

A young girl in a school uniform is smiling brightly at the camera. She is wearing a light blue collared shirt and a dark vest. In the background, other children in similar uniforms are visible, though they are out of focus. The overall scene is bright and positive.

2017-2018 ANNUAL REPORT

Healthy Kids/ Brighter Future



Our mission is to improve the health of low-income, school-aged children

LETTER FROM THE BOARD

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Dear friends and supporters,

A little more than four years ago, a small group gathered on the Bowdoin College campus to found Healthy Kids/ Brighter Future, each of us drawn by the inspired vision and tenacity of a remarkable young man named Lonnie Hackett. Though he was at that moment was just one day out of college, he and his Zambian colleagues were already laying the groundwork for a revolutionary new program.

What Lonnie had observed on several trips to Zambia—and what is obviously true elsewhere in the developing world, as well—is that though healthcare was free and available, school-aged children weren't getting it. So he came up with an idea so simple you'd think they'd be doing it everywhere, but they aren't. If kids aren't getting to healthcare, then let's move the access point for children's healthcare to where most already are: their schools. Let's train selected teachers to be School Health Workers who would monitor and become the go-to people in schools for children's health, making clinic referrals where appropriate. That seemingly obvious but in fact ground-breaking idea is what has guided HK/BF since the beginning, and it has enabled us to catalyze a sea of change in the health of Lusaka's school children.

Having begun with a single community, we now serve nearly 50,000 children in 5 communities, and with the strong encouragement of the ministries of health and education as well as parents, schools, and communities, we expect to reach 250,000 children by the end of 2021.

Our skeletal staff of just a few years ago is now 17 strong, and 4 of the 5 administrative leaders are Zambians. There are a great many very good ideas that never get off the ground. This one did thanks to the support of a good many individuals and foundations, and we're especially indebted to those who were willing early on to lend us credibility when we had none.

I hope as you read this report you can get a sense of the excitement and dynamism that continue to motivate this organization. If you haven't already joined us in what we're doing, I trust you will by signing up on our website for our quarterly newsletter or by becoming a supporter. Above all, may HK/BF's work inspire confidence in all of us that even seemingly intractable problems frequently have solutions, and simple ideas often work.

Sincerely,

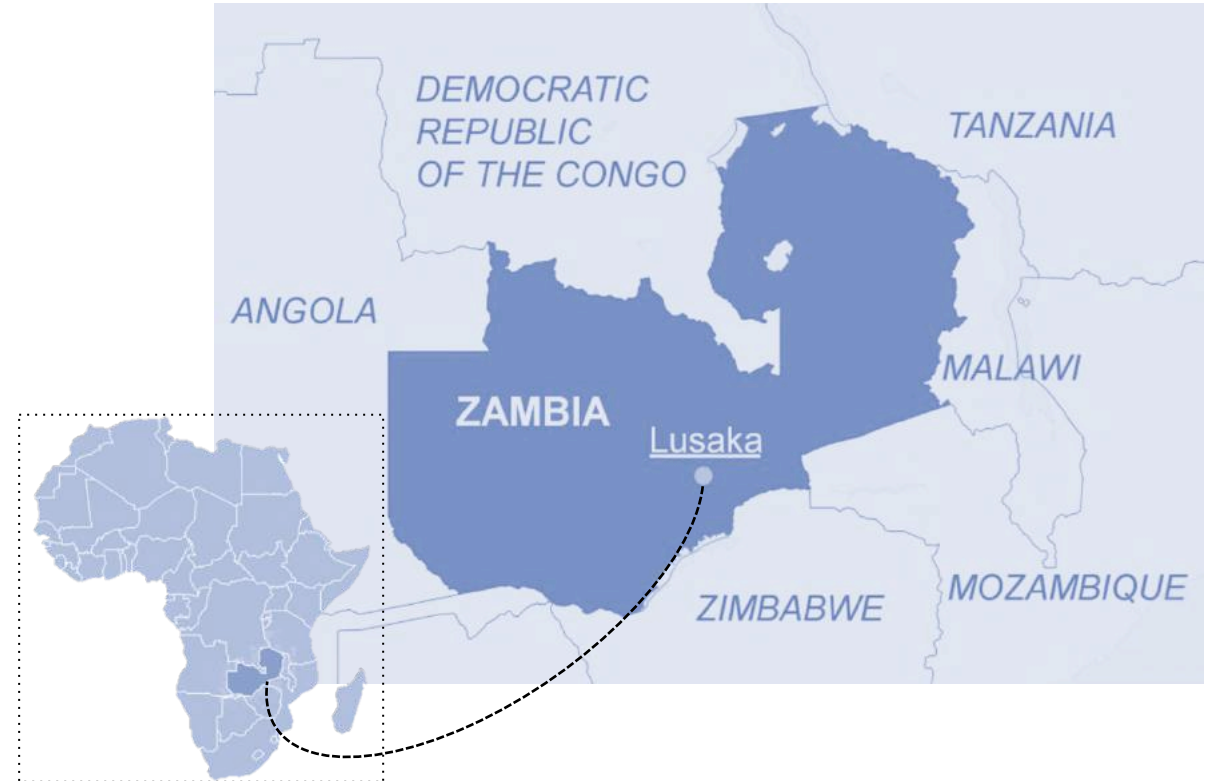


The Rev. Frank C. Strasburger

Board Chair, Healthy Kids/ Brighter Future

Where We Work

We work in Zambia's capital city, Lusaka, targeting the city's poorest communities to reach its most vulnerable children. We serve five communities and plan to reach all low-income schools in Lusaka by 2021.



16 MILLION
Population
of Zambia

1.75 MILLION
live in capital city
of Lusaka

1.2 MILLION
orphans due to HIV/
AIDS

46 PERCENT
population is under
15 years of age

59 PERCENT
of children
live in poverty



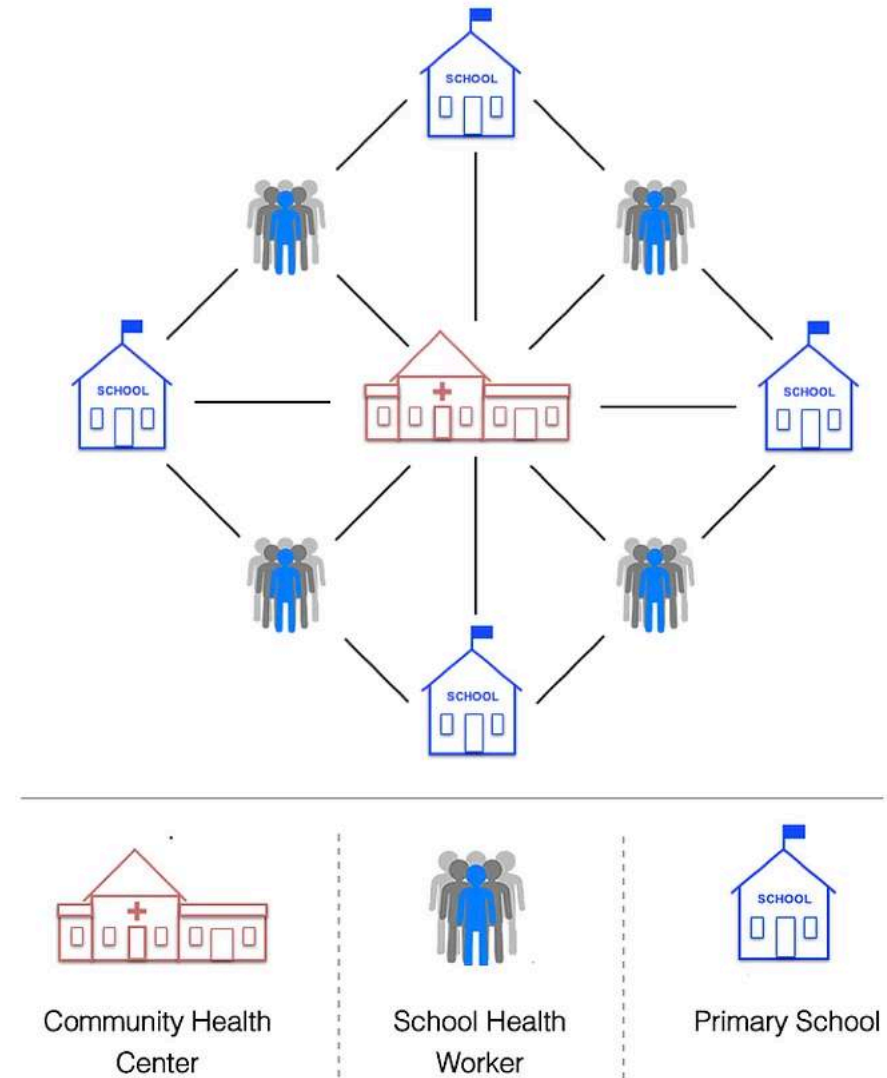
The Challenge

Zambia's policy to educate all of its children is badly undermined by poor health. Although more than 80% of Zambian children attend school, far fewer excel because so many are sick. Common childhood illnesses, infections, waterborne illnesses and the like afflict many children. These are problems that often times can be treated easily and inexpensively with proper care.

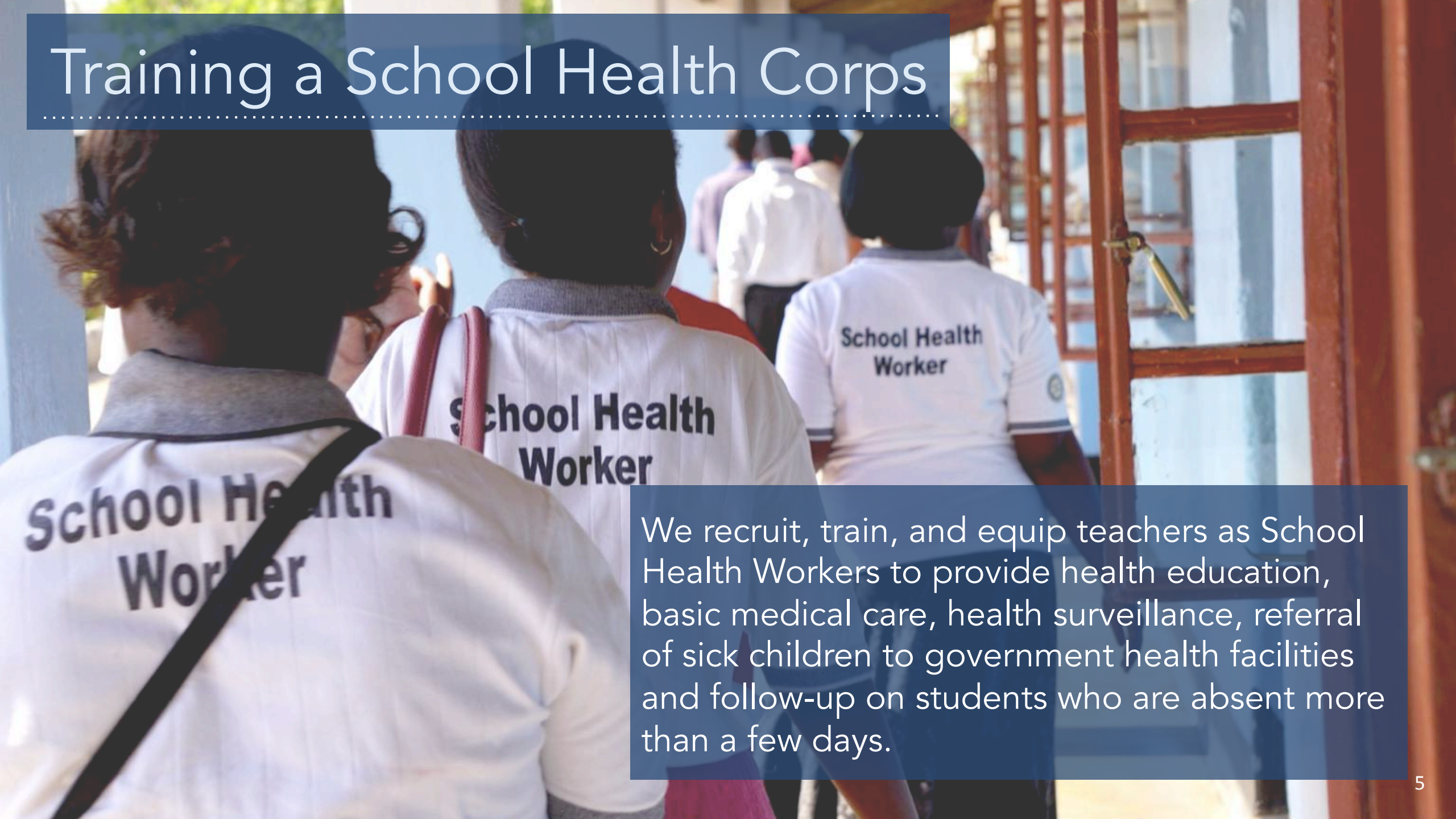
Our Model

We have developed a model of school-based healthcare that moves the access point of children's health to where children spend most of their time— their schools. We train selected teachers and administrators as School Health Workers to become the locus of healthcare in schools.

We have found that by training a teacher health corps and by building strong links between public schools and the health facilities, we can help the government provide better care for their children— and all at a cost of less than \$5 per child.



Training a School Health Corps



We recruit, train, and equip teachers as School Health Workers to provide health education, basic medical care, health surveillance, referral of sick children to government health facilities and follow-up on students who are absent more than a few days.

“I chose to become a School Health Worker because I am interested in the well-being of the child and I want to see a healthy child in class. When these children are not feeling ok, they cannot perform very well. I chose to help these children so they can have a brighter future.”

*Bernadette Masumba,
School Health Worker since April 2017*



Active Health Surveillance

A close-up, profile view of a Black male teacher sitting at a desk in a classroom. He is wearing a white collared shirt under a dark blue sweater and is focused on writing in a notebook with a red pen. The background is slightly blurred, showing other students in a classroom setting.

Our schools proactively monitor students' health by

- assigning students to 'buddy groups' who are responsible for reporting when a member is unwell.
- using class attendance registries to identify and follow-up on children who miss multiple days of class in a row.
- training teachers are trained to identify signs that students are physically or emotionally unwell.



Fast Track Referral System

Taking a child to a clinic frequently results in the guardian's loss of a day's income. Unless the guardian sees the ailment as life-threatening, it is common for children to wait days, weeks or months before accessing care.

HK/BF helps children get the care they need by developing efficient referral systems between local schools and government health facilities. Children referred by School Health Workers have already completed an initial registration and screening at school, and therefore receive streamlined care at government health facilities. The system has led parents to become more engaged in their children's health.

School-Based Preventive Care

We leverage schools as an aggregation point for providing children with preventative and promotive health services, such as mass drug administration and vaccination campaigns.

Students at our partner schools receive biannual deworming and vitamin A supplementation. School Health Workers facilitate the efficient provision of medical services to large populations of children at minimal cost.



Our Approach

We embed our model into the existing infrastructure and systems of local schools, health facilities and ministerial offices. We train school administrators, health facility staff and members of the district health and education offices how to supervise and manage the program. Our school health workers are selected teachers already employed by the Ministry of Education, while the health facility staff are employed by the Ministry of Health.

In addition, we form partnerships with and train key individuals from school parent-teacher associations to promote local ownership and oversight of the program.



Our Impact

A controlled impact study by our partners at the Harvard T.H. Chan School of Public Health found our programs significantly increased student's knowledge about health and improved access to and utilization of healthcare and substantially reduced the burden of disease and rates of severe stunting.

Our partner health centers have reported an increase in visits by school children and schools have reported reduced absenteeism. Teachers have also expressed increased social status and a sense of empowerment.



44%

decrease in
student morbidity



48%

increase in
vitamin A supplementation
and deworming coverage



22%

increase in
student's health
knowledge



“This is the best thing to have ever happened to my school.”

*Cassius Machulenga
Head Teacher, Ng'ombe Basic School*



Our model has an annual cost
of less than

\$5 per child

equal to just

1 percent

of Zambia's expenditure on health
and education for school-aged
children



Year in Review

Our organization has entered a period of rapid growth, both in the reach of our programs and in the size, experience, and capacity of our staff. Last year, we expanded into our fourth community, adding 12,000 more students into our programs. The start of 2018 was defined by a cholera outbreak, which led to a city-wide public health emergency **and temporarily slowed our growth**. We mobilized our school health corps to educate students and community members on how to prevent the spread of cholera. We are pleased that the outbreak ended in April and that not a single cholera case was reported from our schools.

Highlights 2017-18

Replicated the program in the George community to serve 12,000 additional students

Trained 26 teacher school health workers and 33 school health administrators

Introduced the program into the George and Mandevu Primary Health Centers and their 3 auxiliary health posts

Provided 16,846 students with full medical screenings

Delivered 42,232 doses of deworming medication and vitamin A supplementation to students





Piloted a sexual reproductive health program for girls at our partner schools in Ng'ombe

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Strengthened our monitoring and evaluation systems by assigning every student a unique ID number

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Trained teachers, students and parents from 11 schools on sanitation and hygiene promotion in response to a cholera outbreak

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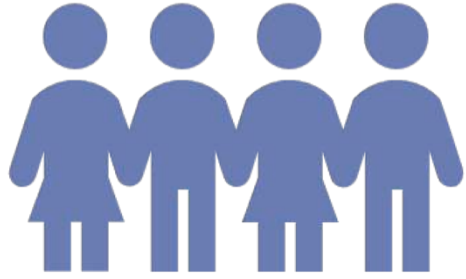
Increased our staff from 9 to 17 full-time employees

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Partnered with Princeton in Africa to provide two year-long fellowships for recent college graduates

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Established sick bays at schools in the Ng'ombe and Matero communities.



39,000

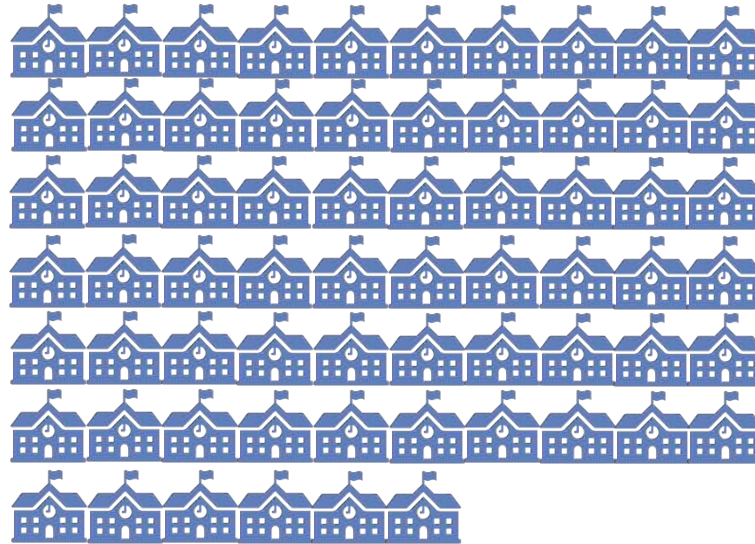
Children enrolled in our partner schools



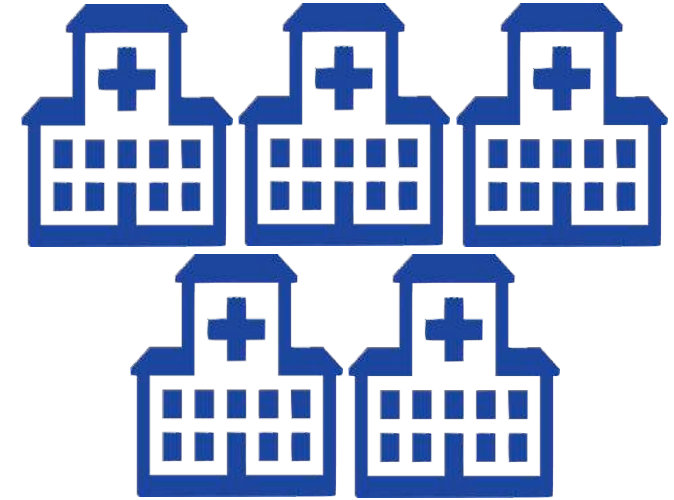
117

Active School Health Workers

Our Scale



66 Schools



5 Partner Health Clinics



4 Partner Health Posts

By the Numbers

42,232 vitamin A supplementation and deworming treatments provided

14,505 sick children assessed, treated and followed up by a SHWs

4,460 health talks given by SHWs

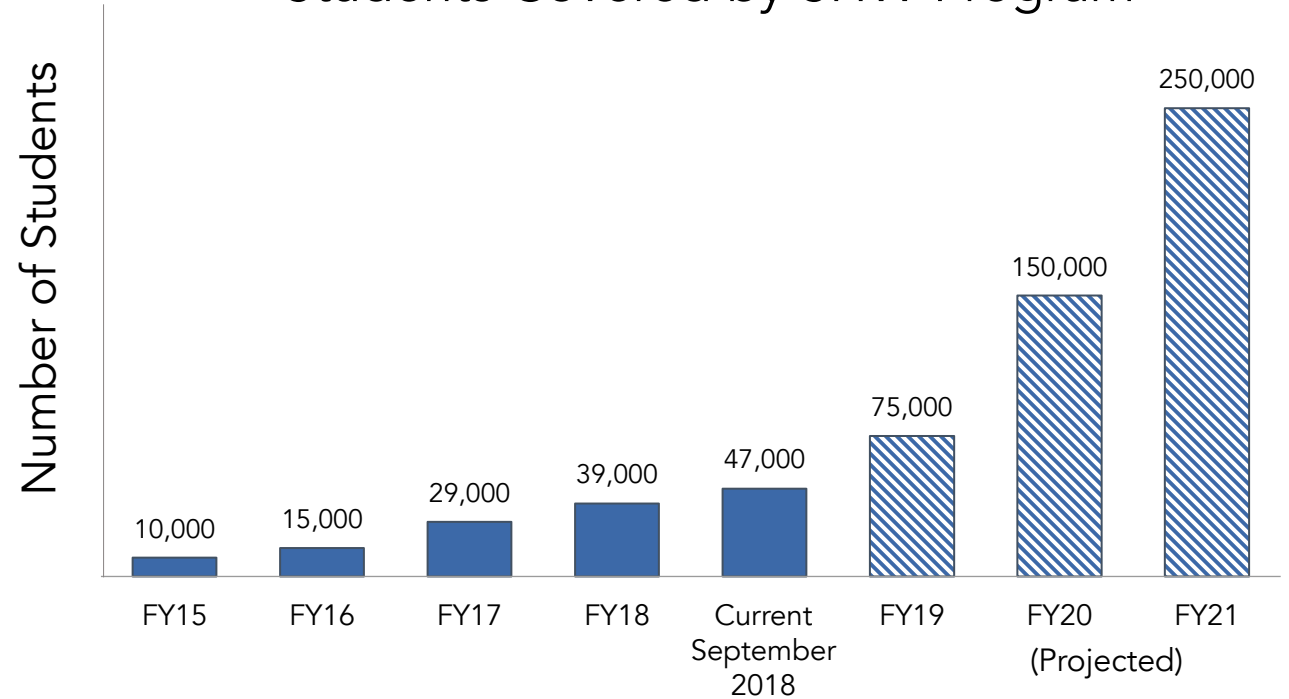
2,979 children referred to the health center by a teacher for further care

Looking Ahead

We have partnered with the Lusaka District Health and Education Offices on a three-year plan to serve all low-income public schools in the capital. In doing so, we will be able to serve nearly 250,000 children.

As we continue to refine, test, and replicate our model, we hope to learn more about how to use it to improve the lives of vulnerable young people across Africa. We have more than doubled our budget for the 2019 fiscal year and strive to sustain this growth as we continue to expand. With nearly 50% of the developing world under the age of 15, the well-being of children today is essential for a thriving society tomorrow, and that means ensuring their right to health.

Students Covered by SHW Program



New Members of Our Leadership Team

We welcomed two new executive staff to lead our **Programs Department** and **Monitoring & Evaluation Department** this year!



Catherine Samiselo
Program Manager

Catherine brings more than 20 years of managerial experience in areas ranging from gender-based violence to adolescent reproductive health to child development. Before joining us, she served as the Deputy Chief of Party for the USAID-funded project **Zambia Rising**. She's been an advisor for **World Vision** and spent 16 years working for the Ministry of Youth Sport and Child Development in the **Government of Zambia**. Her expertise will help us expand our programs across Zambia.



Yanjanani Makewana
Senior Monitoring & Evaluation Manager

Yanjanani has more than 17 years' experience in monitoring & evaluation, including four years with **Save the Children** where he led the development and implementation of the organization's national M&E systems. He's worked as a consultant to **Camara Zambia** and the **World Bank**. Yanjanani leads the development of our M&E systems, guides our impact evaluations, and works with our partners to collect quality data to guide our program activities.

Their combined experience adds immense depth to our leadership team in Zambia

Our Team



Lonnie Hackett
Founder & President



Catherine Samiselo
Programs Manager



Yanjanani Makewana
Senior Monitoring &
Evaluations Manager



Ignicious Bulongo
Director of Partnerships
and Trainings



Zita Zulu
Finance & Admin
Manager



Taonga Mcekeni
Administrative Officer



Serah Kalumbilo
Program Officer



Miyoba Namakobo
Program Officer



Betty Banda
Program Officer



Samuel Eley
Executive Fellow



Jessica Li
Monitoring & Evaluation Officer/
Princeton in Africa Fellow



Jessica Yost
Executive Assistant /
Princeton in Africa Fellow



Mavis Mayondi Makunka
Program Assistant



Phillip Mwanza
Monitoring and Evaluation
Officer



Clement Chambenenge
Community Outreach
Assistant



Aladon Mwanza
Driver



Royd Ntoka
Driver

Our Foundation Partners



Hawk Rock Foundation

Karakin Foundation



Summary of Financials (*)

	2014/15	2015/16	2016/17	2017/18
Revenue	81,361	107,561	186,755	613,623
Expense				
Program Services				234,739
Management, Administration & Fundraising				78,544
Total	77,897	89,479	182,010	312,923
Net Assets at End of Year	4,634	22,716	27,636	328,336

(*) Unaudited



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