

# Capability Statement

## Sustainable Health and WASH



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## Sustainable Health and WASH (SH-WASH)

NACRO supports Governments to ensure healthy lives and promote the well-being of all at all stages by increasing access to quality primary healthcare and ensuring the availability and sustainable management of water and sanitation resources.

The UN recognizes the importance of health and clean water and sanitation, among other needs, to the wellbeing of individuals. UN Sustainable Development Goals (SDGs) number 3 and 6 involve health and clean water and sanitation, respectively. SDG 3 is *to ensure healthy lives and promote well-being for all at all ages*. SDG 6 is *to ensure availability and sustainable management of water and sanitation for all*. SDG 6 covers water, sanitation, and hygiene (WASH) in communities but also in public institutions like schools. Improving access to clean water and sanitation services is essential for public health, wellbeing and achieving the SDGs. Improved sanitation ensures dignity and minimizes the risk of disease, thereby reducing overall vulnerability.

NACRO supports Governments to ensure healthy lives and promote the well-being of all at all stages. In addition, NACRO supports Government to ensure the availability and sustainable management of water and sanitation resources. NACRO contributes to health and WASH services through the provision of technical and capacity development services in health and WASH aimed at contributing to:

- Disease prevention and control
- Health education and promotion
- Maternal healthcare
- Child survival and development
- Family planning
- Epidemic preparedness and control
- Mental health and substance abuse management
- Health security and surveillance.
- Health and WASH infrastructure development.

## The challenge

Southern Africa is affected by high maternal and child mortality, epidemics, and infectious diseases, among them TB, HIV, and malaria, as well as other health conditions such as non-communicable diseases (NCDs). The situation of these ailments and health conditions in outline in the case of Zambia.

**Maternal and Child Mortality** - Globally, it is estimated that in 2015, about 303,000 women died in and following pregnancy and childbirth. Women in Zambia face a lifetime risk of 1 in 100 of dying in pregnancy or childbirth, while 1 in 37 infants die in their first month of life. Among countries with mortality data, Zambia ranks 141 out of 185 for maternal mortality. It ranks 162 out of 195 for neonatal mortality ([https://data.unicef.org/resources/data\\_explorer/unicef\\_f/](https://data.unicef.org/resources/data_explorer/unicef_f/)). Skilled care before, during and after childbirth can save the lives of women and newborn babies.

**HIV** - By 2018, an estimated 1,296,903 people (out of a 17.4 million), were living with HIV (PLHIV) of which 60% were women. There is gender- and age-related disparity in HIV burden, the burden being most pronounced in age group 15-24 with females having more than tenfold the incidence. New HIV infections are influenced by geographical location, risky sexual behaviour, and limited access to services.

**Tuberculosis (TB)** - Zambia is among the 30 high tuberculosis burden countries globally, TB being among the top 10 causes of morbidity and mortality, accounting for over 40% of deaths among PLHIV. Results from the TB prevalence survey conducted in 2013/2014 found that TB prevalence was high (638/100,000 population). Prevalence is high in the urban than in the rural, higher in HIV positives than in their HIV negative counterparts, and higher in men than in women. The age group 25-44 years bears the brunt.

**Malaria** – Zambia remains an endemic malaria country. The National Malaria Elimination Centre (NMEC), that in 2021, there were over 7,050,000 reported malaria cases; incidence was estimated to be 340/1,000 population/year; prevalence in children under 5 years of age was 29% (rapid diagnostic test-based); and 1,503 deaths from malaria were registered, an incidence of 8 inpatient deaths per 100,000 population (Health Management Information System [HMIS] 2021; Malaria Indicator Survey [MIS] 2021). Transmission is throughout the year, but cases tend to peak in the late rainy season (February to May). 77% of the Zambian people reside in rural areas (where risk of malaria infection is 4.5 times greater than in urban areas - risk is highest in Luapula, Northern, Muchinga, North Western, and Western, and rural areas of Copperbelt and Eastern provinces (40–63% RDT-based prevalence in the 2021 MIS)

**Non-communicable diseases (NCDs)** - NCDs such as heart disease, stroke, mental illness, and injuries, are on the rise globally. Many countries must deal both with preventing and controlling infectious diseases and addressing the health threats from NCDs and environmental health risks. In recognition of this, the SDG Goal #3 set target #4 to reduce pre-mature deaths from NCDs by a third by the year 2030. NCDs are a significant health problem in Zambia, the mortality rate across Cardiovascular Disease, Chronic Respiratory Disease, Cancer and Diabetes being 938 per 100,000 in males and 599 in females in 2021.

**Waterborne diseases** - Diarrhoea kills 2,195 children every day – more than HIV, malaria and measles combined. It is the second leading cause of death among children under five. Despite these sobering statistics, strides made over the last 20 years have shown that, in addition to vaccination and breastfeeding, diarrhoea prevention focused on safe water and improved hygiene, and sanitation is a cost-effective strategy, among other actions, for reducing Child Mortality.

## NACRO's approach

Southern Africa, including Zambia, Malawi, and Zimbabwe, has made considerable progress towards controlling epidemics such as HIV and TB, malaria eradication, and maternal and child health. But to sustain these gains there is need to build resilient and sustainable systems for healthcare including the supply of laboratory commodities, medicines and other health products to health facilities; and training and engagement of community health workers and community-based volunteers (CBVs).

NACRO's approach to health and WASH services starts with the recognition that access to healthcare and water and sanitation are basic rights and that governments have the mandate and duty to provide these basic services and make them accessible to citizens. NACRO supports healthcare and WASH services through the provision of technical and capacity development services aimed at strengthening integrated health systems, promoting the participation of non-state actors in healthcare delivery, promoting initiatives for improving nutrition particularly among schoolchildren, facilitating provision of WASH services, and promoting safe sanitation and hygiene practices.

NACRO provides technical and capacity development in healthcare and WASH specifically through.

- Strengthening integrated health systems,
- Promoting the participation of community-based health volunteers in health care delivery,
- Introducing, incubating, and reinforcing gardening for school feeding and leaner nutrition
- Promoting the participation of civil society and the private sector in WASH service delivery,
- Steering and implementing sanitation demand creation on a scale,
- Developing sanitation supply chains and monitoring performance of service providers,
- Introducing, incubating, and reinforcing hygiene behavioural change communication in schools and communities – including establishment of WASH committees and clubs
- Introducing and training water and sanitation user groups and cooperatives to enable WASH governance, accountability, voice, and service sustainability
- Promoting group saving and lending, and financial literacy and enterprise – including introducing and incubating savings cooperatives and group and individual enterprises.



## NACRO's experience

[Graceland Chisanga Health Centre | Mkushi, Zambia | 2019-Ongoing | €317,650 initial investment | NAK=karitativ& New Apostolic Church - Zambia](#)

NACRO established a health centre providing primary health care to over 3000 people, In Chisanga area of northern Mkushi, an area which is remote from basic services. The health centre registers, annually, outpatient attendance of over 2500 clients, birth deliveries in the range of 75 babies; and anti-natal services for between 70 and 80 clients. The common ailments and health conditions the health centre deals with are Malaria, non-bloody diarrhoea; scabies; and reproductive health services.

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[Mantapala WASH Project | Nchelenge |, Zambia | 2019-2021 | €317,650 initial investment | UNHCR](#)

In ensuring that displaced populations (refugees from neighbouring countries) living in challenging conditions have increased access to safe and clean drinking water and improved sanitation facilities, NACRO intervened in Mantapala Refugee Settlement to contribute to improved sanitation coverage. Achievements included provision of 279 latrines (including 3 gate latrines) with bath facilities; provision of 2 extra double latrines at isolation centre; training of 280 smallholder farmers in financial literacy. The project enabled 1 568 people to access improved sanitation.

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[Mchinji WASH project | Mchinji, Malawi | 2019-2022 | € 373.128.61 | NAK-Karitativ](#)

The Mchinji WASH project was implemented in traditional authority (T/A) Mduwa to contribute towards improved health of the people of Mduwa through the provision of clean and safe water and improved sanitation in public spaces through the construction of disability-friendly improved toilets. Through solar-powered water systems, water is supplied to 8 villages with 400 households (2000 people). Toilets were constructed in five schools, one market and one under-five clinic; WASH committees were established in schools, markets, and the health centre; and Village Savings and Loans Associations were established at all the water points. Achievements of the project include:

- Clean and safe water for 2175 people and good hygiene practices adopted by 707 people.
- Girls return and stay in school aided by disability-friendly toilets with menstrual hygiene facilities.

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[Mchinji WASH Extension Project | Mchinji, Malawi | 2022 – 2025 | € 369.930.,13 | Federal Ministry for Economic Cooperation and Development \(BMZ\) and NAK-karitativ](#)

The Mchinji WASH Extension project aimed to contribute to improved health, through WASH, in the traditional administration of Mduwa in Mchinji. It improved water availability for 435 households and is promoting good hygiene practices in 7,708 households (38,540 people) through the Community Led Total Sanitation model that promotes use of household toilets to eliminate open defecation. Two solar-powered water systems installed supply water to 11 villages year-round. Also, 10 improved latrines constructed in 5 schools and WASH committees from the villages and schools were trained in sanitation and hygiene and waterpoint operation and maintenance. Also, 12 savings groups were established and trained in financial literacy and enterprise management; the groups are still operational and lending small loans to members.

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[Phalombe WASH Project | Phalombe, Malawi | 2022-2024 | € 341.949.06 | Federal Ministry for Economic Cooperation and Development \(BMZ\) and NAK-Karitativ](#)

The Phalombe WASH project aimed at contributing to improved health status of people in T/A Kaduya in Phalombe district southern Malawi. The project, which targeted 1200 households (7500 people) supplies water to 16 villages through three solar-powered boreholes that were drilled. In addition to this, the project also constructed improved pit latrines in seven primary schools, two markets and one health centre within the Tradition authority. These latrines promote menstrual hygiene management in all the public spaces, with more impact in primary schools as it reduces absenteeism amongst girls during menstrual periods. Not only do these latrines promote menstrual hygiene but also are disability friendly and promote privacy for the users. The project also built the capacity of WASH committees in terms of proper hygiene practices and operations and maintenance of the water systems. Lastly, Village savings and Loans groups were also promoted such that as of today, groups in the water points are continuing the saving. Part of the savings is meant to be used as a water point fund for maintenance of the system.

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[Climate Resilient WASH in Schools \(CREWASH\) | Kalabo, Zambia | 2020-2023 | €317,650 | NAK-karitativ](#)

In Kalabo, NACRO implemented a school WASH project, CREWASH phase 1, in 28 schools. The project rehabilitated 14 water boreholes and sunk 13 new boreholes and provided 150 toilet blocks for learners and teachers, enabling 11,348 learners (5,339 boys and 5,935 girls), 214 teacher families (with 815 dependents) to access clean water and adopt safe sanitation and hygiene practices. Also, 3,713 people from surrounding villages accessed clean water. The schools also hygiene kits - soaps, hand sanitizers and handwashing facilities. Adolescent schoolgirls also received sanitary pads.

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[Mzimba WASH Project | Mzimba, Malawi | 2024-2027 | € 332,351.44 | BMZ. & NAK=karitativ](#)

The Mzimba WASH project aims to contribute to improved health, through WASH, in Traditional Authority area Chindi in Mzimba district, Malawi. The project targets over 7,708 people in 12 villages. The project is installing 3 solar based water pumping systems to supply water to at least 12 villages; constructing 12 improved pit latrine blocks (two-holed) with handwashing facilities in public spaces (10 in primary schools and 2 at a health centre); establishing and training 12 community savings and loans groups; and establishing and training 21 WASH committees trained in community-based management -

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[Instant Porridge and Other Nutritious Products for Orphaned and Vulnerable Children | Victoria Falls, Zimbabwe | 2023 - 2024 | US\\$6,000 | BASILLICA Organization with the support of NACRO.](#)

NACRO partnered with BASILLICA Organization to provide 3,000 vulnerable and orphaned children in Victoria Falls and surrounding areas with instant porridge and other nutritious foodstuffs.

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## IMAGES OF NACRO WATER, SANITATION, HYGIENE (WASH) AND HEALTH FACILITIES AND SERVICES

**Water facilities  
provided by NACRO in  
Malawi.**

Infrastructure associated  
with the water systems  
provided in Phalombe  
and Mchinji Districts.



Water points drawing  
from the water system  
installed in Mchinji



Members of a savings  
group meeting at a  
water point in Mchinji.



**Sanitation facilities  
provided in Malawi.**

Toilets constructed in  
schools in Mchinji



Toilets constructed are  
user friendly to  
adolescent girls and  
learners with disabilities



**Instant Porridge and  
Other Nutritious  
Products for Orphans  
and Vulnerable Children  
— Victoria Falls,  
Zimbabwe.**



## Climate Resilient School WASH (CREWASH) - Kalabo, Zambia

A water point at a health  
centre connected to a  
school water system.



Examples of water  
systems and water  
points provided by the  
project in schools.



Water facilities provided  
in schools in Kalabo are  
used for domestic and  
productive purposes.



**Climate Resilient School  
WASH (CREWASH) -  
Kalabo, Zambia**

Ventilated improved pit  
latrines for girls & boys.



Handwashing stations.



Hygiene kits and learning  
materials (including text  
books and seed packs) .



## Climate Resilient School WASH (CREWASH) - Kalabo, Zambia

School gardening  
complementing school  
feeding and income  
generation.



## Graceland Chisanga Health Centre- Mkushi, Zambia

Main clinic building  
at the ealth centre



Recently built maternal  
and neonatal unit  
handed over in 2025.

