

## MANY HEALTHY RETURNS:

# THE IMPACT OF INCREASED INVESTMENT FOR REPRODUCTIVE, MATERNAL, NEWBORN, AND CHILD HEALTH IN ZAMBIA



PATH/Gabe Bienczycki

**40 percent**  
of rural mothers  
still deliver babies at  
home, dramatically  
increasing risks of  
death for newborns  
and mothers.

**One in  
22**  
babies will die during  
the first year of life.



1 in 13 children will  
not reach age five,  
with many dying  
from preventable and  
treatable illnesses.

**K9.7 billion  
(US\$919.1 million)**

could be saved over  
five years by scaling  
up select RMNCH  
interventions.

In recent years Zambia has made tremendous progress in preventing deaths and improving health among women, newborns, and children. Still, many women and children—especially in rural communities—lack access to basic health services, medicines, and health products and technologies.

For the country to progress toward its stated goal of zero preventable deaths among women and children, Zambian decision-makers must invest more resources in reproductive, maternal, newborn, and child health (RMNCH) commodities and interventions. In 2015, the government allocated only K2.2 per Zambian child and just K0.63 per Zambian woman of reproductive age. This amount is inadequate to meet the needs of all women, newborns, and children.

To identify the most effective RMNCH investments for Zambia, a recent PATH analysis identified select interventions which hold the greatest return in health outcomes for women and children. The analysis also modeled potential health impact and economic productivity that would result from scaling up select health interventions and innovations across the country over a five-year period from 2017 to 2020.

The report found that a 12 percent increase in government financing over the current RMNCH budget, beginning in 2017, could save thousands of lives each year, and is the first critical step in fully scaling up access to better health services for all women and children.

### Scaling up these interventions and innovations over five years could cumulatively:

- **Save the lives of nearly 35,400 newborns and young children.**
- **Prevent the deaths of more than 1,100 women.**

### In the peak coverage year (2021) alone, more than:

- **12,100 newborns and young children could be saved (a 26.5 percent reduction in deaths).**
- **380 maternal lives could be saved (a 23.2 percent reduction in deaths).**



## Key Findings

The RMNCH interventions found to have the greatest impact on mortality in Zambia include:

- ★ Increased access to family planning, allowing women to plan and space their pregnancies.
- ★ Increased access to facility-based births and skilled care at delivery, based on the assumption that facilities are more equipped with a package of services and medicines, including a skilled birth attendant.
- ★ Expanded access to an oral rehydration solution to prevent deadly dehydration from diarrhea.
- ★ Improved oral antibiotics to treat pneumonia.

The full report, *An investment in Zambia's future*, can be accessed <http://www.path.org/publications/detail.php?i=2653>.