Healthy Kids/Brighter Future
Annual Report 2015 - 2016
Healthy Kids/Brighter Future is a non-profit organization that is changing Zambian lives through community-driven, school-based health services.
WHERE WE WORK

HK/BF operates in Zambia, a stable, democratic country of 14 million people in Southern Africa. About 1.7 million of those live in Lusaka, the capital, a rapidly developing city that is both an economic and government center. While Lusaka has, by Zambian standards, a small middle and upper-middle class, nearly three-quarters of its citizens are desperately poor, living in fragile, informal communities.
THE CHALLENGE

The current focus of most health programs is on adolescents and children under 5, leaving a critical gap in care for school children.

- 50% of Zambia’s population is under 15.
- About 3 million children are continuously at risk for serious illness and early death.
- As many as 40% of Zambia’s poorest school children suffer from treatable and preventable illnesses, such as, schistosomiasis, malnutrition, diarrheal diseases, and malaria.

These rates and the resulting long-term health issues and poor school attendance are unacceptable.
OUR MODEL

We have worked with Zambian teachers, community members and medical professionals to develop, test and evaluate a new model of school-based healthcare in the Ng’ombe district of Lusaka.

By training a teacher health corps to provide education as well as basic care and referrals of sick children to local health centers, we enable Zambians to take dramatically better care of their children. Our new model has created strong links connecting schools, the community, and the health center -- all working together to develop healthy kids.

The change is profound and immediate: healthy, alert, active kids, able to attend school regularly and learn effectively.
HOW IT WORKS

1) We train local teachers and school administrators to be school health workers who are able to manage school health programs and provide health education, screenings, basic care, and clinic referrals.

2) We partner with the Ministries of Health and Education to link schools with the local government health facilities and develop competent and efficient referral systems for school children.

3) Under the supervision of government health professionals, our teachers provide preventive medical services and screenings.
4) We provide ongoing technical support, monitoring, and evaluation of our trained School Health Workers to ensure quality and impact.

5) We establish local school health boards to enable sustained local control and management of the programs.
Our teacher School Health Workers look after their students, offering basic first aid and preliminary diagnoses; identifying those with early signs of disease; referring those in need of professional attention to government health facilities; teaching health, sanitation, and hygiene; and forming a health corps across the district to reinforce the critical importance of children’s health.
“I always dreamed of becoming a nurse but never had the opportunity. Becoming a School Health Worker has allowed me to pursue my passion for looking after the health of children and make an impact in my community. It has been a dream come true.”

- Tamara Daka
School Health Worker from the Emmaus School in Ng’ombe
Medical Outreach Programs

At the screenings, children are provided with anthropometric measurements, physical screenings, vitamin A supplementation, deworming treatment, immunizations, and referral to the local health facility to receive treatment as necessary.
OUR REACH

52
Schools in our programs

112
Teachers trained as School Health Workers

>15,000
Children now receiving our care through our programs
DESIGNED FOR SCALE

Our program is designed to achieve local ownership and sustainability within two years. A special strength of this model is that it works within the existing local infrastructure of the Ministries of Health and Education and leverages their staff and facilities. We select key-stakeholders within the community to serve on School Health Boards responsible for long-term management and financial planning. All of these efficiencies have enabled us to keep the annual cost of sustaining the program under $1 per child.

- $300: To train a teacher school health worker
- $5: To bring a new child into the program
- < $1: Annual cost per child to sustain the program
YEAR IN REVIEW
2015-16
Over the past year, we have worked alongside the Zambian Ministries of Health and Education and Zambian schools to implement and evaluate our model of school based health care. More than 15,000 children now receive school based healthcare in Ng’ombe. The Ng’ombe Health Center has reported a dramatic increase in visits by school children, and we have seen a significant decrease in previously endemic infections, including a 60% reduction in schistosomiasis. Over 90% of administrators at our partner schools have reported substantially increased attendance and a visible improvement in the health of the students.
HIGHLIGHTS 2015–2016

It was an exciting year for HK/BF, as we made gratifying progress towards our mission of improving the health of Zambian school children.

Over the past 12 months, we partnered with the Zambian Ministries of Health and Education to offer our model in government schools, completed data collection for a controlled evaluation of our programs, revised our training curriculum and formalized our status as a registered Zambian non-profit organization. These are some of this year’s highlights:

- Offered new programs in the Ng’ombe government schools and welcomed 4,500 additional children into our programs
- Provided health screenings, deworming and vitamin supplementation for 15,000 children
- Formed partnerships with the Chaisa, Matero and Kanyama government health centres
- In collaboration with the Harvard School of Public Health, completed data collection for a controlled evaluation of our programs
- Adopted a 3-year strategic plan

- Awarded our top performing school health worker a scholarship to attend university
- HK/BF was highlighted at the Aspen Institute’s series on ‘Young Social Entrepreneurs Changing the World’
- Held our first annual community health fair with the Ng’ombe health centre
- Received support from 32 Rotary Clubs from Across the U.S. and Zambia
- Hosted U.S. medical doctors and nurses in Zambia to assist the Ng’ombe clinic

*Lonnie Hackett Presenting at the Aspen Institute alongside Barbara Bush (GHC) and Cheryl Dorsey (Echoing Green)*
BY THE NUMBERS
School Health Worker (SHW) Indicators

7,000
Sick children identified by SHWs

2,200
Sick children referred by SHWs for treatment

4,500
Health education lessons run by SHWs
60% Reduction in rates of schistosomiasis

90% Schools reporting improved attendance

95% Schools reporting a noticeable improvement in the health of their students
Looking Forward
PLANS FOR 2016–2017

Following our successful work in Ng’ombe, the Zambian Ministries of Health and Education have strongly encouraged us to extend our efforts to new areas of Lusaka.

After consultation with the local ministries, health facilities, and community members, we are preparing to replicate our model in the Chaisa, Matero and Kanyama communities of Lusaka. In doing so, we will extend our services to another 25,000 of Zambia's most at-risk children over the next year.

Like Ng’ombe, these are high-density, low-income areas with many children who remain ill for weeks or months before receiving care. The combination of our experience in Ng’ombe and the input of our new partners in Chaisa, Matero and Kanyama will enable us to respond to local needs and further refine our model.
MOVING TOWARD SCALE

Number of Children Covered

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<th>Year</th>
<th>Number of Children Covered</th>
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<tbody>
<tr>
<td>2014/15</td>
<td>11,000</td>
</tr>
<tr>
<td>2015/16</td>
<td>15,500</td>
</tr>
<tr>
<td>2016/17</td>
<td>40,500 (Expected)</td>
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MOVING TOWARDS SCALE

Having first tested our model in the Ng’ombe community and now extending it to three more, we are moving towards our eventual goal to reach every child.

Reaching a more children in more communities, moreover, will give us increasingly reliable evidence to help us evaluate our model and its general applicability throughout Zambia as well as to other developing populations.

To accomplish our goals for 2016-17, we have established a budget of $235,000. That’s ambitious—more than two and a half times last year’s budget. And it’s why we need you!
STAFF

**President:** Lonnie M. Hackett

**Chief Operating Officer:** Ignicious Bulongo

**Finance Manager:** Zita Zulu

**Program Manager:** Betty Banda

**Outreach Coordinator:** John Nyati

**Outreach Coordinator:** Clement Chambanenge

**Training Facilitator:** Jane Mbita

**Training Facilitator:** Chipo Gatawa

**Training Facilitator:** Brian Stumbeko

**Monitoring & Evaluation Intern:** Rachel Brigell

**Monitoring & Evaluation Intern:** Dorothy Wei
Summary of Financials

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<th>2014/15</th>
<th>2015/16</th>
<th>2016/17 (expected)</th>
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<tbody>
<tr>
<td>Revenue</td>
<td>81,361(^1)</td>
<td>96,901</td>
<td>259,950(^2)</td>
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<tr>
<td>Expense</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Program Expenses</td>
<td>74,139</td>
<td>78,952</td>
<td>215,550</td>
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<tr>
<td>Administrative Expenses</td>
<td>3,758</td>
<td>8,616</td>
<td>19,450</td>
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<tr>
<td>Total Expenses</td>
<td>77,897(^1)</td>
<td>87,568</td>
<td>235,000(^2)</td>
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<td>Net Assets End of Year</td>
<td>4,634</td>
<td>13,967</td>
<td>38,917</td>
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1) Figures include $35,770 grant from Rotary International that was distributed directly to program activities in Zambia and is not reflected on the IRS form 990.

2) Figures include $98,950 from the Rotary Foundation that will be distributed directly to program activities in Zambia and is not reflected on the IRS form 990. This represents the 2017 Fiscal year share of a $123,000 grant.

See [www.healthykidsbrighterfuture.org/reports](http://www.healthykidsbrighterfuture.org/reports) for form 990.
THANK YOU!

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