



Pride Community Health Organization Annual Report 2022

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Chief Executive Officer's Review

Strategic Highlights

In our last report, at the end of my seventeenth (17) year of service, I talked about the vital necessity for change within Pride Community Health Organization. This year, we've been right in the thick of it, working to transform our organization from top to bottom while continuing, of course, to mobilize resources, and use it to help community members change their lives for the better. It hasn't always been easy; major change is never easy. But I can say with real conviction that we and our brilliant partners and key stakeholders achieved some incredible results in 2022 and made real progress towards ensuring that Pride Community Health Organization's future will be as successful in contributing to the transformation of Zambia into a prosperous middle income nation by 2030 which will be a "strong and dynamic middle-income industrial nation that provides opportunities for improving the well-being of all, embodying values of socio economic justice."

Key Programme Highlights

The International Labour Organization (ILO) through the UMBRAF Country Envelop supported Pride Community Health Organization to implement a socio- economic empowerment project aimed at HIV vulnerability reduction among Adolescent girls, young women and some young key populations in the informal sector. The project aim was to reduce new HIV infections and improve HIV treatment outcomes among AGYW including young FSWs and contribute towards ending HIV/AIDS epidemic as public health threat by 2030. Fifty two (52) young women received capacity building and skill development and financial resources which were meant to boost their businesses in the informal sector.

Key Programme Highlights

Pride Community Health Organization launched the "The Canadian Fund for Local Initiatives" project whose aim is to increase young women's economic participation and self-reliance by catalysing a conducive district and local environment for female entrepreneurship through community engagement and skills development. Forty five (45) young women aged 15 – 24 years will receive economic empowerment.

Key Programme Highlights

Zambia became the latest country in Africa to abolish school fees in 2022 and gradually move towards free universal education. In light of the policy changes, Pride Community Health Organization did align its interventions to the aspirations of the government of the day. The organization donated twenty (20) school desks to Railside Community School

Key Programme Highlights

Pride Community Health Organization launched the US Embassy Project Launched the “Promoting Inclusive SRH Services among Young Persons with Disabilities» project. Project aims to promote inclusive gender responsive SRH information and services for the adolescents and young people with disability in two designated communities to increase their access to, and utilization of SRH services.

Key Governance Highlights

In our bid to strengthen the organization’s governance systems, Pride Community Health Organization recruited another board member; Julius Kampamba, who is currently working for the National Assembly of Zambia as Deputy Principal Clerk-Monitoring and Evaluation. He brings a wealth of experience having spent a lot of years in the development sector.

Key Sustainability Highlights

The Construction of the Office Building was completed on time and the offices were occupied in December, 2022. Special thanks go to Irena Byrdina for believing in our dreams, and providing the necessary financial support. Special thanks also go to the Board Members for providing both financial, technical and moral support. Lastly, special thanks go to the staff of Pride Community Health Organization. You are an amazing and hardworking team.

“Towards Healthy, Productive and Socio-Economically Empowered Communities for National Development”

Looking Ahead

The year 2022 was a positive and progressive year for Pride Community Health Organization, and the organization ended the year in a better shape than ever to face an uncertain future. Needless to say, we’re extremely grateful for all the help and support that we’ve received, from individual, and corporate funders. The organization was able to partner with new funders namely the International Labour Organization, the Canadian Fund for Local Initiatives, and the US Embassy. Thank you, everyone, including our outstanding group of Trustees and staff team

Kenan Ng’ambi

Chief Executive Officer

11th of February, 2023



Location

Chikoka, Mungu Ward in Kafue District

“An innovative community program supporting rural women’s associations boosts gender equality and provides resources that facilitate family and community well-being”

1.0 Executive Summary

In 2020, Pride Community Health Organization's work directly benefited a total of **17,821** people in eight (8) constituent wards namely Matanda, Kasenje, Shabusale, Mungu, Kabweza, Shikoswe, Chikupi and Magoba through community - led advocacy, and scaling up of work in Kafue District. We are proud of our financial efficiency and accountability as we work to maximize the value of every dollar we receive. Over the past five years, the revenue of our organization has increased. PRICHO's total revenue in **FY2022** was **Zambian Kwacha 3,330,451.29** coming from international government sources, foundations, and individual donors around the world. 90% of the funds received were devoted to HIV prevention, economic empowerment, sexual and reproductive health and rights, and education support programmes.

Strengthening and expanding our development work is not our only priority, but we continue to invest an increasing share of our resources in advocacy, innovation, learning and capacity building in order to deepen our impact on more lives at a faster rate than we grow our revenue. We are deeply appreciative of all of you who continue to contribute to this mission. We honour that commitment by striving to be as responsible as possible with the resources entrusted to us.

2.0 History

Pride Community Health Organization was originally established as a Support Group of People Living with HIV and AIDS (PLHIV) in 2004 in Shikoswe Site and Service before gradually transitioning into a nonprofit nongovernmental organization in 2010. The organization is located in Kafue district which is about forty-five (45) kilometers from Lusaka, the Capital City of Zambia, and the organization has four (4) key thematic areas in which it implements its interventions in eight (8) of the eighteen (18) constituent wards.

The Our mandate empowers us to provide comprehensive, quality, cost-effective health services and friendly spaces where adolescents, young people, men and women are able to make their own sexual reproductive health and rights informed choices based on dignity, equality and social justice. At the core of the community work, is the promotion of gender equality and advocate for the rights and opportunities of girls. It's about challenging social norms and attitudes to achieve transformative change for girls and their communities. Investing in girls has the potential to transform the lives of entire communities and countries, and this is the reason why we advocate for greater attention to be paid to the specific rights and needs of girls in development interventions.

3.0 Vision

“Towards healthy, productive and socio-economically empowered communities for national development”

4.0 Our Mission

“To provide comprehensive, quality, cost-effective health services and friendly spaces where adolescents, young people, men and women are able to make their own sexual reproductive health and rights informed choices based on dignity, equality and social justice.”

5.0 Our Values

Our core operating values and principles have always been, and will continue to be:

1. Integrity - we are truthful, fair and transparent and maintain confidentiality at all levels of the organization.
2. Excellence - we maintain the highest standards of professionalism when delivering services.
3. Collaboration - we work in partnership and build relationships in order to share best practice and continuously improve the quality of our services.
4. Innovation - we take informed risks where the benefits promise to enhance organizational efficiency or value -for- money.
5. Accountability - we are answerable at all levels of the organization

6.0 Structure, governance and management

Pride Community Health Organization, regulated by the NGO Act of 2009 and the organization is bound by its Memorandum and Articles of Association, copies of which are available on request. It is governed by an Executive Board. Nominations for new board members are considered by the board and may subsequently be invited to join the board. There are currently eight (8) board members and the organization value the knowledge and expertise of these members. These board members were recruited and appointed for their skills and experience that they can bring to the organization.

9.0 Current Country Overview of HIV

Zambia has been reclassified by the World Bank as a low-income country, and the current population stands at approximate 19,610,769 (Zambia Statistics Agency: Census 2022) with the male and female populations standing at 9,603,056 and 10,007,713 approximate. Men represent 48.6 per cent of the population compared to women (51.4%); 43.1 per cent of the population resides in urban areas compared to 56.9% in rural areas. According to the 2018 Zambia Demographic Health Survey (ZDHS) Final Report, 11.1% of persons aged 15-49 are living with HIV (14.2% of adult women, 7.5% of adult men). HIV prevalence among children under 15 is estimated to be 0.8% (Spectrum, 2021). There are currently 1,494,701 million people living with HIV, 91 per cent (1,353,652) are estimated to know their

HIV status, 79 per cent (1,130,679) are on ART, and 73 per cent (1,096,499) are estimated to be virally suppressed (UNAIDS, 2021).

Life expectancy among people with HIV has improved significantly as a result of scaled-up treatment programmes in recent years, but Prevalence among adults in Zambia has changed little over the last decade despite decreasing infection rates. As a result, HIV prevention has been a key focus in recent years, and though PrEP has been rapidly scaled up in urban areas, and comprehensive sexuality education is now offered in primary and secondary schools, accessibility and acceptability still remains a challenge including hard to reach rural areas.

Women in Zambia remain disproportionately affected (61.6%); adolescent girls and young women between 15 and 24 years of age have an incidence rate of 0.8 per cent compared to 0.2 per cent for adolescent boys and young men in the same age group. New infections among young women are consistently more than double those among young men. Zambia's HIV epidemic is generalized, with a persistently high prevalence of 11.7 per cent and annual incidence of 0.61 per cent among adults 15-59 years old. Reaching key populations (KPs including men who have sex with men (MSM), transgender persons (TG), and female sex workers with HIV prevention and testing services is a crucial last mile to ending the HIV epidemic. Many factors, often stemming from criminalization of certain behaviors, make it difficult for KPs to access facility-based testing services in Zambia. Daily pre-exposure prophylaxis (PrEP) for HIV prevention is highly effective, but has not yet been widely deployed and acceptability levels are still very low because of inadequate communication of the benefits of oral PrEP.

Zambia introduced PrEP as a key strategy for HIV prevention in 2016, and the national roll-out of PrEP began in 2018, and 3,626 persons initiated PrEP. By 2019, the number had increased to 23 327 persons at 728 sites across all ten Zambian provinces, of whom 31 per cent were from key and priority populations. However continuation and acceptability has remained low at 25 per cent. PEPFAR Zambia undertook a size estimate exercise in 2020, which estimated the population of men who have sex with men (MSM) to be 114,852 with a prevalence rate of 21 per cent and the population of female sex workers to be 160,868 with an HIV prevalence of 29 per cent and transgender estimated to be 12,680, but there is no HIV prevalence data for transgender individuals.

7.0 Executive Board

The Board members of Pride Community Health Organization are the people who share ultimate responsibility for governing the organization. During 2022, the Board members were:

1. Estella Sinkala (Chairperson)
2. Mwangala Kalila (Vice)
3. John Hikanyemu, (Treasurer)
4. Astridah Mwenya

5. Florister Mutoloki
6. Blesswell Hankwekwe
7. Julius Kampamba
8. Kenan Ng'ambi (Board Secretary)

The Board sets governance-level policies and establishes the strategic direction including the development of the organization purpose, values and the organization wide goals and objectives. The Board also exercises leadership, enterprise, integrity and judgement in directing the organization so as to provide assurance of its continuing and lasting prosperity. Pride Community Health Organization is a nongovernmental organization by guarantee. Its purposes are made clear in its constitution. Board members apply and endeavour to achieve the highest possible standards of corporate governance. The Board has always discharged its responsibilities in a manner based on transparency, accountability and responsibility. In discharging their responsibilities, the Board, and individual Board members, has always endeavoured to act in the best interests of Pride Community Health Organization as a whole, irrespective of personal, professional, commercial or other interests, loyalties or affiliations. The board members currently comprise of six members who are all technocrats in the field of education, health, agriculture and the social sector.

8.0 Management Team

The management team holds the executive responsibility for implementing the policies and strategies approved by the board. The management team is made up of the Executive Director, Programmes Manager, Finance Manager and Program Analyst and is responsible for the overall day-to-day management of the organization. Stiff competition for the meager resources in HIV and SRHR in the marketplace necessitated organizational changes. A new position of Program Analyst was created to streamline its capacity to compete and be able to stay relevant to the HIV and SRHR responses. The Board has redefined the roles and functions of staff in terms of implementation of interventions. It took into consideration that the organization has transitioned into a fully-fledged non-governmental organization, and as a result of PRICHO's growth, there is need to carry out reforms in the organization. Successful NGOs and grassroots provide high quality services to beneficiaries. To work successfully and meet the goals, Pride Community Health Organization staff have to continually improve and professionalize their work, which will contribute to putting more and more demands on the senior management and other employees of our organization.

9.0 Zambian Health System

The Government of the Republic of Zambia has embarked on an all-inclusive health delivery programme under the banner of Universal Health Coverage premised on empirical evidence that a healthy population is sine qua non for economic growth. Investment in health has been prioritized with a strong focus on health promotion, disease prevention and robust curative measures.

10.0 Our Purposes and Activities

Pride Community Health Organization today serves more than 20,000 urban and rural community members in eight (8) wards in Kafue district, Zambia, and continues to remain relevant to the HIV and Sexual Reproductive Health and Rights responses despite the population expanding rapidly, including an emerging pattern of high-risk behaviors, stigma and discrimination which impedes many people from accessing and utilizing HIV and SRH services. Despite these challenges, our organization still understands the local dynamics, and has continued to expand its reach of implementing high impact HIV and SRHR intervention prevention programmes which target groups most at risk of HIV.

We work to build and nurture partnerships with traditional and civic structures for both urban and rural dwellers, with a focus on adolescents, and young people as the key to community transformation. To achieve this, we are facilitating and supporting the provision of community-based service delivery systems in that provide a channel for social investment in health-related programmes by key partners, including the government through the local council authority. Our goal is to reach 40,000 beneficiaries with dignified access to critical services by 2030.

11.0 Key Focus Area

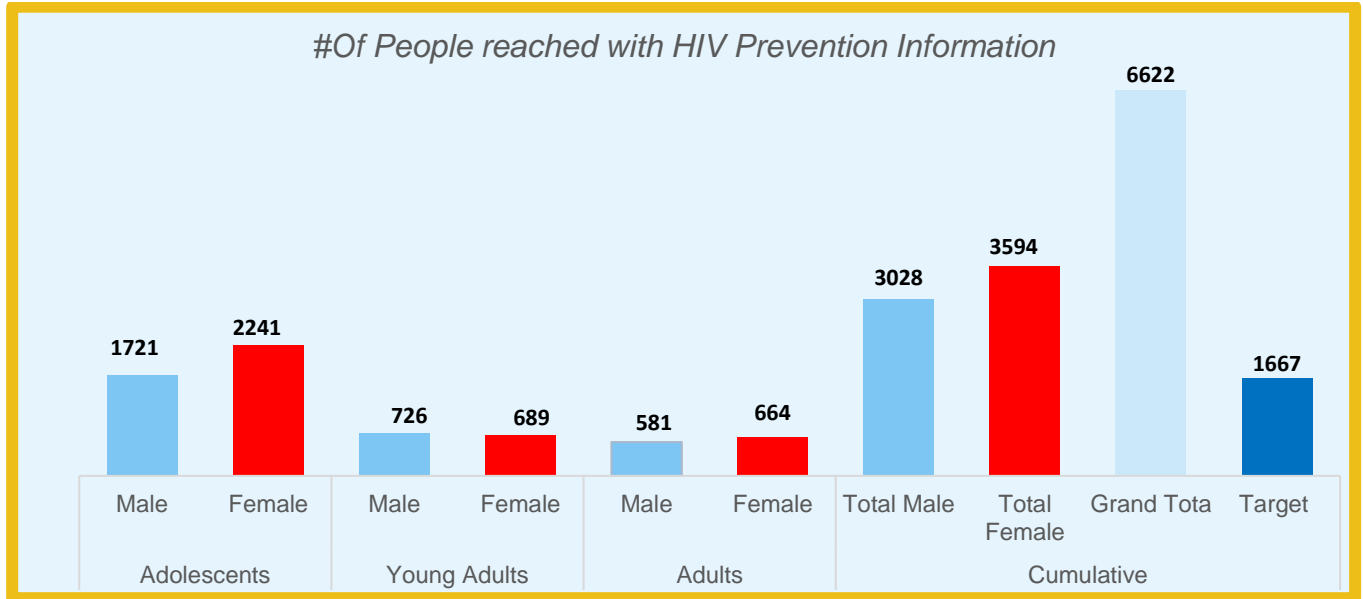
HIV Prevention Programme



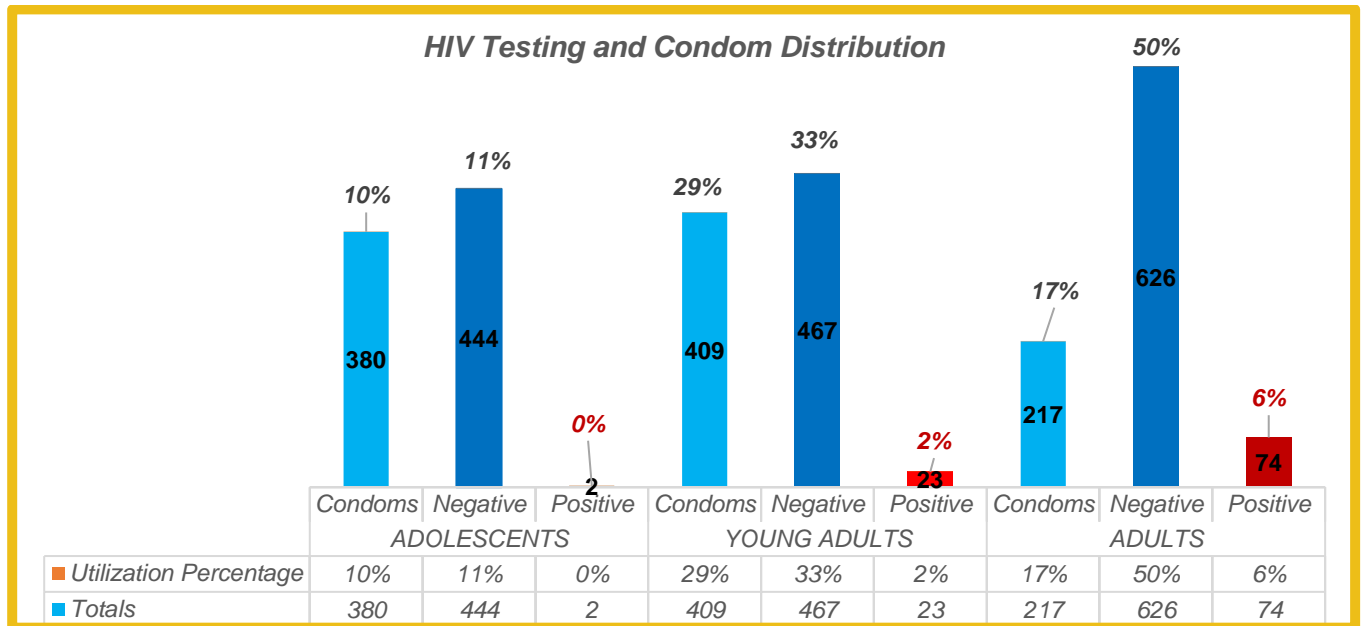
HIV Prevention Statistics

Dissemination HIV Prevention Information

A total of **6622** were reached with HIV prevention information, **3,962 (60%)** were Adolescents 10- 19 years, **1,415 (21%)** were young Adults 20-24 years and **1,245 (19%)** were Adults 25+ years.

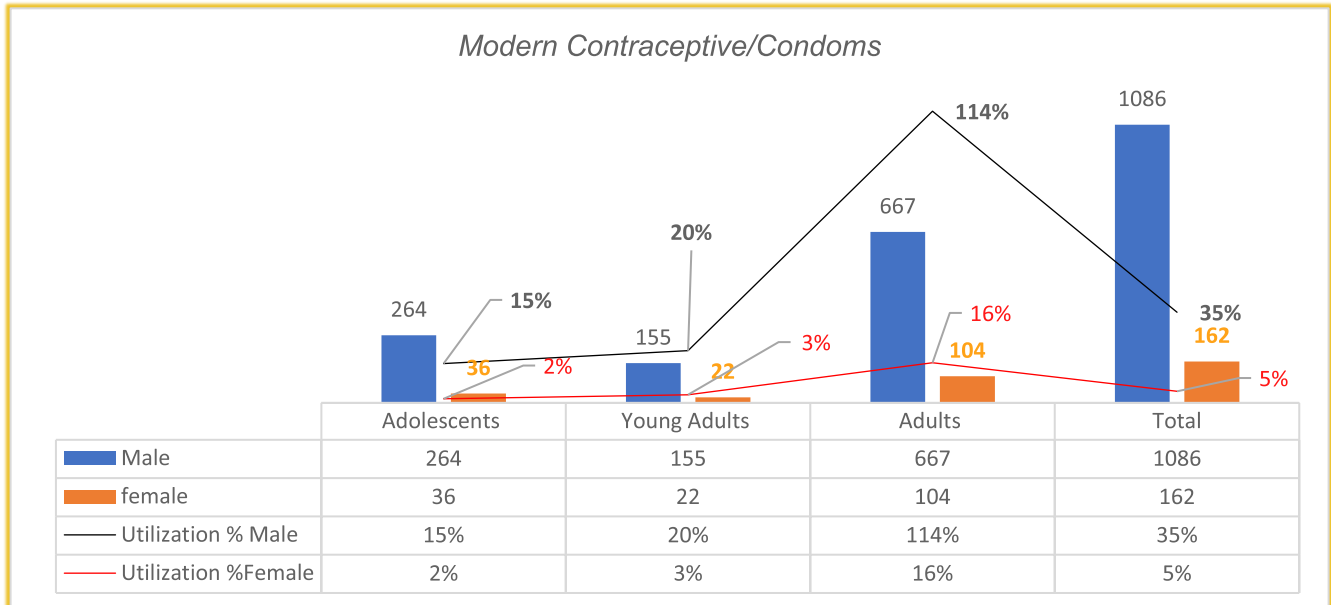


A total of **1,636** Clients tested for HIV with **100** clients testing Positive for HIV. Giving a positivity yield of **6.3%** and a linkage to care and treatment rate of **98%**. However, from the total Clients tested for HIV, **446** were adolescent boys and girls out of the **3,962** reached with the HIV prevention information, giving HIV testing rate of **11%**, and **467** Young Adolescents tested for HIV out of **1415** with an HIV testing rate of **33%**, and **626** Adults tested for HIV out of **1245** with HIV testing rate of **50%**.



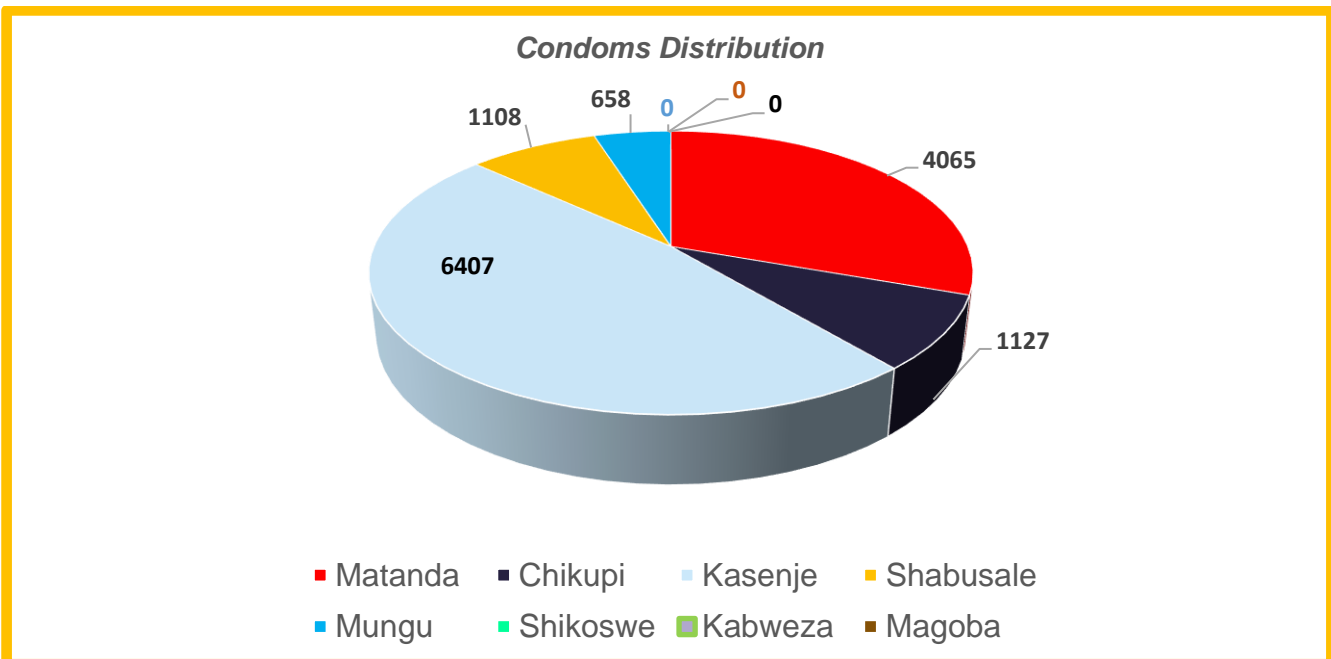
Modern contraceptive Utilization

A total of **264** Male and **36** female adolescents accessed and utilized modern contraceptive (Condoms) out 1721 male and 2241 female adolescent reached with HIV Prevention information. While **177** young adults and **771** Adults accessed and utilized modern contraceptive out of 1451 young adults and 1250 reached with HIV information.



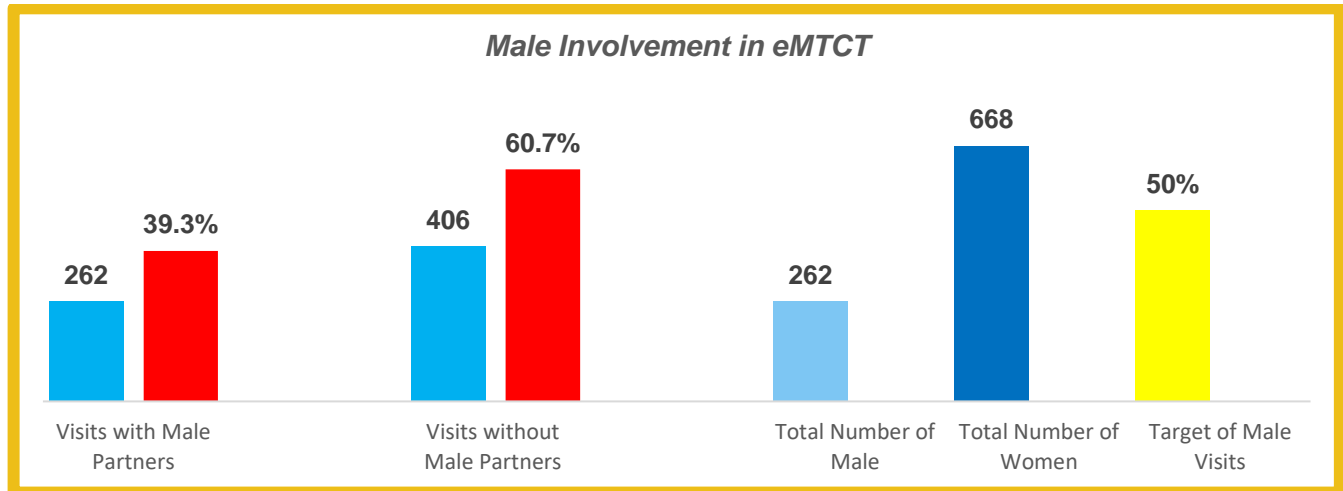
Condom Distribution according to Wards

A total of **13,365** condoms were distributed in the year under review against a yearly target of **1,667**. Below is the depiction of the condom Distribution according to eight (8) constituent wards namely Matanda **4065**, Kasenje **6407**, Shabusale **1108**, Mungu **658**, Kabweza **0**, Shikoswe **0**, Chikupi **1127** and Magoba **0**



Male Involvement in ANC/eMTCT

Male Involvement is an important component in the optimization of antenatal care service, in the year under review, level of male involvement in antenatal care services has been found to be low. A total of **668** women attended ANC, out which **262** women came with their male partners giving a male involvement rate of **39.3%** against a yearly target of **50%** male involvement rate.



Exposed Children

In 2022 a total of **269** exposed babies came for testing at 6 months, 9 months, 12 months, 18 month and 24 months. The tables below show the number of exposed babies tested according to months. **99.3%** tested HIV Negative against a yearly target of **95%** HIV negative.

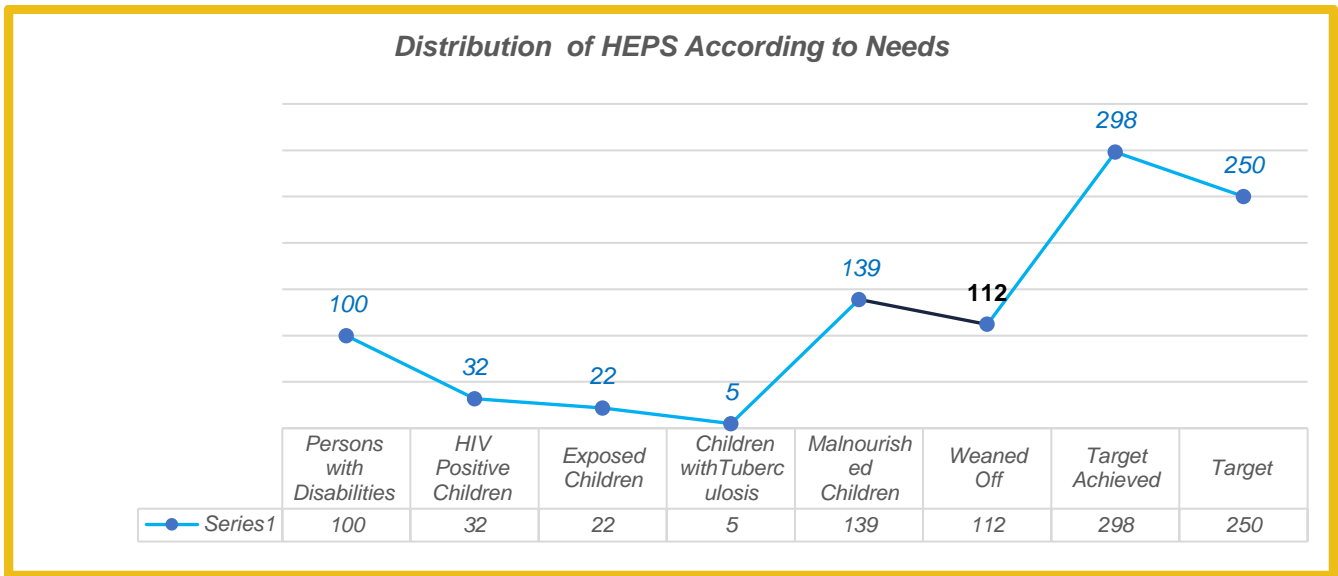
Sex	6 Months	9 Months	12 Months	18 Months	24 Months
Male	28	28	29	22	9
Female	37	37	37	27	15

Exposed Babies HIV status outcomes at each stipulated month.

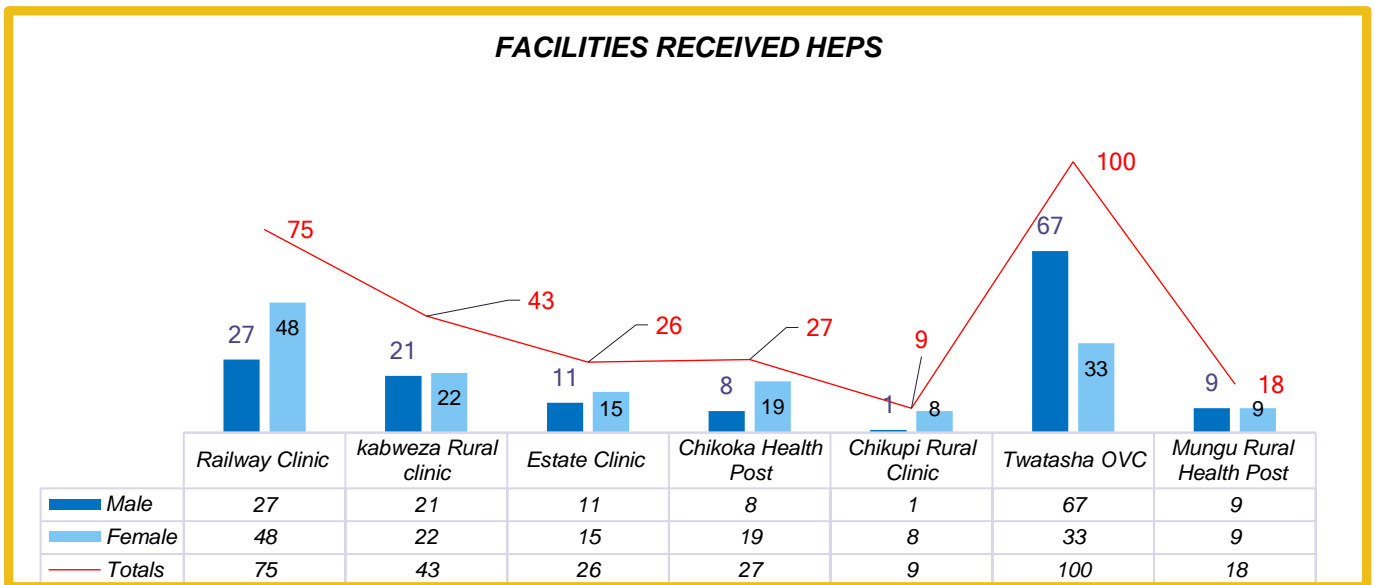
Sex	6 Months	9 Months	12 Months	18 Months	24 Months
Positive	0	0	0	1	1
Negative	65	65	67	48	23

Nutritional Supplements

In 2022, a total of **298** received nutritional supplements (HEPS) amounting to 1,190kgs, **32** were HIV Positive Children, **22** were Exposed Children, **5** were Children suffering from Tuberculosis (TB), **100** were persons with disabilities, and **138** were Children with mild and severe malnutrition respectively. However, out of the 298, a notable weight gain in the **112** Children was recorded.



In 2022, a total of **298** vulnerable children were support with HEPS amounting to 1,190kgs, **75** from Railway Clinic, **43** Kabweza Rural Health Centre, **09** Chikupi Rural Health Centre, **26** Estate Clinic, and **18** Mungu Health Post, **100** Twatasha OVC and **27** Chikoka Health Post.



Analysis of HIV Prevention

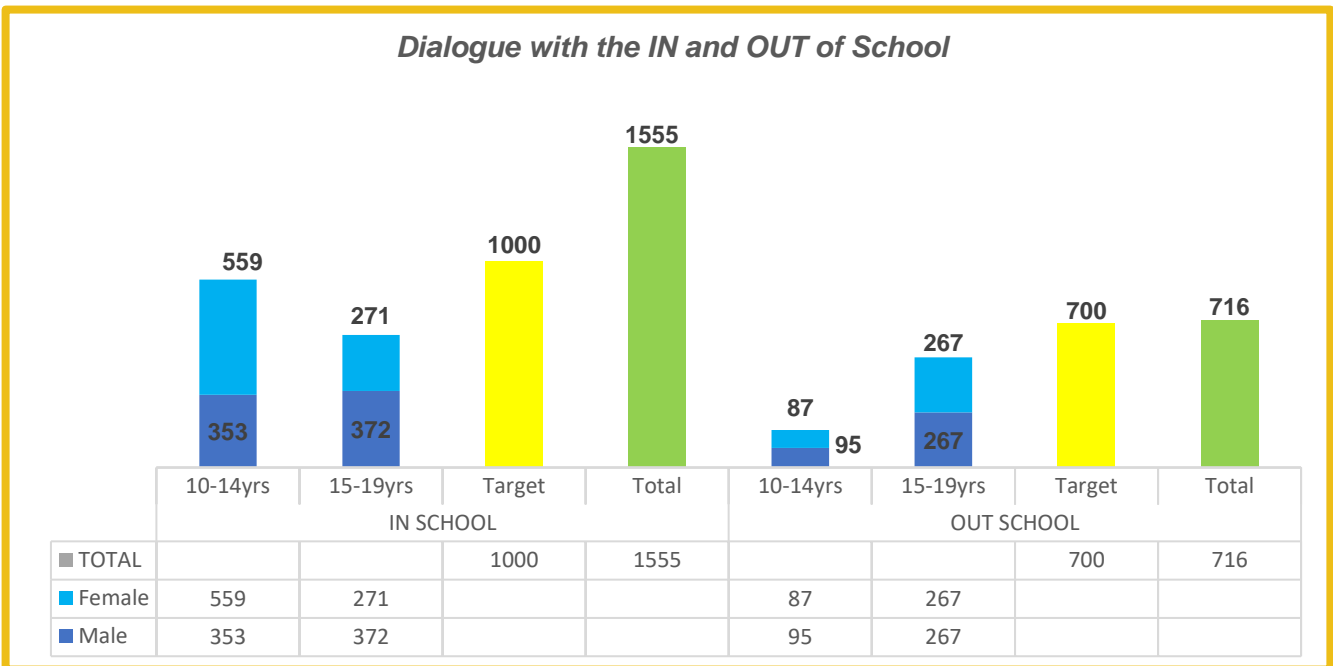
It is notable that despite reaching **6622** Clients with HIV prevention information, **3,962 (60%)** were Adolescents **1,415 (21%)** were young and **1,245 (19%)** been Adults, access and utilization of HCT services and Modern Contraception is found to be very low among adolescents, HTC service is at **11%** and Utilization Condoms at **7%**.

Sexual Reproductive Health and Rights Programme



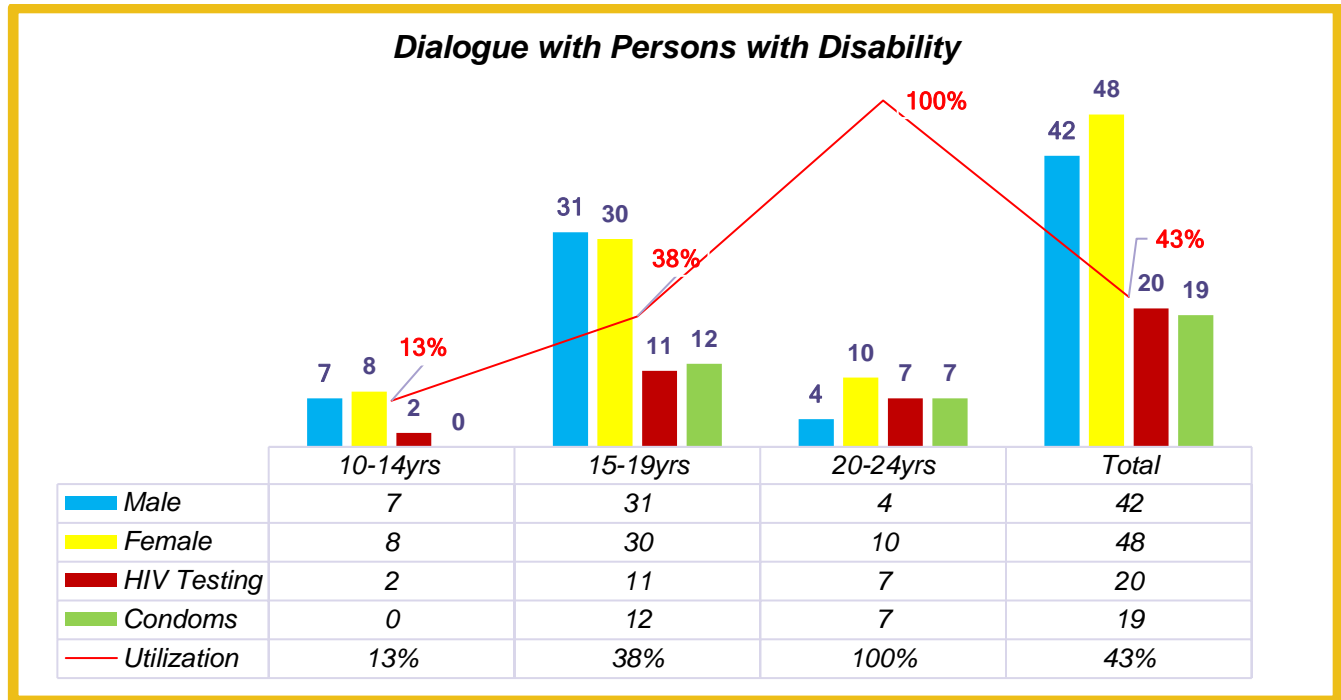
SRHR Statistics

A total of **1,555** in school adolescent aged 10-19 years were reach with SRHR information against a yearly target of **1000**, while **716** out of school adolescent were reached against a yearly target of **700**.



Sexual Reproductive Health and Rights Programme for Persons with Disabilities.

A total of 90 persons with disabilities (42 Male and 48 female) were reached with comprehensive Sexual Reproductive Health and Rights education in the year under review. 20 accessed and utilized the HIV counselling and testing services while 19 collected condoms.



Teenage Pregnancy

A total of 133 teenage pregnancies were recorded with 4 been for girls between of 10-14years and 129 pregnancies between 14-19 years.

Teenage Pregnancy				
10-14 years		15-19 years		Total
#Railway Clinic ANC	4	# From Schools	18	133
#From Schools	0	# From Railway Clinic	111	

School Dropouts

In 2022, a total of 140 school boys' and girls' dropped out of school and 5 returned.

Name of School	Married	Pregnancy	Reasons for Dropping out						Total	Returned	
			Unknown		Economic Challenges		Relocated			M	F
			M	F	M	F	M	F			
Chanyanya	0	5	13	8	0	0	2	1	29	0	0
Railside Primary	0	1	4	9	15	15	0	0	44	0	0
ST. Joseph	0	5	0	0	3	2	0	0	10	0	1
ST. John	0	0	1	2	1	5	0	1	10	0	0
Nangongwe	0	6	0	1	2	3	0	0	12	0	2
Mtendere	0	0	10	12	0	0	0	0	22	0	0
Chikoka	4	1	8	0	0	0	0	0	13	0	2
Total	4	18	36	32	23	25	2	2	140	0	5

Women's Economic Empowerment Programme



Jacqueline Mulenga - Chicken Business improved the living conditions

“Socio-Economic Empowerment and HIV Vulnerability Reduction among Adolescent Girls, Young Women and Key Populations in the Informal Sector”

Women's Economic Empowerment Statistics

In 2022 a total of **68** girls and young women were economically empowered, out which **52** young women received two thousand kwachas (k2000). Among this is 24-year-old young women by the name of Jacqueline Mulenga from Zambia Compound, Kafue. Jacqueline, started her Chicken business early 2022, with only 75 birds, however, profits were never enough to feed and care for two children and the family at larger. International Labour Organization (ILO) in Partnership with Pride Community Health Organization (PriCHO) conducted a Small Enterprise training to 52 participants in Kafue district and at the end of the training each participant received a K2000 to help boost their business and Jacqueline Mulenga was among the participants that received both the training and money. During the monitoring visits conducted by PriCHO MEL Officer, Jacqueline stated that after attending the small enterprise training session organized by ILO in partnership with PriCHO and having applied the techniques she learnt, it has helped to boost her chicken business and her income, she has now 160 chickens with one (1) chicken equivalent to **95.00** Zambian Kwacha giving a possibility of making a profit of **9, 880.00 Zambian Kwacha**. A further forty five (45) young women aged 15 – 24 years will be empowered in early 2023 through “The Canadian Fund for Local Initiatives” project whose aim will be to increase young women's economic participation and self-reliance by catalysing a conducive district and local environment for female entrepreneurship through community engagement and skills development.

Education Support Programme



Education Support Statistics

A total of **649** books were distributed to **13** primary and secondary schools respectively in supporting vulnerable children in the year under review. Twenty (**20**) school desks were donated at Railside School covering for eighty (**80**) learners per morning session and eight (**80**) learners per afternoon session.

12.0 Funding Partners

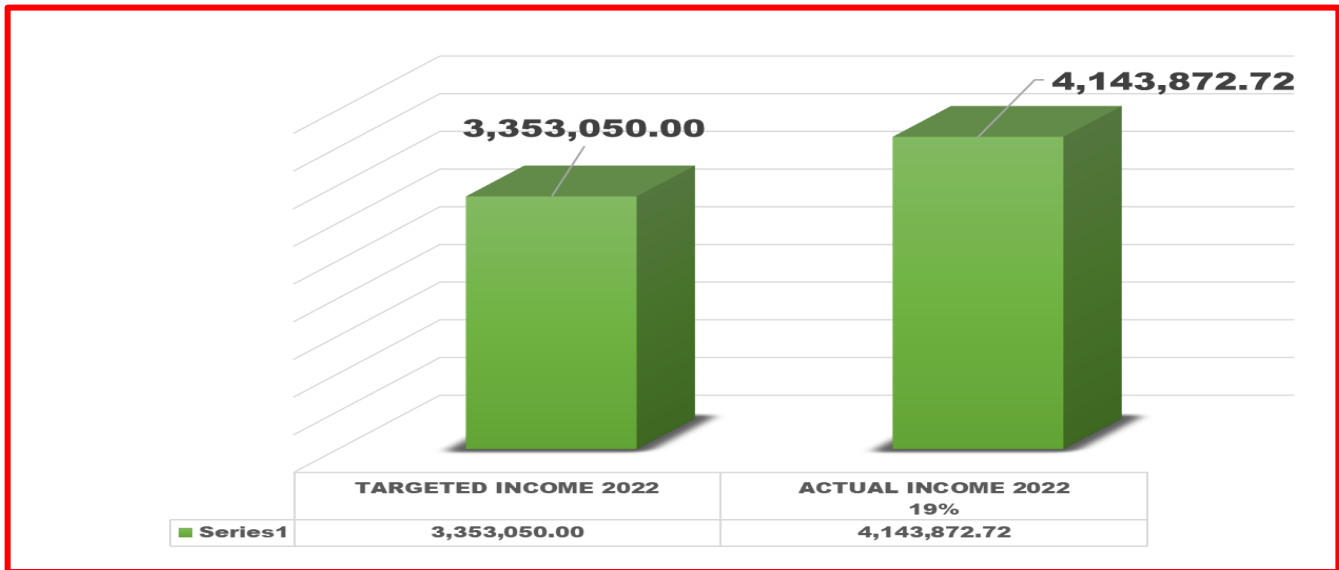
1. The Norwegian Agency for Exchange Cooperation (Norec)
2. ELMA Foundation
3. US Embassy
4. International Labour Organization (ILO)
5. Otto Mille Italy
6. Positive Action UK
7. The Canadian Fund for Local Initiatives (CFLI)
8. Pediatric Adolescents Treatment Africa (PATA)
9. Irena Byrdina (Individual)

13.0 Key Stakeholders

1. The District Administration
2. The Kafue Town Council
3. Kafue District Health Office
4. Department of Small and Medium Enterprises
5. Department of Fisheries and Livestock
6. Department of Social Welfare
7. Department of Community Development
8. Department of Chiefs and Traditional Affairs
9. Rise AID Program
10. Kafue Child Development Agency
11. Kafue District HIV/AIDS Committee
12. Kafue District Adolescent Technical Working Group
13. Kafue District Child Protection Committee
14. Kafue Child Justice Forum
15. Kafue District Social Protection Committee
16. Zambia National Information Services

14.0 FINANCIAL STATEMENTS

TARGET AND ACTUAL SUMMARY FOR THE FINANCIAL YEAR 2022



Target Income: USD 198,051.41

Actual Income: USD 244,762.18

PROGRAMME INCOME SUMMARY FOR THE FINANCIAL YEAR 2022

Zambian Kwacha 4,143,872.72

USD 244, 762.18

Description	ZMW	USD
ELMA Foundation	664,738.24	39,263
Norwegian Agency for Exchange Cooperation	2,005,775.80	118,473.25
Positive Action	693,023.00	40,934.13
Pediatric Adolescents Treatment Africa	135,269.20	7,990
US Embassy	104,364.17	6,164.38
Other Income	367,741.72	21,721.04
International Labour Organization	173,000.01	10,218.42
Total	4,143,872.72	244,762.18

PROGRAMME EXPENDITURE SUMMARY FOR THE FINANCIAL YEAR 2022

Description	ZMW	USD
ELMA Foundation	658,814.51	38,914
Norwegian Agency for Exchange Cooperation	1,990,557.28	117,574.35
Positive Action	677,599.78	40,023
Pediatric Adolescents Treatment Africa	152,850.15	9,028
US Embassy	89,019.17	5,258
Operational Costs	314,740.72	18,590
International Labour Organization	172,767.00	10,204
Otto Mille Italy	2,940.00	173