



HEALTH COMMUNICATION
PARTNERSHIP
ZAMBIA



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Johns Hopkins University Center for Communication Programs, Save the Children, International HIV/AIDS Alliance

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Acronyms

AIDS	Acquired Immunodeficiency Syndrome
ART	Antiretroviral Therapy
BCC	Behavior Change Communication
CBO	Community-based Organization
CHIC	Community Health Information Cards
DATF	District AIDS Task Force
DHMT	District Health Management Team
DPO	District Program Officer
GRZ	Government of the Republic of Zambia
HBC	Home-Based Care
HC	Health Centre
HCP	Health Communication Partnership Zambia
HEART	Helping Each other Act Responsibly Together
HIV	Human Immunodeficiency Virus
IEC	Information, Education and Communication
IGA	Income Generating Activity
IR7.1	Intermediate Result 7.1
ITN	Insecticide-treated Net
JHU	Johns Hopkins University
JHUCCP	Johns Hopkins University Center for Communication Programs
MATF	District Malaria Task Forces
MCH	Maternal and Child Health
MCP	Multiple Concurrent Partnerships
MOH	Ministry of Health
NAC	National AIDS Council
NATAAZ	National Theatre and Arts Association of Zambia
NGO	Non-Governmental Organization
NHC	Neighborhood Health Committee
NMCC	National Malaria Control Center
OVC	Orphans and Vulnerable Children
PEPFAR	President's Emergency Plan for AIDS Relief
PLHIV	People Living with HIV
PMTCT	Prevention of Mother to Child Transmission (of HIV)
RH	Reproductive Health
RHC	Rural Health Centre

ROL	Rhythm of Life
SFH	Society for Family Health
SO7	Strategic Objective # 7
STD	Sexually Transmitted Disease
TBA	Traditional Birth Attendant
UCI	Universal Child Immunization
UNZA	University of Zambia
USAID	United States Agency for International Development
VCT	Voluntary Counseling and Testing
ZCCP	Zambia Centre for Communication Programs
ZCHC	Zambia Creative HEART Contests
ZDHS	Zambia Demographic and Health Survey
ZNBC	Zambia National Broadcasting Corporation
ZPCT	Zambia Prevention Care and Treatment Partnership

Introduction

For the past five years, Health Communication Partnership Zambia (HCP) has been mobilizing communities to help themselves improve their health. In the first four years, in partnership with the DHOs and health centers, HCP built relationships with Neighborhood Health Committees and Community-Based Organizations, held trainings, produced (based on solid formative research) videos, radio programs, print materials and toolkits for use in health facilities, schools, and other places where the community came together. HCP organized contests for youth and trained them to be leaders. They partnered with religious, traditional and *de facto* leaders, and made women into stronger participants and even leaders to spread the word about how much a group of people working together can achieve.

“In Shivuma, we did not understand how we could solve our own problems as groups and community on how to mobilize and follow up on health issues raised. [In the past], we waited for the health staff to do everything without realizing that as NHCs we had a role to play in making sure the community [could] achieve the intended goals. We thank HCP for helping us discover that we can fill up the identified gaps.” Enedy Kaineki, Kasono NHC member in Kasempa District



DHMT staff and HCP team during DHMT partnership review at Siayumbu PHCU in Siavonga.

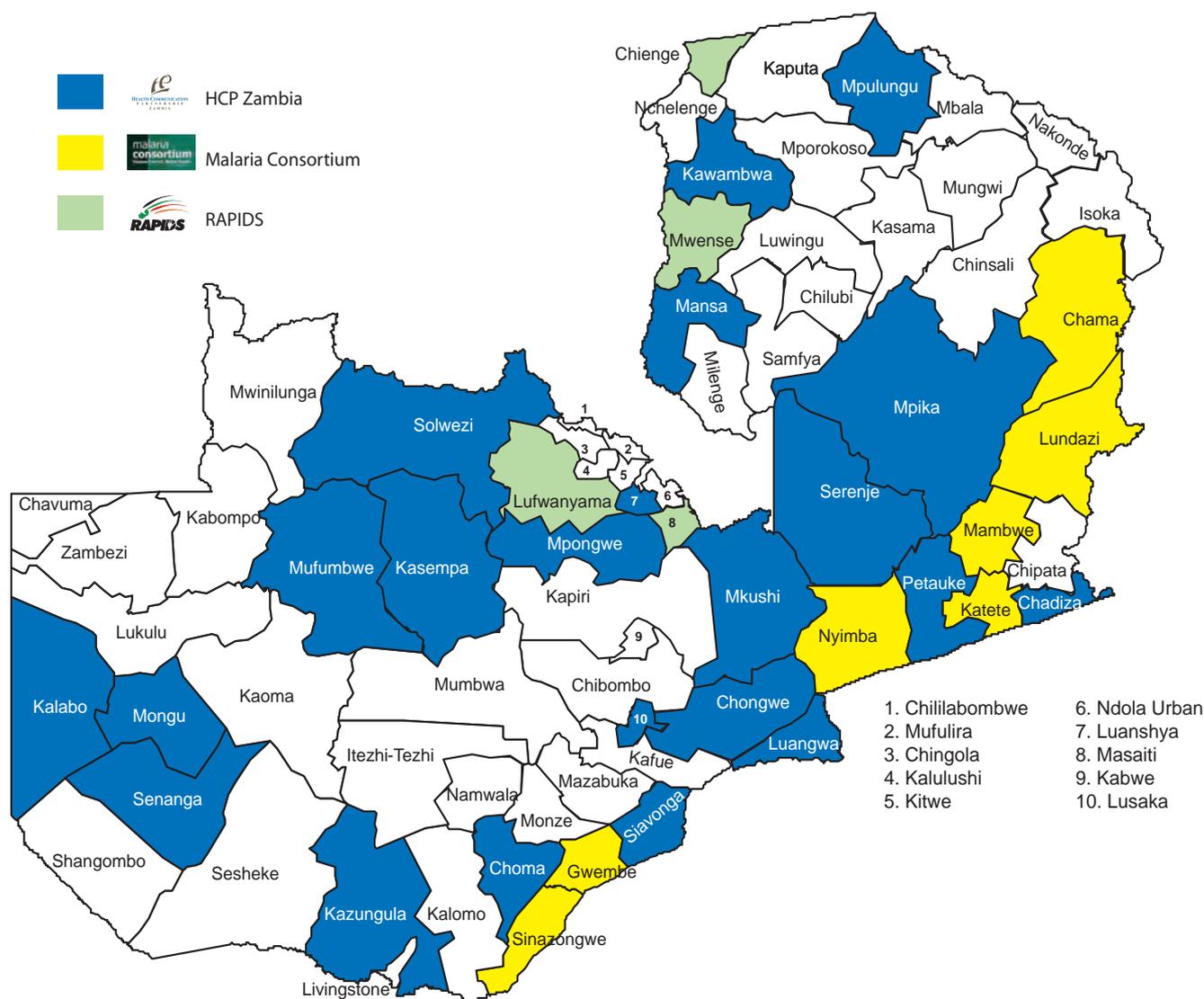
In year five, HCP built upon the groundwork laid in the first four years. Large mass media and multi-media efforts were produced such as the Rhythm of Life music and arts festival and health fair and One Love, Kwasila!, Zambia’s first national multimedia campaign addressing multiple and concurrent sexual partnerships. HCP helped the Ministry of Health and partners launch a much needed national mass media campaign for family planning. Videos and TV spots on circumcision, HIV prevention, family planning and reproductive health; animated short films about malaria and pediatric HIV; radio programs for college students, Neighborhood Health Committees, and the general public were made. Phone-in talk lines were re-opened. A *Monopoly*-based game to educate youth on HIV was created, along with flipcharts for health providers to use with caregivers of children living with HIV and another for men on sexual and reproductive health issues; posters to educate the deaf about HIV and other health issues. Additionally members of the press were trained in new and emerging health issues and how to report better on health.

HCP focused on communities, reaching some rural areas where no NGOs had worked before.

“There has never been any organization or NGO working in Serenje District which had come up to this remote community to bring developmental assistance, more so to say on the improvement of the health standards in Mupula area. For this on behalf of the community we want to thank HCP.” Cephas Chibuye, a chief’s representative from Mupula village in Serenje district

For all aspects of the project, HCP worked closely with the Ministry of Health and other partner NGOs. This year HCP collaborated with government to bring forward updated National Family Planning Guidelines with the Ministry of Health, and to introduce two courses in behavior change communication with the University of Zambia.

Where the Ministry of Health and other partners provide the policy framework and delivery of services, HCP created the awareness that brings people to the clinics, leading them down the path to better health.



The goal of Health Communication Partnership Zambia is to contribute to the “improved health status of Zambians” (SO7) by supporting “Zambians taking action for health” (IR7.1). Awarded in August 2004, the HCP partnership includes the Johns Hopkins University Center for Communication Programs, Save the Children and the International HIV/AIDS Alliance.

HCP interventions help individuals, families and communities undertake behaviour change that optimizes their health and well being. HCP collaborates with the Ministry of Health, the National AIDS Council, the Provincial Health Offices (PHOs), the District Health Offices (DHOs), other allied ministries and public institutions, local and international NGOs, and community-based organizations (CBOs).

HCP Zambia works in 22 districts, selected for their geographical isolation, in nine provinces of Zambia. The Ministry of Health perceives gaps in the services and trainings they can provide to these rural communities, and HCP assists by filling them. The bulk of HCP activities and interventions are concentrated at the district and community level; other activities such as mass media and behavior change communication materials are centrally-based and have a national focus.

The HCP Zambia program interventions support activities in the following technical areas as prioritized by the Ministry of Health:

1. Child Health
2. HIV and AIDS
3. Malaria
4. Maternal Health
5. Reproductive Health

HCP activities focus on reducing high-risk behavior and improving individual and collective action for health by strengthening community-based systems and networks, mobilizing leadership (religious, traditional, *de facto*) and youth, and promoting the change of harmful social and gender norms. Quarterly follow-up meetings held by HCP keep community groups focused and motivated, and lead to increased success in achieving goals.

This report presents HCP's activities and accomplishments during its fourth year and covers the period from 1 October 2008 to 30 September 2009. The expected outcomes are outlined by the program's four strategic approaches.

Strategic Approach I – Community Mobilization

Strengthening community capacity to identify, plan and implement activities to address priority health and social needs.

Approach

Community mobilization is the backbone of HCP interventions. HCP aims to improve the ability of targeted communities to better access and manage existing and new resources available to them to effect positive behavior change at the individual, household and community level.

People do not change behavior based on information alone; it is a combination of having the information



Gathering for a drama performance.

as well as having the confidence to make positive choices, collectively and individually, that changes communities. With HCP's guidance, communities prioritize the changes that will be needed to respond to the immediate health threats that confront families and households, as well as ensure sustainability. To achieve this, HCP works to reinforce district and community systems and structures (CBOs, NHCs, traditional, religious, and *de facto* local leaders, youth groups and affected individuals such as people living with HIV and AIDS.)

During the year under review, HCP focused its efforts on ensuring sustainability. To this end, HCP produced materials to support communities and government bodies in carrying on ventures that had already proved successful, such as helping the DHO to work with Neighborhood Health Committees.

HCP carried out a variety of trainings for rural health center in-charges and DHO staff in districts, and seed money for action plans of NHCs was provided for the realization of their goals.

Accomplishments

Community Capacity Building

HCP continued to expand its operations at health center and community level. The number of communities being serviced rose from 1,802 to 1,821. This year, staff focused on fostering sustainability, with exchange visits and mentoring and support for NHCs, local leaders, and ministry officials.

Community members received training based on the needs identified from the environmental and community assessments. Trainings were conducted in 20 HCP districts, resulting in 1,060 community members trained in participatory planning and partnership, leadership skills, conflict resolution, financial management, proposal writing, participatory methodologies, strategic planning, gender, and monitoring and evaluation. This brings to 7,179 the number of community members trained since HCP commenced.

NHC and DHO members were oriented to the revised *Simplified Guide to Participatory Planning and Partnerships* and *Health Care within the Community* booklets. The orientation provided participants with skills on how to mobilize communities around health concerns and other social issues. HCP monitored the progress of action plan implementation through visits to individual NHC groups.

Activities of the Neighborhood Health Committees focus on:

- Diarrhea
- Malaria
- HIV and AIDS
- Child health
- Water and sanitation
- Jiggers
- Bilharzia
- Tuberculosis
- Nutrition
- Basic access to health services

Main activities funded included construction of health posts and universal child immunization shelters, income generation for orphans and vulnerable children and people living with HIV, water well protection, construction of maternity annexes, procurement of community ambulances, construction of a bridge in **Mansa** to improve access to health services, procurement of insecticide-treated mosquito nets for malaria prevention, and procurement of audio visual equipment mainly for information communication campaigns.

Here is how different communities in HCP districts have responded to health concerns this year:

- **In Mansa**, 11 communities benefited from HCP community support funds and these included: the construction of a maternity annex in Nsonga and Katangwe RHC, bridge and health post construction in Ifmampelo NHC of Chisunka RHC, outreach post construction in Mushitu NHC of Matanda, Musaika NHC of Nsonga RHC, Pintu NHC of Mibenge, Chibinde and KaboleloNHCs of Ndoba, the growth monitoring shelter construction in Lumpa NHC of Chembe and rehabilitation of water wells in Mwale NHC of Kalaba.
- **In Mpongwe**, Chilumulilo NHC was funded **K10,940,000** for the construction of four protected wells in the community and work started in March, 2009 with the community mobilizing local materials, sand and stones. The construction of all the four wells has been completed and the community is using these wells.

Exchange Visits

Eighty-one exchange visits were held in 12 HCP districts, with interaction within and across districts. During exchange visits, experiences were shared between communities on:

- involvement of traditional leadership in community health programs
 - resource mobilization
 - how to run a nutrition program for children under five
 - construction of mothers' shelters
 - income generating activities
- **In Siavonga**, one exchange visit was held between eight NHCs of **Mansa** and NHC members of Siyayumbu. The NHCs from **Mansa** learned ways of improving nutrition from Siyayumbu NHC. They observed how Siyayumbu has been carrying out goat rearing, record keeping, shop management, and supplementation of baby porridge with produce from the garden. They also shared experiences on formation of safe motherhood groups, use of drama to disseminate information on health, and use of community gardens to support cooking demonstrations and feeding sessions for the under-five children.
 - **In Luangwa**, after an exchange visit to Siavonga, one community has diversified into growing bananas, a good cash crop, and have at least a two-lima field while others now grow protein-giving crops such as legumes. The NHCs continued sensitization on good feeding through cooking demonstrations for under-weight children which resulted in a reduced number of under-weight children compared to previous years.

Gender

HCP's goal is to facilitate the creation of an environment where men and women work together to achieve common and community goals. Workshops identified and reached consensus on male dominance, gender-based violence, lack of self confidence among women, lack of access to economic opportunities by women and the absence of male involvement in reproductive health matters. Participants generated a plan on how to address the identified issues, which was followed up by District Program Officers during supportive visits.

Gender review and re-planning workshops were held in Eastern, North-Western and Southern provinces. The objectives of the workshops were:

- To review activities undertaken since the district gender training of trainers' workshops
- To share new tools to help community trainers perform their work better
- To plan activities for community roll-out
- To promote team work among community trainers



Ms. Mary Banda of Chadiza district herding cattle, a predominantly man's role.

During the year workshops were held in eight provinces. Participants included 78 males and 79 females.

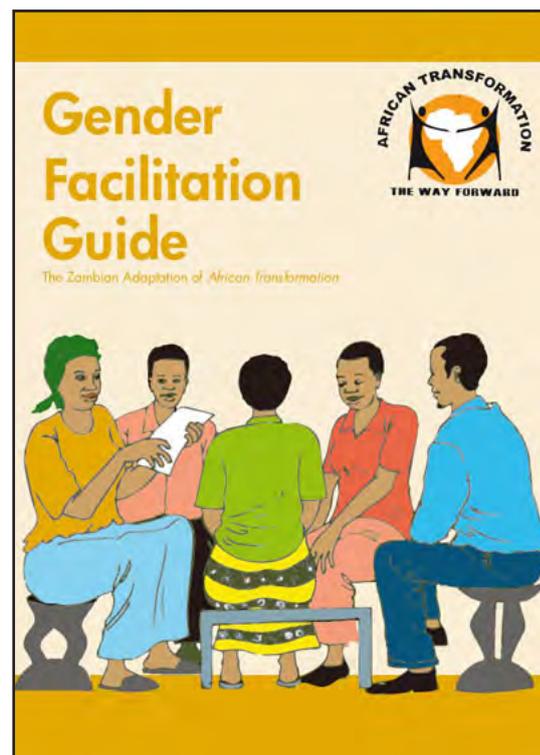
- **In Mpika**, there has been an increase in women taking decision-making positions in CBOs. The senior village headman for Katibunga, Mr. George Machiko, reported that during the last agriculture show three quarters of the exhibitors from our community were women which was not the case in the past. The women can now stand and talk in front of men which was considered taboo.
- **In Serenje**, Kalale Jackson from Chibale central NHC, said, "I thank the facilitators for coming up with topics on gender issues. I've realized that since time in memorial we've been treating our women like servants in our homes."

Radio Distance Education for PLHAs

Living and Loving

Most community radio stations (FCC in **Solwezi**, Breeze and Maria in **Chadiza**, Liseli in **Mongu**, Explorer in **Petauke**, Radio Mano in **Kasama**, Sky FM in **Monze/Choma** and Radio Christian Voice radio station in **Lusaka**) continued to air *Living and Loving* at no cost at all, altogether reaching over five million listeners. Free repeat airing of *Living and Loving* radio programs by community radio stations is a great partnership achievement and a positive indicator that local institutions are assuming responsibility to own and sustain this type of community program.

The airing of *Living and Loving* in English, Lozi, Kaonde and Tonga, and Nyanja provides PLHAs and caregivers with information that will help to lead positive lifestyles as well as equip caregivers with information to take care of people suffering from AIDS.



Action for Health with Sister Evelina

The 26-episode reality radio program, *Action for Health with Sister Evelina*, continued to be broadcast on national and community radio stations. Behavior change messages targeting NGOs and CBOs and encouraging community action were aired on local radio stations and ZNBC in English and five local languages (Bemba, Nyanja, Tonga, Kaonde, and Lozi). Re-broadcast of *Sister Evelina's* 26 episodes also commenced on all the contracted radio stations.

Sister Evelina guides have been distributed to the listening groups in all the 22 HCP districts, at 102 per district.

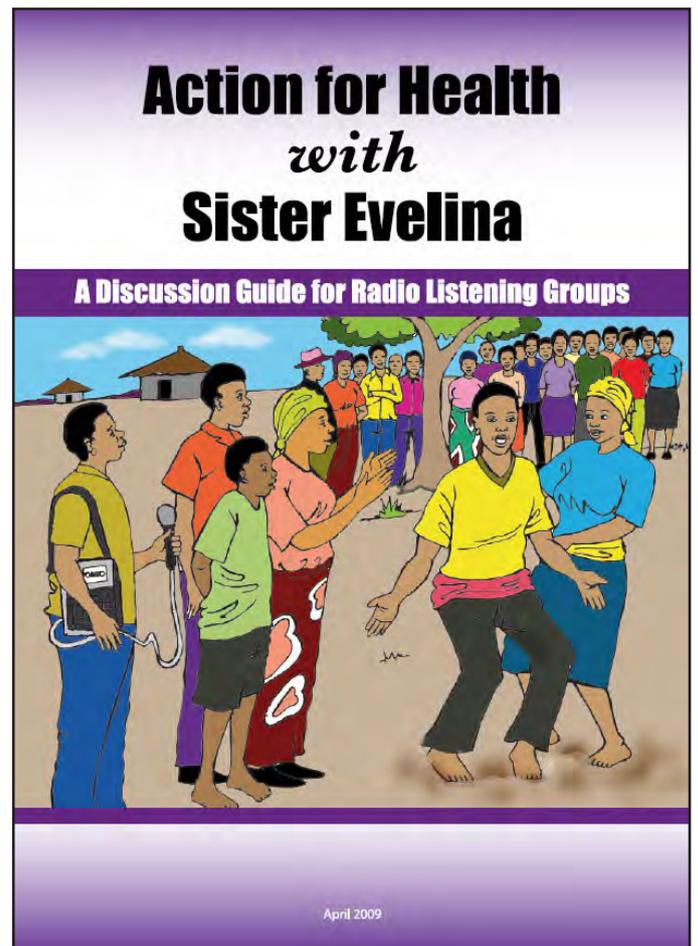
Radio listening groups were monitored by the HCP district program officers during ongoing mentoring and support to NHCs.



A radio listening group gathers to hear *Action for Health with Sister Evelina*.

Community health radio programs are having positive impact on the community and individuals by building capacities, knowledge and skills gained through the sharing of success stories and relevant experiences.

- **In Mpika**, the NHC chairperson in Mpumba, said, "We have learnt a lot from Sister Evelina. For example, the [episode] on community banking in Chongwe where an NHC bought a tricycle from community contributions, was very inspiring. We as Tubondo NHC have decided to emulate them and we have started making contributions to establish an emergency transport system in our community."
- **In Kalabo**, headman Namaseka from Mbunde NHC said, "We have learned a lot and we are still learning from Sister Evelina radio program. The NHC members are doing a lot in the catchment area. They travel to the listening groups they have established in the villages with the bicycle given to them by HCP. At first my people used to put too much chlorine in their water and the water was bitter. As a result they stopped putting it in. But after listening to the program, and following what they were teaching by putting the right dosages, they are now happy and there is a demand for more chlorine from people."
- In **Kazungula** district, the program manager for Mosi-o-Tunya Radio has introduced a phone-in program to get feedback from the listeners of Sister Evelina programs.



Development of Community/Folk Theater for Health Promotion

Drama continued to be a useful tool in social mobilization and dissemination of health messages, which included water and sanitation, cholera, child health, malaria, child abuse, wife battering, and road construction.

The number of community members reached by the drama performances significantly increased to 155,148 adults from 78,342 last year. The increase is partly attributed to the refresher trainings and continued support from the HCP District Program Officers.



A theater performance in Mansa.

500 drama toolkits developed by RAPIDS and HCP were distributed to active drama groups in all the 22 districts supported by HCP. Each district received between 20-40 kits depending on the number of active drama groups.

The following organizations and individuals were reported to have employed the services of the drama groups across HCP districts:

- District Health Offices
- District AIDS Task Forces
- Southern Water and Sewerage Company
- Zambart TB Project
- Mukinge AIDS Prevention Project (MAPP)
- GTech – German-funded project
- The Anti-Corruption Commission
- The Electoral Commission
- Christian Children’s Fund
- Churches Health Restoration Project (CHReP)
- Corridors of Hope
- United Church of Zambia
- Oxfam
- Centre for Infectious Disease Research in Zambia
- MARCH project
- Home-based care groups (under Catholic Relief Services)
- Chitulika and Chilonga high schools
- Her Royal Highness, Chieftainess Malembeka of Mpongwe
- Zambia Prevention Care and Treatment (ZPCT)
- Comprehensive HIV AIDS Management Program (CHAMP)
- Society for Family Health – New Start Center

Malaria

Behavior change communication (BCC) orientation workshops were planned for health workers and malaria task force members to help health center staff and malaria task forces to identify negative behaviour patterns that hinder the uptake of malaria interventions; to build participants’ capacity in planning, implementing and monitoring and evaluating behaviour change communication; and to orient participants in using the malaria behaviour change communication toolkit.

Community support funding for malaria BCC was planned for 31 districts. The target groups for the community support funds are NHCs, CBOs, women's groups, and malaria task forces to mobilize and enhance community participation and involvement in locally initiated and managed malaria BCC activities.

Additionally, Information, Education and Communication materials such as posters, flyers and notices to reduce malaria transmission were distributed to 31 districts, and funded behaviour change communication activities World Malaria Day were monitored.

Malaria Task Force (MATF)

The idea of a Malaria Task Force is based on the assumption that the public sector stands to benefit from the human and material resources of the broader community to achieve its goals. The objectives for all Malaria Task Forces are uniform: to involve stakeholders in the coordination, planning, implementation, advocacy, monitoring and evaluation, in collaboration with the District Health Management Team, to reduce the burden of malaria; and to reduce malaria incidences for all ages.

Malaria Task Forces have been responsible for a wide range of preventative activities: setting up mobile Rapid Diagnostic Test units to reach disparate villages; raising awareness with commemorative days; organizing parades and performances to celebrate the launch of Indoor Residual Spraying.

All 22 HCP districts and nine non-HCP districts received technical support for Malaria Task Forces (MATF) and all the districts covered appreciated the MATF performance assessment tools.

- **In Mkushi**, Dr. R. R. Mwanza, District Director of Health said, "We thank HCP for initiating the formation of the MATF and bringing stakeholders together. Ministry of Health cannot fight malaria alone but, with input from the partners, we can reduce malaria cases by a big margin."

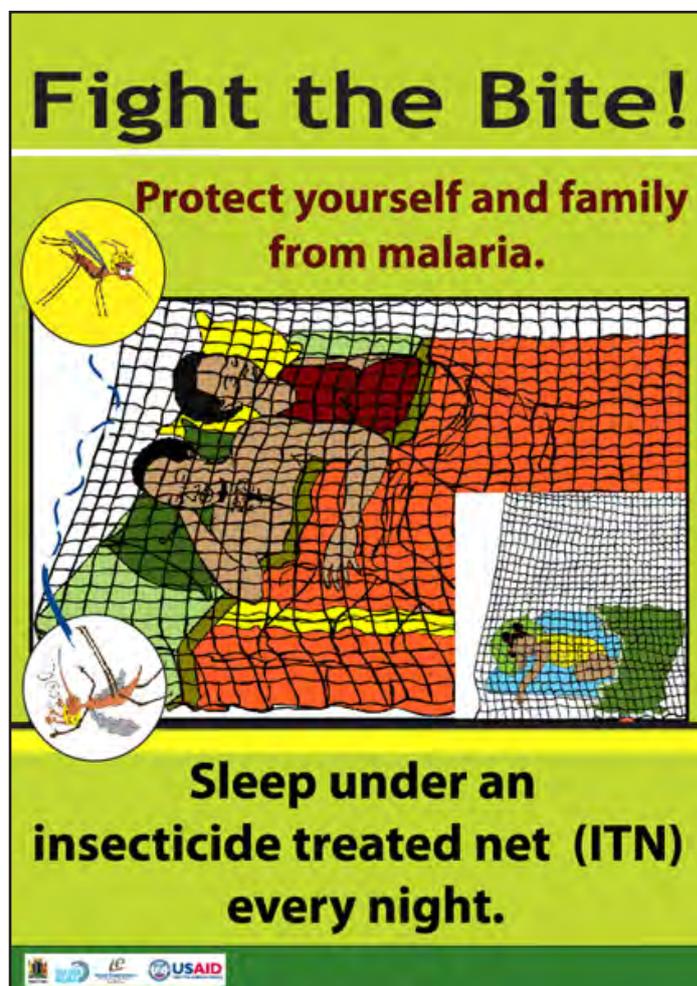
Community Health Information Cards (CHIC)

Educating Each other on Healthy Living

Community Health Information Cards provide community volunteers with a comprehensive set of tools for discussing health topics with their communities. The large A3-sized cards are divided into five separate flip charts, each focusing on a different health topic: HIV and AIDS, Malaria, Child Health, Reproductive Health, and Community Concerns. The side facing the presenter has a detailed outline of how to discuss a particular topic and key points to cover, while the side facing the audience shows an illustration. This gives all parties a simple way to understand the health issues discussed and allows for easy participation.

Created in the final year of the project, 3,500 sets were printed and distributed to NHCs and CBOs in all 22 districts where HCP works.

- **In Mkushi**, Denny Miswalo of Chanfuko Upper NHC commented, "I find the CHIC material easy to use because as I am talking to community members I also refer to the booklets for facts. This has created a lot of confidence in me. I thank HCP for providing the information kits."



Bicycles

A total of 220 bicycles were distributed in 18 HCP districts for *HEART Life Skills* facilitators. The facilitators also received bags and T-shirts. The distribution of bicycles, T-shirts and bags to *HEART Life Skills* facilitators has been a motivator for youths who have been extremely active during this quarter, and has encouraged others to be role models.

Zambulances

A Zambulance is a bicycle-driven ambulance with a covered platform used to bring people to the clinic who cannot walk there, particularly pregnant women. 144 Zambulances were procured this

year to supplement the effort being made by communities to improve maternal and child health. With Zambulances, pregnant women can be transported for check ups and other preventative services, in addition to medical emergencies.



Strategic Approach 2 – Leadership

Faith-based, traditional, and *de facto* leaders (and organizations) adopt key evidence-based strategies for improving health and social outcomes in Zambia.

Approach

This strategic approach targets leaders at all levels – youth opinion leaders, traditional leaders, faith-based leaders, and local community leaders such as teachers or persons leading initiation rites, or pre-marriage counseling. While some of these activities began with a national launch, the focus of this strategy is on people who are key influencers of opinion at an individual or community level.

HCP districts held quarterly leadership meetings where the various trained cadres shared their experiences, reported on activities and aired their concerns to relevant authorities. The meetings were attended by trained psychosocial and associate counselors, youth peer leaders, uniformed personnel, drama artistes, NHC members, DHMT staff, District AIDS Task Forces, council authorities and other NGOs.

Accomplishments

Care and Compassion Movement

The *Care and Compassion* movement engages religious leaders to reduce stigma and discrimination for people living with HIV and AIDS (PLHAs). Radio and TV spots have been developed featuring PLHAs, pastors, and imams. Related activities included training for religious leaders using religious teachings as a basis for sermons and behavior change messages around HIV testing, stigma reduction and care and support for PLHAs.

To support activities a *Care & Compassion Toolkit* was developed which included posters, call to action brochures, 'Compassion' badges, and an HIV and AIDS Fact Book, a sermon guide, and the HCP videos *Tikambe* and *Mwana Wanga*. The process brought together key leaders and facilitated discussions around issues of HIV.



Radio spots were broadcasted on ZNBC and community radio stations in English plus seven Zambian languages, with TV spots on ZNBC. 1,000 posters, 12,000 badges, 500 CDs, and 150 toolkits were distributed to religious leaders.

- **In Serenje**, Reverend Mukangasa, a psychosocial counselor of the Baptist Church had this to say: "I am proud of the knowledge I have in counseling because of the training I acquired from HCP, and I will remain using the counseling knowledge on HIV/AIDS and the related ailments for the improvement of my congregants and the general public. I only wish HCP was still going to be around for the next two or more years."

Associate Counselors – Counseling and Testing

Trained psychosocial and associate counselors continued to reach out to their congregants with behavior change messages including *VCT*, *ART*, condom use and positive living through sermons, couples and individual counseling sessions. The number of people reached this year was 70,797 compared to 66,367 in year four. The increase was partly a result of inviting the counselors to quarterly leadership meetings, held in 19 districts. Transportation was also eased because of the bicycles that some counselors obtained from HCP. These bicycles were given to peer leaders to be used for greater outreach.

With an eye towards sustainability, after training all associate counselors were attached to DHOs and rural health centers so that they could continue with their activities even after HCP closed down. In addition, Zambia Prevention Care and Treatment (ZPCT) and Africare took on counselors.

Uniformed services peer-leaders reached a total of 7,021 this year through counseling of peers and group activities in five HCP districts.

- **In Choma**, the headman of Kanaisi Village had this to say after the meeting for local leadership at Bwana Mkubwa RHC, "HCP has taken the best approach by explaining to the headmen the importance of them being in the forefront of spearheading health programs unlike other programs who go to the villages and start writing names of orphans without the headman's involvement. This is the greatest reason why headmen have not been supporting such health programs because they never understood them. To me what HCP is doing is a true testimony and an indicator of positive change."

Strategic Approach 3 – Youth

Youth make positive life choices and contribute to improved health within their families and communities.

Approach

HCP focused on developing a more resilient generation of youth with the ability to make positive life choices. To achieve this, youth are empowered with the necessary information and skills to practice positive reproductive health behaviors, facilitate the development of respectful, gender equitable relationships between young men and women, transform them into leaders who mobilize their peers, and increase their use of available reproductive health services.

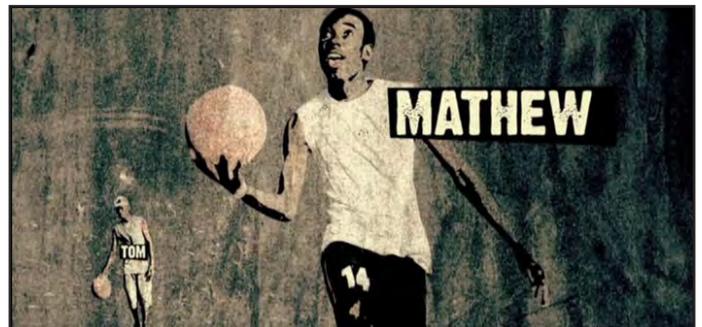
Accomplishments

HEART Life Skills Toolkit

Trained *HEART Life Skills* youths in 19 HCP districts reached 182,430 peers with messages on HIV prevention and stigma reduction, compared to 75,276 in year four. Reasons cited for the increase included refresher courses for the youth peer leaders; inviting youth leaders to quarterly leadership meetings; the ease in transportation resulting in the coverage of longer distances because of the bicycles donated by HCP to the youth leaders; and taking advantage of special occasions in the districts.

Notable occasions that were taken advantage of were in **Kasempa** and **Serenje**. In Kasempa, the youth leaders took advantage of the Nsomo Traditional Ceremony and the District Agriculture Show to reach out to youths. During the Nsomo, matrons and patrons of AIDS clubs facilitated the inclusion of their pupils to make presentations on HIV/AIDS. In **Serenje**, a youth variety show was organized by the youth leaders with the support of HCP. At this show, youth activities were displayed including a competition on assessing the level of knowledge on HIV/AIDS; the importance of VCT; avoiding stigmatization; and the advantages of male circumcision in the prevention of HIV/AIDS. During the same variety show and fair, HCP videos on *Tikambe* and *Our Family Our Choice* were shown. This enhanced the knowledge of youths on voluntary counseling and testing, family planning and PMTCT.

The Johns Hopkins University Center for Communication Programs (JHUCCP) received funding from the United Kingdom's Department for International Development and the United Nations Population Fund to develop a mass media HIV prevention campaign to promote abstinence and condom use among Zambian youth and to develop a male circumcision magazine for Zambian men. HCP will partner on the campaign under the HEART program.



Still shots from HEART campaign TV spots.

- **In Chongwe**, at the district handover meeting, the district coordinator for Australian Partnership with African Communities program under the Christian Children's Fund (CCF), Mr. Wilbroad Kampolwa, announced that his organization has adopted the *HEART Life Skills Toolkit*. He added that CCF trained 30 *HEART Life Skills* peer educators during the year under review in all the CCF project sites in Chongwe and Kafue districts and all these trained youths were given *HEART Life Skills Toolkits* that CCF procured following HCP's advice. Mr. Kampolwa shared that as a result of the impact of *HEART Life Skills* training in CCF sites in Zambia, use of the *HEART Life Skills Toolkit* has been adopted by CCF Uganda and CCF Australia.
- **In Mkushi**, Ricky Tongatonga, a youth trained in *HEART Life Skills*, said, "Apart from encouraging me to report regularly, these meetings create an avenue for sharing experiences and challenges with other community-trained agents like the psychosocial counselors and uniformed peer leaders. I copy what is good from them and have improved in dealing with the challenges."

HEART Campaign

Four TV spots and eight radio spots promoting abstinence and condom use among youth were produced and pre-tested with target audiences. The spots were also vetted with stakeholders, the Ministry of Health and the National AIDS Council. In addition, four types of comic books and four posters carrying similar messages to the TV and radio spots were designed and printed. In total, 5,000 comic books and 4,000 posters were distributed through youth organizations and health centers. Radio and TV spots were translated and aired and print materials were distributed. A launch concert for the campaign was organized by Africa Directions on September 26, 2009 at the National Sports Development Council. The deputy Minister of Sport, Youth and Child Development presided over the event, which was covered by MUVI TV and ZNBC as well as local radio stations and newspapers.

Creative HEART Contest

The *Zambia Creative HEART Contest* was developed as a way for communities to engage youth in addressing the health challenges they face, to model positive adult-youth communication, and to develop resiliency and self-efficacy in the participants through positive learning and creative experiences. The specific goals of the contests are:

- Building stronger adult-child relationships by encouraging better communication around HIV and AIDS, reproductive health, and other sensitive or community issues;
- Building self-esteem, assertiveness, and critical thinking skills;
- Promoting delayed sexual debut;
- Encouraging critical thinking about all health and social issues affecting themselves, their families and communities;
- Encouraging critical thinking about traditional practices that negatively impact HIV prevention and other health issues as well as gender roles;
- Encouraging youths to reflect on how to maintain healthy relationships with members of the opposite sex; and
- Helping youths perceive personal HIV risk.



Nine district contests were held in 32 zones and reached 256,688 youths.

The contests were organized and supervised by the District Youth Advisory Group, drawing membership from:

- District Education Board Secretary's Office
- Ministry of Health and District Health Office
- NGOs with a district presence
- National Theater and Art Association of Zambia (NATAAZ)
- Youth organizations
- District AIDS Task Force
- Community members

The role of the committee was to orient the teachers and parents in the participating zones. The committee also spearheaded the monitoring of the zonal contests including data collection and message gate-keeping, and oversaw logistics such as prizes, food and beverages.

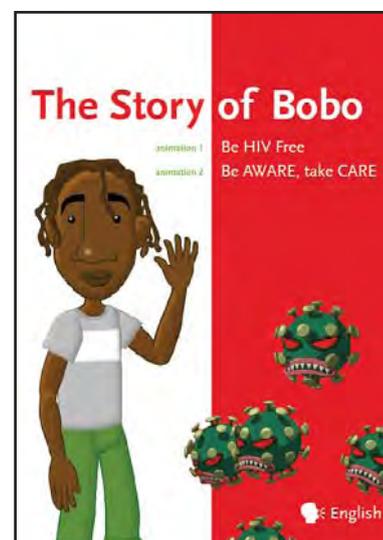
Parents, teachers, and pupils were given an opportunity to contribute contest themes that reflected the pupils' communities, in addition to the ones in the booklet. As a result, issues of child abuse, defilement cases, and harmful traditional beliefs and practices that increase the risk of contracting HIV were addressed through drama, debate, poetry, and songs. Prizes were awarded to first, second, and third place winners. As stakeholder participation increased, so did donations of prizes, transportation of pupils, provision of meals, venues and boarding space.

- **In Chongwe**, as a result of the Zambia Creative HEART contest access to voluntary counseling and testing services by pupils in Chongwe schools has increased; pupils promoted the importance of antenatal and male involvement in reproductive health issues through drama and other arts; incidence of child sexual abuse was curbed when the community took affirmative action; and communication between pupils in Chongwe schools and their parents has improved.

The Story of Bobo

The Story of Bobo is an animated film that educates young people on HIV, ART, and the importance of adherence. The first story, *Be HIV free*, tells how the HIV virus works inside the body. The second story, *Be AWARE, Take CARE*, shows what happens inside your body when you do not take your ARV medication on time.

Adapted to seven Zambian languages in addition to English and aired on ZNBC for TV. 1,700 DVDs were also distributed to health centers and NGOs.



Strategic Approach 4 – Message Harmonization

Behavior change communication strategies and activities are prioritized, coordinated and harmonized in support of GRZ and USAID Zambia-identified health priorities.

Approach

HCP works to harmonize and prioritize health communication messages so that those shared through a variety of communication channels are consistent and support community led dialogue and problem solving.

Accomplishments

Cross-Cutting

Rhythm of Life music and arts festival and health fair



Main stage at the Rhythm of Life Festival in the Lusaka Showgrounds.

Rhythm of Life was Zambia's first combined music and arts festival and health fair. The Ministry of Health was a key partner in the day-long celebration. *Rhythm of Life* was designed to bring free preventive health care information, counseling, testing and referral services on a range of health issues to Zambians in both traditional and entertaining ways such as music, drama, film, dance and art. HCP worked with a range of partners in the field of public health, the National Arts Council, as well as a variety of performing artists to make this possible. (For more on this, see "HCP Stories" on page 25.)

Journalist Competition and Training

Since its inception in 2004, HCP has worked closely with community radio stations and other journalist partners. New and emerging health issues as well as some other important, not-so-new issues need more attention from the press to bring them into public view. This year, HCP solicited applications from print, television and radio journalists, including community radio stations, from around the country for a three-day health and media skills training program. A panel of media experts selected the top 40 participants based on their interest and track record in health reporting as well as samples of work that they submitted. The selected journalists were invited to the media training workshop, the goals of which were:

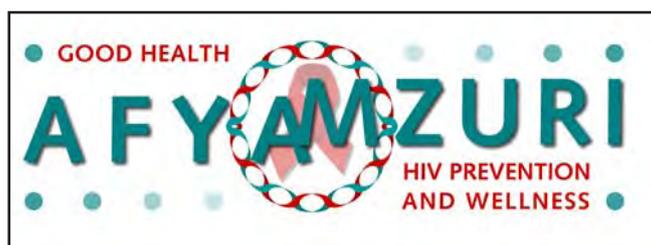
- To orient radio, print, and TV journalists to the following health issues:
 - Male Circumcision
 - Multiple and Concurrent Sexual Partners
 - Pediatric HIV/AIDS
 - Family Planning
 - Malaria
- To outline tips and elements of good health reporting, including the use of human interest stories to help explain and highlight key health issues
- Share samples of "quality reporting" in print, radio, and television.
- To announce the competition and the guidelines

The training was conducted from April 20 – 22, 2009 at the Chrismar Hotel, using technical health experts as well as radio, television, and print experts for production expertise. For the competition, 11 print, five radio and seven television entries were received. These were reviewed and judged by an independent panel of judges. There were an insufficient number of television entries to make a decision; hence no prize was awarded in that category. The winners of the radio and print category prizes were announced at the *Rhythm of Life* music festival and awarded by the US Ambassador and the Deputy Minister of Health during the live ZNBC coverage of the event.

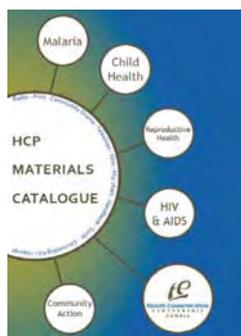
Many of the articles received reflected elements of the training and new information journalists had received. Increasing the 'noise' around these key health issues is an important part of the process of bringing greater attention to them. The general standard of media reporting continues to be a challenge. While there are small (but important) improvements in the quality and quantity of health reporting, it still falls far short of what would be ideal for health dialogue and increasing public awareness around key health issues.

Dziwani Knowledge Centre for Health – Afya Mzuri

Afya Mzuri, a local NGO, has been selected as the clearing house for HCP materials beyond the life of the project. Before, there was no such facility resulting in institutional memory loss and duplication of efforts when new projects came in place. In connection with this and to enhance the capacity of Afya Mzuri's resource centre, HCP has provided technical assistance to build Afya Mzuri's electronic information management and database systems to log, track and manage simple and complex information that can be accessed by all registered users for free. The resource centre, that has been newly named Dziwani Knowledge Centre for Health, was formally launched on October 21, 2009. This database has the ability to go online and be searched online by members.



HCP Materials Catalog



All the materials produced by HCP between September 2004 and December 2009 are presented in a catalogue that provides an overview of the material, its audience, purpose, distribution, and partners involved in production. The high quality, accurate communication materials produced by HCP were developed through strategic design, research, pre-testing and input from key stakeholders as well as the intended audience. While they have been largely disseminated through the HCP Zambia project, they can be reprinted, disseminated, or re-broadcast through the Afya Mzuri resource center (resourcecentre@afyamzuri.org.zm), a partner NGO with whom the soft and hard copies of the materials will reside after the project closes.

Research and Dissemination Day for Close of Project

The preliminary findings of the HCP endline survey and the highlights of all the interventions HCP has done over the past five years were disseminated in a presentation and exhibition at the Taj Pamodzi Hotel on September 2, 2009. This half-day dissemination was attended by about 250 people representing the government of Zambia, US government partners, donor agencies, implementing partners, partner NGOs, HCP field staff and others.

Two new courses at UNZA on Behaviour Change Communications

In line with building institutional capacity in Zambia for better strategic health communication, HCP Zambia, along with the regional AfriComNet initiative, has been working with the School of Humanities and the Institute of Economic and Social Research at UNZA to initiate two short courses that will be based on a regionally developed and pre-tested curriculum, adapted for Zambia.

One course is *Using DHS Data for Health Programming* and another is *Strategic Communication for Health*. A memorandum of understanding between UNZA and AfriComNet is currently being negotiated and will be signed soon. It is hoped that these two courses will be offered annually both to students and to mid-career professionals in Zambia as well as the region. The course fee of 2 million kwacha per student will cover the costs of the courses, making them sustainable.

Additionally it is hoped that these are the first of more courses that could eventually add up to a diploma or degree programme in health communication. Eleven interdisciplinary senior academic staff drawn from HSS and INESOR are currently involved in the course and have been trained in facilitation skills.

Sign Language Poster for the Deaf

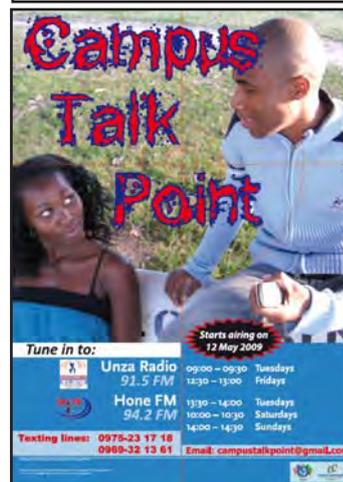
In conjunction with the *Zambian Association of People Living with Disabilities (ZAPLD)* and the *American Peace Corps*, HCP developed and printed a sign language poster tailored to *Zambian health needs*. 5,000 posters were distributed through ZAPLD and Peace Corps.



Campus Talkpoint Radio show with Evelyn Hone College and UNZA

University-going students are often a neglected population in public health programming. Partnering with Evelyn Hone College's *Hone FM* radio station and the University of Zambia's *UNZA Radio*, HCP embarked on a 16-part, 30-minute, weekly radio program called *Campus Talk Point*. This innovative show was designed to answer common health questions asked by university students.

Topics include HIV prevention, male circumcision, multiple and concurrent sexual partnerships, malaria, mental health, depression, stress, family planning/reproductive health, etc. Programs include expert interviews on the topics as well as opinion pieces and *vox pops* from students on the relevant issues.



Students participated through SMS, email and write in questions (drop boxes are located on UNZA and Evelyn Hone campuses) each week. These questions are answered in the following week's episode. Each episode consists of *vox pops* and human interest stories from college students related to the topic of the show as well as an expert panel who answer the questions. Listeners who submit questions through 'drop boxes', email, and SMS are entered into a weekly prize draw. University students helped conceptualize the show and are working on the production as a practical lesson in media and health communication.

Your Health Matters

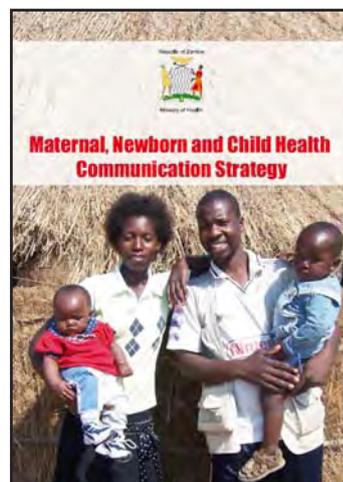


Your Health Matters is a popular prime time TV show, integrated into the news, that addresses a range of health issues. HCP produced 13 episodes of 10 minutes each on a variety of topics including male circumcision, multiple and concurrent partnerships, family planning, pediatric HIV, and malaria.

Maternal, Newborn, and Child Health

MNCH Communication Strategy

After months of work with the Ministry of Health's various departments that have an interest in the strategy, consensus was reached and the final draft of the MNCH Communication Strategy, developed with support and technical assistance from HCP, was printed. This is an exciting and important accomplishment as this document can serve as a blueprint for communication interventions and materials in this health area, paving the way to more consistent and correct information as well as coordinated approaches that are technically sound and relevant.



Integrated Reproductive Health

National Family Planning Campaign

This campaign for TV, radio, and print includes three spots set in a rural environment, where fertility rates tend to be much higher. *Everyone's Choice* targets married women and focuses on the benefits of family planning while addressing common misconceptions. *Be a Man* targets married men and focuses on the benefits of family planning and the fact that men should support their wives in this effort. *Are you ready for it?* targets younger married couples and models how a young woman can approach a provider and her husband to get more information and support for family planning, respectively. The spots are supported by posters, take home materials for clients distributed by health facilities, and 'Ask me about family planning!' buttons for health providers that display the national family planning logo.

TV and radio spots are in English plus seven Zambian languages. 5,000 of each of four posters were distributed to health facilities, and 12,000 badges were distributed to service providers.



Malaria

National Malaria Communication Campaign

Production of the four animated malaria short films featuring *Annie* the anopheles mosquito in English plus seven Zambian languages is now complete. The National Malaria Control Centre, in partnership with the Malaria Control and Evaluation Project has already begun airing the short films on ZNBC and private broadcasters.

HIV/AIDS

The *Edukator* board game has a unique approach to address issues around HIV and AIDS. Targeting youth of 11 years and older, it presents information in a fun and entertaining way, making it easy to play even in cultures where readership is low.

2,500 games have been distributed to youth peer educators.



Male Circumcision

Men's Health Kit

This illustrated counseling tool for health providers integrates a broad range of men's health issues, along with those relevant to women's and family health, while maintaining a focus on male sexual and reproductive health and men's participation in family health. Some of the topics covered include male circumcision, family planning, multiple and concurrent partnerships, alcohol abuse, domestic violence, malaria and maternal and child health. The counseling kit is comprised of a reference manual and a flipchart. The reference manual is designed for use by the health provider when he is in need of further information. The flipchart is designed for use by both provider and client during a consultation.

13,000 sets of the *Men's Health Kit* have been distributed to date. The Health Promotion Unit at MOH has heaped praise on the *Men's Health Kit* and wants to work with HCP to develop a half-day orientation package for health workers to be tacked onto existing MOH trainings. MOH will also distribute remaining copies of the *Men's Health Kit* to health posts, district hospitals, tertiary hospitals and general hospitals.



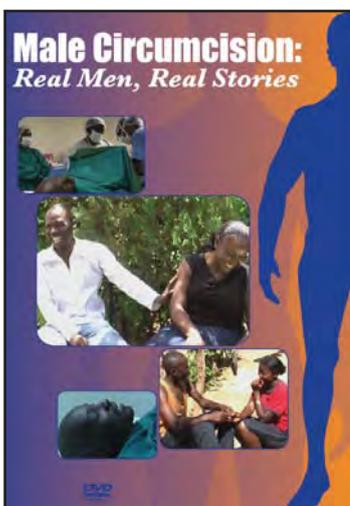
- **In Petauke**, the health centre in-charge for Manyane RHC, Mr. Sakala said, "At least now you have brought us publications specifically for men; we are using the flipcharts to sensitize male leaders so that they too use the *tips* on the community at large."
- **In Kasempa**, Butemwe Kimbaila from Central NHC in Kankolonkolo said, "At last a document that is able to talk about the male health component has been made available to us. Most of the materials focus on female health, but this document has so much information on the male aspect."

Men's Health: Understanding Male Circumcision

Men's Health: Understanding Male Circumcision provides detailed information about the benefits and risks of male circumcision in the context of HIV prevention, in a simple and well-illustrated format. The booklet is designed to assist men in making an informed decision about whether or not to be circumcised, while emphasizing the continued importance of comprehensive HIV prevention, including abstinence, partner limitation, and correct and consistent condom use.

In English with key words translated, 10,000 copies were distributed through UNFPA, DFID, and ZCCP.

Male Circumcision: Real Men, Real Stories



Male Circumcision: Real Men, Real Stories is a documentary that chronicles the experiences of two Zambian men from different socio-economic backgrounds as they seek counseling and undergo male circumcision for HIV prevention. The film combines documentary footage with strategic re-enactments and interviews with men and their partners. The protagonists discuss their motivations for seeking male circumcision, their concerns leading up to the procedure, their experience with the service and their quality of life following male circumcision.

The film conveys the benefits and risks of male circumcision and the importance of comprehensive prevention while addressing common myths and misconceptions about male circumcision. 150 videos in English, plus seven Zambian languages, were distributed to health facilities and partner NGOs as well as ZANIS Mobile Video Units.

Pediatric HIV and AIDS

Pediatric ART flipchart

The Ministry of Health and key partners working with children and HIV identified the gaps in communication that exist, creating barriers to children testing, accessing ARV treatment, as well as adhering to this treatment and living positively. One gap was the need for a teaching tool which would help counsellors and health workers. This flipchart was collaboratively developed by HCP and the Elizabeth Glaser Paediatric AIDS Foundation (EGPAF). HCP has printed 10,000 copies of this teaching tool that has been officially endorsed by the Ministry of Health. These flipcharts will be distributed to ART sites around the country (private and public) through CIDRZ, EGPAF, ZPCT, CARE International and Afya Mzuri beginning next month. With this



well-illustrated counselling tool, more caregivers of children living with HIV are expected to be reached with correct and consistent information that is necessary for the well-being of the children.

Multiple, Concurrent Sexual Partnerships (MCP)

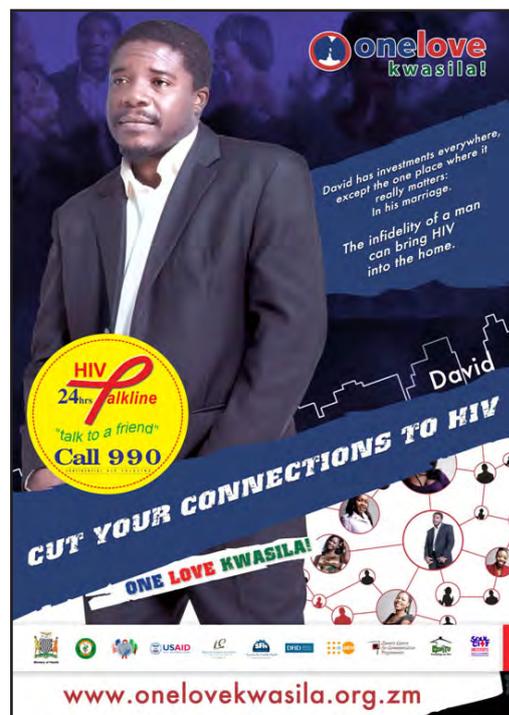
One Love. Kwasila! / Club Risky Business

Zambia's first national multimedia campaign addressing multiple and concurrent sexual partnerships (MCP) has generated an impressive following among Zambians.

Club Risky Business: The 10-part entertainment-education TV series at the heart of the campaign has developed a popular fan following. HCP Zambia's endline survey conducted in July, 2009 found impressive exposure to the campaign. One thousand DVDs and accompanying discussion guides have been produced. Various partners, government agencies and private corporations have expressed eagerness to use *Club Risky Business* as a tool in their HIV prevention programs. *Club Risky Business* has also been screened at international meetings, which has generated interest in adapting the film or the story in other African countries. The show was also presented to staff at USAID headquarters in Washington, DC.

Other elements of the multi-media campaign included:

- A Facebook fan page
- Animerts: Animated TV spots aired alongside Club Risky
- Radio Spots based on the animated TV spots
- The campaign website (www.onelovekwasila.org.zm)
- Talk Shows: Nine weekly 10-minute segments on ZNBC's popular Mid-Morning Show
- SMS Competition & Campaign
- Buses were branded in Lusaka, Livingstone, Kitwe and Ndola with temporary vinyl stickers. Ultimately, 44 inter-city buses, 157 intra-city buses and 36 bus stops in Lusaka and 55 intra-city buses in Kitwe were successfully branded.
- Music Video: a campaign theme song and music video were produced featuring popular Zambian musicians Slap Dee, Ruff Kid, P Jay and Choklet.



Expanded Treatment and Care

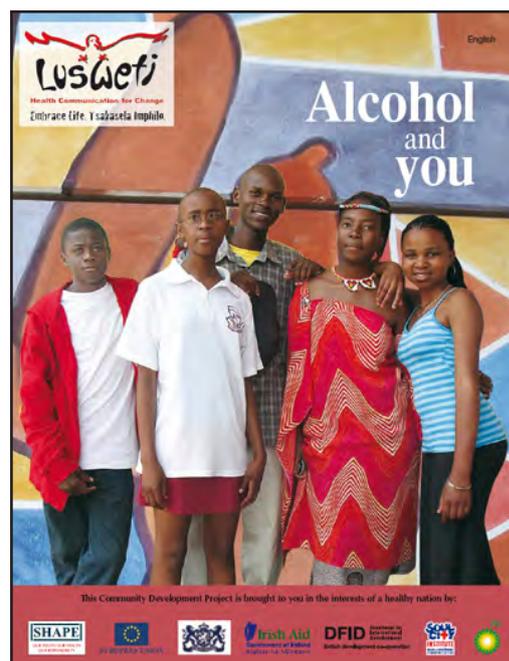
Alcohol and HIV

Alcohol Film and Booklet

Following the PEER research conducted in 2007 by HCP on alcohol as it relates to risky sexual behavior, results were disseminated in Chongwe district where the research was done. The reception among district stakeholders was overwhelmingly receptive. Inspired by this, the results were disseminated in year five in 21 HCP districts. One of the emerging needs was for tools that would help communities start to engage in discussion. A film was requested as well as print materials.

In response, HCP worked with SHARPZ, a Zambian NGO that tackles alcohol and drug-related harm-reduction and substance abuse to develop a short film (30-minutes) that provokes discussion around alcohol and risky behavior. Additionally, HCP and SHARPZ worked with ZCCP to adapt a regionally-developed booklet by Soul City, *Alcohol and You*, to the Zambian context.

Since this package is coming together at the end of the project, its use cannot be carefully managed and depends on partners and a future project. Mechanisms should be put in place to ensure that follow-on projects build on this initiative.



Cover of the Swaziland edition of the booklet to be adapted to the Zambian context.

Support to National Communication Strategies/Message Harmonization

HIV Talkline

990 Talkline/CHAMP

The free CHAMP 990 counseling talkline has not had much publicity in recent months from television, radio or print promotion. In response, HCP helped raise the profile of the 990 talkline at the Agricultural Show in August 2009. 8,000 copies of six types of brochures on a range of issues including VCT, PMTCT, prevention and others were printed, along with 15,000 copies of four types of posters promoting their services. Banners, display materials and other promotional materials have also been developed. All of these were distributed nationwide in September. Additionally the following materials were distributed and aired:

- 990-circle for vehicle tax discs
- Bumper stickers
- Radio spot in English + 7 Zambian languages
- TV spot in English

Airtime for the TV and radio spots will be paid for through the arrangement HCP has with ZNBC (basic + value added time) through the end of November.

HIV 24hrs Talkline
"talk to a friend"
Call 990

FREE HIV & AIDS RELATED SERVICES AVAILABLE!

Call free on

- ▶ Counselling
- ▶ Referral to VCT services near you
- ▶ Information about combination HIV prevention:
 - Abstinence
 - Partner reduction
 - Condom use
 - Male circumcision
 - STI prevention and treatment
- ▶ Prevention of parent to child transmission of HIV
- ▶ Information and counselling on drug and alcohol abuse
- ▶ Information on where to report human trafficking
- ▶ Trained counsellors that speak vernacular

ell
Zambia Telecommunications Company Limited

USAID
HCP
IOM-DIM
Managed by CHAMP

Research, Monitoring and Evaluation

Research, Monitoring and Evaluation

Research was employed as a tool for informing programming on its strengths and areas of weakness through ongoing monitoring, formative and evaluative research. In this regard, a number of activities were implemented during year five.

Regular Monitoring

Activities of trained Neighborhood Health Committees, *HEART Life Skills* youth facilitators, drama groups, psychosocial/associate counselors, and uniformed peer educators continued to be monitored on a monthly basis. Monthly aggregation forms were submitted by HCP districts through the provincial offices.

Quarterly and Semi-Annual Reports

Quarterly and Semi-Annual Reports were submitted by program staff in 20 districts and Lusaka headquarters. These were consolidated and submitted to USAID.

Feedback to Staff

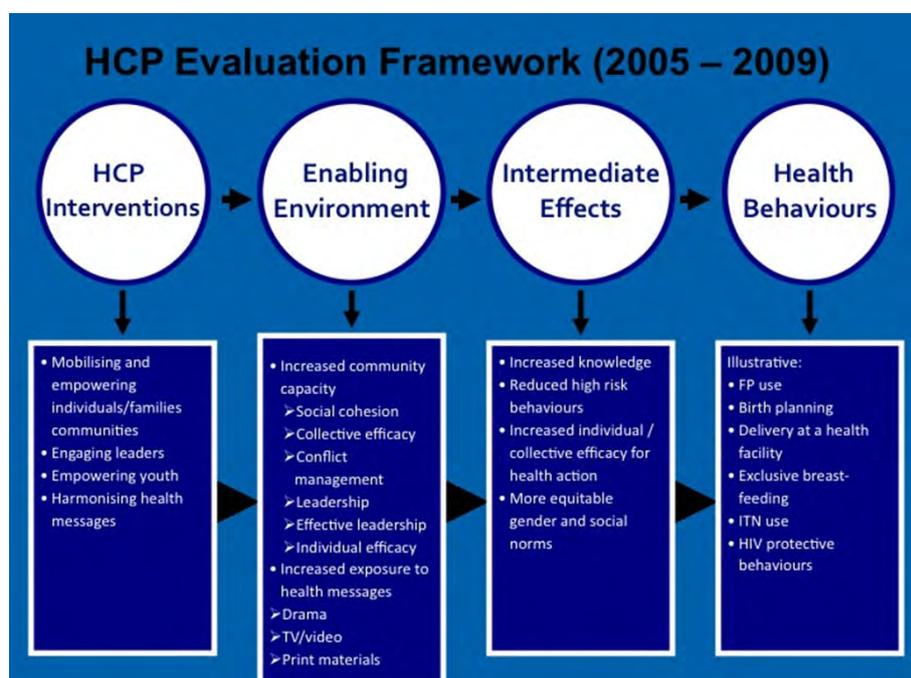
Staff were given feedback on their reports, including recommendations on how to further improve them. This was done through individual feedback and during staff retreats at the headquarters in Lusaka.

Endline Survey

An endline survey was carried out as the project draws to a close. The overall objectives of *Strengthening Community Capacity and Engendering Behaviour Change* was to evaluate the impact of HCP Zambia on efficacy, norms and health behaviors. The survey assessed whether individuals' knowledge, attitudes, efficacy, and health behaviors had improved during the project period of 2004 – 2009; whether individuals exposed to the project had greater knowledge and more favorable attitudes, efficacy, and behaviors than the non-exposed; and whether HCP project communities had improved community capacity compared to comparison communities.

The evaluation approach was to track Community Action Plan progress and achievements, document success stories, and field a quantitative survey.

A baseline survey was conducted in 2005 with a sample size of 3,000, while the endline survey in 2009 had a sample size of 4,000. One male and female respondent was surveyed from each sample household, with over 80% sample coverage rate. The design was stratified into intervention (where HCP directly implemented programs) and comparison districts, and urban/rural. The endline survey was fielded in 21 intervention districts with 13 comparison districts. Kalabo (22nd intervention district) was dropped due to flooding.



External evaluation was conducted by DCDM (Baseline), and Glow Consultancy (Endline). The endline survey used an innovative approach to measuring community capacity with community-generated capacity indicators which were identified, tested and validated. It was the first time a community capacity validated index was applied to a population-based survey. Indicators measured community perceptions of improved capacity and were triangulated by a checklist completed by external reviewers. Data was gathered by observation and interviews with NHCs.

Data Analysis

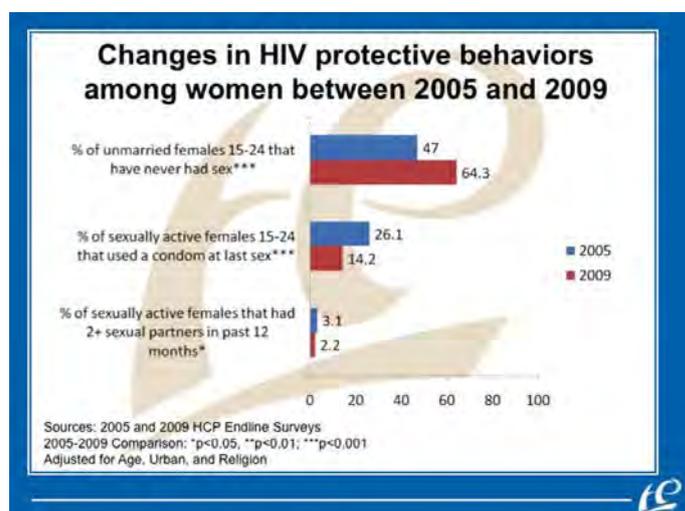
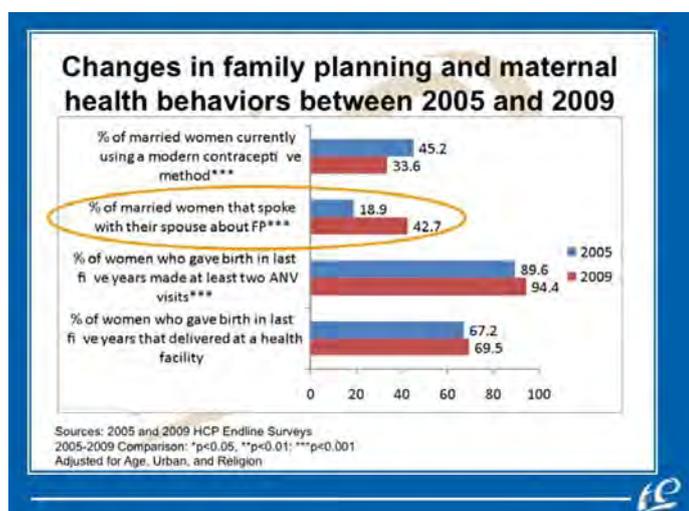
Priority indicators were compared to other national indicators: PEPFAR, ZDHS 2007, and Zambian National Malaria Indicator Survey. Data analysis mainly involved production of adjusted proportions, controlled for key background variables (province, rural/urban, age, education and religion), and was guided by the HCP Evaluation Framework.

Preliminary Results

Community Capacity was measured through six domains:

- Individual Efficacy
- Collective Efficacy
- Conflict Management
- Leadership
- Effective Leadership
- Social Cohesion

Significant change in 6 domains of community capacity was found in all intervention districts compared to comparison districts. HCP had significant reach in all 22 districts. In 1800 communities, 1341 action plans were developed, and 1063 communities completed at least one activity from their action plan.



Correlation was found between exposure to HCP interventions and behaviour change. Key pathways of attitudes and efficacy to behaviour change were identified. HCP successfully tested and validated community-generated capacity indicators to measure community mobilization outcomes. Community capacity was significantly strengthened in intervention districts.

HCP Stories

Rhythm of Life: move to a healthy beat!

"I personally felt proud to be a Zambian on Saturday. The feedback received so far has been overwhelming... making it an annual event would be a very good strategy for informing our Lusaka community and beyond – as seen on national TV broadcast – through music and art of key health issues."

These were the words of Lillian Mphuka, of the Health Promotion Unit at the Ministry of Health in Zambia, following Rhythm of Life, Zambia's first combined music and arts festival and health fair. The Ministry of Health was a key partner in the day-long celebration supported by the American people and implemented by Health Communication Partnership (HCP) Zambia. Rhythm of Life was designed to bring free preventive health care information, counseling, testing and referral services on a range of health issues to Zambians in both traditional and entertaining ways such as music, drama, film, dance and art. HCP worked with a range of partners in the field of



Partner health booths tent.

public health, the National Arts Council, as well as a variety of performing artistes to make this possible. Legendary Zimbabwean musician Oliver Mtukudzi headlined the day's concert alongside popular Zambian artists such as Mampi, Danny, Sakala Brothers, Angela Nyirenda, Maiko Zulu and Mozegater.

Over 12,000 people who were drawn in by the musical superstars, could not help but become part of the day's true theme: preventive health care. In addition to a wealth of information about preventing HIV and malaria, as well as VCT services, health activities included male circumcision counseling and referral, blood pressure and weight checks, and health quizzes with prizes. The event was absolutely free to the public so as to not exclude anyone from accessing the services or enjoying the day.

Based on information received from partner organizations, over 250 women accessed family planning, maternal and reproductive health counseling and/or services, over 450 accessed HIV counseling and testing services, and 400 people received counseling and/or referrals for male circumcision. In the medical tent run by the University of Zambia medical students, over 300 people accessed the blood pressure, weight, blood sugar and health counseling services. 185 had their eyes tested and 38 people donated blood. Partners working on malaria tested 310 people using rapid diagnostic tests. Five people tested positive for malaria and were referred for treatment. Many thousands more took home informational materials on a variety of topics.

Rhythm of Life included a health-themed art exhibit curated by renowned artist Mulenga Chafilwa that showcased the work of talented Zambian sculptors and visual artists. An all-day health-themed art competition for children was judged by a panel of prominent Zambian artists. The prizes for this competition were handed out by the guests of honor during the official part of the day. Prizes for a journalist competition organized by HCP, called Health in the Headlines, were also given out after the art prizes. Immediately after the prize-giving ceremony, the festival's theme song, called Rhythm of Life, was performed by all the artistes,

including Oliver Mtukudzi. Crowds clapped and danced along to the infectious beat and catchy lyrics that also had key messages about health seamlessly included in them.

The event was covered by Zambian National Broadcasting Corporation and the popular private TV channel MUVITV. Key speeches as well as a few of the most popular performers and their messages were transmitted live to television sets around the country during prime time. Advance publicity on radio, print and TV had alerted audiences around the country to tune in between 16:00 and 18:00 hours on Saturday, 16th May, 2009. According to the ZDHS 2007 about 35% of Zambia's 11 million people watch television regularly. Even if half that number was watching television that evening, that is close to two million viewers country-wide. Satellite activities centering around the live broadcast took place across the country. Some of these were initiated by HCP offices in 22 hard-to-reach districts. In Mansa, for example, the HCP District Program Officer, Francisca Tembo, worked closely with district partners to organize a local health fair on the same day as the Lusaka concert. The fair featured local drama groups and other entertainment, culminating in a joint viewing (by a crowd of over 1,000 people) of the two-hour live television broadcast using mobile video screens installed for this occasion in the local football stadium by the Zambia News and Information Services.

Care and Compassion Group supports Orphans and Vulnerable Children

Mufumbwe District has an estimated population of 61,000 inhabitants, with 13 health facilities. In 2005, the Mufumbwe District hospital suspended the provision of voluntary counseling and testing services because of the lack of trained psychosocial counselors. Prior to HCP support, traditional, faith-based and de facto leaders were not involved in the fight against HIV and AIDS and its impact, according to the District Health Management Team. Religious groups linked HIV and AIDS with promiscuity and viewed condom use as a practice that encouraged high risk sexual behavior. Nor was visible support was being given to the ever increasing numbers of orphans and vulnerable children.



Community garden made by the Lahai Roi group.

In response, HCP invited 271 religious leaders from 21 hard to reach districts in Zambia for a training workshop in psychosocial counseling in 2005. The two week workshop covered seven subjects: HIV and AIDS and related issues; counseling practice and theory; human development; professional and ethical issues in counseling; counseling for special situations; training and facilitation; and field practicum.

Fifteen volunteers comprising members of the church, community and school teachers in the formed a support group, called the "Lahai Roi Care and Compassion Support

Group," a name originating from a story in Genesis 21:16-19. The support group targeted orphans and vulnerable children as their primary beneficiaries, and developed an action plan that included income generating activities, starting with a gardening project. With land donated by the church, and contributions of K15,000 from each group member, they bought seeds, fertilizer and chemicals for the garden, and sold cabbages and tomatoes to raise more money to support People Living with HIV and AIDS and the elderly.

Lahai Roi approached HCP for assistance and was provided with K260,000 for seeds and other farming supplies. The group also applied for a K2,000,000 grant from the Constituency Development Fund in Mufumbwe through the District council, and were approved for K5,000,000 to purchase a water pump. The group initiated a chicken rearing project in 2007 to increase the resources for support to orphans and vulnerable children. From an investment of K2m obtained from HCP, the group was able to raise K15,000,000. Lahai Roi has since embarked on the construction of a chicken run that will house 2,000 chickens. K20,000,000 has been provided by HCP for this purpose.

Residents of Mufumbwe now have access to a readily available voluntary counseling and testing service at the district hospital. Hilda Miti, a psychosocial counselor trained with support from HCP, and a member of the Evangelical fellowship church, provides her services twice a week at the district hospital, supplementing those of the understaffed counseling unit. Other residents of Kalende community have access to her counseling service twice in a week at the church. In response, the church now incorporates care and compassion messages in sermons to encourage community members to support the activities of the group led by Mrs. Miti.

In addition, Lahai Roi has adopted a female and children's ward at the district hospital. Twice a week, the group visits the hospital to wash the sick and clean the ward and its surroundings using detergents the group has purchased. Community members from Kalende have volunteered to be part of the group and have been cleaning on a biweekly basis. This action has encouraged other stakeholders in the District to provide the cleaning supplies for the group. The hospital, in return, has offered them transport to and from Kalende.

As a result of the efforts of the group, 45 orphans and vulnerable children from Kalende have access to school requisites, food, and clothing from resources generated by gardening and poultry activities of Lahai Roi. One orphan who is a head of a household has completed a college education in Information Technology; another who is deaf attends a special education school in Solwezi.

The efforts these leaders and organizations are making have resulted in the spread of knowledge about HIV and AIDS and other health issues, change in sexual and other behaviours, and better sensibilities towards health and social issues of concern. Through the collective efficacy of the Lahai Roi Care and Compassion group, and others like it throughout the districts, communities enjoy increased connection, agency and social inclusion.

Youth Build Confidence and Leadership with HEART Life Skills Toolkit

Kalabo District, with 144,000 inhabitants, is one of the hardest to reach in Zambia, situated in Western Province and bordering Angola. The inaccessibility of the district by road for most of the year, coupled with low economic activity, has impacted the life of the youth due to less interaction with people, places, and institutions compared to more developed parts of the country. High incidence of alcohol abuse, drug-taking and sexual promiscuity are common among youth, along with pregnancies and STIs.

In response to the challenges facing communities similar to Kalabo across the country, HCP developed a Life Skills Toolkit, which addresses the pressures on youth and, through tested interventions, increases self-efficacy in dealing with them. The toolkit's activities reinforce life skills and include a manual, two sets of animal cards, a laminated drawing of an island, nine laminated card drawings of colourful characters, a set of eight photographs with stories of People Living with HIV and AIDS, and a bag for carrying the items.



Nyambe Lungowe leads an activity from the HEART Life Skills Toolkit for Youth.

Using the HEART Life Skills toolkit, a number of training programs were carried out in 21 districts. Initially, 21 master trainers learned how to utilise the kit with the aim of sharing their knowledge with 193 peer leaders. Selection for the second round of trainings was done in collaboration with community-based organizations, with trainees drawn from existing youth structures.

Nyambe Lungowe, a youth from Yuka Mission Hospital in Kalabo District, received training as a HEART Life Skills (HLS) facilitator from HCP with eight others. Through HLS demonstrations he conducted in other communities, he met and trained David Nawa, who also became a facilitator. Today Lungowe and Nawa are known in Kalabo as experts on the HEART Life Skills Toolkit. As a result, youth in hard to reach village communities have established their own HEART Life Skills groups as a result of Lungowe's activities.

Sihole HEART Life Skills group was established after a visit from Lungowe and became involved in outreach activities for the rural health centre in the area and assists the staff in communicating health information to the community using activities from the toolkit. Activities such as *Walking the Bridges*, *My Future Island*, *Where do I Stand*, *You Cannot tell by Looking*, and *What Happens in the Body of Someone who has HIV?* carried out by a similar group in Lilambo Village, resulted in the NHC adopting the toolkit for its own interventions. "We have utilized the activities in the toolkit to convince adult members of the community to seek voluntary counseling and testing services," said Mr. Moses Mungongi, chairperson of the Lilambo Neighborhood Health Committee.

Nyambe Lungowe facilitated the formation of youth friendly corners at two health institutions, Kalabo Hospital and Yuka Mission Hospital. Two Youth Alive groups are overseeing the activities of the corners with the District Health Management Team providing accommodation, logistical support, stationery and furniture for their use.

Through support from different stakeholders in the district, Lungowe has extended the HEART Life Skills training program to in-school youth. Kalabo High School is one of the schools currently running a life skills training programme with the school's Anti-AIDS Club. Since the introduction of HEART Life Skills, the club has witnessed an increase in its membership. Six other schools located in remote areas have hosted HEART Life Skills sessions: Liumba Basic, Kacumwa Basic, Mapungu Basic, Likaka Community School, Muyumbana and Namatindi schools, bringing the total of youths and adults reached to 3,622.

The story of the HEART Life Skills Toolkit provides key lessons on HCP's third strategic approach which targets youth. Many who have participated in the toolkit activities become more assertive and make positive life choices for their health and future. The toolkit empowers them not only through the exercises and by teaching their peers; by putting them in a leadership role, they explore new ways of looking at the future.

HCP Zambia Indicators

Indicators	Performance								Calculation of Targets/ Comments on Variance
	Year 3		Year 4		Year 5		Cumulative Oct 2004 to 30 September 2009		
	Target	Actual (cumulative as of 9-30-07)	Target	Actual	Target	Actual			
Number of individuals reached through community outreach that promotes HIV/AIDS prevention through abstinence and/or being faithful	95,700	284,227	77,700	214,897	150,000	363,266	862,390	From 1 Creative HEART Contest, HEART Life Skills, and drama – with more activity in the latter two than expected.	
Number of individuals trained to promote HIV/AIDS prevention programs through abstinence and/or being faithful	700	1,115	0	211	440	358	1,684	Includes number trained in HEART Life Skills, drama refresher trainings and adults for Zambia Creative HEART contests. Year 5 actuals are lower as rather than HEART Life Skills training for new peer leaders, support was provided to trained peer leaders through provision of bicycles, T-shirts, bags	
Number of individuals reached through community outreach that promotes HIV/AIDS prevention through other behavior change beyond abstinence and/or being faithful	15,000	26,540	46,600	6,494	10,000	7,021	40,055	This indicator was lowered from original due to attrition of uniformed services peer leaders.	

Indicators	Performance										Calculation of Targets/ Comments on Variance	
	Year 3		Year 4		Year 5		Cumulative Oct 2004 to 30 September 2009					
	Target	Actual (cumulative as of 9-30-07)	Target	Actual	Target	Actual						
# people trained in malaria treatment & prevention	1,200	3,916	1,200	1,910	1,200	1,352	7,178					Target based on number of communities with capacity building training x 2 participants receiving capacity building in a year. 1200 is based on target of 600 communities in first 4 years. In year 5 the no. of capacity building training was reduced to 250 because most districts had completed their training. HCP focused on strengthening capacity on those districts already trained. The districts doing trainings in year 5 are supported by their DHMTs as a way of sustaining HCP initiated activities. Also includes number reached through training for malaria BCC.
# people trained in M&E with USG assistance	1,200	3,916	1,200	1,910	1,200	1,035	6,861					Target based on number of communities with capacity building training x 2 participants receiving capacity building in a year. 1200 is based on target of 600 communities in first 4 years. In year 5 the no. of capacity building training was reduced to 250 because most districts had completed their training. HCP focused on strengthening capacity on those districts already trained. The districts doing trainings in year 5 are supported by their DHMTs as a way of sustaining HCP initiated activities.
# people trained in maternal/newborn health through USG-supported programs	1,200	3,916	1,200	1,910	1,200	1,035	6,861					Same as above

Indicators	Performance										Calculation of Targets/ Comments on Variance
	Year 3		Year 4		Year 5		Cumulative Oct 2004 to 30 September 2009				
	Target	Actual (cumulative as of 9-30-07)	Target	Actual	Target	Actual					
# people trained in child health care and child nutrition through USG-supported programs	1,200	3,916	1,200	1,910	1,200	1,035	6,861				Same as above
# trained in FP/RH	1,200	3,916	1,200	1,910	1,200	1,035	6,861				Same as above
# of evaluations performed by USG	2	0	1	0	1	1	1				End-line evaluation began June 2009; preliminary analysis done. Mid term evaluation was canceled due to timing
# children <12 months who received DPT3 from USG-supported programs	69,000	106,580	69,000	19,956	69,000	1,412	127,948				Taken from DHMT data from Maternal Newborn and Child Health Weeks; DHMTs were not tracking this as it is part of the polyvalent vaccine—November figures are always lower than June figures due to rainy season and people being in their fields
# children < five who received Vitamin A from USG-supported programs	400,000	1,968,875	400,000	551,496	415,000	72,561	2,592,932				Taken from DHMT data from Maternal Newborn and Child Health Weeks; November figures are always lower than June figures due to rainy season and people being in their fields—We expect to meet target.
# people that have seen or heard a specific USG-supported FP/RH message	840,923	0	0	0	905,609	3,024,045	3,024,045				Coverage for all messages is 7, 650,000. The Endline survey viewership/ listenership is 59 % (to be verified) which is 4,513,500. Based on listenership of Sr. Evelina on ZNBC radio 1&2 and 13 community radio stations; and community drama (67%), the number reached is 3,024,045. No people reached in year 3 and 4 due to delay in production and airing of Sister Evelina due to reality segment and stakeholders buy in.

Indicators	Performance										Calculation of Targets/ Comments on Variance	
	Year 3		Year 4		Year 5		Cumulative Oct 2004 to 30 September 2009					
	Target	Actual (cumulative as of 9-30-07)	Target	Actual	Target	Actual						
# of USG program interventions providing services, counseling, and/or community –based awareness activities intended to respond to and/or reduce rates of gender-based violence	3,096	2,564	3,096	4,134	3,096	3,500	10,198					In 2009 based on 1,821 communities trained (presenting at least 1 related activity); 720 drama performances (estimate 3 performances per district/20 districts/ 12 months); 720 (estimate 3 active HEART Life Skills peer leaders/20 districts/12 months)
# special studies conducted by USG	1	1	1	1	1	1	3					Measuring Community Capacity phase 2 and case study documentation of best practices highlighting lessons learned and challenges.
# sector assessments conducted by the USG (conflict and gender)	117	333	45	45	15	13	391					Based on environmental assessments conducted: 105 conducted in year 1; 111 in year 2, 117 in year 3, and 45 in year 4, 13 in year 5.
# of information gathering or research activities conducted by the USG	264	780	252	252	240	240	1,272					Takes place on a monthly basis in all HCP districts. Yr 1 12 * 21 districts; years 2&3 12 * 22; year 4 12*21; year 5 12*20

Appendix 1 – List of Partners

Governmental /Quasi-Governmental

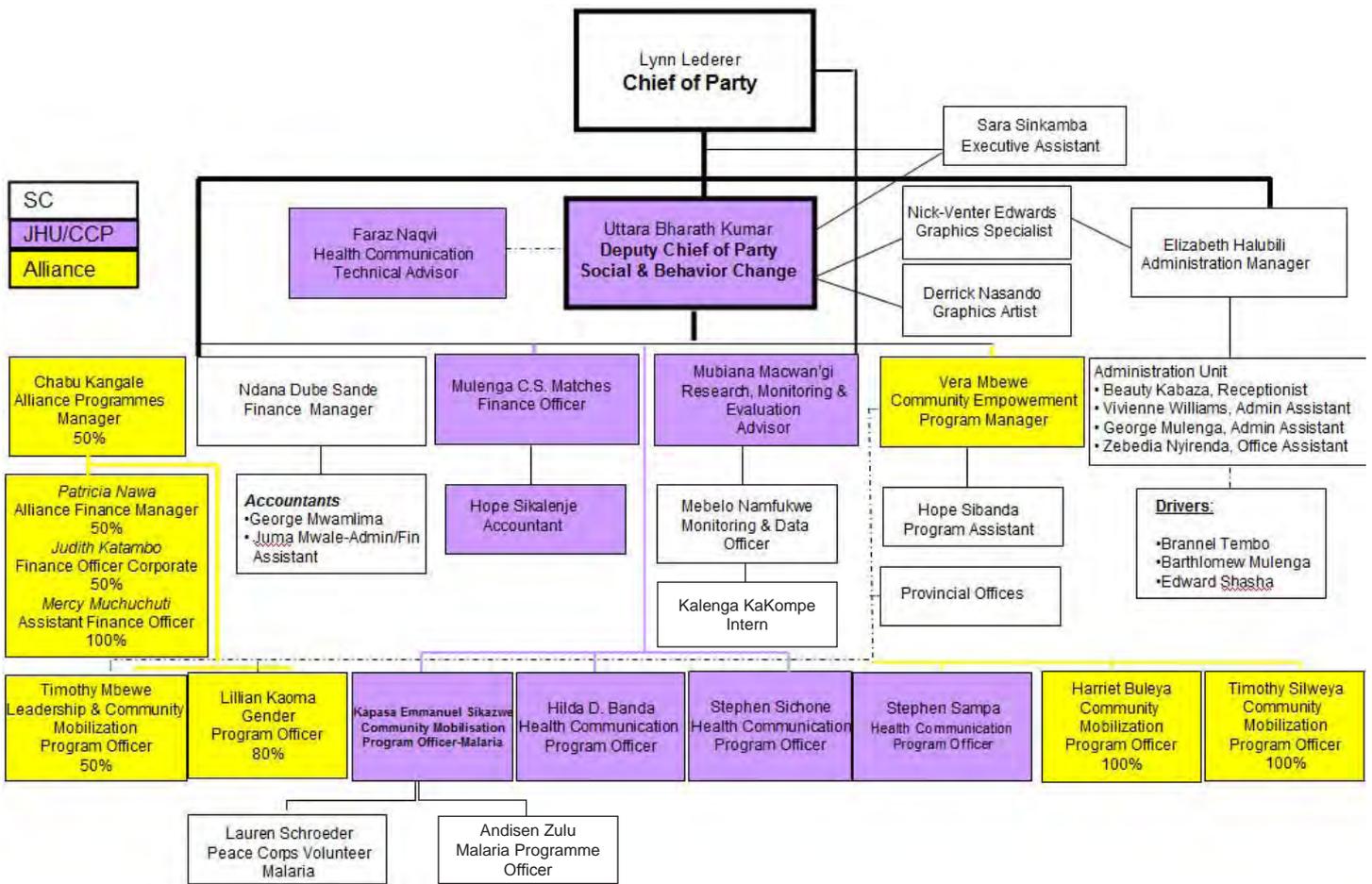
- District AIDS Task Force (DATF)
- District Development Coordinating Committee (DDCC)
- District Education Office
- District Health Management Team (DHMT)
- Immigration Department
- Ministry of Community Development
- Ministry of Education
- Ministry of Health
- Ministry of Youth, Sport, and Child Development
- Municipal Council and District Councils
- National AIDS Council (NAC)
- National Food and Nutrition Commission (NFNC)
- National Malaria Control Centre (NMCC)
- Office of the District Commissioner
- Office of the Provincial Permanent Secretary
- Provincial Education Office
- Provincial Health Office
- Provincial Youth Development Office
- Zambia National Broadcasting Corporation (ZNBC)
- Zambia News & Information Service (ZANIS)
- Zambia Police Service
- Zambia Prisons Service
- Zambia Revenue Authority (ZRA)
- Zambia Wildlife Authority (ZAWA)

Non-Governmental

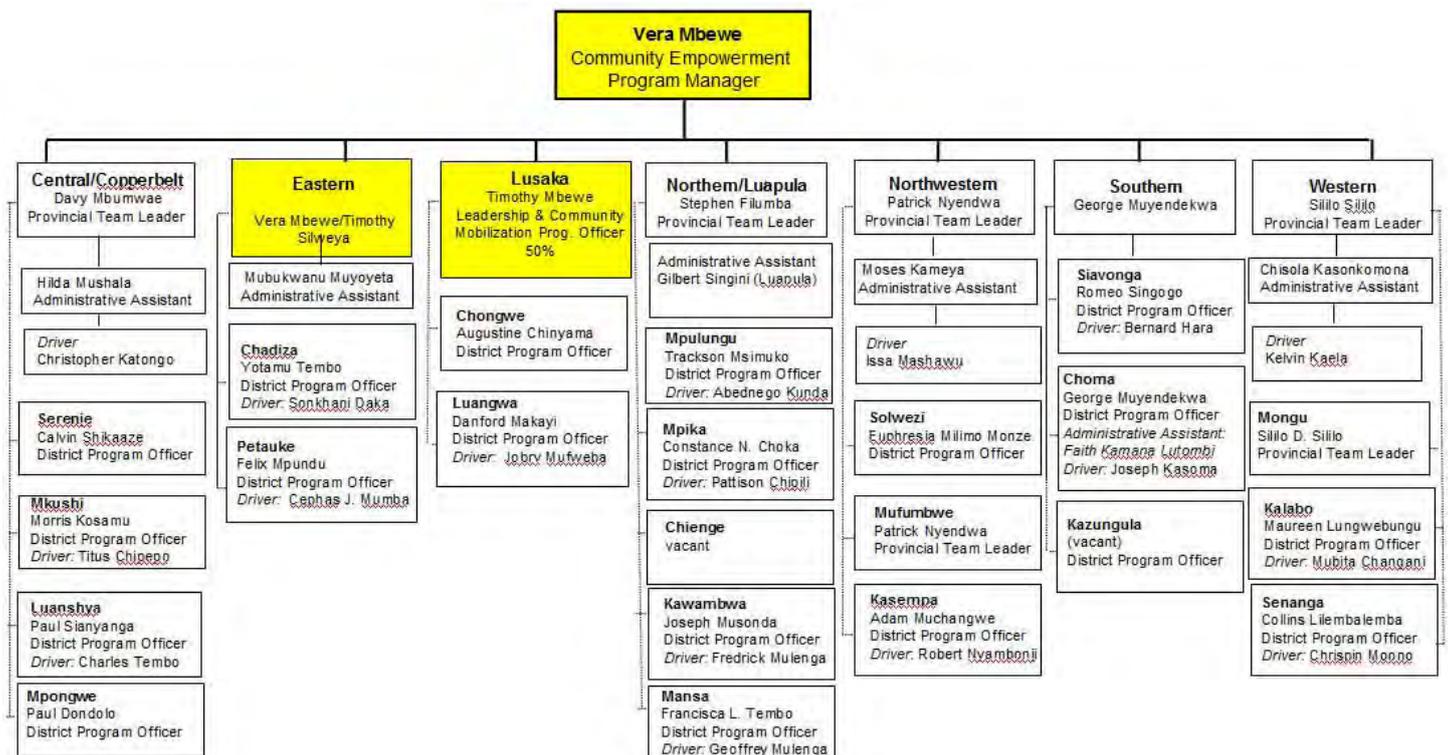
- Adolescent Reproductive Health Advocates (ARHA)
- Africare
- Africa Directions
- Afya Mzuri
- CHAMP (Comprehensive HIV/AIDS Management Programme)
- CHANGES 2
- CHAZ
- Christian AID
- Centre for Infectious Disease Research in Zambia (CIDRZ)
- Copperbelt Health Education Project (CHEP)
- Corridors of Hope
- CRS
- dB Studios
- Elizabeth Glaser Pediatric AIDS Foundation (EGPAF)
- EQUIP 2
- Harvest Help
- HSSP
- Jhpiego
- Kara Counseling
- LACO
- MACEPA (Malaria Control and Evaluation Partnership in Africa)
- Marie Stopes International
- National Theatre and Arts Association of Zambia (NATAAZ)
- NZP+
- PACT
- PCI
- Peace Corps
- Prime Communications
- QUESTT
- RAPIDS
- SAFAIDS
- SHARe
- Society for Family Health (SFH)
- Solwezi District Business Association
- Student Partnership Worldwide (SPW)
- TALC
- UNFPA
- UNICEF
- United Nations Volunteers (UNV)
- White Ribbon Alliance
- World Vision
- WHO
- Youth Alive
- Young Women's Christian Association (YWCA)
- ZCCP
- Zambia Counseling Council
- Zambia Malaria Consortium
- Zambia Malaria Foundation
- Zambia Prevention Care and Treatment Partnership (ZPCT)
- ZINGO

Appendix 2 – Organigram

HCP Lusaka Office



HCP Zambia - Provincial Offices





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