Zimbabwe

Due to drought, some 924,000 people in Zimbabwe, including 443,520 children, are currently experiencing food and nutrition insecurity. This figure is projected to rise to 1.5 million during the peak lean season (January–March 2016), representing a rise of 160 per cent compared with the 2013–2014 peak hunger season. Current forecasts for the early stages of the rainy season (November 2015–March 2016) are unfavourable. The El Niño weather phenomenon is expected to extend into early 2016, which, due to two consecutive seasons of poor rainfall, will likely result in a reduced second harvest and the further deterioration of the food and nutrition situation of women and children. An assessment conducted in May 2015 reported that 2.3 per cent of children aged 6 to 59 months were suffering from severe acute malnutrition (SAM), up from 1.5 per cent the previous year. This prevalence rate is likely to increase in 2016. Women and girls also face a heightened risk of protection concerns and loss of education due to socioeconomic roles.

Zimbabwe also faces high levels of vulnerability to other shocks, such as diarrhoeal diseases, flooding, displacement and the unstable political and socioeconomic situation.

Humanitarian strategy

In 2016, UNICEF will continue to support the Ministry of Health and Child Care to provide access to life-saving essential health services, strengthen community-based management of SAM and reach children with critical water, sanitation and hygiene (WASH) services to prevent illness. The Ministry of Education will be supported to provide access to quality education in emergencies. UNICEF will continue to strengthen community-based social protection mechanisms for food insecure and labour-constrained households through the Harmonized Social Cash Transfer Programme, which has been demonstrated to improve household food security outcomes. UNICEF will work to improve child protection mechanisms to protect the most vulnerable children, particularly girls, from violence, abuse and exploitation. The capacity of national child protection systems will be strengthened to provide timely and appropriate response. Communication for Development will continue to be used as a cross-cutting approach to achieving programme results in all sectors. UNICEF will also continue to support the coordination of government-led sectors in WASH, nutrition, education and child protection. This will include strengthening preparedness for and response to emergencies.

Complementary support will be provided through ongoing programmes, thereby fostering a sustained engagement between humanitarian and development activities.

Results from 2015

As of 31 October 2015, UNICEF had received US$2,209,000 to respond to emergencies in 2015. Throughout the year, UNICEF’s response focused on delivering life-saving assistance to populations affected by drought, floods, diarrhoeal disease outbreaks, including cholera, and displacement, following xenophobic attacks in South Africa. UNICEF supported nearly 40,000 people with access to safe water through the drilling of boreholes, emergency water trucking and hygiene promotion. Through the Community Management of Acute Malnutrition Programme, UNICEF distributed ready-to-use therapeutic foods that treated 14,338 children. In partnership with the Ministry of Education, UNICEF supported 6,878 children with teaching and learning materials and trained 108 teachers to provide quality education that adequately responds to the needs of children affected by emergencies.

Through the Harmonized Social Cash Transfer Programme, UNICEF reached 18,240 households in five food insecure districts and supported the protection of vulnerable children, particularly girls, from violence, abuse and exploitation.

### Humanitarian Action for Children

**Total affected population:** 1.5 million
**Total affected children (under 18):** 720,000
**Total people to be reached in 2016:** 332,900
**Total children to be reached in 2016:** 109,000

### 2016 programme targets

**Health and nutrition**
- 20,400 children aged 6 to 59 months in humanitarian situations affected by SAM admitted to community-based management programmes
- 104,863 children under 5 years provided with micronutrient supplementation
- 25,000 children with diarrhoeal diseases accessed life-saving curative interventions, including oral rehydration therapy and zinc

**WASH**
- 130,000 people affected by emergencies provided with access to safe water as per agreed standards
- 161,000 people affected by emergencies provided with critical WASH-related information to prevent child illness, especially diarrhoea

**Child protection**
- 10,000 vulnerable boys, girls and adolescents provided with child protection services

**Social protection**
- 73,000 vulnerable families benefitted from social cash transfers

**Education**
- 25,000 school-aged children, including adolescents, accessed quality education (including through temporary structures)
Who to contact for further information:

<table>
<thead>
<tr>
<th>Name</th>
<th>Position/Office</th>
<th>Tel</th>
<th>Email</th>
</tr>
</thead>
<tbody>
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</tbody>
</table>

Results are through 31 October 2015 unless otherwise noted.

*The results shown for social cash transfers are bi-monthly payment cycles implemented between January 2015 and 31 October 2015.

**The limited results are due to a humanitarian programme for a flood-displaced population that was extended into 2016.

**Funding requirements**

UNICEF is requesting US$12,176,545 to meet the humanitarian needs of children in Zimbabwe in 2016. Without additional funding, UNICEF will be unable to continue to respond to the protracted drought situation or other humanitarian needs with critical health, nutrition, WASH, education and child protection services. Interventions will focus on supporting vulnerable and disadvantaged women and children to withstand, adapt to and recover from emergencies.

<table>
<thead>
<tr>
<th>Sector</th>
<th>2016 requirements (US$)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health and nutrition</td>
<td>1,864,000</td>
</tr>
<tr>
<td>Water, sanitation and hygiene</td>
<td>1,600,000</td>
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<tr>
<td>Child protection</td>
<td>712,545</td>
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<tr>
<td>Social protection</td>
<td>7,100,000</td>
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<tr>
<td>Education</td>
<td>800,000</td>
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<tr>
<td>Sector coordination</td>
<td>100,000</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>12,176,545</strong></td>
</tr>
</tbody>
</table>

1Zimbabwe Vulnerability Assessment Committee, ‘Rural Livelihoods Assessment’, 2015.

2Ibid.

3The Harmonized Social Cash Transfer Programme process evaluation conducted in 2014 highlighted that almost half (43 per cent) of the monthly cash payments were used to buy food.