Zimbabwe

Executive Summary

Zimbabwe’s population of 13.1 million is 52 per cent female, 67 per cent rural and 48 per cent (6.3 million) below 18 years. Whilst 4.5 million children live in rural areas with limited access to social services and information, urban vulnerability is also rising. Around 72 per cent of the population lives in consumption poverty and about 1.6 million children live in extreme poverty. The resilience of the people of Zimbabwe and the social sector systems has been greatly tested by nearly two decades of economic decline, flight of skilled workforce and collapse of previously vibrant industries.

The 2014 National Budget of US$ 3.93 billion provided limited resources to social sectors, with little room for flexibility as current expenditures consumed 92 per cent of the budget, and 81 per cent of current expenditures covered employment costs. Social sector performance continued to be highly dependent on donor funding. Multi donor pooled funds (Transition Funds) led by Government and managed by UNICEF in Education, Health, Child protection and WASH utilized approximately US$ 198 million and continued to achieve significant results. In addition, UNICEF developed a concept note entitled “Sustaining the Gains” and used it to effectively advocate for continued social sector financing.

Successful implementation of the Multiple Indicators Cluster Survey (MICS 2014) was an important achievement in 2014 and positioned UNICEF as a key partner in evidence generation and policy dialogue. MICS findings clearly demonstrated that much progress has been made in Education, Child and Maternal Health, WASH and Child protection since 2010 and that investment in capacity building and implementation of high impact, cost effective national programmes through Transition Funds has helped to revive social sectors availing services for the most vulnerable. These findings have led to increasing donor and government confidence in UNICEF’s ability to deliver results.

•After 20 years of constant increase, the maternal mortality ratio declined for the first time, by nearly 40 per cent. Access to HIV testing for pregnant women during antenatal care is 96 per cent, and testing of HIV exposed children by age of two months increased to 67 per cent. Access to antiretroviral treatment (ART) for HIV positive pregnant women rose from 43 per cent to 66 per cent. However, access for children under 14 years is only 47 per cent. 291,239 adolescents (59 per cent female) were tested for HIV, and the 1,174 of those found to be positive were put on ART.

•Education showed consistent improvements in access and learning. Early childhood development (ECD) net enrolment increased to 31 per cent for 4-5 year olds. Primary net enrolment exceeds 93 per cent, with gender parity. However, lower secondary enrolment remains low (52 per cent). The Zimbabwe Schools Examinations Council (ZIMSEC) indicates that 2014 pass rates have increased by 7 percent compared to 2013 figures.

•The harmonized social cash transfer programme was scaled up to 20 districts, with 55,509
extremely poor and labour-constrained households (154,008 children) receiving cash support, enabling them to access food and social services. Over 50,000 children received child protection services, with 1,366 children in conflict with the law (1,142 boys/ 224 girls) avoiding pre-trial detention or removed to protective environments.

• Use of safe drinking water improved in rural areas from 61 per cent to 67.5 per cent while the percentage of rural households without a water source on premises (with a round trip for drinking water in less than 30 minutes improved from 49.9 per cent to 70.5 per cent.

Future programming will include a focus on areas currently lagging behind, including: under-five birth registration coverage (32.3 per cent); children aged 1-14 years experiencing violent discipline (63 per cent); and females married before 18 (33 per cent); and the reduction of stunting and holistic programming for adolescents.

Service delivery across all sectors was undertaken by the Government but UNICEF acknowledged the partnerships established with 33 Civil Society Organizations (CSO) which provided direct implementation support, utilizing 19 per cent (US$ 37 million) of UNICEF’s 2014 budget.

In 2013, the Government of Zimbabwe launched the national development blueprint, the Zimbabwe Agenda for Sustainable Socio-Economic Transformation (Zim Asset, 2013-2018). UNICEF, with support from the World Bank (WB), African Development Bank (AfDB) and United Nation's Development Programme (UNDP) took the lead in engaging Government on the operationalization and revamping of the Zim Asset coordination architecture. For the first time in over a decade, the Government, donors, civil society, and private sector came together to jointly plan for the realization of this development agenda.

The constrained social sector resource base and persistent deprivations for many children will shape UNICEF Zimbabwe’s 2015 programming. This includes increasing fiscal space for children, removing bottlenecks to service delivery, focusing on vulnerable populations not reached by services, improving service quality, using innovation to improve programme efficiency and effectiveness, and further strengthening government capacity to manage social service systems.

**Humanitarian Assistance**

Sector coordination:

After de-activation of the cluster system in 2013, UNICEF continued supporting Government on humanitarian coordination in Child Protection, Education, Nutrition and WASH. The focus has been on capacity building and strengthening government coordination mechanisms in identification of common risks and enhancing preparedness.

In Education and Nutrition, Technical Working Groups, led by the Ministries of Health and Child Care (Nutrition) and Primary and Secondary Education were established with UNICEF as the Secretariat. A position paper was prepared that provides specific strategies for strengthening conflict resolution, disaster risk reduction and climate change education and this has been used during the ongoing education curriculum review.

Under Child Protection, UNICEF supports the strengthening of government led child protection structures, under the framework of the Working Party of Officials coordinated by the Department
of Social Services.

The WASH cluster was succeeded by the WASH Sector Coordination and Information Forum (WSCIF), led by the Ministry of Environment, Water and Climate. The WSCIF is now the Sectoral coordination platform with a Strategic Advisory Group focused on humanitarian issues. In all cases, UNICEF provided technical, financial and capacity building support to the respective lead Ministry to manage coordination mechanisms, and will continue in 2015 and extend efforts to sub-national levels.

Emergency Preparedness and Response:

UNICEF continued to support the Ministry of Health and Child Care (MoHCC) in implementation of the National Community Management of Acute Malnutrition (CMAM) programme. To date 93 per cent of facilities against a target of 90 per cent provide treatment for Severe Acute Malnutrition (SAM) (VMHAS R21, 2014). In the period January to October 2014 with UNICEF support, 23,289 children under-five were treated for SAM nationally and 12,210 were tested for HIV, with 1,997 (16.4 per cent) identified as HIV positive (NHMIS 2014).

The CO prepositioned supplies in response to Cholera but due to strong WASH interventions over the last 3 years, only 3 cases of cholera were reported during the 2013/2014 cholera season. These cases were appropriately treated with no deaths. Furthermore preparedness efforts were effective in responding to the flood disaster described below.

On 10 February, the government of Zimbabwe declared Tokwe Mukorsi Dam flooding a State Disaster. 3,125 families were displaced to a camp setup in the Chingwizi area. UNICEF and partners supported the lead ministries in providing assistance to the population in the camp with interventions in: Child Protection (psychosocial support, prevention and response of child abuse), Education (supplies, stationery and furniture for temporary learning spaces in support of 2,930 school-going children), Health (support clinic setup-up and relocation of primary health care medicines), Nutrition (nutrition assessment, distribution of Micro-nutrition Powder and counselling for c-IYCF) and WASH (water supply, latrines and bathroom facilities, Non Food Items, hygiene promotion and solid waste management for families, temporary schools and health centres). Following a rapid assessment at Chingwizi camp (Global Acute Malnutrition (GAM) 4.9 per cent and SAM 3.1 per cent), UNICEF availed critical supplies at the clinic and health workers were trained on screening, referral and treatment resulting in 1,200 children appropriately managed and supplemented with micronutrient powders to prevent micronutrient deficiencies.

Under the leadership of the Ministry of Health (MoHCC), Zimbabwe developed a contingency plan for Ebola Virus Disease (EVD). With no cases reported in country, the main activities focused on surveillance and screening at border posts; health worker capacity building; equipping and developing protocols for the designated treatment centres; and information dissemination and awareness creation among the general public. As a member of the UNCT, UNICEF participated in the development of the UN Ebola Contingency Plan, guided by the framework of the National EVD plan.

Resilience:

While poverty is more widespread in rural than in urban areas (prevalence rural 84.3 per cent, urban 46.5 per cent, PICES 2011/12), the cash-based nature of the urban economy implies that the urban poor face specific subsistence challenges. With this in view, UNICEF undertook a
study to investigate how urban households and communities anticipate, prevent, withstand, manage, adapt to and overcome cumulative stresses and shocks that they experience. The study concluded that current coping strategies include early marriage, prostitution, begging and sale of productive assets, are negative, which are likely to perpetuate the cycle of poverty. Building on the findings, an international conference of researchers and development practitioners was held which recommended development of coordinated, integrated approaches incorporating emerging environmental problems and resilience as an integral part of urban planning.

UNICEF Zimbabwe has developed, as part of its next Country Programme, a framework for the review of past/current programmes to inform the programme design using a resilience lens. The proposed resilience framework serves to guide the design of risk-informed programmes.

**Equity Case Study**

Zimbabwe presents two short Equity Case Studies:

**Equity-focused Health Programming:**

The joint bottleneck and equity analysis conducted in 2010 by the Collaborative Centre for Operational Research (CCORE) found that user fees and financial constraints were the major cause of disparities in accessing Maternal Newborn and Child Health (MNCH) services in Zimbabwe. Furthermore, geography (rural and peri-urban) and socio-cultural and religious barriers required attention. For example, the apostolic population (one-third of the population) accessed skilled birth attendance at less than half the national rate.

Consequently with the Ministry of Health and Child Care (MoHCC) and health development partners, a multi-donor pooled funding, Health Transition Fund (HTF), was established. HTF’s primary objective was to address both supply and demand side bottlenecks, especially focussed on reaching the poorest and rural communities. One of HTF’s four pillars was to support the Health Services Fund designed to cover the routine running costs of primary health centres and district and provincial hospitals, in order to abolish “user fees” for routine health services provided to pregnant women and children under-five. In order to access hard-to-reach rural communities, efforts were made to revitalize the dormant, schedulable outreach health service programme for MNCH using the Expanded Programme of Immunization (EPI) as an entry point.

Significant subsequent improvement was documented in mitigating financial barriers to MNCH services. To reach each child and mother in remote communities, the health system extended MNCH services through outreach and schedulable health programmes. At present, MoHCC has successfully revitalized 2,924 outreach points that regularly provide EPI services with the addition of maternal, newborn and nutrition services. To address the delays and improve access and utilization of comprehensive obstetric services, Zimbabwe established a ‘mother waiting shelter’, where high-risk mothers from rural communities receive care three weeks ahead of the expected delivery date, to ensure early assessment and timely intervention to complications.

The 2014 vital medicine and health service (VMAHS) survey reported 94 per cent of primary health care (PHC) facilities and 80 per cent of district hospitals as providing health services “free of charge” to pregnant women and children under-five. Whilst trying to improve PHC services, the HTF has managed to address critical supply side bottlenecks including human resources for health and essential medicines and consumables at PHC level. Between 2011 and 2014, the number of doctors at the district hospital doubled to 139. Currently, all district hospitals have at
least one medical doctor who can perform caesarean section. The HTF also enabled the training of 2,500 midwives who have been deployed countrywide. Since 2009, more than 80 essential medicines are regularly supplied and the recent VMAHS confirmed availability of these essential medicines in more than 87 per cent of rural health centres.

Regardless, disparities persist in geographic access, socio-economics and rural child mortality. User fees remain a disincentive at provincial and central hospitals, and there are inadequate specialized services for newborns and adolescents. The problem of religious and socio-cultural objectors to health services continues, especially amongst apostolic adherents. Future programmes therefore need to be informed by and expand the health service framework that was successfully shaped by bottleneck and equity analysis and further extend this to ensure fee abolition in urban and tertiary facilities.

Improving Equity in Justice for Children with Disabilities – Leonard Cheshire partnership:

The Ministry of Justice, Legal and Parliamentary Affairs (MJLPA), supported by UNICEF, adopted a partnership approach to expand access to justice for children. The Judicial Service Commission (JSC) implemented the victim friendly system, particularly within the courts. Two key legal assistance partnerships were forged (with CATCH and LRF) to complement the Legal Aid Directorate, as the justice system was not fully equipped to provide specialized justice services to children in contact with the law. During programme implementation it became apparent that children with disabilities (CwDs) were having problems accessing justice due to a lack of specialized services, such as interpretation. For example one CwDs appeared in court 22 times before a ruling was made.

To address specific challenges faced by CwDs in the justice system, UNICEF provides financial and technical support to the partnership between a local NGO – Leonard Cheshire Zimbabwe Trust (LCZT) – and the JSC. LCZT provides specialized and timely technical support services to the Victim Friendly System (VFS) in cases of abuse involving CwDs (as survivors, witnesses or alleged offenders) and to other stakeholders. This provides CwDs the right to participate in the justice process in a confidential and conducive criminal justice environment.

Between January and October 2014, 166 children with disabilities (151 girls/15 boys) received specialized services. Since the programme’s introduction, the efficiency of court proceedings involving CwDs have improved, and some cases have only two court appearances. A pilot programme was launched where a team of disability experts were seconded to each VFS sub-committee, activated to respond to cases of CwD abuse and requiring VFS intervention. This ensured provision of specialized and timely support to each of the VFS courts as soon as a CwD was identified as a survivor, witness, alleged offender or other significant stakeholder. The project was implemented in all the country’s 10 provinces and initially covered the 21 existing regional courts with services, then expanded to cover the Police and Civil and Criminal Courts.

This UNICEF/LCZT/JSC partnership is producing positive attitudinal change with court and police personnel towards persons with disabilities. The courts have started employing interpreters with sign language skills and the police seek professional services as soon as a CwD is identified as a survivor, witness or alleged offender. Stand-by Teams of Disability Experts have been established in Harare, Masvingo, Mutare, Gweru and Bulawayo and seconded to each regional court. This has enabled improved communication and interpretation of evidence by court interpreters (intermediaries) in cases of abuse and rights violation that involve CwDs, resulting in effective and consistent prosecution and expeditious adjudication of pending cases by magistrates and public prosecutors. The programme has also become
essential in closing a critical gap within the VFS by facilitating and expediting psychiatric examinations for rape victims perceived to have mental challenges.

### Summary Notes and Acronyms

**Acronyms**

- AIDS - Acquired Immune Deficiency Syndrome
- ART - Antiretroviral Treatment
- CCORE - Collaborative Centre for Operational Research
- CD4 - Communication for Development
- C/DRM - Conflict and Disaster Risk Management
- C/DRR - Conflict and Disaster Risk Reduction
- c-IYCF - Community-Based Infant and Young Child Feeding
- CMAM - Community-based management of malnutrition
- CMT - Country Management Team
- CP - Country Programme (of UNICEF)
- CRC - Convention on the Rights of the Child
- CwD - Children with Disabilities
- DCT - Direct Cash Transfer
- DFID - Department for International Development (UK)
- EC/EU - European Commission/Union
- ECD - Early Childhood Development
- EMIS - Education Management Information System
- EmONC - Emergency Obstetric and Neonatal Care
- EPI - Expanded Programme of Immunization
- EVD - Ebola Virus Disease
- FT - Fixed Term
- GAM - Global Acute Malnutrition
- GBP - Great Britain Pounds
- GBV - Gender Based Violence
- HACT - Harmonized Approach to Cash Transfers
- HIV - Human Immune Deficiency Virus
- HPV - Human Papilloma Virus
- HSCT - Harmonized Approach to Cash Transfers
- HTC - HIV Treatment and Counselling
- HTF - Health Transition Fund
- ICT/IT - Information (and Communication) Technology
- IEC - Information, Education and Communication
- IMF - International Monetary Fund
- IP - Implementing Partner
- JSC - Judicial Services Commission
- L&D - Learning and Development
- LAD - Legal Aid Directorate
- LCZT - Leonard Cheshire Zimbabwe Trust
- MICS - Multiple Indicator Cluster Survey
- MP - Member of Parliament
- MNCH - Maternal, Newborn and Child Health
- MoEST - Ministry of Education, Science and Technology (South Sudan)
- MoEWC - Ministry of Environment, Water and Climate
- MoFED - Ministry of Finance and Economic Development
The Country Programme commitment to ensuring community participation is demonstrated in WASH, Nutrition, and Child Protection interventions designed, based on operations research and bottleneck analyses. To address demand side bottlenecks, C4D strategies were applied in WASH to improve hygiene practices and in Nutrition for improved child feeding practices.

ZCO with the support of the RO, supported capacity development in humanitarian action coordination for staff and partners in Child Protection, Education, Nutrition and WASH. The trainings covered coordination, preparedness and response (WASH) and data management, screening, referral and treatment of malnutrition (Nutrition).

In partnership with the National Association of NGOs (NANGO), ZCO supported increased child participation in budgeting processes at local and national levels. This involved educating children on budgeting concepts under the Child-Friendly National Budgeting Initiative (CFNBI). The trained junior councillors and parliamentarians reviewed the national budget and identified priority issues affecting children in various communities. They compiled a Children's 10 Point Plan that was submitted to the Ministry of Finance for consideration in the 2015 national budget.
To enhance child rights mainstreaming in programmes, ZCO partnered with the Women’s University in Africa (WUA) in the development of a Child Sensitive Social Policies Postgraduate Diploma, in which 44 students graduated in 2013, and 43 students were enrolled in 2014. An international conference on Child Sensitive Social Policies was hosted in Harare in February 2014.

Availing specialized data for decision making, policy development and programming often required contracting internationally at high cost. A decision was made to create local capacity for costing protection strategies, child sensitive policy analysis, and child budgeting and ZCO sponsored two government officials to participate in training at the ILO Academy of Social Security. This team together with ZCO staff is successfully supporting the costing of social protection options proposed in the National Social Protection Policy for Zimbabwe.

To improve efficiency in the processing of claims from districts to head office, ZCO supported the Zimbabwe National Statistics Agency (ZIMSTAT) to increase their accounting capacity through implementation of and accounting software, procurement of the necessary IT equipment, and training of provincial administration in application of the software.

**Evidence Generation, Policy Dialogue and Advocacy**

The Multiple Indicator Cluster Survey (2014) was strategically planned to provide data for global MDG reporting and to determine achievements made in the period 2011-2014 when donors invested in large pooled funding to revive collapsed social sector systems.

The inspiring results were used to convey to government, donors, mass media, and other partners that Zimbabwe has made substantial gains in the social sectors since the economic and social collapse of 2008. However, it is emphasized that with inadequate government investment to buttress the success, the gains are fragile and need continued support from donors. Simultaneously, efforts are ongoing to assist the Government expand its fiscal space for long-term sustainability. Indications are that donors will continue funding the social sectors beyond 2015, albeit at reduced scale.

In a country with great potential from natural resources and agriculture, fiscal space remains constrained and is the key bottleneck to sustained social services recovery. To advocate for government investment, UNICEF is working closely with the Office of the President and the Ministry of Finance. The advocacy approach which is making inroads uses available evidence, policy analysis and partnerships with the World Bank and International Monetary Fund (IMF) to influence possible investment and operationalization of Zimbabwe’s development blueprint – Zim Asset.

The long term strategic approach applied is availing child sensitive evidence for developing the climate change policy and advocacy for inclusion of climate change and environmental sustainability during the education curriculum review.

The capacity of the Ministry of Education for data management and use in decision making was strengthened through support to the annual school census (EMIS), the teacher development information system (TDIS), and provision of ICT equipment at head office and in 10 provincial and 72 district offices.

To capitalize on the opportunity offered by the ongoing process of alignment of laws with the new constitution, UNICEF conducted child rights training for 48 parliamentarians members of
portfolio committees handling child related issues strengthening Child Rights oversight capacity of parliament.

Future programming will prioritize poorly performing indicators identified through the MICS and secondary analysis of the census and ZDHS 1994-2010 among them, birth registration, early marriage and stunting.

**Partnerships**

Guided by global initiatives such as "Committing to Child Survival: A Promise Renewed", and "Scaling up Nutrition", the Zimbabwe Country Office took the lead in galvanizing the national Child Survival agenda, with particular focus on addressing major gaps in health care for newborn babies in the first one week of life. UNICEF scaled up the new-born care corner initiative by establishing new-born care corners in primary health centres and district hospitals. UNICEF is also playing a pivotal role in scaling up high impact multi-sectoral maternal and child nutrition interventions using the continuum of care, life cycle approach within the first 1,000 days.

In the area of Child Protection, UNICEF initiated re-engagement with the Zimbabwe Republic Police - Victim Friendly Unit, which plays a critical role as "the first port of call" for children coming into contact with the law. At the same time, NGO partnerships led to more children in contact with the law accessing justice, and in the rolling out of the case management model.

As in previous years, engagement with the private sector focused on resource mobilization and programmatic co-operation. UNICEF received 8,840 mobile phones from Econet Wireless Zimbabwe for volunteer Child Protection community case care workers. Econet also worked with UNICEF and SECURICO to pilot a mobile cash transfer program in Epworth. Partnerships established in the previous year between large mining and agricultural companies in small towns and the local authorities, for operations and maintenance of water and sanitation systems, were maintained.

The country office led advocacy efforts to operationalize the national economic development blue print, Zim Asset. Led by the Government of Zimbabwe, and facilitated by UNICEF in partnership with the World Bank, African Development Bank and UNDP, the architecture for aid coordination and implementation is being revamped. The development of the new aid architecture has brought government, donors, private sector and civil society together for the first time in over a decade.

Finally, a significant amount of programme implementation was achieved in 2014 in partnership with 33 Civil Society Organizations, through which 19 per cent of UNICEF’s 2014 budget was disbursed (approximately US$ 37 million).

**External Communication and Public Advocacy**

UNICEF Zimbabwe occupies a unique position of trust as both programme partner and fund manager of multi-donor pooled funds. In line with the Global Communications and Public Advocacy Strategy of “putting the rights and well-being of the most disadvantaged children at the heart of social, political and economic agendas,” UNICEF used the promising results of the 2014 Multiple Indicator Cluster Survey (MICS) to advocate with the government and donors for the need to continue funding the social sectors in order to safeguard and build on the gains.

A series of private and public meetings were held with the Government and all the key donors at which UNICEF was able to show key results achieved since 2009, demonstrate value-for-
money, and highlight the need for continued partnerships and support. The response was extremely positive and resulted in commitments from the donors to continue supporting the current pooled funding modality beyond 2015. Complementing this approach were a series of opinion pieces published in the local press and regional media (Mail and Guardian), and interviews with international media, notably from Germany and China.

As space opened up after the July 2013 elections for development driven stories, UNICEF partnered with several organisations, including the Zimbabwe Union of Journalists (ZUJ), and the Zimbabwe National Editors Forum (ZINEF), to improve media relations and maximize reach. ZCO produced 32 opinion pieces, 64 radio programmes and 20 television programmes and gave voice to young people through a weekly program on issues affecting urban youth. Junior parliamentarians and councillors were supported to canvass views from young people on key areas of concern in their constituencies for submissions to parliament.

UNICEF expanded its engagement with audiences through digital and social media. The Facebook audience expanded from 700 in January 2014, to 30,500 in November 2014. Twitter followers increased to more than 1,000. The UNICEF Zimbabwe website averaged 6,000 hits a week and is linked to the vibrant UNICEF Zimbabwe YouTube page, as well as the “UN in Zimbabwe” webpage. Commemorative events were used to call for operationalization of the Children’s Bill of Rights through alignment of laws with the new constitution.

**South-South Cooperation and Triangular Cooperation**

During 2014, UNICEF Zimbabwe supported bilateral (government-to-government) South-South cooperation in the education sector.

The cooperation between South Sudan and Zimbabwe was initiated by South Sudan’s Minister of Education, Science and Technology (MoEST), Hon. Dr. John Gai Yoh, on his official visit to Zimbabwe early in 2014. During this visit, Hon. Dr. Yoh gained an appreciation of the strengths of Zimbabwe’s education system and the potential for the two countries to cooperate further. He therefore extended an invitation to the Zimbabwean Minister of Primary and Secondary Education (MoPSE), Hon. Dr. Lazarus Dokora, to visit South Sudan. It was during this visit, undertaken in July 2014 and supported by UNICEF, that the two Ministers formalized their cooperation by drafting and finalizing an MOU to formalize and strengthen “South-South education sector dialogue and cooperation” between the two countries.

The MOU focused on the exploitation of the successful experiences of the two countries’ and their relative strengths in areas of mutual interest. The areas of cooperation identified were: (a) support to curriculum development processes (including development of syllabuses, teaching/learning materials, examinations and assessment; (b) training of South Sudan’s senior education personnel in policy development and education management; (c) an exchange and recruitment programme involving teachers and managers; and (d) education sector policy development and planning. The MOU also provided a framework for the twinning of schools in the two countries for mutual benefit.

Although South Sudan’s education system has so far enjoyed the support of Kenya, Uganda and Ethiopia, Sudan saw clear benefits of extending the cooperation to Zimbabwe given the latter’s experiences and strengths. Zimbabwe would also learn from South Sudan’s experiences in conflict and disaster risk management (C/DRM). The cooperation rides on the strong historical ties between the two countries dating back to their struggle for independence.
In October 2014 UNICEF Zimbabwe and South Sudan’s MoEST/UNICEF staff re-affirmed, on the side-lines of a regional workshop on Conflict and Disaster Risk Reduction (C/DRR), their intention to cooperate in C/DRR. In 2015 UNICEF’s ZCO and SSCO will work together to support the implementation of the MoU and track the results of this cooperation.

**Identification Promotion of Innovation**

In an economically constrained context, access to social services for vulnerable populations in Zimbabwe remained the focus of the country programme. UNICEF and partners worked together to remove critical bottlenecks that impeded access to services such as user fees.

Continued analysis, use of evidence and partnerships enabled delivery of high impact cost-effective interventions country-wide in Health, Education, Child protection and WASH. With regular monitoring and emerging evidence, donors continued to invest in the Transition Funding Mechanism supporting critical inputs for reviving the infrastructure, providing critical supplies and equipment and enabling skilled personnel to perform their roles. The impressive results in a short period of time and documented through the Multiple Indicators Survey (MICS 2014) have contributed to donor willingness to extend support beyond 2015 allowing time for economic recovery.

MICS data shows that some programme areas and geographic locations have lagged behind. Causal analysis suggested demand-side constraints rather than supply. One such area has been the uptake of HIV counselling and testing (HTC) among adolescents and enrolment of adolescents on ART. In response to the low rates, UNICEF in 2014 supported a targeted HTC community campaign in two low performing provinces with outstanding results. Over 10 days 174,343 people were tested compared to 93,071 tested through facility-based HTC over 6 months. The number of adolescents initiated on ART increased from 1,872 (second quarter) to 2,725 (third quarter). Key to the success were: a school and community based campaign on the importance of adolescent HCT, and bringing the services closer to the users.

Other areas where Innovations have achieved results include the revival of WASH facilities in small towns where sustainability is an issue and education where the personnel and teaching materials are in place but where quality remains a concern.

UNICEF supported roll-out of an electronic billing system that has improved revenue collection in the WASH sector. The revenue is then used for service delivery and maintenance - for example in Bindura Municipality revenue increased from US$299,734 in 2009 to US$1,017,016 in 2014.

In education, UNICEF is supporting the roll-out of a real-time data system for attendance monitoring of the country’s 118,000 teachers.

**Support to Integration and cross-sectoral linkages**

Within the Country Programme, the reduction of maternal and under-five mortality were health sector priorities. A holistic continuum of care approach was used, which covered Maternal Newborn and Child Health (MNCH), Nutrition, and HIV and AIDS. Through the integration of HIV into the MNCH programme, access to antiretroviral treatment (ART) for HIV positive women and children increased, resulting in significant reduction of new infections among children from 30 per cent in 2009 to 9.2 per cent in 2013. The integration of nutrition and HIV interventions in 8 districts resulted in 70 per cent of HIV exposed babies being exclusively breastfed, much higher than the 41 per cent among the general population. Similarly, there was an increased
number of malnourished children tested for HIV and referred for ART management. Compared to national coverage of 41 per cent, the proportion of HIV positive children identified through the malnutrition programme and initiated on ART ranged from 54 per cent to 70 per cent. Given that AIDS has been a major contributor to both maternal and under-five mortality in Zimbabwe, the reduction of maternal and under-five mortality shown in the 2014 MICS is evidence of strong programme integration. Similarly, the reduction in the level of stunting from 32 per cent to 27 per cent would not have been possible without reducing the other health, WASH and AIDS related morbidities and mortalities.

In 2014, WASH programme implementation was closely linked with the Education sector; specifically in the integration of WASH in school activities, and the provision of inputs for the National Curriculum Review. In addition, the Urban WASH programme developed a specific strategy for the incorporation of crosscutting issues into their programming.

ZCO also supported the Government in the development of the Girls Empowerment Framework, a follow-up to the 2011 National Baseline Survey on Life Experience of Adolescents (NBSLEA). The framework was developed through a consultative inter-ministerial process involving about 6 line ministries. The Framework’s five empowerment objectives for girls and young women are: more effective and equal participation in education; increased reporting of experiences of violence; increased knowledge regarding access to sexual and reproductive health services; economic empowerment; and increased participation in policy dialogues at community and national level.

**Service Delivery**

Following the principles of MoRES, ZCO supports the systematic collation, analysis and reporting of real-time data for planning, performance monitoring, and decision making. An example of this is the quarterly Vital Medicines Availability and Health Services Survey (VMAHS). VMAHS data allows decision-makers to track health service delivery performance, evaluate impact, and ensure accountability. Trends are monitored in: availability of vital medicines and health commodities, and the efficiency of current systems to deliver and re-supply them; availability of selected health services; staff availability and capacity; as well as user fees. This has enabled the health system to monitor and address bottlenecks timeously.

In WASH, ZCO continued to support the Government’s National Action Committee (NAC) for improved Sectoral coordination. Over 810,000 people gained access to safe drinking water through construction and rehabilitation of 3,571 rural water points and 16 piped water schemes. About 5,200 water point committees and 735 village pump mechanics were trained to facilitate continued operation and maintenance of water points in 33 rural districts. In addition, Community Sanitation Action Groups were trained to facilitate the scale up of the demand led sanitation approach. Support for institutional capacity building in up to 14 small towns included billing systems, customer care training, operations and maintenance training, and financial assessments.

School improvement grants of nearly US$24 million were disbursed to 5,262 disadvantaged rural schools based on approved school development plans. In preparation for the grant disbursement, training was conducted for finance and non-finance managers at national, provincial, district and school level in financial management. Training was also conducted for 6 core staff of the Zimbabwe Schools Examinations Council (ZIMSEC) on execution and management of all stages of a national assessment of early learning, and the development of a school-based assessment system.
Tracking and crafting responses to rural/urban as well as within locality inequities in access to basic social services as well as outcomes of such access will continue to inform programming in 2015. Central to continued inequities are issues of incentives for qualified personnel and visibility of challenges to drive responses.

In 2015 the focus will be on improving service delivery for unreached population groups.

**Human Rights-Based Approach to Cooperation**

UNICEF Zimbabwe contributed to the realization of children’s rights enshrined in the African Charter on the Rights and Welfare of the Child (ACRWC) and the Convention on the Rights of the Child (CRC) through capacity building in Human rights based approach and support to specific interventions.

A total of 145,008 children in poorest and often excluded households benefited from bi-monthly financial assistance through the Harmonized Social Cash Transfer (HSCT) programme implemented by government with support of UNICEF. The Programme targets 55,000 extremely poor and labour constrained household - improving their standard of living and advancing realization of their socio-economic rights.

In collaboration with a local NGO, UNICEF developed a partnership model that establishes linkage between legal assistance, special assistance for persons with disability and justice sector actors (Police and Magistrates Courts). Financial and technical support was provided to a local NGO to ensure access to justice by Children with Disabilities who come into contact with the law and in 2014, 140 children (127 girls/13 boys) with disabilities accessed justice smoothly.

Institutional Capacity Assessment of the Legal Aid Directorate (LAD) showed that government legal aid is often insufficient to meet demand and is subject to available resources. To respond UNICEF supported LAD to establish partnerships with specialized local NGOs to complement the efforts of Government of ensuring access to justice for children in contact/conflict with the law.

In 2014, 3,445 children in contact with the law (2,061 boys/1,384 girls) received assistance with 1,366 (1,142 boys/ 224 girls) children in conflict with the law avoiding pre-trial detention or removed to more protective environments. Improvement in NGO–Government relationships has resulted in increased referrals from police and prisons to NGO partners.

CRC and ACRWC principles are enshrined in the new Constitution’s Children’s Bill of Rights and other sections. In 2014, UNICEF assisted a local NGO and Department of Constitutional Affairs, to develop materials for the civic awareness on the constitution targeting children and adults. Discovering Children’s Rights Rainbow Pocketbook and Guides were developed with contributions from 50 district ‘Book Teams’ and these teams also served as forums for identification of child protection cases.

**Gender Mainstreaming and Equality**

In 2014 UNICEF Zimbabwe commissioned a gender review to assess the extent of gender mainstreaming in its core programmes; identify strengths and gaps and recommend areas for improvement. The study also sought to ensure alignment to the UNICEF Gender Action Plan and to input into UNICEF’s new Country Programme. The findings indicate that the situation analysis was appropriately informed by gender disaggregated data and there was clarity on
determinants of gender based risk to violence and HIV infection. The study further indicated that
both the WASH and the child protection programmes demonstrated good practices in
mainstreaming gender. The CO has a national staff Gender Specialist reporting to the Deputy
Representative who works with the section gender focal points.

The WASH programme was gender responsive in reaching out to urban and rural communities
in provision of safe water, gender appropriate hygiene messages and gender-sensitive
sanitation facilities. The programme encouraged women’s active participation in management of
water committees and participation of men and boys in hygiene promotion. A rural baseline
survey was completed and generated more gender-related information.

The Child Protection programme supported the national campaign against child sexual abuse
and violence led by the Ministry of Women’s Affairs, Gender and Community Development,
using evidence from the Violence against Children Study (NBSLEA 2011). The ongoing Social
Determinants study will further strengthen evidence on gender dimensions of violence and form
the basis for the design of the advocacy and communication strategy.

The maternal mortality reduction and PMTCT programmes were gender specific in meeting
women’s health needs and gender responsive to emerging issues. These included improving
their access to health through provision of health facility grants allowing elimination of user fees
for expectant mothers (over 75 per cent of Facilities) and also contributing to evidence for
prevention of cancer of the cervix by piloting the human papilloma virus (HPV) vaccine.

The country office supported qualitative and quantitative gender-related research for use by
UNICEF and partners. For example, equity-based and problem-driven research with in-depth
gender analysis was conducted among apostolic religious groups to better understand their
maternal and newborn child health needs and for informing a comprehensive Communication
strategy.

Environmental Sustainability

UNICEF continued to support development of the National Climate Change Response Strategy,
which provides a climate change adaptation and mitigation framework. UNICEF’s role in the
formulation of the first National Climate Policy for Zimbabwe ensures a child-sensitive policy.
Using the Global 7 per cent set-aside funding, UNICEF entered into partnership with the
Education and Environment Ministries to assess the child-sensitivity of current environmental
policies. Awareness of children and climate change was raised through information-sharing
seminars, virtual learning platforms, school visits, trainings, workshops, stakeholder and
university presentations and supporting children’s participation and climate change events and
activities. ZCO also sponsored Government attendance at events such as the Global Climate
Summit and the Conference of Parties 20 (COP 20) which strengthened Zimbabwe’s global
climate change engagement.

Environmental sustainability management is being incorporated in Country Office operations
and programmes, initiated by the Office’s first Greenhouse Gas emission inventory for 2013
calendar year, completed in May 2014. This enabled implementation of various ‘Greening the
Blue’ energy-saving and environmentally sustainable practices (e.g. solar panel installations,
sensor activated lighting, power saving bulbs, inverter AC unit installations, waste recycling at
source, water and electricity monitoring, reduced printing, paperless meetings etc.). A UNICEF
consultant conducted an assessment for upgrading the electrical distribution system and a
feasibility study regarding the installation of a hybrid PV/Diesel/grid power supply system.
Programme-level mainstreaming included the curriculum development review process via the Education section. Information gaps identified from the consultant’s study of children’s understanding of climate and environment concepts informed the curriculum review process and will enable enhanced coverage of climate change concepts in primary and secondary curriculums.

Other ongoing environment/climate change work includes two improved cook stove pilot programmes to address vast deforestation levels and health risks associated with current cooking practices. The pilots in partnership with Practical Action and GOAL address issues in health, nutrition, protection and climate change while also testing a sustainable approach involving local manufacturing, use of local materials, and training of household members on use and maintenance. A total 480 households in Hurungwe district will be reached and empowered to adopt and use the technologies.

**Effective Leadership**

The Office Management Plan (OMP), has 14 indicators which were monitored by programme and operations, and reported on monthly. This allowed the Country Office (with throughput of approximately US$ 208 million) to consistently maintain zero per cent Direct Cash Transfers over 9 months. Donor reports were submitted on time and oversight on HACT implementation was maintained.

The weekly Section Chiefs and the monthly Programme Management Team meetings were used as fora to provide updates on emerging programme issues, review implementation of the UNDAF and CPD roadmap, programme performance and solve programme and operations bottlenecks. Key programme updates and changes in the country programming context were discussed allowing for modification of strategic approaches and highlighting key areas for advocacy. All staff monthly meetings enabled sharing of relevant programme and operations information.

The office oversight committees have Terms of Reference (TOR) and staff participation, ensuring quality review of documents, adherence to guidelines, and that value for money was considered in resource approval decisions. Sixty two cases were reviewed by the Contract Review Committee (CRC) with a combined value of approximately US$ 49 million, 51 Programme Cooperation Agreements (PCA) were reviewed by the PCA Review Committee (PCA-RC), and 11 submissions were made to the Property Survey Board (PSB).

To improve efficiency, the Country Office consolidated transaction processing through a Business Service Centre (BSC) with “Push and Track” as a tracking tool for transactions. The BSC brought together a team to specialize in the time intensive SAP transactions, thus relieving the workload from programme staff to focus on programme implementation and monitoring. This model prepares the country office for the transition to the Global Service Centre.

The Business Continuity Plan was periodically reviewed and updated. All 2012 audit recommendations were closed and a peer review of the various Operations areas was conducted by the Regional Office to ascertain the implementation of the audit recommendations while at the same time preparing for the upcoming internal audit.

In preparation for the Country Programme 2016-2020, ZCO held a Strategic Moment of Reflection, where the Regional Office provided technical support in all the programmatic areas.
of the CPD. ZCO also reviewed its organizational structure to ensure that the staffing complement and skills set are aligned with the needs of the Country Program. Based on this exercise, a submission was made to the Programme Budget Review (PBR) to delimit the Collaborative Centre of Operations Research (CCORE), abolish and establish some posts, and make reporting line changes effective January 2015. All proposals were approved by the PBR.

With technical support from Regional Office, ZCO conducted a workshop to effectively profile and manage risks under the Enterprise Risk Management framework. Major risks for the ZCO relate to the key role in managing support through the unconventional transition funds model in an economically stressed environment coupled with capacity gaps. The response of the ZCO to these risks has been to strengthen government partner institutions capacities, engage donors and government on social sector financing and gradually transfer social sector responsibilities to government, and maintaining strong programme and financial oversight.

**Financial Resources Management**

The office management consistently utilized the Managers Dashboard on ‘Insight’ to check on alerts. Key performance indicators were monitored at CMT, PMT and weekly chief’s meetings where budgetary control, fund utilization against grants, and ageing of DCTs were analyzed and discussed. Bank balances were reconciled monthly and reconciling items were cleared within 30 days.

ZCO has entered into a new banking relationship with Standard Chartered Bank (SCB), resulting in reduced bank charges whilst availing on line banking facilities with more efficient bank reconciliation process. This improved efficiency, shortened lead time in processing payments, and avoided manual interventions, scaling down the risk of misappropriation. Of special mention, the School Improvement Grant payments channelled through the SCB e-banking platform facilitated payments to almost 5,000 schools across over 60 districts countrywide, avoiding extra costs of contracting third party contractors.

To further strengthen Harmonized Approach to Cash Transfers (HACT) implementation, the Office contracted four accounting firms to conduct micro assessments, spot checks and scheduled audits of partners in which 284 of the 293 Implementing Partners (IPs) were micro assessed. The assurance plan covered spot check exercises for 69, and scheduled audit of 34 partners receiving more than $500,000. To strengthen financial capabilities of IPs, four trainings were conducted for 169 participants from Government and NGO.

The HACT Steering Committee met quarterly to monitor progress of the assurance and capacity building activities which included dissemination workshops. The CO chairs the HACT inter-agency committee in which best practice approaches to effective implementation of HACT are discussed.

In 2015 ZCO will undergo an audit which will benefit from the Commercial Expertise Review undertaken by the Department for International Development (DFID) and the peer review by the RO.

The total Regular Resources (RR), Other Resources (OR) and Other Resources Emergency (ORE) fund utilizations as at end December 2014 stand at 99 per cent, 91 per cent, and 97 per cent respectively.
Fund-raising and Donor Relations

All 59 donor reports due in 2014 were submitted within deadline, with extensive quality assurance conducted. Weekly reviews tracked the status of key indicators such as donor reports due, RR and ORR utilization, DCT liquidation, and expiring grants. A second consultative meeting and field visit took place with SIDA, as ZCO is the recipient of the largest country specific thematic funding from Sweden. An additional US$23 million was made available for 2014 and 2015.

Programmes were monitored through regular programme meetings with donors and quarterly management meetings, to ensure transparency and accountability. In this year’s DFID live scoring exercises, the Education Development Fund and Child Protection Fund received favourable ratings (A and A+ respectively), an indicator of strong programme efficiency and effectiveness.

Ernst and Young conducted the verification of the EU's contribution to the Programme of Support for Orphans and Vulnerable Children (2008-2012) valued at US$ 85m. Preliminary results indicated sound programme and operations processes and systems.

The country office commissioned an independent assessment of the Transition Funding Modality (TFM). The aim of the assessment is to evaluate the comparative advantage of the TFM over similar pooled funding mechanisms, and to assess its efficiency and effectiveness in delivering sustainable results and value for money.

To ensure sustained donor funding for the programme, a concept note titled, "Sustaining the Gains" was developed and used for advocacy with donors and government. Follow up consultations with key donors indicated that continued funding for the Transition funds is likely.

Evaluation

The ZCO Integrated Monitoring and Evaluation Plan (IMEP) was noted as a benchmark of good practice in 2013. The 2014/2015 IMEP was designed to provide data for the new country programme and there were no evaluations in 2014 although several are planned for 2015. The IMEP develops from thematic priorities, timeframe, budget and IPs.

The highlight of 2014 was the Multiple Indicator Cluster Survey (MICS 2014) which tracked outcomes for the 2010-2014 period. The launch of the MICS key findings report was used as an advocacy platform for donors, government and the media showing how high-impact-cost-effective interventions have contributed to results within a short time and calling for efforts to sustain momentum. Further analysis of the data helped identify gaps to refocus programme priorities, e.g. low birth registration (32.3 per cent) will be prioritized in 2015.

A Mid-Term-Review of the Health Transition Fund (HTF) undertaken by the Liverpool School of Tropical Medicine and Hygiene using MICs data, concluded that the Maternal Mortality 2015 target was met, Under-five mortality target could be met, but stunting reduction was unlikely to be met. Some indicators of service quality such as content of antenatal care, antibiotic treatment for ARI and use of ORS for diarrhoea disease were performing poorly and needed attention. Further to the MICS findings, an assessment of the transition funding mechanisms will enhance understanding of TFMs for the future.

Using research findings, secondary analysis of 2012 census and programme monitoring data,
ZCO strengthened its engagement with donors and the Government on social sector financing and has developed a concept paper on ‘Sustaining the Gains’ that has formed the basis for dialogue. As a response to the programme gaps identified through the MICS and other studies, the IMEP is revised to include studies that improve understanding of bottlenecks, advocacy, programme design and capacity development.

**Efficiency Gains and Cost Savings**

In line with the Efficiency and Effectiveness initiative, ZCO established a Business Support Centre (BSC) to reduce transactional activities processed by programme teams and freeing up resources and time to focus more on programmatic activities. The work processes were reviewed and aligned to the new operating environment; and the internal control system remained compliant with policy guidelines and managed transactional risks. An all staff orientation was undertaken to ensure that the revised work processes are understood and observed consistently.

Long Term Agreements for emergency, logistics and HACT assurance were established to streamline the acquisition process, lower transaction costs, eliminate repeated bidding and contractual discussions and reduce lead time for provision of services and supplies. Further to the common procurement activities initiated in the last two years, the UN Operations Management Team put in place arrangements for ‘piggy-backing’ on contracts signed by different agencies without incurring additional administrative charges.

UNICEF Zimbabwe explored ways of achieving cost-effectiveness and efficiency in administrative areas. A reduction of US$37,000 per year was realized in office maintenance through rationalizing premises maintenance. Security bills for the year were reduced by US$25,000 by installing a more advanced CCTV system and computerized vehicle tracking system. The office is in the final stages of introducing an asset management system with barcoding which will reduce significantly the time and resources for inventory management. The environmental footprint was reduced by changing to energy saving systems such as LED bulbs, solar security lights and motion sensors reducing energy used on lights. Outstanding travel open for more than 15 days was also consistently maintained at lower levels in 2014 compared to the regional average.

Efficiency was also attained in reviewing PCAs by instituting a batch reviewing process. Agreements with different CSOs, for similar activities at different geographical areas are reviewed together as a batch.

**Supply Management**

2014 total procurement throughput, including Procurement Services to government through UNDP, amounts to US$144.2M. Procurement Services amounts to US$101.1M, and US$43.2 million relates to programme supplies for ZCO. Under the ‘One UN’ initiative, travel and security service contracts were established. 14 LTAs for recurrent commodity/services established improved turnaround of procurement requests.

ZCO supported a large range of high-value, complex procurement activities that visibly targeted local delivery of essential supplies and services with an impetus to kick-start national availability. The strengthening of the EPI cold chain structure across 10 regions with installation of 21 walk-in cold rooms complete with freezer, refrigerators and backup generator including training of 10
MoH technicians enabled smooth introduction of two new vaccines, Rotatrix and HPV. UNICEF continued major rehabilitation of WASH systems in 14 towns, equipped and installed billing systems supporting self-sustainability, and completed the fourth phase of the National scale Borehole Drilling Programme.

Improvements in logistics were made in streamlining warehouse operations and improving stock management facilitating timely movement of supplies including direct deliveries to end-users and relinquished half warehouse space as cost efficiency effort. 2014 inventory value year end count is US$779,228.53 of which emergency prepositioned stock is US$95,218.97.

2014 proved to be more challenging than 2013, for local and cross border business enterprises with the increasingly difficult economic situations and limited credit facilities facing Zimbabwe. Most suppliers/contractors struggled to secure adequate financing/cash flow to support implementation and this impacted the timely delivery of supplies and services.

**Security for Staff and Premises**

Despite the fragile national economic outlook, the security situation in Zimbabwe remains stable. There is, however, a moderate level of crime, including occasional armed robberies targeting both foreign and local residents. Cases of thefts and smash-and-grab robberies from vehicles, especially at main intersections along main routes, are occasionally reported.

There were no instances where programme activities were postponed or delayed due to security threats. Staff members travelled regularly in the field for programme, monitoring, supervision and training.

In line with minimum security requirements, all staff have taken the online training in Basic and Advanced Security in the Field as a prerequisite for undertaking field trips. All field and international travels were authorized only after confirmation of security clearance by UNDSS. In line with the new PEP (Post-Exposure Prophylaxis) Kit guidelines, training has been undertaken and distribution of PEP Kits is completed.

To ensure security of staff, two taxi companies that meet the UN basic security standard have been identified and contracted. Office vehicle movement tracking systems are installed on all UNICEF vehicles and linked with UNDSS’s personnel tracking system, resulting in real-time information on the location of UNICEF vehicles for a rapid response should it be required. Defensive driving and first aid training was also conducted for all drivers.

The office premises and vehicles are fully MOSS compliant. While the security risk of the country has been assessed as low, additional measures were taken that ensured maximum security and safety of staff and office premises. Based on assessment of the Minimum Operating Security Standards (MOSS) conducted at the beginning of 2014, anti-blast shatter film were installed on all glass windows and doors, and additional MOSS compliant equipment was bought and installed in vehicles. Due to frequent power disruptions, the Office is currently changing the office security perimeter lighting to solar to enhance security during periods of excessive load shedding.

**Human Resources**

In 2014, UNICEF recruited 13 staff members on Fixed Term (FT) contracts and 7 on Temporary Assistance (TA) contracts. By year’s end, there were 133 FTs, 12 TAs, and 56 Individual Consultants engaged in 2014, leaving a vacancy rate of 15.8 per cent of which 10 posts are on
hold due to funding constraints.

The Personnel Evaluation Review (PER) completion rate for 2013 stands at 99 per cent while the mid-year reviews for 2014 show a 100 per cent completion rate. Learning and Development (L&D) budget execution stands at 67 per cent ($80,641) and overall projected at 70 per cent ($84,135) by year-end versus an annual budget provision of $120,000. The current drivers of expenditure consist of: global and regional workshops (67 per cent), individual learning (26 per cent) and group learning (7 per cent). The initial L&D plan catered for 71 activities, revised to 67 due to changing programme circumstances, and the overall implementation rate stands at 99 per cent (66 of 67 activities have been delivered). ZCO considers the budget expenditures as reasonable considering these achievements. Furthermore, low-cost high-impact in-house and online group learning resources were explored – including the use of Section budgets – resulting in reduced L&D cost implications.

Major group trainings during the year included group orientation sessions for new hires, Competency Based Interviewing (for panel members), Competency Based Interviewing for Candidates, Ethics Essentials, Taking the Next Steps: Personal and Professional Development, WASH in emergencies and an internal controls workshop, all aimed at enhancing personal and organizational effectiveness. The Office closes 2014 celebrating achievements by six staff who successfully completed their distance learning activities.

In light of the new CPD, some of the emerging L&D priorities for 2015 include Managing Performance for Results, Communication for Development and training on Monitoring and Evaluation standards. It is also planned to take advantage of UNICEF’s AGORA learning and development site to track learning activities for the Country Office.

The Caring for Us Committee, in coordination with the UN Country Team’s Human Resources Working Group, held a two day wellness day event at the WHO offices. The event attracted a moderate number of staff and their families. Activities and information sessions included HIV testing and counselling, blood pressure screenings, information about non-communicable diseases and Zumba. The UN Clinic also organized a two day health screening event for UNICEF employees which was also well attended.

**Effective Use of Information and Communication Technology**

ZCO continued to build upon past accomplishments to enhance operations efficiency in programme management through strengthened information and communication technology (ICT) infrastructure.

The rollout of Microsoft Office 365 specifically included migration of the e-mail system from Lotus Notes to Outlook. The shift of unified communications and collaboration infrastructure from Domino to Microsoft – from hosting locally to outsourcing these services to Microsoft – removed the technical complexities in the administration of the Domino infrastructure. This allowed the office to adopt the latest technology and leverage its benefits by having common e-mail and unified communications to computers and mobile devices.

ZCO worked closely with ITSS/NY and Société Internationale de Télécommunications Aéronautiques to pilot Microsoft Office 365 traffic optimization. This project will address the bandwidth impact and improve end-user experience without the need for upgrading existing bandwidth that entails additional financial resources.
As part of the One UN and with UNICEF leading the UN ICT Working Group, a close user group agreement between UN agencies and Econet was implemented, resulting in tariff cost reductions of 30 per cent for telephone calls within the Econet network and 50 per cent for data. The Office undertook a major upgrade of and enhancements to secure the ICT environment. The implementation of Dynamic Host Configuration Protocol with Network Access Protection supported the dynamic Internet Protocol provisioning based on clients’ identity and status, whilst restricting Internet Protocol auto-configuration to UNICEF computers only. This project also allowed ZCO to reconfigure and simplify its local area network configurations, resulting in ease of administration and reduced downtime.

The Office provided technical support for the implementation of the Push and Track system for the operationalization of the VISION business service centre.

It also undertook upskilling of ICT staff in the field of emergency telecommunications, IT service management and customer service.

**Programme Components from RAM**

**ANALYSIS BY OUTCOME AND OUTPUT RESULTS**

**OUTCOME 6**: Improved and more equitable access to and completion of quality, inclusive education with improved learning outcomes.

**Analytical Statement of Progress**: 

Since 2009, the quality of education in Zimbabwe has improved steadily in tandem with the strengthening of the education system. Primary school pass rates have steadily risen, and in 2013 stood at 50.2 percent compared to 39.3 percent in 2009. Indications by Zimbabwe Schools Examinations Council (ZIMSEC) are that 2014 pass rates have increased by almost 7 percent compared to 2013. Although secondary pass rates have remained depressed for the past 5 years, they rose to 21.7 percent in 2013, the highest since 1984.

The system maintained a reasonably high percentage of qualified teachers: 77 percent of the over 125,000 teachers meet the professional standards though the rate among early childhood practitioners is 27 percent. A major bottleneck is that most teachers have not had the opportunity for professional upgrading for over ten years. UNICEF supported efforts by Ministry of Primary and Secondary Education (MoPSE) to develop and implement a Teacher Capacity Development programme. Similarly, UNICEF supported the training of another 2,500 ECD paraprofessionals which brings the cumulative total close to the 2015 target of 10,000. This, coupled with the GPE-supported Early Reading Initiative (ERI) and the Performance Lag Address Programme (a learning catch-up programme) that equips all the primary school teachers with enhanced teaching skills in early reading and remedial education, has strengthened early learning. Additionally, UNICEF and MoPSE trained 4,330 science teachers from all secondary schools in the use and care of the 2,449 science kits that were provided to their schools. Together, these have strengthened the quality of human capital in the education system and will improve student outcomes.

While the Ministry of Finance (MoF) consistently prioritized education in the budget allocation (29.4 percent in 2014 and 27 percent in 2015), some major bottlenecks remain, as 96 percent of the budget goes towards wages and, as of October 2014. UNICEF provided school improvement grants (SIG) to almost all rural primary schools (over 5,260), serving more than
2.4 million students. These funds have allowed schools to significantly reduce gaps in government funding. In 2015, UNICEF will support MoPSE to deepen engagement with the MoF to address sector financing concerns.

UNICEF support contributed to improved access for learning opportunities for almost 45,000 out-of-school children (OOSC), strengthen the delivery of services for children with disabilities, and support children affected by disasters. Through a partnership with NGOs and MoPSE, two models were created for the provision of second chance education opportunities to OOSC, including children with disabilities. These models have the potential to reach substantially larger numbers of out-of-school children but the designs need to be further improved. UNICEF is supporting a national assessment of OOSC and is reviewing other successful models in order to ensure a better response to the needs of this group. UNICEF also provided equipment for all (36) special education centres to support diagnostic and treatment services for over 7,500 students with disabilities.

The strengthening of MoPSE’s capacity for the generation of data to inform sector performance and development priorities was a big achievement in 2014. Data generation initiatives which were undertaken with UNICEF funding and technical support include: 1) EMIS; 2) a Teacher Development Information System (TDIS); 3) the Zimbabwe Early Learning Assessment (ZELA); and, 4) three research studies/surveys at various stages of completion. These were complemented by findings from field monitoring visits by MoPSE, UNICEF and partners, and joint field visits by members of the multi-stakeholder Education Coordination Group. In an effort to improve monitoring within the education system, UNICEF is supporting the MoPSE in designing an innovative Rapid SMS system (EduTrac) that will facilitate cost effective collection of real-time data. Additionally, due to funding constraints and donor conditions, MoPSE has relied on NGOs for monitoring and supervision of schools. MoPSE, with UNICEF support, is now shifting to directly providing fuel cards to all 82 district and provincial education offices. This not only increases sustainability, but reinforces MoPSE’s responsibility and leadership while drastically reducing costs.

Major sector-wide initiatives in 2014 include: 1) the development, finalization and adoption of the Non-Formal Education (NFE) Policy and School Health Policy (in collaboration with other stakeholders); 2) initiation of the development of the 2016-2020 ESSP that is financially supported by UNICEF with participation of all players active in the sector; and 3) the launch of the curriculum review process. All reflect greater commitment by MoPSE’s leadership to policy and programmatic reforms. They also provide critical opportunities to shape the future of the education system.

The successes achieved in 2014 can be attributed to UNICEF’s well-coordinated package of sustained investment in capacity building and system strengthening (training, provision of supplies, and promoting efficient processes). Other success factors include the establishment of relevant implementation structures (e.g. the 15-member SIG Management Team) and the establishment of links with local institutions (e.g. 11 teacher training colleges for ECD paraprofessional training).

**OUTPUT 1:** Curricula at all levels (ECD, primary, lower secondary) are more relevant to the needs of girls and boys and society, including HIV and AIDS, with guidelines and agreed upon functional standards.

**Analytical Statement of Progress:**
There has not been a comprehensive national curricula review for the last decade, leaving many curricula contents obsolete and irrelevant to the needs of students and society today. All levels of the education system have expressed the need to review and revise the national curricula. Revision of the national curricula was initiated in late 2012 and should contribute to enhancing the quality and relevance of primary education.

In collaboration with UNESCO, UNICEF financially and technically supported the Ministry of Primary and Secondary Education (MoPSE) to produce five base papers for the curricula review process. A draft Roadmap for the curricula review was produced and will be finalized by 31 December 2013.

Through a multi-stakeholder participatory process, UNICEF provided technical and financial support for the revision of primary core subject syllabuses for Mathematics, English and two national languages (Shona and Ndebele). Environmental Science, Agriculture and Early Childhood Development (ECD) syllabi were also revised. 13,000 copies each of ECD and Agriculture syllabuses were printed and distributed with UNICEF support.

UNICEF supported the Curriculum Development Unit (CDU) with vehicles, computer equipment and software and capacity building of key staff to facilitate the syllabi review process and to ensure that MoPSE has the capacity to provide technical leadership to the curriculum review process. According to MoPSE’s plan, revision of textbooks will start in 2015 after the conclusion of the curricula review process.

OUTPUT 2: 100,000 female and male teachers are trained in modern pedagogical and subject based skills, including HIV and AIDS, with a focus on upgrading the qualifications of at least 10,000 unqualified teachers.

Analytical Statement of Progress:
The Teacher Minimum Standards (TMS) is a set of standards regarding teacher qualifications, knowledge, skills, attitudes and the professional performance expected to be demonstrated by teachers in the classroom. UNICEF provided financial and technical support to developing the TMS using a consultative process. The TMS have been finalized and awaits Cabinet approval. Once the TMS have been endorsed by Cabinet, UNICEF will support MoPSE to assess the percentage of teachers meeting professional standards.

For teacher in-service training, plans are underway to upgrade teachers who do not have ‘O’ level Mathematics, English and Science during the December 2013/January 2014 holidays. In ECD, UNICEF supported MoPSE to train ECD paraprofessionals, with 2,465 paraprofessionals graduating in April/May 2013. The training of the second cohort of 2,500 paraprofessionals in December 2013 included lessons learnt from the first training.

In addition, 1,760 secondary school Science teachers and 100 Provincial Education Officials (supervisors) were trained in the use of the new science kit. The target is to cover 5,000 teachers, or two science teachers each from all secondary schools (around 2,500 public secondary schools in the country) and education officials by February 2014. UNICEF provided the technical experts who supported the training of trainers (TOT) as well as oversight of the training conducted by MoPSE staff.

OUTPUT 5: A national school grants initiative, delivering critical investment at school level (including WASH) to allow schools to meet the minimum Child Friendly School standards is developed and implemented.
Analytical Statement of Progress:
The School Improvement Grants (SIG) programme aims to provide adequate and well-targeted levels of funding to financially constrained schools to cover non-personnel and non-capital resource demands which will enable school to meet a minimum set of school functionality criteria. During 2013, the programme was piloted in 100 rural primary and secondary schools in Goromonz District and 32 special schools, prior to the national roll-out in 2014. The collection of baseline data of all schools for the pilot phase of the SIG was successfully completed. The collection of baseline data for the main phase (covering all schools in the country) will be undertaken in 2014. The data will provide the percentage of schools meeting Child Friendly Schools (CFS) standards (Minimum School Functionality criteria) that include, among other provisions, adequate WASH facilities.

Based on the initial returns, the SIG has enabled schools to secure key inputs for the creation of better learning environments, such as procuring teaching and learning materials (82 per cent), furniture (desks and chairs 68 per cent) and making minor repairs for safety (55 per cent). SIG was also used to alleviate levies for OVCs.

Statistics available from different surveys show that the provision of both sufficient water and adequate toilet seats in primary and secondary schools is generally low and favors boys. Boys have 5.43 per cent more toilet facilities than girls in primary schools and 3.54 per cent more in secondary schools. Under CFS programme, UNICEF provided funding for the provision of boreholes (within the school) as well as sex and age segregated latrines at 40 registered schools and 8 satellite schools nationwide. The level of boys’ and girls’ hygiene knowledge and practices have not been assessed yet.

OUTPUT 6: Project support - salaries

Analytical Statement of Progress:
All posts successfully filled.

OUTPUT 7: Enhanced communities and stakeholders' capacities at all levels (MoPSE and education partners) for increased learning opportunities and equitable access and retention of disadvantaged, excluded and out-of-school children (boys and girls).

Analytical Statement of Progress:
Major milestones achieved during 2014 include increased learning opportunities for the most disadvantaged children, the finalization of an equity-focused National Non-Formal Education policy, and increased attention to disaster risk reduction (DRR). UNICEF’s advocacy and technical and financial support were critical in realising these achievements.

However, in-depth analyses of the latest Zimbabwe Early Learning Assessment (ZELA), the Grade 7 exams data and the 2012 Census, reveal major equity issues related to access and learning outcomes. The most disadvantaged are out-of-school children (OOSC) aged 13-18 years, from the poorest households in remote areas and poor urban areas. Inability to pay school fees and levies and lack of learning facilities within walking distance are the main reasons why 28 percent of 13-18 year olds, and 52 percent of 17-18 year olds, are out-of-school. Up to age 15, attendance rates are similar for boys and girls but from age 16 attendance of girls is significantly lower.

UNICEF-supported access to alternative learning opportunities for OOSC is provided through
the Second Chance Education (SCE) programme. The SCE consists of two components: 1) accelerated learning and re-entry for children of primary school age who have dropped-out, and 2) a skills-based learning programme for older children with an emphasis on basic literacy and agricultural skills. Access to each component has increased to 45,000 (30,000 and 15,000 children respectively), achieving the cumulative target of 70,000 children and young people by 2015 will require intensified efforts and a number of challenges related to unit costs, sustainability and re-entry will need to be addressed. A review of the programme design will inform how the interventions will be taken forward.

A major contributor to irregular attendance, a predictor of dropout, is disasters and emergencies that affect schools and their communities. UNICEF worked with NGO partners to mitigate disaster risks and ensure effective humanitarian responses. In addition to school specific emergency responses, UNICEF support during the Tokwe-Mukorsi floods (January and March 2014) assisted 2,930 children (1,450 girls; 1,480 boys) to continue to access education. Although UNICEF supported response to these events, even greater emphasis is being paid to a systemic government-led approach which embeds DRR in existing structures and responses. UNICEF and its partners worked with 209 schools to develop DRR plans in 2014.

OUTPUT 8: Increased national capacity to provide access to quality early learning opportunities, primary and secondary education.

Analytical Statement of Progress:
UNICEF-supported activities in 2014 contributed to strengthening capacities and systems to provide access to quality education. Key interventions supported by the Education Development Fund (EDF) and the Global Partnership for Education (GPE), both managed by UNICEF, include: 1) scaling up the School Improvement Grant (SIG); 2) operationalizing the Teacher Development Information System (TDIS); 3) establishment of Teacher Professional Standards; 4) strengthening capacities of early childhood teachers; and 5) establishment of a Teacher Capacity Development Programme.

During the crisis years Zimbabwe’s education system was severely under-funded and weakened at all levels, resulting in the system’s failure to offer access to quality education to all children. Capacity gaps directly impacting on quality of teaching and learning were evident, particularly related to financial and human resources at school level. While the bottom 10 per cent of schools (in terms of grade 7 results) had funding of US$22 per student, it was US$222 per student among the schools in the top 10 percent. The average 2013 grade 7 pass rate of the bottom 10 percent of schools was 2.2 percent while it was 79.8 percent for the top 10 percent.

During 2014 SIG was scaled up from a pilot reaching 100 schools in 2013 to reaching all the 5,262 primary schools in rural areas nationwide with an average grant of US$4,500 per school. Schools use these funds to repair roofs, purchase furniture and learning materials, and provide WASH facilities. Verification visits confirm spending is consistent with school plans and that these grants are increasing the functionality of schools. UNICEF and partners also supplied all secondary schools (over 2,400) with science kits that will support improved teaching of science.

A major bottleneck to learning, particularly at early grade levels, is poor teaching resulting from weak pedagogical skills and lack of teaching/learning resources. During 2014, the training of an additional 5,000 ECD para-professional teachers was completed while emphasis on early reading and teacher development got a boost through GPE support in its first year of implementation. UNICEF supported translation of the national primary school syllabus into 13
indigenous languages and supplied 42,000 textbooks in two minority languages. ZELA continued to assess early learning and confirmed the positive trend in learning outcomes in the early grades. The Government signalled its commitment to upgrading teacher qualifications with a US$600,000 allocation to the Teacher Development Programme which, in partnership with local universities, will upgrade qualifications of 2,500 teachers in 2015.

**OUTPUT 9:** Strengthened political commitment, accountability and national capacity for evidence-based legislation, planning and budgeting for scaling-up quality and inclusive education.

**Analytical Statement of Progress:**
Major milestones achieved during 2014 include: commencement of the national curriculum review; continued timely updating and release of education data; the first sector performance review in many years, and development of a national school health policy.

A national Education Sector Performance Review, the first in many years, and joint field monitoring mission served to provide insights into the state of the sector and commence planning for the next Education Sector Strategic Plan (ESSP). Realising that the remainder of the current ESSP is only one year, UNICEF has supported MoPSE in its efforts to build a robust analytic base for the development of the 2016-2020 ESSP. Support to strengthen data systems contributed to the timely completion of collection and reporting on EMIS and ZELA as well as the first report on the teacher development information system. The baseline study on learning readiness, early learning and learning gaps at the primary school level that is underway will contribute to more effective pedagogical practice for improved learning opportunities and outcomes.

In order to address concerns over the national curriculum, UNICEF has supported a comprehensive national curriculum review. The process is highly consultative with participation by stakeholders at school, district, provincial and national levels. A priority for 2015 will be to ensure the completion of the curriculum review process and that, to the extent possible, it incorporates stronger focus on technical and vocational education, school health (including HIV/AIDS and Life skills), DRR, and child rights.

The UNICEF-supported peer support programme has trained over 4,500 young peer educators who provided support to vulnerable families and reached 90,000 young people with HIV messages. It is the development of a comprehensive school health policy, now in final draft status, that is a critical milestone for it incorporates a more comprehensive approach to school health that incorporates HIV and AIDS and life skills education.

While progress has been made, a number of critical issues need to be addressed in 2015. The existing Education Act and some sector policies have not been aligned with the 2013 National Constitution and there is need to fast track the new ESSP. Meanwhile, the budgetary framework and fiscal space remain a major concern, with 99 per cent of government education expenditure having gone to employment costs by October 2014. There will be a need to ensure improved efficiency in the use of resources and strengthen capacity to advocate on budget related issues.

**OUTCOME 8** Comprehensive knowledge on HIV and AIDS for in- and out-of-school youth (15-24 years) increased from 53 per cent to 70 per cent, by 2015

**Analytical Statement of Progress:**
HIV prevalence among young people remains a concern: 3.4 per cent for males and 4.2 per cent for females 15-19 years. Most importantly, HIV prevalence jumps significantly to 10.6 per cent among women 20-24 years, while increasing only slightly (3.8 per cent) among young men. Overall, sexual transmission accounts for 82 per cent of all new infections. Young women are particularly at risk, as 15 per cent of 15-19 year old girls/women have sexual relationships with men 10 or more years older. In 2011 (the latest data available), knowledge levels on HIV and AIDS were low for both males and females: comprehensive knowledge of HIV was 46 per cent for females and 42 per cent for males aged 15-19 years. HIV Testing and Counselling (HTC) is an important entry point to HIV prevention, care and treatment, yet only 40 per cent of women and 13 per cent of men (15-19 years) have ever been tested and know their results (DHS 2010/1). Providing comprehensive sexual and reproductive health education and skills and referrals to HIV services is therefore critical to enable young people to reduce their risk of HIV. In addition, adolescents living with HIV (ALWHIV) need knowledge that supports their care and treatment and assists them in not transmitting HIV to others.

**OUTPUT 1:** National education policy includes gender and age appropriate, scientifically accurate and culturally acceptable treatment, knowledge and education on HIV and AIDS.

**Analytical Statement of Progress:**
HIV teaching is mandatory in primary and secondary schools through the Guidance and Counselling Units. However, studies indicate that this does not always take place, particularly as it is not an examinable subject. Instead, children and young people have had to rely on other sources of information, such as the media, friends, and community outreach. Also, the materials in use are out-of-date. The new Lifeskills, Sexuality, and HIV and AIDS Education Strategy provides a clear opportunity to address these gaps with a revised curriculum, up-to-date information, and both school and community-based activities. Through YPWC, a UNICEF global best practice, 4,358 young people conducted HIV-related outreach to schools and communities, reaching over 21,600 people. Some of the organizations implementing YPWC conducted campaigns to mobilize young people to receive HTC, while also providing family planning and referrals for voluntary medical male circumcision (VMMC), CD4 testing and care and treatment. Cumulative figures are still pending; however, one organization reported that its campaigns resulted in 686 people receiving HTC, of whom 101 were young people (15-24 years).

**OUTPUT 3:** School level governance, management and gender analysis is enhanced at all primary and secondary schools

**Analytical Statement of Progress:**
A total of 2,865 school visits were conducted by MoPSE through support from UNICEF’s Education Network Partners (Plan International, World Vision and Save the Children). When extrapolated, this represents slightly over 35 per cent of all schools (assuming that none were visited twice). District officers and supervisors had increased opportunities to visit the schools of their respective areas to provide guidance and collect relevant information for their school monitoring and supervision.

As part of the SIG programme supported by UNICEF, an operational manual to guide schools in the management of SIG funds was developed, pilot tested and finalized. All School Development Committees (SDCs) were trained to develop feasible School Development Plans (SDPs). The SDCs applied the knowledge gained to produce SDPs which were sent to District Education Offices for review before being forwarded to Head Office through Provincial Education Offices.
OUTPUT 5: Enhanced knowledge on education issues and evidence-based sector-wide policy advocacy, strategic planning and management

Analytical Statement of Progress:
Studies undertaken by MoPSE, supported by UNICEF, included the following: (a) ICT Audit, (b) Satellite Schools Study, (c) Study on school dropout and repeaters, (d) Study of the public examinations system, and (e) Secondary textbooks survey. Two additional studies, the SIG pilot baseline survey and the ECD evaluation, were initiated and are still underway. UNICEF’s Education section worked closely with the Center for Collaborative Operational Research and Evaluation (CCORE) and UNICEF’s internal Research and Evaluation Reference Group (REG) to ensure that the quality of the studies met the highest possible standards.

OUTPUT 6: Project support

Analytical Statement of Progress:
All posts successfully filled.


Analytical Statement of Progress:
UNICEF continued to play a lead role in collaborating with the Government and civil society partners towards building the child protection system, which aims to combine coordinated service delivery backed up by enhanced capacity and evidence/data realized through case management, all underpinned by a strengthened regulatory and policy framework. UNICEF’s contributions were duly acknowledged by donors and partners during the Child Protection Fund (CPF) Annual Review in August 2014. An important systems-building progressed towards sustaining the gains made in child-focussed social welfare was achieved with the creation of a dedicated department for child protection, the Department of Child Welfare and Probation Services (DCWPS). In 2014, 108 new social worker posts (16 at Head Office, 20 at province and 72 at district) were filled, creating new opportunities for development of a government-led national child protection system with enhanced decentralized workforce capacity.

A due-diligence assessment for case management (CM) scaling-up was conducted to assess the capacity of partners for national scaling-up and the government has since considered CM as the pivot upon which a national child protection system is to be developed. 55,249 children (24,844 boys / 30,405 girls) received various services in 2014. Rapid review of the caseload in the CM system revealed that only a limited number of child protection cases have been addressed by CM and the overwhelming majority of cases were non-protection cases. Similar findings were also noted when reviewing the ‘child protection’ caseload (i.e. Form 2) referred through the Harmonized Social Cash Transfer (HSCT) programme: less than 10 per cent of those cases were actually child protection violations. One of the recommendations that came out of the CPF Annual Review was to have targeted support for community-based child protection mechanisms such as Ward Child Protection Committees (CPC) and Community Case Workers (CCWs) which aims to address rather limited interventions for demand side of bottlenecks in the national child protection system.
In 2014, all procurement to initiate Management Information System (MIS) for CM has been completed to support national roll-out of the CM system. UNICEF advocated with USAID, Save the Children and UMCOR to jointly support the Government initiative (i.e. CM national roll-out) and as a result the CM roll-out will be able to reach all of 65 districts by end of 2015. The new approach to CM is undoubtedly a stronger approach to child protection and represents progress both conceptually, and also in terms of its place at the centre of a better managed and harmonised system of service provision in which the roles of key stakeholders within and beyond government are clear and agreed. CM will remain to be a core intervention for the supply side of child protection system strengthening.

The HSCT programme has managed to successfully scale up to 20 districts. The programme reached 55,509 households (247,645 household members, 154,008 of whom are children). Two pilots for electronic payment solutions were implemented, with plans for possible expansion to other urban centres subject to the results of the evaluation. The Impact Evaluation of the HSCT is underway and is anticipated to show early outcomes on child well-being. The evaluation, to be concluded by January 2015, will inform strategies on graduation/exit, volume of transfers and advocacy for increasing government investment.

UNICEF and Save the Children jointly financed 75 per cent of the salaries of 17 Diversion Officers based in the Ministry of Justice, Legal and Parliamentary Affairs (MoJLP). The Pre-trial Diversion programme has diverted 366 children (292 boys/ 74 girls) in the four pilot areas which accounts for 67 per cent of eligible children. 3,445 children in contact with the law (2,061 boys/1384 girls) including 140 children with disabilities (127 girls/13 boys) received services through various NGOs supported by UNICEF. Similarly, through UNICEF-assisted NGOs’ interventions, 1,366 children in conflict with the law (1,142 boys/ 224 girls) avoided pre-trial detention or were removed to more protective environments.

As for a determinant of enabling environment, in close collaboration with UN Women, UNICEF supported the MoJLP in efforts to align the existing laws pertinent to rights of children and women to the new Constitution. UNICEF also supported a partnership between MoJLP and NGO to design an interactive civic education for Constitutional awareness programme with young people. This youth-led programme will be implemented in 2015. The survivor friendly version of the Protocol on the Multi-Sectoral Management of Sexual Abuse and Violence was translated into Shona and Ndebele. The verification of the translations was done by the Judicial Service Commissions (JSC) court interpreters to ensure the language used is similar to that of the courts. The Girls and Young Women Empowerment Framework, part of the national response to 2011 Violence against Children Study, was launched by the Government. A study on social determinants of violence against children (VAC) was initiated as well which will inform demand side of bottlenecks (in addressing VAC) and preventive measures.

**OUTPUT 4:** Increased national capacity to provide access to child protection systems, including welfare and justice services that prevent and respond to violence, exploitation, abuse, and neglect.

**Analytical Statement of Progress:**
Case Management (CM) has been adopted by Government as a preferred mechanism for ensuring that child protection services meet the needs of all children. As of December 2014, CM was available in 40 districts accounting for 62 per cent of the national coverage: 11 districts funded by UNICEF/CPF, the remaining with PEPFAR/USAID, and Save the Children Fund
As part of the national roll-out of CM system, 5,440 Community Case Care Workers (CCWs), selected from Ward Child Protection Committee (CPC) are active at village level, supervised by 72 District Social Workers supported by 65 Case Management Officers. Standard CM guidance, tools and training manual have been finalized. This systematic structure has stimulated support from complementary donors (PEPFAR/USAID) for scale-up and the expansion of the workforce.

UNICEF and SCF jointly financed 75 per cent of the salaries of 17 Diversion Officers based in the Ministry of Justice, Legal and Parliamentary Affairs (MoJLPA), while the government covered the remaining 25 per cent. The focus has been sustaining the workforce, strengthening oversight functions of the pre-trial diversion (PTD) National Steering Committee and phased-implementation of the National Institute for Crime Prevention and the Reintegration of Offenders (NICRO) recommendations. Actions taken by the Government include decentralization of the diversion committee for effective turnaround of cases. Joint training of Diversion Officers and Child Welfare Officers is planned to start in December 2014 to synergize child protection services offered by the social welfare and justice sectors.

A bottleneck related to a supply determinant was addressed: legal assistance to children was enhanced by the agreements fostered between the Government and civil society organizations: 3,445 children in contact with the law (2,061M/1,384 F) were reached and 1,366 children in conflict with the law (1,142 M/224 F) avoided pre-trial detention or were removed to more protective environments.

UNICEF continued assisting the government to expand the coverage and reach of various services for vulnerable children using the multi-donor Child Protection Fund (CPF). 55,249 children (24,844 M/30,405 F) received services mainly through NGO partners, including through case management. 82 per cent of case files recorded as meeting minimum national quality standards.

A critical bottleneck of the CPF M&E framework was raised by donors and partners at the CPF Annual Review in August. A review of the M&E framework 'Promising Quality' was commissioned to realign and improve the framework to reflect the diverse ranges of work undertaken by CPF partners and allow for measuring progress on system strengthening.

**OUTPUT 5:** Increased capacities of children and their families to protect themselves and to eliminate practices and behaviours harmful to children.

**Analytical Statement of Progress:**
The Girls and Young Women Empowerment Framework was finalized and launched by the Government in October. The implementation of the Framework will be linked to a high-level Inter-Ministerial Committee on GBV chaired by the MoWAGCD established through the launch of a National Action Plan against Rape and Sexual Violence.

After a series of consultations, UNICEF decided to explore ways to develop suitable tools to address age-specific 'empowerment' tools for girls. Various studies to explore attitudes, practices and social norms around VAC initiated in 2014 including the Social Determinants study (part of the global study led by Innocenti) launched in July 2014; the secondary data analysis of the VACS/NBSLEA in collaboration with ZIMSTAT started in September. All the studies continue into 2015 and will feed into development of adolescent girls empowerment tools (i.e. replacement of "Diary").
A joint work plan was agreed with Ministry of Justice, Legal and Parliamentary Affairs (MJLPA) and a local NGO to design a civic education programme "Children and the Constitution". This partnership produced interactive IEC materials developed with children and educational workshops with children. 3,033 children were reached through 50 local "book teams" led by young people to discuss child rights and child protection. This civic awareness/legal education programme is potentially a scalable model that can be considered in the Ministry of Education curriculum development for primary and secondary schools.

55,509 (247,645 household members, 154,008 of whom are children) enrolled in HSCT. A number of reviews and evaluations (e.g. grievance mechanisms and electronic payments) were jointly planned to inform improvements and address programme weakness identified during the CPF annual review. An impact evaluation is underway and expected to be completed by January 2015. A retargeting of the first phase (10 districts) is set to be completed in January 2015. All of which will significantly contribute to re-thinking of the design of HSCT as well as post-CPF/NAP II scope of work.

OUTPUT 6: Strengthened political commitment, accountability and national capacity to legislate, plan and budget for scaling up interventions that prevent and respond to violence, exploitation and neglect.

Analytical Statement of Progress:
In order to get a better understanding of bottlenecks in the legal aid system, UNICEF supported the Legal Aid Directorate (LAD) to carry out a comprehensive capacity assessment, which was finalized in November 2014. The Assessment will inform the LAD Strategic Plan and help them to prioritize the capacity development process. One of the key areas identified was the record keeping system at decentralized level which, when improved, will be able to contribute greatly to L3 monitoring of the programme.

The NBSLEA response plan has yet to be drafted. The ongoing social determinants study is set to provide more information and qualitative data that will inform further development of the national response plan inclusive of preventive measures.

UNICEF was invited as a steering committee member of Justice Law and Order Sector (JLOS) but had limited engagement structure in 2014. There are opportunities for a common approach to Justice to Children using this platform.

UNICEF is working closely with the MPSLSW to operationalize the statutory instrument for non-public service social workers to provide statutory probation work. This will significantly improve the processing of child protection cases in the courts as well as processing of cases of children in need of care as number of social workers accredited to perform statutory work will significantly increase. UNICEF is also supporting MPSLSW to develop a regulatory framework for para-social workers and community cadres (i.e. CCWs).

The MPSLSW, with support from UNICEF, is piloting a case management MIS in two districts to support case management national scaling-up. The system will help monitor accountability and efficiency of multi-sectoral referral mechanisms for child protection. It will also help MPSLSW and child protection partners to generate decentralized and comparable protection case load analysis on regular basis to see the performance of the child protection services as well as trends in reach/coverage. The information generated by MIS will be critical in monitoring of bottlenecks in supply side of the child protection system.
OUTCOME 13: Improved and equitable use of safe drinking water, sanitation and healthy environments, and improved hygiene practices

Analytical Statement of Progress:

Several strides have been made towards improving access to safe drinking water, sanitation and hygiene practices in rural and urban centres of Zimbabwe. UNICEF supported improvement in the enabling environment, through facilitating adoption of the demand led approach Sanitation Focused Participatory Health and Hygiene Education (SaFPHHE) as per the governments’ National and Hygiene Strategy. A manual on SaFPHHE awaits endorsement by the lead ministry, the Ministry of Health and Child Care. The approach has been cascaded to both UNICEF and government supported districts. MICS, 2014 results show an increase in sanitation coverages (shared and not shared) from 60.3 per cent in 2009 to 61.7 per cent in 2014. Interestingly, 15.1 per cent of the sanitation facilities reported by the MICS, 2014 are upgradable Blair ventilated improved latrines (uBVIP) which were introduced as the lowest tier of acceptable latrines through the new demand led approaches. In urban areas, use of toilet facilities with flush systems connected to the sewer system decreased from 85.2 per cent (MIMS 2009) to 79 per cent (MICS, 2014). The rehabilitation of sewerage systems in urban areas improves the efficiency in the conveyance of waste water to the treatment plants. This means limited blockages and/or spillages and leaks into residential areas thereby improving the sanitation service levels and providing healthy environments for children to play in. UNICEF contributes to trying to halt further deterioration in sanitation systems in Zimbabwe through rehabilitation of the sewer system in 6 urban centres in Zimbabwe.

The use of improved drinking water sources is steadily increasing in Zimbabwe from 72.8 per cent (MIMS, 2009) to 76.1 per cent (MICS, 2014). UNICEF is supporting the rehabilitation of broken down boreholes, rehabilitation of piped water schemes and urban water supplies and the drilling of new boreholes. To date UNICEF has reached 962,000 people in rural areas with safe drinking water through the drilling of new boreholes, rehabilitation of piped water schemes and the rehabilitation of piped water schemes. Further, 162,853 people in urban areas benefitted from the rehabilitation of the water supply systems thus contributing to the positive results.

Hygiene promotion remains a key activity in water and sanitation programmes if health outcomes are to be achieved. The most common indicator for measuring hygiene practice amongst a population is the availability of hand washing facilities with water and soap/ a cleansing agent. However the disposal of children’s faeces shall be used in this instance for comparability. In Zimbabwe, hygiene promotion activities have been rigorously conducted in rural areas. As such, promotional methods and tools to promote good hygiene practices such Participatory Health and Hygiene Education (PHHE), use of community health clubs have been designed and implemented mostly in the rural setting. Consequently, an improvement in hygiene practices is noted in rural areas as compared to urban areas. In rural areas the proportion of children aged 0-2 years whose faeces were disposed of safely increased from 37.8 per cent in 2009(MIMS, 2009) to 46.9 per cent in 2014 (MICS,2014). UNICEF is contributing to the results through hygiene education in communities during triggering sessions for open defecation free villages and supporting hygiene promotion activities in the schools – with school children being agents of change.

The deterioration of urban sanitation infrastructure as discussed above has affected the way
households dispose of children’s faeces. The proportion of children aged 0-2 years whose faeces were disposed of safely in urban areas decreased from 94.1 per cent in 2009 to 86 per cent in 2014. In response UNICEF supported the Government of Zimbabwe in the development of the Urban Hygiene Promotion guidelines, which aim to direct hygiene promotion activities in urban areas. UNICEF is also supporting hygiene promotion in 14 urban centres in order to improve hygiene practices among the urban population. Other stakeholders supporting the WASH sector in urban centres include GIZ, African Development Bank and World Vision.

OUTPUT 3: 10,000 rural communities and 1,500 primary schools in 30 cholera prone districts are using improved sanitation facilities by December 2015.

Analytical Statement of Progress:
According to PICES 2011/12, only 58.6 per cent of the rural population has access to a sanitation facility and 41.4 per cent practise open defecation. The National Hygiene and Sanitation Strategy launched in 2012 targets (among other issues) the elimination of open defecation. The pilot of the Community Approaches to Total Sanitation (CATS) in Hwange and Binga was completed and CATS has been scaled up to 31 additional districts.

Sanitation focused Participatory Health and Hygiene Education (SafPHHE) aims to promote demand led sanitation for the elimination of open defaecation. UNICEF supported training-of-trainers (ToTs) for 280 facilitators from provincial and district level who will train and coach district extension workers who will be responsible for rolling out SafPHHE to the communities.

Five schools completed the construction of school latrine blocks each with 10 squat holes in Chiredzi, Chipinge and Mhondoro districts. In addition, WASH facilities in 520 schools in five districts is at various stages of construction. A total of 300 schools have been targeted for completion in 2014.

OUTPUT 4: 10 urban centres and 20 growth points are using improved sanitation facilities by December 2015.

Analytical Statement of Progress:
Although access to urban sanitation is reported to be at 98 per cent (PICES 2011/12), the World Bank Service Level Benchmarking 2013 revealed that the coverage of sewerage network services is on average 67 per cent and the efficiency in collection of sewage is only 37 per cent, posing a serious health hazard as sewerage flows in open drains and storm drains. This is mainly due to a combination of an ageing sewerage system, sewer system blockages as a result of limited water flowing through the pipes resulting in hardening of waste, and the mushrooming of illegal onsite sanitation facilities such as septic tanks in unapproved residences. The rehabilitation of the urban sewer system contributes to the reduction in the risk water and sanitation related diseases. UNICEF provided over 6,000 people with increased access to basic sanitation through rehabilitation of sewage collection system in two urban centres (Masvingo and Zvishavane). The contracting process for rehabilitation of sanitation infrastructure in six additional urban centres (Bindura, Chipinge, Chiredzi, Karoi, Rusape, and Shurugwi) was completed and rehabilitation work has commenced. The rehabilitation is expected to benefit 172,233 people.

OUTPUT 5: 3,000 rural communities, 14 urban centres, and 1,300 schools in 33 districts and population (men, women and children) affected by emergencies have access to improved and sustainable drinking water services by December 2015.
Analytical Statement of Progress:

A total of 3,571 communities in 33 rural districts received access to improved sources of drinking water during the 2014 period benefiting an estimated 810,270 additional people (198,212 male, 242,424 female, 369,634 children). This was through the drilling of 231 new boreholes, rehabilitation of 3,324 boreholes and 16 piped water schemes. This brings to date a cumulative 962,000 people that have been reached with safe drinking water. The efforts of drilling and rehabilitation are being complimented by training of Water Point Committees and Village Pump mechanics to ensure sustainability in the operation and maintenance of the infrastructure. A total of 5,414 Water Point Committees and 1,215 Village Pump Mechanics have been trained to date.

Rehabilitation works of the water supply system in 6 urban centres are complete. A total of 23,115 people (10,884 male and 12,231 female) have gained access to safe water while the service level for water supply has improved for 139,738 people (66,253 male and 73,485 female). Contract adjudication for the rehabilitation of water supply systems is complete for the first 7 urban centres targeted under Phase 1 in the Small Towns WASH Programme (STWP). Site hand over has been done in Mvurwi and Mutoko and contractors have started mobilization.

Contingency PCAs were signed with 5 NGOs and standby contracts were agreed upon with 2 private companies for water trucking and provision of emergency sanitation services. These arrangements enabled UNICEF to reach 17,415 people in Chingwizi Camp who were affected by floods with safe drinking water. In addition, UNICEF and partners supported the drilling of 33 boreholes in Chingwizi. UNICEF also supplied about 10,000 litres of water to the clinic until August 2014.

Challenges experienced in water supply include limited drilling capacity in country. This has necessitated for the programme to devise ways in which other players can be contracted to drill boreholes albeit with increased monitoring to ensure that standards are maintained. In urban water supply, the initial tender process resulted in bids higher than the available budget as a result reprioritisation of the rehabilitation works was done and then retendered.

OUTPUT 6: 3,000 rural communities, 14 urban centres, and 1,300 schools in 33 districts, and population (men, women and children) affected by emergencies have access to improved sanitation services by December 2015.

Analytical Statement of Progress:

A total of 13 communities have been declared open defaecation free (ODF) while 24 villages await verification. Implementation of sanitation in 2014 focused on strengthening the capacity of the community based structures and extension workers on community mobilization for demand led sanitation. Trainings on SaFPHHE were conducted for 206 district level facilitators, 1,477 extension workers, 4,569 Sanitation Action Groups (SAGs) and 2,338 Community Health Clubs (CHCs). These structures drive demand led sanitation at grass root levels. As a result, 4,747 rural communities were triggered. A total of 4,322 households have constructed latrines without subsidy, while 2,219 have been aided with subsidies. The latrines are benefiting over 32,700 people.

The completed rehabilitation works done on the sewerage system in Bindura, Chipinge, Chiredzi, Karoi, Plumtree, Rusape and Shurugwi under the last phase of the ER&RR programme have improved sanitation services for 102,667 people in the 7 urban centres. The
contracting phase for the rehabilitation of sewerage systems in 7 urban centres under the STWP is complete and contractors are mobilizing for the works.

Improving access to WASH services in schools remains a priority in order to realize education outcomes especially in relation to girl’s education. Sex separated school latrines and hand washing facilities were provided in 380 schools during the reporting period. To date 572 schools in 33 districts have constructed latrines benefiting an estimated 191,290 pupils (95,194 boys and 96,096 girls) with improved sanitation and hygiene facilities.

In response to the humanitarian situation in Chingwizi, UNICEF supported the construction of 471 temporary latrines in the Chingwizi camp benefiting 17,415 people affected by floods. In addition partners supported the construction of latrines in the new areas where the displaced people were relocated by government. Oxfam supported the construction of 300 Upgradeable Blair Ventilated Improved Pit Latrine (UBVIP), while CRS supported 250 Blair Ventilated Improved Pit Latrine (BVIP) at household level. CRS also provided school block latrines in 4 schools while Save the Children constructed an Ottoway pit at the new clinic site.

Demand led sanitation requires behaviour change and community action in order to achieve open defaecation free villages. Uptake of sanitation interventions is therefore relatively slow but it is taking root in the targeted villages. In urban areas, the rehabilitation of the sewerage system was affected by the tender process where bid offers received were higher than the available budget, necessitating reprioritization of the works to be done and re-tendering.

OUTPUT 7: 3,000 rural communities, 14 urban centres, and 1,300 schools and have adequate knowledge and skills on critical hygiene practices by December 2015.

Analytical Statement of Progress:
Community mobilization continued heavily during the report period in 33 districts. The triggering process in 4,747 rural communities resulted in reaching an estimated population of 839,200 with key hygiene messages. Sanitation Action Groups (SAGs) and Community Health Clubs (CHCs) played a key role in educating communities on good hygiene practices. These messages translated into 6,541 households constructing latrines and 13 villages being declared open defaecation free while 24 await certification as reported earlier.

School health clubs which form the vehicle for hygiene promotion activities in schools have been formed/ strengthened in 918 schools reaching approximately 459,000 students. A total of 1,271 school teachers have been trained to champion hygiene promotion activities in the schools. A total of 600 school development committees have also been trained on hygiene promotion so as to create an enabling environment for positive behaviour change within the school environment. With the trained manpower, each school therefore works to develop adequate knowledge, attitudes and skills on hygiene through life skills-based hygiene education and child participation. The hygiene education seeks to instil hygiene practices into the children’s daily lives, helping them acquire the knowledge of appropriate hygiene behaviours and the skills to use them. Engaging families and communities ensures that children apply their knowledge at home and promote their newly acquired hygiene skills and potentially be effective agents of change within their homes and communities.

Hygiene promotion activities in urban centres are yet to commence. PCAs have been signed and implementation has just started with most partners currently still in the inception phase of implementation.
In addition to water and sanitation supplies received in Chingwizi camp, 17,415 people in the camp also reached with hygiene messages and NFI materials distributed by partners and UNICEF.

UNICEF supported celebrations to mark the commemorations for two international events (Global Hand washing Day and World Toilet Day) and one national event (the National Sanitation Week). The commemorations were hosted in Chimanimani district under the theme "Community Driven Sanitation plus Hand Washing with Soap Equals a Healthy Zimbabwe". The theme aimed to emphasize the demand led approach to sanitation which has been adopted by the country. The event which was attended by government, private sector, civil society attracted over 4,000 participants. In addition, hygiene messages were sent to an estimated 7 million through SMS.

OUTPUT 8: Enabling policy, financial, and institutional environment is strengthened for provision of equitable access to improved WASH services (WASH General).

Analytical Statement of Progress:
All WASH activities continue to be guided by the gender sensitive National Water Policy and the National Sanitation and Hygiene Strategy which are in place. In addition, UNICEF supported the development of the Sanitation Focused Participatory Health and Hygiene Education manual to guide the roll out of demand led sanitation and the Urban Hygiene Promotion guidelines to direct hygiene promotion activities in urban areas in Zimbabwe. The manual and guidelines await endorsement by the Ministry of Health and Child Care. In addition, African Ministers' Council on Water (AMCOW) is launching a consultancy in four countries, including Zimbabwe, to develop and support sanitation and hygiene policies, strategies, implementation plans and financing strategies. UNICEF will support this initiative to address bottlenecks in sanitation.

Rural WASH Information Management System (RWIMS) pilot is complete and a National Stakeholder Meeting was convened to adopt the approach. Procurement of services for the implementation of Village Based Consultative Inventory (VBCI) is in progress. Readiness assessment for VBCI in all the districts is complete. Scaling up of the process to 33 districts is set to begin in January 2015. The inventory process which was initially paper based has been upgraded into a mobile-web system to improve efficiency in data collection, entry and analysis. This information system will serve to provide those responsible for planning, implementing, managing and monitoring WASH services with relevant, reliable and up-to-date data on water and sanitation coverage.

The National Coordinators meeting was held in November 2014 to review sector progress in urban and rural subsectors. This meeting was attended by all WASH stakeholders, i.e. government, civil society and the private sector. Sector review platforms help monitor progress of the various programmes in the subsectors and provide a lessons sharing platform. The WASH Cluster was successfully transitioned into a government led, WASH Coordination and Information Sharing Forum (WCISF). The WCISF, which is led by the WASH National Coordination Unit (NCU) meets monthly. UNICEF together with the Ministry of Environment Water and Climate continues to convene and coordinate the Urban WASH technical working group. This working group reports to the urban NAC sub-committee on a quarterly basis.

The rural wash project baseline is complete and findings have been disseminated to all stakeholders. The results are being used in the various districts to guide WASH interventions. The document is currently however being edited by a professional editor for endorsement by the NAC Rural Chair. The Small Towns Baseline Survey is set to commence in January 2015.
OUTPUT 9: Project support - salaries

Analytical Statement of Progress:

All critical staff posts were filled to facilitate full implementation of programme activities.

OUTCOME 14: 70 per cent of HH practice safe hygiene and sanitation as well as sanitation security, and contribute to disaster risk reduction, by 2015.

Analytical Statement of Progress:
The percentage of the population practicing open defecation (OD) decreased from 2009 (33 per cent) to 2012 (27.4 per cent) as a result of continuous hygiene promotion activities (Communication for Development), the new government sanitation and hygiene strategy that emphasizes demand-led sanitation, and low cost sanitation solutions for the poor (the upgradable Blair Ventilated and Improved Pit latrine or uBVIP).

The CATs and uBVIP technology were evaluated and recommended for scale up to eliminate open defecation. UNICEF is supporting ToTs on CATS, now dubbed Sanitation-focused Participatory Health and Hygiene Education (SafPHHE). The roll out of SafPHHE in 31 additional districts is set to ensure that 1,140,000 people are using adequate sanitation facilities.

National Urban Hygiene Promotion guidelines aimed at tackling OD in urban centres (among other hygiene issues) were developed and adopted by the Urban WASH sub-committee of the National Action Committee (NAC).

Over 27,000 people affected by emergencies were reached with WASH services. UNICEF continued to have partnerships with four NGOs (Action Contre la Faim, German Agro Action, Mercy Corps, and Oxfam GB) which are members of the Environmental Health Alliance (EHA), a consortium of NGOs focusing on emergency response and early recovery.

OUTPUT 1: All women, girls, boys and men in 10,000 rural communities are reached with appropriate hygiene messages on safe water collection, storage and point of source treatment; proper maintenance and use of latrines; and hand washing with soap.

Analytical Statement of Progress:
In order to raise awareness and promote safe hygiene practices, a combined National Sanitation Week and Global Hand Washing Day commemoration was successfully held in one province (Mashonaland East). A total of 3,000 people (7 communities) attended the event. Hygiene messages reached about 7 million people through the SMS platform of a popular mobile network service provider and IEC material. Non-food items (NFIs) such as soap were distributed to 102 schools to benefit over 50,000 school children.

OUTPUT 2: All women, girls, boys and men in 10 urban centres and 20 growth points are reached with appropriate hygiene messages on safe water collection, storage and point of source treatment; proper maintenance and use of latrines; and hand washing with soap.

Analytical Statement of Progress:
Over 160,000 people in 7 urban centers (Bindura, Chipinge, Chiredzi, Karoi, Plumtree, Rusape and Shurugwi) were reached with messages on safe hygiene practices through various...
activities such as establishing and strengthening health and school clubs, hygiene promotion sessions, road-shows, and clean-up campaigns, including special sessions for people living with disabilities. The impact of the messages will be evaluated by project surveys and an end of project evaluation.

**OUTPUT 3:** Affected populations are provided with emergency safe water and sanitation services as per CCC.

**Analytical Statement of Progress:**
UNICEF continued to have partnerships with four NGOs (Action Contre la Faim, German Agro Action, Mercy Corps, and Oxfam GB) which are members of the Environmental Health Alliance (EHA), a consortium of NGOs focusing on emergency response and early recovery.

Under the framework of the EHA, UNICEF supported distribution of NFIs including water treatment tablets, soap, oral rehydration solution (ORS) and IEC material (benefitting approximately 27,000 people), as well hygiene promotion among the people affected by or at risk of diarrheal diseases and cholera in 12 districts.

In addition, UNICEF continued to rely on the good multi-sector collaboration of the Ministry of Environment, Water and Climate Change and the Ministry of Health and Child Care through the National Action Committee to jointly address humanitarian issues related to WASH-diseases.

**OUTPUT 4:** Project support.

**Analytical Statement of Progress:**
All critical staff posts were filled to facilitate full implementation of programme activities.

**OUTCOME 15:** An enabling policy, legislative and budgetary environment created to ensure the provision of equitable water and sanitation services, with focus on the most disadvantaged populations by 2015.

**OUTPUT 1:** Comprehensive gender-sensitive WASH policy reviewed and strategy developed and implemented in line with the revised policy.

**Analytical Statement of Progress:**
As noted, the National Water Policy was launched, providing an important legislative framework for WASH activities. In addition, UNICEF supported implementation of the Sanitation and Hygiene Strategy through piloting the demand-led approach to sanitation dubbed “community approaches to total sanitation” (CATS) and the upgradable Blair Ventilated and Improved Pit (uBVIP) latrine. The CATS approach and the uBVIP technology were subsequently evaluated and found to be appropriate in Zimbabwe as they have the ability to increase sanitation coverage and reduce the percentage of people practicing open defecation. The evaluation recommended the use and scale up of CATS and uBVIP technology.

National Urban Hygiene Promotion guidelines, supported by UNICEF, were adopted by the Urban WASH sub-committee of NAC. The guidelines await approval from government.
## Evaluation

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## Other Publication

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## Lessons Learned

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