Community health monitoring of the Trident Copper Project in Zambia



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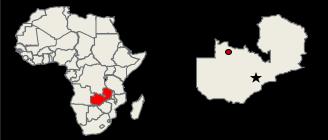
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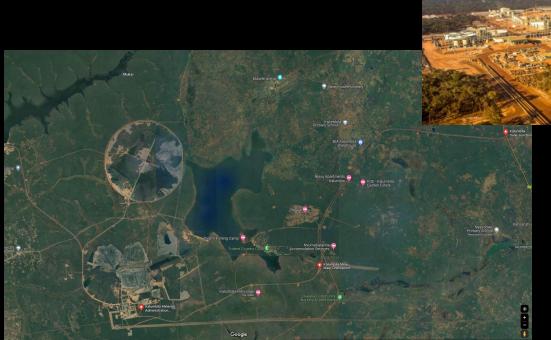




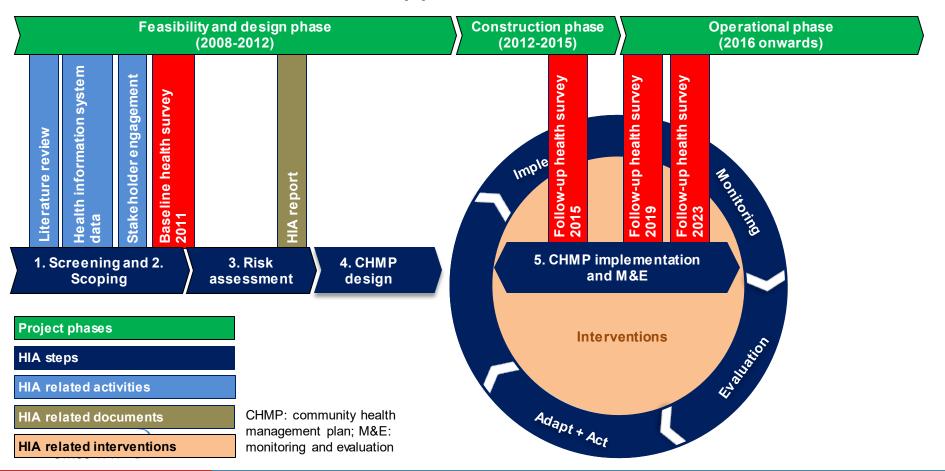








HIA for the Kalumbila Copper Mine





Swiss TPH

Survey methods

Impacted communities / sites

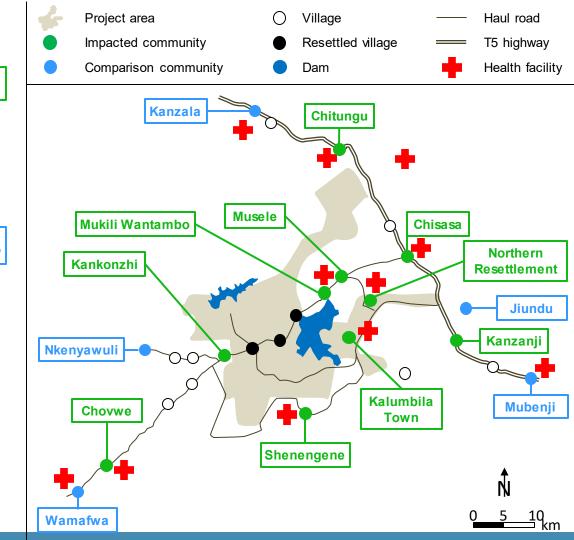
Considered directly impacted by the mine through e.g. resettlement, high influx, health interventions, etc.

Comparison communities / sites

Considered not/less impacted by the mine (although spill-over effects)

→ The same communities were surveyed every year





Environmental sampling

Health outcome Direct

Socioeconomic indicators









Biomedical indicator sampling

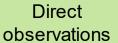
> and healthrelated indicators Health

facility assessment

> Knowledge, attitudes and practices







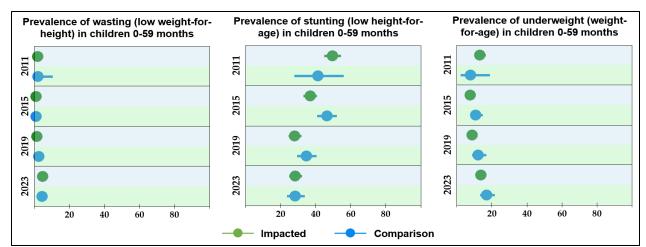




Swiss TPH

Results: selected indicators

Nutritional indicators in children aged under 5 years





Acute malnutrition

Seemingly low but important increases in 2023





Chronic malnutrition

Decrease since baseline & steady levels since 2019

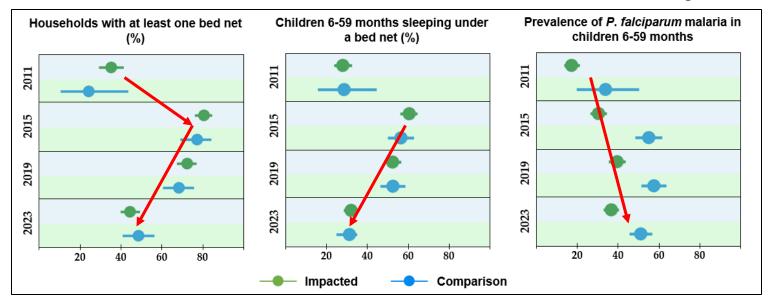


<u>Underweight</u>

Slight increases since 2019

- Overall, there has been improvement in the nutritional status of children since 2011, esp. chronic malnutrition.
- However, the indicators are <u>still</u>
 <u>below standards of</u>
 <u>a normally</u>
 <u>nourished</u>
 population.

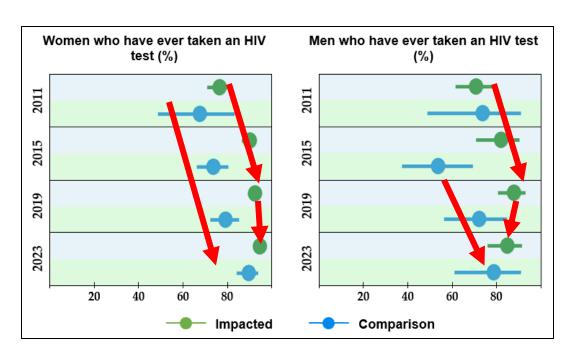
Malaria related indicators in children under 5 years of age



- Strong drops in ownership and utilization of bednets since 2019
- Mirroring country trends, malaria prevalence has increased since 2011
- Constantly significantly higher in comparison sites (except at baseline)



HIV testing uptake in women and men aged 15-49 years



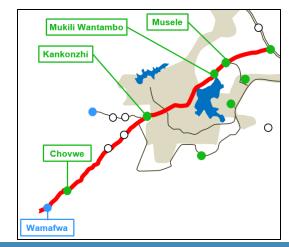
 Proportion of people 'ever tested' increased steadily but reached a plateau

- → ('Ever tested') vs. 'last test' or 'repeated testing'
- → Important to keep 'repeated testing' rates high

Syphilis prevalence

0 4 : 1 0 :4 -	2015 FUHS		2019	FUHS	2023 FUHS		
Sentinel Site	n	%	n	%	n	%	
Kalumbila Town	30	6.7	32	3.1	54	5.6	
N. Resettlement	43	2.3	36	2.8	34	5.9	
Chisasa	66	3.0	77	3.9	72	8.3	
Musele	95	0.0	86	10.5	81	11.1	
Kankonzhi	39	5.1	39	7.7	44	13.6	
Chovwe	32	6.3	37	5.4	35	8.6	
Shenengene	32	9.4	34	2.9	41	4.9	
Chitungu	36	5.6	38	0.0	47	10.6	
Kasanzhi	38	10.5	37	5.4	37	8.1	
Mukili Wantambo	-	-	-	-	34	17.6	
Impacted Sites	411	4.4	416	5.3	479	9.4	
Nkenyawuli	30	6.7	39	2.6	41	0.0	
Wamafwa	34	2.9	35	5.7	41	24.4	
Jiundu	-	-	-	-	42	2.4	
Kanzala	32	3.1	70	1.4	50	4.0	
Mumbezhi	35	2.9	41	7.3	58	8.6	
Comparison Sites	131	3.8	185	3.8	232	7.8	
Overall	542	4.2	601	4.8	711	8.9	

- Overall, insignificant but important increase since baseline
- Certain higher prevalence villages (esp. also increases since 2019)
- Wamafwa, Chovwe, Kankonzhi, Mukili Wantambo and Musele: located along the same road axis



Summary findings

Comparison analyses

Indicators	2023 vs. baseline data year ¹		communities			
Hitilitaturs	Baseline data year ¹	n	OR (95% CI)	p-value	OR (95% CI)	p-value
Determinants of health at the household level						
Household with solid housing structure	2011	993	1.57 (0.91-2.71)	0.108	1.58 (1.01-2.46)	0.046
Household with access to safe drinking water in the dry sea	2011	793	8.93 (2.58-30.9)	0.001	14.98 (4.41-50.85)	0.000
Household with access to safe drinking water in the wet sea	2011	793	10.69 (3.09-37.03)	0.000	15.0 (4.41-50.86)	0.000
Household with at least 1 person employed	2015	993	1.95 (0.87-4.37)	0.105	10.1 (5.14-20.0)	0.000
Health outcomes in women aged 15-29 years						
Prevalence of anaemia	2011		0.61 (0.25-1.48)	0.275	0.69 (0.25-1.39)	0.229
Prevalence of thinness	2015	1,211	0.96 (0.53-1.74)	0.887	0.78 (0.27-0.84)	0.100
Prevalence of overweight	2015	1,211	1.95 (0.87-4.40)	0.107	4.29 (2.10-8.74)	0.000
Prevalence of high blood pressure	2015	1,237	0.81 (0.52-1.27)	0.360	1.35 (0.92-1.97)	0.123
Prevalence of syphilis	2015	1,182	2.61 (0.95-7.22)	0.064	1.16 (0.42-3.18)	0.777
lealth outcomes in children aged 9-14 years						
Prevalence of children with no parasites seen	2011	793	5.74 (1.90-17.30)	0.002	3.12 (1.07-9.14)	0.038
Prevalence of children with S. haematobium	2011	792	0.26 (0.11-0.60)	0.002	0.09 (0.04-0.17)	0.000
Prevalence of children with hookworm	2011	790	0.32 (0.15-0.71)	0.005	1.18 (0.57-2.43)	0.662
lealth outcomes in children aged 0-59 months						
Prevalence of malaria	2011	1,283	2.4 (1.2-4.8)	0.013	0.41 (0.21-0.82)	0.011
Prevalence of anaemia	2011	1,259	0.68 (0.35-1.34)	0.267	0.48 (0.25-0.94)	0.031
Prevalence of wasting	2011	1,296	2.3 (0.29-18.2)	0.430	0.94 (0.12-7.6)	0.950
Prevalence of stunting	2011	1,296	0.56 (0.30-1.04)	0.064	1.40 (0.78-2.53)	0.260

Baseline data year represents the first year of data collection

Better since baseline
Worse since baseline

Better in the impacted Worse in the impacted

Impacted vs. comparison



Conclusions – results

- Overall, three general* trends (*means not for all indicators):
 - Pre-dominantly improvements in determinants of health
 - Pre-dominantly improvements in health outcomes
 - Impacted communities are better off than comparison communities (inequity)
- Malaria remains a major challenge, locally and nationally
- The STI (incl. HIV) situation warrants close surveillance and continued high coverage of interventions is of utmost importance

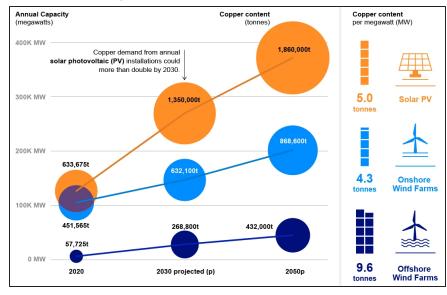


Conclusions – Just Transition

 Demand in minerals and metals will increase heavily for the energy transition

 Health benefits not only in the green energy consumer regions, but also in the producer regions (incl. raw materials)

Projected copper demand





Let's continue the conversation!

Post questions and comments in the IAIA24 app.



Acknowledgements

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