

Zambia

Update on the context and situation of children

Zambia's population, at 19,610,769 (9.6 million males and 10 million females), is among the world's fastest growing. The growth rate is at 3.4 per cent and the average household size is 4.8 persons. Children of ages 0–14 years make up 48 per cent of the population, and a quarter are adolescents.¹ Differences in rural and urban areas remain stark with around 40 per cent of the population living in urban areas and 59.9 per cent living in rural areas.

Post COVID-19 pandemic, Zambia's economy rebounded in 2021, and real GDP grew at 4.6 per cent, from a contraction of 2.8 per cent in 2020. The economy was supported by firmer copper prices, favourable external demand, good rainfall and post-election market confidence.² Uncertainty about debt restructuring reversed portfolio capital flows, triggering a more than 30 per cent depreciation of the Kwacha between September 2022 and March 2023, leading to an increase in inflation, ending at 13 per cent as of December 2023.

While the year started with much positive momentum and hopes for accelerated economic recovery, towards the end of the year the government faced worsening macroeconomic conditions. New survey data collected in 2022 and analysed in 2023 revealed that poverty levels in Zambia had risen from 54.5 per cent in 2015 to 60 per cent in 2022. Even more concerning was that extreme poverty was measured to have increased to 48 per cent from 40 per cent, and urban poverty has risen from 23.4 per cent in 2015 to 31.9 per cent in 2022. Child poverty was no exception to the trend: 70.6 per cent of all children were deprived in two or more dimensions up from 66.5 per cent in 2015. In 2023, these pressures added more strain on the social sectors. A cost-of-living crisis eroded the social cash transfer value. Adverse climate conditions increased the pressure on vulnerable populations and protracted debt restructuring negotiations slowed reform processes.

The Eighth National Development Plan is the country's blueprint for development, guiding

government's national budget and development efforts. The 2023 National Budget for social sectors was increased from 23.6 per cent in 2022 to 30.5 per cent in 2023. This increased budget allocation was used, among other things, to further scale up the coverage of the Social Cash Transfer Programme (SCT) from 973,323 households in 2022 to 1,374,469 households in 2023. Thereby reaching an estimated number of 6,872,345 poor and vulnerable persons, representing approximately 34 per cent of the population, 57 per cent of the poor population and 71 per cent of the extremely poor population. The SCT total caseload comprises 726,659 female-headed households and 11,010 child-headed.

The prioritisation of political and fiscal decentralisation continued, and a revised decentralisation policy was launched mid-year. Multiple local government initiatives commenced to inform strategies to increase financial resources available to local government. A learning pilot was also initiated to drive synergies between devolved funds, especially through the Constituency Development Fund, and system strengthening efforts in social sectors.

In the health sector, Zambia's Ending Preventable Maternal Mortality and Every Newborn Action Plan 2023–2025 was developed and finalised by the Ministry of Health (MoH) outlining priority strategic interventions to strengthen and accelerate actions to reduce maternal and newborn mortality in Zambia and further aligned with the National Health Strategic Plan 2022–2026, towards attaining the Sustainable Development Goals (SDGs). The National Community Health Strategy (2022–2026), Integrated Community Health Service Package and other community health guiding documents were launched during this period.

Despite concurrent public health emergencies and a child polycrisis in Zambia, with ongoing responses to polio, measles and cholera, the continuity of essential health services was maintained with less than 3 per cent coverage disruption in essential Reproductive, Maternal, Newborn, Child and Adolescent Health and Nutrition (RMNCAHN) services across the continuum. Additionally, stillbirth rate declined: fresh stillbirth rate dropped from 5.4 per cent in 2022 to 5.2 per cent in 2023 and macerated stillbirth rate dropped from 8.7 per cent in 2022 to 7.6 per cent in 2023. Over 57 per cent of women were provided Insecticide Treated Net during their first antenatal care visit, while 3rd Intermittent Prophylactic Therapy coverage was 51.8 per cent among the pregnant women.

Zambia is however off-track to achieve SDG targets on stunting and anaemia reduction, but is on track to achieve exclusive breastfeeding, wasting reduction and halting overweight in children under age 5 years. Increases in poverty levels have compromised stunting reduction and the growing climate-driven food insecurity, which has left over 2 million people needing humanitarian assistance in 2023/24, threatens efforts to reduce wasting.

In 2023, Zambia continued its flagship education reform agenda, namely Education for All policy [school fee abolition for secondary and Early Childhood Education (ECE)] and continued with additional teacher recruitment of about 4,500 teachers. Zambia continued to receive global attention as one of the champions for investing in education and hosted several international conferences and south-south learning missions on Foundational Literacy and Numeracy in 2023.

Major contributions and drivers of results

In health sector, UNICEF supported system strengthening and resilience building efforts in the face of concurrent multiple public health emergencies by promoting a system approach in capacity building, planning, and implementing the emergency preparedness and response plan and integrating it in the provincial and district Medium Term Expenditure Framework (MTEF) planning process. This has enabled the District Health Offices to have a better balance between emergency and routine interventions using evidence- and risk-informed programming of prioritisation, planning, costing and budgeting to allocate funds in MTEF. UNICEF's support has been critical towards Zambia's journey to attaining the Universal Health Coverage (UHC): improvements have been made in cold chain system, medical oxygen ecosystem and human resources, especially the professionalisation of community-based volunteers, which has institutionalised community health as an integral component of primary health care system.

UNICEF continued high level technical support to MoH to strengthen quality and coverage of RMNCAHN intervention including Prevention of Mother to Child Transmissions and Paediatric HIV through participation in various technical task forces and other key platforms, influencing decisions.

UNICEF continued to support the Ministry of Health, University of Zambia Teaching Hospital (UTH) Children, UTH Women and Newborn Unit, Chinsali, Choma, Mansa, Katete and Chipata Central Hospitals in establishing Centres of Excellence for Essential Newborn Care (CEENC), including support for Small and Sick Newborn Care (SSNC) and Kangaroo Mother Care units. Quarterly mentorship visits were undertaken to the seven CoEs including support to high delivery load referral facilities. To ensure a complete continuum of care for the newborns, UNICEF supported MoH in training 30 Training of Trainers (ToTs) in community-based newborn care. Procurement was done for all supplies and 95 per cent of the equipment for Neonatal Intensive Care Unit and Kangaroo Mother Care units across the country. These were delivered, installed and currently being used by the health facilities. Staff was trained on the use of these equipment by the local Bio Medical Technician. All lifesaving critical medicines for newborn units were procured and delivered to seven hospitals. A total of 100 Non-Pneumatic Anti-Shock Garments for Post-Partum Haemorrhage management were procured and UNICEF supported MoH in developing standard operating procedures on prevention and management of postpartum haemorrhage. UNICEF supported MoH in the finalisation of Global Alliance Country Action Plan to End AIDS in Children by 2030, including ongoing technical support to develop the National Triple (HIV/Syphilis/HepB) Elimination Strategy for Zambia. Furthermore, UNICEF supported MoH in launching the National Community Health Strategy 2022–2026, Community Health Strategic Plan, Community Based Volunteers incentive guidelines and National Co

mmunity Health Guidelines. In line with this, UNICEF supported MoH to train 19 ToTs from 11 districts on the integrated Community Health Services Package. UNICEF also supported UTH Children’s Hospital to strengthen the capacity of 20 staff in case management of diarrhoea and pneumonia including on-site technical supportive supervision to 5 first level hospitals, including Kafue District Hospital.

In Nutrition, UNICEF’s support to improve nutritional outcomes reached over 1,300,000 people in 2023, and accelerated action was required to prevent further deterioration of nutritional outcomes. Furthermore, efforts to address nutrition deficiencies continued in all 116 districts. In 2023, 2,402,588 caregivers of children under 2 years received Infant Young Child Feeding counselling, of whom 1,340,108 caregivers were through UNICEF support (56 per cent). For maternal micronutrient supplementation, 643,322 women received iron supplements and 813,527 received folic acid, with UNICEF-supported coverage accounting for 20 per cent and 17 per cent, respectively. To enhance adoption of optimal maternal, and young child feeding practices, the *Tikonde Bana* campaign was launched and reached an estimated monthly listenership of 14,200,000 of a diverse audience comprising 59 per cent male listeners and 41 per cent female listeners. *Tikonde Bana* is a UNICEF-supported multisectoral social and behaviour change communication delivery campaign for nutrition.

In the 17 SUN-II districts, UNICEF partnered with the Food and Agriculture Organization (FAO) to provide technical assistance for improving dietary diversity at household level. The UNICEF-led United Nations partnership reached a cumulative 107,409 households with skills in nutrient-dense crop production (programme target of 143,077), with an additional 7,284 benefitting from agricultural inputs during the reporting period). Access to animal protein sources was enhanced through household empowerment for chicken and goats' production for 929 more households (chickens) and 24 more households (goats), bringing cumulative totals to 7,708 and 5,233 households, respectively. Partnership with the United Nations World Food Programme (WFP) increased financial inclusion and economic empowerment of women, training 47,489 women of reproductive age to participate in Village Savings and Lending Associations during the reporting period and bringing the total trained in the programme to 126,660 (87 per cent of programme target).

In WASH, with UNICEF Zambia office support, 160,412 people had access to basic water services through drilled and rehabilitated boreholes and small piped water scheme. Furthermore, UNICEF interventions led to over 249,706 additional people to build basic sanitation and 144,201 people to build their own basic hand-washing stations. Additionally, 488,332 people were reached through hand-washing behaviour change programmes and at least 160,000 people were reached with emergency response interventions. UNICEF further contributed to strengthening sector coordination, and increased capacities at multiple levels of government in various ministries to improve long-term access to sustainable, safely managed WASH services. With the start of the new country programme, there was also an increase in climate related youth and financing activities.

In Education, UNICEF under the leadership of Ministry of Education (MoE) made progress in setting out important paths for meaningful sector enhancement. The first batch of student nurses across the country has been fully trained on the revised national nursing curriculum that fully incorporates Early Childhood Development (ECD). The ECD multisectoral policy framework has been drafted and is awaiting government review. Regular ECE sub-sector coordination has been established and led by MoE ECE Directorate, strengthening collaboration and technical cooperation among key sub-sector partners, such as the World Bank, United States Agency for International Development (USAID), European Union (EU), UNICEF and civil society organisations. A total of 75,396 learners in all primary schools in Luapula province (37,169 males and 38,227 females) received one-hour-per-day catch up programme session (Teaching at the Right Level) in their local language, with 62 per cent of the learners now being able to read paragraphs. The development of the national remedial learning framework commenced with participation of all relevant stakeholders. Zambia hosted a south-south learning to share the experiences from its catch-up programme with participation of Uganda, Eritrea, Angola and Somaliland. Notably, the Government of Eritrea proceeded to develop a roadmap for their programme execution. More than 4,100 learners are now accessing Zambia Learning Passport contents, and the next step is to further support teachers and learners to actively utilise the contents for blended learning. UNICEF supported MoE's pilot to reinvigorate its national career education and

STEM exhibition in Lusaka with participation of 8,821 secondary school learners in Lusaka.

In Child Protection, following the passage of the Children's Code Act and Social Workers Association of Zambia Acts in 2022, UNICEF supported the government to finalise statutory instruments to operationalise and provide guidance for implementation of these laws. Additionally, several existing laws were reviewed to allow alignment to the Children Code Act (2022). These include the Anti-Human Trafficking Amendment Act reviewed to decriminalise children consenting to be smuggled and/or trafficked and to provide for an express offense of child trafficking thereof, the Amendment of the Marriage Act to increase age of marriage, the penal code and criminal procedure codes to increase the age of criminal responsibility, the Immigration and Deportation Act to safeguard migrant children, the Births and Deaths Registration Act to incorporate provisions in the Children's Code Act, and defining the role of the Ministry of Health in notifications of births. These reviews had all been finalised and awaiting cabinet approval.

Through UNICEF advocacy efforts, a high-level dialogue session was jointly convened between the national house of traditional Chiefs and the Parliamentary Caucus on children, where consensus and commitment were made by the Chiefs to play a lead role in ending child marriage in their chiefdoms. The Chiefs also endorsed the amended Marriage Act to repeal child marriage. Interventions to address key drivers of child marriage and adolescent pregnancy continue to be prioritised with community dialogues reaching about 209,894 children and adults.

Prevention and response to protection of children was achieved through government and communities strengthened capacities to implement interventions using standardised statutory and non-statutory case management tools. Through effective case management 1,738 children transitioned to family-based care and 33,359 accessed child welfare and justice services and other social services through referrals. Several guidelines, developed with support from UNICEF including child safeguarding, Intensive Family Support among others, have been mainstreamed into national curricula and policies. The Ministry of Community Development and Social Services, with support from UNICEF, conducted an inter-ministerial consultation forum and mapped the social service workforce in Zambia. This exercise is informing the costing of an investment case to strengthen social service workforce in Zambia to improve the quality and effectiveness of social services for children.

A total of 157,766 children under the age of 5 years out of a target of 250,000 children were registered and issued with birth certificates through mobile birth registration in health facilities piloted in two districts and ongoing routine registration using the Integrated National Registration Information System. This is a 53 per cent increase over the 84,349 children registered and certified in 2022. With renewed commitment from the government, a revised business process has been developed envisioning 50 per cent (1,99,577) birth registration by 2026 from the current coverage of 14 per cent.

Under Social Policy, budget diagnostics supported by UNICEF reached new heights. Fourteen budget briefs were produced and the Nutrition Expenditure Review was completed. The social workforce investment case was still ongoing by the end of 2023. UNICEF also supported the capacity building of 91 Members of Parliament in budget analysis. The utilisation of budget diagnostics improved and stirred dialogues between social sector ministries and the Ministry of Finance. For example, as result of low spending on ECD, a dialogue meeting was convened to identify pathways of increasing budget allocation and advocating for better budget systems for ECD. There is also a new governments' directive to have all ministries budget for nutrition to mainstream nutrition needs across all sectors.

UNICEF supported the ongoing review and revision of the National Social Protection Policy, which is set to transition to a life-cycle based approach. UNICEF supported the updating of the SCT Guidelines and Operations Manual and the modification of the SCT Management Information System to be more shock responsive. UNICEF supported the design and implementation of Emergency Cash Transfers. UNICEF supported the Ministry of Community Development and Social Services in its development of a digitalisation strategy.

UNICEF supported the gender and nutrition sensitive 1,000 Days in SCT pilot in four districts (Chipata, Kalabo, Mpika and Mwinilunga) with high malnutrition prevalence. This pilot enrolled

12,913 households with pregnant or breastfeeding women, or with infants under the age of 2 years into the SCT programme and provided them with linkages to priority services, such as nutrition services and case management. Furthermore, UNICEF supported ongoing certifications of persons with disabilities with disability cards. UNICEF supported social protection related advocacy efforts and organised a field visit for the International Monetary Fund (IMF) Managing Director to visit the SCT programme (as well as education sector initiatives) as part of the IMF support to the Zambian debt restructuring.

UNICEF further supported training of media personnel at national and provincial levels. UNICEF supported the concurrent analysis of the Multiple Overlapping Deprivations Analysis leading to monetary and child poverty numbers being launched at the same time and child poverty being mainstreamed into the Living Conditions Monitoring Survey process. UNICEF supported the Census, the Living Conditions Monitoring Survey, and the ongoing Demographic Health Survey. UNICEF supported new data and knowledge management initiatives, such as the designing of a National Research Repository.

Protection from Sexual Exploitation and Abuse (PSEA) was mainstreamed across all programmatic areas reaching 278,166 community beneficiaries with PSEA messaging and access to safe reporting channels.

Social Protection continued being a key strategy for the government to respond to poverty and vulnerability. The National Social Protection Policy was under an extensive, evidence-based review process throughout the year to clarify the policy measures to be implemented across the different life cycle stages.

UN Collaboration and Other Partnerships

UNICEF continued to collaborate with various United Nations agencies to implement its programmes through joint United Nations programmes and through other inter United Nations agreements. UNICEF is the lead United Nations agency in the United Nations Joint Programme on Social Protection (Phase II), which includes International Labour Organization (ILO), WFP and United Nations Development Programme (UNDP). The programme is supported by IrishAid, the Swedish International Development Agency (SIDA), the Swiss Development Cooperation, and the United

Kingdom of Great Britain and Northern Ireland Foreign Commonwealth and Development Office (FCDO) as cooperating partners. UNICEF led the process of developing a new joint programme called the United Nations Partnership for the Rights of Persons of Disabilities programme, with ILO, UNDP and United Nations Population Fund (UNFPA). The Norwegian Agency for Development Cooperation (Norad) also continued to be a partner on disability inclusion. Furthermore, UNICEF participated in two SDGs fund programmes/processes – a programme to strengthen integrated national financing frameworks led by UNDP (with ILO and the United Nations Economic Commission for Africa) and for localisation led by UNFPA (with UNDP).

In the area of social protection, UNICEF continued collaborating with the World Bank. The partnership was further expanded through the analysis of poverty data in the Living Conditions Monitoring Survey.

In nutrition sector, UNICEF worked with FAO, WFP and the World Health Organization (WHO), and in partnership with National Food and Nutrition commission to deliver integrated multisectoral interventions for stunting reduction that converged at community and household level in 17 SUN-II districts. For this programme, financial support was received from the FCDO, EU, German Embassy/KfW Bankengruppe (KfW), Irish Aid and SIDA. Other nutrition partners include GIZ and Scaling Up Nutrition-Technical Assistance (SUN-TA), who support implementation of First 1,000 Most Critical Days Programme II (MCDP-II) in the other 25 districts. The SUN Learning and Evaluation (SUN-LE), which provides knowledge management and evaluation technical assistance for MCDP-II.

UNICEF further partnered with the GHR Foundation, Save the Children, Catholic Relief Services, Access to Health Zambia, Zambia Association of Sisterhoods and Alliance for Children Everywhere to support the government's Care Reform Agenda, which promotes family preservation and family-based alternative care. In addition, five international Non-governmental Organisations supported programme management at implementation level. These included World Vision International, Plan International, Care International, Catholic Relief Services as well as Save the Children. UNICEF continued to partner with the Tropical Diseases Research Centre on the Food Consumption and Micronutrient Survey analysis.

UNICEF cooperated closely with the EU on gender-based violence prevention and response, and on empowering adolescent girls. Another partnership with the EU was in health management information system,

UNICEF forged a new partnership with the Government of Japan through the Japan Supplementary Budget to support the humanitarian response in four districts in the Eastern province, to effect in January 2024.

Key notable donor partnerships in education sector include the United Kingdom and the Danish National Committee for UNICEF/LEGO Foundation for education in Zambia.

Lessons Learned and Innovations

Lesson Learned #1:

Fiscal space remains tight, as strategic debt restructuring efforts and multiple fiscal reforms continue. That said, the government continues consolidating its expansionary approach to social sector spending and has increased its allocation in essential social services (health, education and social protection) from 23.6 per cent to 30.5 per cent.

Lesson Learned #2:

Decentralisation brings services and decisions closer to the population for whom these services are intended. This presents opportunities to enhance social accountability, make decisions more transparent, reduce turnaround time for feedback, and use resources more efficiently and effectively. In 2023, UNICEF learned that its long-standing engagement with social sectors and local governments, in relation to the delivery of social services, presents a comparative advantage and opportunity to support not just the social sectors but the decentralisation process itself. Through this, UNICEF can focus on resource allocation and distribution (and the systems supporting these) as well as the resource envelope itself where there is the need (and possibility) of strengthening and increasing the fiscal resources available to local governments.

Lesson Learned #3:

Social protection remains a key strategy to respond to poverty but is insufficient on its own when it comes to reducing poverty overall, both in the currently poor population and future generations at risk of poverty. For social protection to break vicious intergenerational cycles of poverty, support resilience and sustainable uptake of income generating activities, the economy needs to be conducive and the government needs to design its economic policies with this in mind. However, stakeholders predominantly consider economic priorities, such as inclusive growth, in isolation from social protection, while placing emphasis on the expectation that people graduate from social protection to eventually reduce the fiscal burden, without fully recognising the potential of social protection to stimulate and drive economic growth and strengthen macro-economic resilience against shocks.

Lesson Learned #4:

Through comparative advantages of individual United Nations agencies, the United Nations system has an edge as a compelling partner for development cooperation. In 2023, through the United Nations Sustainable Development Cooperation Framework, results achieved by UNICEF were amplified through the partnerships with other United Nations agencies as highlighted in the report. However, **coordination between United Nations agencies can be further strengthened**, so that the support provided to government is systematic and effective. Unique capacities, knowledge and resources developed by individual United Nations agencies can be leveraged to deliver services at the community level where coverage, quality and equity of services can be ensured. A strengthened One United Nations partnership, following a One plan, One budget and One implementation approach, has the power to reach and serve the children and families who've been left behind.

Lesson Learned #5:

The **engagement of community groups, workers and volunteers across sectors is a valuable resource**. Programmatic delivery and integration can further improve through deepened engagement of the community-based groups and individuals who are active participants in the programme. Community workers have demonstrated efficiency in successfully targeting households in need of programme interventions and benefits.

