

COPPER ROSE COMMITMENT FOR ADOLESCENTS AND YOUTH IN ZAMBIA



CONSTITUENCY: Non-Governmental Organization

HEADQUARTERS LOCATION: Lusaka, Zambia

CEO/PRESIDENT NAME: Dr. Natasha Salifyanji Kaoma

COMMITMENT/FOCAL POINT NAME: Faith Suwilanji

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PLEASE INDICATE WHETHER THIS COMMITMENT IS: a new commitment to the Global Strategy for Women's, Children's and Adolescents' Health (2016-2030).

PROVIDE A 200-WORD DESCRIPTION OF YOUR COMMITMENT: Copper Rose Zambia commits to training at least 100 peer educators who will work in youth friendly spaces increasing access to family planning services in Eastern, Copperbelt, Southern and Lusaka provinces of Zambia by 2020. The peer educators will be young people between 19 and 24 with a target outreach of adolescents and youth between 10 and 35. Copper Rose Zambia commits to providing information about family planning and linkage to services to at least 20,000 adolescents and youth in Zambia by 2020. CRZ will conduct workshops, awareness sessions and use mainstream media to engage young people to increase uptake of family planning services. By working with partners, CRZ will provide youth friendly services by youth for youth whilst linking young people to services in second and third level facilities that may not be available at primary healthcare sites. By committing to provision of youth friendly services, CRZ will be contributing to the FP2020 targets to ensure that young people have access to life saving prevention, treatment and care, where and when they need it.

CONTEXT AND JUSTIFICATION: Copper Rose operates in Zambia, a landlocked country that is situated in Southern Africa. The country's population in 2016 was estimated at 16.1 million. Latest estimates indicate that the population of Zambia currently is about 16.59 million. Zambia is experiencing the largest youth population ever in its history entering child bearing years; the 2010 Population Census estimated that almost half of Zambia's population is under the age of 15, with adolescents constituting more than one quarter of the total population. Teenage pregnancy rate stands at 28% and about 42% of girls are married by age 18; while an estimated 30% of maternal deaths are a result of unsafe abortions, of which 80% are among adolescent girls. According to the World Health Organization, Zambia Demographic Health Survey (ZDHS) 2013-14 analyses, 73.3% of unmarried sexually active adolescent girls report not wanting a child in the next two years, yet only 20.6% of them are currently using any method to prevent pregnancy. Among all unmarried, sexually active adolescent girls aged 15–19, 81.9% are not using any method of contraception.

Copper Rose Zambia (CRZ) understands that health service delivery to adolescents and the young people is critical in achieving a healthy generation and for preserving the future of a nation. The need to make health services friendly and accessible to adolescents and young people is enormous. CRZ realizes the need to provide and operate youth and adolescent friendly health services in line with available national policies and guidelines

especially in the mainstream health system. This should go in tandem with the provision of information and awareness among the adolescents and the young people to generate demand for the services including the need to sensitize the health care providers and train peer educators to realize the health needs of adolescents and young people.

BY AGE GROUP, WHICH GROUPS ARE TARGETED BY YOUR COMMITMENT? SPECIFY THE ESTIMATED AFFECTED POPULATION: 21,000 adolescents and young people with a distribution of 50% girls and 50% boys

BY THEME: Adolescents' health priorities and interventions, social mobilization / community engagement

BY GEOGRAPHIC SCOPE: This commitment is made at National level, for the country Zambia. All activities in this commitment shall be in Lusaka, Southern, Eastern and Copperbelt provinces of Zambia.

COUNTRY: Zambia

HOW DOES THIS COMMITMENT TARGET ANY INTERSECTORAL LINKS RELEVANT FOR THE IMPLEMENTATION OF ESSENTIAL RMNCAH INTERVENTIONS, SUCH AS: EDUCATION SYSTEMS, NUTRITION (INCLUDING AGRICULTURAL PROGRAMS), TRANSPORTATION SYSTEMS, IMPROVED SANITATION FACILITIES, IMPROVED DRINKING WATER, HUMANITARIAN AND DISASTER RESPONSE SYSTEMS, ETC.?: This commitment targets intersectoral linkages with many sectors but most importantly the education sector. Adolescents and young people spend a significant amount of their time in schools. CRZ will work closely with schools to spread information and link young people in schools to family planning services. Some of the peer educators trained will also be students from schools.

HOW DOES THIS COMMITMENT SPECIFICALLY RELATE TO, AND ADVANCE THE GOALS OF, THE GLOBAL STRATEGY FOR WOMEN'S, CHILDREN'S AND ADOLESCENTS' HEALTH? (SELECT ALL THAT APPLY): Comprehensive, integrated package of essential interventions and services, health workforce capacity building

TIMELINE FOR IMPLEMENTATION:

START: 2018-11-01

END: 2020-07-01

IS THIS A FINANCIAL OR NON-FINANCIAL COMMITMENT, OR BOTH?: Non Financial

FOR NON-FINANCIAL COMMITMENTS:

EXPECTED OUTCOME (E.G. LIVES SAVED OR IMPROVED, POPULATION IMPACTED): 21,000 people Improved access to information and family planning services for adolescents and young people in. This will lead to up to 10% increase in uptake of contraceptives

ESTIMATED VALUE (EITHER IN USD OR LOCAL CURRENCY) OF SERVICES, PRODUCTS AND OTHER RESOURCES PROVIDED): \$250,000 USD

EXPLANATION OF HOW THIS ESTIMATED VALUE WAS DETERMINED: Estimated value was determined by the cost of current projects meeting the same objectives with similar outcomes

SHARING PROGRESS

HOW DO YOU INTEND TO TRACK AND SHARE INFORMATION ON PROGRESS TOWARDS IMPLEMENTING THIS COMMITMENT TO THE GLOBAL STRATEGY? FOR INSTANCE, RELEASING AN ANNUAL SHAREHOLDER REPORT THAT INCLUDES THIS COMMITMENT, JOINT REPORTING EFFORTS TOGETHER WITH OTHER STAKEHOLDERS (PLEASE SPECIFY), ETC.: CRZ will provide annual reports highlighting progress made using the following indicators:

- Number of adolescents and young people reached. These will be obtained from a compilation of all activity reports throughout the commitment period.
 - Percentage increase in uptake of contraceptives by adolescents and young people in target areas
 - Number of peer educators trained. These will be obtained from the trainer's attendance sheets and the training workshop report.
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CONFIRMATION: I confirm that I wish to make a new commitment to the Every Woman Every Child Global Strategy for Women's, Children's, and Adolescents' Health.