

A Publication of Rising Fountains Development Program—Zambia



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Rising Fountains Development Program (RFDP) lunches Project for the Reduction of Maternal Mortality (PROMM) in Lundazi District.

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The need for reproductive and child health (RCH) and HIV/AIDS interventions is compelling. According to the Zambia Demographic Health Report (ZDHR) 2011. There has been a reduction in the level of maternal mortality rate from 729 deaths per 100,000 live births in 2002 to 591 deaths per 100,000 live births in 2007. The goal is to reduce the maternal mortality ratio to 429 deaths per 100,000 live births by 2015.

According to the 2009 Lundazi district reproductive health statistics on maternal health, of the 18,000 Expected pregnancies, only 10,562 women attended Ante Natal Clinic (ANC). There still remains 41% percent who do not attend ANC. If women do not attend Ante Natal Clinic (ANC), they become vulnerable to a number of complications which later result in complicated labour including maternal death.

Family Planning saves lives, reduces maternal deaths and has long been considered a key aspect to socioeconomic development. Although this is widely acknowledged and well-documented, the attention and resources directed toward improving family planning programs in developing Countries has been decreasing, even though need remains high. This is particularly true for Sub-Saharan Africa; for the region as a whole, only 14% of women are using modern methods of contraception (PRB, 2004).

In its conquest to contribute to the reduction of maternal mortality rate. Rising fountains conducted a one inception workshop the main purpose of the inception workshop was to create

awareness about the (Zambia Intergrated Strengthening System Program). ZISSP project and solicit for support at district level, share with stakeholders and also to learn any other suggestions from stakeholders. 30 participants attended the inception workshop which was officiated by the Lundazi District Aln attendance were people from Community Development Mother and child health, Com Dev, CBOs, NGOs, the council, chief mphamba, media and community members were represented.

Presenting the project overview Rising fountains Monitoring and Evaluations Officer Vincent Ndhlovu said that the project will be implemented in seven rural health centres of the district. He further said that the project will be implemented

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primarily by RFDP's/PROMM administrative Officer. RFDP's/PROMM network of community outreach workers, support groups, neighbourhood health committees and Safe Motherhood Action Groups (SMAGs) that will be formed in the catchment areas. They will be responsible for all outreach activities targeted at all the SMAGS in the rural health centre catchment area.

The objectives are;

1. Contribute to the reduction of maternal mortality by 50% in the targeted rural health centre areas of Lundazi District. .
2. (SMAGs) Groups that will be formed in the catchment areas. They will be responsible for all outreach activities targeted at all the SMAGS in the rural health centre catchment area.
3. Supplement existing PMTCT programs by working with child bearing women and other people to influence behaviour change in the targeted rural health centre catchment areas.
4. Provide both technical and material support to 150 Safe Motherhood Action groups (SMAG) members in the targeted rural health centres in Lundazi district



Safe Motherhood Action Groups (SMAGs) Posing for a photo after receiving motorcycle ambulance in Chief Mwanya—Lundazi District

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(SMAG)members in the targeted rural health centres in Lundazi district.

Reducing Women's Vulnerability and Maternal Deaths.

Zambia is one of the countries in the sub-Saharan region worst hit by the HIV epidemic. According to the Zambia Demographic Health Survey (2007), HIV prevalence is now estimated at 14.3% in the age group 15-49 years of Zambia's population of 13 million. 40% of this population is in the sexually active age group (15-59 years).

The Eastern province has HIV prevalence rates at 10.3% (Zambia Country Report, 2006-2007 and ZDHS 2007) and Lundazi in particular is no exception in increased HIV/AIDS prevalence rates at 16% in 2007 (National AIDS Council, 2008).

The factors that contributed to HIV prevalence rate in Lundazi are the following; multiple sexual partnership. Gender and sexual violence, Sexually transmitted infections, Poverty, Literacy and communication, Cultural beliefs and practices, Stigma and discrimination, High population mobility and Alcohol and drug abuse.

The economic impact, coupled with high poverty levels, illiteracy and the negative cultural practices prevailing especially in the rural setups, has seen the emergency of teenage marriages and pregnancies

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have also greatly contributed to the high rate of maternal and Neonatal deaths especially in the rural setup. The teenage mothers do not give enough care to child immunization as they feel the institutions are very distant. Stigma is playing a negative role in the consumption of antenatal services.

The distance factor contributes to most women rather giving birth at home; in ignorance some people believe you only go to the clinic for delivery when the woman has failed to deliver at home; Unfortunately, in most cases, this perception leads to unnecessary mortality among expectant mothers sometimes.

This has resulted into many teenage pregnant girls shunning antenatal services due to stigma. Among the major reasons why girls go into early marriages, is that elderly men indulge themselves into multiple concurrent partnerships and/or polygamy.

The harmful cultural practices and traditional beliefs in the communities dictate that masculinity is superior and femininity is inferior and this has resulted in gender inequalities. Societal expectations are that men are decision makers and women should be told what to do and obey.

Generally men have poor health seeking behaviours and being decision makers, means women have little or no access to health care services once the man decides otherwise. People's mindsets, negative attitudes, values and beliefs have been profoundly rooted in the use of traditional herbs especially during labour which is a barrier to effective PMTCT programs and other health related services.

Lack of community preparedness on mandatory counselling and testing by both pregnant mothers and their spouses contributes to low attendance of pregnant mothers. Many pregnant women in the Community don't go for Ante natal Clinics; they most depend on herbal stimulants during delivery.

This risky traditional practice is often responsible for ruptured uterus during labour. On the other hand due to distance to the Rural Health Centres, Women prefer to deliver in their homes assisted by relatives who are not trained birth attendants. This often results in various complications or maternal death.

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ous complications

RFDP Conducts Advocacy case meetings with community leaders.



Community leaders during advocacy meetings

To increase awareness among couples and women of bearing age on the importance of Antenatal care in the targeted health centre catchment areas of Lundazi district by December 2014.

Rising Fountains conducted advocacy meetings with community

leaders on issues related to reproductive health in all the health centres namely Kazembe, Mwanya, Kamsaro, Chanyalubwe Khulikhuil, Mankhaka and Egichicken and a total of 224 attended the meeting 149 were male and 75 were female from the neighbourhood health committees, health centre committees, traditional leaders, church leaders and traditional healers.

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The main purpose of the advocacy meetings were to increase engagement of community leaders including traditional leaders in community health activities and to influence traditional policy makers to address identified negative policies and practices at local levels that highly contribute to high maternal deaths in the communities.

Some of the negative practices identified that contribute to high maternal deaths are for example in all the catchment areas reached issues identified that had contributed to high maternal mortality are:

1. Early marriages
2. Delivering from the villages
3. Delay in taking the women in labour to health facility.
4. Use of herbs during labour to quicken the delivery.

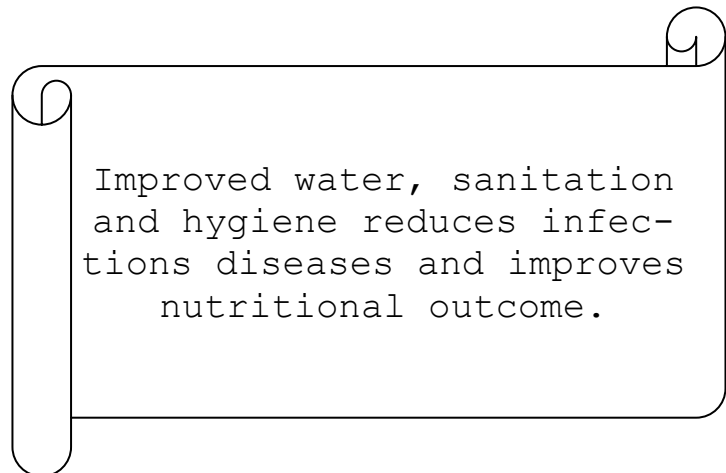


SMAG members dancing during demand creation for maternal health services in Chief Mwase Lundazi.

RFDP Identify volunteers as Safe Motherhood Action Groups

Following the advocacy meetings conducted in the seven health facilities, Identification and formation of safe motherhood action groups (SMAGS) was done in the same seven health facilities.

A total of 140 community members were chosen to be trained as SMAGs members.



Safe Motherhood Action Groups undergo Training in Integrated Reproductive health Services

140 SMAG members have been trained by RFDP during the period January to August 2014 with support from ZISSP. These were trained on:-

The Importance of antenatal care, Importance of institutional deliveries, Antenatal care, Postnatal care, Family planning and Sensitization of the community on the danger signs of pregnancy and the new born and encourage family health talk and help to identify and report cases of obstetric fistulae and mobilize both human/material resources for action .



Men not taking Action in Antenatal Services

Rising Fountains Development Program has also realized that lack of MTA programs (Men Taking Action) has resulted into men not encouraging their wives to go for early antenatal services and this affects ANC and PMTCT.

Men need to take central stage in promoting prevention of mother to child transmission of HIV and maternal deaths.

and maternal deaths.

The following targeted behaviours have been identified as drivers of the epidemic in the context of male dominance.

1. Concurrent sexual partners.

2. Poor utilization of condoms.

3. Gender inequalities

men dominating women

(a) men not involved in ANC, PMTCT which is viewed as woman's concern

(b) men taking decisions when to have children.

4. High consumption of alcohol.

5. Poor utilization of male circumcision services and lastly early sexual debut among men of 15–24 age groups.

Unmet Needs of Family Planning resulting in unintended pregnancies

High maternal mortality and HIV infections. Most efforts to date to prevent mother-to-child transmission of HIV have focused on provision of antiretroviral prophylaxis. to HIV-infected pregnant women.

Increasing voluntary contraceptive use has been an under used approach, despite clear evidence that preventing pregnancies in HIV-infected women who do not wish to become pregnant is an effective strategy for reducing HIV-positive births and maternal death. This intervention reviews service delivery level opportunities for and obstacles to translating contraceptive efficacy into interventions that will have an impact on the effectiveness of HIV prevention and maternal mortality reduction.

RFDP Acquires Motor Bike Ambulances and Bicycles



In order to cushion

the work of SMAG members and health centre. RFDP acquire 2 motor cycle ambulances and 70 bicycles. The ambulances will be given the health centres in the valley in Kazembe and

Mwanya where transport is big challenge and people use oxcart and bicycles to ferry patients and pregnant women to the health facility. The bicycles will be distributed to all the 7 health centres working with Rising Foun-



Motorcycle ambulance donated to Kazembe health Centre

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SMAG members at Mwanya Health Centre in Lundazi—Zambia.



Hired Vehicle by RFDP get stuck in sand in Lukusuzi River in Chief Mwanya—Lundazi. RFDP Need to have 4 x 4 landcruise for this ter-



Drama performances on maternal health services in Lundazi District.



Quarterly Review Meeting with SMAG members at Kazembe health centre.



Francis Mwanza a SMAG member attending to pregnant woman during antenatal care at Mwanya health centre in Lundazi district



One of the Ventilated Pit latrine Built with Support from RFDP at Kazembe Basic School – In Lundazi District.

Support Rising Fountains Development Program



Receiving Support from Zambia Integrated Systems Strengthening Program.

VISION

'Transformed and empowered people living healthy lives in Zambia.'

Mission

To improve the live hoods of women and children in rural Zambia through community mobilization, partnerships, capacity building and advocacy?.

The core values of the organization are:

Integrity

RFDP is committed to be totally trustworthy to our beneficiaries, support base and our development partners. We shall abide to our plans, promises and commitments, and keep the image of the organization positive.

Equity and respect

RFDP encourages women to play an equal role in shaping their own future. RFDP promotes equal participation of all people (male, female and children). We recognize the gender concept that both genders are equal and committed to sharing of roles, resources and responsible for equitable development. We will not assign roles simply because of gender or assign importance to roles and responsibilities because of gender. We shall strive to respect all people of any culture and origin.

Accountability and transparency

RFDP promotes and believes in the culture of openness in the running and governing of the organization programs and projects to the internal and external stakeholder. In addition, RFDP promotes the spirit of accountability in its action and results in its operations.

Hard work

The success, development and progress of RFDP will be based on all working in or with RFD putting in tirelessly their full share of effort and time to achieve the positive results the right people, right place and right time.

Team work

RFDP will strive to build a teamwork environment, where every stakeholder is valued, supported, respected, rewarded and encouraged to work as a unified team to achieve results.