



HEALTH | Health Fund

Progress Report

October 2024–September 2025

SUMMARY

Families in Niger, Rwanda, and Zambia are celebrating the safe arrivals of healthy babies, delivered by women who have had safe, healthy pregnancies. This is happening more often thanks to your support of work to bring clean water to clinics and empower local health workers and volunteers to provide care and vital health education to their neighbors. What precious gifts you are providing!

By completing work at 29 health facilities in Zambia last year, we surpassed our ambitious goal of 145, bringing the total there to 153. We also met a previous commitment to finish work in Rwanda by upgrading 21 more clinics in areas where we have programming. We expect to complete work to reach 125 clinics we committed to in Niger in fiscal 2026.

It gets better. In FY26, we'll launch a Finish the Job effort in Ghana to deliver clean water to clinics across every area where we work, upgrading 200 facilities by 2032.

Other vital services include program-trained community health workers who screen children for common illnesses and malnutrition, providing treatment or referrals when needed.

Your support is making a difference. You can see it in the numbers. You can hear it in the stories told by people who—because of you—are making a difference in their communities. One such voice is that of Peter, who took action to improve care for pregnant women in his village after he and his wife lost a baby and his sister died in childbirth. You can read his story on Page 6.



A young child is monitored for malnutrition by a community health worker in Zambia.

GLOBAL UPDATE & PROGRESS ON CORE ACTIVITIES

665,958

PEOPLE, INCLUDING 209,517 CHILDREN AND YOUTH, have benefited from health education and training, improved mother and child healthcare and nutrition, and improved care from health facilities that were upgraded and gained clean water in Niger and Zambia since October 2024 (3,447,177 since October 2022).*



72,723

children were screened and treated for infectious diseases and malnutrition.



4,536

community health workers and volunteers were trained to provide health information and basic care to their neighbors.



944

nurses, midwives, and other staff members in health facilities received training to improve the quality of care.



119

faith leaders were trained and are actively advocating with families to use mother and child healthcare services.



51

health facilities gained water systems and other support, such as sanitation and hygiene facilities, staff training, and equipment.

*These numbers reflect our work funded by private donors like you, as well as related projects funded by foundation donors.

NIGER

SUMMARY

While construction of water systems to serve health facilities was slowed by political unrest and poor economic conditions, work to empower communities to address health education and basic care made great strides last year.

Support for health workers

Eighty community groups were established in Zinder Region to support the 377 community health workers who provide care and health education to families. Their work includes disease prevention and promoting infant, young child, and maternal health services.

- 141,141 women of childbearing age and 27,158 young people and other adults were reached with education and care.
- 96,612 boys and girls were treated for illnesses such as pneumonia, malaria, and diarrhea, and declared fully recovered.

Getting the word out

Community institutions played key roles in preventing needless illness and deaths for children and mothers.

- 18 radio stations broadcast vital health information programming.
- 181 community leaders learned to share information about the rights and care of women and girls, and how to work together to ensure delivery of local health services.
- Those efforts reached 25,925 mothers with messages on health practices, vaccinations, and nutrition for infants and young children.

Water, sanitation, and hygiene

Despite delays in several construction areas, the program still made progress: 38 facilities were completed with upgrades to water, sanitation, hygiene, staff training, and supplies. Work at several other sites was started last year and will be finished in FY26.



A staff member at the Dinneye health facility draws clean water from a new system that delivers water directly to the campus.



Water delivered to the health facility at Luingu benefits the clinic as well as those who use it. Final upgrades to Dinneye and Luingu facilities should be completed in FY26.

PROGRESS ON CORE ACTIVITIES

-  **60,659** children were screened and treated for infectious diseases and malnutrition.
-  **63** community health workers and volunteers were trained to provide health information and basic care to their neighbors.
-  **254** nurses, midwives, and other staff members in health facilities received training to improve the quality of care.
-  **119** faith leaders were trained and are actively advocating with families to use mother and child healthcare services.
-  **38** health facilities gained water systems and other support, such as sanitation and hygiene facilities, staff training, and equipment (20 more systems were in the final testing/sign-off stage).

ZAMBIA

SUMMARY

Our goal of constructing water systems for every health facility in the communities where we work was met in FY25 with the completion of 13 new systems.

As we enter the final stages of our Zambia health programming, the focus remains strong on building communities up to educate families on healthy practices in the home and seeking care when needed, especially for pregnant and nursing women, infants, and young children.

Sanitation and hygiene

Work to make homes and communities healthier included:

- 198,451 people attended hygiene and sanitation presentations.
- 17,014 basic latrines were constructed in communities.
- 134 communities earned the designation of being free of open defecation after every household constructed a latrine or toilet.

Health outreach

Community health workers and local clinics continued to provide vital care:

- 7,678 pregnant women were enrolled in health services by Safe Motherhood Action Group (SMAG) members, who provided guidance on healthy pregnancies and safe deliveries in a facility.
- SMAGs provided postnatal care home visits to 4,410 mothers.
- 2,596 children were assessed for growth and development, and 844 were found to be underweight. Parents enrolled in classes that teach how to provide nutritious meals from affordable, locally available food.

Communities drive change

Community members have become strong advocates for health services:

- Citizen Voice and Action groups successfully lobbied for additional staffing at Banakaila Rural Health Center, reducing the staff-patient ratio from 1:6,000 to 1:3,000. They also helped secure funding for a new facility in Munyenze, which will serve 5,000 people who currently travel to Banakaila, exacerbating overcrowding there.



Bringing water to health facilities improved cleanliness and care at 13 sites in FY25. A new system serving Misengo Rural Health Center also provides water to the local school and households. Mapalo, below, used to miss so much school collecting water for his family, he dropped out. With the new system, “I am now back in school and performing better than ever,” he said.



PROGRESS ON CORE ACTIVITIES



12,064

children were screened and treated for infectious diseases and malnutrition.



4,473

community health workers and volunteers were trained to provide health information and basic care to their neighbors.



690

nurses, midwives, and other staff members in health facilities received training to improve the quality of care.



13

health facilities gained water systems and other support, such as sanitation and hygiene facilities, staff training, and equipment.

ROTARY/GATES HEALTHY COMMUNITIES CHALLENGE

World Vision is partnering with Rotary International and the Gates Foundation to address the leading causes of child deaths—malaria, pneumonia, and diarrhea. Together, we support high-impact programs that protect the most vulnerable children while strengthening community health systems for the long term. The partnership is delivering results in Zambia, where we've secured a second three-year commitment, and has now expanded to the Democratic Republic of Congo (DRC) and Mozambique.

The project focuses on training and deploying community health workers (CHWs) to provide timely diagnosis, treatment, or referral for the illnesses that cause the most child deaths. Extending their reach in rural and underserved communities strengthens frontline services and improves overall health. The project

also contributes to all three countries' national malaria elimination efforts by improving case management and ensuring faster diagnosis and treatment.

These CHWs are having a powerful impact. Over the first three years of Partners for a Malaria-Free Zambia, they detected and treated approximately 1.3 million malaria cases, exceeding the number of malaria cases detected and treated at health facilities in nearly every district active in the program.

Many of those treated at home might not have received timely, vital care without CHW support. Young children and pregnant women are at greater risk of severe illness and death because their immune systems are still developing or are weakened during pregnancy.

Other achievements in Zambia since the project began in FY24 include:

- 1,043 CHWs across five districts in Zambia's Central and Northern provinces were trained and deployed.
- 99 health facility supervisors were trained.
- 153 CHWs were trained in data collection to support the busiest health facilities.
- Reports showed that disease-tracking activities were 94% complete and 91% on time.
- 53 people were trained to promote a community-based hygiene and sanitation approach that supports Zambia's goal of eliminating open defecation.

We will have more to report on activities in the DRC and Mozambique in the next reporting period, as program-trained CHWs there will be fully trained and working in their communities.

MULTIPLE MICRONUTRIENT SUPPLEMENTATION

This project is piloting a new nutritional approach for pregnant women by replacing iron-folic acid tablets with a more complete micronutrient supplement in Zambia's Lusaka, Southern, and Northern provinces. More than 329,000 women will receive these supplements as we train health workers and collect data to inform future national policy.

The project is led by Zambia's Ministry of Health in partnership with World Vision, The Power of Nutrition, Kirk Humanitarian, Vitamin Angels, and the Tropical Diseases Research Centre. It has created a technical advisory group and is researching

maternal supplement policies, while pushing for stronger nutrition services for pregnant women. This work will run through December 2026.

Activities and achievements include:

- 129,600 bottles of multiple micronutrient supplements (MMS) were distributed to 211 health facilities in project areas.
- 41,145 pregnant women in Lusaka Province have received MMS during prenatal care visits.
- 708 healthcare providers learned about MMS benefits, dosage, counseling, and reporting requirements: 376



A healthcare provider in Chilenje, distributes multiple micronutrient supplements at a prenatal care clinic.

at national, provincial, and district levels, and 332 at health facilities.

FINANCIALS

Health Fund

\$33,788,606 program-to-date funding

\$30,210,198 program-to-date spending

89%

Underspending in FY25 was primarily due to delays in construction. In Niger, political and market disruptions slowed progress, with imported materials taking months to arrive, pushing some project completion dates into FY26. In Zambia, final payments are pending until construction finishes in December and quality checks conclude in March 2026.

CHALLENGES AND LESSONS LEARNED

Work in Niger was slowed by the ongoing political upheaval and worsening economic conditions. As a result, many of the imported materials needed to upgrade health facilities were hard to obtain, bringing the spending rate there down to 67% by year's end. The team plans to finish the delayed construction of water points, latrines, and waste management facilities in the first quarter of FY26.

In addition, drill teams reported that granite-based soil in parts of the Zinder Region limits access to sufficient water volumes for health facilities. New geophysical studies are planned to help identify sustainable options.

In Zambia, our team found that progress moved faster—and more smoothly—when we built strong partnerships with local government agencies and community and faith leaders. Highlights of these collaborative efforts included finding resources for additional health center staffing and the new health facility mentioned earlier.



A community health worker in Zambia explains how families can protect the health of pregnant and nursing women and young children.

PLANS FOR THE NEXT SIX MONTHS

Our work in Niger will continue in FY26, bringing water and other essential improvements to 36 additional health facilities. We expect to complete 15 of these facilities in the first half of the year and anticipate extending the program from the end of September through December 2026 to reach all 36.

In Zambia, our health program activities will conclude on March 31, as the team finishes final tasks and evaluations.

The Rotary Healthy Communities Challenge will continue strengthening community health systems in the DRC, Mozambique, and Zambia. Through this initiative, community health workers will receive training to diagnose and treat common childhood illnesses and improve data management.

The Zambia Multiple Micronutrient Supplementation Program will launch a research project in Lusaka, Northern, and Southern provinces, as it continues to distribute micronutrient supplements across these provinces.

THANK YOU

Zambian village turns heartache into joy with safe motherhood training

Peter's family suffered two tragedies that likely could have been prevented with simple—but vital—information about maternal healthcare. He and his wife, Prisca, lost a child when she began bleeding heavily in her seventh month. They tried traditional herbs, but before they realized medical care was needed, the baby died in utero.

The pain we felt that day was indescribable," he said. "The grief was made worse by knowing our baby's life could possibly have been saved with earlier medical intervention."

This heartbreaking event happened about the same time Peter lost his sister in childbirth because traditional beliefs delayed getting her to the hospital.

"My wife's experience and the death of my sister was a wakeup call for many in our community," said Peter, the village leader in Kasenga, Zambia. "I felt a deep responsibility."

That sense of responsibility led Peter to begin volunteering at the local clinic, where he learned about maternal and young child health. Two years ago, he received training as a Safe Motherhood Action Group member and learned to use a training model called Timed and Targeted Counseling, which provides information on timely care and interventions necessary for a healthy pregnancy and baby.

He and 30 other volunteers conduct home visits to share what they have learned with families and encourage them to seek prenatal care and deliver their babies in a health facility with trained medical staff.

"Since joining, I have personally reached out and helped over 160 pregnant women in my village. Today, I am proud to say we have not lost a single mother during pregnancy or childbirth in our village."

This life-saving care is happening because you have stepped out in faith to help provide the tools and training needed to ensure mothers and babies survive and thrive.

"I am deeply thankful to World Vision and the Ministry of Health. ... Your support has transformed not just my family, but our entire community," Peter said.



Peter helps a pregnant woman in his village get to the local health clinic for prenatal care.



Bicycles give community health volunteers like Peter a means to reach more families to provide care and health education.



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World Vision is a Christian humanitarian organization dedicated to working with children, families, and their communities worldwide to reach their full potential by tackling the causes of poverty and injustice. Motivated by our faith in Jesus Christ, we serve alongside the poor and oppressed as a demonstration of God's unconditional love for all people. World Vision serves all people, regardless of religion, race, ethnicity, or gender.

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