

2022-23

Annual Report



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Bridging the Healthcare Gap for Zambia's School-aged Children



Across the globe, school-aged children suffer from inadequate access to essential healthcare — yet they remain highly exposed to illness. When these children become sick, they are less likely than those in other age groups to seek treatment. And even when they do, they often don't receive care from a trained professional.

In Zambia alone, more than 40% of students regularly suffer from treatable and preventable illnesses, such as malaria, respiratory infections, parasitic worms, and diarrhea. A recent study found as many as one-third of Lusaka's low-income school children regularly suffer from these ailments, and 36% show signs of stunting that hinders their development.

Being afflicted by these illnesses leads to lower cognitive abilities; school absenteeism and drop out; a lower quality of life; and disrupted learning, physical growth, development, and future livelihoods. And what's worse, it's preventable.

Every child has a right to health and education. At Healthy Learners, we curb the negative outcomes that set back school-aged children — improving their health and providing a foundation for their futures. Our non-profit's integrated school health model targets this vulnerable population with essential, high-impact interventions in a convenient location: school.

Each year, we work to increase access to essential healthcare for children across Zambia. And now, in partnership with the Zambian government, we're making a bigger impact where our program is needed most.

We are **Healthy Learners**.

We're on a mission to **keep school-children healthy** so they can continue to learn. This past year, we expanded the program to serve 847,000 children across Zambia.

A Letter from Our Board Chair

Dear friends,

As I reflect on Healthy Learners' achievements over the past year, two words come to mind: **integration** and **innovation**. From its inception, our school health model has been **integrated** into the existing school and healthcare systems in Zambia. Now, during rapid scale up throughout the country, we are demonstrating the success of this strategy. Our team is not only focusing on **integration** of the model in individual schools and clinics, but also at all levels of the Zambian Ministries of Education and Health – district, provincial, and national. We believe that this partnership will be a key element in creating sustainability over time. The central role of our Zambian government colleagues during this year's strategic planning engagement with Wellspring Consulting is emblematic of this resolve.

Innovation on multiple fronts has also been a hallmark of the past year as the program has expanded to more regions of Zambia and faced new challenges. You will read in these pages about our pilots of bicycle ambulances in rural areas as well as malaria rapid testing and treatment. Our team has even creatively managed the new obstacle of impassible roads during the rainy season in North-Western Province.

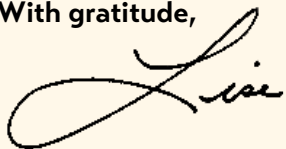
Innovation has also meant leveraging the model to support children's health in new ways.

Our partnership with Gavi, the Vaccine Alliance, to survey immunization status and provide catch-up vaccines for school children is a shining example. **Innovation** has also meant supporting girls' needs during menstruation, so they no longer miss multiple days of school each month.

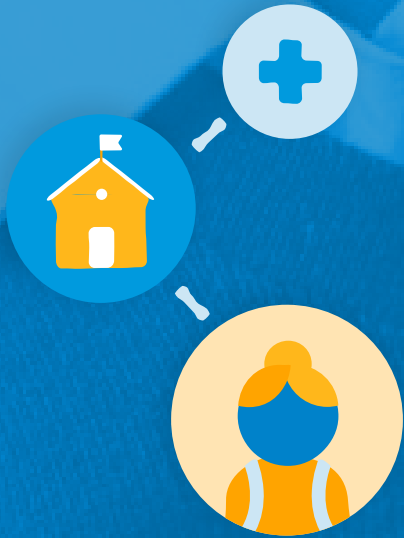
As busy as 2023 has been, fasten your seatbelts for 2024! We anticipate the school health program reaching the amazing milestone of over one million children as we begin our USAID-funded randomized controlled trial with researchers from the London School of Economics, the University of Virginia, and the University of Zambia. **Innovation** and **integration** will continue to be critical to facing inevitable new challenges and obstacles in the road ahead, literally and metaphorically.

Many thanks to each of you who is part of the Healthy Learners journey: students, parents, school health workers, other teachers and school administrators, government partners at all levels of the Ministries of Education and Health, Healthy Learners staff members and their families, external partners, funders, and friends. In an era when war and division around the world dominate the news, you are contributing to a powerful counter-narrative of a global community and investment in the collective future of our children. What a compelling expression of goodness in humanity.

With gratitude,

A handwritten signature in black ink that reads "Lise". The signature is fluid and cursive, with a large loop at the beginning of the word.

Lise Carolyn Johnson, MD, Chair, Board of Directors



THE HEALTHY LEARNERS MODEL



Motivating Teachers

Healthy Learners provides many benefits to teachers and the community at large. As trained School Health Workers (SHWs), teachers are granted a specialized role outside their classroom — one that is officially recognized by the Ministry of Education and embedded within its career ladder. With support from School Health Administrators, SHWs gain new skills and are provided with tools, supervision, and feedback through monthly meetings with clinic partners and Healthy Learners staff.

By boosting teachers' confidence and helping them forge stronger relationships with students and families, the school health program is not only creating more supportive learning environments, it's also leading to improved professional and social status for teachers — giving them a sense of empowerment that extends beyond their roles as educators.



“Being a health teacher has given me an opportunity to interact with learners from all the different grades. We have seen that our learners are now **happy to be in school with no excuse of sickness.** I am happy to help the children who call me doctor.”

— *Mr. Victor Hamusonde,*
Namando Primary



Creating Healthier Spaces Where Children Learn

School Health

It's a simple idea: bringing healthcare to the place where children spend much of their time — at school. To achieve this vision, Healthy Learners is collaborating with the Zambian Government to train and equip the country's teachers. Through our School Health model, we're empowering educators to become health advocates for their students and their communities, turning schools into spaces where children can thrive.

Advancing & Innovating the Healthy Learners Model

By training teachers how to recognize when students are sick and intervene, we can help keep children healthy and in school. Our model provides children with access to health services in substantially greater numbers, which improves attendance; reduces illness-related complications; and supports better health outcomes, learning, and human capital development. These efforts have a profoundly positive, long-lasting impact on students — and the effects reach far beyond the classroom.



"It is fulfilling to see learners who would otherwise stay away from school due to illness come to school and continue learning. I never had an opportunity such as this one during my school days."

— *Clever Munyama,*
Teacher, Mwapona Primary School, Choma



How It Works

Healthy Learners works with communities to leverage their existing infrastructure and their people to transform schools into access points for children's healthcare.



1. Train teachers

We train teachers as School Health Workers, so they can conduct assessments, provide basic medical care, and refer sick students to health facilities for further treatment.

2. Establish health rooms

Providing initial funding, design assistance, and oversight, we help schools build health rooms — places where sick children can go to receive care from School Health Workers.

3. Provide proactive care

To ensure schools respond quickly to sick children, we implement three care mechanisms:

- (1) *Students help look after their classmates' health through a buddy system.*
- (2) *Teachers monitor the health of their students daily.*
- (3) *Schools review attendance records and follow up on absentees.*

4. Screen & treat

Using a mobile clinical assessment system, School Health Workers can effectively diagnose, triage, and treat sick children.

5. Establish referral systems

When a student requires additional medical attention, a School Health Worker refers them to a local government health facility, where they receive preferential care through a fast-track system.

6. Make care continuous

School Health Workers follow up with students after their initial assessment to ensure they've received proper care and can return to school.



7. Monitor community health

Harnessing data collected by School Health Workers through digital clinical assessments, we monitor disease trends throughout our network of schools to detect and curb potential outbreaks.

8. Strengthen health education

Working with the Ministry of Education and school administrators to make health lessons an integral part of curricula, we help provide all students with access to tailored, age-appropriate information.

9. Provide preventative care

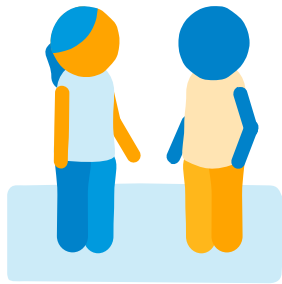
School Health Workers partner with local government health facilities to deliver preventative medical care to schoolchildren, including deworming, vitamin A supplementation, and immunizations.

To learn more about our model, visit: healthylearners.org/the-model



Theory of Change

We know that providing students with access to basic healthcare improves their health outcomes while elevating their education and economic futures. To ensure schools have what they need to help students achieve their potential, we've built the Healthy Learners model on these four pillars:



Engagement to reshape the norms

To change behavior, we must reform social norms. Healthy Learners engages with parents, school administrators, teachers, clinic staff, and local leaders to better understand our work — providing the transparency and understanding they need to take ownership of and build trust in the program. By working together, we can reshape the social norms around child welfare, absenteeism, and health behaviors, cultivating the community ties that will benefit these children and their communities for generations to come.

Awareness to improve understanding

To help communities better understand basic health information and prevention, we rely on our trained teachers to spread awareness. Teachers are highly trusted members of their communities, and this model has been proven to help increase knowledge and promote positive behavioral changes in children.



Collaboration to deliver protective interventions

Local clinics, trusted in their communities, drive high participation rates. Partnering with them enables swift adoption of preventive care. In our deworming programs, robust engagement lessened anemia and absenteeism, boosting health and economic outcomes, especially in highly affected areas.

Optimization to promote healthcare access

Our goal is to shorten illness spells, improve health, and reduce absenteeism. Our health rooms offer the safe space for unwell children and menstruating girls get the support and care they need.

- a. **Tech-enabled assessments** provide access to high-quality triage.
- b. **Fast-track referrals** dramatically reduce wait times at local clinics (a known cause of care postponement).
- c. The **buddy system** increases parents' and learners' accountability, reminding them of the support the school health program offers.





Designed to Scale

The Healthy Learners model is embedded within the government and leverages existing resources from the entire school community. This creates a profound sense of local ownership, which — when combined with our effective use of technology — makes the model highly efficient, effective, sustainable, and scalable.

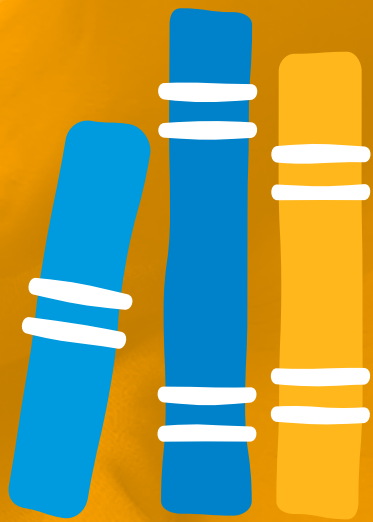
School networks are established, trusted systems. As children spend the majority of their time in school, we have a unique opportunity for continuous contact. Schools are also increasingly equitable: gains in primary enrollment and attendance rates, along with reductions in gender gaps, are among the most significant achievements in the past two decades.

Because schools are at the heart of all communities, they provide a viable, scalable option for health service delivery. Schools are also one of the few institutions in poor communities that provide access to trained human resources. And as leaders within these valued institutions, teachers can broaden awareness of, and community commitment to, public health interventions.



“If Zambia is to overcome these challenges and achieve its goal of providing universal health care, community health has a vital role to play. **Community health approaches can contribute to bringing health services to the doorstep of households that would otherwise not have access to these services, including vulnerable groups and those in hard-to-reach areas.”**

— Excerpt from “Community Based Volunteers’ Integrated Care Handbook,” Ministry of Health, Zambia



IMPROVING GIRLS' HEALTH AND EDUCATION



Addressing Gender Inequities

Girls in Zambia face significant health challenges that threaten their education.

Sexual and reproductive health is a near-universal issue for school children in low and middle-income countries. Girls bear a large burden of those challenges, especially during their early adolescent years. Girls are more prone to experience high rates of anemia, are more likely to contract a sexually transmitted infection than their male peers (15.3% vs 11.3%) and can miss multiple days of school per month due to their menstrual cycle.

According to UNESCO, girls in sub-Saharan Africa miss an average of about four school days each month due to menstrual challenges, which include issues such as stigma, inadequate facilities, and a lack of access to essential sanitary products. Additionally, insufficient knowledge and guidance on menstrual hygiene can increase the incidence of infection, further disrupting school attendance.

Our school health model is positioned to respond to the specific health needs of school-aged girls. We approach our work through a gender lens to help address these inequities and contribute to creating an environment where they can more fully participate in their education.





A Gender Responsive Program Design

We have designed our model to meet girls' specific health needs by:

Creating Safe Spaces for Girls

Health Rooms provide a safe space where menstruating girls can find support and much-needed care, including educational information, basic first aid supplies, sanitary products and counseling from a trained School Health Worker.

Strengthening Health Education

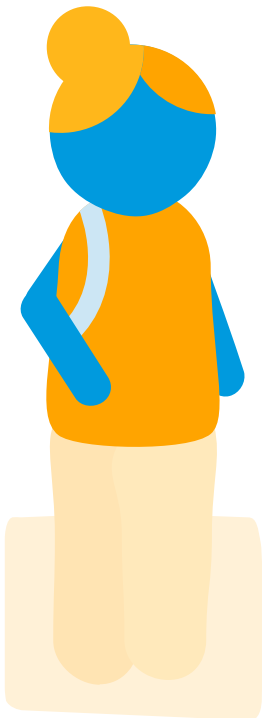
School Health Workers are trained on menstrual hygiene management and education. Schools provide regular health lessons on these topics to both girls and boys.

Enhancing Peer-to-Peer Support

Children are placed into 'buddy groups,' and inform their teachers when someone is unwell. The buddy system has been particularly helpful for menstrual hygiene education. We've found that grouping similarly aged girls creates a peer-support network for discussing issues around their health needs.

Empowering Female Teachers

75% of our trained School Health Workers are women. This creates a more comfortable environment for girls to seek care and discuss sensitive health issues. Additionally, the program supports ongoing professional development and job satisfaction for the women involved.



With these initiatives in place, girls represent **MORE THAN 60%** of visits to the health room.

Healthy Learners remains committed to further optimizing our model to meet the needs of girls across Zambia.

"In the past, we had a lot of girls stay away from school due to menstrual problems, but now that we have a health room and first aid kits, we can help the girls. **Now, they do not miss class.**"

— Lucky Mukwasa,
School Health Worker



Story from the Field

Supporting Girls' Health

The school health program is dramatically improving girls' relationships with their health and education. Thokazeli Phiri, a grade 9 learner in Lusaka, is one prime example of this impact.

Thokazeli found herself in a moment of panic and dread - she had unexpectedly started her period at school. She did not know what to do and - like many girls that have experienced this situation before - she believed her only option was to quietly go home and pray her classmates would never learn of the situation. But Thokazeli's school has a health program, and her experience would be different.

Thokazeli's 'buddies' noticed her distress, rallied around her, and encouraged her to visit the school's health room. While she was initially hesitant - fearing that seeking any support might inadvertently announce her predicament to the entire school - her buddies persisted and persuaded her that the health room was a safe space. And to Thokazeli's surprise, the Health Teacher on duty not only provided her with the necessary pads but also took the time to counsel her and provide education on proper hygiene practices during her menstrual cycle.

Thokazeli was inspired to become an advocate for girl's health - now sharing her story and encouraging her peers to seek help when needed. The investment in the program creates a secure and nurturing space, contributing to the normalization of positive attitudes toward health-seeking behaviors. Thokazeli's openness, supported by her buddy group, exemplifies how the program is supporting girls. The ripple effects of this are profound and, as we've learned, can be transformative.

"The teacher that was in the Health Room was very welcoming and told me that I can come there any time. She did not just give me pads, but she also taught me how to be clean and what to do when I start my menses at school. And because of that, I did not have to miss any classes."

— Thokazeli Phiri,
Grade 9 learner at New Chunga
Primary School





OUR IMPACT

Evidence-Based Solution

The Healthy Learners model is built upon a rich evidence base from literature and is backed by controlled evaluations, robust internal monitoring and evaluation systems, and feedback from partner schools, health centers, and the government.

Evidence in Literature

Numerous academic publications and multi-lateral documents present school health solutions as an exceptionally cost-effective platform to deliver an essential package of health services to school-age children. The interventions delivered through our model have been found to reduce disease burden, reduce absenteeism and improve academic achievement.

Building on Earlier Interventions

The Zambian Government piloted a more simplified school health intervention in the early 2000's, supported by the USAID CHANGES program. A stepped-wedge RCT of the program found significant impact on learning outcomes and observed that teachers were both willing and highly effective in delivering basic health interventions. The researchers concluded that 'school health was a worthwhile investment for developing countries wishing to improve the health and learning of school-aged children'.

The Healthy Learners model incorporates and builds on the policy foundation, evidence, and lessons learned from this earlier program. We adopted many of the core principles while strengthening in areas such as technology, training, data analytics, infrastructure support and community engagement.





By the Numbers

The Healthy Learners program has been shown to help students in Zambia receive timely access to healthcare services. A controlled impact study by researchers from the Harvard T.H. Chan School of Public Health found the model is highly effective at improving children's health.

38%

reduction in morbidity

52%

reduction in odds of stunting

48%

increase in vitamin A and deworming coverage

22%

increase in student knowledge of health topics

Qualitative data from the Harvard study further showed the program is a win-win across a range of areas, reducing absenteeism, engaging teachers with students more holistically, raising the social status of SHWs, improving administrative training, reducing the burden on existing health systems, and generating data to proactively combat local outbreaks.

Sick child assessments

FY22

93,737

91% received treatment within 48 hours

FY23

189,421

95% returned to school within three days

Students treated

FY22

84,300

33,090

FY23

170,753

82,658

Treated at school

Treated at facility

Follow-up assessments provided

FY22

61,143

94% of referred students had improved health status during follow-up

FY23

120,318

Unit Economics

Last year, the Healthy Learners program had an annual ongoing cost of only \$1.51 per child, reduced from \$1.62 in FY22. This includes all ongoing expenses following the establishment of the program in a school. We anticipate additional reduction in our unit costs over the next few years through greater realization of economies of scale and integration within the Government.

As a comparison, this price point is less than 5% of the average annual cost of a school feeding program in the region. Governments already partially pay for school feeding, and so it is very reasonable to believe governments will also pay for this given the program’s strong results and community support. The ongoing operating cost of our program scaled nationally would require <1% of the education sector’s annual \$1.1 billion budget — an investment our government partners are confident would be affordable.


Year	Cost to Sustain
FY21	\$1.85
FY22	\$1.61
FY23	\$1.51
FY24	\$1.40



Story from the Field

In July, grade 11 student Lisali Kayeyi underwent a surgery to remove a growth in her abdomen. Two weeks later while at school, she began experiencing extreme abdominal pain that left her unable to walk. She sought help from her teacher, Lupemba Noah, who sent her and her buddy to the school health room, where Madam Philgrace Mukisha assessed her condition. Madam Philgrace determined Lisali needed to go to the Solwezi Urban Clinic for further medical attention.

Once there, Lisali was attended to and treated. However, when she returned home, her condition worsened and she was rushed to Mukinge Mission Hospital, where they carried out a second operation to remove some threads that had been left during the first procedure. Since then, she's made a full recovery and is back at school — attending her regular activities and enjoying time with her classmates.

A photograph of three young women in school uniforms standing outdoors. They are smiling and appear to be in a school setting. The woman on the left is wearing a light-colored jacket over a white top. The woman in the middle is wearing a white top. The woman on the right is wearing a white top with a school crest. They are standing in front of a green lawn and trees.

“When I am unwell, my buddy group usually escorts me to the health room to get care. Then when I am too weak to walk home alone, they always give me company and keep checking on me while there. They ensure that I get back to school when I am feeling better and **that makes me feel cared for by my fellow learners.**”

— Mariana Mwape,
Learner, Twatasha Primary School



2022 – 2023 MILESTONES & ACHIEVEMENTS



Scaling Impact

Since Healthy Learners and the Zambian Government kicked off the national expansion plan, the school health program has experienced exceptional growth. **As of July 2023, the program supports over 763,000 learners in 424 schools, representing 25% of Zambian primary school population.** We plan to continue this momentum to reach one million students by next year.

Embedding Operations within Ministry of Education

A core objective of our expansion plan is to enhance the capacity of the Government to sustain the program long-term. Healthy Learners now embeds members of their staff within the district offices. Embedding staff within the District Education Office (DEO) has several benefits. First, it enables us to streamline personnel and reduce administrative costs. Second, the proximity allows us to enhance mentorship and technical assistance to district partners. Third, this sends a strong signal throughout the district that the program is owned and operated by the Government.





Deepening Government Adoption

Healthy Learners is at a crucial inflection point. With our model already adopted as policy and a signed MOU to scale nationally, we continue to work with the Zambian Government to ensure the legislative, human resource and finance mechanisms that will sustain the school health program. Our team made significant progress across this area over the past year.

Legislative, Policy, and Legal Framework: The Ministry of Health has included School Health Workers as one of three defined cadres within their national community health strategy. With our support, the Ministries of Health and Education are working on a letter of understanding to codify their respective responsibilities. Last, we are working with members of Parliament to establish a School Health Caucus to generate broad political support for the program.

Human Resource Allocation: The Ministry of Education has officially assigned staff to the school health program within implementing district education offices - an important step in strengthening the structures of their new School Health and Nutrition Department. Similarly, the Ministry of Health has recently committed to assigning designated staff to school health across their implementing offices.

Government Financing: Our team has completed an analysis on the components of our unit costs to identify mechanisms for handoff to the Government. And we are actively working with members of parliament for the inclusion of school health within the national budget.





Overcoming Challenges

While FY23 was a banner year for growth and government engagement, this progress was not without challenges. Our team has worked diligently with our partners to proactively identify challenges and develop solutions.



Adapting Model for New Contexts

Healthy Learners started their program in the urban setting of Lusaka. Rural areas have their own set of challenges and opportunities to increase impact. For example, rural schools are often significantly farther from health facilities and are impacted by a higher burden of illnesses such as malaria and schistosomiasis. We have worked with our government partners to address these challenges and adapt our model to support rural healthcare needs. See our Program Innovation section to learn more.

Sustaining Operational Growth

Our team has grown rapidly over the past two years, which has come with expected growing pains. For example, supply chain snags and weather-related challenges resulted in more frequent construction delays. To address this, we have hired new staff in key areas, strengthened processes in procurement and finance, and introduced new tools and business solutions, such as Click Up, to help streamline project management. We are confident these steps will help avoid delays in the upcoming year.

Responding to Policy Changes

The Zambian Government launched a 'Free Education' policy, which removed hidden costs to education such as Parent Teacher Committee fees. This initiative has led to an increase in school enrollment and resulted in larger class sizes. This all places a greater burden on teachers - including our trained SHWs. To address this, the Government has hired 30,000 new teachers, and we are now going back to districts to train additional teachers as SHWs to accommodate the new enrollment. We will continue to monitor the situation closely and respond accordingly.



SCALE STRATEGY

Zambia

HEALTHY
LEARNERS

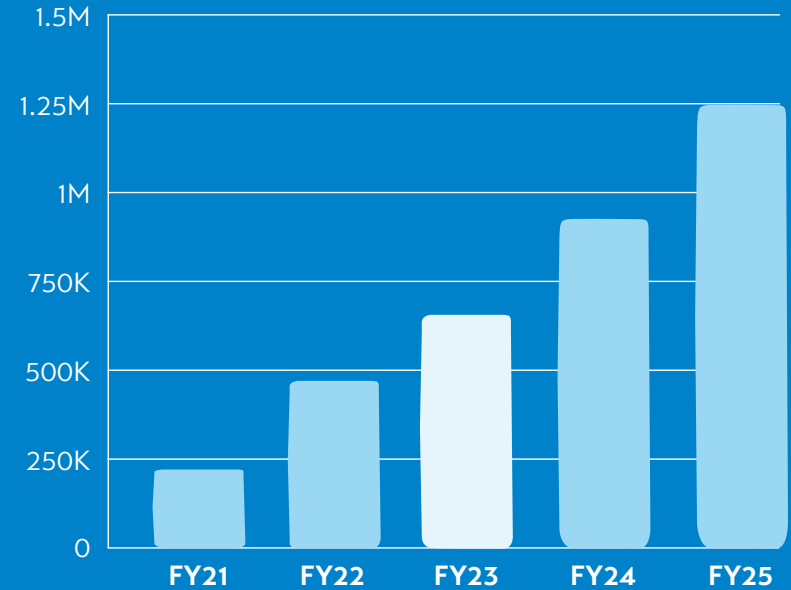


National Expansion Plan in Zambia

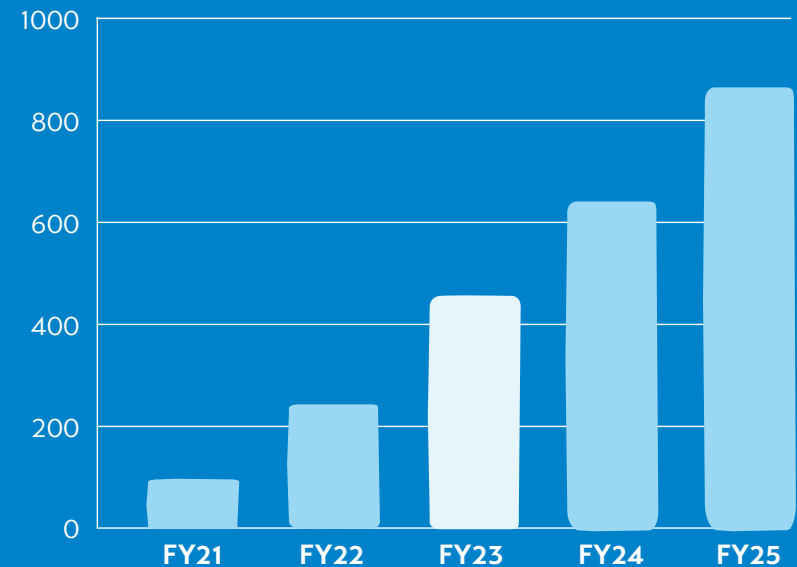
The first step of our plan targets the ten provincial district capitals. This approach is politically strategic and particularly visible given the public administrative structure within Zambia; it also creates a national footprint that enables a broad coalition of political and tribal support. In FY23 our team expanded coverage to a total of six provinces.

Our second step involves expanding program coverage across each province, achieving a more extensive geographic footprint, enhancing our influence, and enabling a deeper level of technical assistance to support the MOE's new School Health and Nutrition Department. We successfully launched this second phase of expansion last year in Southern Province.

Overall, the plan puts Healthy Learners on track **TO SERVE 2.5 MILLION CHILDREN** - representing 70% of primary school students across the country - by 2028.



Projected Growth: Learners Served FY21-25



Projected Growth: Schools Served FY21-25



SCALE STRATEGY

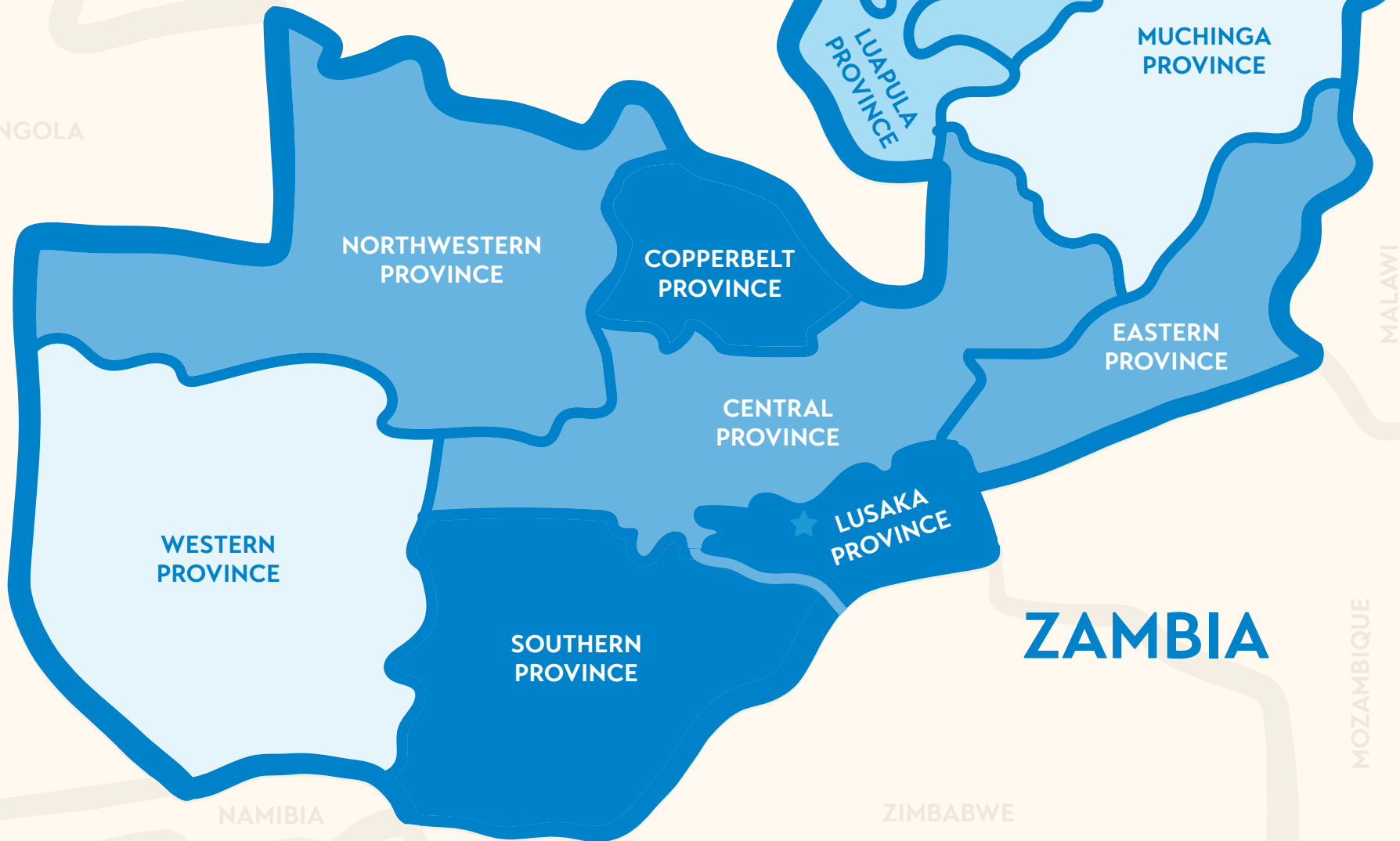
Geographic Reach

- FY22**
- FY23
- FY24
- FY25

ANGOLA

DEMOCRATIC REPUBLIC OF THE CONGO

TANZANIA



MALAWI

ZAMBIA

MOZAMBIQUE

NAMIBIA

ZIMBABWE

BOTSWANA



Scaling Impact in the Region

In the short-term, Healthy Learners will work alongside the Zambian Government to implement the program nationally. In the long-term, our aim is for Zambia to be a proof of concept to influence governments and policymakers in the region.

Policy Influence Across the Region

Lonnie Hackett, CEO of Healthy Learners, continues to serve on USAID's Global Advisory Committee on school health. In this capacity, he is assisting the evaluation of systems and policies that underpin school health programming for Kenya, Malawi, Senegal, and Uganda. The objective is to propose impactful health interventions and practical enhancements for national policies, with the ultimate goal of bolstering school health programming in these four countries. This initiative is scheduled to conclude in early 2025.

Future Country Expansion

Healthy Learners is committed to achieving national scale in Zambia and positioning the government to sustain the program long-term through technical assistance and the strategic transition of program oversight. Part of our Wellspring consultation assessed how, when, and why Healthy Learners would expand to one or more additional countries, what we expect this expansion to cost and deliver, and what criteria we would use in assessing new sites. The preliminary findings suggest that Rwanda, Malawi or Kenya may be viable options to pilot the program in, based on factors such as their current health care and education systems, their political stability, and their proximity and cultural similarity. Ultimately, our decision will also depend on how committed their nations are to investing in the program's long-term success.





PROGRAM INNOVATION



PROGRAM INNOVATION

Strengthening Our Model

The program has not only grown over the past year — it is also getting stronger. Our team is always on the lookout for opportunities to make our model more affordable, simple, and impactful. This balance enables us to increase impact while ensuring the model can still be scaled effectively within the Government.

Expanding Rural Care

We've worked with the Zambian Ministries of Health and Education to create the policy foundation for School Health Workers (SHWs) to provide treatment for malaria, schistosomiasis, ringworm, and conjunctivitis within rural and peri-urban schools. This initiative allows for a greater number of cases to be treated within the school - thus improving the timeliness of care and reducing referrals in areas where the distance to the health facility can be a significant obstacle.

We've worked with our Ministry partners to update our training manual, tools, and mentorship protocol. Additionally, we have worked with our technology partner, THINKMD, to incorporate these new treatment guidelines into our clinical decision support system.





Combating Malaria

School-aged children have the highest prevalence of malaria in Zambia, with 40-50% of children within this age group testing positive in endemic areas. High rates of malaria have detrimental effects on health, education, and economic outcomes — all of which are compounded by inadequate access to prevention and treatment for children. School-aged children are unlikely to sleep under a bed net or seek treatment when they become ill — and they're even less likely to seek treatment from a formal provider. These delays can lead to avoidable deaths. Studies have shown 40% of severe malaria cases could be averted if children sought treatment within 24 hours of symptom onset.

Our team has worked with the Ministry of Health to create processes, protocols, and training content for School Health Workers to test and treat for malaria. We are currently piloting this across eight schools in Luapula district with plans for a broader roll-out in 2024.

By identifying infections early, our School Health Workers can administer appropriate treatment to ensure quick recovery, helping to avoid complications and keep children in school. Furthermore, using the near real-time data generation of our THINKMD has the potential to significantly strengthen health surveillance efforts as part of the Government's malaria elimination campaign.





Bicycle Ambulances

With a lack of adequate transportation infrastructure and vast distances between health facilities, rural communities are often isolated from essential medical care. In Zambia, bicycles are frequently used to bridge the gap in healthcare access, as they provide a cost-effective, sustainable means of transportation for both patients and medical staff. At the request of teachers across our rural communities, we are piloting a program that provides a bicycle and training to schools located farther from health facilities.

This new resource allows parents to transport their sick children to a clinic. Because bicycles require minimal maintenance and no fuel expenses, they are an economically viable, locally accepted, and eco-friendly solution. Currently, we are piloting this initiative at eight rural schools, and have developed safety measures and protocols for the use of bicycles.

We are evaluating the program's impact on referral success rates and timeliness of care to determine whether this program should be brought to more of our partner communities.





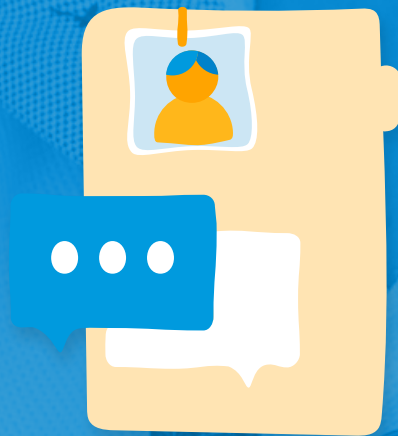
Supporting Catch-up Immunizations

Healthy Learners is part of a coalition with GAVI, Johns Hopkins, the Tropical Disease Research Centre and the Zambian Ministries of Health and Education to evaluate a school-based catch-up immunization program. The intervention trained teachers to screen vaccination cards and referred parents with underimmunized children to receive 'catch-up' doses at school-based vaccination campaigns or their local health facility.

An evaluation of 1,080 grade 1 students in Ndola found that 33.8% were undervaccinated and 7.7% of those screened were unvaccinated for the measles vaccine. Partnering with Healthy Learners' network of schools, the coalition was able to vaccinate 76% of the under-immunized children identified.

Overall, these early results demonstrate schools to be an effective platform for the identification of under-immunized children and provision of catch-up vaccines. We will continue to support the engagement to generate more data on cost-effectiveness and explore broader adoption of the intervention with the Government.





RESEARCH

Zambia

HEALTHY
LEARNERS



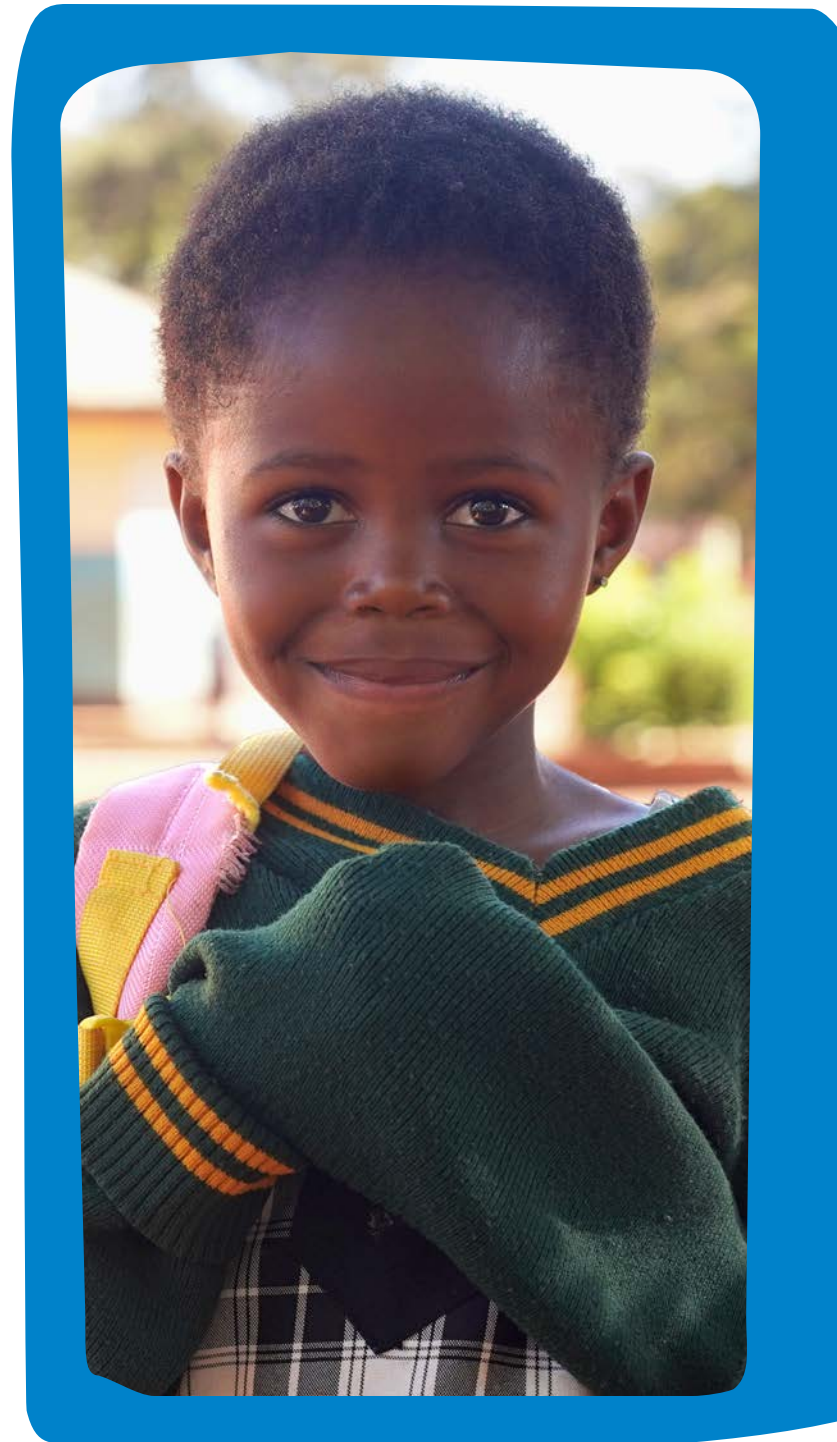
Randomized Controlled Trial

We plan to launch a large-scale randomized controlled trial (RCT) in January 2024 in partnership with researchers from the London School of Economics, University of Virginia, and University of Zambia. The evaluation will include 13,500 students across 225 schools to further measure the program’s impact on health and educational outcomes as we scale to new areas of the country. A cost-effectiveness analysis will help to support the business case for long-term funding and catalyze expansion into additional countries.

We have finalized both the study protocol and the research team. We recently secured a \$1.5M commitment from USAID DIV and £1.85M from the UK Medical Research Council (MRC) to cover evaluation expenses.

Update on Study Design

Based on the recommendation from USAID, we have decided to expand our RCT from two to three arms, with an enhanced control arm that consists of deworming treatment. To accommodate a third study arm, and to have greater statistical power within the study, we have increased study size from 120 schools to 225 schools. Additionally, we have added three additional districts from Luapula Province to i) accommodate the larger sample size and ii) create a larger geographic coverage for the study.



SCHOOL HEALTH



ORGANIZATIONAL DEVELOPMENT



Wellspring Engagement

Healthy Learners hired Wellspring Consulting to help us capitalize on the growing demand for and interest in our work. Together, we've worked with our Ministry of Health and Education partners to identify how we can further accelerate transitioning our model to the Zambian Government. Additionally, we are learning how we can expand our model into more countries throughout the region and what criteria we need to meet to make this possibility a reality over the next few years.

Wellspring consultants held interviews and focus groups with our national, provincial, and district-level partners as well as conversations on growth, partnerships, and scale strategies from funders and like-minded organizations in the health and education sectors. Together, we discussed ways to deepen government support for school health in Zambia; how to transition responsibility for the program to our government partners; how to grow the program while continuing to make strategic investments to ensure its quality and advance its sustainability; and what is needed to pilot the program in another country.

We developed base-and-stretch scenarios alongside the government to outline our shared commitments and will use these to refine and strengthen our five-year strategy. We are grateful to all our funders, partner NGOs, and government colleagues who took part in this process.





Staff Updates



Angel Chelwa

Angel Chelwa has been promoted to our first Chief Operating Officer. In this role, she will oversee all operational teams — including Programs, Supply Chain, M&E, and HR — to support our ongoing scale-up across the country.

Before joining Healthy Learners, Angel spent six years as Project Manager and Managing Director for the multinational start-up Mpharma, building out and running operations across Zambia, Malawi, and Rwanda.



Ignicious Bulongo

Ignicious Bulongo has recently been promoted to Vice President of Programs, where he will lead program expansion, sustainability, and construction activities.

Ignicious spent the first 15 years of his career with the Zambian Ministry of Health. Before joining Healthy Learners, he served as the director of the Ng'ombe Health Centre, where he led the center to becoming Zambia's first health facility to integrate HIV/AIDS services into outpatient care and the first facility to implement an electronic record-keeping system. Ignicious holds degrees in both hospital management and clinical medicine, as well as an advanced diploma in Participatory Learning Methods, which he received in Japan through a sponsorship from the Japanese International Cooperation Agency (JICA).



Staff Updates *continued*



Sarah Bush

In January, Healthy Learners hired Sarah Bush as Vice President of Development and Communication. In this role, she will spearhead Healthy Learners' fundraising by building upon our strong philanthropic base, evolving a high-functioning development team, and working to acquire additional financial support needed from new and existing donors.

Sarah has dedicated her 20-year career to addressing humanitarian challenges in her roles with the Field Museum of Natural History, the American Cancer Society – where she served as VP for a 12-state region – and ShelterBox, an international disaster relief organization.



Brian Kayongo

In March, Healthy Learners welcomed Brian Kayongo to our team, in the newly created role of Director of Advocacy and Government Engagement. In this role, he will help our team further enhance the profile of our program and generate additional support from strategic leaders within the government structure.

Brian brings over 15 years of experience working with local and international NGOs, including as Global Fundraising Manager for the Fight Inequality Alliance, Head of Partnerships for ActionAid International, Policy and Partnerships lead MarieStopes International, and Funding Manager for Oxfam GB in Zambia. Brian holds graduate and postgraduate qualifications in Project Planning and Management.



OUR PARTNERS



OUR PARTNERS

Our partners share our vision for a future where all children have access to the healthcare they need. Their unwavering support continues to be essential to the success of the Healthy Learners mission.



HAWK ROCK FOUNDATION

JAMES PERCY FOUNDATION



Jester Foundation

KARAKIN FOUNDATION



rippleworks



THINKMD™





OUR SUPPORTERS



OUR SUPPORTERS

Helping to support the next generation of Healthy Learners.

\$1,000,000+

Rippleworks
CRI Foundation*
Hawk Rock Foundation*
The Karakin Foundation*
UBS Optimus Foundation*

\$500,000 – \$999,999

Jasmine Social Investments**
Cartier Philanthropy*
Formanek Foundation*
James Percy Foundation*
Mulago Foundation*

\$250,000 – \$499,999

Dovetail Foundation
Bavaria Industries Group AG
Silicon Valley Community Foundation*
The Pershing Square Foundation

\$100,000 – \$249,999

Segal Family Foundation*
Andrew & Bonnie Weiss
Lipman Family Prize

\$50,000 – \$99,999

California Community Foundation
Risk Pool Fund

\$1,000 – \$49,999

Netri Fundacion
Charlie Johnson
Deirdre Strachan and Jose Mas
Draper Richards Kaplan Foundation
Fidelity Charitable
Jennifer Huntington
Lise Johnson
Philip Giannecchini
Robert & Kathy Gravino
Rotary--District 7780
Stephanie Dodson Cornell

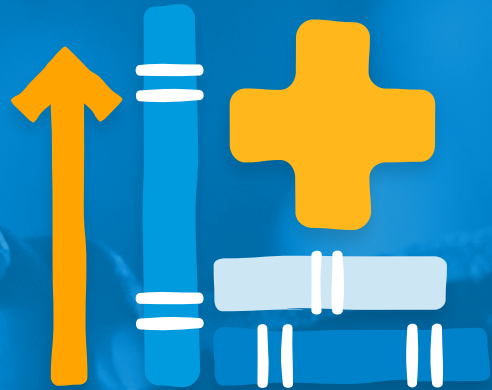
\$1 – \$999

Tom & Diana Allen
Arlynne Bail
Susan Bailey
Douglas Bates & E. Lynn Kay
Wendy Batson & Bob Eaton

Carol & Mark Brown
Carolyn Bulliner
Donna Chale
Doug Chamberlain
Jan Chapman & Bruce Moore
Patrick Chella
Charles Deknatel & Catherine Amory
Nelia Dunbar
Cara Endyke-Doran
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Charlie & Judy Micoleau
Hal Minis & Pat Hughes
Peter Monius & Melissa T. Robbins
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J. Kevin Nugent & Una McGeough-Nugent
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Susan Tananbaum
Catharine & Jeffrey Tumpowsky
Sylvia Vriesendorp
Peter S. & Carol Walker Aten
Ted & Candy Walworth
Steve & Susan Weems

* Multi-year gift
** Includes matching gift from partner



THE FINANCIALS

Operating Budget

As we continue to scale our program, expand our team, launch our randomized control trial, and enhance our technical assistance to the Zambian Government, our annual operating needs will increase to \$8.05 million for FY24 — up 33% year-on-year.

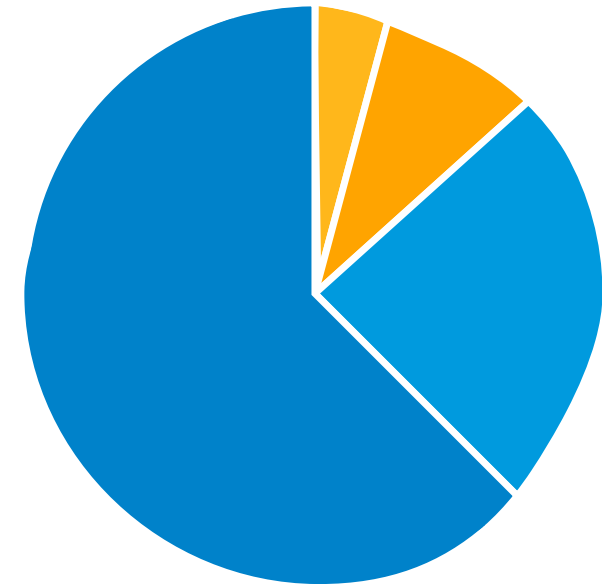
Scaling our impact to new areas of the country has been an exciting milestone, and we are so grateful to the donors and

partners who made it possible. Nevertheless, we understand the significant work that lies ahead for us to raise the necessary resources to honor the commitments we have made with the Zambian Government. Our team looks forward to this challenge, and we are excited for the opportunity to expand our relationships with new and current partners, so we can reach our ambitious goals and ensure children receive the healthcare they need to live long, flourishing lives.



Breakdown of Revenue & Expenses

	FY2023	FY2022
REVENUE		
TOTAL REVENUE	\$8,524,736	\$7,676,610
EXPENSES		
Program	\$4,519,716	\$3,035,045
Admin	\$1,191,976	\$572,656
Fundraising	\$277,135	\$110,960
TOTAL EXPENSES	\$5,988,827	\$3,718,661
Foreign currency translation	\$58,419	\$135,363
CHANGE IN NET ASSETS	\$2,535,909	\$4,093,312



Allocation of Program Expenses FY23

60%

Cost to set up model

25%

Cost to sustain model

9%

Research & development

6%

Technical assistance & advocacy



Fundraising

This year, Healthy Learners was able to raise \$8.5 million in funds. We thank our generous network of donors and partners for helping us achieve this phenomenal milestone.

Healthy Learners is honored to have been chosen to receive the Lipman Family Prize. This competitive and prestigious global award celebrates innovation in the social sector by resourcing organizations that are actively contributing creative solutions to problems around the world. In addition to \$125,000 in prize funds, Healthy Learners also received executive training opportunities from the Wharton School at the University of Pennsylvania as well as a chance to collaborate with various design and innovation departments on campus.

Co-Founder Ignacious Bulongo, Board Chair Dr. Lise Johnson, and Vice President of Development and Communications, Sarah Bush, traveled to Pennsylvania to meet with various departments at UPenn and to receive the award. We are honored to have been selected as winners of this esteemed prize and selected among a pool of talented and impactful global applicants.



OUR TEAM

BOARD MEMBERS

Lise Johnson, MD
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Vice Chair

Charlie Johnson, MBA
Treasurer

Wendy Batson

Patrick Chella, MBA

Stephanie Dodson Cornell, MBA

Cara Endyke-Doran, MSN, MPH

Philip Giannecchini

Chad Rathner, MSc.

Mary Ozerio Zulu, MD

STAFF LEADERSHIP

Lonnie Hackett
President

Angel Chelwa
Chief Operating Officer

Sarah Bush
*Vice President, Development
and Communications*

Ignicious Bulongo
Vice President of Programs

Job Milapo
*Vice President Supply Chain
and Management*

Brian Kayongo
*Director of Advocacy
and Government Engagement*

Catherine Samiselo
Director of Partnerships

Zita Zulu
Director Supply Chain Analytics

Gabriel Lungu
Finance Manager

Musa Mtonga
Deputy Director - Programs

Sarah Tembo
Programs Manager

Mutinta Mukonde
People & Culture Manager

Sande Kazembe
*Construction Manager - Supply Chain
Management and Quality Control*

Haggai Chileya
Procurement Manager

Taonga Mcekeni
Administration Manager

Bekhie Mulungi
Senior Partnerships Manager

Steven Malambo
Senior Business Analyst



HEALTHY LEARNERS

School health for a **brighter future.**

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