

Partners for a Malaria-Free Zambia (PMFZ)

Year 1 progress report: 1 April 2021-31 March 2022

STRATEGIC GOAL:

Issue: More than 80% of Zambia's population is at risk of malaria, spread through the bites of infected mosquitoes. It's one of the deadliest diseases in Africa.

Intervention: Together with several local implementing partners, the \$6 million Partners for a Malaria-Free Zambia (PMFZ) program is training and supporting 380 health facility staff members and adding 2,500 community health workers (CHWs) to the national health system in Zambia. These efforts will expand effective malaria diagnosis and treatment to communities in 10 heavily affected districts in Zambia's Central and Muchinga provinces. PMFZ aims to provide a model for malaria reduction elsewhere.

Theory of Change: If there are enough CHWs with adequate commodities to test and treat malaria and related diseases, supported by health clinic staff, cases of malaria, pneumonia, and diarrhea will be detected more quickly, and deaths will decrease.

PARTNERS:

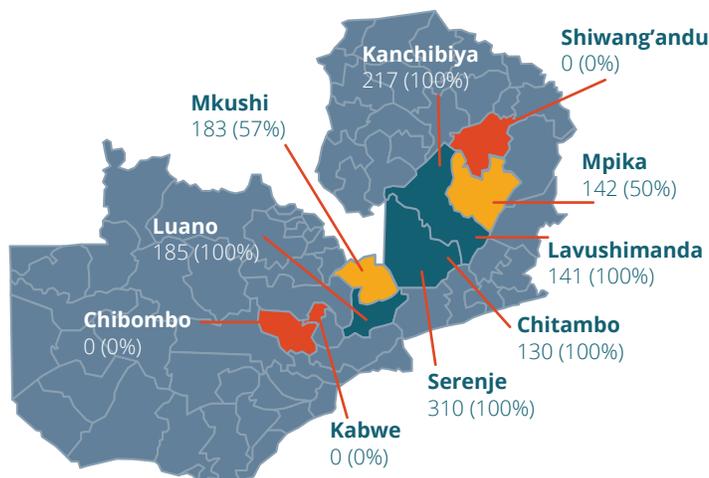
Ministry of Health
National Malaria Elimination Centre
Malaria Partners Zambia / International
World Vision Zambia
PATH

FUNDING:

The Rotary Foundation: \$2M
Bill & Melinda Gates Foundation: \$2M
World Vision U.S.: \$2M
TOTAL: \$6M

COMMUNITY HEALTH WORKER SATURATION (1 PER 500 PEOPLE)

Number of trained CHWs (% of coverage in parenthesis) in PMFZ-supported districts



CHWs trained in year 1 of the program: 1,308

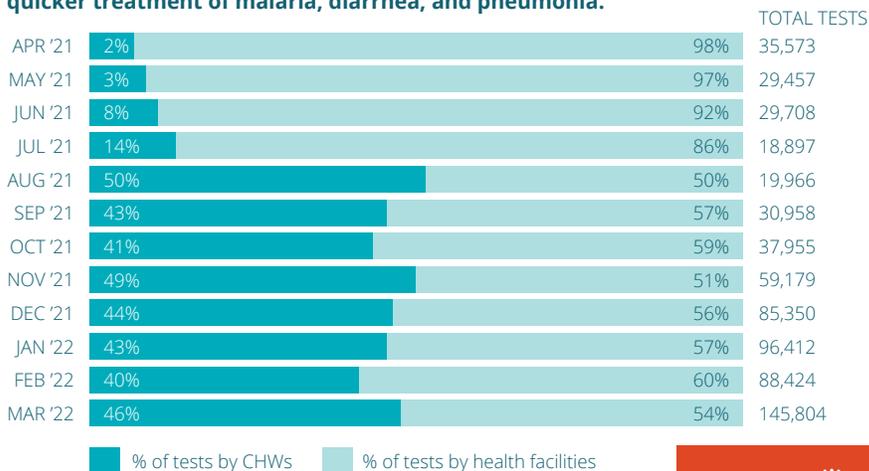
ROLE OF ROTARY:

National: Convening and coordinating with funding and implementing partners to support national malaria elimination strategic plan to scale up Integrated Community Case Management (iCCM+). Rotary members in Zambia advocating for consistent, sustainable commodity availability and distribution.

Local: Ensuring CHWs are supported with evidence-based activities and materials for malaria elimination, including bicycles, rain gear, and telephone credit.

BRINGING HEALTH CARE CLOSER TO HOME

Increased CHWs means increased testing in communities which enables quicker treatment of malaria, diarrhea, and pneumonia.



CHALLENGES:

- Commodity stocks inconsistent due to COVID-19 supply chain disruptions and government effectiveness in procurement and distribution
- Adjusted CHW training size due to COVID-19 safety protocols
- Skepticism over purpose of blood draws for malaria detection

CONCLUSION:

Program activities and achievements are on track heading into year 2, and partners recognize the role Rotary members are playing in malaria elimination.



For more information about Programs of Scale:
rotary.org/programsofscale

Partners for a Malaria-Free Zambia (PMFZ)

Year 2 progress report: April 2022 through March 2023

STRATEGIC GOAL PROGRESS:

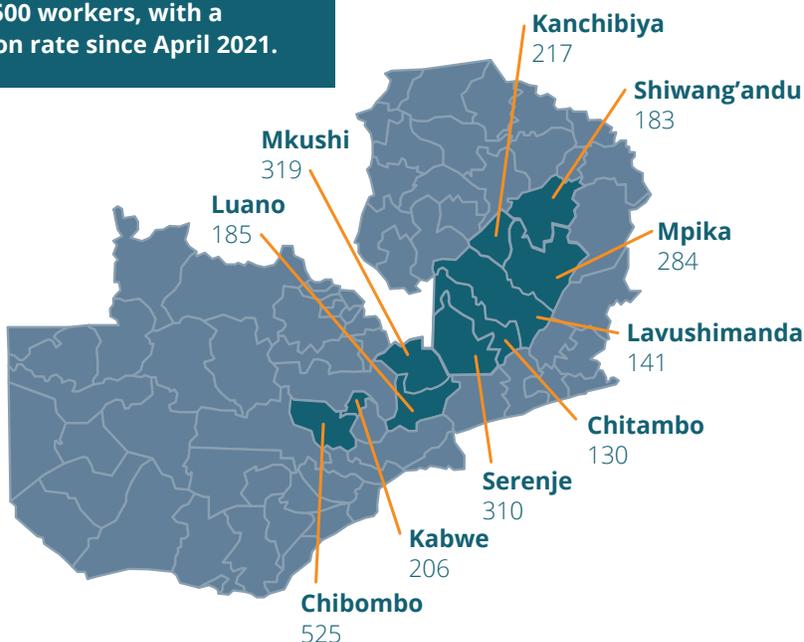
The program's long-term goals are to reduce cases of malaria, especially severe ones, and to reduce malaria deaths, especially deaths of pregnant women and children under 5 in PMFZ-supported districts.

At the end of its second year, the program has reached the goal of training and equipping 2,500 volunteer community health workers to test for malaria and treat, refer, and track the confirmed cases. The participation of Rotary members and an emphasis on data quality are contributing to the successes of the program. The workers are fully equipped with bicycles, backpacks, foul-weather gear, and mobile phones, all of which enable them to bring care closer to people's homes. Awareness campaigns are also helping people to reduce their risk by changing their habits. Finally, having a more consistent supply of tests and medicines is leading to faster detection and treatment.

COMMUNITY HEALTH WORKER SATURATION (1 PER 500 PEOPLE)

Number of trained CHWs in districts supported by the program since its April 2021 launch

1,192 new workers were trained in year 2, reaching the goal of training a total of 2,500 workers, with a 95% retention rate since April 2021.



STRONGER COMMUNITY HEALTH CARE SYSTEMS:

The program supports 245 health facilities, with program representatives meeting regularly with neighborhood health committees (localized units within the Ministry of Health), community health workers, and health facilities to address issues such as improving collaboration, retaining workers, ensuring sustainability, and maintaining the quality of the data.

ROTARY MEMBER PARTICIPATION:

During the second year, Rotary members from 18 clubs contributed 4,050 volunteer hours to distribute bed nets, audit the program's data, advocate to ensure a constant stock of supplies, and train the health workers.

MORE RELIABLE SUPPLIES:

Rotary leaders met with the president of Zambia to advocate for the program to have steady access to testing and treatment supplies. This, along with local Rotary members' continued advocacy efforts, significantly improved the reliability of the supply chain and addressed one of the biggest challenges from year 1.

MORE CASES DETECTED:

Having trained community health workers active in all 10 districts led to more cases being detected and more people being able to get treatment. The number of tests conducted by community health workers near community members' homes increased from 267,500 during the first year to 802,400 in the second year.

BRINGING HEALTH CARE CLOSER TO HOME:

During the second year, 99% of the people who were found to have malaria when the health workers tested them were then treated by those workers. Community members may receive services in a community health worker's home, in a community space, or in their own home, reducing the distance that patients need to travel.

