total population respectively. We note that investment in education is critical to ensure our young people acquire the skills and knowledge relevant to the current economy and job market. Equally, Government underscores the needed priority investments in health, including sexual and reproductive health, which are required not only to trigger a demographic transition through declining fertility rates; but also to ensure young people make a healthy transition from adolescence into adulthood. The resultant change in age structure, characterised by a larger working population “labour force surplus” and fewer dependents, will give Zambia a time limited opportunity for rapid economic growth and stability; one which Government and its stakeholders must seize and act upon. Therefore, concurrent strategic investments in economic policies that create decent jobs and provide environmentally safe economic opportunities; as well as good governance and accountability systems cannot be over-emphasized.

With the right policies and investments, Zambia can indeed harness a “demographic dividend,” resulting from declining mortality and fertility rates, strong institutional capacities, healthy and skilled human capital, improved decent jobs prospects, inclusive governance system; all within an enabling environment that ensures citizens claim their rights to education, health, development, and live free from violence and discrimination. This will allow us have inclusive socio-economic development, where no Zambian is marginalised in benefitting from development.

It is however critical to underscore that the demographic dividend for Zambia will neither be automatic nor guaranteed but needs to be earned. We therefore need to collectively use the opportunity of the next national development planning cycle to begin this historic journey.

Future generations will appreciate efforts as the three arm of the state - executive, parliamentary and judiciary - and as a people, if we make the right decisions and investments today.

I urge all state and non-state actors in Zambia to take into account recommendations of the study in all our development efforts.

It is with conviction that through our joint efforts as a country, we will be able to achieve the desired results of the Demographic Dividend Report.

HARNESSING THE DEMOGRAPHIC DIVIDEND:
THE FUTURE WE WANT FOR ZAMBIA
2015
DAWN OF A NEW PROGRAMME CYCLE AMIDST THE SDG’S

In 2014, the 20-year review of the International Conference on Population and Development (ICPD@20) revealed what the world can achieve if it focuses on inclusive social development - including access to sexual and reproductive health for marginalized populations - that is underpinned by human rights.

In September 2015, world leaders adopted and launched the 17 Sustainable Development Goals (SDGs) with its associated 169 targets, also known as Agenda 2030. The far reaching and complex goals highlight the need for inclusive development that leaves no one behind, irrespective of age, sex, race, location, or income level.

It is in this regard that UNFPA in Zambia was pleased to renew its programme of cooperation with the Government of the Republic of Zambia in September 2015, with the UN Executive Boards’ approval of the 8th Country Programme of Cooperation between UNFPA and Government of Zambia (2016-2020).

Focused on inclusive social development and ensuring that “no one is left behind” - the 8th country programme is guided by analytical studies and assessments, and benefited from multi-sectoral consultations with the Government and partners. It is aligned with Zambia’s revised 6th national development plan; Zambia’s Vision 2030; and the United Nations Sustainable Development Partnership Framework (UNSDPF) 2016 – 2021.

The 8th Country Programme will support national-level policies, programme design and nationwide interventions, while providing targeted support to marginalized population groups, and underserved districts in six provinces to ensure continuity and significant programme coverage.

UNFPA Zambia’s Programme Focus Areas (2016-2020)

**Sexual and Reproductive Health**
- Government, CSO’s and partners have increased capacity to deliver integrated services.
- Government and stakeholders have the capacity to increase demand and supply of life saving medicines and commodities.

**Adolescents and Youth**
- Increased capacities of Government, CSO’s and partners to design and implement comprehensive sexuality education programmes.
- Increased capacity of Government, CSO’s and partners to design and implement programmes for marginalized adolescent girls at risk of child marriage and teenage pregnancy.

**Population Dynamics**
- Increased availability of disaggregated evidence through cutting edge data generation and in depth analysis of population dynamics, sexual and reproductive health, HIV, and gender equality outcomes.
UNFPA Zambia staff with former UNFPA Deputy Executive Director (programme) – Ms. Kate Gilmore, during her country visit to Zambia in October 2015.